

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads

Sargasan, Gandhinagar - 382421. Gujarat, India

Phone: 079 29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



DR. PRAKASH D MAKWANA

M.D.

REG.NO.G-29078

MO.NO-9722116164

UHID: 00123132	Date: 28/1/23	Time:
Patient Name: MANISH	Height: 169 cm	
Age / Sex: 34y / M LMP:	Weight: 68.4 kg	
History:		
C/C/O: ROUTINE CHECK UP	History: -	
Allergy History: DUST	Addiction: -	
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Vitals & Examination:		
Temperature: Afebrile		
Pulse: 71/min		
BP: 120/90 mm Hg		
SPO2: 98.00 Room Air		
Provisional Diagnosis:		

DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID: 00123132	Date: 28/1/23	Time:
Patient Name: मधुकर रव	Age / Sex: 34	Height: 169 cm
	Weight: 68.4 Kg	
History: c/o रुग्धर र		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: D.V.K. G16 G16 N.V. G16 G16 रुग्धर र		
Diagnosis:		

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CIN: L85110GJ2012PLC072647



PATIENT NAME: MANISH GUPTA

GENDER/AGE: Male / 34 Years

DATE: 28/01/23

DOCTOR:

OPDNO: O0123132

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 9.4 x 4.0 cms in size.

Left kidney measures about 10.2 x 4.2 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 160 cc.

PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen. Prostate volume measures about 14 cc.

COMMENT: Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, bladder and prostate.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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GENDER/AGE: Male / 34 Years

DATE: 28/01/23

DOCTOR:

OPDNO: O0123132

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

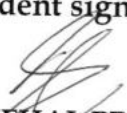
Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

IMPRESSION:

No evident significant abnormality detected.


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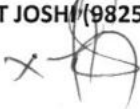
PATIENT NAME:MANISH GUPTA
GENDER/AGE:Male / 34 Years
DOCTOR:DR.HASIT JOSHI
OPDNO:O0123132

DATE:28/01/23

2D-ECHO

MITRAL VALVE : AML LONG REDUNDANT
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
AORTA : 29mm
LEFT ATRIUM : 32mm
LV Dd / Ds : 44/29mm EF 60%
IVS / LVPW / D : 10/9mm
IVS : INTACT
IAS : INTACT
RA : NORMAL
RV : NORMAL
PA : NORMAL
PERICARDIUM : NORMAL
VEL : PEAK MEAN
M/S : Gradient mm Hg Gradient mm Hg
MITRAL : 1/0.7m/s
AORTIC : 1.2m/s
PULMONARY : 0.9m/s
COLOUR DOPPLER : NO MR/AR/TR
RVSP :
CONCLUSION : NORMAL LV SIZE / SYSTOLIC FUNCTION.

CARDIOLOGIST
DR.HASIT JOSHI (9825012235)





LABORATORY REPORT



Name : MANISH GUPTA	Sex/Age : Male / 34 Years	Case ID : 30102200836
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527022
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Jan-2023 08:43	Sample Type :	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : 022238518

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	106.26	mg/dL	70.0 - 100
Haemogram (CBC)			
RBC (Electrical Impedance)	5.51	millions/cu mm	4.50 - 5.50
Lipid Profile			
HDL Cholesterol	36.7	mg/dL	48 - 77
Chol/HDL	4.16		0 - 4.1

