


SADGURU PATHOLOGY LABORATORY

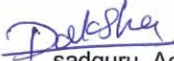
Patient ID	: 015	UHID No.	: MEDIWHEEL
Patient Name	: MR. PRASHANT V JADHAV	Regn/Sample Date	: 01-Mar-2022 09.56 AM
Age / Sex	: 49 Years / Male	Report Date	: 01-Mar-2022 01.10 PM
Referred By	: DR.SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 1 5 *

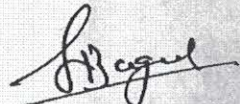
COMPLETE BLOOD COUNT


Investigation	Result	Unit	Bio. Ref. Range
Haemoglobin (HB)	13.8	gm/dl	13-18
RBC	5.12	10 ⁶ /uL	4.7-6.0
PCV	43.2	%	42-52
MCV	84.4	fl	70-100
MCH	27.0	pg	27-31
MCHC	31.9	g/dl	32-36
RDW-CV	13.0	%	11.5-14.5
Platelet count	333000	/cumm	150000-450000
Total Leucocytes Count	8700	/cumm	4000-11000
DIFFERENTIAL LEUCOCYTES COUNT			
Neutrophils	58	%	44-76
Lymphocytes	37	%	20-40
Monocytes	02	%	2-10
Eosinophils	03	%	1-6
Basophils	00	%	0-2

END OF REPORT




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Dr. Pravin Bagul
(MD Path
Consulting Pathologist)

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HAEMATOLOGY.

Investigation	Result
BLOOD GROUP ABO & RH TYPING (EDTA Whole Blood)	
Blood group (ABO Typing)	O
RhD Factor (Rh typing)	POSITIVE
Method	Manual Slide Hemagglutination
Note	Kindly recheck Blood Group before blood transfusion
ESR (Wintrobe) (EDTA Whole Blood)	08 mm/1hr. 0-9

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Age / Sex	: 49 Years / Male	Report Date	: 01-Mar-2022 01.10 PM
Referred By	: DR.SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	

LIVER FUNCTION TEST

Investigation	Result	Unit	Bio. Ref. Range
LIVER FUNCTION TEST			
SGOT (AST) (Serum,IFCC)	30.0	U/L	Upto 40
SGPT (ALT) (Serum,IFCC)	28.5	U/L	Upto 40
Bilirubin-Total (Serum,Diazo)	0.90	mg/dL	0.1-1.2
Bilirubin-Direct (Serum,Diazo)	0.40	mg/dL	0.0-0.5
Bilirubin- Indirect	0.50	mg/dL	0.1-1.0
Alkaline Phosphatase (Serum, ALP-AMP)	147.5	U/L	54-306
Total Protein (Serum, Modified Biuret)	6.40	g/dl	6.0-8.5
Albumin (Serum,Bromocresol green)	3.80	g/dl	3.0-5.4
Globulin	2.60	g/dl	1.8-3.6
A/G Ratio (Calculated)	1.46		1.1-2.2

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




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Referred By	: DR.SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	

BIOCHEMISTRY

Investigation	Result	Unit	Bio. Ref. Range
Fasting Blood Glucose (Plasma-F,GOD-POD)	82.0	mg/dL	60-110
Parallel Urine Glucose	NIL		
Sr. Creatinine (Serum,Picrate Alcalin)	1.00	mg/dL	0.5-1.3
Gamma GT (GGTP) (Serum, Enzymatic)	20.4	U/L	9-36
Sr. Uric Acid (Serum, Uricase Peroxidase)	4.3	mg/dL	3.5-7.2
BLOOD UREA NITROGEN (BUN)			
Sr. Blood Urea (Serum,Urease)	24.4	mg/dL	10-50
BUN-Blood Urea Nitrogen	11	mg/dL	8-23

Remark : In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

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


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Age / Sex : 49 Years / Male	Report Date : 01-Mar-2022 01.10 PM
Referred By : DR.SADGURU HOSPITAL	Sample Type : SERUM
	Barcode 

LIPID PROFILE

Investigation	Result	Unit	Bio. Ref. Range
Nature Of Sample (Serum, Enzymatic)	Fasting		
Serum Cholesterol -Total	178.4	mg/dL	Desirable - Upto 200 Borderline High - 200-239 High - Above 240
Serum Triglycerides	145.1	mg/dL	Normal: Below 150 Borderline High :150-199 High : 200-499 Very High : >= 500
HDL Cholesterol	46.6	mg/dL	Major risk factor for heart disease: < 40 Negative risk factor for heart disease: >=60
LDL Cholesterol	103	mg/dL	Optimal: < 100 Near Optimal/Above Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >= 190
VLDL Cholesterol	29	mg/dL	6-38
CHOL/HDL Ratio	3.83	Ratio	0-4.5
LDL / HDL Ratio	2.2	Ratio	1.5-3.5

Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

VLDL,CHOL/HDL Ratio, LDL/HDL Ratio, LDL Cholesterol,serum, are calculated parameter

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


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Patient ID	: 015	UHID No.	: MEDIWHEEL
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Age / Sex	: 49 Years / Male	Report Date	: 01-Mar-2022 01.10 PM
Referred By	: DR.SADGURU HOSPITAL	Sample Type	: URINE
		Barcode	 * 0 1 5 *

REPORT ON URINE ROUTINE

Investigation	Result
Specimen Name	Urine
PHYSICAL EXAMINATION	
Nature of specimen	Random
Colour	Pale Yellow
Transparency (Appearance)	Clear
Reaction (pH)	Acidic
Quantity	20 ml
Deposits	Absent
Specific Gravity	1.020
CHEMICAL EXAMINATION	
Urine Protein (Albumin)	Absent
Urine Glucose (Sugar)	Absent
Urine Ketones (Acetone)	Absent
Bile pigments	Absent
MICROSCOPIC EXAMINATION	
Red blood cells	Not Seen
Pus Cells (WBCs)	1-2/hpf
Epithelial cells	1-2/hpf
Crystals	Not seen
Cast	Not seen
Bacteria	Absent

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



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SADGURU PATHOLOGY LABORATORY


Patient ID	: 015	UHID No.	: MEDIWHEEL
Patient Name	: MR. PRASHANT V JADHAV	Regn/Sample Date	: 01-Mar-2022 09.56 AM
Age / Sex	: 49 Years / Male	Report Date	: 01-Mar-2022 02.11 PM
Referred By	: DR.SADGURU HOSPITAL	Sample Type	: PLASMA PP
		Barcode	

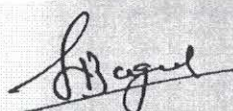
BIOCHEMISTRY

Investigation	Result	Unit	Bio. Ref. Range
Postmeal Blood Glucose (Plasma-PM,GOD-POD)	154.5	mg/dL	Upto 140
Parallel Urine Glucose	SNR		

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Dr. Pravin Bagul
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Patient ID	: 015	UHID No.	: MEDIWHEEL
Patient Name	: MR. PRASHANT V JADHAV	Regn/Sample Date	: 01-Mar-2022 09.56 AM
Age / Sex	: 49 Years / Male	Report Date	: 01-Mar-2022 01.10 PM
Referred By	: DR.SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	

BIOCHEMISTRY.


