

# 2DECHO&DOPPLER REPORT

NAME: MR. KARANDE SACHIN AGE: 44 Yrs/M DATE: 17 /04 /2023

MITRAL VALVE: has thin leaflets with normal subvalvar motion.

No mitral regurgitation.

AORTIC VALVE: has three thin leaflets with normal opening

No aortic regurgitation.

PULMONARY VALVE; NORMAL,

LEFT VENTRICLE: is normal, has normal wall thickness, No RWMA at rest.

Normal LV systolic function. EF - 60%.

LEFT ATRIUM: is normal.

RIGHT ATRIUM & RIGHT VENTRICLE: normal in size. TRICUSPID VALVE & PULMONARY VALVES: normal.

Trivial TR, No PH.

No pericardial effusion.

M- MODE:

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
25mm	29mm	45mm	22mm	10mm	10mm	60%

IMP:

Normal LV Systolic function. EF-60%.

No diastolic dysfunction

No RWMA at rest

**Normal Valves and Chambers** 

IAS & IVS Intact

No clot / vegetation / thrombus / pericardial effusion.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD Regd. No. 090812

DR. YATIN VISAVE

MBBS, DMRD (RADIOLOGY)



Name:

KARANDE SACHIN.

Age:

0

044 Years

Gender: PID:

P00000508183

OPD:

Exam Date :

17-Apr-2023 09:51

Accession:

Physician:

Exam:

96401110258

ABD

ABDOMEN AND PELVIS

HOSPITAL CASE^^^^

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen. Pancreas appears normal in size and echotexture. No focal lesion is seen. Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 10.8 x 4.6 cms. Left kidney measures 10.1 x 4.6 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

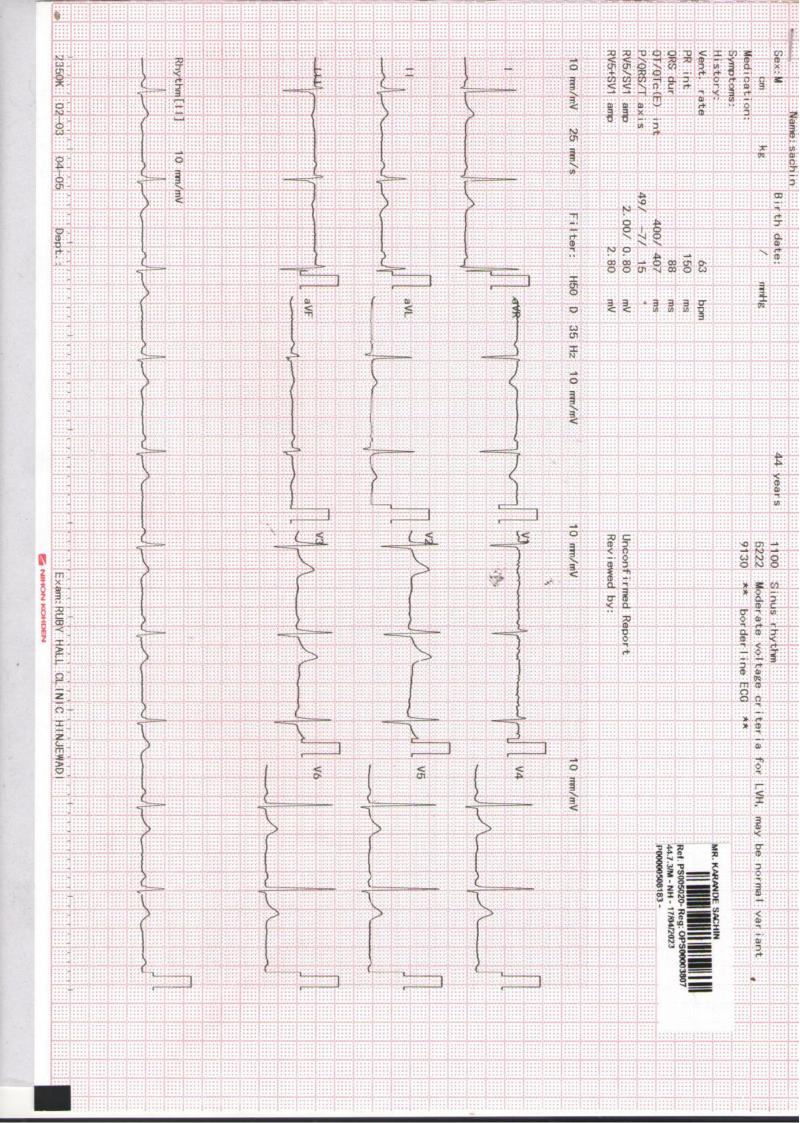
Visualised bowel loops are non-dilated and show normal peristalsis. There is no ascites or significant lymphadenopathy seen.

