



एक एहसास क्षमनेपन का Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)
(Formerly known as Paedia Health Private Limited)
CIN : U85110CT2005PTC017751



| | | | |
|--------------|---------------------------|-------------|---------------------|
| UHID | : 153031 | Visit ID | : 0000284064 |
| Patient Name | : MR. SHAIENDRA KUMAR RAI | Spec No. | : |
| Age / Sex | : 50Y / MALE | | : |
| Consultant | : DR. HOSPITAL CASE | Order Date | : 13/08/2022 9:17AM |
| Ref. By | : DR. HOSPITAL CASE | Samp.Date | : |
| Category | : MEDIWHEEL | Report Date | : 13/08/22 12:42PM |

SONOGRAPHY USG WHOLE ABDOMEN

- * **LIVER** :Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen.
- * **PORTO CAVAL SYSTEM**: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- * **COLLECTING DUCT & CBD**:Normal in size and have echo lucent lumen.
- * **GALL BLADDER** :Seen in distended state with normal wall and lumen is echofree
- * **SPLEEN**:Normal in size, shape & echo texture. No focal lesions seen.
- * **PANCREAS**:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.
- * **KIDNEYS**: Both kidneys are of normal shape, size and position.
Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus
- * **URINARY BLADDER** : Seen in distended state and has normal wall architecture.Lumen is echo free.
- * **PROSTATE**:Prostate is Enlarged in size , (Measures 3.60 x 3.46 x 3.30 cm & Volume : 21.52 cc) with mild median lobe bulge indenting the base of Urinary Bladder.

No free fluid is seen in the peritoneal cavity.
There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION :

- **Borderline grade I Prostatomegaly with Mild median lobe bulge indenting the base of Urinary Bladder.**
- Please correlate clinically , followup USG is recommended.

Dr. SAMIR KATHALE
MBBS, DNB(RADIO), MNAMS, MANBD
Fetal Ultrasound & Fetal Medicine (FGI-BFMC)
Reg.No: CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference.



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X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

- No Remarkable Abnormality Detected .

- Please correlate clinically

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| AGE/SEX | : 50Y/MALE | SAMP. DATE | : 13/08/2022 10:30:00AM |
| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10384582 |
| | | RESULT DATE | : 13/08/2022 2:10:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|---|------------|--------|-----------------|
| BLOOD GROUPING AND RH TYPING | | | |
| BLOOD GROUP | "B" | - | - |
| RH FACTOR | Positive | - | - |
| GGT (GAMMA GLUTAMYL TRANSFERASE) | | | |
| GGT (GAMMA GLUTAMYL TRANSFERASE) | 13 U / L | Normal | 8 - 52 |
| URIC ACID | | | |
| URIC ACID | 5.20 mg/dL | Normal | 3.6 - 7.7 |

TECHNICIAN

A Sharma
DE. ANJANA SHARMA
D.N.B PATHOLOGY
CONSULTANT

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DEPARTMENT OF PATHOLOGY

CREATININE

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|------------|--------------|--------|-----------------|
| CREATININE | 1.07 mg / dl | Normal | 0.6 - 1.2 |

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DEPARTMENT OF PATHOLOGY

LIPID PROFILE

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------|---------------|--------|-----------------|
| CHOLESTEROL TOTAL | 188 mg / dl | Normal | 150 - 220 |
| TRIGLYCERIDES - SERUM | 121 mg / dl | Normal | 60 - 165 |
| HDL | 57.27 mg / dl | Normal | 35 - 80 |
| LDL | 106.53 mg/dL | Normal | 90 - 160 |
| VLDL | 24.20 | Normal | 20 - 50 |
| CHOL : HDL Ratio | 3.28:1 | | 3.5 - 5.5 |
| LDL: HDL Ratio | 1.86:1 | | - |

