



भारत सरकार
Government of India



नाम: Md Nazam Riza
जन्म तिथि: DOB 03 01 1991
पुरुष: MALE

Download Date: 30/09/2021

Date: 16/09/2021

2271 0431 2437

VID : 9160.0339 2431 6290

मेरा आधार, मेरी पहचान

ID: 870

Md. NAZIM RIZVI

Male 32Years

25-07-2023 10:11:35 AM

HR : 88 bpm

P : 84 ms

PR : 119 ms

QRS : 80 ms

QT/QTc : 330/401 ms

P/QRS/T : 63/74/14 °

RV5/SV1 : 1.307/0.753 mV

Diagnosis Information:

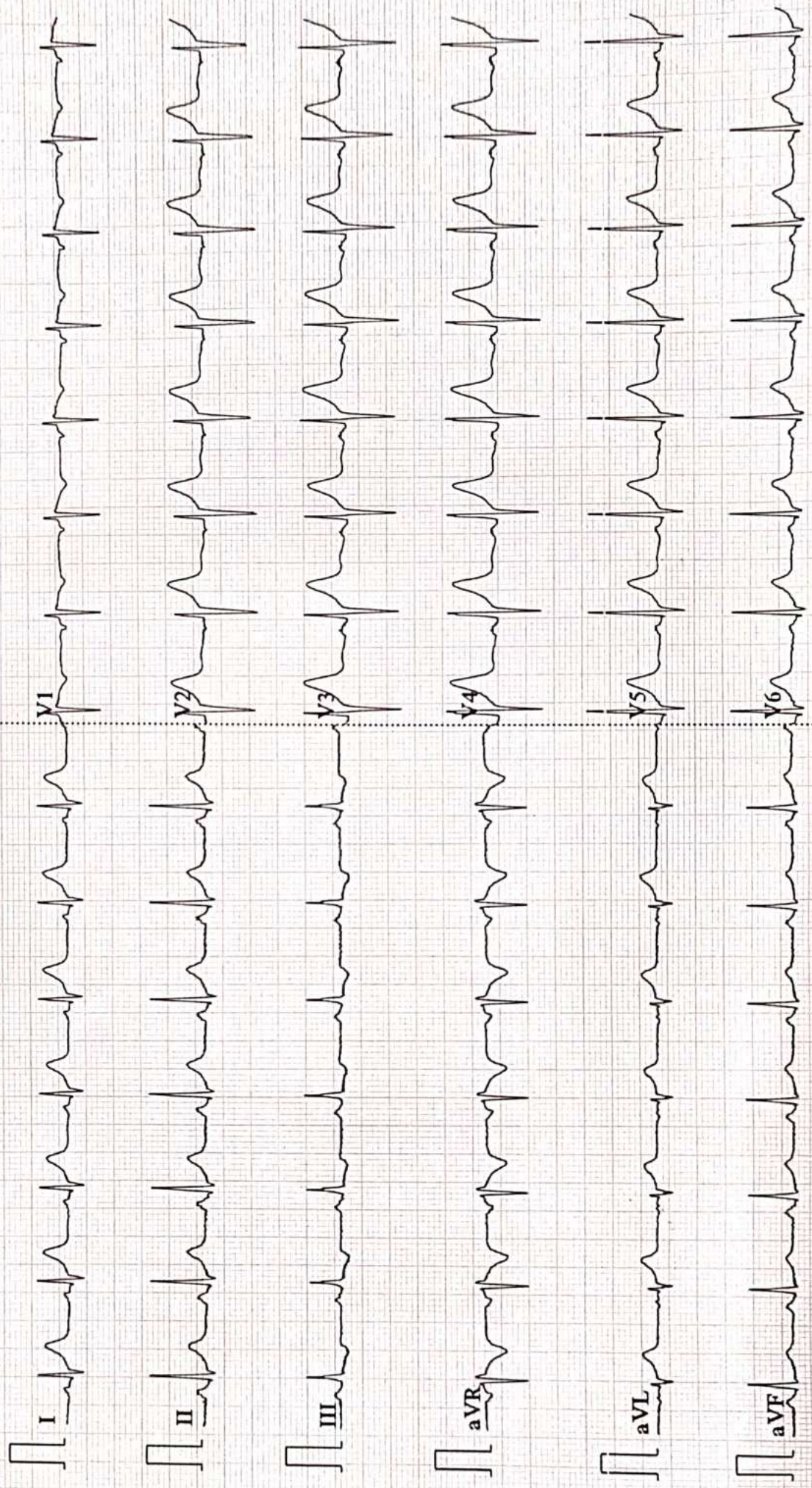
Sinus Rhythm

Larged PtfV1

Short PR Interval

Ref-Phys. :

Report Confirmed by:





ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date 25/07/2023	Srl No. 2	Patient Id 2307250002
Name Mr. MD NAZIM RIZVI	Age 32 Yrs.	Sex M
Ref. By Dr.BOB		

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.3	%	

EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** 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 **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** 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



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Name	Mr. MD NAZIM RIZVI	Age	32 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	13.0	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,500	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	63	%	40 - 75
LYMPHOCYTE	32	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	03	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN' s METHOD)	11	mm/1st hr.	0 - 15
R B C COUNT	4.33	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	39.09	%	40 - 54
M C V	90.28	fl.	80 - 100
M C H	30.02	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.16	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	92.6	mg/dl	70 - 110
SERUM CREATININE	0.89	mg%	0.7 - 1.4
BLOOD UREA	21.2	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.9	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			



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Name	Mr. MD NAZIM RIZVI	Age	32 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.69	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.27	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.42	mg/dl	0.00 - 0.70
TOTAL PROTEIN	7.3	gm/dl	6.6 - 8.3
ALBUMIN	3.9	gm/dl	3.4 - 5.2
GLOBULIN	3.4	gm/dl	2.3 - 3.5
A/G RATIO	1.147		
SGOT	40.9	IU/L	5 - 40
SGPT	44.5	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	89.3	U/L	40.0 - 130.0
GAMMA GT	22.5	IU/L	8.0 - 71.0

LFT INTERPRET

LIPID PROFILE

TRIGLYCERIDES	80.4	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	155.8	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	43.4	mg/dL	35.1 - 88.0
V L D L	16.08	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	96.32	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.59		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.219		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



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Name	Mr. MD NAZIM RIZVI	Age	32 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.025		
PH	6.0		
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	2-3	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	1-2	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

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.



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Name Mr. MD NAZIM RIZVI	Age 32 Yrs.	Sex M
Ref. By Dr.BOB		

Test Name	Value	Unit	Normal Value
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 hypothyroidism, and may be seen in secondary thyrotoxicosis.			

