



# Nidaan Hospital

By Park Group of Hospitals

## DEPARTMENT OF RADIOLOGY

Patient Name	Mr HARIOM	Billed Date	: 15/01/2022	10.52 AM
Reg No	9549	Reported Date	: 15/01/2022	
Age/Sex	33 Years 29Days / Male	Req. No.	: 22071556	
Ref. Doctor	Self	Consultant Doctor	: Dr. EMO	
Type	OPD			

### USG WHOLE ABDOMEN

#### **FINDINGS:**

**LIVER** is mildly enlarged in size (180 mm) and shows grade I fatty infiltration. No evidence of any focal lesion or IHBR dilation is present. Portal and hepatic veins are normal in caliber at porta.

**GALL BLADDER** is well distended and lumen is echofree. Wall thickness is normal. No pericholecystic fluid is seen.

**CBD** is normal in course and caliber. No evidence of intraluminal calculus seen in visualized segments.

**SPLEEN** is normal in size (117 mm) and echotexture. No focal lesion is seen.

**PANCREAS** : Only head visualized and grossly appears normal.

**RIGHT KIDNEY**: is normal in size (106x44 mm) and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

**LEFT KIDNEY**: is normal in size (114x50 mm) and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

**URINARY BLADDER** is partially distended and grossly appears normal.

**PROSTATE** is grossly normal in size.

No free fluid is seen in the abdomen.



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A small defect is noted in umbilical region measuring ~ 1.5 mm with herniation of peritoneal fat as its contents - suggestive of umbilical hernia.

**IMPRESSION:**

Mild hepatomegaly with grade I fatty liver.  
Small umbilical hernia.

To be correlate clinically

Dr. Rishi Raj Singh  
MBBS, DNB, CFR  
Consultant Radiologist



# Nidaan Hospital

By Park Group of Hospitals

## DEPARTMENT OF PATHOLOGY

Patient Name : Mr. HARIOM  
 MR No : 9549  
 Age/Sex : 33 Years / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL  
 IP No. :  
 Current Bed no. :

Bill Date : 15/01/2022 10.52.45 AM  
 Reporting Date : 15/01/2022 11.48.12 AM  
 Sample ID : 37415  
 Bill/Req. No. : 22071556  
 Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
<b>BLOOD GLUCOSE FASTING AND PP</b>			
PLASMA GLUCOSE(FASTING)	104	70 - 110	mg/dl

<b>BLOOD GROUP</b>			
BLOOD GROUP	"AB" RH NEGATIVE		

<b>COMPLETE HAEMOGRAM (CBC ESR)</b>				
HAEMOGLOBIN	<b>16.8</b>	H	12.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT	10300		4000 - 11000	/cumm
RED BLOOD CELL COUNT	5.07		4.0 - 6.0	millions/cumm
PCV (HAEMATOCRIT)	45.1		40.0 - 54.0	%
MEAN CORPUSCULAR VOLUME	89.0		78 - 98	fL
MEAN CORPUSCULAR HAEMOGLOBIN	<b>33.1</b>	H	26.5 - 32.5	Picogrames
MEAN CORPUSCULAR HB CONC	<b>37.3</b>	H	32 - 37	g/dL
RDW-CV	12.6		11.5 - 14.5	%
PLATELET COUNT	3.14		1.50 - 4.50	Lakh/cumm
<b>DIFFERENTIAL COUNT</b>				
NEUTROPHILS	55		40 - 73.0	%
LYMPHOCYTES	35		20 - 40	%
MONOCYTES	07		2.0 - 10.0	%
EOSINOPHILS	03		0.0 - 6.0	%
BASOPHILS	00		0.0 - 1.0	%

<b>HBA1C</b>			
HBA1C	4.9		%

Checked By : DMK

Dr. Nisha Rana  
(Consultant Pathologist)



# Nidaan Hospital

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## DEPARTMENT OF PATHOLOGY

<b>Patient Name</b> :	Mr. HARIOM	<b>Bill Date</b> :	15/01/2022	10.52.45 AM
<b>MR No</b> :	9549	<b>Reporting Date</b> :	15/01/2022	2.15.00 PM
<b>Age/Sex</b> :	33 Years / Male	<b>Sample ID</b> :	37415	
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	22071556	
<b>TPA/Corporate</b> :	MEDIWHEEL	<b>Ref Doctor</b> :	Dr. EMO	
<b>IP No.</b> :				
<b>Current Bed no.</b> :				

