



नाम: **MR. SINGH JASHWANTH**

नाम: **MR. SINGH JASHWANTH**
E.C. No. **155608**

Handwritten signature

संस्थागत अधिकारी, ए. ए. ए. सी. ए. ए. संस्थान
Issuing Authority: PRA, P.O. Luthiana



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अधिकारी के हस्ताक्षर
Signature of Holder



भारत सरकार
Government of India

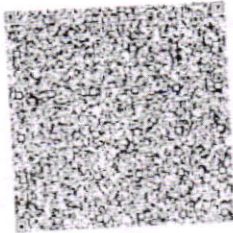
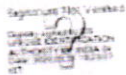
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Enrolment No.: 2828/01130/00358

Download Date: 27/03/2020

To
Jaswant Singh
C/O Balkar Singh
72
SIRHIND ROAD
RANJIT VIHAR
Patiala
Patiala
Patiala Punjab - 147001
9465067821

Issue Date: 19/03/2020



आपका आधार क्रमांक / Your Aadhaar No. :

9005 1597 9419
VID : 9102 7455 5090 5632

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Download Date: 27/03/2020



Jaswant Singh
Date of Birth/DOB: 01/01/1964
Male/ MALE

Issue Date: 19/03/2020

9005 1597 9419
VID : 9102 7455 5090 5632

मेरा आधार, मेरी पहचान



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

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Unique Identification Authority of India

Address:
C/O Balkar Singh, # 72, SIRHIND ROAD,
RANJIT VIHAR, Patiala, Patiala,
Punjab - 147001



