

Patient's Name:-	BANSI BALIR			Date :-	24/12/2022
Age & Sex :-	42Y	M			
Referred By :-	HEALTH CHECKUP				

USG ABDOMEN & PELVIS

LIVER : normal in size shape and Fatty echotexture.

No focal solid or cystic mass seen.

Portal & biliary radicals normal.

PV & CBD normal.

G.B. : Minimally Distended and Shows Approximately 6 and 8 mm Sized Calculus.

PANCREAS : visualised reveals normal echotexture. No mass, calcification or pancreatitis.

SPLEEN : Normal size & reveals normal echotexture. No other focal mass seen.

BOTH KIDNEY : RK: 113 x 39mm. LK:106 x 54mm.

Both kidneys are normal size with normal cortical thickness.

Moderate Hydronephrosis. of Left Pelvi Calyceal System And Dilated Ureter Up to the Level of Approximately 7 to 8 mm Sized Calculus Seen at Left Lower Ureter.

No focal solid or cystic mass seen.

C.M differentiation is preserved. No parenchymal abnormality seen.

U. BLADDER : Well distended & normal.No mass or filling defect seen.

PROSTATE: Normal in size & echotexture.No mass or calcification seen.

BOWEL LOOPS : peristaltic bowel loops seen in lower abdomen. Bowel loops are normal calibre (Visualized).

No free fluid seen. No enlarged lymphnodes seen.

IMPRESSION:

- Left Lower Ureteric Calculus resultant Dilated Proximal Ureter and Moderate Left Hydronephrosis.
- GB Calculi.
- Fatty changes in liver.(grade I)

DR.NIKITA PATEL
CONSULTANT RADIOLOGIST

Thanks for reference. Please co-relate clinically.

Note: This report is not valid for medico-legal purpose. There can be typing error, which can be correctable.

Sonography has its own limitation. Clinical Correlation and Further Invention If Needed Clinically.

DUPLICATE

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X-RAY CHEST PA.

- Both Lung fields appear normal.
No evidence of any collapse / consolidation.
- Both Hila appear normal.
No evidence of any enlarged Hilar lymphnodes.
- Both CP angle clear.
- Cardiac size appear normal.
- Both hemi diaphragm appears normal
- Bony cage appear normal

COMMENTS :

- **No Significant abnormality detected.**

DR. NIKITA PATEL
CONSULTANT RADIOLOGIST

Thanks for reference. Please co-relate clinically.

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DUPLICATE

Patient Name : MR. BANSI BALIR

Age / Gender : 42 years / Male

Patient ID : 17213

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 24/12/2022, 09:29 AM

Reporting Time : 24/12/2022, 02:57 PM

Sample ID :



002135822

Test Description	Value(s)	Reference Range	Unit(s)
CBC			
Hemoglobin (Hb)* Method : Cymeth Photometric Measurement	12.9	13.5 - 18.0	gm/dL
Erythrocyte (RBC) Count* Method : Electrical Impedence	4.39	4.7 - 6.0	mil/cu.mm
Packed Cell Volume (PCV)* Method : Calculated	37.8	42 - 52	%
Mean Cell Volume (MCV)* Method : Electrical Impedence	86.10	78 - 100	fL
Mean Cell Haemoglobin (MCH)* Method : Calculated	29.38	27 - 31	pg
Mean Corpuscular Hb Concn. (MCHC)* Method : Calculated	34.13	32 - 36	gm/dL
Red Cell Distribution Width (RDW)* Method : Electrical Impedence	13.4	11.5 - 14.0	%
Total Leucocytes (WBC) Count* Method : Electrical Impedence	7490	4000-10000	cell/cu.mm
Neutrophils* Method : VCSn Technology	54	40 - 80	%
Lymphocytes* Method : VCSn Technology	38	20 - 40	%
Monocytes* Method : VCSn Technology	05	2 - 10	%
Eosinophils* Method : VCSn Technology	03	1 - 6	%
Basophils Method : VCSn Technology	00	0 - 4	%
Platelet Count* Method : Electrical Impedence	293	150 - 450	10 ³ /ul

E.S.R

Erythrocyte Sedimentation Rate Method : EDTA Whole blood, modified westergren	20	<15	mm/hr
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Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

****END OF REPORT****

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. BANSI BALIR
Age / Gender : 42 years / Male
Patient ID : 17213
Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 24/12/2022, 09:29 AM

Reporting Time : 24/12/2022, 05:17 PM

Sample ID :



002135822

Test Description	Value(s)	Reference Range	Unit(s)
RENAL PROFILE			
Urea *	16.7	17- 55 mg/dL	mg/dL
Method : Serum, Urease			
Creatinine*	0.84	0.6 - 1.4 mg/dl	mg/dL
Method : Serum, Enzymatic			
Uric Acid*	8.2	3.5 - 7.2	mg/dL
Method : Serum, Uricase/POD			
Blood Urea Nitrogen-BUN*	7.80	7 - 25 mg/dL	mg/dL
Method : Calculated			
Calcium*	10.67	8.8 - 10.6	mg/dL
Method : Arsenazo III			
Sodium*	138.9	136 - 146	mmol/L
Method : Serum, Indirect ISE			
Potassium*	4.58	3.5 - 5.1	mmol/L
Method : Serum, Indirect ISE			
Chloride*	97.0	97.0 - 108.0	mmol/L
Method : Serum, Indirect ISE			
LIVER FUNCTION TEST-1			
Bilirubin - Total	0.49	0.3 - 1.2	mg/dL
Method : Diazotization			
Bilirubin - Direct	0.17	Adults and Children: 0.0 - 0.4	mg/dL
Method : Serum, Diazotization			
Bilirubin - Indirect	0.32		
Method : Calculated			
SGOT	40.8	< 50	U/L
Method : Serum, UV without PSP			
SGPT	51.1	< 50	U/L
Method : Serum, UV without PSP			
Alkaline Phosphatase-ALPI	64	30-120	U/L
Method : Serum, PNPP, AMP Buffer, IFCC 37 degree			
Total Protein	8.34	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.32	Adults: 3.5 - 5.2	g/dL
Method : Serum, Bromocresol green			
Globulin	4.02	1.8 - 3.6	g/dL
Method : Calculated			
A/G Ratio	1.07	1.2 - 2.2	ratio
Method : Calculated			

