



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.alhealthcheckup.in

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

Pt. Name :- KRISHINA MURARI

Ref. By :- DR./AROGYAM

Date:- 19-Dec-21

Age / Sex – 46 Yrs. M.

REAL TIME U.S.G. OF WHOLE ABDOMEN

Thanks for your kind referral

(Report.)

- LIVER** :- Measures 15.94 cm. Mild Enlarged in shape , size and echo texture fatty change seen in liver parenchyma .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 7.7 mm in diameter. Appears normal. No thrombus seen.
- PANCREAS** :- Normal in shape, size and echo texture. No calcification mass seen.
- SPLEEN** :- Measures 11.18 cm. Normal in shape, size and echo texture.
No SOL seen.
- KIDNEY** :- Both kidney shows normal shape, size & echo texture C.M.D.intact.
P.C.S.is not dilated.
Right Kidney :- Measures 10.50 X 3.50 cm.
Left Kidney :- Measures 11.60 X 3.50 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 – 320 ml. Post void –40 is in significant
- PROSTATE** :- Measures 22 gms.(approx). Mild Enlarged in size, shape, and echo texture.
No calcification , mass ,growth seen. capsule is intact.
- 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

- *Mild Hepatomegaly With fatty liver G-I*
- *Mild Enlarged Prostate (BPH) Grade I with 40 ml PVR*
- *Adv:- Further work up other investigation*
Otherwise son graphically normal scan. of rest organs

19/12/21

Consultant Radiologist

ESTB BY:-

Dr. P. K. Tiwari

MD, BRIT (Radio Imaging)
Consultant Imagionologist & Sonologist
A.L.C. Diagnostics & Research Centre, Patna

Dr. S. Kumar

MD. (Pat)
Consultant Pathologist

Dr. A. K. Singh

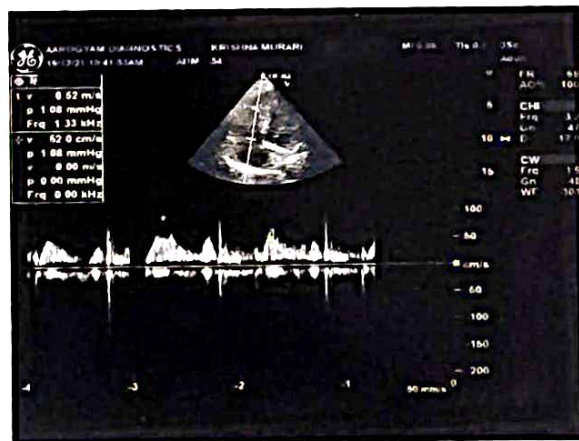
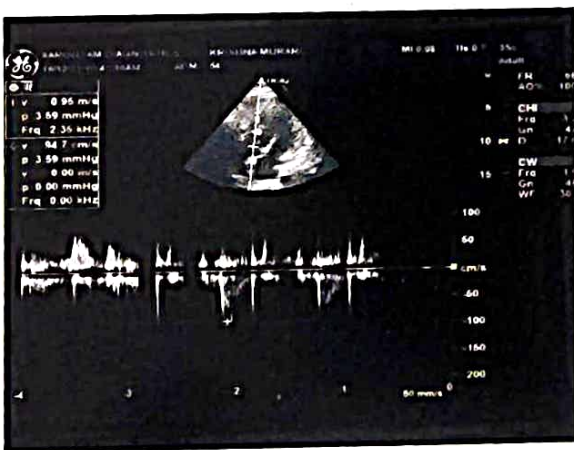
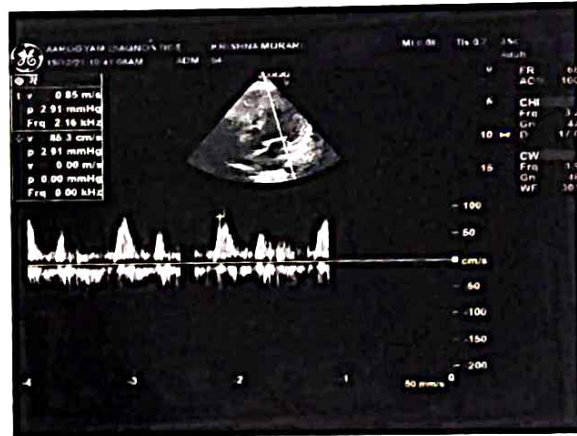
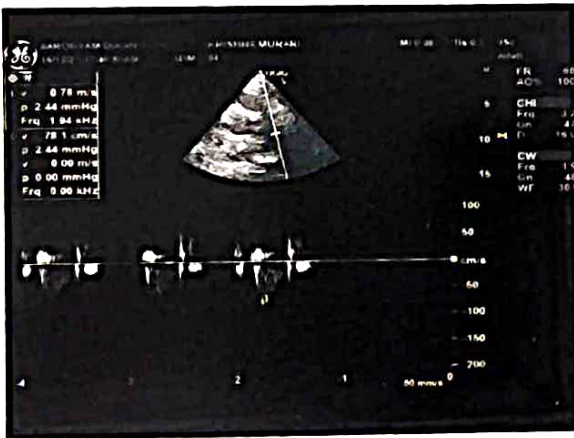
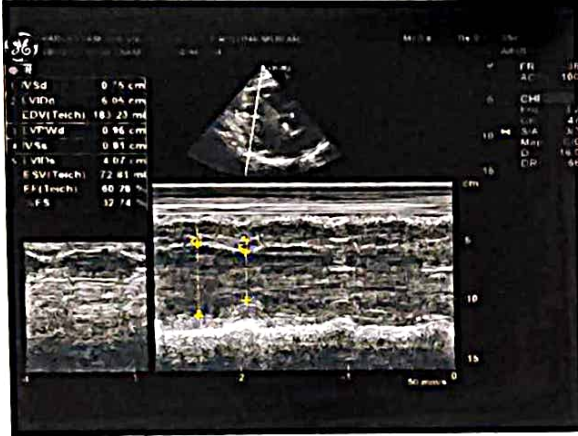
MBBS, PGDMCH
Consultant Radiologist & Sonologist

