

नाम  
Name  
सन्दीप  
Sandeep  
E.C. No. 180740



  
बारीकला प्राधिकारी  
Issuing Authority

  
धारक के हस्ताक्षर  
Signature of Holder


 भारत सरकार  
GOVERNMENT OF INDIA

 मदीग  
Sandeep  
जन्म वर्ष / Year of Birth : 1988  
पुरुष / Male




8269 8697 6364


आधार - आम आदमी का अधिकार


 भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA


पता: S/O धर्मवीर, २२५/६, जोहरी  
नगर, लाखा गाँव, बहादुरगढ़, बहादुरगढ़,  
झज्जर, H, 124507

Address: S/O Dharmvir,  
225/6, johri nagar, lino paar,  
Bahadurgarh, Bahadurgarh,  
Jhajjar, Haryana, 124507

 1947  
1800 730 1947

 help@uidai.gov.in

 www.uidai.gov.in

 P.O. Sec.No:1947,  
Bhagpur, 124507



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# Ivy Hospital

**SUPER-SPECIALITY HEALTHCARE**  
**SECTOR 71, MOHALI**  
**Tel: 0172-7170000**  
**CIN No. : U85110PB2005PTC027898**

## Bill of Supply

Bill No	2023241024602	Reg ID	1875547
Bill To	Mediwheel Acrofemi	Sex/Age	Male/34 Yrs/4 Mt/28 Days
TPA	Mediwheel Acrofemi	Consultant	DR. Direct
UHID	366380	Referred By	Direct
Name	MR. SANDEEP S/O Dharanvir	GST No.	03AABCI4594F12Q
Address	#153 D 4TH FLOOR SEC-51A	Category	Health Services
Phone No	9812196852	Policy No.	180740 BANK OF BARODA
UTI/Claim/Ref.	180740 BANK OF BARODA/	Fan No	AABCI4594F

Sr.	Date	Code/Batch	Activity Desc.	Rate	Qty.	Amount
					1	2200
1	09-Jun-23		OPD Package Charges	2200	1	2200
			Bill Amount			2200
			Net Amount			2200
			Advance Amount			0
			CSR/Discount			0
			Ward Charges Reversed			0
			Receipt Amount			0
			Refund Amount			0
			Payable Amount			2200

Authorised Signatory



### FOR OPD / DISCHARGE SUMMARY / BILLING PURPOSE ONLY

A unit of Ivy Health and Life Sciences (P) Ltd. Website : [www.ivyhospital.com](http://www.ivyhospital.com), Email: [cs@ivyhospital.com](mailto:cs@ivyhospital.com) Fax: 91-172-2274900  
Regd. Office: Administration Block, Ivy Hospital, Sector-71, S.A.S Nagar Mohali-160071, Punjab, Ph : +91-172-7170000, Fax: 91-172-5044339

All Payments to be made in favour of Ivy Health & Life Sciences (P) Ltd

**IVY HELPLINE : +91 99888-23456**

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IVY Hospital Mohali  
Sector 71, Mohali, Punjab - 160071

Package ID	341759		
Package	Mediwheel Acrofemi Healthcare Ltd Full Body Package With Tmt Male Below 40		
Patient ID	366380	Preg ID	1879547
Name	SANDEEP	Amount	2200.00
Date	09-Jun-23	Bill No	

Investigation

Bed Side Procedures	CONSULTATION DENTAL
Bed Side Procedures	CONSULTATION OPHTHALMOLOGY
Bed Side Procedures	CONSULTATION MEDICINE
Bed Side Procedures	NURSING ASSESSMENT SHEET
Biochemistry	LIPID PROFILE
Biochemistry	LIVER FUNCTION TEST
Biochemistry	PLASMA GLUCOSE FASTING
Biochemistry	PLASMA GLUCOSE POST PRANDIAL
Biochemistry	RFT (RENAL-FUNCTION TESTS)
CARDIOLOGY	TMT( TREAD MILL TEST)
Clinical Pathology	STOOL EXAMINATION
Clinical Pathology	URINE ANALYSIS
ECG	ECG
Haematology	CBC (COMPLETE BLOOD COUNT)
Haematology	ESR (ERYTHROCYTE SEDIMENTATION RATE)
Haematology	HBA1C
Immunoassay	TOTAL THYROID PROFILE
Outsource	BLOOD GROUP
Ultrasound	US - WHOLE ABDOMEN
X-Ray	X-RAY CHEST PA VIEW

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Ivy  
Hospital



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# Ivy Hospital

SUPER-SPECIALITY HEALTHCARE  
SECTOR 71, MOHALI  
Tel: 0172-7170000  
CIN No.: U85110PB2005PTC027898

**Dr. Mukesh Vats**  
MBBS, MS, FVRS  
(Ophthalmologist)  
Retina Specialist & Phaco Surgeon  
PMC Reg. No.: 45034  
Mobile: +91-9357519888

Mr Sandeep  
34y IM  
3 66 380

H/O HTN ⊕ x 23yrs

Renal dysfunction  
on dialysis x 2 yrs

9/6/23

Vm 6/9  
9/12P

(dud)

cds defective vision

ALS - urea - inflammation

Fundus  
(O.D)



Disc Margin  
clear vessels  
defined.

