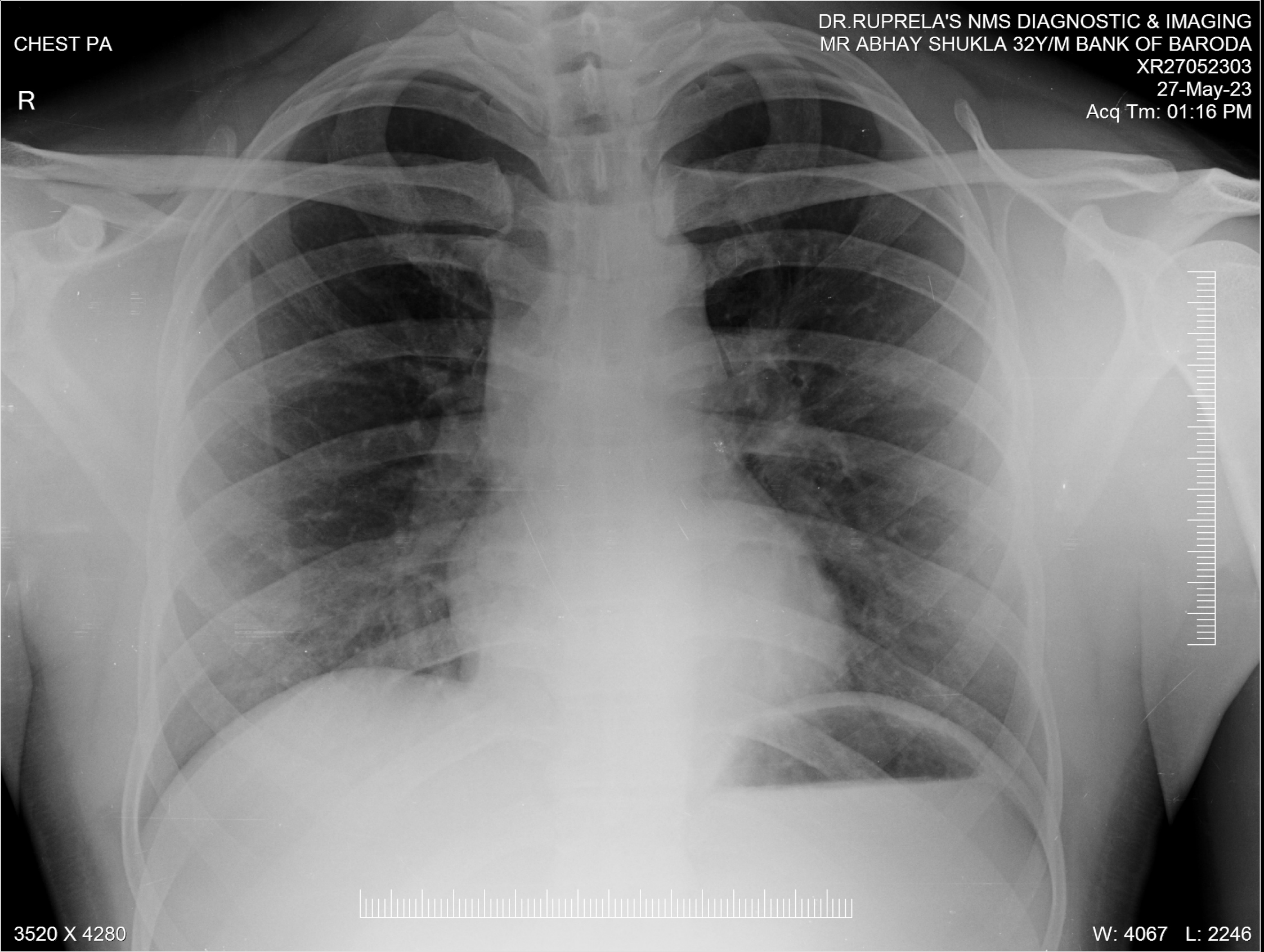


CHEST PA

R



3520 X 4280

W: 4067 L: 2246



VID :- E/12039  
PID No. :- 202327517123286  
Name :- Mr. ABHAY SHUKLA  
Age/Sex :- 32 Y / M  
Ref. By. :- ARCOFEMI HEALTHCARE LTD

