



Date	11/09/2021	Srl No.	23	Patient Id	2109110023
Name	Mrs. MANJULA	Age	53 Yrs.	Sex	F
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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### HAEMATOLOGY

HBA1C	8.1	%	
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#### EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

#### REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia .

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's

recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia

monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes

Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

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

**Dr.R.B.RAMAN**  
MBBS, MD  
CONSULTANT PATHOLOGIST



ISO 9001 : 2015

# AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,  
Near Malahi Pakari Chowk, Kankarbagh, Patna - 20

9264278360, 9065875700, 8789391403

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COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	10.2	gm/dl	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	4,200	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	67	%	40 - 75
LYMPHOCYTE	30	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	02	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	14	mm/1st hr.	0 - 20
R B C COUNT	3.1	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	30.6	%	35 - 45
M C V	98.71	fl.	80 - 100
M C H	32.9	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	3.49	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		

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

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**BIOCHEMISTRY**

BLOOD SUGAR FASTING	178.8	mg/dl	70 - 110
BLOOD SUGAR PP	219.2	mg/dl	80 - 160
SERUM CREATININE	0.97	mg%	0.5 - 1.3
BLOOD UREA	28.1	mg /dl	15.0 - 45.0
SERUM URIC ACID	7.2	mg%	2.5 - 6.0
<b><u>LIVER FUNCTION TEST (LFT)</u></b>			
BILIRUBIN TOTAL	0.61	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.18	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D. Bilirubin)	0.43	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.9	gm/dl	6.6 - 8.3
ALBUMIN	3.6	gm/dl	3.4 - 4.8
GLOBULIN	3.3	gm/dl	2.3 - 3.5
AG RATIO	1.091		
SGOT	26.1	IU/L	5 - 35
SGPT	29.7	IU/L	5.0 - 45.0
ALKALINE PHOSPHATASE IFCC Method	272.5	U/L	35.0 - 104.0
GAMMA GT	25.1	IU/L	6.0 - 42.0
<b>LFT INTERPRET</b>			
<b><u>LIPID PROFILE</u></b>			
TRIGLYCERIDES	151.3	mg/dL	40.0 - 165.0



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Test Name	Value	Unit	Normal Value
TOTAL CHOLESTEROL	182.2	mg/dL	123.0 - 199.0
H D L CHOLESTEROL DIRECT	63.5	mg/dL	40.0 - 79.4
V L D L	30.26	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	88.44	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	2.869		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.393		0.00 - 3.55
THYROID PROFILE			
T3	0.71	ng/ml	0.60 - 1.81
T4	8.79	ug/dl	4.5 - 10.9
Chemiluminescence			
TSH	1.61	uIU/ml	
Chemiluminescence			
<b>REFERENCE RANGE</b>			
<b>PAEDIATRIC AGE GROUP</b>			
0-3 DAYS	1-20	ulu/ ml	
3-30 DAYS	0.5 - 6.5	ulu/ml	
1 MONTH -5 MONTHS	0.5 - 6.0	ulu/ml	
6 MONTHS- 18 YEARS	0.5 - 4.5	ulu/ml	
<b>ADULTS</b>	0.39 - 6.16	ulu/ml	

**Note:** TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates  $\pm 50\%$ , hence time of the day has influence on the measured serum TSH concentration.



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Assay performed on enhanced chemi luminescence system ( Centaur-Siemens)

