

10mm/mV 0.07-100Hz
 I
 II
 III
 15mm/s

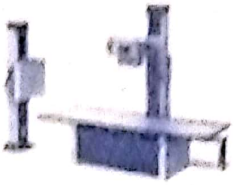
2005.06.08 09:38:22
 aVR
 aVL
 aVF
 V2.47

V1
 V2
 V3

V4
 V5
 V6

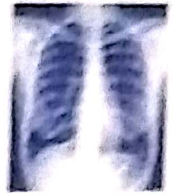
ID: 050608 0938
 Name
 Age 50 yr
 Sex Male
 BP mmHg
 Weight cm
 Weight kg
 HR 70 bpm
 P Dur 95 ms
 PR int 161 ms
 QRS Dur 81 ms
 Q1/QTC int 350/378 ms
 P/QRS/T axis 65/95/57 °
 rV5/SV1 amp 1.312/0.603 mV
 rV5+SV1 amp 1.915 mV
 rV6/SV2 amp 1.088/0.761 mV

Minnesota Code:
 7.3-9
 VIVOK
 Diagnosis Information
 800 Sinus Rhythm
 316 Excessive Overload of Left Strain
 203 Right Axis Deviation
 Report Confirmed by:



Raj Digital X-Ray

CHATA CHOWK, MUZAFFARPUR (BIHAR)



No.:

Date

Patient's Name :

Part X-Rayed.....

Referred by Dr.....

| | | | |
|------------|----------------------------|--------------|--------------------------|
| PATIENT ID | : 275202369 | PATIENT NAME | : VIVEK ANAND AGE 30YR.D |
| AGE | : - | SEX | : Male |
| REF. PHY. | : DR A K SINGH M B B S FCR | STUDY DATE | : 27-May-2023 |

RADIOLOGY REPORT

EXAM:X RAY CHEST.PA VIEW

CLINICAL HISTORY:

COMPARISON:

None

TECHNIQUE:

Frontal projections of the chest were obtained

FINDINGS

- Both lung fields are clear.
- Both costophrenic angles appear normal.
- The tracheal lucency is centrally placed.
- The mediastinal and diaphragmatic outlines appear normal.
- The heart shadow is normal.
- The bony thoracic cage and soft tissues are normal.

IMPRESSION

- The study is within normal limits.

Dr AMIT KHARAL
M.B.B.S, CHARD, D.M.B, M.M.A.M.S, PH.D, FICR
Consultant Radiologist
Reg No: 08050

Dr Amit Kharal
27th May 2023

(NOT VALID FOR MEDICO LEGAL PURPOSE)

Facilities Available : 300 MA X-Ray Machine (Digital CR) # Computerised ECG



NAME :- VIVEK ANAND ,
REFD.BY:- DR./SELF,

DATE :- 27/05/2023
SEX:- M

Thanks for the kind referral.
USG of Whole Abdomen

Liver:- Liver is normal in size [13.13 cm] and shows normal echotexture.
No focal lesion is seen. I.H.B.R. are not dilated.

GB:- Normal distention. Walls are not thickened (3.0 mm) . No evidence
of calculus ,sludge ,or mass lesion seen.

C.B.D:- C.B.D. is normal in caliber.

Pancreas:- Pancreas normal in size and shape.

Spleen:- Normal in shape, size & contour . (bipolar length is 9.15 cm).

Kidneys:- Both kidneys are normal in shape, size, contour, cortical
echo texture, and sinus echoes. No evidence of calculus,
calcification, hydronephrotic changes or mass lesion seen.

UB:- Urinary bladder is smoothly outlined. There is no calculus within.

Prostate :- The prostate is normal in shape and size.

Free fluid:- No free fluid is noted in the peritoneal cavity.

Impression :-Normal Study.