Sample Received on/at :  
27/05/2023 9:54AM

Reported on/at  
27/05/2023 12:07PM

### BIOCHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Range
<b>BLOOD SUGAR F</b>			
Glucose Fasting	108	mg/dl	60 - 110
<b>BLOOD SUGAR PP</b>			
Glucose PP	124	mg/dl	70 - 140
<b>LFT (LIVER FUNCTION TEST)</b>			
<b>Bilirubin (Total)</b> (Serum, Diazo)	0.77	mg/dL	<1.0
<b>Bilirubin (Direct)</b> (Serum, Diazo)	0.22	mg/dL	0 - 0.3
<b>Bilirubin (Indirect)</b> (Serum, Calculated)	0.55	mg/dL	UPTO 1.0
<b>SGOT (AST)</b> (Serum, Enzymatic)	24	U/L	5 - 37
<b>SGPT (ALT)</b> (Serum, Enzymatic)	22	U/L	10 - 40
<b>Alkaline Phosphatase</b> (Serum, pNPP)	139	U/L	80 - 290
<b>Total Proteins</b> (Serum, Biuret)	6.99	g/dL	6.4 - 8.3
<b>Albumin</b>	4.01	g/dL	3.7 - 5.6
<b>Globulin</b> (Serum)	2.98	g/dL	1.8 - 3.6
<b>A/G Ratio</b> (Serum)	1.35	g/dl	1.1 - 2.2
<b>Gamma GT</b> Szasz method	20	U/L	11 - 34

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

Dr. Avishesh Kumar Singh  
M.D. (Pathologist)

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**Lipid Profile (Fasting Sample Required)**

Parameter	Value	Unit	Reference Range
Cholesterol - Total	142	mg/dL	Desirable <200 Borderline High : 200-239 High :>=240
Triglycerides Level	135	mg/dL	Normal : <150 Borderline High :150-199 High : 200-499 Very High : >=500
HDL Cholesterol	40	mg/dl	Major risk factor for heart Disease :<40 Negative risk factor for heart Disease:>=60
LDL Cholesterol	75	mg/dL	Optimal : <100 Near Optimal : 100-129 Borderline High : 130 - 159 High :160 - 189 Very High : >190
VLDL Cholesterol	27	mg/dL	6-38
LDL/HDL RATIO	<b>1.88</b>		2.5-3.5
CHOL/HDL RATIO	3.55		3.5 - 5

Note : Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

**RFT (RENAL FUNCTION TEST)**

**Renal (Kidney) Function Test**

Parameter	Value	Unit	Reference Range
Urea (Serum)	21	mg/dL	15 - 43
Creatinine (Serum, Jaffe)	0.76	mg/dL	0.57 - 1.4
Sodium	138	mmol/L	135 - 145
Potassium	4.21	mmol/L	3.5 - 5.1
Uric Acid (Serum, Uricase)	4.11	mg/dL	2.6 - 6
Chlorides	100	mmol/L	98 - 107

*The performance of the Roche cobas c 111 was evaluated using sigma metrics. The calculations were performed using James O. Westgard methodology.[2] This approach uses an assays total allowable error (TEa), accuracy (bias), and precision (SD) to calculate a Sigma metric to characterize the performance of that assay.*

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



**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



**VID** :- E/12039  
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### HBA1C

HbA1c Value	5.10	%	4-6=Normal Control 6-7=Good Control 7-8=Fair Control 8-10=Unsatisfactory Control >10%=Poor Control
-------------	------	---	--

Glycosylated Hemoglobin/Glycated Hemoglobin/GlycoHemoglobin/HbA1c. [1]

Its primary use is to monitor diabetic patient's compliance and long term blood glucose level control . It is an index of diabetic control (direct relationship between poor control and development of complications). It predicts development and progression of diabetic microvascular complications.