Test	Result	Bio. Ref. Interval	Units
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**Note :** HBA1c result is suggestive of Diabetes/ higher than glycemic goal in a known Diabetic patient.  
Please note, glycemic goal should be individualized based on duration of diabetes, age/life expectancy, comorbid conditions, known CVD or advanced microvascular complications, hypoglycaemia unawareness, and individual patient considerations.  
Please Correlate Clinically.

### KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

SERUM UREA	18		10.0 - 50.0	mg/dL
SERUM CREATININE	1.4	H	0.5 - 1.3	mg/dL
SERUM URIC ACID	7.0	H	2.5 - 6.0	mg/dL
SERUM SODIUM	137		130 - 149	mmol/L
SERUM POTASSIUM	4.0		3.5 - 5.5	mmol/L

### LFT(LIVER FUNCTION TEST)

LFT				
TOTAL BILIRUBIN	0.6		0 - 1.0	mg/dL
DIRECT BILIRUBIN	0.2		0.00 - 0.30	mg/dL
INDIRECT BILIRUBIN	0.4		Adult: 0 - 0.8	mg/dL
SGOT (AST)	34		0.0 - 50.0	IU/L
SGPT (ALT)	73	H	00 - 50.00	IU/L
ALKALINE PHOSPHATASE	151	H	Adult: 50 - 136	U/L
TOTAL PROTEINS	7.6		6.6 - 8.2	g/dL
ALBUMIN	4.2		3.20 - 5.00	g/dL
GLOBULIN	3.4		2.0 - 3.50	g/dL
A/G RATIO	1.24			

### LIPID PROFILE

<b>LIPID PROFILE</b>				
SERUM CHOLESTROL	144		0 - 200	mg/dl

Checked By :

*[Signature]*

Dr. Nisha Rana  
(Consultant Pathologist)

Page 2 of 4

Sonipat, Haryana- 131001, Ph.: 0130 -2400000, Mob.: +91 7533033001, 7531919191, 8944000000  
(This is only professional opinion and not the diagnosis, Please correlate clinically)

the **health** care providers

the **health** care providers



# Nidaan Hospital

By Park Group of Hospitals

## DEPARTMENT OF PATHOLOGY

Patient Name : Mr. HARIOM  
MR No : 9549  
Age/Sex : 33 Years / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL  
IP No. :  
Current Bed no. :

Bill Date : 15/01/2022 10.52.45 AM  
Reporting Date : 15/01/2022 11.48.24 AM  
Sample ID : 37415  
Bill/Req. No. : 22071556  
Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
SERUM TRIGLYCERIDES	212 H	Up to 150	mg/dl
HDL CHOLESTEROL	31	30 - 60	mg/dl
VLDL CHOLESTEROL	42.4	*Less than 30	mg/dL
LDL CHOLESTEROL	70.6	Optimal <100, Above Opt. 100-129 -high 160-189	mg/dl
LDL CHOLESTEROL/HDL RATIO	2.28	Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0	

## STOOL ROUTINE

### PHYSICAL EXAMINATION

COLOUR	Brown	Brown
CONSISTENCY	Semi Solid	Formed
MUCUS	NIL	NIL
BLOOD	NIL	NIL

### CHEMICAL EXAMINATION

REACTION	Alkaline	Alkaline
OCCULT BLOOD	NEGATIVE	NEGATIVE

### MICROSCOPIC EXAMINATION

CYSTS/OVA	Giardia Lamblia	NIL
VEGETATIVE FORMS	NIL	NIL
PUS CELLS	1-2/hpf	NIL
FAT GLOBULES	NIL	NIL
VEGETABLE MATTER	+	NIL
STARCH	NIL	NIL
UNDIGESTED	+	NIL

Note : Stool concentration done by Formal either concentration technique.

