

NAME	: Mr. SRIKANTH SRINIVASAN	MR/VISIT NO	: 22100765 / 164384
AGE/SEX	: 53 Yrs / Male	BILLED TIME	: 22-10-2022 at 09:03 AM
REFERRED BY	:	BILL NO	: 196012
REF CENTER	: MEDIWHEEL	DATE OF REPORT	: 22-10-2022 at 01:45 PM

RADIOLOGY

USG REPORT - ABDOMEN AND PELVIS

OBSERVATION:

LIVER:

Liver is normal in size (14.1 cm) and shows mild diffuse increase in echotexture. No focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic and portal veins are normal. CBD is normal.

GALL BLADDER:

Is distended. Two small hyperechoic focus measuring between 3 to 3.5 mm seen in the nondependent wall without posterior acoustic shadowing. No evidence of displacement on movement. No pericholecystic free fluid/ wall thickening.

PANCREAS:

Head and body visualized appears normal. No focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

SPLEEN:

Normal in size (10.5 cm) with homogenous echotexture. No focal lesion seen.

RIGHT KIDNEY:

Right kidney measures 11 x 4.3 cm with normal echo pattern and cortical thickness. The shape, size and contour of the right kidney appear normal. Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

LEFT KIDNEY:

Left kidney measures 11.1 x 5.7 cm with normal echo pattern and cortical thickness. The shape, size and contour of the left kidney appear normal. Cortical medullary differentiation is maintained.

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No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

URINARY BLADDER:

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen. Wall thickness appears normal.

Pre-void: 425 cc

Post-void: 12 cc

PROSTATE:

Is enlarged in size and measures 4.1 x 3.9 x 3.5 cm (Volume-30 cc) with normal echo pattern. No focal lesion is seen.

No evidence of free fluid in the pelvic or abdominal cavity.

IMPRESSION:

- **Gall bladder polyps.**
- **Mild fatty infiltration of liver.**
- **Grade I prostatomegaly.**



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RADIOLOGY

X-RAY REPORT- CHEST (PA VIEW)

OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Tracheal is mid line.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

IMPRESSION:

- **No significant abnormality in the visualized lung fields.**



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TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
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HAEMATOLOGY

COMPLETE BLOOD COUNT (CBC) WITH ESR

HAEMOGLOBIN <i>Colorimetric Method</i>	18.2 gm/dL	13 - 18 gm/dL
HEMATOCRIT (PCV) <i>Calculated</i>	56 %	40 - 54 %
RED BLOOD CELL (RBC) COUNT <i>Electrical Impedance</i>	6.25 million/cu.mm	4.5 - 5.9 million/cu.mm
PLATELET COUNT <i>Electrical Impedance</i>	2.15 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm
MEAN CELL VOLUME (MCV) <i>Calculated</i>	91 fl	80 - 100 fl
Note : All normal and abnormal platelet counts are cross checked on peripheral smear.		
MEAN CORPUSCULAR HEMOGLOBIN (MCH) <i>Calculated</i>	29 pg	26 - 34 pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION (MCHC) <i>Calculated</i>	31 %	31 - 35 %
TOTAL WBC COUNT (TC) <i>Electrical Impedance</i>	6300 cells/cumm	4000 - 11000 cells/cumm
NEUTROPHILS <i>VCS Technology/Microscopic</i>	62 %	40 - 75 %
LYMPHOCYTES <i>VCS Technology/Microscopic</i>	30 %	25 - 40 %
DIFFERENTIAL COUNT		
EOSINOPHILS <i>VCS Technology/Microscopic</i>	06 %	0 - 7 %
MONOCYTES <i>VCS Technology/Microscopic</i>	02 %	1 - 8 %
BASOPHILS <i>Electrical Impedance</i>	00 %	
ESR <i>Westergren Method</i>	05 mm/hr	0 - 15 mm/hr
BLOOD GROUP & Rh TYPING <i>Tube Agglutination (Forward and Reverse)</i>	"A" Positive	

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TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
GLYCATED HAEMOGLOBIN (HbA1C) <i>HPLC</i>	5.4 %	American Diabetic Association (ADA) recommendations: Non diabetic adults : <5.7 % At risk (Pre diabetic): 5.7 – 6.4% Diabetic : >= 6.5% Therapeutic goal for glycemic control : Goal for therapy: < 7.0% Action suggested: > 8.0%	

ESTIMATED AVERAGE GLUCOSE (eAG) 108.28 mg/dL

Calculation

Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.

