

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date 12/09/2021 Srl No. 23 Patient ld 2109120023

Name Mr. ASHISH SHANKAR Age 31 Yrs. Sex M

Ref. By Dr.BOB

Test Name Value Unit Normal Value

HAEMATOLOGY

HB A1C 5.1 %

EXPECTED VALUES:

Metabolicaly healthy patients = 4.8 - 5.5 % HbAIC

Good Control = 5.5 - 6.8 % HbAlC Fair Control = 6.8-8.2 % HbAlC Poor Control = >8.2 % HbAlC

REMARKS:-

In vitro quantitative determination of HbAIC in whole blood is utilized in long term monitoring of glycemia

The **HbAIC** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbAIC** be performed at intervals of 4-6 weeksduring Diabetes

Mellitus therapy.

Results of **HbAIC** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN MBBS, MD

CONSULTANT PATHOLOGIST



9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	12/09/2021	Srl No.	23	Patient Id	2109120023
Name	Mr. ASHISH SHANKAR	Age	31 Yrs.	Sex	М
Ref. By Dr.	вов				

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	12.0	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	4,600	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)	ĺ		
NEUTROPHIL	65	%	40 - 75
LYMPHOCYTE	31	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	02	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	11	mm/lst hr.	0 - 15
R B C COUNT	4.23	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	36	%	40 - 54
MCV	85.11	fl.	80 - 100
MCH	28.37	Picogram	27.0 - 31.0
MCHC	33.3	gm/dl	33 - 37
PLATELET COUNT	2.35	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"B"		
RH TYPING	POSITIVE		

**** End Of Report ****

Dr.R.B.RAMAN MBBS, MD

CONSULTANT PATHOLOGIST



9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	12/09/2021	Srl No	. 23	Patient lo	2109120023
Name	Mr. ASHISH SHANKAR	Age	31 Yrs.	Sex	М
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value				
BIOCHEMISTRY							
BLOOD SUGAR FASTING	103.5	mg/dl	70 - 110				
BLOOD SUGAR PP	111.3	mg/dl	80 - 160				
SERUM CREATININE	1.01	mg%	0.7 - 1.4				
BLOOD UREA	27.4	mg /dl	15.0 - 45.0				
SERUM URIC ACID	5.6	mg%	3.4 - 7.0				
LIVER FUNCTION TEST (LFT)							
BILIRUBIN TOTAL	0.58	mg/dl	0 - 1.0				
CONJUGATED (D. Bilirubin)	0.19	mg/dl	0.00 - 0.40				
UNCONJUGATED (I.D.Bilirubin)	0.39	mg/dl	0.00 - 0.70				
TOTAL PROTEIN	7.1	gm/dl	6.6 - 8.3				
ALBUMIN	3.8	gm/dl	3.4 - 4.8				
GLOBULIN	3.3	gm/dl	2.3 - 3.5				
A/G RATIO	1.152						
SGOT	25.6	IU/L	5 - 40				
SGPT	27.4	IU/L	5.0 - 55.0				
ALKALINE PHOSPHATASE IFCC Method	74.2	U/L	40.0 - 130.0				
GAMMA GT	25.4	IU/L	8.0 - 71.0				
LFT INTERPRET							
LIPID PROFILE							
TRIGLYCERIDES	92.8	mg/dL	40.0 - 165.0				



9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date 12/09/2021 Name Mr. ASHISH SHANKAR Ref. By Dr.BOB	Srl No. Age	23 31 Yrs.	Patient Id 2109120023 Sex M
Test Name	Value	Unit	Normal Value
TOTAL CHOLESTEROL	164.4	mg/dL	123.0 - 199.0
H D L CHOLESTEROL DIRECT	43.5	mg/dL	40.0 - 79.4
VLDL	18.56	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	102.34	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.779		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.353		0.00 - 3.55
THYROID PROFILE			
Т3	0.74	ng/ml	0.60 - 1.81
T4 Chemiluminescence	9.01	ug/dl	4.5 - 10.9
TSH Chemiluminescence	1.75	uIU/mI	
REFERENCE RANGE			
PAEDIATRIC AGE GROUP 0-3 DAYS 3-30 DAYS I MONTH -5 MONTHS 6 MONTHS- 18 YEARS	1-20 0.5 - 6.5 0.5 - 0.5 -		
<u>ADULTS</u>	0.39 - 6.16	ulu/ml	

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates \pm 50 %, hence time of the day has influence on the measured serum TSH concentration.