## URINE ROUTINE EXAMINATION

### PHYSICAL EXAMINATION

Checked By :

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(Consultant Pathologist)

Page 3 of 4

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# Nidaan Hospital

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## DEPARTMENT OF PATHOLOGY

Patient Name : Mr. HARIOM

MR No : 9549

Age/Sex : 33 Years / Male

Type : OPD

TPA/Corporate : MEDIWHEEL

IP No. :

Current Bed no. :

Bill Date : 15/01/2022 10.52.45 AM

Reporting Date : 15/01/2022 11.28.19 AM

Sample ID : 37415

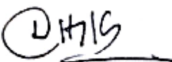
Bill/Req. No. : 22071556

Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
VOLUME	20		ml
COLOUR	Pale Yellow	Pale Yellow	
APPEARANCE	Clear	Clear	
<b>CHEMICAL EXAMINATION</b>			
REACTION	Acidic		
BLOOD	NIL		
ALBUMIN	Traces	NIL	
GLUCOSE	NIL	NIL	
<b>MICROSCOPIC EXAMINATION</b>			
PUS CELL	2-3	2-4	/HPF
RED BLOOD CELLS	Nil	NIL	/HPF
EPITHELIAL CELLS	1-2	2-4	/HPF
CASTS	NIL	NIL	
CRYSTALS	NIL	NIL	

Note : Albumin test positive by Multistrip Method is confirmed by Sulphosalicylic acid method.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*

Checked By : 

Dr. Nisha Rana  
(Consultant Pathologist)



Patient Name: Mr. HARI OM	Lab No: 012201150056
Age/Sex: 33 Y/Male	Reg Date: 15/Jan/2022 06:05PM
BarcodeNo: 10075274	Sample Coll. Date: 15/Jan/2022 06:33PM
Referred By: Self	Sample Rec. Date: 15/Jan/2022 06:33PM
Client Code/Name: LCHR50 Park Nidaan Hospital	Report Date: 15/Jan/2022 08:00PM

**IMMUNOLOGY**

Test Name With Methodology	Value	Unit	Bio Ref.Interval
<b>Thyroid Profile-I (T3, T4, TSH)</b>			
T3 ,Serum Method:CLIA	156.00	ng/dL	60-181
T4 ,Serum Method:CLIA	9.10	ug/dL	4.5-12.6
TSH, Serum Method:CLIA	1.70	uIU/mL	0.13-6.33

**Comments:**

The usual blood test done for thyroid function are TSH, T4 and rarely T3. A blood sample is taken from vein. Usually the free or active portion of T3 and T4 is measured. In pregnancy the serum TSH reference range is different from the general population and should ideally be based on reference ranges derived from healthy pregnant women in the same population.

**Reference Range**

Age	Total T3 (ng/dl)	Total T4 ( ug/dl)	TSH (uIU/ml)
1 - 6 days	73 - 288	5.04 - 18.5	0.7 - 15.0
6 days -3 months	80 - 275	5.41 - 17.0	0.72 - 11.0
4 - 12 months	86 - 265	5.67 - 16.0	0.73 - 8.35
1 - 6 years	92 - 248	5.95 - 14.7	0.70 - 5.97
7 - 11 years	93 - 231	5.99 - 13.8	0.60 - 5.84
12 - 20 years	91 - 218	5.91 - 13.2	0.51 - 6.50
>20 years	60 - 181	4.50 - 12.6	0.13 - 6.33

**NOTE :**

TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and min between 6-10 PM. The variation is the order of 50% hence time of the day has influence on the measures serum TSH concentration. Dose and time of drug intake also influence the test results.

**INTERPRETATIONS :**

- 1.If the TSH level is high and the T4 result is low this suggests an underactive thyroid (hypothyroidism) that requires treatment.
- 2.If the TSH level is low and the T4 result is high this suggests an overactive thyroid (hyperthyroidism) that requires treatment.
- 3.If the TSH level is slightly raised but the T4 level is still within the normal reference range this is called subclinical hypothyroidism or mild thyroid failure.
- 4.A low TSH with a low T4 may be a result of a failure of the pituitary gland (secondary hypothyroidism caused by hypopituitarism) or a response to a significant non-thyroid illness.

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

DR. SONALI MD, PATH  
CONSULTANT PATHOLOGIST