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



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### CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Range
<b>URINE R/M</b>			
<b><u>Physical Examination</u></b>			
Specific Gravity	1.020		1.003-1.030
Appearance	Clear		Clear
Colour	Pale Yellow		Pale Yellow
pH (Reaction)	Acidic		Acidic
<b><u>Chemical Examination</u></b>			
Protein	NIL		NIL
Glucose	NIL		NIL
<b><u>Microscopic Examination</u></b>			
PUS CELLS	1 - 2	/hpf	0-5
Epithelial Cells	1 - 2	/hpf	0-5
RBC	Absent	/hpf	Absent
Bacteria	Absent		Absent
Crystals	Absent		Absent
Casts	Absent		Absent

*Test Done by Urisys 1100 (ROCHE) Fully Automatic.*

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



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### Complete Blood Count (Haemogram)

Investigation	Observed Value	Unit	Biological Reference Range
<b>CBC</b>			
<b><u>Erythrocytes</u></b>			
Haemoglobin (Hb)	14.2	gm/dL	12.5 - 16.5
Erythrocyte (RBC) Count	4.96	mill/cu.mm	4.2 - 5.6
PCV (Packed Cell Volume)	42.7	%	36 - 47
MCV (Mean Corpuscular Volume)	86	fl	78 - 95
MCH (Mean Corpuscular Hb)	28.7	pg	26 - 32
MCHC (Mean Corpuscular Hb Concn.)	33.3	g/dL	32 - 36
RDW (Red Cell Distribution Width)	<b>15.0</b>	%	11.5 - 14
<b><u>Leucocytes</u></b>			
Total Leucocytes (WBC) Count	7600	cells/cu.mm	4000 - 11000
Neutrophils	59	%	40 - 75
Lymphocytes.	36	%	20 - 40
Monocytes	04	%	2-10
Eosinophils	01	%	1-6
Basophils	00	%	0 - 1
<b><u>Platelets-</u></b>			
Platelet count	205	x10 <sup>9</sup> /L	150 - 450
MPV (Mean Platelet Volume)	8.2	fL.	6 - 9.5
PCT ( Platelet Haematocrit)	0.169	%	0.15 - 0500
PDW (Platelet Distribution Width)	15.5	%	11 - 18

EDTA Whole Blood - Tests done on Automated ABX Micros ES60(HORIBA) Cell Counter. WBC, RBC & Platelet count by impedance method, WBC differential by VCS technology & other parameters calculated) All abnormal Haemograms are reviewed & confirmed microscopically. Differential count is based on approximately 10,000 cells.

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



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### Hematology

Investigation	Observed Value	Unit	Biological Reference Range
<b>Blood Group &amp; RH Type Screening</b>			
ABO Group	"A"		
Rh Type	"POSITIVE"		

Method: Column agglutination technology (CAT) is an automated. System for blood grouping which is superior in sensitivity to conventional tube method.

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

**Dr. Avishesh Kumar Singh**  
M.D. (Pathologist)



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### PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Range
---------------	----------------	------	----------------------------

#### Thyroid Panel 1 (T3, T4, TSH)

T3	0.68	ng/dl	0.6-1.8
----	------	-------	---------

Remarks :1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

T4	6.89	ug/dl	4.5-12.6
----	------	-------	----------

Remark:1.Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin) Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

TSH	2.86	uIU/ml	0.25-5.5
-----	------	--------	----------

Remarks : 1.4.51 to 15  $\mu$ IU/mL - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH.

2.TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe burns, trauma and surgery etc

3. Drugs that decrease TSH values e.g: L-dopa, Glucocorticoids Drugs that increase TSH values e.g Iodine, Lithium, Amiodarone

Remark

Method Used : ELFA (Enzyme Linked Fluorescence Assay) on Mini Vidas most Efficient Analyzer Internationally accepted most advanced technology with high quality result.

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

Dr. Avishesh Kumar Singh

M.D. (Pathologist)



Name : MR. ABHAY SHUKLA

Age/Sex : 32 Y/M

Referred By. : ARCOFEMI HEALTHCARE LTD

Date : 27.05.2023

**PERIPHERAL SMEAR EXAMINATION**

**RBC:** Macrocytic normochromic.

**WBC:** Total counts within normal range. No toxic granulation seen.


Band cells -9%, Neutrophils – 46%, Lymphocytes – 43%, Monocytes – 2%.