→ macula - details not clear

AGU: Fundus Photo

Top 16/12

Dr. Mukesh Vats  
MS FVRS  
Retina Specialist & Phaco Surgeon  
PMC 45034

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IVY HOSPITAL SEC 11 MONATI X3-11132-050  
08C8330  
Сделан в Аргентине  
ЗАВОДЕБ МАР 24 1991(2)



Р

IVY HOSPITAL  
Sector 71  
Mohali, Punjab

Ward  
Telephone:

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## EXERCISE STRESS TEST REPORT

Patient Name: SANDEEP  
Patient ID: 366380  
Height:  
Weight: 95 kg

DOB: 12.01.1989  
Age: 34yrs  
Gender: Male  
Race: Indian

Study Date: 09.06.2023  
Test Type: --  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: --  
Technician: --

Medications:

Medical History:

Reason for Exercise Test:

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:02	0.00	0.00			
	STANDING	00:01	0.00	0.00			
	HYPERV.	00:02	0.00	0.00			
EXERCISE	WARM-UP	08:01	1.60	0.00	86	130/74	
	STAGE 1	03:00	2.70	10.00	120	130/74	
	STAGE 2	03:00	4.00	12.00	144	140/74	
	STAGE 3	03:00	5.40	14.00	173	140/74	
	STAGE 4	00:48	0.50	16.00	181		
RECOVERY		05:07	0.00	0.00	98	130/74	

The patient exercised according to the BRUCE for 9:47 mins, achieving a work level of Max. METS: 11.00. The resting heart rate of 90 bpm rose to a maximal heart rate of 181 bpm. This value represents 97% of the maximal, age-predicted heart rate. The resting blood pressure of 130/74 mmHg, rose to a maximum blood pressure of 140/74 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation

Summary: Resting ECG: normal. Chest Pain: none. Arrhythmias: none. Overall impression: Normal stress test.

### Conclusions

GOOD EFFORT TOLERANCE  
TMT NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician

*Rakesh Bhutnagar*  
Dr. Rakesh Bhutnagar  
Director, Non Invasive Cardiology  
MBBS, MD (Medicine), DM (Cardiology)  
PMC - 42588

Technician

ANDEEP,  
 Patient ID 366380  
 106.2023 Male 95 kg  
 1:54:07am 34yrs Indian  
 Meds:

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Test Reason:  
 Medical History:

Ref. MD: Ordering MD:  
 Technician: Test Type:  
 Comment:

BRUCE Total Exercise Time 09:47  
 Max HR: 181 bpm 97% of max predicted 186 bpm  
 Max BP: 140/74 Maximum Workload: 11.00 METS  
 Max ST Level -1.85 mm in V5; RECOVERY 0:42  
**Reasons for Termination:** Target heart rate achieved  
**Summary:** Resting ECG: normal. Chest Pain: none. Arrhythmias: none. Overall  
 impression: Normal stress test.  
**Conclusion:** GOOD EFFORT TOLERANCE  
 TMT NEGATIVE FOR INDUCIBLE ISCHEMIA  
 Location Number: \* 0 \*

Phase	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (+100)	VE (/min)	ST Level V5(mm)	Comment
RETEST	SUPINE	00:02	0.00	0.00	1.0				0	--	
	STANDING	00:01	0.00	0.00	1.0				0	--	
	HYPERV.	00:02	0.00	0.00	1.0				0	-0.25	
	WARM UP	08:01	1.60	0.00	1.7	86	130/74	111	0	-0.10	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	120	130/74	156	0	-0.10	
	STAGE 2	03:00	4.00	12.00	7.0	144	140/74	201	0	-0.25	
	STAGE 3	03:00	5.40	14.00	10.0	173	140/74	242	0	-0.65	
	STAGE 4	00:48	0.50	16.00	6.9	181			0	-0.40	
RECOVERY		05:07	0.00	0.00	1.0	98	130/74	127	0	0.05	



SANDEEP,  
Patient ID 366380  
09.06.2023  
11:54:07am

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BASELINE EXERCISE	MAX ST RECOVERY	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX ST RECOVERY	PEAK EXERCISE	TEST END RECOVERY
0:00 87 bpm	0:42 151 bpm	9:48 181 bpm	4:50 100 bpm 130/74 mmHg	0:00 87 bpm	0:42 151 bpm	9:48 181 bpm	4:50 100 bpm 130/74 mmHg
I 0.30 mm 0.53 mV/s	I 2.10 5.13	I 0.75 3.56	I -0.10 0.31	V1 0.30 0.25	V1 2.25 4.58	V1 0.80 2.98	V1 0.10 0.22
II 0.35 0.14	II 1.95 4.45	II 0.65 2.52	II 0.00 0.36	V2 0.20 0.30	V2 1.45 3.02	V2 0.60 2.29	V2 0.00 0.20
III 0.00 -0.40	III -0.15 -1.02	III -0.05 -1.00	III 0.05 -0.07	V3 0.00 -0.41	V3 -1.40 -3.29	V3 0.05 -0.83	V3 -0.10 -0.57
aVR -0.35 -1.40	aVR -2.00 -5.86	aVR -0.70 -3.02	aVR 0.05 -0.58	V4 0.40 0.55	V4 3.10 6.62	V4 1.20 3.56	V4 0.35 0.48
aVL 0.20 0.39	aVL 1.15 2.88	aVL 0.45 2.22	aVL -0.05 0.14	V5 -0.05 -0.93	V5 -1.85 -4.78	V5 -0.40 -2.60	V5 0.10 -0.69
aVF 0.15 -0.07	aVF 0.90 1.91	aVF 0.30 0.74	aVF 0.05 -0.21	V6 0.80 0.32	V6 1.70 3.12	V6 1.05 0.70	V6 0.75 0.56

GE CASE V6.51 (0)  
10mm/mV 60Hz 0.01-20Hz S t

Unconfirmed

Attending MD:



