

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited)

CIN: U85110CT2005PTC017751

: 163038 UHID

Patient Name : MR. AAYUSH LAL

Visit ID

: 0000307227

: 36Y / MALE

Spec No.

Age / Sex Consultant

: DR. HOSPITAL CASE

: MEDIWHEEL

Order Date

: 08/04/2023 9:09AM

Ref. By

: DR. HOSPITAL CASE

Samp.Date

Category

Report Date

: 08/04/23 10:27AM

SONOGRAPHY USG WHOLE ABDOMEN

* LIVER : Normal in size and shape. Diffuse increase in echogenecity seen - Suggestive of fatty infiltration. IHBRs are not dilated. No focal lesions seen

- *PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- *COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.
- *GALL BLADDER :Seen in distended state with normal wall and lumen is echofree
- *SPLEEN:Normal in size, shape & echo texture. No focal lesions seen.
- *PANCREAS:Pancreatic head, body & tail visualized and have ,normal size, shape & echo texture.
- *KIDNEYS: Both kidneys are of normal shape, size and position.

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

- *URINARY BLADDER: Seen in distended state and has normal wall architecture.Lumen is echo free.
- *PROSTATE:Normal in shape, size and echotexture.No median lobe bulge is seen.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION:

- **Fatty Liver**
- Please correlate clinically, followup USG is recommended.

Dr. DILIP KUMAR SONI MBBS, DMRD RADIOLOGIST CGMC 102/2003

Please bring all your previous reports. You should preserve and bring this report for future referenced so



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: DR. HOSPITAL CASE Samp.Date Ref. By

Report Date : 08/04/23 01:51PM : MEDIWHEEL Category

X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.

: 163038

- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

No Remarkable Abnormality Detected .

Please correlate clinically

Dr. SAMTR KATHALE
MBBS, DNB(RADIO) MNAMS, MANBD Fetal Ultrasound & Fetal Medicine (FGi-BFMC) Reg No: CGMC-4404/2012

1/dsoY

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CONSULTANT DOCTOR

: HOSPITAL CASE

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VISITID

: 0000307227

ORDER DATE

: 08/04/2023 9:09:00AM

SAMP. DATE

: 08/04/2023 9:52:00AM

SPEC. NO

: 10431051

RESULT DATE

: 08/04/2023 1:34:00PM

: MEDIWHEEL

REFERENCE RANGE

DEPARTMENT OF PATHOLOGY

LIPID PROFILE	LT	PI	D	P	R	O	FIL	E
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PARAMETER	VALUE	
CHOLESTEROL TOTAL	172 mg / dl	
TRIGLYCERIDES - SERUM	176 mg / dl	
HDL	51.35 mg/di	
LDL	85.45 mg/dL	
VLDL	35.20	
CHOL: HDL Ratio	3.35:1	

RESULT Normal High

150 - 220 60 - 165

Normal Low

35 - 80 90 - 160

Normal

20 - 50 3.5 - 5.5

Sharima

Dr. ANJANA SHARMA D.N.B PATHOLOGY

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TECHNICIAN

LDL: HDL Ratio

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UHID : 163038 VISITID : 0000307227

PATIENT NAME : MR. AAYUSH LAL ORDER DATE : 08/04/2023 9:09:00AM AGE/SEX : 36Y/MALE SAMP. DATE : 08/04/2023 9:52:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10431056

RESULT DATE : 08/04/2023 1:34:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD CO	DUNT)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	13.6 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	5.68 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	39.4 %	Low	41.5 - 50.4
RBC INDICES			
MCV	69.4 fl	Low	78 - 96
MCH	24.0 pg	Low	27 - 32
мснс	34.6 %	Normal	33 - 37
RDW	14.3 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	7400 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	64 %	Normal	0 - 75
LYMPHOCYTES	32 %	Normal	22 - 48
EOSINOPHILS	02 %	Normal	0 - 6
MONOCYTES	02 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	200000 /cumm	Normal	150000 - 450000

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CONSULTANT DOCTOR

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ORDER DATE

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AGE/SEX

: 36Y/MALE

SAMP. DATE

: 08/04/2023 9:52:00AM

INIT. DATE .

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: HOSPITAL CASE

SPEC. NO

: 10431056

RESULT DATE

: 08/04/2023 11:54:00AM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"B"		-
RH FACTOR	Positive		
BUN (BLOOD UREA NITROGEN) BUN (BLOOD UREA NITROGEN)	18.69 mg / dl	Normal	8 - 23
CREATININE SERUM CREATININE	0.91 mg/dL	Normal	0.3 - 1.5
GGT (GAMMA GLUTAMYL TRANSFER GGT (GAMMA GLUTAMYL TRANSFERASE)	13 U / L	Normal	8 - 52
URIC ACID URIC ACID	7.49 mg/dL	Normal	3.6 - 7.7

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Dr. ANJANA SHARMA D.N.B PATHOLOGY

CONSULTANT

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: 0000307227

: 08/04/2023 9:09:00AM

ORDER DATE SAMP. DATE

: 08/04/2023 9:52:00AM

SPEC. NO

: 10431050

RESULT DATE

: 08/04/2023 1:22:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.18 ng/ml

Normal

0 - 4

Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely.