**Platelets:** Appears adequate on smear.

**Haemoparasite:** No haemoparasite seen.

**IMPRESSION: NORMAL PERIPHERAL SMEAR FINDINGS.**

**ADVISED – Please correlate clinically.**

  
Dr Avishesh Kumar Singh

MD(Pathologist)

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)

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भारत सरकार  
Government of India

आधार

Issue Date: 09/10/2014

अभय शुक्ला  
Abhay Shukla  
जन्म तिथि / DOB: 25/12/1990  
पुरुष / MALE

6672 6929 6354

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

आधार

Print Date: 20/05/2021

पता: C/O शिव कुमार शुक्ला, शिव वाटीका, टीचर्स कॉलोनी  
कोटा, रायपुर, संवपुर, छत्तीसगढ़, 492001

Address: C/O Shiv Kumar Shukla, Shiv  
vatika, teachers colony kota, Raipur,  
Raipur, Chhattisgarh, 492001

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1947 help@uidai.gov.in www.uidai.gov.in

*Shukla*



*Shailendra Ruprela*

Dr. Shailendra Ruprela  
MD, Medicine  
Reg. No.: CG MC-511/2006





NAME : MR. ABHAY SHUKLA  
REF. BY. ARCOFEMI HEALTHCARE

AGE/SEX : 32Y/M  
DATE-27.05.2023

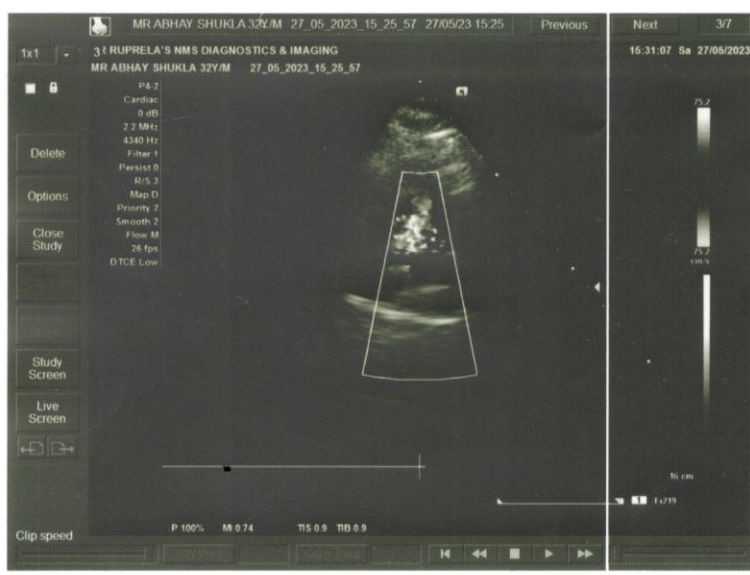
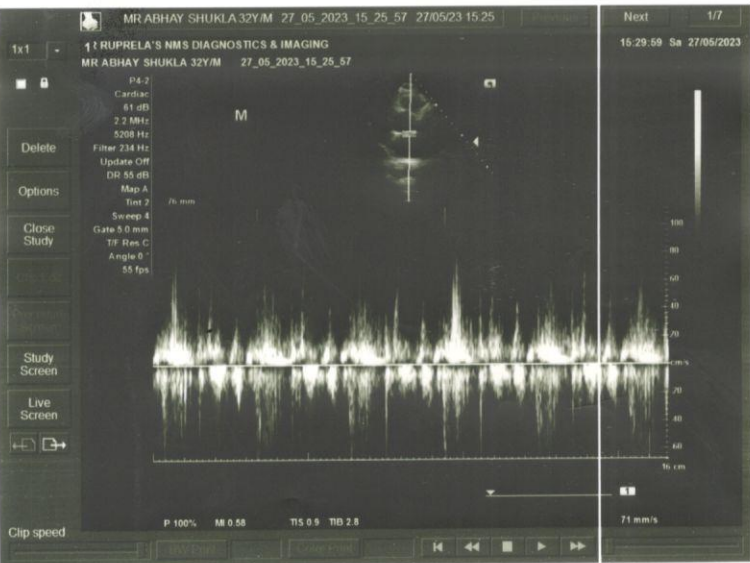
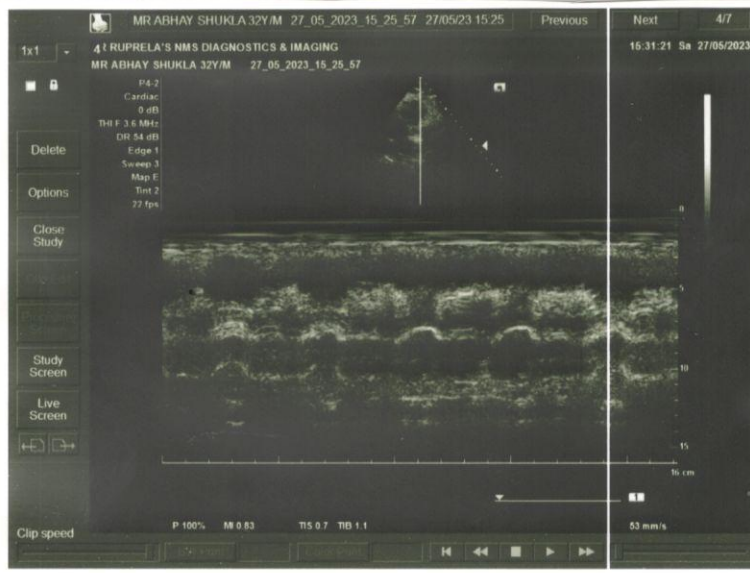
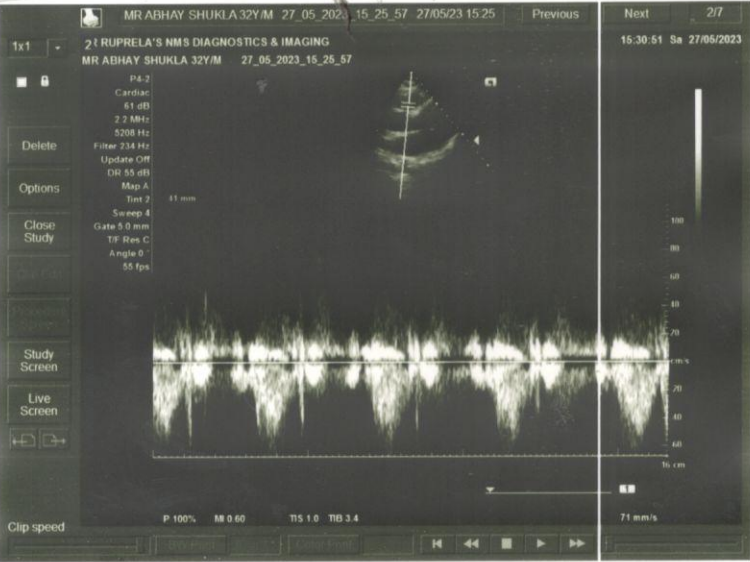
X-RAY CHEST PA VIEW

