

11235881

MR ASHISH KUMAR

8/19/2023 9:26:51 AM

33 Years

Male

Rate 69 . Sinus rhythm.....normal P axis, V-rate 50- 99

PR 160

QRSD 89

QT 362

QTc 388

--AXIS--

P 36

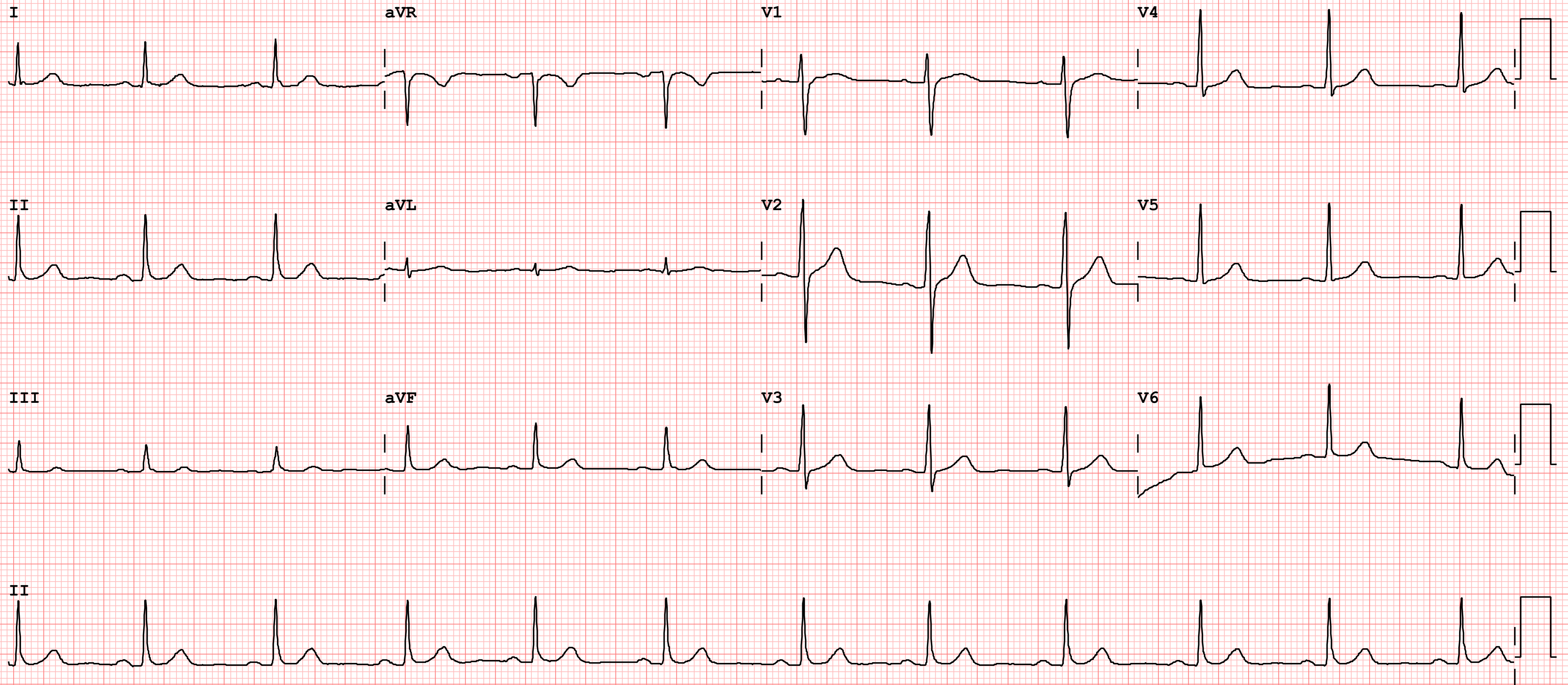
QRS 58

T 47

- NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

100B CL

P?

Human Care Medical Charitable Trust

Registered Office: Sector-6, Dwarka, New Delhi 110 075

Department Of Laboratory Medicine

Name : MR ASHISH KUMAR SINGH **Age** : 33 Yr(s) Sex :Male
Registration No : MH011235881 **Lab No** : 31230800763
Patient Episode : H03000055684 **Collection Date** : 19 Aug 2023 08:52
Referred By : HEALTH CHECK MHD **Reporting Date** : 19 Aug 2023 12:55
Receiving Date : 19 Aug 2023 10:52

Department of Transfusion Medicine (Blood Bank)

BLOOD GROUPING, RH TYPING & ANTIBODY SCREEN (TYPE & SCREEN)
Specimen-Blood

Blood Group & Rh Typing (Agglutination by gel/tube technique)

Blood Group & Rh typing O Rh(D) Positive

Antibody Screening (Microtyping in gel cards using reagent red cells)

Cell Panel I NEGATIVE
Cell Panel II NEGATIVE
Cell Panel III NEGATIVE
Autocontrol NEGATIVE

Final Antibody Screen Result Negative

Technical Note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique. Antibody screening is done using a 3 cell panel of reagent red cells coated with Rh, Kell, Duffy, Kidd, Lewis, P, MNS, Lutheran and Xg antigens using gel technique.