Serum T3, T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

QUANTITY	15	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.030	
PH	6.0	



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## CHEMICAL EXAMINATION

ALBUMIN NIL

SUGAR NIL

## MICROSCOPIC EXAMINATION

PUS CELLS 0-1 /HPF

RBC'S NIL /HPF

CASTS NIL

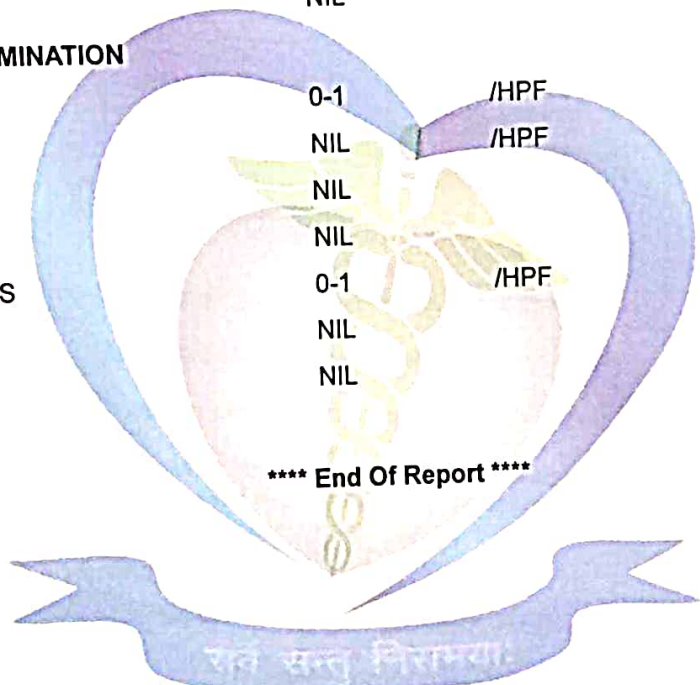
CRYSTALS NIL

EPITHELIAL CELLS 0-1 /HPF

BACTERIA NIL

OTHERS NIL

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



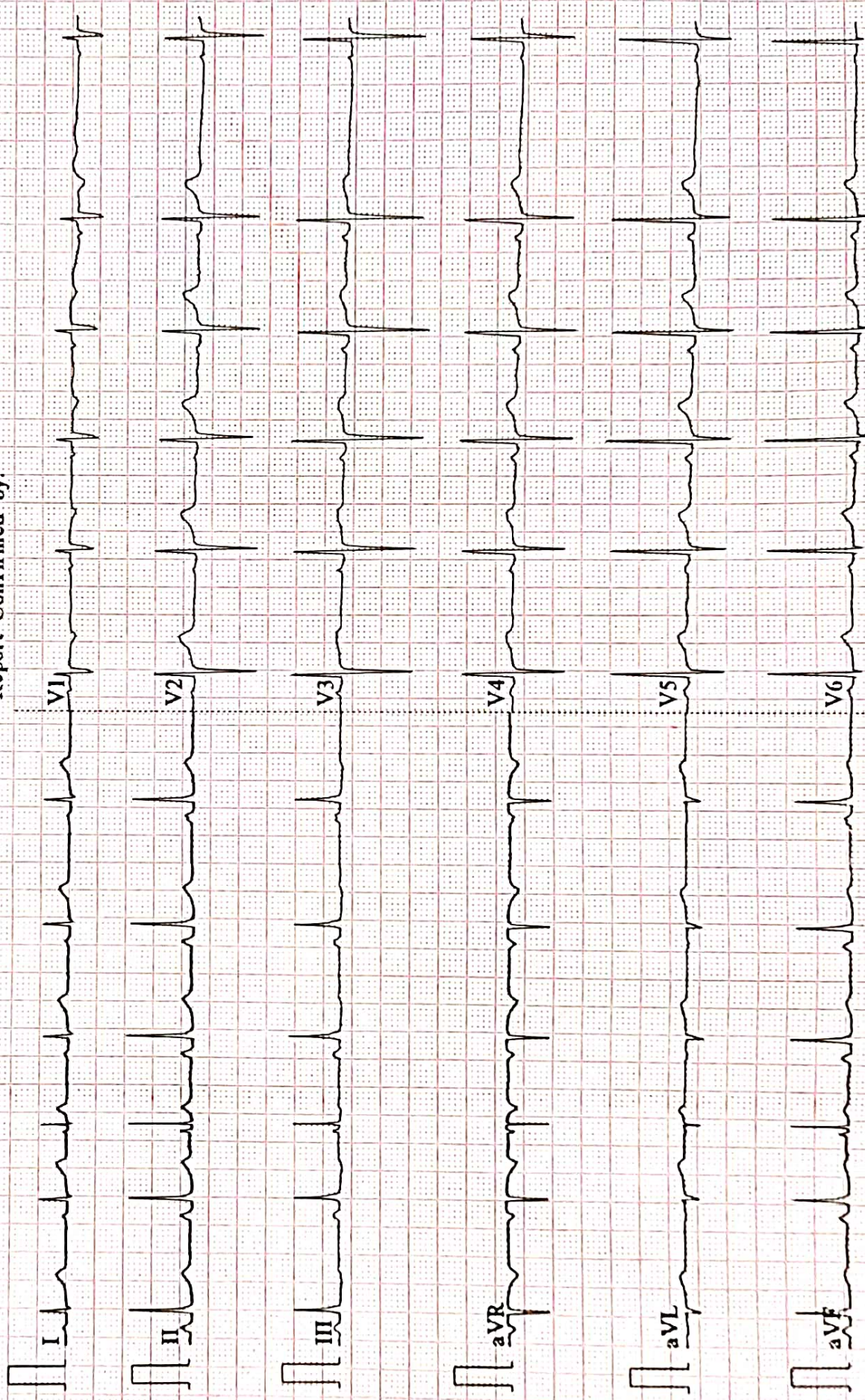
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anjula  
 Female  
 Years