9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date 12/09/2021 Srl No. 23 Patient ld 2109120023

Name Mr. ASHISH SHANKAR Age 31 Yrs. Sex M

Ref. By Dr.BOB

Test Name Value Unit Normal Value

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

- 1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
- 2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
- 3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
- 4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
- 5. Although elevated TSH levels are nearly always indicative of primary hyporthyroidism, and may be seen in secondary thyrotoxicosis.

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

QUANTITY 20 ml.

COLOUR PALE YELLOW

TRANSPARENCY CLEAR
SPECIFIC GRAVITY 1.015
PH 6.0



9264278360, 9065875700, 8789391403

☑ info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	12/09/2021	Srl No	. 23	Patient Id	2109120023
Name	Mr. ASHISH SHANKAR	Age	31 Yrs.	Sex	М
Ref. By Dr.BOB					

Test Name	Value	Unit	Normal Value
OUEMICAL EVAMINATION			
CHEMICAL EXAMINATION			
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	0-1	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

**** End Of Report ****

Dr.R.B.RAMAN MBBS, MD

CONSULTANT PATHOLOGIST



SUBHAM IMAGING & A.L.C. DIAGNOSTICS CENTRE

H.O.: Ajay Market, Dena Bank Building, East Ashok Nagar, Kankarbagh, Patna - 20 B.O.: Khanpura Road (Below Gyan Sharowar School), Paliganj, Patna. e-mail: shubham.pat.usg@gmail.com # website: www.alchealthcheckup.in

OPINION MUST BE CORRELATES WITH CLINICAL & OTHER INVESTIGATION FOR DIAGNOSIS. NOT FOR MEDICO LEGAL PURPOSE

Pt. Name: - ASHISH SHANKAR Ref. By: - DR. AROGAYAM

Date:- 12-Sep-21 Age / Sex — Yrs. M.

REAL TIME U.S.G. OF WHOLE ABDOMEN Thanks for your kind referral

(Report.)

LIVER :- Measures 15.04 cm. Mild Enlarged in shape, size and echo texture.I.H.B.R.

G.BL. are not dilated. Hepatic veins are normal. No SOL seen.

:- Lumen is echo free. Wall thickness appears normal.

C.B.D. :- Measures 3.3 mm in diameter with echo free lumen. No calculi or mass seen.

P.V. :- Measures 7.2 mm in diameter. Appears normal. No thrombus seen. PANCREAS: - Normal in shape, size and echo texture. No calcification mass seen.

SPLEEN :- Measures 12.06 cm. Normal in shape, size and echo texture.

No SOL seen.

KIDNEY :- Both kidney shows normal shape, size & echotexture. C.M.D.intact.

P.C.S.is not dilated. No calculi, cyst or hydronephrosis seen on either side.

Right Kidney: - Measures 8.98 X 4.1 cm. Left Kidney: - Measures 8.90 X 4.2 cm.

URETER :- Not dilated .No apparent calculi seen.

U.BLADDER:- Shows normal in outline with echo free lumen. No calculi or mass seen.

Pre void - 310 ml. Post void - is in significant

PROSTATE: - Normal in Size Shape Capsule is intact

R.I.F. :- Son graphically no appendicular mass or collection seen.

<u>OTHERS</u> :- Distended Bowel Loops seen in abdominal cavity with Excess bowel Gasses No Ascites no Lymph Adenopathy No pleural effusion seen

on either side.

IMPRESSION

Mild Hepatomegaly

Distended Bowel Loops With Excess Bowel Gasses.

• Adv; - Further Work Up LFT / Other Investigation Otherwise son graphically normal scan. of rest organs

Consultant Radiologist

ESTB BY:-

Dr. P. K. Tiwari
MD, BRIT (Radio Imaging)
Consultant Imagionologist & Sonologist
A.L.C. Diagnostics & Research Centre, Patna

Dr. S. Kumar MD. (Pat) Consultant Pathologist

Dr. A. K. Singh
MBBS, PGDMCH
Consultant Radiologist &Sonologist