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DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COUNT)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------|-------------------|--------|-----------------|
| HAEMOGLOBIN (Hb) | 14.2 gm% | Normal | 13.5 - 17.5 |
| TOTAL RBC COUNT | 4.56 Million/cumm | Normal | 4.5 - 5.9 |
| HAEMATOCRIT (PCV) | 40.8 % | Low | 41.5 - 50.4 |
| RBC INDICES | | | |
| MCV | 89.5 fl | Normal | 78 - 96 |
| MCH | 31.2 pg | Normal | 27 - 32 |
| MCHC | 34.8 % | Normal | 33 - 37 |
| RDW | 12.5 % | Normal | 11 - 16 |
| TOTAL WBC COUNT (TLC) | 4800 /cumm | Normal | 4000 - 11000 |
| DIFFERENTIAL COUNT | | | |
| NEUTROPHILS | 66 % | Normal | 0 - 75 |
| LYMPHOCYTES | 24 % | Normal | 22 - 48 |
| EOSINOPHILS | 06 % | Normal | 0 - 6 |
| MONOCYTES | 04 % | Normal | 2 - 10 |
| BASOPHILS | 00 % | Normal | 0 - 2 |
| BANDS | 00 % | Normal | 0 - 5 |
| BLAST | 00 % | Normal | |
| PLATELET COUNT | 156000 /cumm | Normal | 150000 - 450000 |

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DEPARTMENT OF PATHOLOGY

BUN (BLOOD UREA NITROGEN)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|---------------------------|--------------|--------|-----------------|
| BUN (BLOOD UREA NITROGEN) | 17.7 mg / dl | Normal | 8 - 23 |

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DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-------------|-------------|--------|-----------------|
| PSA (TOTAL) | 0.819 ng/ml | Normal | 0 - 4 |

Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liquifies semen in the terminal coagulum and allows sperms to swim freely.

Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

Clinical Use

- 1) An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- 2) Followup and management of Prostate cancer patients
- 3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

Note:

1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjunction with clinical findings in association with medical judgement.

2) Patient sample containing human anti mouse antibodies (HAMA) may give falsely elevated or decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.

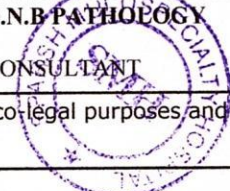
3) Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

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DEPARTMENT OF PATHOLOGY

URINE SUGAR FASTING

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------|-------|--------|-----------------|
| URINE FOR SUGAR | Nil | | - |

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DEPARTMENT OF PATHOLOGY

BLOOD SUGAR - FASTING AND PP

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|---------------------|-----------|--------|-----------------|
| BLOOD SUGAR FASTING | 100 mg/dL | Normal | 80 - 120 |
| BLOOD SUGAR PP | 112 mg/dL | Low | 120 - 140 |

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DEPARTMENT OF PATHOLOGY

URINE SUGAR PP

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------|-------|--------|-----------------|
| URINE FOR SUGAR | Nil | | - |

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DEPARTMENT OF PATHOLOGY

T3,T4 TSH

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------------------|--------------|--------|-----------------|
| T3 (TRIIODOTHYRONINE) | 1.854 ng/ml | Normal | 0.69 - 2.15 |
| T4 (THYROXINE) | 74.18 ng/ml | Normal | 52 - 127 |
| TSH (THYROID STIMULATING HORMONE) | 0.817 uIU/ml | Normal | 0.3 - 4.5 |

REFERENCE GROUP REFERENCE RANGE in uIU/mL
As per American Thyroid Association

| | |
|----------------------------|-------------|
| Adult Females (> 20 years) | 0.30- 4.5 |
| Pregnancy | |
| 1st Trimester | 0.10- 2.50 |
| 2nd Trimester | 0.20 - 3.00 |
| 3rd Trimester | 0.30 - 3.00 |

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.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
1. 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

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DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICROSCOPY

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|--------------------------------|-----------------|--------|-----------------|
| PHYSICAL EXAMINATION | | | |
| QUANTITY | 10 ml | - | - |
| COLOUR | Pale Yellow | - | - |
| APPEARANCE | Clear | - | - |
| REACTION | Acidic | - | - |
| CHEMICAL EXAMINATION | | | |
| ALBUMIN | Nil | - | - |
| SUGAR | Nil | - | - |
| MICROSCOPIC EXAMINATION | | | |
| EPITHELIAL CELLS | Nil /hpf | - | 0 - 5 |
| PUS CELLS | Occasional /hpf | - | 1 - 2 |
| RBC | Nil /hpf | - | - |
| CAST | Nil /lpf | - | - |
| CRYSTAL | Nil | - | - |
| AMORPHOUS MATERIAL DEPOSIT | Nil | - | - |
| OTHERS | Nil | - | - |

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DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------------------|-------|--------|-----------------|
| HBA1 C (GLYCOSYLATED HEAMOGLOBIN) | 5.5 % | Normal | 4 - 6 |

Interpretation

As per American diabetes Association (ADA)

Reference Group - HbA1c In%
Non diabetic >= 18 years - 4.0 - 6.0
At risk (Prediabetes) - >= 6.0 to < = 6.5
Diagnosing diabetes - >=6.5

Therapeutic goals for glycemc control

- Age > 19 years
- Goal of therapy: <7.0
- Action suggested: >8.0
- Age < 19 years
- goal of therapy: < 7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.
2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemc control as compared to blood and urinary glucose determination.

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DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICROSCOPY

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|--------------------------------|-----------------|--------|-----------------|
| PHYSICAL EXAMINATION | | | |
| QUANTITY | 10 ml | - | - |
| COLOUR | Pale Yellow | - | - |
| APPEARANCE | Clear | - | - |
| REACTION | Acidic | - | - |
| CHEMICAL EXAMINATION | | | |
| ALBUMIN | Nil | - | - |
| SUGAR | Nil | - | - |
| MICROSCOPIC EXAMINATION | | | |
| EPITHELIAL CELLS | Nil /hpf | - | 0 - 5 |
| PUS CELLS | Occasional /hpf | - | 1 - 2 |
| RBC | Nil /hpf | - | - |
| CAST | Nil /lpf | - | - |
| CRYSTAL | Nil | - | - |
| AMORPHOUS MATERIAL DEPOSIT | Nil | - | - |
| OTHERS | Nil | - | - |

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DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|----------------------|--------------|--------|-----------------|
| BILIRUBIN TOTAL | 0.73 mg/dL | Normal | 0.1 - 1.2 |
| BILIRUBIN DIRECT | 0.29 mg / dl | Normal | 0.1 - 0.6 |
| BILIRUBIN INDIRECT | 0.44 mg / dl | High | 0.1 - 0.4 |
| ALKALINE PHOSPHATASE | 108 U / L | Normal | 0 - 270 |
| SGOT | 25 U / L | Normal | 10 - 55 |
| SGPT | 19 U / L | Normal | 0 - 40 |
| TOTAL PROTEIN | 7.83 g / dl | Normal | 6 - 8 |
| ALBUMIN | 4.87 g/dl | Normal | 4 - 5 |
| GLOBULIN | 2.96 g / dl | Normal | 2 - 3.5 |
| A.G.RATIO | 1.65:1 | | 1 - 2.5 |

Dr. Anjana Sharma

Dr. ANJANA SHARMA
D.N.B PATHOLOGY

TECHNICIAN

CONSULTANT

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID : 153031 VISITID : 0000284064
PATIENT NAME : MR. SHAIENDRA KUMAR RAI ORDER DATE : 13/08/2022 9:17:00AM
AGE/SEX : 50Y/MALE SAMP. DATE : 13/08/2022 10:30:00AM
CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10384583
RESULT DATE : 13/08/2022 3:28:00PM
TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------|----------------------|--------|-----------------|
| ESR | 10 mm at end of 1 hr | Normal | 0 - 20 |

TECHNICIAN

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