CLINICAL BIOCHEMISTRY

BLOOD UREA <i>UREASE-GLUTAMATE DEHYDROGENASE (GLDH)</i>	29.9 mg/dL	15 - 50 mg/dL
CREATININE <i>Jaffe Kinetic</i>	1.2 mg/dL	0.4 - 1.4 mg/dL
URIC ACID <i>Uricase-Peroxidase</i>	6.9 mg/dL	3 - 7.2 mg/dL
SERUM ELECTROLYTES		
SODIUM <i>Ion Selective Electrode (ISE)</i>	136.2 mmol/L	136 - 145 mmol/L
POTASSIUM <i>Ion Selective Electrode (ISE)</i>	4.46 mmol/L	3.5 - 5.2 mmol/L
CHLORIDE <i>Ion Selective Electrode (ISE)</i>	99 mmol/L	97 - 111 mmol/L

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LIPID PROFILE TEST

TOTAL CHOLESTEROL <i>Cholesterol Oxidase-Peroxidase (CHOD-POD)</i>	317 mg/dL	up to 200 mg/dL Border Line: 200 – 240 mg/dL High: > 240 mg/dL	
TRIGLYCERIDES <i>Glycerol Peroxidase-Peroxidase (GPO-POD)</i>	233.4 mg/dL	up to 150 mg/dL Desirable: <150 mg/dL Border Line: 150 – 200 mg/dL High: >200 – 500 mg/dL Very High: > 500 mg/dL	
HDL CHOLESTEROL - DIRECT <i>PEG-Cholesterol Esterase</i>	48.0 mg/dl	40 - 60 mg/dl >= 60mg/dL - Excellent (protects against heart disease) 40-59 mg/dL - Higher the better <40 mg/dL - Lower than desired (major risk for heart disease)	
LDL CHOLESTEROL - DIRECT <i>Cholesterol Esterase-Cholesterol Oxidase</i>	222.3 mg/dL	up to 100 mg/dL 100-129 mg/dL- Near optimal/above optimal 130-159 mg/dL- Borderline High 160-189 mg/dL- High 190->190 mg/dL - Very High	
VLDL CHOLESTEROL <i>Calculation</i>	46.7 mg/dL	2 - 30 mg/dL	
TOTAL CHOLESTROL/HDL RATIO <i>Calculation</i>	6.6	up to 3.5 3.5-5.0 - Moderate >5.0 - High	
LDL/HDL RATIO <i>Calculation</i>	4.6	up to 2.5 2.5-3.3 - Moderate >3.3 - High	

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TEST PARAMETER RESULT REFERENCE RANGE SPECIMEN

LIVER FUNCTION TEST (LFT)

TOTAL BILIRUBIN <i>Colorimetric Diazo Method</i>	1.54 mg/dL	0.2 - 1.2 mg/dL	
DIRECT BILIRUBIN <i>Colorimetric Diazo Method</i>	0.55 mg/dL	0 - 0.4 mg/dL	
INDIRECT BILIRUBIN <i>Calculation</i>	0.99 mg/dl	0.2 - 0.8 mg/dl	
S G O T (AST) <i>IFCC Without Pyridoxal Phosphates</i>	35 U/L	up to 35 U/L	
S G P T (ALT) <i>IFCC Without Pyridoxal Phosphates</i>	40.3 U/L	up to 50 U/L	
ALKALINE PHOSPHATASE <i>p-Nitrophenyl Phosphate</i>	116 U/L	36 - 113 U/L	
SERUM GAMMA GLUTAMYLTRANSFERASE (GGT) <i>GCNA-IFCC</i>	34.8 U/L	15 - 85 U/L	
TOTAL PROTEIN <i>Biuret Colorimetric</i>	6.82 g/dl	6.2 - 8 g/dl	
S.ALBUMIN <i>Bromocresol Green (BCG)</i>	4.01 g/dl	3.5 - 5.2 g/dl	
S.GLOBULIN <i>Calculation</i>	2.8 g/dl	2.5 - 3.8 g/dl	
A/G RATIO <i>Calculation</i>	1.4	1 - 1.5	
CREATININE <i>Jaffe Method</i>	1.0 mg/dL	0.8 - 1.4 mg/dL	
FASTING BLOOD SUGAR <i>Hexokinase</i>	77 mg/dl	70 - 110 mg/dl	
POST PRANDIAL BLOOD SUGAR <i>Hexokinase</i>	89.6 mg/dl	80 - 150 mg/dl	