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



LABORATORY REPORT



Name : **MANISH GUPTA** Sex/Age : **Male / 34 Years** Case ID : **30102200836**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43 Sample Type : Whole Blood EDTA Mobile No : 8347441869
 Sample Date and Time : 28-Jan-2023 08:43 Sample Coll. By : Ref Id1 : 00123132
 Report Date and Time : 28-Jan-2023 10:49 Acc. Remarks : Normal Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin (Colorimetric)	15.7	G%	13.00 - 17.00
RBC (Electrical Impedance)	H 5.51	millions/cumm	4.50 - 5.50
PCV(Calc)	47.94	%	40.00 - 50.00
MCV (RBC histogram)	87.0	fL	83.00 - 101.00
MCH (Calc)	28.5	pg	27.00 - 32.00
MCHC (Calc)	32.7	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.90	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5250	/μL	4000.00 - 10000.00
	[%]		EXPECTED VALUES [Abs]
Neutrophil	56.0	%	40.00 - 70.00 2940 /μL
Lymphocyte	35.0	%	20.00 - 40.00 1838 /μL
Eosinophil	3.0	%	1.00 - 6.00 158 /μL
Monocytes	5.0	%	2.00 - 10.00 263 /μL
Basophil	1.0	%	0.00 - 2.00 53 /μL

PLATELET COUNT (Optical)

Platelet Count	245000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	1.60		0.78 - 3.53

SMEAR STUDY

RBC Morphology Normocytic Normochromic RBCs.
WBC Morphology Total WBC count within normal limits.
Platelet Platelets are adequate in number.
Parasite Malarial Parasite not seen on smear.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527022
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : O0123132
Report Date and Time : 28-Jan-2023 10:49	Acc. Remarks : Normal	Ref Id2 : O22238518

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

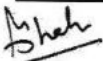


Name : **MANISH GUPTA** Sex/Age : **Male / 34 Years** Case ID : **30102200836**
Ref.By : HOSPITAL Dis. At : Pt. ID : **2527022**
Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time : 28-Jan-2023 11:01	Acc. Remarks : Normal	Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	08	mm after 1hr 3 - 15		

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527022
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time : 28-Jan-2023 09:05	Acc. Remarks : Normal	Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type	O
Rh Type	POSITIVE

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : **MANISH GUPTA** Sex/Age : **Male / 34 Years** Case ID : **30102200836**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Spot Urine	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time : 28-Jan-2023 09:14	Acc. Remarks : Normal	Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour Pale yellow
Transparency Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025		1.005 - 1.030
pH	5.5		5 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

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 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43 Sample Type : Spot Urine Mobile No : 8347441869
 Sample Date and Time : 28-Jan-2023 08:43 Sample Coll. By : Ref Id1 : 00123132
 Report Date and Time : 28-Jan-2023 09:14 Acc. Remarks : Normal Ref Id2 : 022238518

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

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 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time : 28-Jan-2023 15:49	Acc. Remarks : Normal	Ref Id2 : 022238518
TEST	RESULTS UNIT	BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F	H	106.26	mg/dL	70.0 - 100
Plasma Glucose - PP		119	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527022
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Serum	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : 00123132
Report Date and Time : 28-Jan-2023 11:01	Acc. Remarks : Normal	Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>		152.72	mg/dL	110 - 200
HDL Cholesterol	L	36.7	mg/dL	48 - 77
Triglyceride <i>Colorimetric-Arsenazo Method</i>		123.27	mg/dL	40 - 200
VLDL <i>Calculated</i>		24.65	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>	H	4.16		0 - 4.1
LDL Cholesterol <i>Calculated</i>		91.37	mg/dL	65 - 100

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
Risk assesment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



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 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43 Sample Type : Serum Mobile No : 8347441869
 Sample Date and Time : 28-Jan-2023 08:43 Sample Coll. By : Ref Id1 : 00123132
 Report Date and Time : 28-Jan-2023 11:01 Acc. Remarks : Normal Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with P5P</i>	31.20	U/L	16 - 63	
S.G.O.T. <i>UV with P5P</i>	22.75	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	72.35	U/L	46 - 116	
Gamma Glutamyl Transferase <i>Enzymatic</i>	13.83	U/L	0.00 - 64.00	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.55	gm/dL	6.4 - 8.2	
Albumin <i>Bromocresol purple</i>	4.74	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.81	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.7		1.0 - 2.1	
Bilirubin Total	0.49	mg/dL	0.2 - 1.0	
Bilirubin Conjugated <i>Diazotized Sulfanilic Acid Method</i>	0.19	mg/dL	0 - 0.20	
Bilirubin Unconjugated <i>Calculated</i>	0.30	mg/dL	0 - 0.8	