****END OF REPORT****

Bhaliya

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. BANSI BALIR

Age / Gender : 42 years / Male

Patient ID : 17213

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup Maharashtra | Goa | Gujarat

Collection Time : 24/12/2022, 09:29 AM

Reporting Time : 24/12/2022, 05:19 PM

Sample ID :



002135622

Test Description	Value(s)	Reference Range	Unit(s)
<u>BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD</u>			
Blood Group Method : Forward and Reverse By Tube Method	"B"		
RH Factor	Positive		
Methodology			
This is done by forward and reverse grouping by tube Agglutination method.			
Interpretation			
Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).			
<u>BLOOD GLUCOSE FASTING (FBS)</u>			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	159.0	Normal: 70 - 99 Impaired Tolerance: 100-125 Diabetes mellitus: >= 126 (on more than one occasion) (American diabetes association guidelines 2018)	mg/dL
Urine Fasting	Absent		
<u>BLOOD GLUCOSE POST PRANDIAL (PP2BS)</u>			
Blood Glucose-Post Prandial Method : Hexokinase	196.9	70 - 140	mg/dL
Urine Post Prandial	Absent		
<u>THYROID FUNCTION TEST 1</u>			
T3-Total Method : Serum, CLIA	1.33	0.69 - 2.15 ng/mL	ng/mL
T4-Total Method : Serum, CLIA	52.5	52 - 127 ng/mL	ng/mL
TSH Method : Serum, CLIA	2.47	0.3 - 4.5 uIU/mL	uIU/mL

****END OF REPORT****

B. Sholija

Dr. Shavika Dholiya
M. D. Pathology
Registration No: G-32571

Patient Name : MR. BANSI BALIR

Age / Gender : 42 years / Male

Patient ID : 17213

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup Gujarat

Collection Time : 24/12/2022, 09:29 AM

Reporting Time : 24/12/2022, 05:19 PM

Sample ID :



002135822

Test Description	Value(s)	Reference Range	Unit(s)
GLYCOSYLATED HB (HBA1C)			
Glyco Hb (HbA1C)	7.4	Non-Diabetic: <=5.6 Pre Diabetic:5.7-6.4 Diabetic: >=6.5	%
Estimated Average Glucose :	165.68		mg/dL

Interpretations

1. HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%
2. Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
3. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.

Excellent control-6-7 %

Fair to Good control - 7-8 %

Unsatisfactory control - 8 to 10 %

Poor Control - More than 10 %

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Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup
Collection Time : 24/12/2022, 09:29 AM
Reporting Time : 24/12/2022, 05:16 PM
Sample ID :



Test Description	Value(s)	Reference Range	Unit(s)
LIPID PROFILE (D)			
Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	210.0	Desirable: <= 200 Borderline High: 201-239 High: > 239	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	880.4	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	35.2	Normal: > 40 Major Heart Risk: < 40	mg/dL
LDL Cholesterol Method : Calculated	127.4	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190	mg/dL
Non - HDL Cholesterol, Serum Method : calculated	174.80	Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL Very High: > or = 190 mg/dL	mg/dL
VLDL Cholesterol Method : calculated	47.4	6 - 38	mg/dL
CHOL/HDL RATIO Method : calculated	5.97	3.5 - 5.0	ratio
LDL/HDL RATIO Method : calculated	3.61	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio
HDL/LDL RATIO Method : calculated	0.27	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio

Note: 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs (such as androgenic and related steroids); and insulin therapy etc. 12 hours fast is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for atleast 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for atleast 24 hours before testing (On Doctors Advice). Intraindividual variations, seasonal as well as positional variations (levels lower when sitting compared to standing etc.) have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

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Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full Body Health Checkup Gujarat

Collection Time : 24/12/2022, 09:29 AM

Reporting Time : 24/12/2022, 03:30 PM

Sample ID :



002135822

Test Description	Value(s)	Reference Range	Unit(s)
URINE ROUTINE			
Volume*	30	ml -	ml
Colour*	Pale Yellow	Pale Yellow	
Transparency (Appearance)*	Clear	Clear	
Deposit*	Absent	Absent	
Reaction (pH)*	6.0	4.5 - 8	
Specific Gravity*	1.005	1.010 - 1.030	
Chemical Examination (Automated Dipstick Method) Urine			
Urine Glucose (sugar)*	Absent	Absent	
Urine Protein (Albumin)*	Absent	Absent	
Urine Ketones (Acetone)*	Absent	Absent	
Blood*	Absent	Absent	
Bile pigments*	Absent	Absent	
Nitrite*	Absent	Absent	
Microscopic Examination Urine			
Pus Cells (WBCs)*	Occasional	0 - 5	/hpf
Epithelial Cells*	Absent	0 - 4	/hpf
Red blood Cells*	Absent	Absent	/hpf
Crystals*	Absent	Absent	
Cast*	Absent	Absent	
Trichomonas Vaginalis*	Absent	Absent	
Yeast Cells*	Absent	Absent	
Amorphous deposits*	Absent	Absent	
Bacteria*	Absent	Absent	

****END OF REPORT****

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