Investigation	Result	Unit	Bio. Ref. Range
HbA1C	6.1	%	Non-diabetic: \leq 5.8 Pre-diabetic: 5.9-6.4 Diabetic: \geq 6.5
Mean Blood Glucose level	128	mg/dL	
Method	Nephelometry		

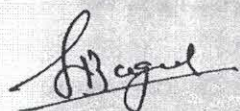
INTERPRETATION :

- 1] HbA1c is used for monitoring diabetic control . It reflects the estimated average glucose (eAG) .
- 2] HbA1c has been endorsed by clinical groups & ADA(American Diabetes Association) guidelines 2012 , for diagnosis of diabetes using a cut- off point of 6.5%. ADA defined biological reference range for HbA1c is 4% - 6%. Patient with HbA1c value between 6.0% to 6.5% are considered at risk for developing diabetes in the future .
- 3] Trends in HbA1c are a better indicator of diabetes control than a solitary test .
- 4] In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 % , Fair to Good Control - 7 to 8 % , Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .

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




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Dr. Pravin Bagul
(MD Path
Consulting Pathologist)



Patient Name : Mr. Prashant V. Jadhav
Age/Sex : 49 Years / Male | **Regn. No.** : 218536
Reference By : Self | **Regn. Date** : 01/03/2022 13:00
Collection Center : Sadguru Hos./Lab (Panchavati) | **Report Date** : 01/03/2022 15:16

Prostate specific antigen (PSA)

Test Name	Result	Units	Biological Ref. Interval
Prostate Specific Antigen (PSA):	0.406	ng/ml	[0.0 - 4.0] 40 -49 Years :0- 2.5 ng/ml 50 -59 Years :0- 3.5 ng/ml 60 -69 Years :0- 4.5 ng/ml 70 -79 Years :0- 6.5 ng/ml Above 80 yrs : 0-7.2 ng/ml

Test Done On Fully Automated Cobas e411

*Result relates only to the sample as received. Kindly correlate with clinical conditions.

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

Dr. Mrs. Reshma Mankar
MD, DPB (Pathology)
Consulting Pathologist





Patient Name : Mr. Prashant V. Jadhav
Age/Sex : 49 Years / Male | **Regn. No.** : 218536
Reference By : Self | **Regn. Date** : 01/03/2022 13:00
Collection Center : Sadguru Hos./Lab (Panchavati) | **Report Date** : 01/03/2022 15:15

IMMUNO ASSAY

Test Name	Result	Units	Biological Reference Interval
Total Triiodothyronine (T3)	: 116.0	ng/dl	[80 - 200 ng/dl] For Pregnancy: First Trimester: 81-190 Second Trimester: 100-260 Third Trimester: 100-260
Total Thyroxine (T4)	: 8.30	µg/dl	[4.5 - 14.1 ug/dl]
Thyroid Stimulating Hormone (ultra TSH)	: 3.54	µIU/ml	[0.270 - 4.2] For Pregnancy: First Trimester: 0.1-2.5 Second Trimester: 0.2-3.0

Method: Fully Automated ElectroChemiluminescence System

Test Done On Fully Automated Cobas e411_Japan

*Result relates only to the sample as received. Kindly correlate with clinical conditions.

NOTE:

1. Decreased T3 (normal T4 & TSH) have minimal clinical significance and are not recommended for diagnosis of hypothyroidism
2. Total T3 may be decreased by < 25% in healthy older individuals.
3. Total T3 & T4 values may also be altered under other conditions like pregnancy, drugs (androgens,estrogens, O C phenytoin) nephrosis etc. In such cases free T3 and Free T4 are preferred tests.
4. Clinically correlate the result or repeat the tests with fresh sample if TSH values are between 5 - 15 mIU/L as physiological factors may give falsely high TSH.

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



Dr. Mrs. Reshma Mankar
MD, DPB (Pathology)
Consulting Pathologist

Ref. By : BOB	Protocol : BRUIE1													
Medication : NO ANX	Historical BP : NO ANX													
Objective : N/A	B.P. (mmHg) x100	H.R. (bpm)	METs	Grade (%)	Phase Time (Min:Sec)	Speed (mph)	Time	Speed	Grade	METs	H.R. (bpm)	B.P. (mmHg) x100	PVC	Comments
Supine		98	1.0							1.0	98	138/87	135	-
Standing		96	1.0							1.0	96	138/87	132	-
HV		94	1.0							1.0	94	138/87	129	-
ExStart		102	1.0							1.0	102	138/87	140	-
Stage 1	3:00		4.2	10.0		1.5	3:01			4.2	116	149/105	172	-
Stage 2	3:00		7.1	12.0		2.5	6:01			7.1	130	150/110	195	-
PeakEx	2:02		9.4	14.0		3.5	8:03			9.4	155	150/110	232	-
Recovery	1:00		1.2	0.0		1.1				1.2	135	170/120	229	-
Recovery	2:00		1.0	0.0		1.1				1.0	102	174/124	177	-
Recovery	3:00		1.0	0.0		1.1				1.0	89	172/120	153	-
Recovery	3:29		1.0	0.0		1.1				1.0	105	172/120	180	-