(sonologist)



PATHOLOGY REPORT

| | | |
|--------------------------------|----------------|-----------------------|
| Name:- Mr. Vevek Anand | Age :30Y/M | Date :-27/05/2023 |
| Ref. By :- Dr. Bank Of Barauda | (E.C.No120706) | Serial Number :- 0271 |

Urine Routine And Microscopy

| <u>TEST</u> | <u>RESULTS</u> |
|--------------------------------|--------------------|
| Physical Examination | |
| Volume | 20 ml |
| Colour | Straw |
| Specific Gravity | 1.010 |
| Appearance | Clear |
| pH | 5.0 |
| (Acidic) | |
| Chemical Examination | |
| Protein | Nil |
| Sugar | Nil |
| Bile Salts | N/D |
| Bile Pigments | N/D |
| Microscopic Examination | |
| Pus Cells | 1-2 /hpf |
| Red Blood Cells | Nil /hpf |
| Epithelial Cells | Present (+) |
| Crystal/Cast | Nil |
| Other | Nil |
| ***end of report*** | |

Signature

PATHOLOGY REPORT

| | | |
|--------------------------------|----------------|-----------------------|
| Name:- Mr. Vevek Anand | Age :30Y/M | Date :-27/05/2023 |
| Ref. By :- Dr. Bank Of Barauda | (E.C.No120706) | Serial Number :- 0271 |

| TEST | CBC (Complete Blood Count) | | Reference Values |
|-------------------------------------|----------------------------|------------------------|------------------|
| | RESULT | UNIT | |
| Hb (Haemoglobin) | 15.4 | gm/dl | 12 - 17 |
| Total Leukocyte Count | 5,500 | /Cumm. | 4000 - 11000 |
| RBC Count | 5.21 | Million/Cumm. | 3.8 - 5.8 |
| PCV / Haematocrit | 47.3 | % | 30 - 50 |
| Platelet Count | 1.68 | Lakhs/c.mm | 1.5 - 4.5 |
| MCV | 90.8 | fl | 80 - 100 |
| MCH | 28.8 | pg | 26 - 34 |
| MCHC | 32.3 | gm/dl | 31.5 - 35 |
| Differential Leukocyte Count | | | |
| Neutrophil | 60 | % | 40 - 70 |
| Lymphocyte | 32 | % | 20 - 40 |
| Monocyte | 02 | % | 02 - 10 |
| Eosinophi | 06 | % | 01 - 06 |
| Basophil | 00 | % | < 1 - 2 % |
| ESR | 08 | mm/1 st hr. | 00 - 20 |

end of report

Signature

PATHOLOGY REPORT

| | | |
|--------------------------------|----------------|-----------------------|
| Name: Mr. Vevek Anand | Age :30Y/M | Date :-27/05/2023 |
| Ref. By :- Dr. Bank Of Barauda | (E.C.No120706) | Serial Number :- 0271 |

KFT (KIDNEY Function Test) – serum

| <u>TEST</u> | <u>RESULT</u> | <u>UNIT</u> | <u>Reference Values</u> |
|-------------------------------|---------------|-------------|------------------------------------|
| S. Urea | 25.0 | mg/dl | 13 - 45 |
| S. Creatinine | 0.95 | mg/dl | Male 0.7 - 1.4 Female 0.6 - 1.2 |
| S. BUN | 11.67 | mg/dl | 6.0 - 21 |
| S. Sodium (Na ⁺) | 139.8 | mmol/ltr | 135 - 150 |
| S. Potassium(K ⁺) | 4.06 | mmol/ltr | 3.5 - 5.5 |
| S. Chloride(Cl ⁻) | 102.4 | mmol/ltr | 94 - 110 |
| S. Calcium | 9.58 | mg/dl | 8.7 - 11.0 |
| S. Uric Acid | 5.03 | mg/dl | Male 3.5 - 7.2 Female 2.5 - 6.2 |

BLOOD GROUPING

| | | |
|----------------|---|-----------|
| Grouping (ABO) | : | "B" Group |
| Rh Typing | : | Positive. |

end of report

Signature

PATHOLOGY REPORT

| | | |
|--------------------------------|----------------|-----------------------|
| Name:- Mr. Vevek Anand | Age :30Y/M | Date :-27/05/2023 |
| Ref. By :- Dr. Bank Of Barauda | (E.C.No120706) | Serial Number :- 0271 |