AAROGYAM DIAGNOSTICS

F-41, P.C. COLONY, KANKARBAGH, PATNA-20

Name KRISHNA MURARI
Patient Id 54

Age 36 Yrs.
Sex MALE





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

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Patient's Name: Mr. Krishna Murari	Date: 19/12/2021
Ref. By:- Dr. BOB.	Age/Sex: 36YRS. /M
Indication for study:- R/O SHD	

ECHOCARDIOGRAPHY REPORT

MEASUREMENTS:

Aortic root diameter	<u>3.3</u>	Normal 2.0-3.7cm <2.2cm/M ²	RV- 2.6
Aortic valve opening		1.5-2.6cm	
Left atrial dimension	<u>3.6</u>	0.9 - 4.0 cm < 2.2 cm / M2	
LEFT VENTRICLE:		Normal	
ED dimension	<u>5.5</u>	3.7 - 5.6 cm < 3.2 cm / M ²	
ES dimension	<u>3.8</u>	2.2 - 4.0 cm	
ED IVS thickness	<u>0.75</u>	0.6-1.0 cm	
ED PW thickness	<u>0.9</u>	0.6-1.0 cm	
ES IVS thickness	<u>1.0</u>		
ES PW thickness	<u>1.2</u>		

MITRAL VALVE

E Velocity = 85 cm/sec	A velocity = cm/sec	E/A =	DT = cm/s.
Max. PG = 3.9 mmHg	Mean PG = mmHg		
Mitral Regurgitation: Nil			
Mitral stenosis: Nil			

AORTIC VALVE

Max. Velocity = 95 cm/sec	Mean Velocity = cm/sec	
Max PG = 3.6 mmHg	Mean PG = mmHg	
Aortic Regurgitation: Nil	PHT = ms	Slope =
Aortic stenosis: Nil		

TRICUSPID VALVE

Max. Velocity = 52 cm/sec	Max PG = 1.0 mmHg
Tricuspid Regurgitation: Nil	PASP = mmHg
Tricuspid stenosis: Nil	