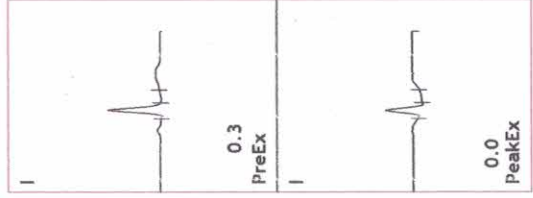
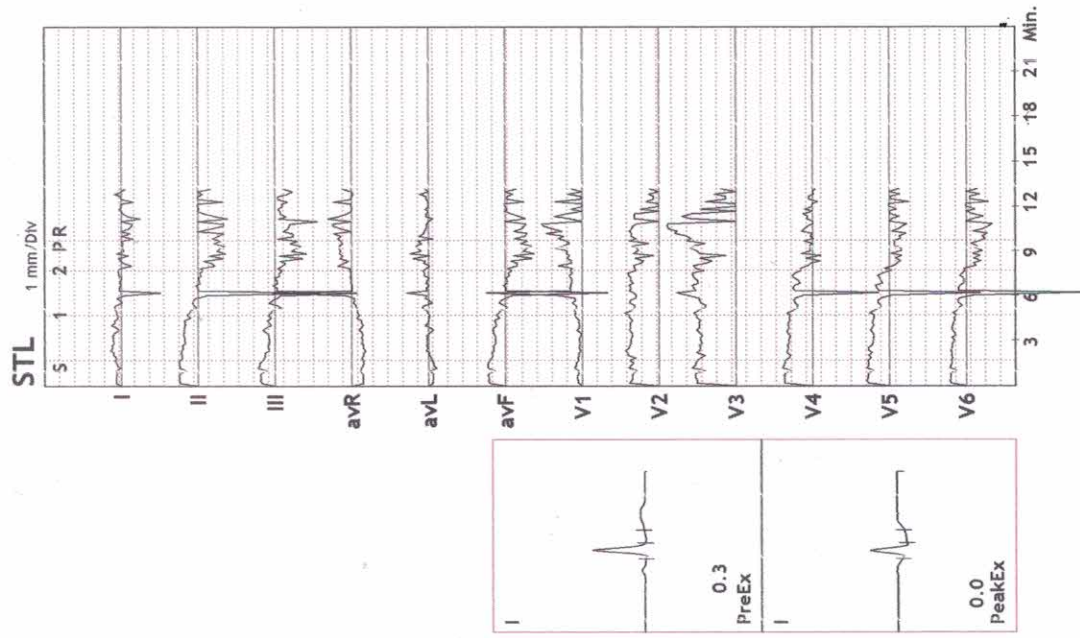
Findings :
 Exercise Time : 8:03 minutes
 Max HR attained : 155 bpm 91% of Max Predictable HR 171
 Max BP : 150/110(mmHg)
 WorkLoad attained : 9.4 (Good Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is ~~negative~~ for inducible ischaemia.
 Maximum Depression: 4:31

positive



DR. KRISHNA YADAV
 MBBS, MD (Medicine) PGDGM, FID, FCCM
 Reg. No. 2007/05/1595
SADGURU HOSPITAL
 OLD ADGAON NAKA, PANCHAVATI,
 NASHIK-422 003

Advice /Comments:



NASHIK
 45944/MR PRASHANT JADHAV
 49 Yrs/Male
 82 Kg/168 Cms

HR: 89 bpm
 METS: 1.0
 BP: 172/120

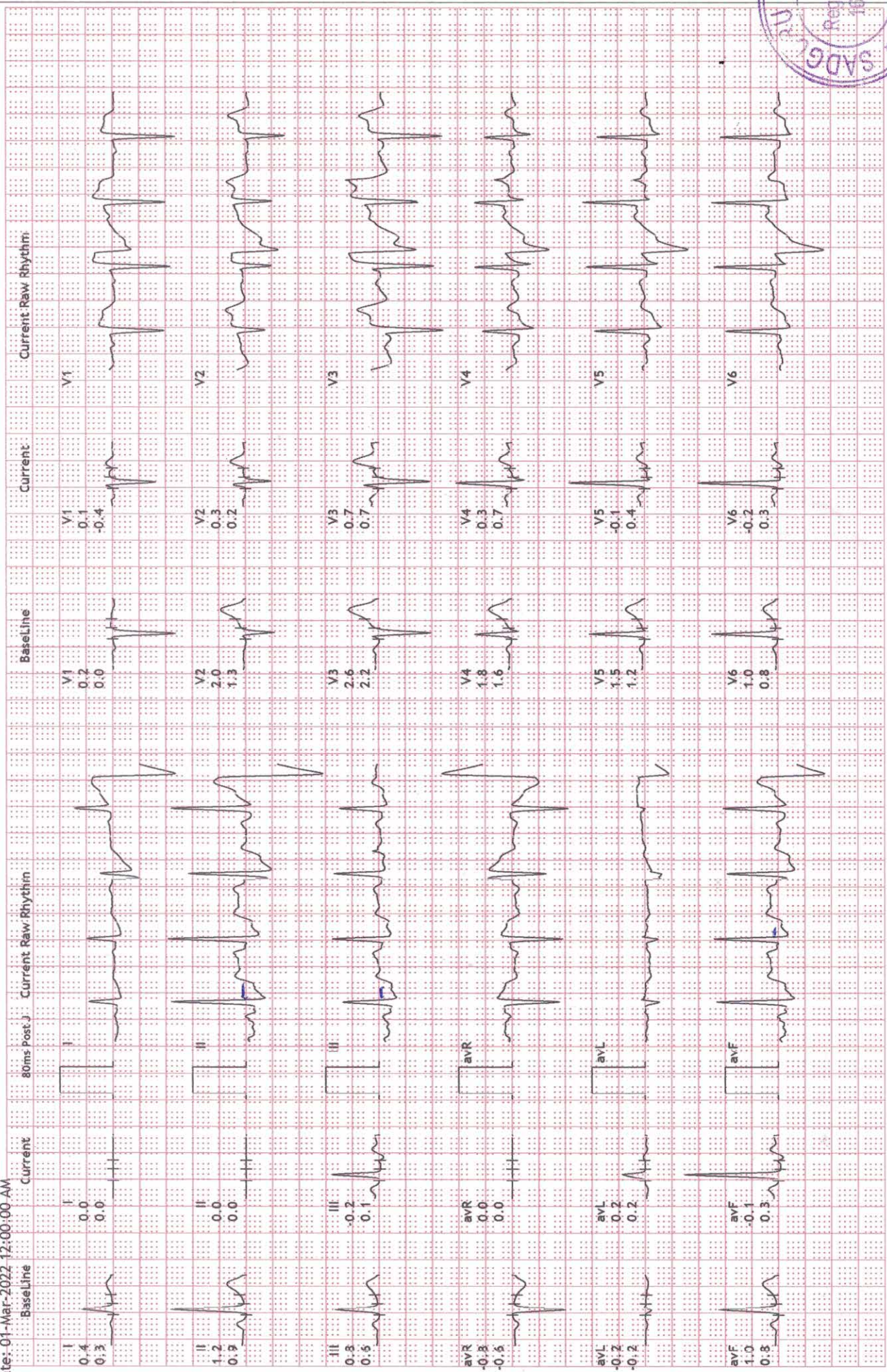
MPHR: 52% of 171
 Speed: 1.1 mph
 Grade: 0.0%

Raw ECG
 BRUICE1
 (1.0-100)-Hz

Ex Time 08:02
 BLC :On
 Notch :On

Recovery : (03:06)
 10.0 mm/mV
 25 mm/Sec.