ANDEEP  
Patient ID: 366380  
11.06.2023  
P: 16:49pm

100 bpm

04.06.2023 04:50

RECOVERY

71

04:50

BRUCE

0.0 km/h

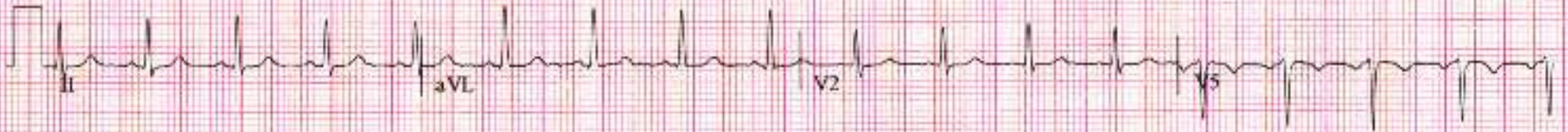
0.0 %

IVY HOSPITAL

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.10	V1	0.10
II	0.00	V2	0.00
III	0.05	V3	-0.10
aVR	0.05	V4	0.35
aVL	-0.05	V5	0.10
aVF	0.05	V6	0.75



ANDERSON  
Patient ID: 366380  
8:06:2023  
8:15:49pm

98 bpm  
03:07

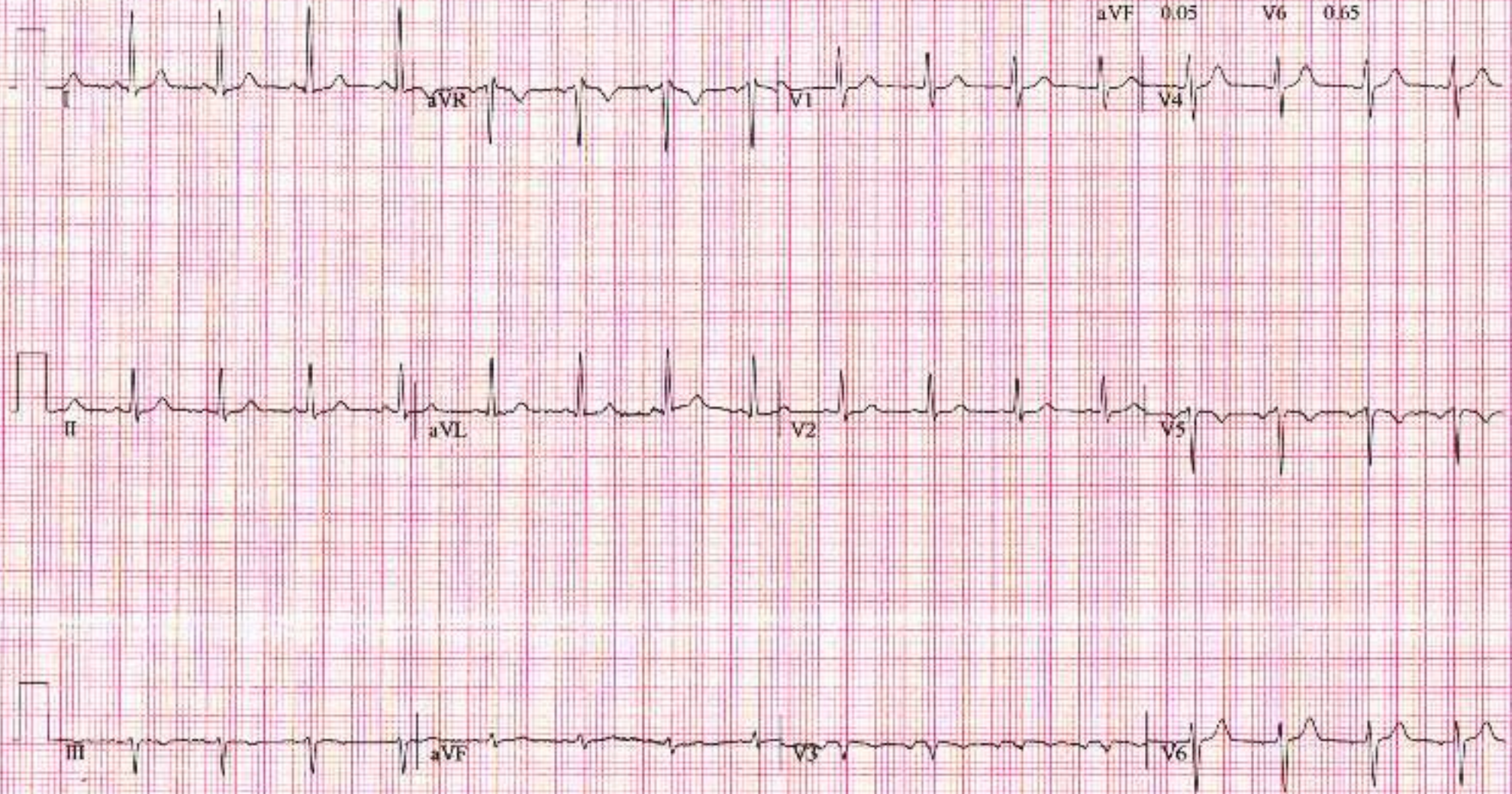
RECOVERY  
#1  
03:50

BRUCE  
0.0 km/h  
0.0 %a

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.00	V1	-0.15
II	0.05	V2	0.00
III	0.10	V3	-0.05
aVR	-0.05	V4	0.45
aVL	-0.05	V5	0.00
aVF	0.05	V6	0.65

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KANDEEP  
Patient ID: 366380  
0.06.2023  
E: 14:49pm