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CLINICAL PATHOLOGY

URINE ROUTINE & MICROSCOPIC

PHYSICAL EXAMINATION

Colour <i>Visual Method</i>	Pale Yellow	Pale yellow- yellow
Appearance <i>Visual Method</i>	Clear	Clear/Transparent
Specific Gravity <i>Strips Method</i>	1.005	1.005-1.035
pH	6.0	4.6-8.5

CHEMICAL EXAMINATION (DIPSTICK)

Protein <i>Strips Method</i>	Nil	Nil -Trace
Glucose <i>Strips Method</i>	Nil	Nil
Blood <i>Strips Method</i>	Negative	Negative
Ketone Bodies <i>Strips Method</i>	Absent	Negative
Urobilinogen <i>Strips Method</i>	Normal	Normal
Bile Salt <i>Strips Method</i>	Negative	Negative
Bilirubin <i>Strips Method</i>	Negative	Negative
Bile Pigments	Negative	NIL

MICROSCOPY

Pus Cells (WBC) <i>Light Microscopic</i>	4 - 5 /hpf	0-5/hpf
Epithelial Cells <i>Light Microscopic</i>	1 - 2 /hpf	0-4/hpf
RBC <i>Light Microscopic</i>	Not Seen /hpf	0-2/hpf
Cast <i>Light Microscopic</i>	NIL	NIL
Crystal <i>Light Microscopic</i>	NIL	Nil

FASTING URINE SUGAR (FUS)	NIL	NIL
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POSTPRANDIAL URINE SUGAR	NIL	NIL	

IMMUNOASSAY

THYROID PROFILE

TOTAL TRIIODOTHYRONINE (T3) CMIA	0.87 ng/mL	0.87 - 1.78 ng/mL
TOTAL THYROXINE (T4) CMIA	7.56 µg/dL	6.09 - 12.23 µg/dL
THYROID STIMULATING HORMONE (TSH) CMIA	1.019 µIU/mL	0.38 - 5.33 µIU/mL 1st Trimester: 0.05 - 3.70 2nd Trimester: 0.31 - 4.35 3rd Trimester: 0.41 - 5.18

Note:

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

Dispatched by: KIRAN

**** End of Report ****

Printed by: Kiran kumar H P on 22-10-2022 at 03:02

PM



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RADIOLOGY

USG REPORT - ABDOMEN AND PELVIS

OBSERVATION:

LIVER:

Liver is normal in size (14.1 cm) and shows mild diffuse increase in echotexture. No focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic and portal veins are normal. CBD is normal.

GALL BLADDER:

Is distended. Two small hyperechoic focus measuring between 3 to 3.5 mm seen in the nondependent wall without posterior acoustic shadowing. No evidence of displacement on movement. No pericholecystic free fluid/ wall thickening.

PANCREAS:

Head and body visualized appears normal. No focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

SPLEEN:

Normal in size (10.5 cm) with homogenous echotexture. No focal lesion seen.

RIGHT KIDNEY:

Right kidney measures 11 x 4.3 cm with normal echo pattern and cortical thickness. The shape, size and contour of the right kidney appear normal. Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

LEFT KIDNEY:

Left kidney measures 11.1 x 5.7 cm with normal echo pattern and cortical thickness. The shape, size and contour of the left kidney appear normal. Cortical medullary differentiation is maintained.

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No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

URINARY BLADDER:

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen. Wall thickness appears normal.

Pre-void: 425 cc

Post-void: 12 cc

PROSTATE:

Is enlarged in size and measures 4.1 x 3.9 x 3.5 cm (Volume-30 cc) with normal echo pattern. No focal lesion is seen.

No evidence of free fluid in the pelvic or abdominal cavity.

IMPRESSION:

- **Gall bladder polyps.**
- **Mild fatty infiltration of liver.**
- **Grade I prostatomegaly.**



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RADIOLOGY

X-RAY REPORT- CHEST (PA VIEW)

OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Tracheal is mid line.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

IMPRESSION:

- **No significant abnormality in the visualized lung fields.**



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BASOPHILS <i>Electrical Impedance</i>	00 %	
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BLOOD GROUP & Rh TYPING <i>Tube Agglutination (Forward and Reverse)</i>	"A" Positive	

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ESTIMATED AVERAGE GLUCOSE (eAG) 108.28 mg/dL
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Comments:

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LDL/HDL RATIO <i>Calculation</i>	4.6	up to 2.5 2.5-3.3 - Moderate >3.3 - High	