- The lungs on the either side show equal translucency.
- The peripheral pulmonary vasculature is normal.
- No focal lung lesion is seen.
- The pleural spaces are normal.
- Both hila are normal in size, have equal density and bear normal relationship.
- The heart and trachea are central in position and no mediastinal abnormality is visible.
- The cardiac size is normal.
- The domes of the diaphragms are normal in position, and show smooth outline.
- **IMPRESSION** : No evidence of pulmonary, pleural or cardiac pathology is noted.
  - radiograph of chest is within normal limits.



FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)

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NAME : MR. ABHAY SHUKLA  
REF. BY: ARCOFEMI HEALTHCARE

AGE/SEX : 32Y/M  
DATE: 27/05/2023

### ECHO - CARDIOGRAPHY

#### M-MODE MEASUREMENTS:

	Patient value (cm)	normal value (cm)	
Aortic Root	2.2	2.0-3.7	
Left Atrial Dimension	3.7	1.9-4.0	
Left Ventricular ED	4.5	3.7-5.6	
Left Ventricular ES	2.9	2.2-4.0	
Interventricular Septal	ED : 0.8	ES : 0.9	0.6-1.2
LEFT VENT PW	ED : 0.8	ES : 0.9	0.6-1.2

#### 2 D ECHO

CHAMBERS	- All cardiac chambers normal.
VALVE	- NORMAL
SEPTAE	- IVS/IAS INTACT
RWMA	- NO
EF (OVERALL)(LV)	- 60 %
CLOT/ VEGETATION	- NIL
PER. EFFUSION	- NIL

#### CONTINUOUS WAVE & PULSE WAVE DOPPLER

Valve	Regurgitation	Gradient(mm Hg)
Mitral Valve	NIL	Not Significant
Aortic Valve	NIL	Not Significant
Tricuspid Valve	NIL	PASP=
Pulmonary Valve	Nil	Not Significant