PULMONARY VALVE

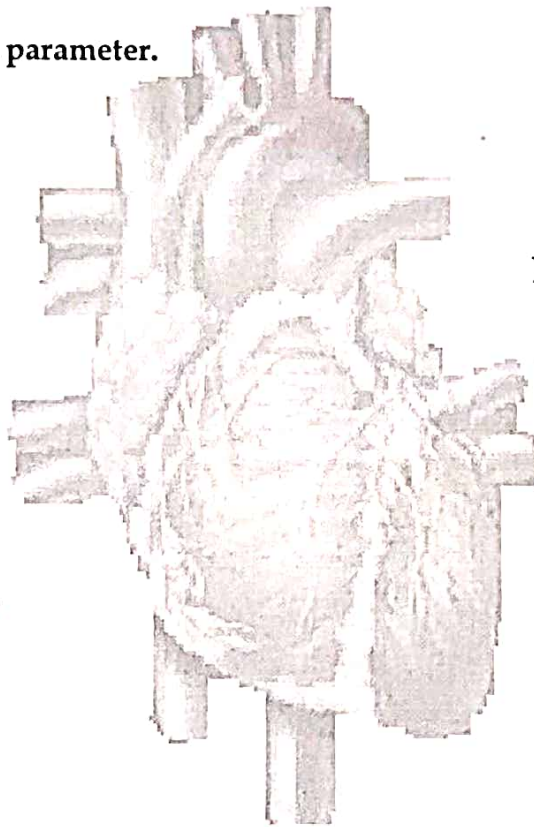
Max. Velocity = 78 cm/sec	Max PG = 2.4 mmHg
Pulmonary Regurgitation: Nil	PAEDP = mmHg
Pulmonary stenosis: Nil	

IMPRESSION- bpm : Normal acoustic Window.

- ◆ No Regional wall motion abnormality Seen.
- ◆ LVEF= 60 %
- ◆ Cardiac chambers are normal.
- ◆ No MR.
- ◆ No TR.
- ◆ No AR
- ◆ Mitral inflow pattern normal.
- ◆ No intracardiac clot/vegetation/P.E.

FINAL IMP-

Normal Echo parameter.