Date: 01-Mar-2022 12:00:00 AM



NASHIK
45944 / MR PRASHANT JADHAV
49 Yrs / Male
82 Kg / 168 Cms

Date: 01-Mar-2022 12:00:00 AM

HR: 102 bpm
METS: 1.0
BP: 174/124

MPHR: 59% of 171
Speed: 1.1 mph
Grade: 0.0%

Raw ECG
BRUICE1
(1.0-100)Hz

Ex Time 08:02
BLC : On
Notch : On

Recovery : (02:00)
10.0 mm/mV
25 mm/Sec.



NASHIK
 45944/MR PRASHANT JADHAV
 49 Yrs/Male
 82 Kg/168 Cms
 Date: 01-Mar-2022 12:00:00 AM

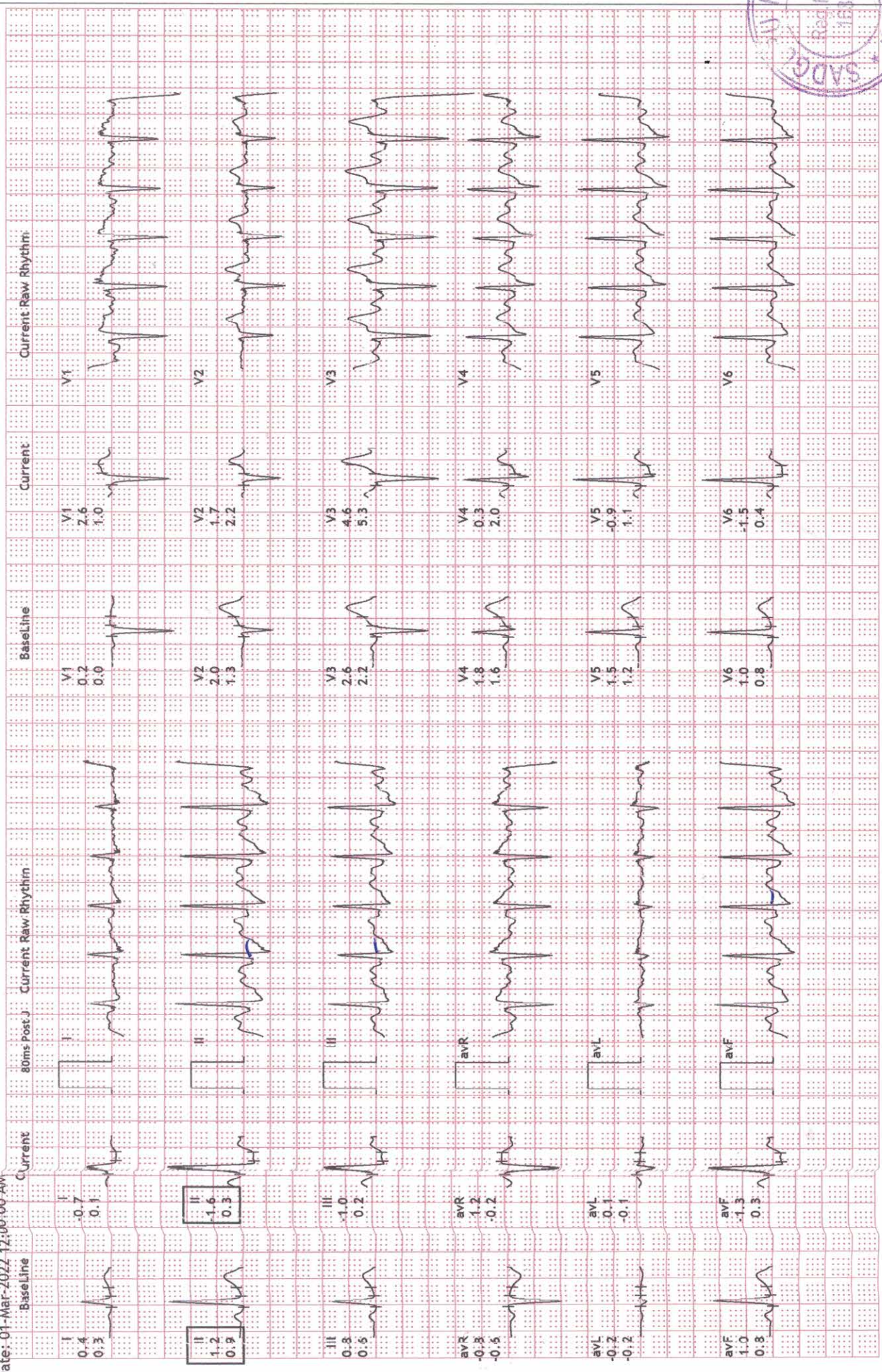
HR: 135 bpm
 METS: 1.1
 BP: 170/120

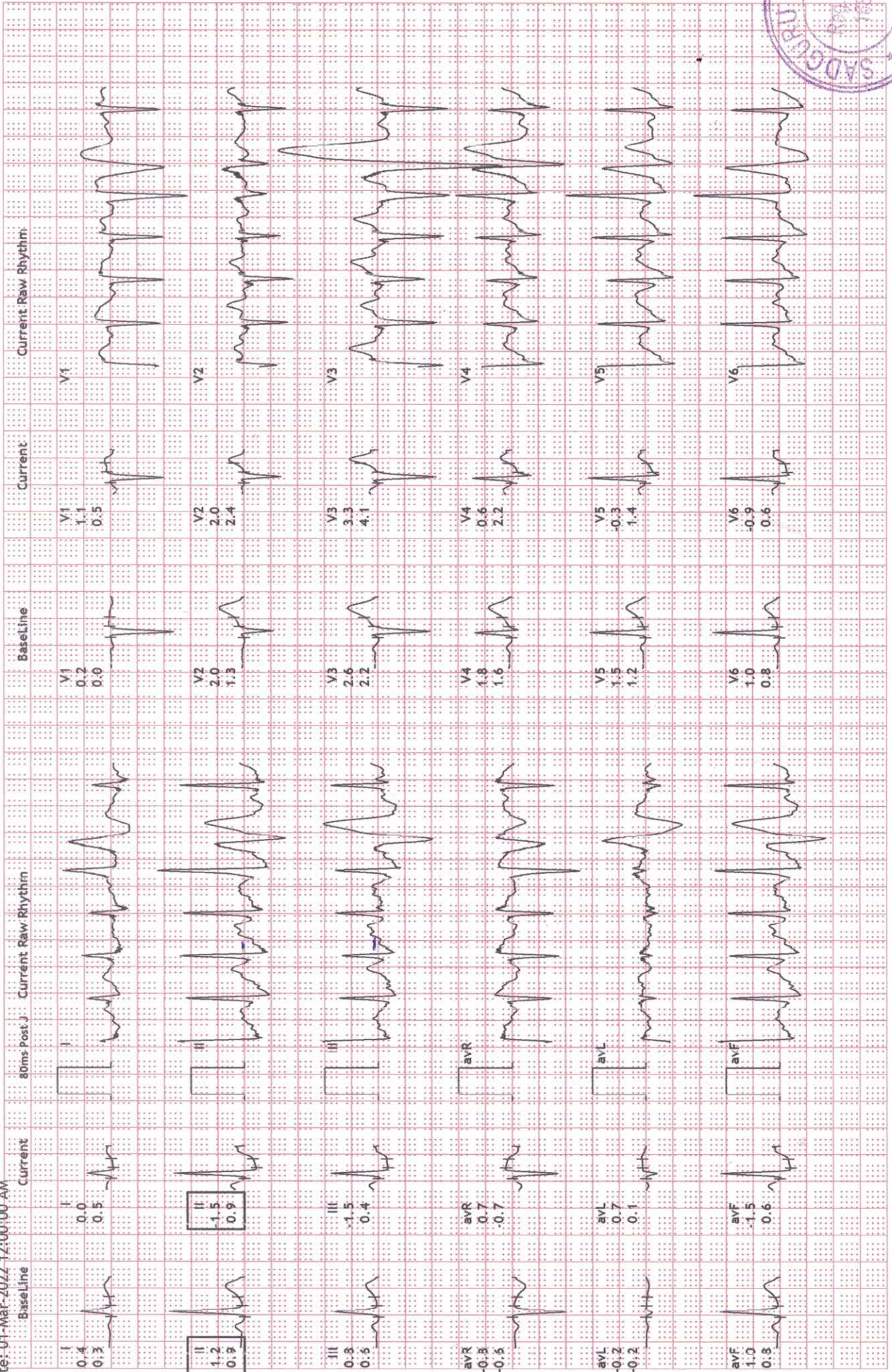
MPHR: 78% of 171
 Speed: 1.1 mph
 Grade: 0.0%