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-----END OF REPORT-----



Dr Himanshu Lamba

Human Care Medical Charitable Trust

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Department Of Laboratory Medicine

Name : MR ASHISH KUMAR SINGH **Age** : 33 Yr(s) Sex :Male
Registration No : MH011235881 **Lab No** : 32230807042
Patient Episode : H03000055684 **Collection Date** : 19 Aug 2023 08:51
Referred By : HEALTH CHECK MHD **Reporting Date** : 19 Aug 2023 11:19
Receiving Date : 19 Aug 2023 09:25

BIOCHEMISTRY

Specimen: EDTA Whole blood

HbA1c (Glycosylated Hemoglobin) 5.8 % [4.0-6.5]
As per American Diabetes Association (ADA) 2010
HbA1c in %
Non diabetic adults : < 5.6 %
Prediabetes (At Risk) : 5.7 % - 6.4 %
Diabetic Range : > 6.5 %
Methodology High-Performance Liquid Chromatography (HPLC)
Estimated Average Glucose (eAG) 120 mg/dl

Use :

1. Monitoring compliance and long-term blood glucose level control in patients with diabetes.
2. Index of diabetic control (direct relationship between poor control and development of complications).
3. Predicting development and progression of diabetic microvascular complications.

Limitations :

1. A1C values may be falsely elevated or decreased in those with chronic kidney disease.
2. False elevations may be due in part to analytical interference from carbamylated hemoglobin formed in the presence of elevated concentrations of urea, with some assays.
3. False decreases in measured A1C may occur with hemodialysis and altered red cell turnover, especially in the setting of erythropoietin treatment

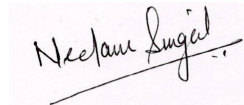
References : Rao.L.V., Michael Snyder.L. (2021). Wallach's Interpretation of Diagnostic Tests. 11th Edition. Wolterkluwer. Nader Rifai, Andrea Rita Horvath, Carl T. Wittwer.

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-----END OF REPORT-----



Dr. Neelam Singal
CONSULTANT BIOCHEMISTRY



NAME	MR Ashish KUMAR SINGH	STUDY DATE	19/08/2023 9:10AM
AGE / SEX	33 y / M	HOSPITAL NO.	MH011235881
ACCESSION NO.	R5976061	MODALITY	US
REPORTED ON	19/08/2023 11:35AM	REFERRED BY	Health Check MHD

USG WHOLE ABDOMEN

Results:

Liver is normal in size (13.9cm) **and shows grade I fatty changes**. No focal intra-hepatic lesion is detected. Intra-hepatic biliary radicals are not dilated. Portal vein is normal in calibre.

Gall bladder appears echofree with normal wall thickness.
Common bile duct is normal in calibre.

Pancreas is normal in size and echopattern.

Spleen is normal in size (10.5 cm) and echopattern.

Both kidneys are normal in position, size (RK = 93 mm and LK =98 mm) and outline. Cortico-medullary differentiation of both kidneys is maintained. No focal lesion or calculus seen. Bilateral pelvicalyceal systems are not dilated.

Urinary bladder is partially distended.

Prostate is normal in size, shape and echopattern. It measures 20.3cc in volume.

No significant free fluid is detected.

Kindly correlate clinically

Dr. Divya Jain MBBS, DNB DMC No.7955

ASSOCIATE CONSULTANT

*******End Of Report*******



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Human Care Medical Charitable Trust



Sector-6, Dwarka, New Delhi 110 075

GST: 07AAAAH3917LIZM

PAN NO: AAAAH3917L

NAME	MR Ashish KUMAR SINGH	STUDY DATE	19/08/2023 10:04AM
AGE / SEX	33 y / M	HOSPITAL NO.	MH011235881
ACCESSION NO.	R5976062	MODALITY	CR
REPORTED ON	19/08/2023 9:51AM	REFERRED BY	Health Check MHD

X-RAY CHEST - PA VIEW

Results:

Visualized lung fields appear clear.

Both hilar shadows appear normal.

Cardiothoracic ratio is within normal limits.

Both hemidiaphragmatic outlines appear normal.

Both costophrenic angles are clear.

Kindly correlate clinically.

Dr. Roly Srivastava MBBS, DNB DMC No.45626

CONSULTANT RADIOLOGIST

*****End Of Report*****



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