**** End Of Report ****

Dr.R.B.RAMAN
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AAROGYAM DIAGNOSTICS
PATNA

Report



(GEM212170906)(R)Kardic by Allengers

2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg Date: 25-Jul-2023 Technician : ARUN

Stage	Time	Duration	Belt Speed (mph)	Elevation	METs	Rate	% THR Achieved	BP	RPP	PVC	Comments
Supine	00:03	0:01	00.0	00.0	01.0	116	62 %	110/70	127	00	
Standing	00:09	0:01	00.0	00.0	01.0	117	62 %	110/70	128	00	
HV	00:18	0:01	00.0	00.0	01.0	117	62 %	110/70	128	00	
Warm Up	00:32	0:01	01.0	00.0	01.0	117	62 %	110/70	128	00	
ExStart	00:56	0:06	01.7	10.0	01.1	122	65 %	110/70	134	00	
BRUCE/ Stage 1	03:56	3:00	01.7	10.0	04.7	161	86 %	115/75	185	00	
BRUCE/ Stage 2	06:56	3:00	02.5	12.0	07.1	179	95 %	120/80	214	00	
PeakEx	09:00	2:04	03.4	14.0	09.3	194	103 %	125/85	242	00	
Recovery	09:59	1:00	01.1	00.0	01.2	182	97 %	120/80	218	00	
Recovery	10:59	2:00	01.1	00.0	01.0	160	85 %	115/75	184	00	
Recovery	12:36	3:36	01.1	00.0	01.0	156	83 %	110/70	171	00	

Findings :

Exercise Time : 08:05
Max HR Attained : 194 bpm 103% of Target 188
Max BP Attained : (Sys) 125/85
Max WorkLoad Attained : 9.3 Good response to induced stress
Max ST Dep Lead & Value : III & -2.0 mm in Stage 2 mm
Test End Reasons : Test Complete

Report :

AAROGYAM DIAGNOSTICS

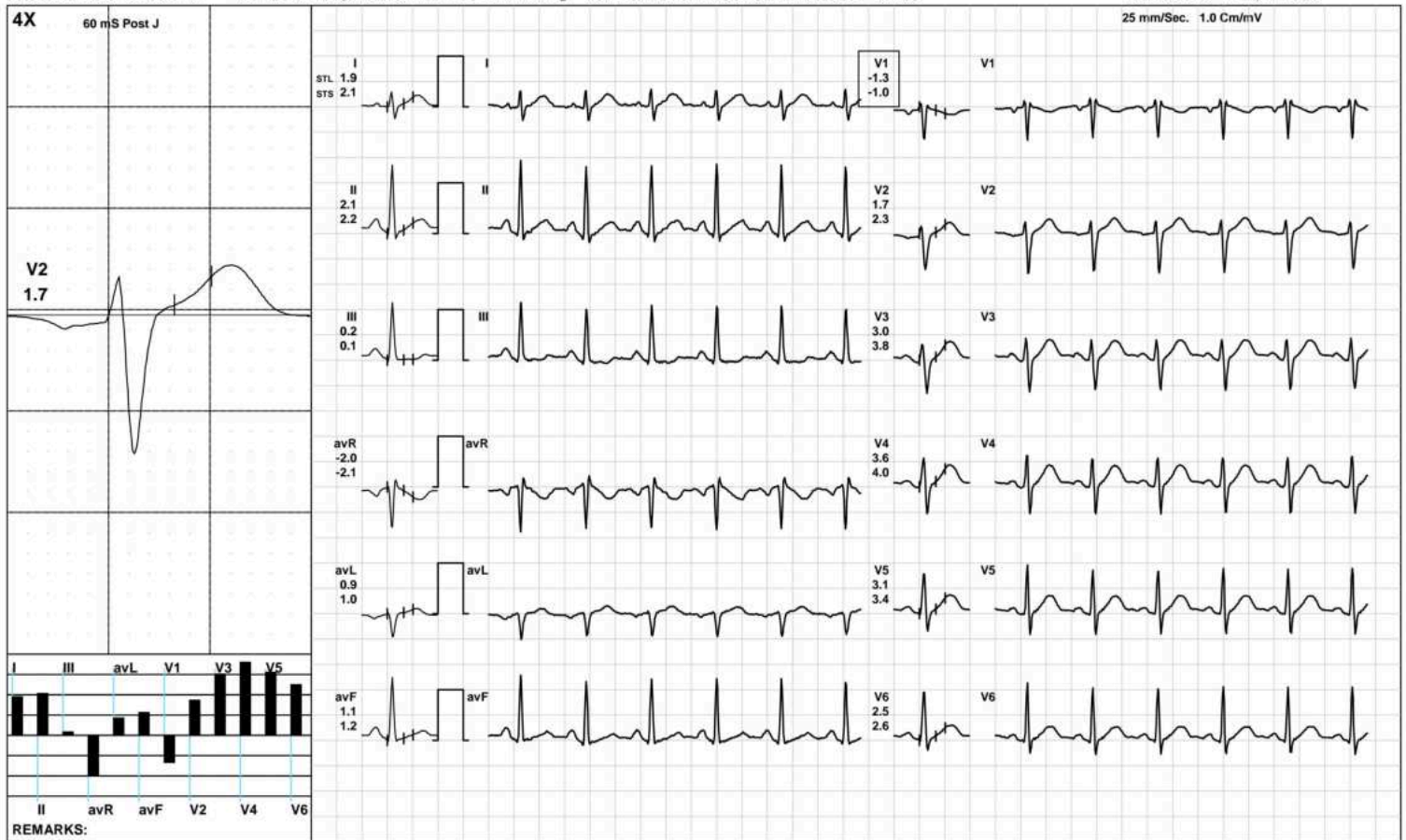
Supine



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 116

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 116 bpm 61% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:03 0.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