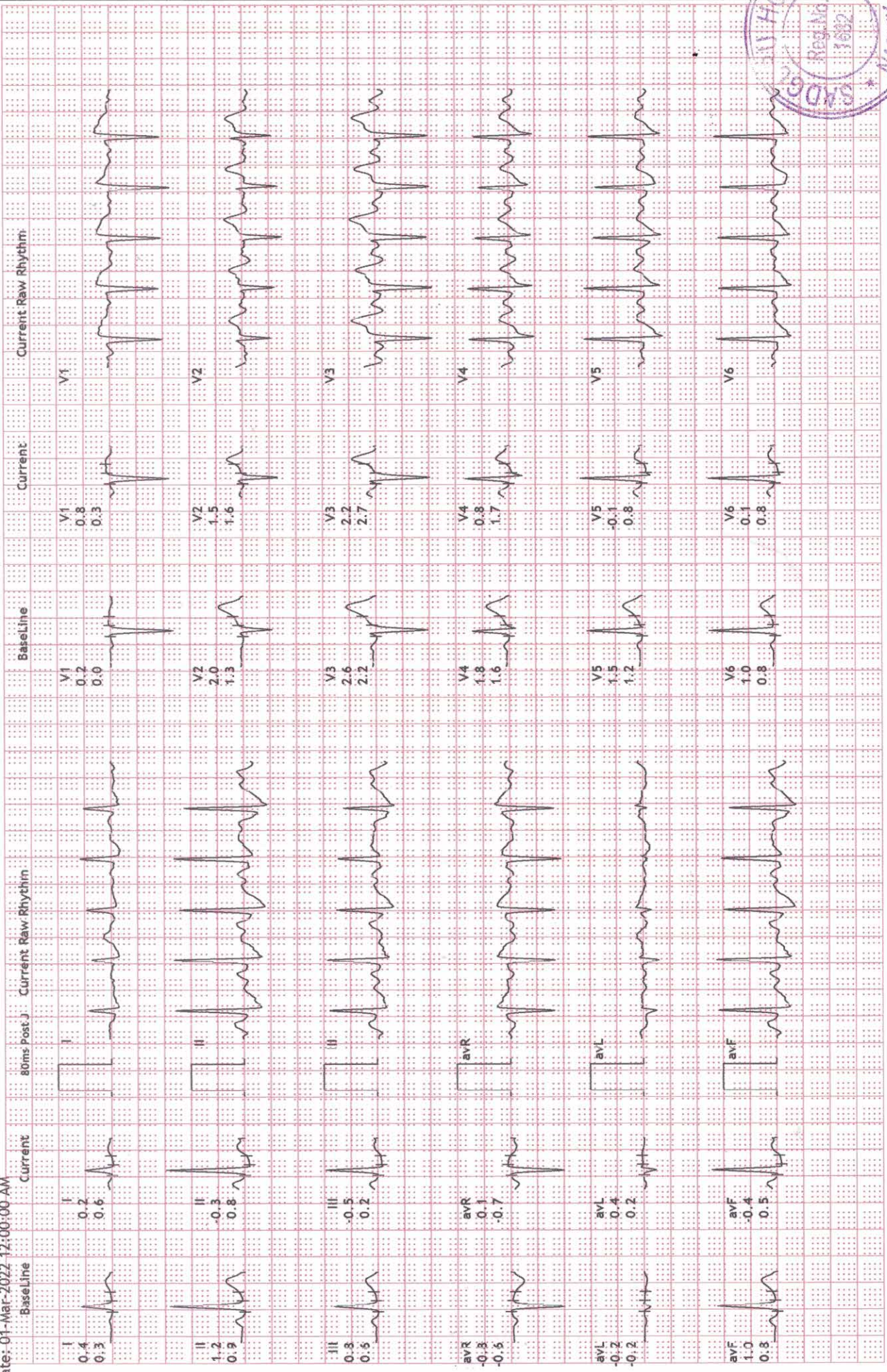
Raw ECG
 BRUICE1
 (1.0-100)Hz

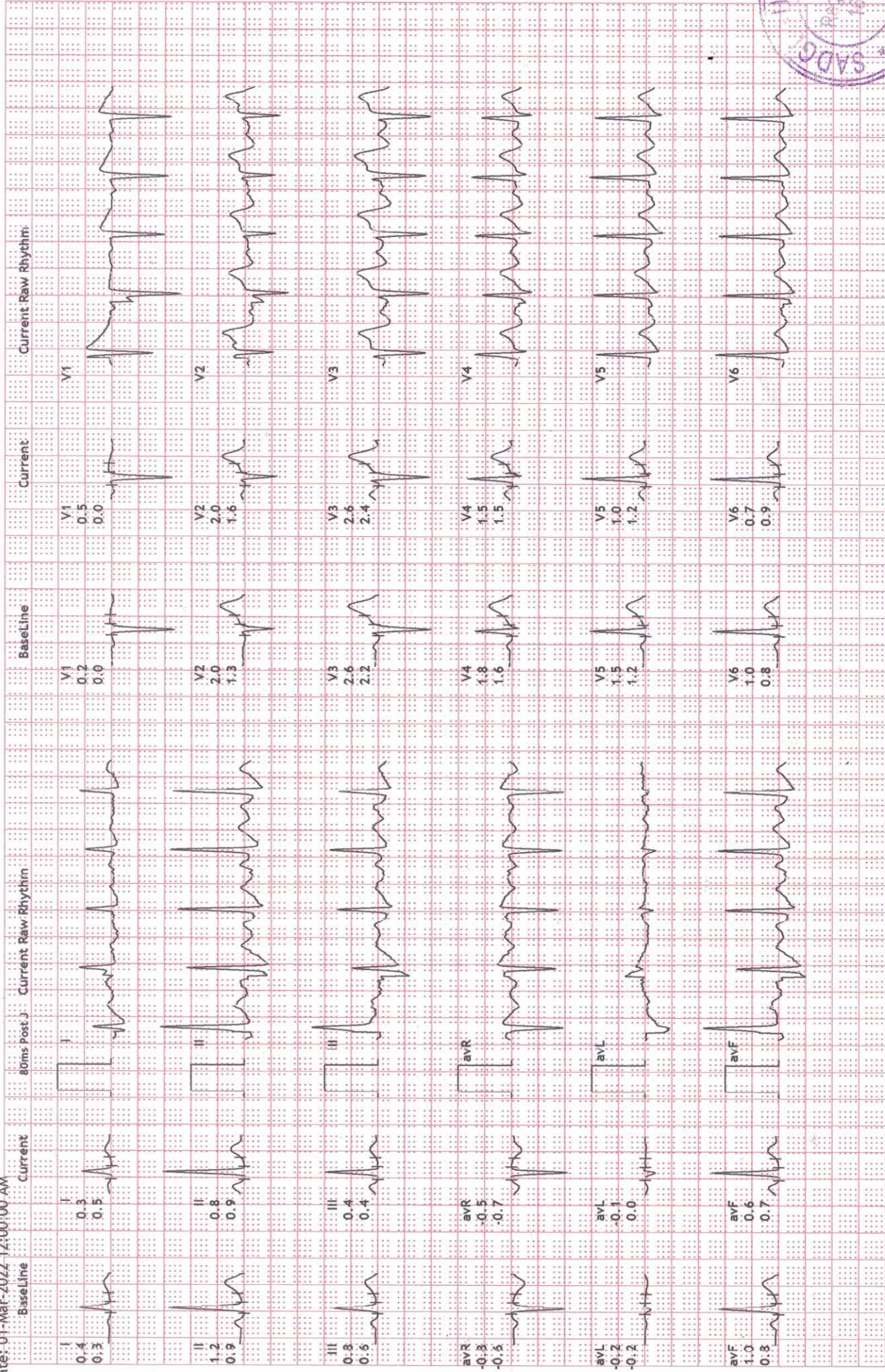