LFT (Liver Function Test) – serum

| <u>TEST</u> | <u>RESULT</u> | <u>UNIT</u> | <u>Reference Values</u> |
|-------------------------|---------------|-------------|--|
| S. Total Bilirubin | 0.81 | mg/dl | Adults: 0.1 - 1.2 Infants: 1.2 - 12 |
| S. SGPT (ALT) | 34.0 | U/L | 05 - 40 |
| S. SGOT (AST) | 37.0 | U/L | 05 - 40 |
| S.GGT | 35.0 | U/L | 05 - 45 |
| S. Alkaline Phosphatase | 81.7 | U/L | Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390 |
| S. Total Protein | 7.19 | g/dl | 6.0 - 8.3 |
| S. Albumin | 4.06 | g/dl | 3.2 - 5.0 |
| S. Globulin | 3.13 | g/dl | 2.8 - 4.5 |
| S. A/G Ratio | 1.29 | | |

end of report

Signature

PATHOLOGY REPORT

| | | |
|--------------------------------|----------------|-----------------------|
| Name:- Mr. Vevek Anand | Age :30Y/M | Date :-27/05/2023 |
| Ref. By :- Dr. Bank Of Barauda | (E.C.No120706) | Serial Number :- 0271 |

Lipid Profile - serum

| <u>TEST</u> | <u>RESULT</u> | <u>UNIT</u> | <u>Reference Values</u> |
|--------------------------|---------------|-------------|---|
| S. Cholesterol | 177.0 | mg/dl | 130 - 200 |
| S. Triglycerides | 95.0 | mg/dl | Fasting: 25 - 160 |
| S. VLDL-Cholesterol | 19.0 | mg/dl | 10 - 40 |
| S. HDL-Cholesterol | 47.0 | mg/dl | Male: 30 - 65 Female: 35 - 80 |
| S. LDL-Cholesterol | 111.0 | mg/dl | 60 - 150 |
| Ratio of Cholesterol/HDL | 3.75 | | Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0 |
| LDL/HDL Ratio | 2.36 | | 1.5 - 3.5 |

BIOCHEMISTRY

| <u>TEST</u> | <u>RESULT</u> | <u>UNIT</u> | <u>Reference Values</u> |
|--|---------------|-------------|-------------------------|
| P. Glucose Fasting | 86.0 | mg/dl | 70 - 110 |
| P. Glucose-Post Prandial (after 1.30hrs meal) | 118.0 | mg/dl | 80 - 160 |

end of report

Signature

PATHOLOGY REPORT

| | | |
|------------------------------|----------------|---------------------|
| Name: Mr. Vivek Anand | Age: 30Y/MA | Date: 27/05/2023 |
| Ref. By: Dr. Bank Of Baraula | (E.C.No120706) | Serial Number: 0271 |

GLYCOSYLATED HEMOGLOBIN

| TEST | RESULT | UNIT |
|-------|--------|------|
| HbA1c | 5.10 | % |

Mean Blood Glucose level (MBG) = 104.3 mg/dl

Normal Reference Values

| | |
|--------------|----------------|
| Normal | : ≤ 8.0 % |
| Good Control | : 8.0 - 9.0 % |
| Fair Control | : 9.0 - 10.0 % |
| Poor Control | : > 10.0 % |

Summary: Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

end of report

Signature

PATHOLOGY REPORT

| | | |
|--|--------------------------|------------------------------|
| Name: Mr. Venu Prasad | Age: 20/70 | Sex: M |
| Address: K. P. P. Road, K. P. P. Road | Phone: 9847173744 | Ref: Pathology - 1234 |

| Specimen | Request | Status | Date | Remarks |
|----------------------|--|--------|------------|---------|
| Urine (Random) | U/E | Done | 10/10/2023 | Normal |
| Blood (CBC) | Hb, Hct, WBC, Plt | Done | 10/10/2023 | Normal |
| Serum (Biochemistry) | Glucose, Urea, Creatinine, Bilirubin, ALT, AST | Done | 10/10/2023 | Normal |

Findings:

- 1. Urine: Normal
- 2. Blood: Normal
- 3. Serum: Normal

Conclusion:

The patient's laboratory investigations are within normal limits. There is no evidence of renal, hepatic, or hematological abnormalities. The patient appears to be healthy.

Signature