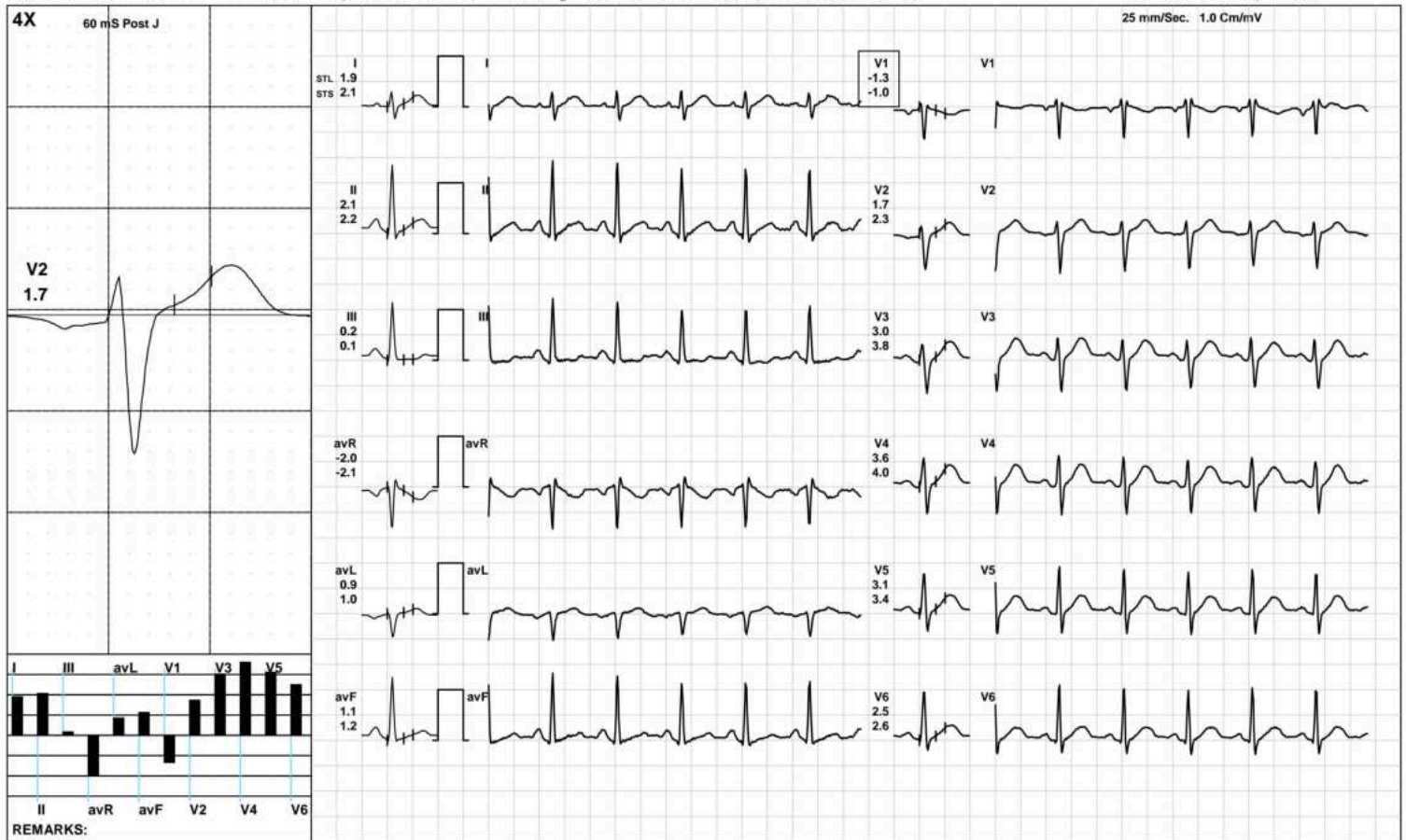
Standing



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 117

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 117 bpm 62% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:09 0.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

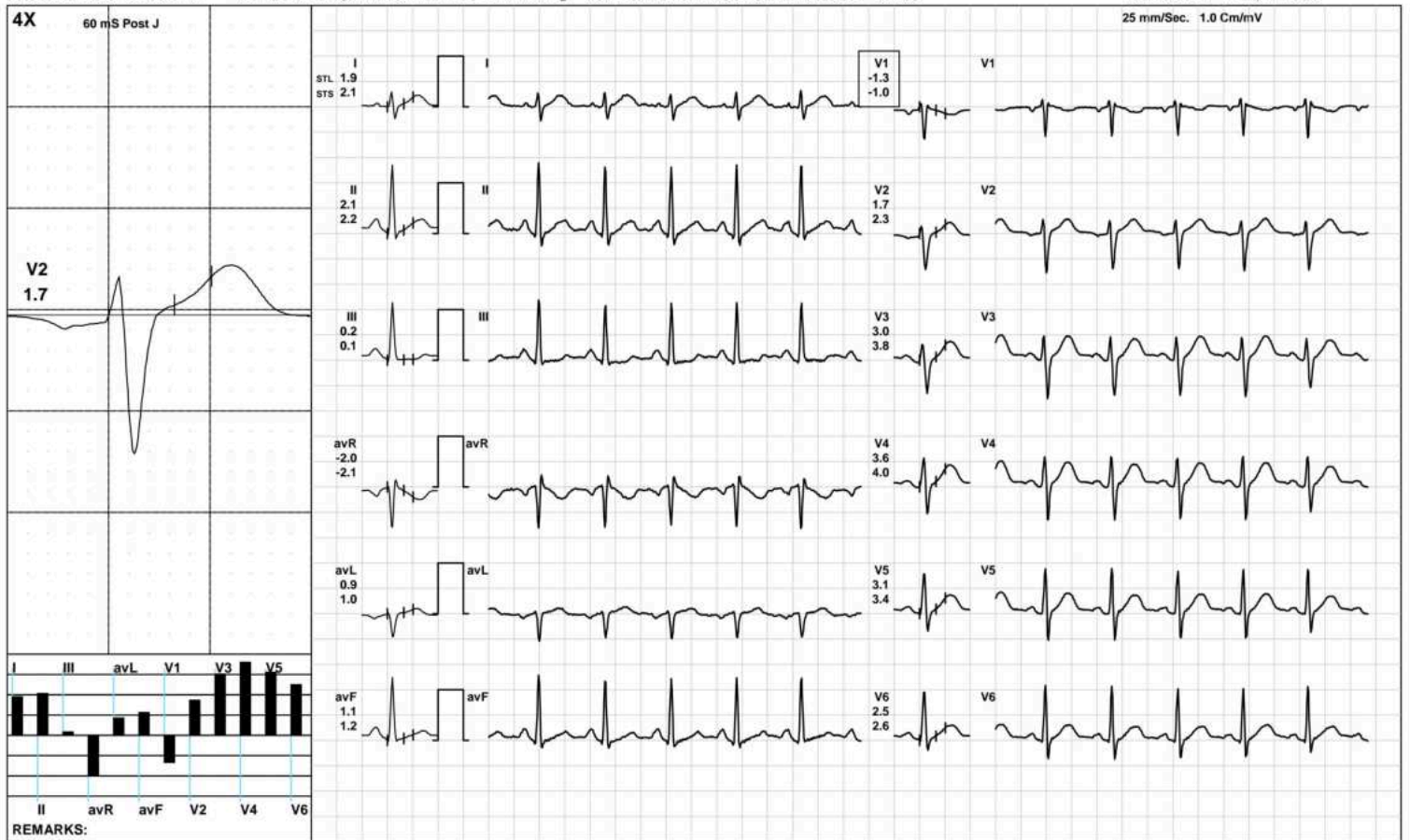
HV



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 117

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 117 bpm 62% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:18 0.0 mph, 0.0%