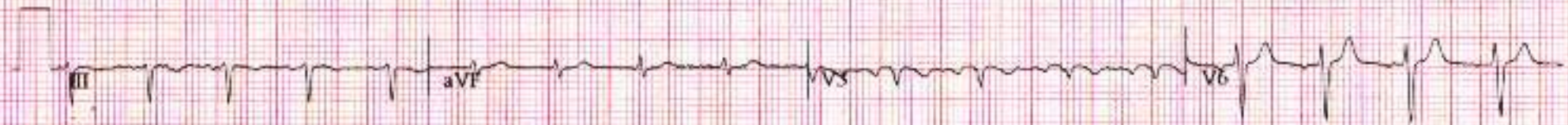
110 bpm  
01:58 | PDF-Compressor Free Version | 02:50

RECOVERY  
#1

BRUCE  
0.0 km/h  
0.0 %

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.15	V1	0.40
II	0.35	V2	0.20
III	0.20	V3	-0.45
aVR	-0.25	V4	0.70
aVL	0.00	V5	-0.35
aVF	0.25	V6	0.75



KNDEEP  
Patient ID: 366380  
8.06.2023  
E:13:49pm

115 bpm

RECOVERY  
#1  
1:50

BRUCE  
0.0 km/h  
0.0 %

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.75	V1	1.05
II	0.90	V2	0.65
III	0.10	V3	-1.15
aVR	-0.80	V4	1.75
aVL	0.35	V5	-0.70
aVF	0.50	V6	1.35



KANDEEP  
Patient ID: 366380  
1/06/2023  
8:12:49pm

146 bpm

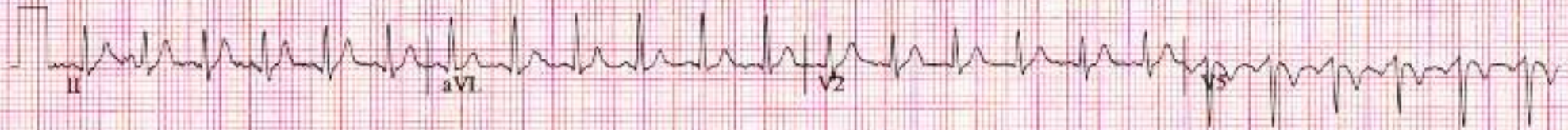
PDF Compressor Free Version

RECOVERY  
#1  
0:50

BRUCE  
0.0 km/h  
0.0 %

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	2.00	V1	2.15
II	2.00	V2	1.45
III	0.00	V3	-1.40
aVR	-2.00	V4	2.95
aVL	1.00	V5	-1.80
aVF	0.95	V6	1.60



ANDEEP  
Patient ID: 366380  
11.06.2023  
E: 12:00pm

(PEAK EXERCISE)

181 bpm

EXERCISE  
STAGE 4  
09:48

BRUCE  
0.5 km/h  
16.0 %

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	SI(mm)	Lead	SI(mm)
I	0.75	V1	0.80
II	0.65	V2	0.60
III	-0.05	V3	0.05
aVR	-0.70	V4	1.20
aVL	0.45	V5	-0.40
aVF	0.30	V6	1.05

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ANDEEP  
Patient ID: 366380  
9.06.2023  
2:11:05pm

173 bpm

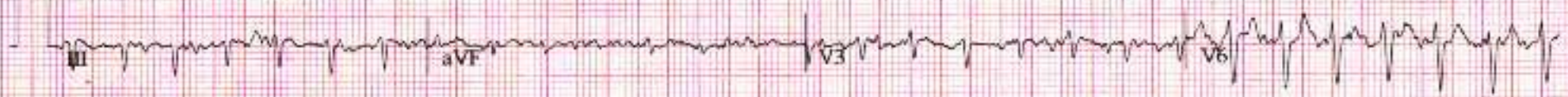
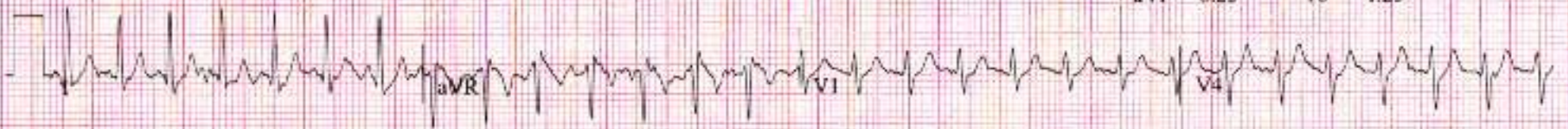
01:45 PDF Compressor Free Version

EXERCISE  
STAGE 3  
08:53

BRUCE  
5.4 km/h  
14.0%

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.60	V1	1.00
II	0.60	V2	0.60
III	-0.05	V3	0.05
aVR	-0.60	V4	1.45
aVL	0.35	V5	-0.35
aVF	0.25	V6	1.25