#### PULSE WAVE DOPPLER

MITRAL VALVE INFLOW > Waves DT m sec

#### IMPRESSION -

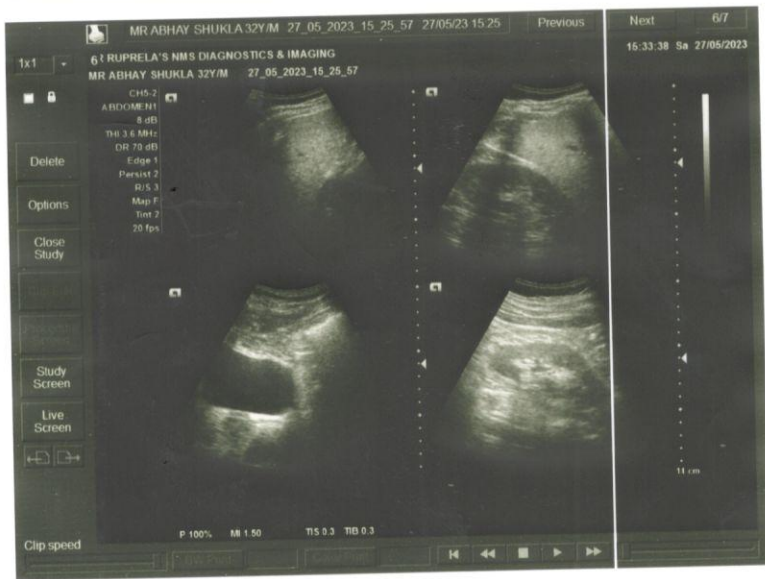
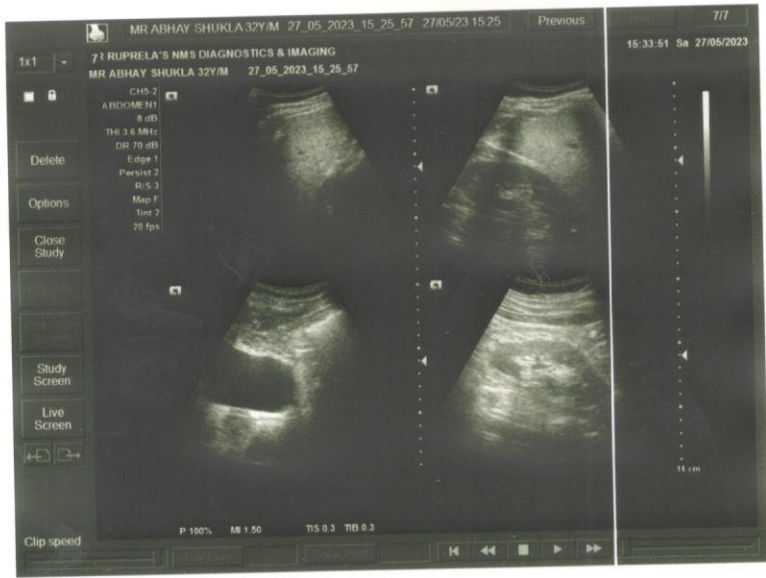
- NO RWMA AT REST, LVEF=60%
- NORMAL BIVENTRICULAR FUNCTION
- NORMAL CHAMBERS DIMENSION.
- NO CLOT/VEGETATION/PERICARDIAL EFFUSION.
- NORMAL VALVES



DR AJAY HALWAI  
MBBS, MD, PGDCC

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)

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**NAME : MR. ABHAY SHUKLA**  
**REF. BY: ARCOFEMI HEALTHCARE**

**AGE/SEX : 32Y/M**  
**DATE : 27.05.2023**

**SONOGRAPHY OF ABDOMEN AND PELVIS**

**The Real time, B mode, gray scale sonography was performed.**

**LIVER** :The liver is normal in size, shape and has smooth margins.

It has uniform echotexture, has normally distributed and normal size biliary and portal radicles and is without solid or cystic mass lesion or calcification.

**GALL BLADDER** :The gall bladder is seen as a well distended, pear shaped bag with uniformly thin and regular walls, without, gall stones or mass lesions.

**COMMON BILE DUCT** :The common bile duct is normal in caliber.

No evidence of calculus is noted in common bile duct.

