MEDIWHEEL

TENDER PALM HOSPITAL

we love to care...

Department of Pathology & Microbiology
Test Report

LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. INDRAKESH MAURYA	**Age/Sex**	: 36 Year(s)/Male
UHID	: TPSH.7411	**Order Date**	: 08/11/2022 09:53
Episode	: OP		
Ref. Doctor	: Self		
Address	: MEDIWHEEL , ,Lucknow,Uttar Pradesh ,0	**Facility**	: Tender Palm Superspeciality Hospital

Biochemistry

Sample No : 07H0008234 — Report Date : 08/11/22 11:04

Test Name	Result	Unit	Biological Ref Range
FASTING BLOOD SUGAR			
Sample- Fluoride Plasma			
Glucose,Fasting	**137 ▲**	mg/dl	74 - 100
Plasma-F,GOD-POD			

Note:
1. *The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions*
2. *Very low glucose levels cause severe CNS dysfunction*
3. *Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical*

HBA1C			
Sample- EDTA			
HbA1c	5.8	%	Non-diabetic: <= 5.8 Pre-diabetic: 5.9-6.4 Diabetic: >= 6.5
Estimated average glucose	119.8	mg/dl	70 - 130
High Performance Liquid Chromatography (HPLC) .			

INTERPRETATION :
1] HbA1c is used for monitoring diabetic control . If 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 % .

LIPID PROFILE			
Sample- Serum			
Total Cholesterol	**246 ▲**	mg/dl	0 - 200
Enzymatic CHOD-PAP			
Triglycerides	**232 ▲**	mg/dl	0 - 161

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Glycerol Phosphate Oxidase			
HDL Cholesterol	36.3	mg/dl	35.3 - 79.5
Direct			
LDL Cholesterol	**163.3 ▲**	mg/dl	0 - 100
Direct			
VLDL Cholesterol	**46.4 ▲**	mg/dl	6 - 38
Calculated			
CHOL/HDL RATIO	**6.8 ▲**		0 - 4.5
Calculated			

Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.
VLDL,CHOL/HDL RATIO,,LDL Cholesterol,serum, are calculated parameters

PP BLOOD SUGAR

Sample- Fluoride Plasma			
Glucose,Post Prandial	**203 ▲**	mg/dl	70 - 140
(Method : Plasma-F,GOD-POD)			

Note:
1. *The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions*
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KIDNEY FUNCTION TEST (KFT)

Sample- Serum			
Blood Urea	21.4	mg/dl	19 - 45
Serum,GLDH Kinetic			
BUN-Blood Urea Nitrogen	10.0	mg/dl	8.4 - 25.7
Serum,Urease			
Creatinine	1.07	mg/dl	0.6 - 1.2
Fixed Time			
Bun/Creatinine Ratio	**9.3 ▼**	Ratio	10 - 20

In blood,Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be con

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Uric Acid	**7.25 ▲**	mg/dl	3.6 - 7.2
Serum, Uricase Peroxidase			
Electrolyte			
Sodium	138.2	mmol/L	135 - 145
Serum ,ISE			
Potassium	3.74	mEq/L	3.5 - 5.1
Serum ,ISE			
Total Protein	6.91	g/dl	6.4 - 8.3
Biuret			
Serum Albumin	4.90	g/dl	3.5 - 5.2
Serum, Bromocresol green			
Globulin	2.01	g/dl	1.8 - 3.6
Calculated			
A:G Ratio	**2.44 ▲**	Ratio	1.1 - 2.2
Calculated			

COMMENTS :
An electrolyte test can help determine whether there's an electrolyte imbalance in the body.Electrolytes are salts and minerals, such as sodium, potassium, chloride and bicarbonate, which are found in the blood.An electrolyte test can also be used to monitor the effectiveness of treatment for an imbalance that affects the functioning of an organ.The test is sometimes carried out during a routine physical examination, or it may be used as part of a more comprehensive set of tests. As part of routine blood testing, or when your doctor suspects that you have an imbalance of one of the electrolytes (usually sodium or potassium), or if your doctor suspects an acid-base imbalance. Electrolytes may also be checked if you are prescribed certain drugs, particularly diuretics or ACE inhibitors. In specific disorders, one or more electrolytes may be abnormal. Your healthcare professional will look at the overall balance but is likely to be especially concerned with your sodium and potassium concentration. People whose kidneys are not functioning properly, for example, may retain excess fluid in the body, diluting the sodium and chloride so that they fall below normal concentrations. Those who experience severe fluid loss may show an increase in potassium, sodium, and chloride concentration (chloride tends to mirror the sodium concentration). Some forms of heart disease, muscle and nerve problems, and diabetes may also have one or more abnormal electrolytes. Electrolyte abnormalities may also be a consequence of drug treatment.