AAROGYAM DIAGNOSTICS

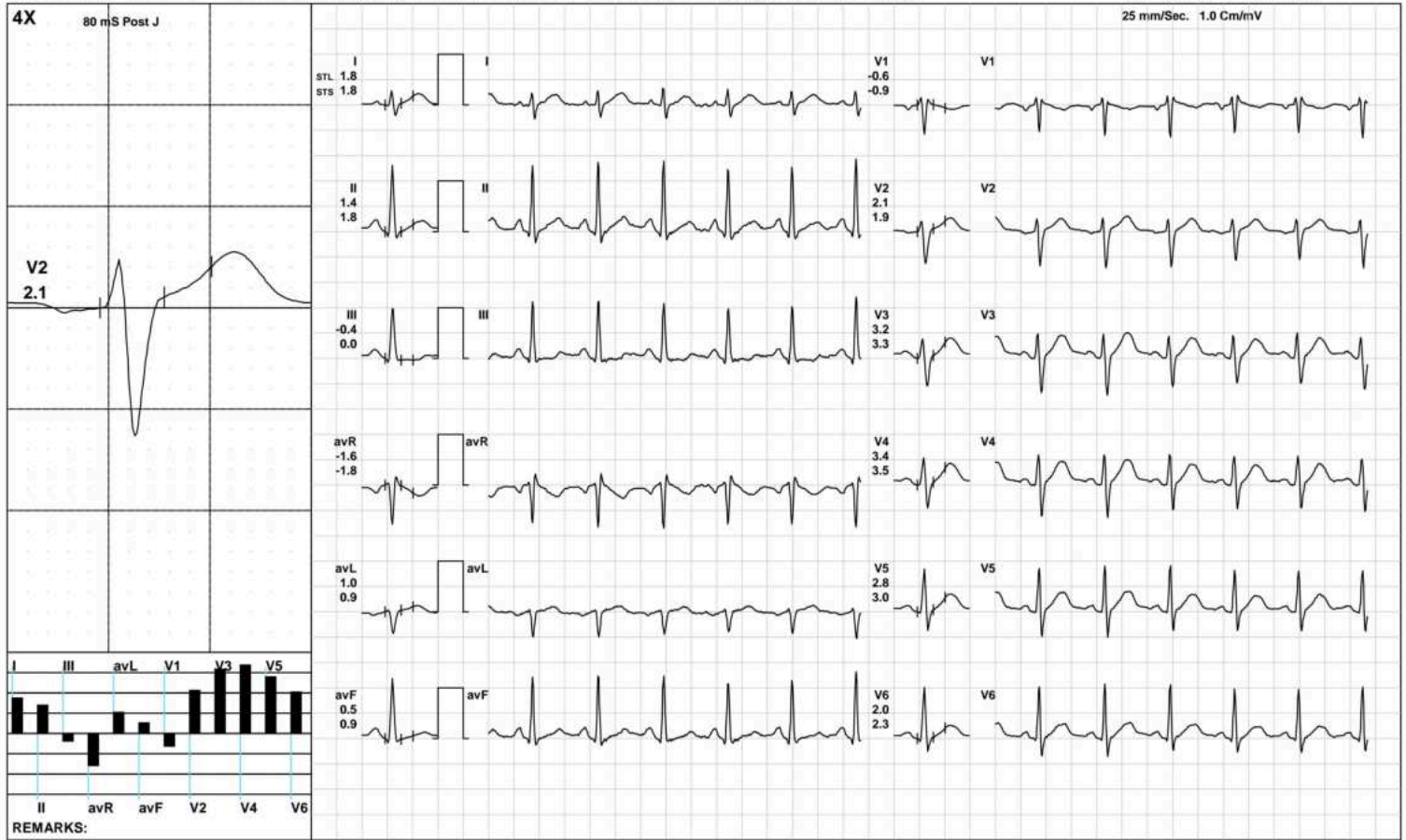
Warm Up



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 117

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 117 bpm 62% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:32 1.0 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

ExStart



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 122

Date: 25-Jul-2023 12:40:32 PM METS: 1.1/ 122 bpm 64% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:06 1.7 mph, 10.0%



AAROGYAM DIAGNOSTICS

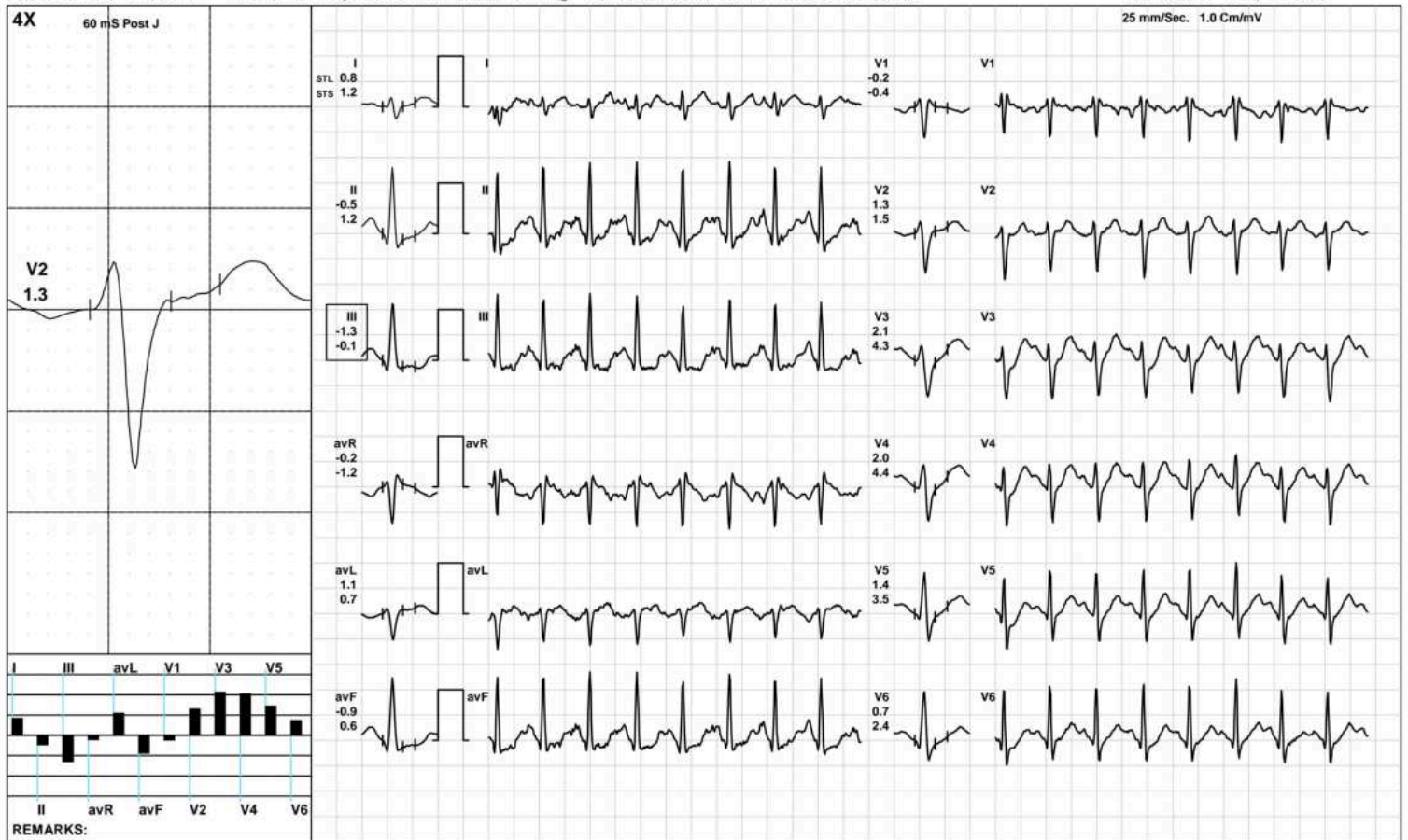
BRUCE:Stage 1(3:00)



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 161

Date: 25-Jul-2023 12:40:32 PM METS: 4.7/ 161 bpm 85% of THR BP: 115/75 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 03:00 1.7 mph, 10.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