**PANCREAS** :The pancreas is normal in size, shape, contours and echotexture.

No evidence of solid or cystic mass lesion is noted.

**KIDNEYS** :The kidneys are normal in size and have smooth renal margins.

Cortical echotexture is normal

The central echocomplex does not show evidence of calculus.

**SPLEEN** : The spleen is normal in size and shape. Its echotexture is homogeneous.

No evidence of focal lesion is noted.

**URINARY BLADDER** :The urinary bladder is well distended.

No evidence of calculus is seen.

No evidence of mass or diverticulum is noted.

**PROSTATE** :The prostate shows well defined and sharp margins.


The prostatic echotexture is normal and homogenous

**IMPRESSION :**

**The Sonography Of Abdomen & pelvis Is Within Normal Limits**

As with any other investigations the results obtained serve as an aid to diagnosis and should be interpreted in relation to any other clinical and diagnostic findings .

Thanks for referral with regards

  
**Dr. Chhavi Jangde**  
MD  
Reg.No.:CGMC-5516/2014

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"HEALTH"



"HUMAN"



"COMPLETE SOLUTION"

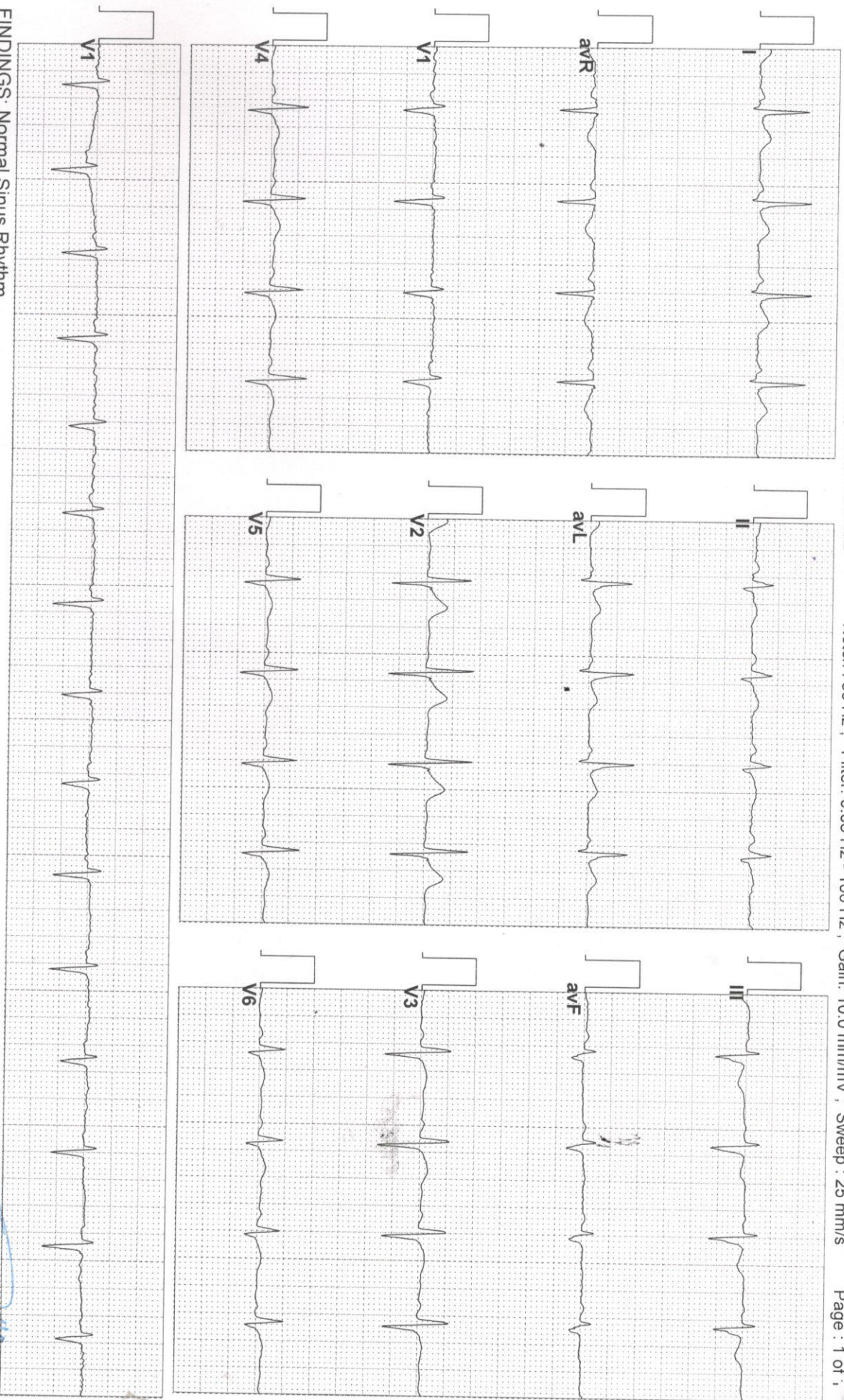




**DR. RUPRELAS NMS DIAGNOSTICS AND IMAGING FAFADIH BILASPUR ROAD RAIPUR**

5476548292: MR ABHAY SHUKLA; Male: 32 Yrs 00 Mths  
Ref: ARCOFEMI HEALTH CARE; Date: 27-05-2023; Time: 13:47:02

Ht: 173 Cms; Wt: 74 Kgs; BP: 111/75; HR: 90 bpm  
Notch: 50 Hz; Filter: 0.05 Hz - 100 Hz; Gain: 10.0 mm/mV; Sweep: 25 mm/s



**FINDINGS:** Normal Sinus Rhythm  
Vent Rate : 90 bpm PR Interval : 132 ms  
P-QRS-T axis: 27° - 7° - 10° (Deg)  
Comments :

QRS Duration: 108 ms QT/QTc Int : 323/397

**Dr. Shailendra Rupprela**  
MD, Medicine  