KNDEEP  
Patient ID: 366380  
9.06.2023  
P: 10:51pm

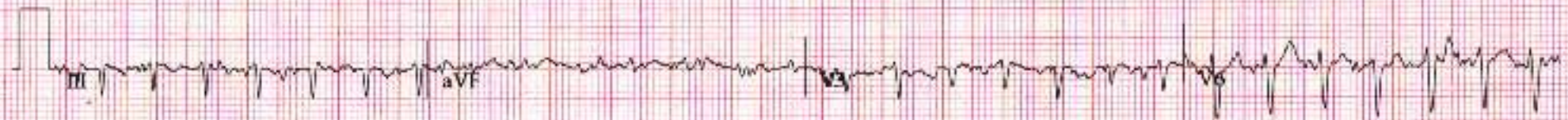
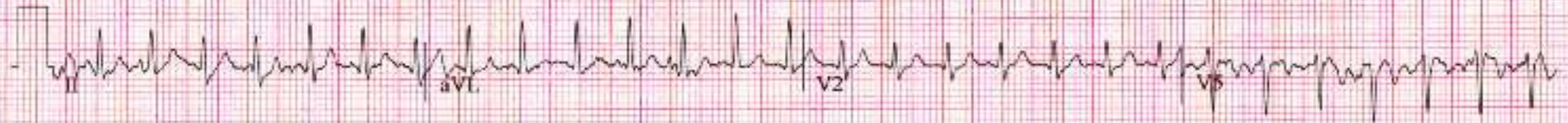
171 bpm  
01:45 | PDF Compressor Free Version | 8:39

EXERCISE  
STAGE 3

BRUCE  
5.4 km/h  
14.0%

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.55	V1	0.90
II	0.60	V2	0.50
III	0.05	V3	-0.15
aVR	-0.55	V4	1.30
aVL	0.20	V5	-0.60
aVF	0.35	V6	1.10



ANDEEP  
Patient ID: 366380  
9.06.2023  
2:08:02pm

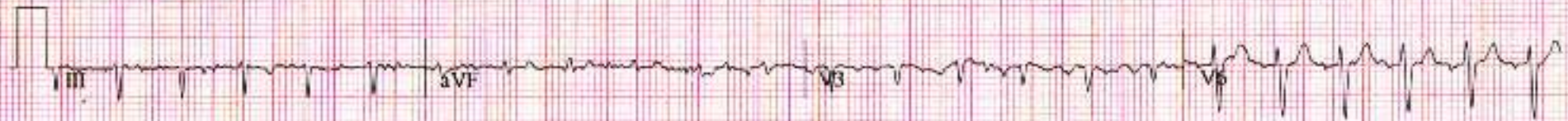
141 bpm  
02:21

EXERCISE  
STAGE 2  
5.50

BRUCE  
4.0 km/h  
12.0%

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.35	V1	0.50
II	0.40	V2	0.25
III	0.05	V3	-0.10
aVR	-0.35	V4	0.70
aVL	0.15	V5	-0.20
aVF	0.25	V6	0.85



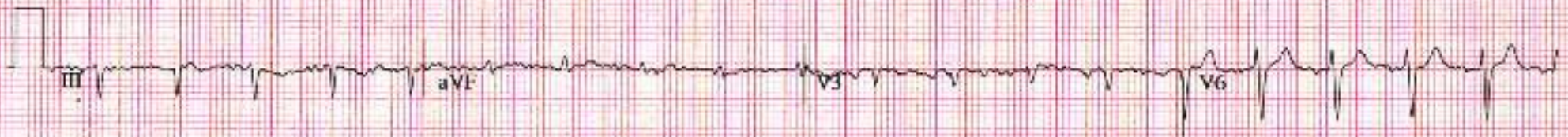
ANDREP  
Patient ID: 366380  
9.06.2023  
2:05:02pm

117 bpm  
02:25 EXERCISE STAGE 1  
02:50

BRUCE  
2.7 km/h  
10.0 %

IVY HOSPITAL  
Measured at 60ms Post J (10mm/mV)  
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.20	V1	0.40
II	0.25	V2	0.25
III	0.10	V3	0.05
aVR	-0.20	V4	0.60
aVL	0.05	V5	-0.10
aVF	0.20	V6	0.80



NAME	SANDEEP	SEX/AGE	M34Y
PATIENT ID	ID366380	Accession Number	
REF CONSULTANT	PACKAGE	DATE	09/06/2023 09:29

## USG WHOLE ABDOMEN



**LIVER:** is normal in size (~ 15cm), outline and shows increased echogenicity. No focal lesion is seen. IHBR are not dilated. Portal vein is normal, CBD is not dilated.

**GALL BLADDER:** is partially distended. Visualized lumen is clear.

**SPLEEN:** is prominent in size (~ 12.8cm), normal in outline and echotexture. No focal lesion is seen.

**PANCREAS & UPPER RETROPERITONEUM:** Visualised pancreatic head and proximal body are normal in size and echotexture. Tail of pancreas is obscured by bowel gas.

**RIGHT KIDNEY:** It is normal in size (~ 8.3cm) and shows increased echogenicity. Corticomedullary differentiation is lost. No calculi / hydronephrosis is seen.

**LEFT KIDNEY:** It is normal in size (~ 9.8cm) and shows increased echogenicity. Corticomedullary differentiation is lost. No calculi / hydronephrosis is seen.

**U-BLADDER:** is minimally distended at the time of examination

**PROSTATE:** is enlarged in size (~ 30cc).

No free fluid is seen in peritoneal cavity.

### IMPRESSION:

Fatty liver Grade I - II.

Borderline splenomegaly.

Chronic kidney disease.

Prostatomegaly.