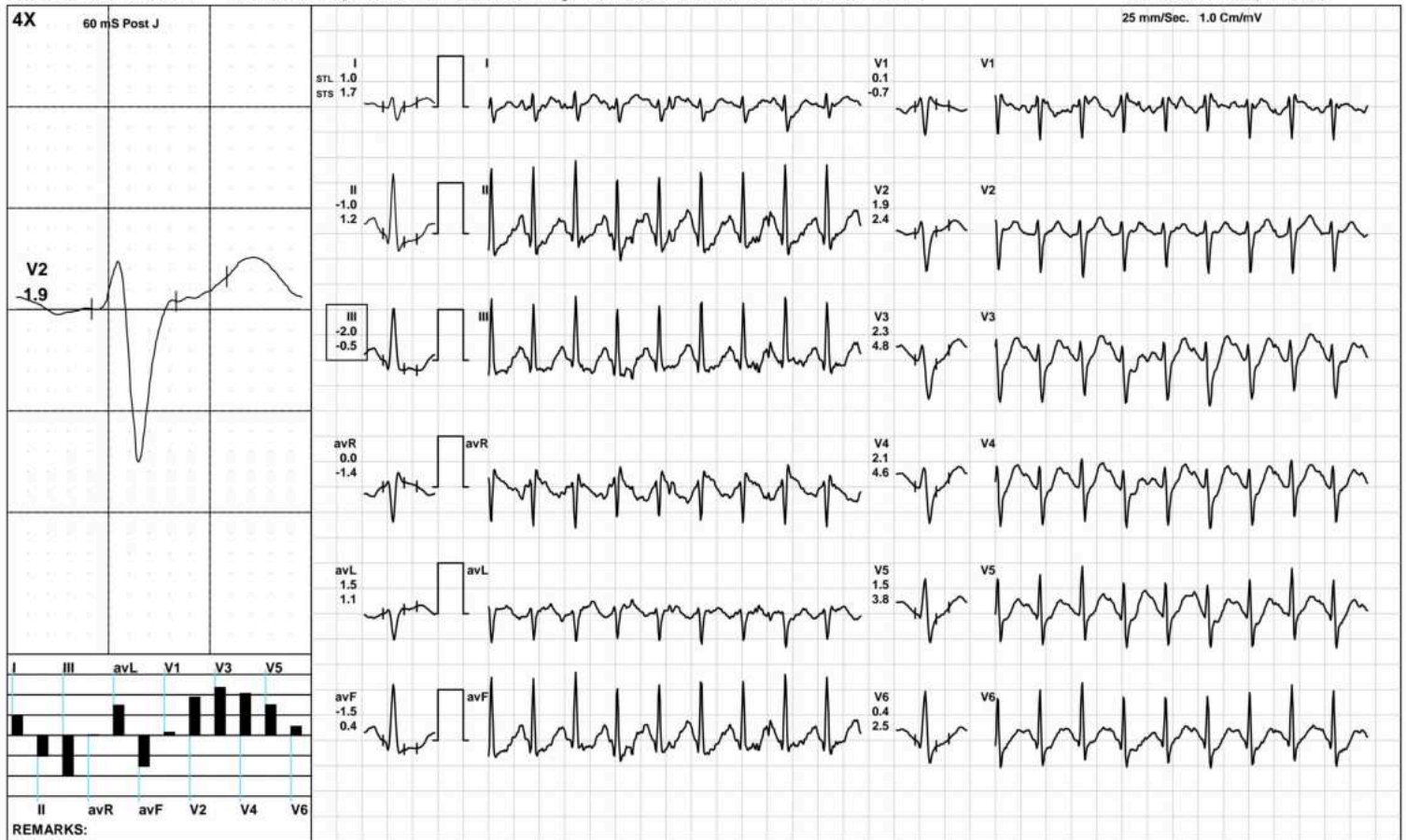
BRUCE: Stage 2(3:00)



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 179

Date: 25-Jul-2023 12:40:32 PM METS: 7.1/ 179 bpm 95% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 06:00 2.5 mph, 12.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

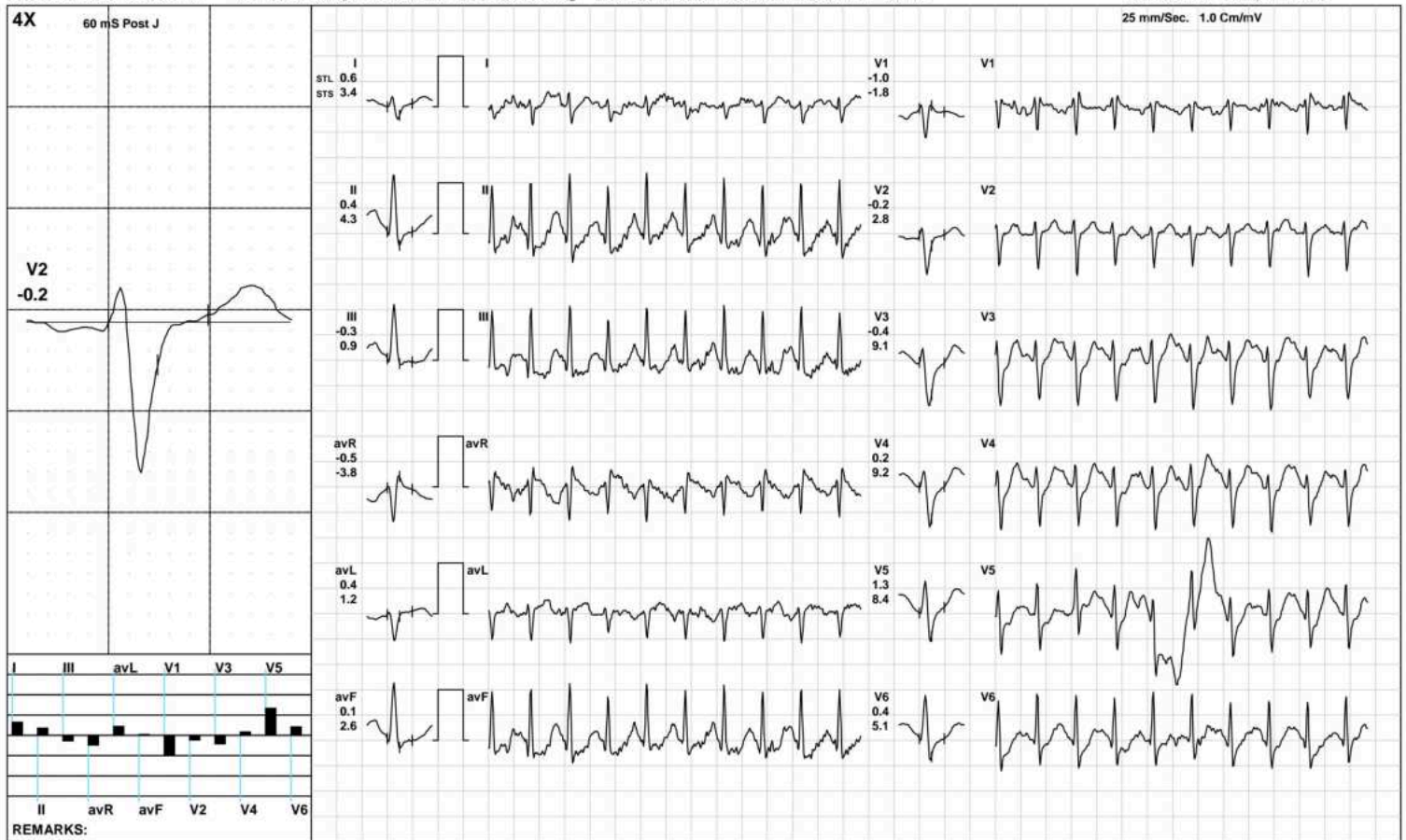
PeakEx



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 194

Date: 25-Jul-2023 12:40:32 PM METS: 9.3/ 194 bpm 103% of THR BP: 125/85 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 08:04 3.4 mph, 14.0%