IMPRESSION : No significant abnormality noted.

Suggest: Clinical correlation.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD Regd. No. 090812

Date: 18-Apr-2023 12:05:40





Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

# **OPHTHALMOLOGY**

NAME: Sachin. R. K.

AGE: 44 /M

R -0.25 X180.

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Aaa+1.25

unaided	616	
1) Vision	-1-	
2) Near Vision unaided	616	
c glasses_	-1-	
3) Binocular Vision		
4) Colour Vision	NAD	
5) Tension		Page 197
6) Anterior Segment	* *	
7) Pupils		The state of the s
8) Lens		
9) Media & Fundus		
10) Remarks		K Supplement
Activities and adjust the		At a second trans
	- Access 1	0
Date: 17/4/23		(Signature)



 Patient Name
 : Mr.KARANDE SACHIN
 Bill Date
 : 17-04-2023 09:30 AM

 Age / Gender
 : 44Y(s) 7M(s) 3D(s)/Male
 Collected Date
 : 17-04-2023 02:10 PM

 Bill No/UHID No
 : PS005020/P00000508183
 Report Date
 : 17-04-2023 04:03 PM

Referred By : HOSPITAL CASE Processing Loc : RHC Hinjawadi

# **Department Of Laboratory -BIOCHEMISTRY**

<u>Investigation</u>	<u>Result</u>	<u>Biological</u> <u>Reference Interval</u>	<u>Method</u>
UREA NITROGEN(BUN)	<b>:</b> 7.9	6.0 - 20.0 mg/dL	Calculated
UREA	<b>:</b> 16.9	12.8-42.8 mg/dL	Urease
CALCIUM	<b>:</b> 9.0	8.6 - 10.2 mg/dL	Arsenazo
CREATININE	<b>:</b> 0.7	0.6 - 1.3 mg/dL	Enzymatic
<b>ELECTROLYTES (Na &amp; K)</b>			
SODIUM	: 148.0	136.0 - 145.0 mmol/L	Potentiometric
POTASSIUM	<b>:</b> 3.6	3.5 - 5.1 mmol/L	Potentiometric
CHLORIDE	: 103.0	98.0 - 107.0 mmol/L	Potentiometric
CLUCOCE (FACTING)			
GLUCOSE (FASTING)	- 07 0	Dradiabatia + 100	COD DOD
GLUCOSE (FASTING).	<b>:</b> 97.0	Prediabetic : 100 - 125 mg/dL	GOD-POD
		Diabetic: >= 126 mg/dL	
		Normal : < 100.0 mg/dL	
REFERENCE : ADA 2015 GUIDELINES			
LIVER FUNCTION TEST			
TOTAL BILIRUBIN	: 1.8	0.3 - 1.2 mg/dL	Diazo
DIRECT BILIRUBIN	: 0.1	0-0.4 mg/dL	Diazo
INDIRECT BILIRUBIN	: 1.7	0.0 - 0.8 mg/dL	Diazo
ALANINE TRANSAMINASE	<b>:</b> 33.0	<50 U/L	Kinetic
ASPARTATE TRANSAMINASE	<b>:</b> 38.0	10.0 - 40.0 U/L	Kinetic
ALKALINE PHOSPHATASE	<b>:</b> 62.0	30.0 - 115.0 U/L	4NPP/AMP BUFFER
TOTAL PROTEIN	<b>:</b> 7.5	6.0 - 8.0 g/dl	Biuret
ALBUMIN	<b>:</b> 4.7	3.5-4.8 g/dl	BCG
GLOBULIN	<b>:</b> 2.8	2.3-3.5 gm/dL	Calculated
A/G RATIO	<b>:</b> 1.68		Calculated
LIPID PROFILE			
CHOLESTEROL	: 198.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	<b>:</b> 176.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	<b>:</b> 40.0	35-65 mg/dL	Enzymatic
LDL CHOLESTEROL	<b>:</b> 122.8	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	<b>:</b> 35.2	5.0-36.0 mg/dL	Calculated
CHOL/HDL RATIO	<b>:</b> 4.95	2.0-6.2	Calculated
<b>PHOSPHOROUS</b>			
PHOSPHORUS	<b>:</b> 2.9	2.7-4.5 mg/dL	Phospho Molybdate
GLUCOSE (POST PRANDIAL)	<b>:</b> 123	60-140 mg/dL	GOD-POD