LIVER FUNCTION TEST (LFT)

Sample- Serum

Total Bilirubin	0.89	mg/dl	0 - 1
Serum, Jendrassik_Method			

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Direct Bilirubin	0.35	mg/dl	0 - 0.4
Indirect Bilirubin *Calculated*	0.54	mg/dl	0.1 - 1
SGOT/ AST (Serum) *Serum, IFCC*	**42.9 ▲**	U/L	0 - 35
SGPT/ ALT (Serum) *Serum, IFCC*	29.7	U/L	0 - 45
Alkaline Phosphatase *Serum, AMP/IFCC*	70.6	U/L	40 - 129
Total Protein *Biuret*	6.91	g/dl	6.4 - 8.3
Serum Albumin	4.90	g/dl	3.5 - 5.2
Globulin *Calculated*	2.01	g/dl	1.8 - 3.6
A/G Ratio *Calculated*	**2.44 ▲**	Ratio	1.1 - 2.2

Comment:
Liver function tests, or LFTs, include tests that are routinely measured in all clinical laboratories. LFTs include bilirubin, a compound formed by the breakdown of hemoglobin; ammonia, a breakdown product of protein that is normally converted into urea by the liver before being excreted by the kidneys; proteins that are made by the liver including total protein, albumin, prothrombin, and fibrinogen; cholesterol and triglycerides, which are made and excreted via the liver; and the enzymes alanine aminotransferase (ALT), aspartate aminotransferase (AST), alkaline phosphatase (ALP), gamma-glutamyl transferase (GGT), and lactate dehydrogenase (LDH). Other liver function tests include serological tests (to demonstrate antibodies) and DNA tests for hepatitis and other viruses; and tests for antimitochondrial and smooth muscle antibodies, transthyretin (prealbumin), protein electrophoresis, bile acids, alpha-fetoprotein, and a constellation of other enzymes that help differentiate necrotic (characterized by death of tissues) versus obstructive liver disease.

Hematology

Test Name	Result	Unit	Biological Ref Range
Sample No : 07H0008234		Report Date :	08/11/22 10:43
BLOOD GROUP RH & ABO			
Sample- EDTA			
Blood group (ABO Typing)	' A '		

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Manual Slide Hemagglutination			
RhD Factor (Rh typing)	Positive		
Manual Slide Hemagglutination			
COMPLETE BLOOD COUNT (CBC)			
Sample- EDTA			
Haemoglobin	15.3	gm/dl	13.5 - 18
(Spectrophotometrylorimetry)			
RBC	5.30	x10^6/ul	4.7 - 6
Electrical Impedance			
PCV	45.8	%	42 - 52
Calculated			
MCV	86.4	fl	78 - 100
Calculated			
MCH	28.9	pg	27 - 31
Calculated			
MCHC	33.4	g/dl	32 - 36
Calculated			
RDW	**17.0 ▲**	%	11.5 - 14
Calculated			
Platelet Count	223	x10^3/ul	150 - 450
Electrical Impedance			
PDW	16.1	%	9 - 17
Calculated			
PCT	**0.19 ▼**	%	0.2 - 0.5
Calculated			
MPV	8.8	fl	6 - 9.5
Calculated			
Total Leucocytes Count	6.20	x10^3/ul	4 - 10.5
Electrical Impedance			

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Differential Count

Neutrophils	53	%	44 - 76
Lymphocytes	40	%	20 - 40
Monocytes	04	%	2 - 10
Eosinophils	03	%	1 - 6
Basophils	00	%	0 - 2

Urinalysis

Test Name	Result	Unit	Biological Ref Range
Sample No : 07H0008234			Report Date : 08/11/22 11:05
URINE EXAMINATION, ROUTINE, URINE, R/E			
Sample- Urine			
Nature of specimen	Random		
Colour *Visual*	Pale Yellow		Pale Yellow
Transparency (Appearance) *Visual*	Clear		Clear
Reaction (pH) *Double Ludicator*	5.0		4.6 - 8
Specific Gravity *Pka Change*	1.010		1.003 - 1.035
Chemical Examination			
Urine Protein (Albumin)	Not Detected		Not Detected
Urine Glucose (Sugar)	Not Detected		Not Detected
Urine Ketones (Acetone)	Not Detected		Not Detected
Bilirubin	Not Detected		Not Detected
Bile Pigments	Absent		Absent
Bile Salt	Absent		Absent
Urobilinogen	Normal		Normal

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Nitrite	Not Detected		Not Detected
Microscopic Examination			
Red blood cells	Not Detected	/HPF	Not Detected
Pus Cells (WBCs)	4-5	/HPF	0 - 5
Epithelial Cells	1-2	/HPF	0 - 5
Crystals	Not Detected	/HPF	Not Detected
Cast	Absent		Absent
Bacteria	Not Detected	/HPF	Not Detected

End of Report

Dr.U.P Kushwaha
M.D.(PATH.)