AAROGYAM DIAGNOSTICS

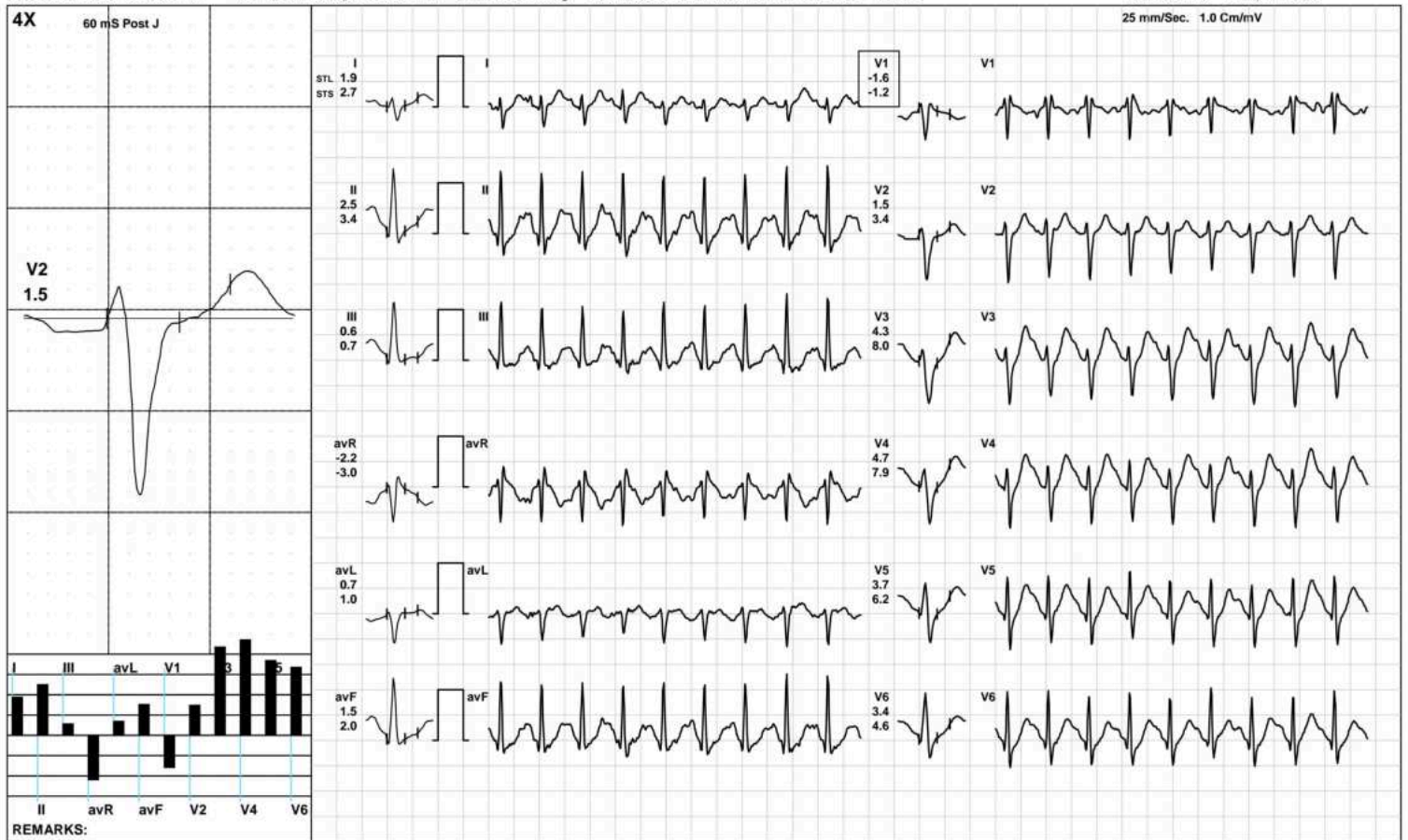
Recovery(1:00)



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 182

Date: 25-Jul-2023 12:40:32 PM METS: 1.2/ 182 bpm 96% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 08:05 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

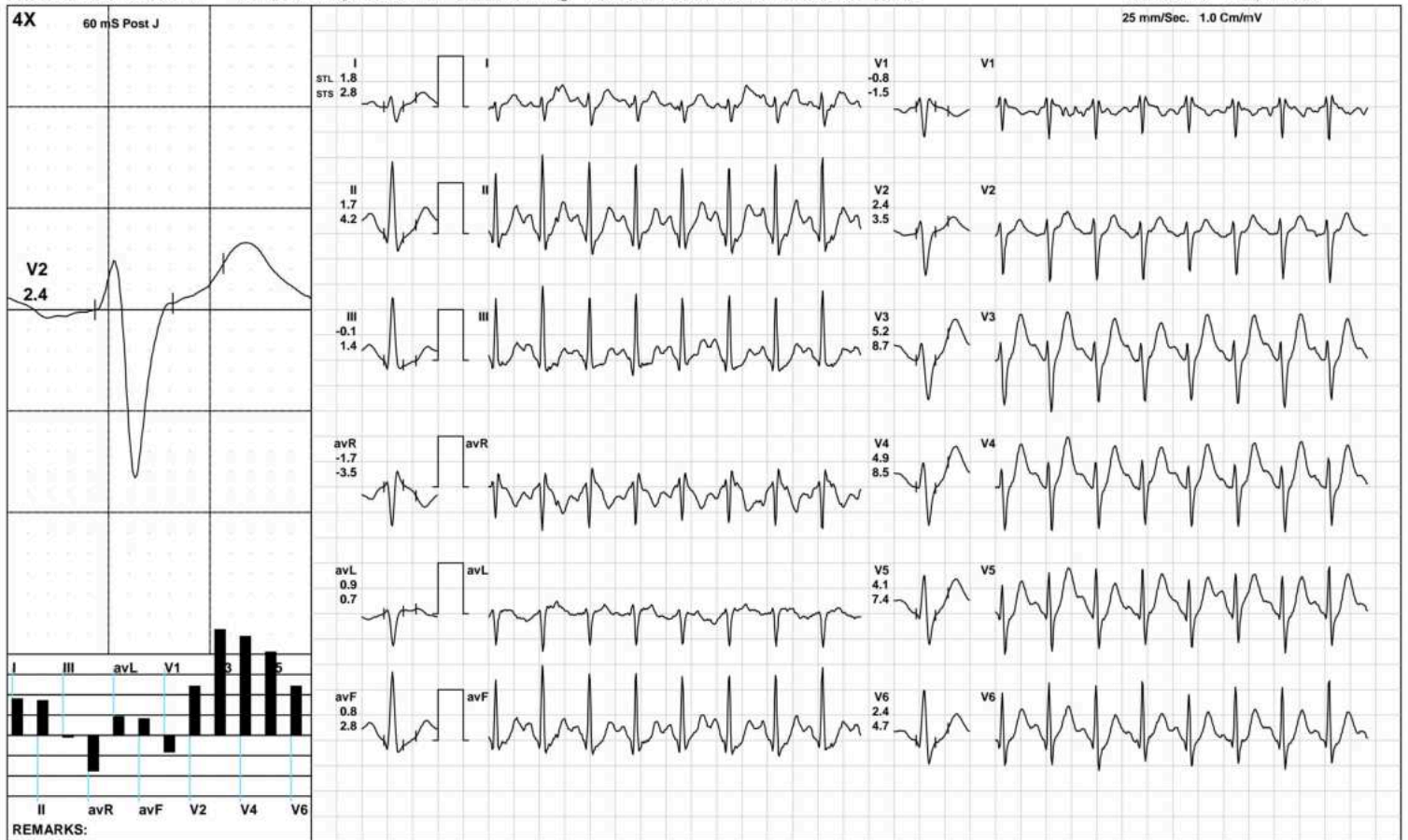
Recovery(2:00)