9005 1597 9419
VID : 9102 7455 5090 5632



1947



help@uidai.gov.in



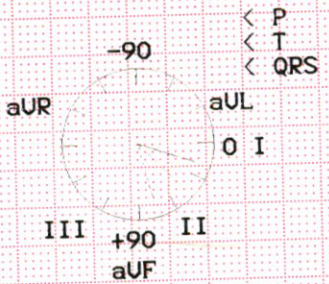
www.uidai.gov.in

Mr Jaswant Singh
Age - 60y/M
UNID - 341850

HR 61 bpm

Measurement Results

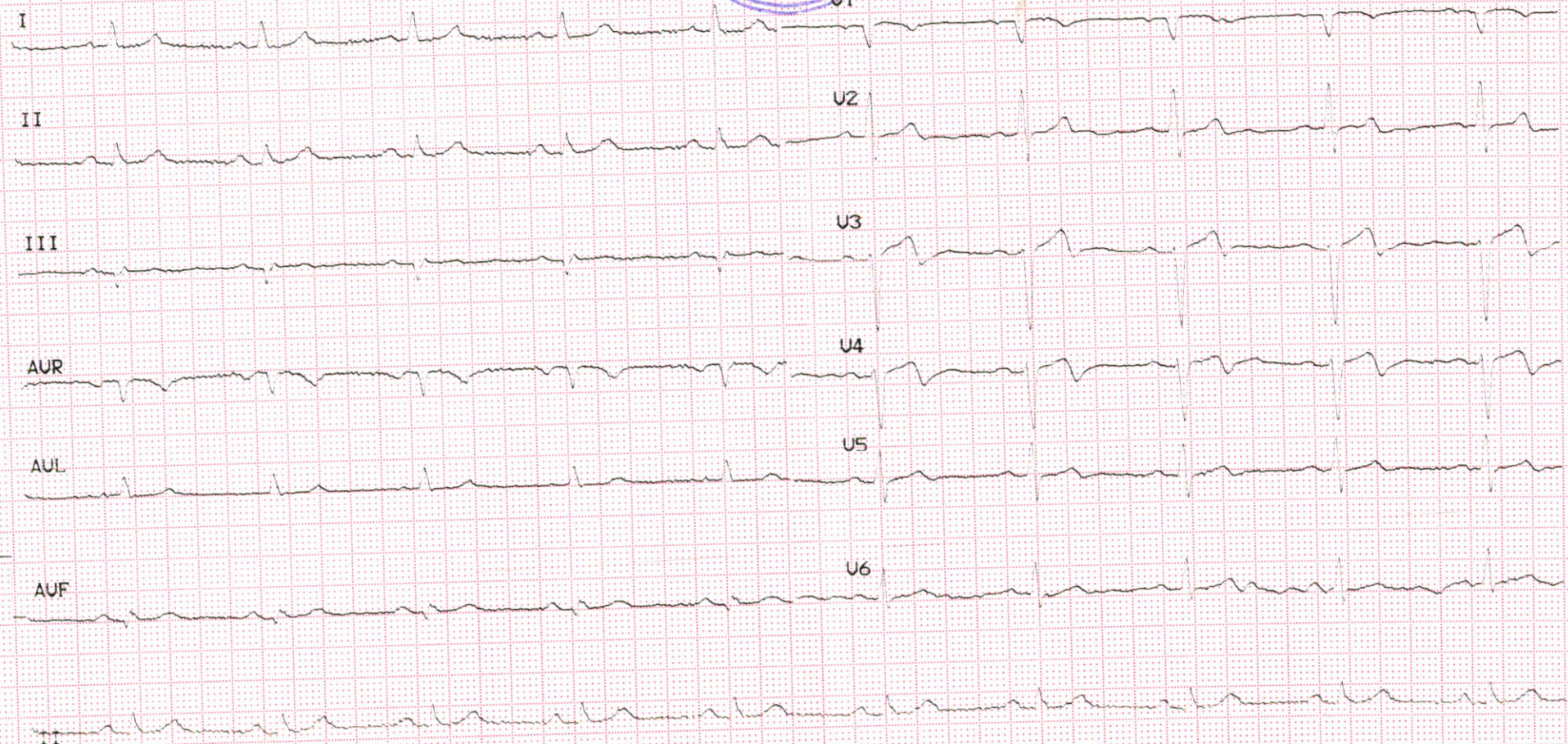
| | |
|-----------|--------------------|
| QRS | 106 ms |
| QT/QTcB | 394 / 398 ms |
| PR | 182 ms |
| P | 110 ms |
| RR/PP | 980 / 945 ms |
| P/QRS/T | 75/ 20/ 45 degrees |
| QTd/QTcBD | 68 / 69 ms |
| Sokolow | mV |
| NK | 8 |



Interpretation:
low QRS amplitudes
probably abnormal ECG



Unconfirmed report.





Ivy Hospital

SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No. : U85110PB2005PTC027898

Patient Name JASWANT SINGH
Gender/Age Male / 59

Patient ID 341850
Test Date : 25 Feb 2023

CARDIOLOGY DIVISION

ECHOCARDIOGRAPHY REPORT

Remarks -

FINAL IMPRESSION -

RWMA : LV territory akentic,

Mild MR

AF ~ 25%

patient shortness ~ 18%

posterior LV ~ 12-14%

LV Study - 13-14

LVEF ~ 20-25%



DR. SANJEEV SROA
MD Medicine , DM Cardiology

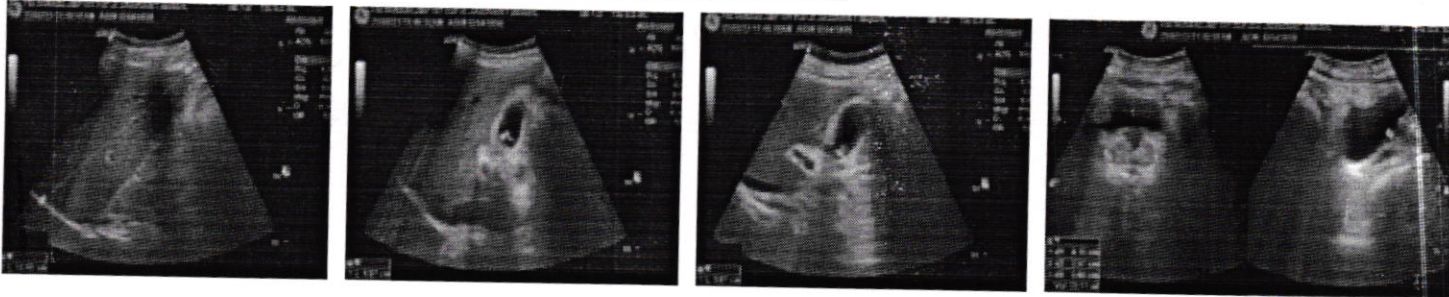
(NOT FOR MEDICO-LEGAL PURPOSE)