DR. GAGANDEEP SINGH SETHI  
MD RADIODIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations  
(NOT FOR MEDICO-LEGAL PURPOSE)

A unit of Ivy Health and Life Sciences (P) Ltd. Website : [www.ivyhospital.com](http://www.ivyhospital.com), Email: [cs@ivyhospital.com](mailto:cs@ivyhospital.com) Fax: 91-172-2274900  
Regd. Office: Administration Block, Ivy Hospital, Sector-71, S.A.S Nagar Mohali-160071, Punjab, Ph : +91-172-7170000, Fax: 91-172-5044339

All Payments to be made in favour of Ivy Health & Life Sciences (P) Ltd

**IVY HELPLINE : +91 99888-23456**

CARDIOPRINT

GE MAC1200 ST, IVY HOSPITAL MORALI

HR 75 bpm

Sandeep

Age = 34y 1M

UHID = 366380

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Measurement Results

QRS	96 ms
QT/QTcB	362 / 407 ms
PR	136 ms
P	112 ms
RR/PP	792 / 780 ms
P/QRS/T	-25/ 0/ 0 degrees
QTd/QTcBd	32 / 36 ms
Sokolow	2.2 mV
NK	11

Interpretation:  
normal ECG

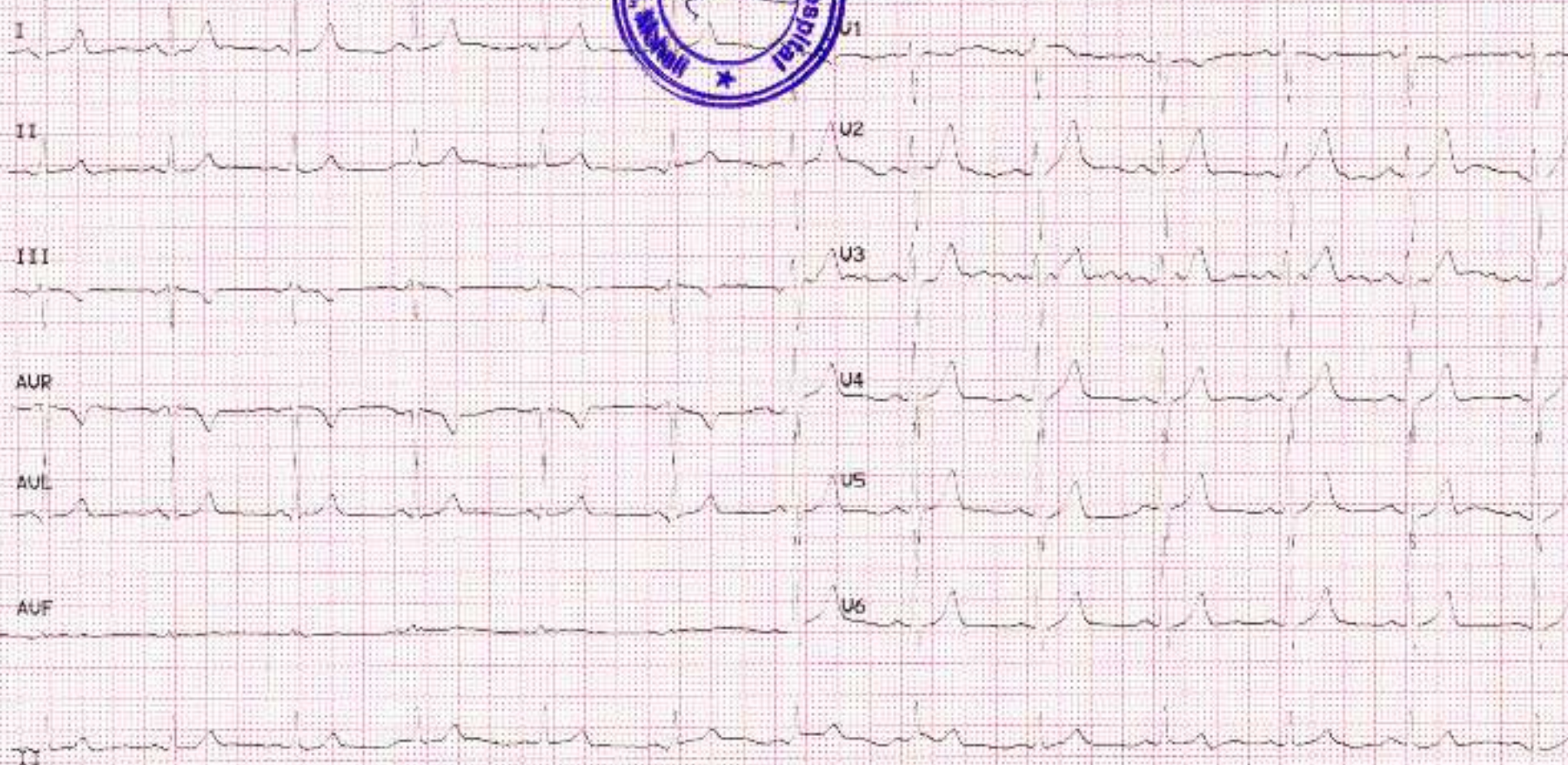
< P  
< T  
< QRS

aUR aUL  
0 I

III 190 II  
aUF



Unconfirmed report.





NAME	: MR. SANDEEP	Requisition Date	: 09/Jun/2023 08:36AM
DOB/Gender	: 12-Jan-1989/M	Sample Coll.Date	: 09/Jun/2023 08:49AM
LHID	: 366380	Sample Rec.Date	: 09/Jun/2023 08:50AM
Inv. No.	: 3451024	Approved Date	: 09/Jun/2023 11:36AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12842416		

Test Description	Observed Value	Unit	Reference Range
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**IMMUNOASSAY**

**TOTAL THYROID PROFILE**

<b>Serum Total T3</b> <small>(CLIA/Veris 3000)</small>	<b>1.13</b>	<b>ng/mL</b>	<b>0.970 – 1.69</b>
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**Summary & Interpretation:**

Triiodothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by deiodination of T4. A reduction in the conversion of T4 to T3 results in a fall in the T3 concentration. It occurs under the influence of medications such as propranolol, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI). The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis periodicus.