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Test Report

Patient ID	: ND192941/OPD	Registration Date	: 09-Nov-2022 12.0
Patient Name	: **MR. INDRAKESH MAURYA**	Collection Date	: 09-Nov-2022 12:0
Age / Sex	: 36 Years / Male	Report Date	: 09-Nov-2022 01.4
Referred Dr	: TENDER PALM HOSPITAL	Contact No	:
Sample Type	: SERUM	Barcode	
Aadhaar/Passport No. :			

HORMONES

Investigation	Value	Unit	Bio. Ref. Range
Thyroid Function Test			
(Method : Serum,Chemiluminiscence)			
Triiodothyronine (Total T-3)	0.98	ng/ml	0.60-1.81
Thyroxine (Total T-4)	7.90	ug/dl	5.01-12.45
Thyroid-stimulating hormone (TSH)	1.54	uIU/mL	0.35-5.50

INTERPRETATION : (T3 & T4)
Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy,Drugs(Androgens,Estrogens,O C pills, Phenytoin) Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

INTERPRETATION : (TSH)
1] TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample .
2]TSH results between 0.1 to 0.45 require correlation with patient age & clinical symptoms. As with increasing age, there are marked changes in thyroid hormone production, metabolism & its actions resulting in an increased prevalence of subclinicalthyroid disease .
3]TSH values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure,severe burns, trauma and surgery etc .
4]Drugs that decrease TSH values e.g:L-dopa,Glucocorticoid Drugs that increase TSH values e.gIodine,Lithium,Amiodarone.

REFERENCE : TIETZ Fundamentals of ClinicalChemistry

Checked By

Dr. U. P. Kushwaha
M.D.(Path.)

Dr. Molay Banerjee
M.D.(Micro.)

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DIAGNOSTICS REPORT

Ref No. ..... Date .....

Patient Name	: Mr. INDRAKESH MAURYA	Order Date	: 08/11/2022 09:53
Age/Sex	: 36 Year(s)/Male	Report Date	: 08/11/2022 11:34
UHID	: TPSH.7411	IP No	:
Ref. Doctor	: Self	Facility	: Tender Palm Superspeciality Hospital

ULTRASOUND WHOLE ABDOMEN

LIVER: Normal in size (14.5 cm) show **diffuse fatty infiltration**. Intra Hepatic biliary radicals are not dilated. No focal SOL is seen. Hepatic veins & I. V. C are normal.
GALL BLADDER: Normally distended. Wall is not thickened. **A mobile calculus is seen in GB measuring ~4.9 mm.**
PORTA: Portal vein and CBD are normal in caliber.
PARAORTIC REGION: No significant lymph adenopathy is seen.
SPLEEN: Normal in position & size. Echoes are normal. Splenic vein is not dilated.
PANCREAS: Normal in contour. Echoes are normal. Pancreatic Duct is not dilated. No focal SOL is seen.
Right KIDNEY: - Normal in size (9.7 x 5.2 cm). Parenchymal echoes are normal. Cortico-medullary differentiation is maintained. No calculus or hydronephrosis is seen.
LEFT KIDNEY: - Normal in size (10.2 x 4.6 cm). Parenchymal echoes are normal. CM differentiation is maintained. No calculus or hydronephrosis is seen.
URINARY BLADDER: Normally distended. Wall not thickened. No echogenic calculus seen.
PROSTATE: Normal in size, shape & echotexture. No Focal lesion seen.
No free fluid in abdomen.

OPINION:

- **Grade II fatty infiltration.**
- **Small solitary GB calculus.**

Dr.GARIMA SINGH , MBBS,DNB
(RADIO-DIAGNOSIS)
Consultant Radiologist

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Patient Name	: **MR. INDRAKESH MAURYA**	Collection Date	: 09-Nov-2022 12:09 AM
Age / Sex	: 36 Years / Male	Report Date	: 09-Nov-2022 01.42 AM
Referred Dr	: TENDER PALM HOSPITAL	Contact No	:
Sample Type	: SERUM	Barcode	*ND192941*
Aadhaar/Passport No. :			

HORMONES

Investigation	Value	Unit	Bio. Ref. Range
Thyroid Function Test			
(Method : Serum,Chemiluminiscence)			
Triiodothyronine (Total T-3)	0.98	ng/ml	0.60-1.81
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