A unit of Ivy Health and Life Sciences (P) Ltd. Website : www.ivyhospital.com, Email: cs@ivyhospital.com Fax: 91-172-2274900
Regd. Office: Administration Block, Ivy Hospital, Sector-71, S.A.S Nagar Mohali-160071, Punjab, Ph : +91-172-7170000, Fax: 91-172-5044339
All Payments to be made in favour of Ivy Health & Life Sciences (P) Ltd

IVY HELPLINE : +91 99888-23456

| | | | |
|----------------|---------------|------------------|------------------|
| NAME | JASWANT SINGH | SEX/AGE | M60Y |
| PATIENT ID | ID341850 | Accession Number | |
| REF CONSULTANT | PACKAGE | DATE | 25/02/2023 11:45 |

USG WHOLE ABDOMEN



LIVER: is normal in size (~15.6 cm), outline and shows generalized increased echogenicity. No focal lesion is seen. IHBR are not dilated. Portal vein is normal. CBD is not dilated.

GALL BLADDER: is normally distended. GB wall is normal. Two bright echogenic foci casting PAS measuring ~ 9.7mm & 6.7mm are seen in GB lumen.

SPLEEN: is normal in size (~ 9.0cm), outline and echotexture. No focal lesion is seen.

PANCREAS & UPPER RETROPERITONEUM: Visualised pancreatic head and proximal body are normal in size and echotexture. Tail of pancreas is obscured by bowel gas.

RIGHT KIDNEY: It is normal in size (~11.0 cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

LEFT KIDNEY: It is normal in size (~8.9cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

U-BLADDER: is normally distended at the time of examination with normal wall thickness. No e/o calculus / mass seen.

PROSTATE: is borderline in size (~25.5 cc).

No free fluid is seen in peritoneal cavity.

IMPRESSION:

Grade I Fatty Liver.

Cholelithiasis.

Borderline Prostatomegaly.

Adv: Clinical correlation and followup.

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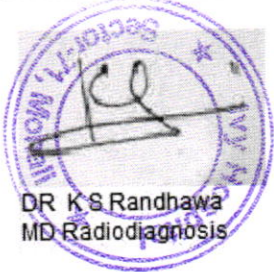
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Ivy Hospital

SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No. : U85110PB2005PTC027898