HR : 71 bpm  
 P : 81 ms  
 PR : 136 ms  
 QRS : 71 ms  
 QT/QTc : 371/403 ms  
 P/QRST : 67/71/38 °  
 RV5/SVI : 1.383/0.442 mV

Diagnosis Information:  
 Sinus Arrhythmia

Report Confirmed by:





# SUBHAM IMAGING & A.L.C. DIAGNOSTICS CENTRE

H.O. : Ajay Market, Dena Bank Building, East Ashok Nagar, Kankarbagh, Patna - 20

B.O. : Khanpura Road (Below Gyan Sharowar School), Paliganj, Patna.

e-mail : shubham.pat.usg@gmail.com # website : www.alchealthcheckup.in

OPINION MUST BE CORRELATES WITH CLINICAL & OTHER INVESTIGATION FOR DIAGNOSIS. NOT FOR MEDICO LEGAL PURPOSE

Pt. Name :- **MANJULA**  
Ref. By :- **DR.AROGAYAM**

Date:- **11-Sep-21**  
Age / Sex - **Yrs. F.**

## REAL TIME U.S.G. OF WHOLE ABDOMEN

Thanks for your kind referral

(Report.)

- LIVER** :- Measures 10.92 cm. Normal in shape , size and echo texture.I.H.B.R. are not dilated. Hepatic veins are normal. No SOL seen.
- G.BL.** :- Lumen is echo free. Wall thickness appears normal.
- C.B.D.** :- Measures 3.5 mm in diameter with echo free lumen. No calculi or mass seen.
- P.V.** :- Measures 7.1 mm in diameter. Appears normal. No thrombus seen.
- PANCREAS** :- Normal in shape, size and echo texture. No calcification mass seen.
- SPLEEN** :- Measures 5.76 cm. Normal in shape, size and echo texture. No SOL seen.
- KIDNEY** :- Both kidney shows normal shape, size & echotexture. C.M.D.intact. P.C.S.is not dilated. No calculi, cyst or hydronephrosis seen on either side.  
**Right Kidney :- Measures 8.52 x 4.2 cm.**  
**Left Kidney :- Measures 8.24 x 4.5 cm.**
- URETER** :- Not dilated .No apparent calculi seen.
- U.BLADDER**:- Shows normal in outline with echo free lumen. No calculi or mass seen.  
**Pre void - 310 ml. Post void - is in significant**
- UTERUS** :- Is normal in size, shape & position measuring 7.01 X 2.55 cm. Endometrial And Myometeriam appears normal in limits No focal mass lesion seen
- ADNEXA** :- Both ovary appears normal in size and shape.  
Rt Ovary Measures - 3.10 cm Lt Ovary Measures 2.30 cm
- P.O.D** :- No collection seen in P.O.D.
- R.I.F.** :- Son graphically no appendicular mass or collection seen.
- OTHERS** :- No Ascites No Lymph Adenopathy. No pleural Effusion seen on either side .

## IMPRESSION

- **Thickened Wall UBL With 60 ml PVR.--? Cystitis With - UTI .**
- **Adv:- Further work up other investigation**  
**Otherwise son graphically normal scan. of rest organs**

  
11/09/21  
Consultant Radiologist

ESTB BY:-

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MD. (Pat)  
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MBBS, PGDMCH  
Consultant Radiologist & Sonologist

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