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 Age / Gender
 : 44Y(s) 7M(s) 3D(s)/Male
 Collected Date
 : 17-04-2023 01:53 PM

 Bill No/UHID No
 : PS005020/P00000508183
 Report Date
 : 17-04-2023 04:33 PM

Lab No/Result No : 2300021995/38273 Specimen : SERUM

Referred By : HOSPITAL CASE Processing Loc : RHC Hinjawadi

# **Department Of Laboratory -BIOCHEMISTRY**

<u>Investigation</u>	<u>Result</u>	<u>Biological</u> <u>Reference Interval</u>	<u>Method</u>
<b>PROSTATE SPECIFIC ANTIGEN</b>	I (PSA)		
Prostate Specific Antigen (PSA)	: 0.490	00-4.0 ng/ml	Enhanced Chemiluminiscence
TOTAL PROTEIN	<b>:</b> 7.5	6.0 - 8.0 g/dl	Biuret
ALBUMIN	<b>:</b> 4.7	3.5-4.8 g/dl	BCG
GLOBULIN	<b>:</b> 2.8	2.3-3.5 gm/dL	Calculated
A/G RATIO	<b>:</b> 1.68		Calculated
URIC ACID	: 6.5	3.5-7.2 mg/dL	Uricase

\*\*\* End Of The Report \*\*\*

Note : This test is performed on automated analyzer - VITROS250  $\,$ 

**Verified By** SOPAN

Dr.Anjana Sanghavi Consultant Pathologist

#### NOTE:

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.
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 Bill No/UHID No
 : PS005020/P00000508183
 Report Date
 : 17-04-2023 04:09 PM

Lab No/Result No: 2300021997-G/38273Specimen: WHOLE BLOODReferred By: HOSPITAL CASEProcessing Loc: RHC Hinjawadi

# **Department Of Laboratory -HAEMATOLOGY**

<u>Investigation</u> Result Biological Method Reference Interval

**GLYCOSYLATED HAEMOGLOBIN (HbA1C)** 

GLYCOSYLATED HAEMOGLOBIN : 4.7 Prediabetic: 5.7 - 6.4 % HPLC (HBA1c) Diabetic: >= 6.5 %

(HBA1c) Diabetic : >= 6.5 %Therapeutic Target : <7.0

%

REFERENCE: ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

Note: This test is performed on automated analyzer - Verified By

Anand

Dr.Anjana Sanghavi Consultant Pathologist

#### NOTE:

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 Bill No/UHID No
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 Report Date
 : 17-04-2023 05:54 PM

Lab No/Result No : 2300021995/38273 Specimen : SERUM

Referred By : HOSPITAL CASE Processing Loc : RHC Hinjawadi

## **Department Of Laboratory -BIOCHEMISTRY**

<u>Investigation</u>	<u>Result</u>	<u>Biological</u> <u>Reference Interval</u>	<u>Method</u>
<u>T3-T4-TSH</u>			
Tri-iodothyronine, (Total T3)	<b>:</b> 1.12	0.87-1.78 ng/ml	ECLIA
THYROXINE (T4), TOTAL	<b>:</b> 7.67	4.6 - 10.5 ug/dl	ECLIA
THYROID STIMULATING HORMONE (ULTRA).	: 4.48	0.28-3.89 uIU/mL	ECLIA

TSH - For pregnancy the referance range is as follows -

1st -trimester : 0.6 - 3.4 uIU/mL 2nd trimester : 0.37 - 3.6 uIU/mL 3rd trimester : 0.38 - 4.04 uIU/mL

\*\*\* End Of The Report \*\*\*

Note: This test is performed on automated analyzer - COBAS E411

**Verified By** SOPAN

Dr.Anjana Sanghavi Consultant Pathologist

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 Report Date
 : 17-04-2023 04:54 PM

Lab No/Result No : 2300021996/38273 Specimen : URINE

Referred By : HOSPITAL CASE Processing Loc : RHC Hinjawadi

## **Department Of Laboratory -CLINICAL PATHOLOGY**

<u>Investigation</u> <u>Result</u> <u>Biological</u> <u>Method</u> Reference Interval

**URINE ROUTINE** 

**PHYSICAL EXAMINATION** 

COLOUR : Pale Yellow APPEARANCE : Clear

**CHEMICAL TEST** 

5.0-7.0 : 5.5 1.015-1.030 SPECIFIC GRAVITY : 1.005 **ALBUMIN** : Absent Abset **URINE SUGAR** : Absent Absent KETONE BODIES : Absent Absent BILE PIGMENTS/ BILIRUBIN : Absent Absent **UROBILINOGEN** : Normal Normal **NITRITES** : Absent Absent LEUCOCYTES ESTERASE : Absent Absent