M.C.
Dr. M.C. Mukul
MD (Medicine)
Consultant Cardiologist

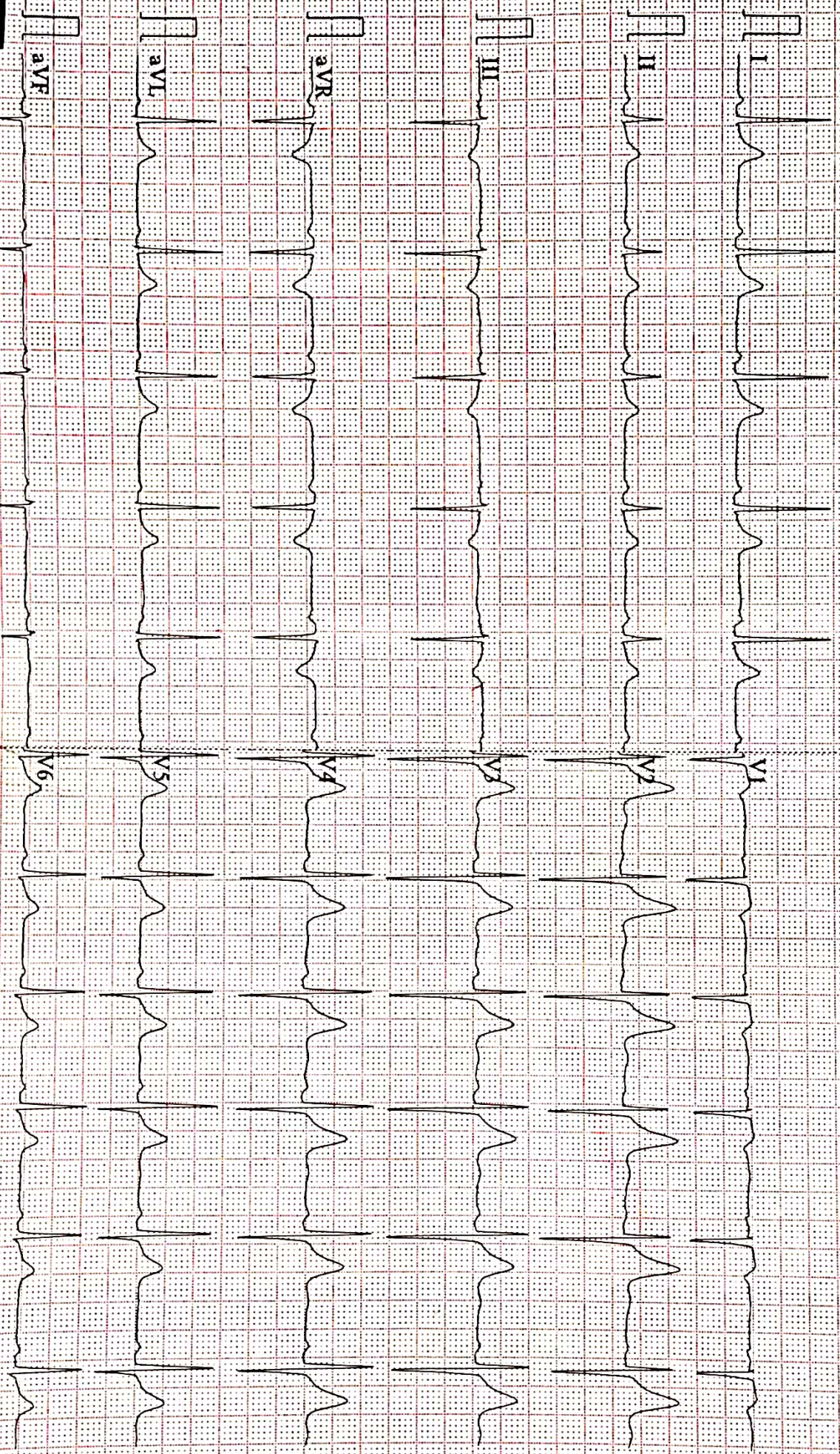
ID: 112
Krishna murari
Male 35Years

19-12-2021 10:13:08 PM

HR : 66 bpm
P : 110 ms
PR : 172 ms
QRS : 77 ms
QT/QTc : 367/387 ms
P/QRST : 33/-12/5
RV5/SV1 : 1.362/0.979 mV

Diagnosis Information:
Sinus Rhythm
High Voltage(Left Ventricle)

Report Confirmed by:



0.67~100HZ AC50 25mm/s 10mm/mV Z=5.0s V2.2 SEMIF V1.81 DAIGNOSTIC



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Date	19/12/2021	Srl No.	7	Patient Id	2112190007
Name	Mr. KRISHNA MURARI	Age	35 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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HAEMATOLOGY

HB A1C	5.1	%	
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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



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Name	Mr. KRISHNA MURARI	Age 35 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	12.6	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,400	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	64	%	40 - 75
LYMPHOCYTE	33	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	02	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	13	mm/1st hr.	0 - 15
R B C COUNT	4.29	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	37.8	%	40 - 54
M C V	88.11	fl.	80 - 100
M C H	29.37	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.63	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		

**** End Of Report ****

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Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR FASTING	77.9	mg/dl	70 - 110
SERUM CREATININE	0.86	mg%	0.7 - 1.4
BLOOD UREA	26.3	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.9	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			
BILIRUBIN TOTAL	0.62	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.21	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.41	mg/dl	0.00 - 0.70
TOTAL PROTEIN	7.0	gm/dl	6.6 - 8.3
ALBUMIN	3.8	gm/dl	3.4 - 4.8
GLOBULIN	3.2	gm/dl	2.3 - 3.5
A/G RATIO	1.188		
SGOT	30.7	IU/L	5 - 40
SGPT	31.4	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	145.7	U/L	40.0 - 130.0
GAMMA GT	24.3	IU/L	8.0 - 71.0

LFT INTERPRET**LIPID PROFILE**

TRIGLYCERIDES	82.3	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	121.6	mg/dL	29.0 - 199.0



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Name	Mr. KRISHNA MURARI	Age 35 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
H D L CHOLESTEROL DIRECT	40.6	mg/dL	35.1 - 88.0
V L D L	16.46	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	64.54	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	2.995		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.59		0.00 - 3.55
THYROID PROFILE			
T3	0.93	ng/ml	0.60 - 1.81
T4 Chemiluminescence	9.59	ug/dl	4.5 - 10.9
TSH Chemiluminescence	1.82	uIU/ml	
REFERENCE RANGE			
PAEDIATRIC AGE GROUP			
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	
ADULTS	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	20	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.020	
PH	6.0	

CHEMICAL EXAMINATION

ALBUMIN	NIL
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Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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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