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

Clinical Use

1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.

2) Followup and management of Prostate cancer patients

3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

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PARAMETER

VALUE

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: 36Y/MALE

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: 08/04/2023 9:52:00AM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10431055

RESULT DATE :

: 08/04/2023 2:10:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
BLOOD SUGAR - FASTING AND PP				
BLOOD SUGAR FASTING	118 mg/dL	Normal	80 - 120	
BLOOD SUGAR PP	144 mg/dL	High	120 - 140	
URINE SUGAR FASTING				
URINE FOR SUGAR	Nil		-	10

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ORDER DATE : 08/04/2023 9:09:00AM : MR. AAYUSH LAL PATIENT NAME : 08/04/2023 9:52:00AM SAMP. DATE : 36Y/MALE AGE/SEX

: 10431050 SPEC. NO : HOSPITAL CASE CONSULTANT DOCTOR

> : 08/04/2023 1:22:00PM RESULT DATE

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

REFERENCE RANGE RESULT VALUE **PARAMETER**

Normal 0.69 - 2.15T3 (TRIIODOTHYRONINE) 1.25 ng/ml Normal 52 - 127 T4 (THYROXINE) 95.90 ng/ml Normal 0.3 - 4.5TSH (THYROID STIMULATING 2.62 uIU/ml

HORMONE)

REFERENCE RANGE in uIU/mL REFERENCE GROUP

As per American Thyroid Association

0.30 - 4.5Adult Females (> 20 years)

Pregnancy

1st Trimester 0.10 - 2.500.20 - 3.002nd Trimester 0.30 - 3.003rd Trimester

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders

Thyroid dysfunction in infancy and early childhood

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ORDER DATE SAMP. DATE

: 08/04/2023 9:09:00AM

: 08/04/2023 9:52:00AM

SPEC. NO

: 10431057

RESULT DATE

: 08/04/2023 1:35:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED HEAMOGLOBIN)

7.2 %

High

Interpretation

As per American diabetes Association (ADA)

Reference Group

HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0

At risk (Prediabetes)

->=6.0 to <=6.5

Diagnosing diabetes

->=6.5

Therapeutic goals for glycemic control

- Age> 19 years

- Goal of therapy: <7.0

Action suggested: >8.0

- Age< 19 years

- goal of therapy: < 7.5

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appopriate.

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

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12/04/2023 2:53PM

Dr. ANJANA SHARMA D.N.B PATHOLOGY ONSULTAN

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Sparsh Multispecialty Hospital

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CERTIFIED

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PATIENT NAME : MR. AAYUSH LAL ORDER DATE : 08/04/2023 9:09:00AM

AGE/SEX : 36Y/MALE SAMP. DATE : 08/04/2023 12:01:00PM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10431074

RESULT DATE : 08/04/2023 1:36:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PHYSICAL EXAMINATION			
QUANTITY	10 ml		-
COLOUR	Pale Yellow		
APPEARANCE	Clear		-
REACTION	Acidic		-
CHEMICAL EXAMINATION			
ALBUMIN	Nil		-
SUGAR	Nil		
MICROSCOPIC EXAMINATION			
EPITHELIAL CELLS	4-6 /hpf		0 - 5
PUS CELLS	1-2 /hpf		1 - 2
RBC	Nil /hpf		-
CAST	Nil /lpf		
CRYSTAL	Nil		-
AMORPHOUS MATERIAL DEPOSIT	Nil		
OTHERS	Nil		-

TECHNICIAN

12/04/2023 2:53PM

Dr. ANJANA SHARMA
D.N.B PATHOLOGY

CONSULTANT

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: 08/04/2023 9:52:00AM

: HOSPITAL CASE

SPEC. NO

: 10431053

RESULT DATE

: 08/04/2023 1:35:00PM

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TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.76 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.16 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.60 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	109 U/L	Normal	0 - 270
SGOT	19 U/L	Normal	10 - 55
SGPT	29 U/L	Normal	0 - 40
TOTAL PROTEIN	7.17 g/dl	Normal	6 - 8
ALBUMIN	3.43 g/dl	Low	4 - 5
GLOBULIN	3.74 g/dl	High	2 - 3.5
A.G.RATIO	0.92:1		1 - 2.5

TECHNICIAN

Dr. ANJANA STARNA D. N.B. PATHOLOGY

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SAMP. DATE : 08/04/2023 9:52:00AM

CONSULTANT DOCTOR : HOSPITAL CASE

SPEC. NO

: 10431058

RESULT DATE: 08/04/2023 1:08:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	25 mm at end of 1 hr	High	0 - 15



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