<b>Serum Total T4</b> <small>(CLIA/Veris 3000)</small>	<b>5.26</b>	<b>µg/dL</b>	<b>5.53 – 11.0</b>
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**Summary & Interpretation:**

The hormone thyroxine (T4) is the main product secreted by the thyroid gland. The major part of total thyroxine (T4) in serum is present in protein-bound form. As the concentration of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken in to account in the assessment of the thyroid hormone concentration in serum. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism and the monitoring of TSH-suppression therapy.

<b>Serum TSH</b> <small>(CLIA/Veris 3000)</small>	<b>7.700</b>	<b>mIU/L</b>	<b>0.4001 – 4.049</b>
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**Summary & Interpretation:**

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The determination of TSH serves as the initial test in thyroid diagnosis. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

**Note:**

1. 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
2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
4. Clinical Use: Primary Hypothyroidism, Hyperthyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Nonthyroidal illness, Autoimmune thyroid disease, Pregnancy associated thyroid disorders.

PREGNANCY	REFERENCE RANGE FOR TSH IN uIU/mL
1st Trimester	0.05 – 3.70
2nd Trimester	0.11 – 4.35
3rd Trimester	0.41 – 5.18

Please correlate clinically.



The highlighted values should be correlated clinically

Result Entered By: Jasmanjot 5487M (HB)



Polo Labs



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# POLO LABS PVT. LTD

Reference Lab: Polo Labs, Mohali, Punjab

Polo Labs, Ivy Hospital, Sector 71, Mohali  
Ph.: 9115115257, 9115115258, 9115115624

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NAME : MR. SANDEEP  
DOB/Gender : 12-Jan-1989/M  
UHID : 366380  
Inv. No. : 3451024  
Panel Name : Ivy Mohali  
Bar Code No : 12842416

Requisition Date : 09/Jun/2023 08:36AM  
Sample CollDate : 09/Jun/2023 08:49AM  
Sample Rec.Date : 09/Jun/2023 08:50AM  
Approved Date : 09/Jun/2023 11:36AM  
Referred Doctor : Self

Test Description	Observed Value	Unit	Reference Range
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## BIOCHEMISTRY

### GLUCOSE FASTING

Primary Sample Type: Fluoride Plasma

Plasma Glucose Fasting <small>(Hexokinase/ AU487)</small>	89	mg/dL	< 106 Normal 107 - 125 Impaired Tolerance >126 Diabetic
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### RFT (RENAL FUNCTION TESTS)

Serum Urea <small>(Urea/ GLUC/ AU494)</small>	48.00	mg/dl	17-43
Serum Creatinine <small>(JAFFE KINETIC/ AU494)</small>	6.50	mg/dl	0.67-1.17
Serum Uric acid <small>(Uricase/ AU499)</small>	5.90	mg/dl	3.5-7.2

Please correlate clinically.

### LIVER FUNCTION TEST WITH GGT

Serum Bilirubin Total <small>(BPD/ AU 486)</small>	0.60	mg/dL	0.3-1.2
Serum Bilirubin Direct <small>(BPD/ AU 486)</small>	0.10	mg/dl	<0.3
Serum Bilirubin Indirect <small>(Calculated)</small>	0.50	mg/dl	0.1-1.0
Serum SGOT(AST) <small>(IFCC/ Wako/ PIF/ AU 480)</small>	22	U/L	<35
Serum SGPT(ALT) <small>(IFCC/ Wako/ PIF/ AU 480)</small>	19	U/L	<50
Serum AST/ALT Ratio <small>(Calculated)</small>	1.16		
Serum GGT <small>(IFCC/ AU 480)</small>	39	IU/L	9-52
Serum Alkaline Phosphatase <small>(IFCC/ POP-NM/ Catalase/ AU 489)</small>	985	U/L	30-120
Serum Protein Total <small>(Broun)</small>	7.7	gm/dl	6.40 - 8.20
Serum Albumin <small>(BCG/ AU 480)</small>	4.5	g/dL	3.5-5.2
Serum Globulin <small>(Calculated)</small>	3.20	gm/dl	2.0-3.5
Serum Albumin/Globulin Ratio <small>(Calculated)</small>	1.41	%	1.0 - 1.8



The highlighted values should be correlated clinically

Result Entered By: Jasmajot 5487M (BB)



DR. ANAND KALLA  
M. D. PATHOLOGY



NAME	: MR. SANDEEP	Requisition Date	: 09/Jun/2023 08:36AM
DOB/Gender	: 12-Jan-1989/M	Sample Coll Date	: 09/Jun/2023 08:49AM
UHID	: 366380	Sample Rec. Date	: 09/Jun/2023 08:50AM
Inv. No.	: 2451024	Approved Date	: 09/Jun/2023 11:36AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12842416		

Test Description	Observed Value	Unit	Reference Range
<b>LIPID PROFILE</b>			
Serum Cholesterol (CHO) (POLY) (AU)	188	mg/dL	Desirable <200 Borderline High 200-239 High > 240
Serum Triglycerides (Lipid) (POLY) (AU)	199	mg/dL	<150 Normal 150-199 Borderline High 200-499 High >500 Very High
Serum HDL Cholesterol (HDL) (POLY) (AU)	42	mg/dL	<40 Major risk factor for CHD >60 Negative risk factor for CHD
Serum VLDL cholesterol (Calculated)	40	mg/dL	7-35
Serum LDL cholesterol (Calculated)	106	mg/dL	50-100
Serum Cholesterol-HDL Ratio (Calculated)	4.48		3-5
Serum LDL-HDL Ratio (Calculated)	2.53		1.5 - 3.5