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TOTAL BILIRUBIN <i>Colorimetric Diazo Method</i>	1.54 mg/dL	0.2 - 1.2 mg/dL	
DIRECT BILIRUBIN <i>Colorimetric Diazo Method</i>	0.55 mg/dL	0 - 0.4 mg/dL	
INDIRECT BILIRUBIN <i>Calculation</i>	0.99 mg/dl	0.2 - 0.8 mg/dl	
S G O T (AST) <i>IFCC Without Pyridoxal Phosphates</i>	35 U/L	up to 35 U/L	
S G P T (ALT) <i>IFCC Without Pyridoxal Phosphates</i>	40.3 U/L	up to 50 U/L	
ALKALINE PHOSPHATASE <i>p-Nitrophenyl Phosphate</i>	116 U/L	36 - 113 U/L	
SERUM GAMMA GLUTAMYLTRANSFERASE (GGT) <i>GCNA-IFCC</i>	34.8 U/L	15 - 85 U/L	
TOTAL PROTEIN <i>Biuret Colorimetric</i>	6.82 g/dl	6.2 - 8 g/dl	
S.ALBUMIN <i>Bromocresol Green (BCG)</i>	4.01 g/dl	3.5 - 5.2 g/dl	
S.GLOBULIN <i>Calculation</i>	2.8 g/dl	2.5 - 3.8 g/dl	
A/G RATIO <i>Calculation</i>	1.4	1 - 1.5	
CREATININE <i>Jaffe Method</i>	1.0 mg/dL	0.8 - 1.4 mg/dL	
FASTING BLOOD SUGAR <i>Hexokinase</i>	77 mg/dl	70 - 110 mg/dl	
POST PRANDIAL BLOOD SUGAR <i>Hexokinase</i>	89.6 mg/dl	80 - 150 mg/dl	

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D.C.P, M.D
CONSULTANT PATHOLOGIST

NAME	: Mr. SRIKANTH SRINIVASAN	MR NO.	: 22100765
AGE/SEX	: 53 Yrs / Male	VISIT NO.	: 164384
REFERRED BY :		DATE OF COLLECTION	: 22-10-2022 at 09:11 AM
		DATE OF REPORT	: 22-10-2022 at 03:01 PM
REF CENTER	: MEDIWHEEL		



TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
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CLINICAL PATHOLOGY

URINE ROUTINE & MICROSCOPIC

PHYSICAL EXAMINATION

Colour <i>Visual Method</i>	Pale Yellow	Pale yellow- yellow
Appearance <i>Visual Method</i>	Clear	Clear/Transparent
Specific Gravity <i>Strips Method</i>	1.005	1.005-1.035
pH	6.0	4.6-8.5

CHEMICAL EXAMINATION (DIPSTICK)

Protein <i>Strips Method</i>	Nil	Nil -Trace
Glucose <i>Strips Method</i>	Nil	Nil
Blood <i>Strips Method</i>	Negative	Negative
Ketone Bodies <i>Strips Method</i>	Absent	Negative
Urobilinogen <i>Strips Method</i>	Normal	Normal
Bile Salt <i>Strips Method</i>	Negative	Negative
Bilirubin <i>Strips Method</i>	Negative	Negative
Bile Pigments	Negative	NIL

MICROSCOPY

Pus Cells (WBC) <i>Light Microscopic</i>	4 - 5 /hpf	0-5/hpf
Epithelial Cells <i>Light Microscopic</i>	1 - 2 /hpf	0-4/hpf
RBC <i>Light Microscopic</i>	Not Seen /hpf	0-2/hpf
Cast <i>Light Microscopic</i>	NIL	NIL
Crystal <i>Light Microscopic</i>	NIL	Nil

FASTING URINE SUGAR (FUS)	NIL	NIL
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TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
POSTPRANDIAL URINE SUGAR	NIL	NIL	

IMMUNOASSAY

THYROID PROFILE

TOTAL TRIIODOTHYRONINE (T3) CMIA	0.87 ng/mL	0.87 - 1.78 ng/mL
TOTAL THYROXINE (T4) CMIA	7.56 µg/dL	6.09 - 12.23 µg/dL
THYROID STIMULATING HORMONE (TSH) CMIA	1.019 µIU/mL	0.38 - 5.33 µIU/mL 1st Trimester: 0.05 - 3.70 2nd Trimester: 0.31 - 4.35 3rd Trimester: 0.41 - 5.18

Note:

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

Dispatched by: KIRAN

**** End of Report ****

Printed by: Kiran kumar H P on 22-10-2022 at 03:02

PM



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