MICROSCOPIC TEST

PUS CELLS. : 2-3 0 - 5 /hpf RED BLOOD CELLS. : Absent 0 - 2 /hpf EPITHELIAL CELLS. : 2-3 0-5 /hpf Absent **BACTERIA** : Absent **CAST** : Absent Absent YEAST CELLS : Absent Absent **CRYSTALS** : Absent Absent **OTHERS** Absent : Absent

\*\*\* End Of The Report \*\*\*

Note: This test is performed on automated analyzer - URI PLUS200 Verified By

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Dr.Anjana Sanghavi Consultant Pathologist

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 Age / Gender
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 Collected Date
 : 17-04-2023 01:53 PM

 Bill No/UHID No
 : PS005020/P00000508183
 Report Date
 : 17-04-2023 05:39 PM

Lab No/Result No: 2300021997/38273Specimen: WHOLE BLOODReferred By: HOSPITAL CASEProcessing Loc: RHC Hinjawadi

# **Department Of Laboratory -HAEMATOLOGY**

<u>Investigation</u> <u>Result</u> <u>Biological</u> <u>Method</u>

**Reference Interval** 

BLOOD GROUP : A RH POSITIVE

**Erythrocyte Sedimentation Rate** 

ESR at 1 Hour : 20 0 - 15 mm/hr Modified Westergren Method

INTERPRETATION:

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to moniter course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

Verified By SOPAN

> Dr.Anjana Sanghavi Consultant Pathologist

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Age / Gender : 44Y(s) 7M(s) 3D(s)/Male **Collected Date** : 17-04-2023 01:53 PM Bill No/UHID No : PS005020/P00000508183 **Report Date** : 17-04-2023 03:39 PM

Lab No/Result No **Specimen** : WHOLE BLOOD : 2300021997/38273 **Processing Loc** : HOSPITAL CASE : RHC Hinjawadi **Referred By** 

Department Of Laboratory -HAEMATOLOGY					
Investigation	Result	Biological Reference Interval	<u>Method</u>		
HAEMOGRAM REPORT					
W.B.C.COUNT	<b>:</b> 4850	4000-11000 /ul	Coulter Principle		
NEUTROPHILS	<b>:</b> 57.8	40-75 %	Derived from WBC Histogram		
LYMPHOCYTES	<b>:</b> 31.5	20-40 %			
MONOCYTES	: 6.6	2-10 %			
EOSINOPHILS	<b>:</b> 3.5	1.0-6.0 %			
BASOPHILS	: 0.6	0.0-1.0 %			
%IMMATURE GRANULOCYTES	: 0.2	0.00-0.10 %			
ABSOLUTE NEUTROPHIL COUNT	<b>:</b> 2.8	2-7 x10 <sup>3</sup> cells/ul	Calculated		
ABSOLUTE LYMPHOCYTE COUNT	: 1.5	1 - 3 x10³cells/ul	Calculated		
ABSOLUTE MONOCYTE COUNT	: 0.3	0.2-1.0 x10 <sup>3</sup> cells/ul	Calculated		
ABSOLUTE EOSINOPHIL COUNT	: 0.2	0.02-0.5 x10 <sup>3</sup> cells/ul	Calculated		
ABSOLUTE BASOPHIL COUNT	: 0.0	0.02-0.1 x10 <sup>3</sup> cells/ul	Calculated		
R.B.C COUNT	<b>:</b> 4.62	4.5 - 6.5 million/ul	Coulter Principle		
HAEMOGLOBIN	: 14.3	13 - 17 g/dl	Cyanmethemoglobin Photometry		
HAEMATOCRIT	<b>:</b> 43.3	40-50 %	Calculated		
MCV	<b>:</b> 93.7	83-99 fl	Coulter Principle		
MCH	: 31.0	27 - 32 pg	Calculated		
MCHC	<b>:</b> 33.0	31.5 - 34.5 g/dl	Calculated		
RDW	: 13.4	11.6-14.0 %	Calculated From RBC Histogram		
PLATELET COUNT	<b>:</b> 278.0	150 - 450 x10³/ul	Coulter Principle		
MPV	: 10.7	7.8-11 fl	Coulter Principle		
RBC MORPHOLOGY	: Normocytic normochromic				
WBC MORPHOLOGY	: Within normal range				
PLATELET	: Adequate				

\*\*\* End Of The Report \*\*\*

Note: This test is performed on automated analyzer - SYSMEX550 Verified By

AMOL

Dr.Anjana Sanghavi **Consultant Pathologist** 

NOTE:

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