The highlighted values should be correlated clinically

Result Entered By: Jasmraj04 5487M (BB)







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Reference Lab: Polo Labs, Mohali, Punjab

Polo Labs, Ivy Hospital, Sector 71, Mohali  
Ph.: 9115115257, 9115115258, 9115115624



NAME	: MR. SANDEEP	Requisition Date	: 09/Jun/2023 08:36AM
DOB/Gender	: 12-Jan-1989/M	Sample Coli Date	: 09/Jun/2023 08:49AM
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Inv. No.	: 3451024	Approved Date	: 09/Jun/2023 11:36AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12842416		

Test Description	Observed Value	Unit	Reference Range
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## CLINICAL PATHOLOGY

### COMPLETE URINE EXAMINATION

#### Physical Examination

Urine Volume	20.00	mL	
Urine Colour	Yellow		Light Yellow
Urine Appearance	Clear		Clear

#### Chemical Examination (Reflectance Photometry)

Urine pH	6.00		4.8-7.6
Urine Specific Gravity	1.020		1.010-1.030
Urine Glucose	Absent		Absent
Urine Protein (Protein Excretion)	++		NIL
Urine Ketones	Absent		Absent
Urine Bilirubin	Absent		Absent
Urine for Urobilinogen	Absent		Absent
Urine Nitrite	Absent		Absent

#### Microscopic Examination

Urine Pus Cells	1-2		0-5
Urine RBC	Absent	/hpf	Absent
Urine Epithelial Cells	0-1	/hpf	0-5
Urine Casts	Absent	/hpf	Absent
Urine Crystals	Absent	/hpf	Absent
Urine Bacteria	Absent	/hpf	Absent
Urine Yeast Cells	Absent	/hpf	Absent
Amorphous Deposit	Absent		Absent

## HAEMATOLOGY

### ESR

Primary Sample Type: EDTA Blood

ESR (Westergren ESR analysis)	52	mm/h	0-10
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The highlighted values should be correlated clinically

Result Entered By: Jasmajot 5487M (BB)





NAME	: MR. SANDEEP	Requisition Date	: 09/Jun/2023 08:36AM
DOB:Gender	: 12-Jan-1989/M	Sample Coll Date	: 09/Jun/2023 08:49AM
UHID	: 366380	Sample Rec. Date	: 09/Jun/2023 08:50AM
Inv. No.	: 3451024	Approved Date	: 09/Jun/2023 11:36AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12842416		

Test Description	Observed Value	Unit	Reference Range
<b>COMPLETE BLOOD COUNT (Sample Type- Whole Blood EDTA)</b>			
Hemoglobin <small>(Non-purified haemoglobin)</small>	10.7	g/dl	13.0 - 17.0
Hematocrit(PCV) <small>(Calculated)</small>	34.5	%	36-48
Red Blood Cell (RBC) <small>(Impedance/DC Detection)</small>	3.70	$10^6 / \mu\text{l}$	4.5-5.5
Mean Corp Volume (MCV) <small>(Impedance/DC Detection)</small>	94.3	fL	83-97
Mean Corp HB (MCH) <small>(Calculated)</small>	29.2	pg/mL	27-31
Mean Corp HB Conc (MCHC) <small>(Calculated)</small>	31.0	gm/dl	32-36
Red Cell Distribution Width -CV <small>(Calculated)</small>	18.3	%	11-15
Platelet Count <small>(Impedance/DC Detection/Microscopy)</small>	130 (platelet anisocytosis)	$10^3/\mu\text{l}$	150-450
Mean Platelet Volume (MPV) <small>(Impedance/DC Detection)</small>	12.2	fL	7.5-10.3
Total Leucocyte Count (TLC) <small>(Impedance/DC Detection)</small>	6.8	$10^3 / \mu\text{l}$	4.0 - 10.0
<b>Differential Leucocyte Count (VCS/ Microscopy)</b>			
Neutrophils	69	%	40-75
Lymphocytes	25	%	20-40
Monocytes	5	%	0-8
Eosinophils	1	%	0-4
Basophils	0	%	0-1
Absolute Neutrophil Count	4,692	$\mu\text{l}$	2000-7000
Absolute Lymphocyte Count	1,700	$\mu\text{L}$	1000-3000
Absolute Monocyte Count	340	$\mu\text{L}$	200-1000
Absolute Eosinophil Count	68	$\mu\text{l}$	20-500

The highlighted values should be correlated clinically

Result Entered By: Jasmanjot 5487M (BD)





NAME	: MR. SANDEEP	Requisition Date	: 09/Jun/2023 08:36AM
DOB:Gender	: 12-Jan-1989/M	Sample CollDate	: 09/Jun/2023 08:49AM
UHID	: 366380	Sample Rec.Date	: 09/Jun/2023 10:18AM
Inv. No.	: 3451024	Approved Date	: 09/Jun/2023 11:37AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12842416		

Test Description	Observed Value	Unit	Reference Range
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**HAEMATOLOGY**

**BLOOD GROUP RH TYPE**

ABO & RH Typing

Forward Grouping

Anti A	Negative
Anti B	POSITIVE
Anti AB	POSITIVE
Anti D	POSITIVE
Reverse Grouping A Cells	POSITIVE
Reverse Grouping B Cells	Negative
Reverse Grouping O Cells	Negative
<b>Final Blood Group</b>	<b>B POSITIVE</b>

**NOTE :**

- \* Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- \* So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- \* Presence of maternal antibodies in newborns, may interfere with blood grouping.
- \* Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

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