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Report Date and Time : 28-Jan-2023 11:01	Acc. Remarks : Normal	Ref Id2 : 022238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	8.3	mg/dL	6.00 - 20.00	
Creatinine	0.72	mg/dL	0.50 - 1.50	
Uric Acid <i>Uricase</i>	6.36	mg/dL	3.5 - 7.2	

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Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : O0123132
Report Date and Time : 28-Jan-2023 11:29	Acc. Remarks : Normal	Ref Id2 : O22238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<u>Glycated Haemoglobin Estimation</u>				

HbA1C	5.40		% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	108.28		mg/dL	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
 Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
 In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
 The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

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Name : **MANISH GUPTA** Sex/Age : **Male / 34 Years** Case ID : **30102200836**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43 Sample Type : Serum Mobile No : 8347441869
 Sample Date and Time : 28-Jan-2023 08:43 Sample Coll. By : Ref Id1 : O0123132
 Report Date and Time : 28-Jan-2023 11:01 Acc. Remarks : Normal Ref Id2 : O22238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Proteins (Total) <i>Colorimetric, Biuret</i>	7.55	gm/dL	6.4 - 8.2	
Albumin <i>Bromocresol purple</i>	4.74	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.81	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.7		1.0 - 2.1	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : **MANISH GUPTA** Sex/Age : **Male / 34 Years** Case ID : **30102200836**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527022**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:43	Sample Type : Serum	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : O0123132
Report Date and Time : 28-Jan-2023 11:12	Acc. Remarks : Normal	Ref Id2 : O22238518

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	148.93	ng/dL	70 - 204	
Thyroxine (T4) <small>CMA</small>	8.5	ng/dL	4.6 - 10.5	
TSH <small>CMA</small>	1.720	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTN and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in Pregnancy

First trimester
 Second trimester
 Third trimester

Reference range (microIU/ml)

0.24 - 2.00
 0.43-2.2
 0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : MANISH GUPTA	Sex/Age : Male / 34 Years	Case ID : 30102200836
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Bill. Loc. : Aashka hospital		Pt. Loc :
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Sample Date and Time : 28-Jan-2023 08:43	Sample Coll. By :	Ref Id1 : O0123132
Report Date and Time : 28-Jan-2023 11:12	Acc. Remarks : Normal	Ref Id2 : O22238518

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test). When the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according to trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Shah

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"KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 | Phone : 079-40408181 / 61618181
Email : contact@supratechlabs.com | Website : www.supratechlabs.com | CIN : U85195GJ2013PTC077365,2013-14