Ex Time 08:02
 BLC : On
 Notch : On

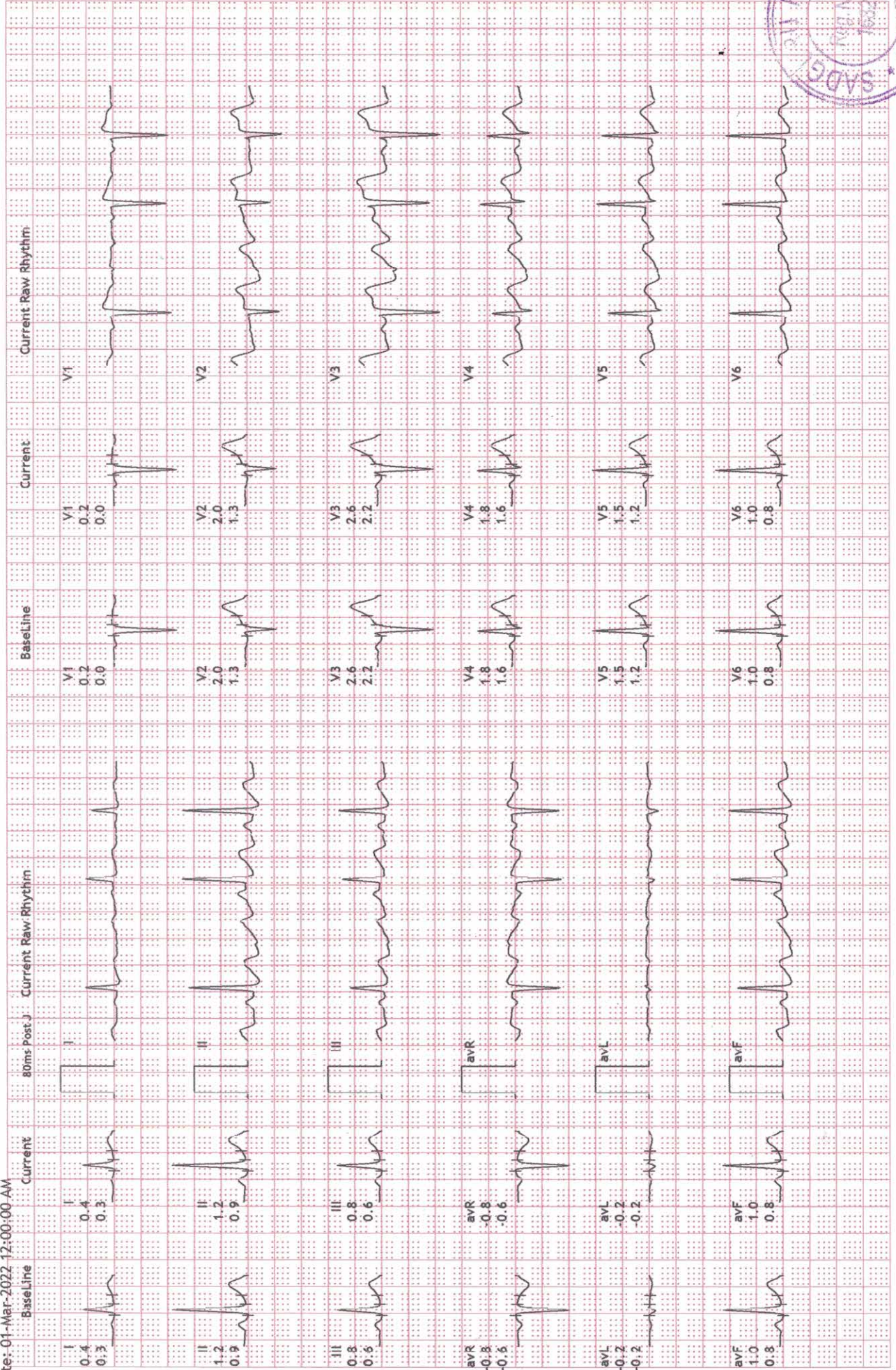
Recovery : (01:06)
 10.0 mm/mV
 25 mm/Sec.