Reg. No.: CG MC-511/2006





Dr. Ruprela's  
**NMS** Diagnostics & Imaging

"अचूक निदान" स्वस्थ जीवन की ओर...

MR. ABHAY SHUKLA

DATE : 27.05.2023

AGE : 32

SEX : MALE

HEIGHT : 173cms

WEIGHT : 74kgs

BMI : 24.7

BLOOD PRESSURE: 111/75 mmHg

Medical History : Not Significant

ADVICE:

1. DRINK MINIMUM 10 GLASSES OF WATER.
2. EXERCISE / BRISK WALK FOR MINIMUM 50 MINS DAILY.
3. INCREASE INTAKE OF FIBRE LIKE SALAD , FRUIT , SALAD , SPROUTS.
4. TAKE GOOD SLEEP FOR 7-8 HOURS DAILY.
5. AVOID SPICY AND DEEP FRIED FOOD.
6. AVOID ALCOHOL, SMOKING, NICOTINE.
7. AVOID STRESS.
8. RELAX AND BE HAPPY.

  
DR. RASHMI SALUJA

CONSULTANT DIETICIAN



FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)

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**TO WHOM SO EVER IT MAY CONCERN**

THIS IS TO DECLARE THAT MR. ABHAY SHUKLA AGE 32 YEAR/MALE HAS UNDERGONE MEDICAL EXAMINATION ON 27.05.2023 DURING HIS GENERAL EXAMINATION NO ABNORMALITIES WERE DETECTED.

HE WAS FULLY ORIENTED , NO DISABILITY WITH NORMAL GAIT.

NO SIGNS OF PALPABLE OR ENLARGED LYMPH NODES.

NO GROWTH / SWELLING OBSERVED.

HIS VITALS PARAMETERS ARE HEIGHT: 173 cms, WEIGHT: 74kg, BP:111/75mmhg, HR:90 bpm, BMI:24.7

HIS BOWEL HABITS ARE REGULAR. NO BURNING DURING MICTURITION.

ALL REFLEXES WERE NORMAL.

NO ABNORMALITIES WERE DETECTED DURING PALPATION, PERCUSSION AND AUSCULTATION OF VISCERA.

HE DOES NOT CARRY ANY COMMUNICABLE/TRANSFERRABLE DISEASE.

HE APPEARS TO BE **PHYSICALLY FIT** AND WE WISH HIM ALL THE BEST.

  
**Dr. Shailendra Ruprela**  
MD, Medicine  
Reg. No.: CG MC-511/2006



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"HEALTH" +



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