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 160

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 160 bpm 85% of THR BP: 115/75 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 08:05 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

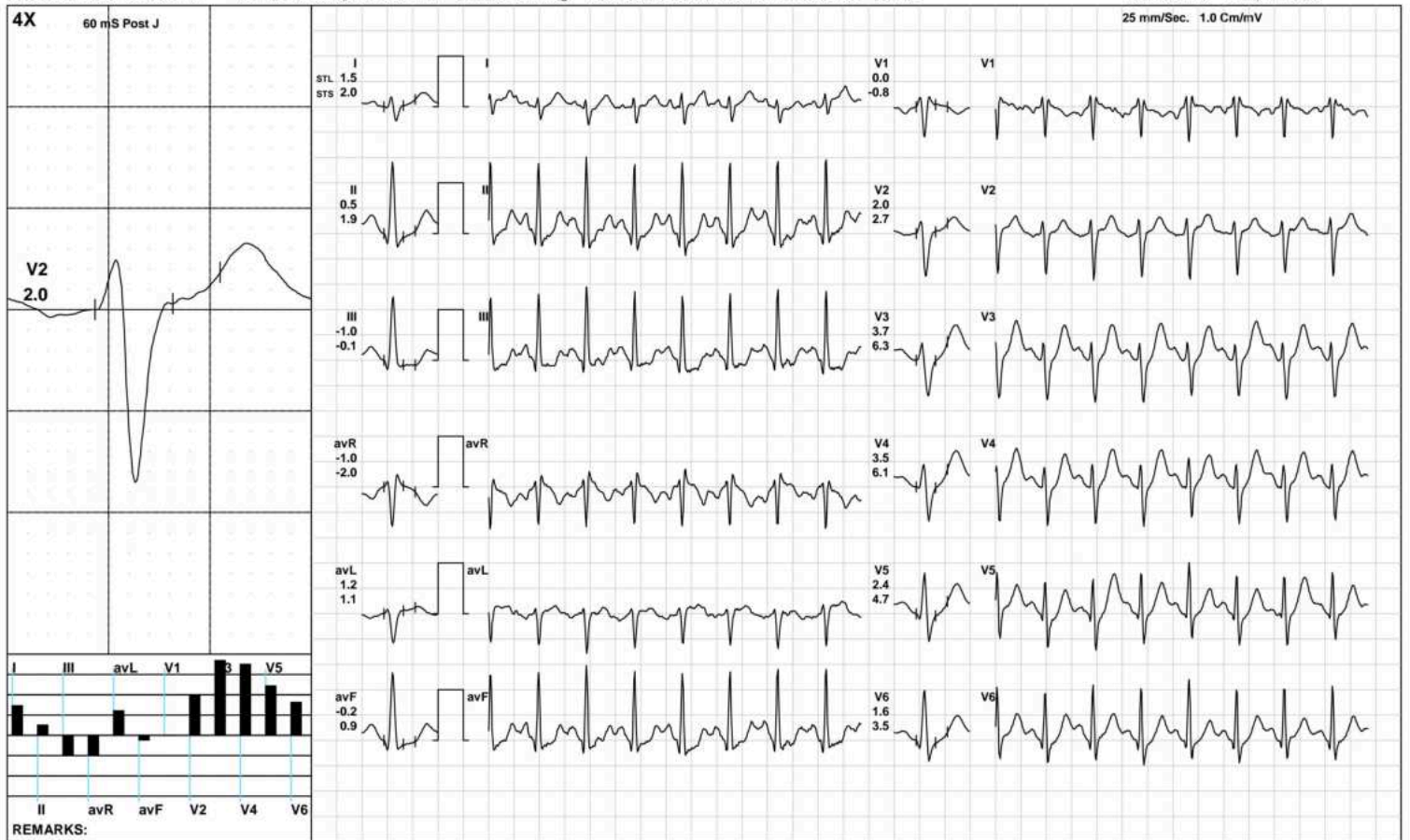
Recovery(3:36)



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 156

Date: 25-Jul-2023 12:40:32 PM METS: 1.0/ 156 bpm 82% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 08:05 1.1 mph, 0.0%



(GEM212170906)(R)Kardic by Allengers

AAROGYAM DIAGNOSTICS

ST Measurements



2164 / Md. MAZIM RIZVI / 32 Yrs / M / 175 Cms / 82 Kg / HR : 113

Date: 25-Jul-2023 12:40:32 PM

Protocol : BRUCE/

	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	STS(mv/sec)
STL(mm)Supine	1.9	2.1	0.2	-2.0	0.9	1.1	-1.3	1.7	3.0	3.6	3.1	2.5	2.1	2.2	0.1	-2.1	1.0	1.2	-1.0	2.3	3.8	4.0	3.4	2.6	
60 @mS Standing	1.9	2.1	0.2	-2.0	0.9	1.1	-1.3	1.7	3.0	3.6	3.1	2.5	2.1	2.2	0.1	-2.1	1.0	1.2	-1.0	2.3	3.8	4.0	3.4	2.6	
HV	1.9	2.1	0.2	-2.0	0.9	1.1	-1.3	1.7	3.0	3.6	3.1	2.5	2.1	2.2	0.1	-2.1	1.0	1.2	-1.0	2.3	3.8	4.0	3.4	2.6	
Warm Up	1.8	1.4	-0.4	-1.6	1.0	0.5	-0.6	2.1	3.2	3.4	2.8	2.0	1.8	1.8	0.0	-1.8	0.9	0.9	-0.9	1.9	3.3	3.5	3.0	2.3	
ExStart	1.3	1.8	0.3	-1.6	0.5	1.1	-0.7	2.1	4.6	5.0	4.1	3.1	1.5	2.5	0.7	-2.1	0.5	1.6	-1.4	2.0	5.1	5.6	4.8	3.7	
Stage 1	0.8	-0.5	-1.3	-0.2	1.1	-0.9	-0.2	1.3	2.1	2.0	1.4	0.7	1.2	1.2	-0.1	-1.2	0.7	0.6	-0.4	1.5	4.3	4.4	3.5	2.4	
Stage 2	1.0	-1.0	-2.0	0.0	1.5	-1.5	0.1	1.9	2.3	2.1	1.5	0.4	1.7	1.2	-0.5	-1.4	1.1	0.4	-0.7	2.4	4.8	4.6	3.8	2.5	
PeakEx	0.6	-1.2	-1.8	0.3	1.2	-1.5	0.2	1.3	1.4	1.4	1.8	0.1	1.7	1.8	0.2	-1.7	0.7	1.1	-0.5	1.5	4.8	4.7	4.3	2.5	
Recovery	1.9	2.5	0.6	-2.2	0.7	1.5	-1.6	1.5	4.3	4.7	3.7	3.4	2.7	3.4	0.7	-3.0	1.0	2.0	-1.2	3.4	8.0	7.9	6.2	4.6	
Recovery	1.8	1.7	-0.1	-1.7	0.9	0.8	-0.8	2.4	5.2	4.9	4.1	2.4	2.8	4.2	1.4	-3.5	0.7	2.8	-1.5	3.5	8.7	8.5	7.4	4.7	
Recovery	1.5	0.5	-1.0	-1.0	1.2	-0.2	0.0	2.0	3.7	3.5	2.4	1.6	2.0	1.9	-0.1	-2.0	1.1	0.9	-0.8	2.7	6.3	6.1	4.7	3.5	