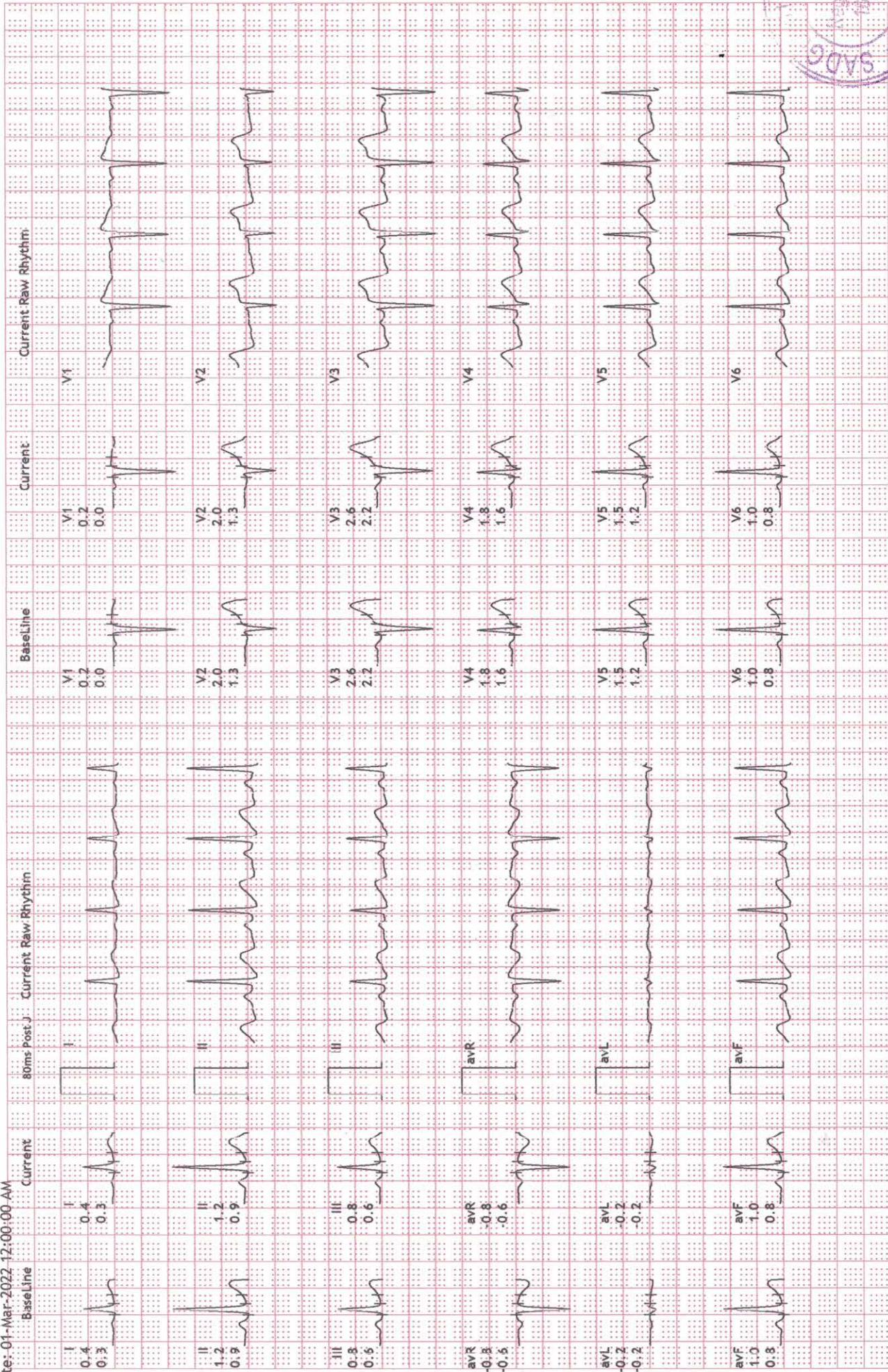


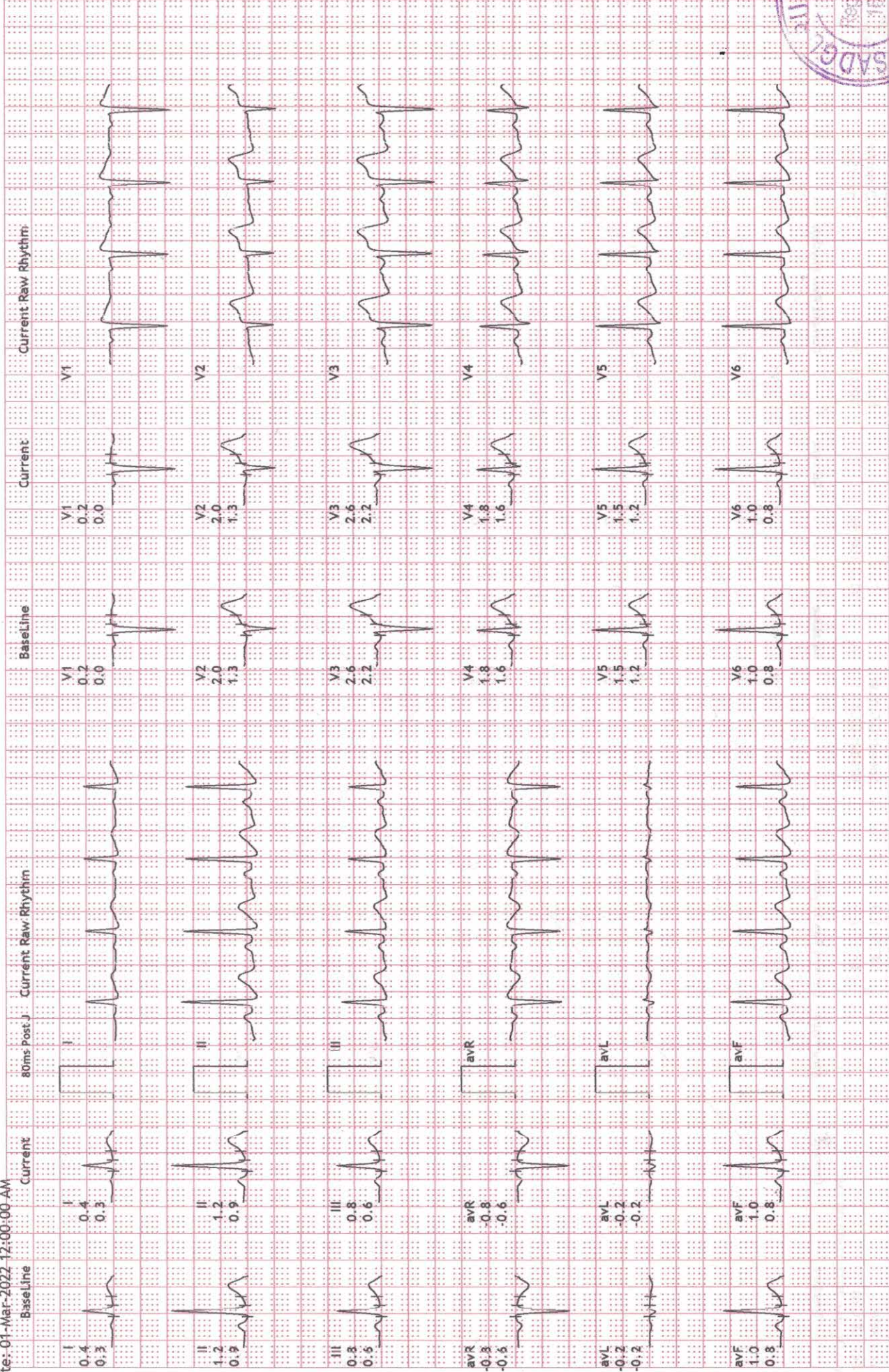


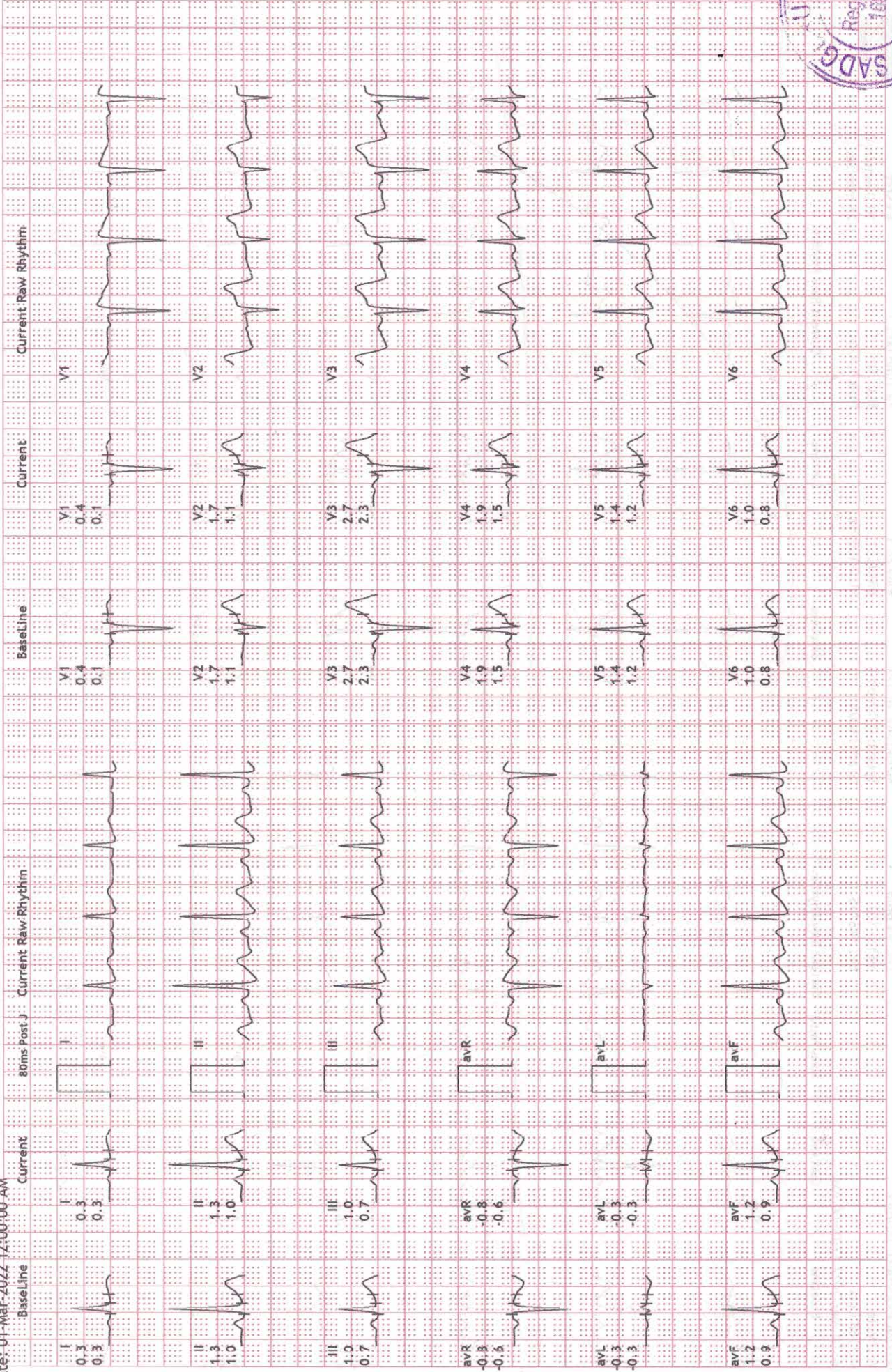














Maple Diagnostics

Patient Name : MR. PRASHANT JADHAV

Date : 01 Mar 2022

Referred By : SADGURU HOSPITAL

Age : 49 YEARS Sex : M

USG-ABDOMEN AND PELVIS

- * LIVER : Mild hepatomegaly (17.2 cms) seen with generalized increase in parenchymal texture.
Intrahepatic biliary and venous channels are normal
- * G B : Minimally distended.
- * PANCREAS : Normal in size and parenchymal echo pattern with normal peripancreatic planes.
- * SPLEEN : Normal in size, contour with homogenous echo pattern.
- * AORTA & I V C: Normal. No evidence of paraaorta/ paracaval lymphadenopathy
- * KIDNEYS : Normal in size, contour and echotexture.
No calculus or hydronephrosis is seen on both sides.
Renal sinus and cortical echoes are normal.
Peri renal planes are normal.
Cortico-Medullary differentiation is maintained.
RK -10.5 x 3.8 cms LK -11.2 x 4.6 cms.
- * URINARY BLADDER : Partially distended. Walls are normal.
- * Prostate is normal.
- * No obvious bowel wall thickening seen.

IMPRESSION:

→Mild hepatomegaly with Grade II fatty changes.

→No splenomegaly or ascites seen.


DR. HARDIK PATEL
DNB Radiodiagnosis



MR PRASHANT JADHAV, : US From 3/1/2022