28.01.2023 10:14:20 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

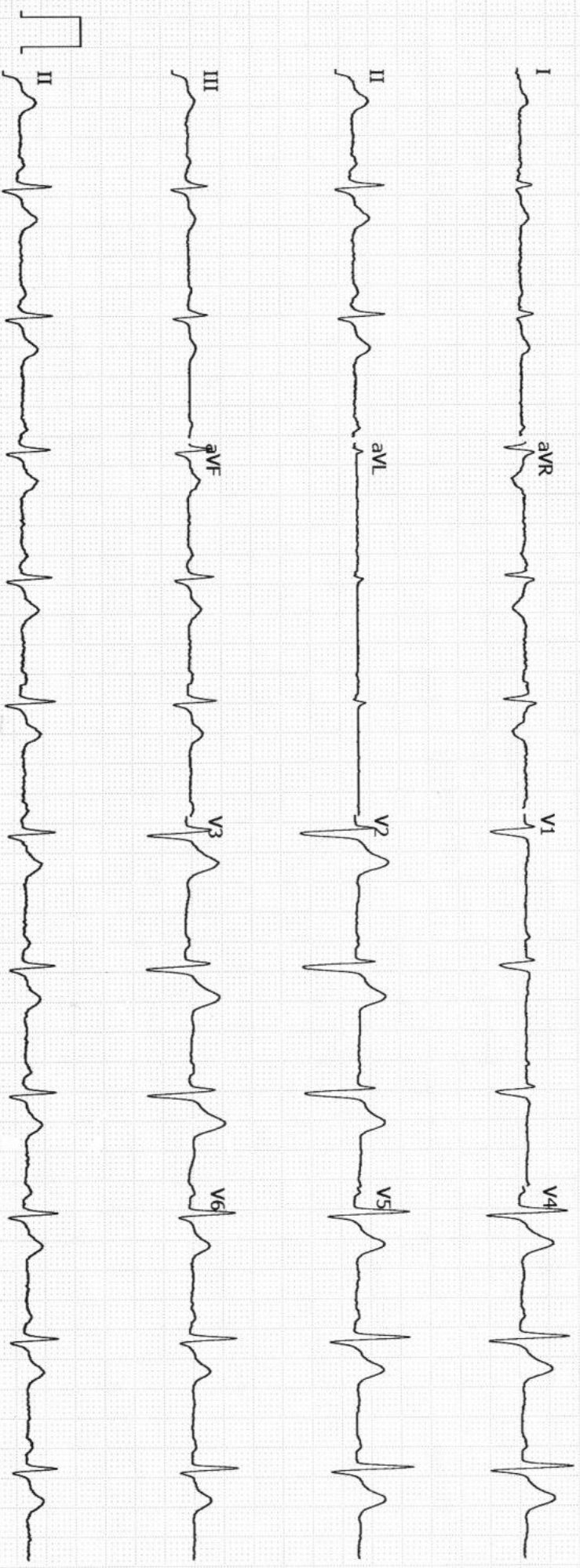
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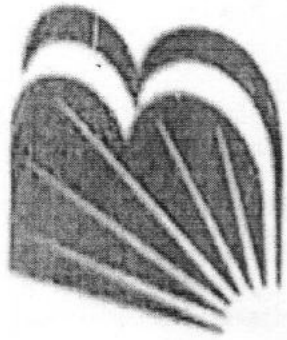
70 bpm
--/-- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 96 ms
QT / QTcBaz : 368 / 397 ms
PR : 162 ms
P : 102 ms
RR / PP : 860 / 857 ms
P / QRS / T : 61 / 70 / 60 degrees

Normal sinus rhythm
Normal ECG





बैंक ऑफ़ बड़ोदा
Bank of Baroda

नाम : मनीष कुमार गुप्ता

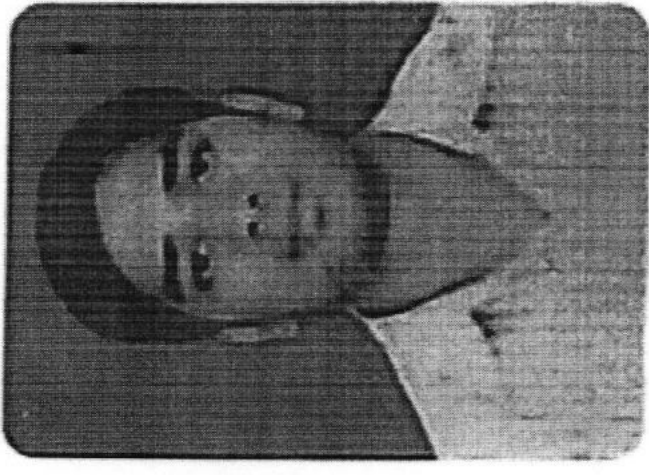
Name : Manishkumar Gupta

कर्मचारी कूट क्र.

: 162338

Employee Code No.

जारीकर्ता प्राधिकारी
Issuing Authority



धारक के हस्ताक्षर
Signature of Holder