	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	
STI(μVs)													
Supine		9.3	10.6	1.4	-10.1	4.0	6.0	-7.1	7.7	14.1	17.5	15.2	12.6
Standing		9.3	10.6	1.4	-10.1	4.0	6.0	-7.1	7.7	14.1	17.5	15.2	12.6
HV		9.3	10.6	1.4	-10.1	4.0	6.0	-7.1	7.7	14.1	17.5	15.2	12.6
Warm Up		9.9	7.5	-2.4	-8.7	6.1	2.6	-2.9	12.6	17.6	18.9	15.4	11.3
ExStart		6.0	7.6	1.4	-6.9	2.3	4.4	-2.8	10.2	22.3	23.8	19.4	14.7
Stage 1		2.4	-5.0	-7.4	1.2	5.0	-6.2	-0.5	4.6	3.7	3.2	1.4	-0.9
Stage 2		1.6	-8.8	-10.5	3.6	6.1	-9.7	1.7	5.3	2.0	0.8	-0.3	-3.6
PeakEx		1.0	-9.9	-10.4	4.3	5.4	-10.1	1.8	3.2	-1.8	-1.6	2.1	-5.1
Recovery		4.1	7.3	2.6	-5.9	1.1	4.9	-6.7	-0.2	6.0	8.5	6.5	8.8
Recovery		4.4	0.7	-3.7	-2.5	4.0	-1.6	-1.6	6.2	10.6	9.2	8.0	2.9
Recovery		4.4	-1.3	-5.7	-1.5	5.1	-3.5	1.7	5.8	8.1	7.4	4.1	2.1

Median Measurement Summary



Time (Min.)	HR (bpm)	PR Int (mS)	QRS Wid (mS)	QRS Axis (Deg.)	QTC (mS)	P(μV) (Max)	R(μV) (Max)	S(μV) (Min)	T(μV) (Max)	Min. J (μV)	Leads for (J & PJ)	Min. Post JRR Var (μV)	(%)	VEB (Counts)	Missed Beats (Counts)
00:30	112	156	56	87	469	236	1310	-800	460	85	V1	-49	0.00	0	0
01:00	128	150	60	90	454	235	1425	-791	596	104	V1	-31	0.00	0	0
01:30	152	130	56	90	360	266	1389	-796	428	-47	III	-55	0.00	0	0
02:00	155	104	48	92	362	278	1292	-764	438	-95	III	-76	0.00	0	0
02:30	164	112	48	95	349	280	1264	-796	465	35	III	-91	0.00	0	0
03:00	163	102	68	95	360	293	1255	-791	461	-153	III	-134	0.00	0	0
03:30	162	102	70	94	359	299	1305	-795	452	-162	III	-126	0.00	0	0
04:00	163	104	70	92	350	300	1322	-791	456	-181	III	-146	0.00	0	0
04:30	164	110	70	93	344	287	1301	-769	422	-220	III	-183	0.00	0	0
05:00	170	106	70	93	328	309	1258	-781	418	-218	III	-194	0.00	0	0
05:30	173	96	70	94	341	318	1213	-770	392	-209	III	-182	0.00	0	0
06:00	176	92	70	93	347	348	1227	-772	401	-209	III	-202	0.00	0	0
06:30	178	100	68	95	334	340	1196	-786	405	-218	III	-210	0.00	0	0
07:00	179	100	68	96	330	318	1218	-817	418	-205	III	-194	0.00	0	0
07:30	181	84	70	98	356	338	1187	-799	443	-220	III	-216	0.00	0	0
08:00	185	84	68	95	413	381	1200	-768	387	-239	III	-254	0.00	0	0
08:30	191	92	68	98	316	289	1106	-821	392	-216	III	-208	0.00	0	0
09:00	194	82	68	97	339	324	1037	-851	430	-221	III	-194	0.00	0	0
09:30	186	82	68	100	333	375	1118	-820	542	-195	III	-126	0.00	0	0
10:00	178	84	66	98	328	376	1219	-811	641	-181	III	-111	0.00	0	0
10:30	167	92	58	98	322	368	1302	-822	768	-56	III	-58	0.00	0	0
11:00	159	104	48	94	315	373	1354	-859	823	-36	III	-90	0.00	0	0
11:30	157	104	48	94	324	362	1433	-868	808	-11	III	-79	0.00	0	0
12:00	160	108	50	93	322	339	1437	-862	770	-15	III	-96	0.00	0	0



Name :- MD NAZIM RIZVI
Refd by :- CORP

Age/Sex :- 32Yrs/M
Date :- 25/07/23

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size(12.9cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size(9.4cm)with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.3cm and Left Kidney measures 9.8cm.
- U. Bladder**:- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (10cc) & echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Normal Scan.*

Dr. U. Kumar
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist



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 Regd. Of ce : 5th Floor, Doctor House, Nr. Parimal Garden, Ahmedabad-380006 Gujarat
 CIN: U85195GJ2009PLC057059



30704100472

TEST REPORT

Reg.No : 30704100472	Reg.Date : 26-Jul-2023 12:29	Collection : 26-Jul-2023 12:29
Name : MD. NAZIM RIZAVI		Received : 26-Jul-2023 12:29
Age : 32 Years	Sex : Male	Report : 26-Jul-2023 15:03
Referred By : AAROGYAM DIAGNOSTICS @ PATNA		Dispatch : 26-Jul-2023 15:22
Referral Dr : □	Status : Final	Location : 41 - PATNA

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine)	1.50	ng/mL	0.6 - 1.52
T4 (Thyroxine) <small>CMIA</small>	7.29	µg/dL	5.5 - 11.0
TSH (ultra sensitive) <small>CMIA</small>	3.109	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

----- End Of Report -----

Dr. Jwalant Shah
 M.D. Pathology
 G-7593

(Signature)

Dr. Avani Patel
 M.D. Biochemistry
 Reg No.- G-34103