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| NAME | JASWANT SINGH | SEX/AGE | M60Y |
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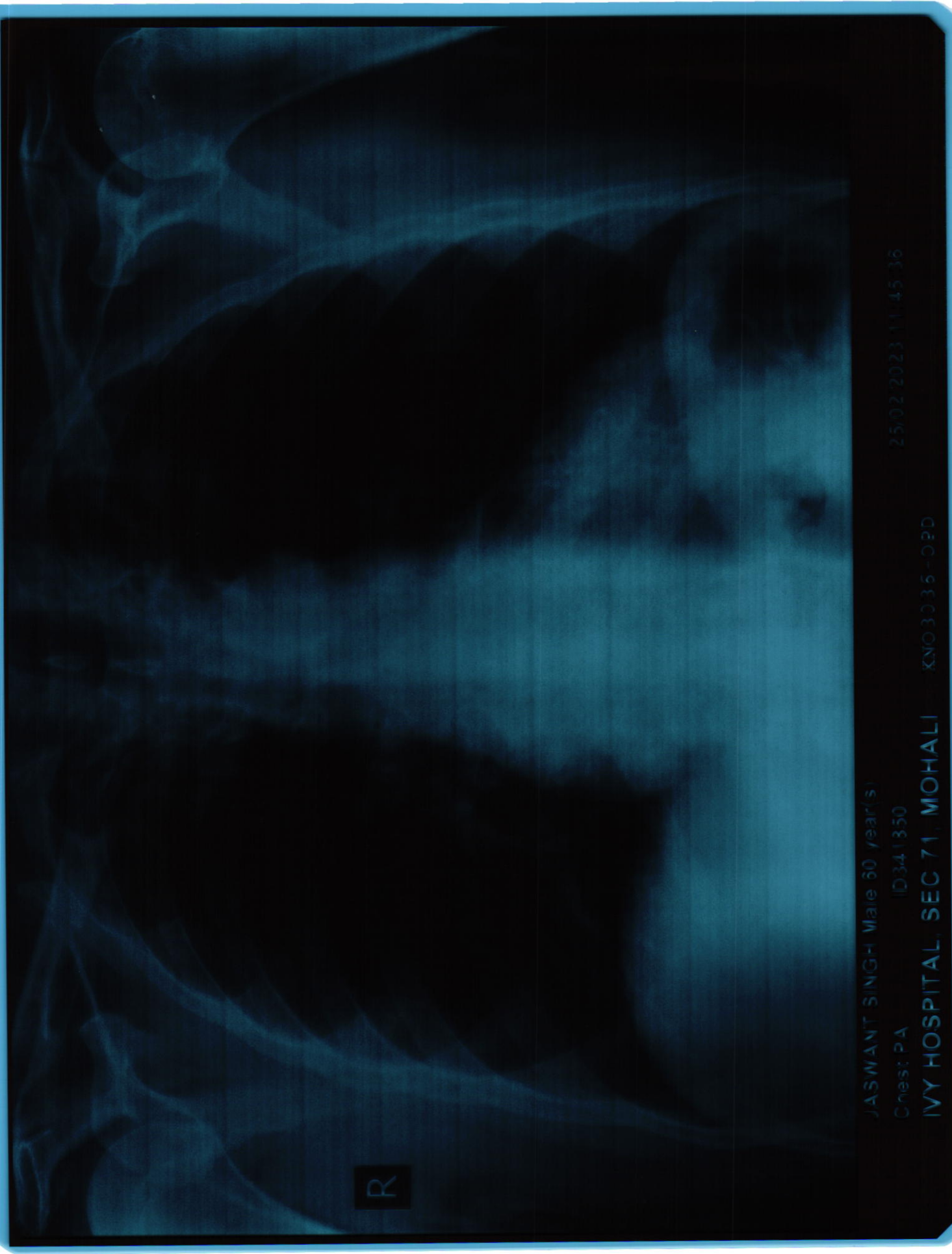


DR K.S.Randhawa
MD Radiodiagnosis

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

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R

JASWANT SINGH Male 60 year(s)

Chest PA ID341350

IVY HOSPITAL SEC 71, MOHALI

XNO3035-OPD

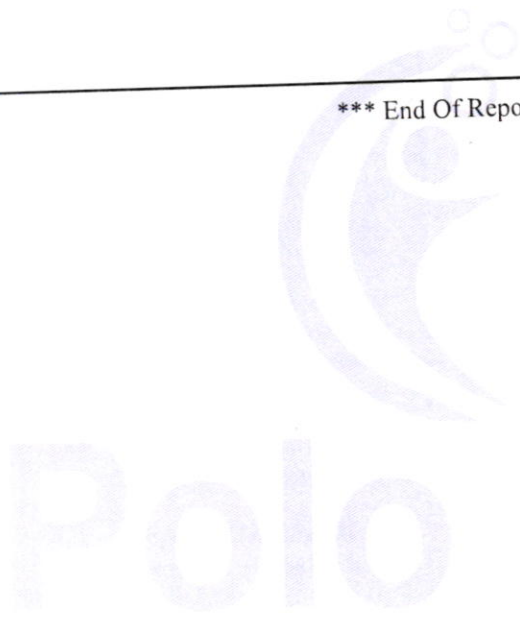
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| | | | |
|-------------|---------------------|------------------|-----------------------|
| NAME | : MR. JASWANT SINGH | Requisition Date | : 25/Feb/2023 10:33AM |
| DOB/Gender | : 01-Jan-1964/M | Sample CollDate | : 25/Feb/2023 03:44PM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 03:44PM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 05:12PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|--|----------------|-------|--|
| BIOCHEMISTRY | | | |
| GLUCOSE PP | | | |
| Plasma Glucose Post Prandial (okinase/ AU480) | 191 | mg/dL | <140 Normal 140 - 180 Impaired Tolerance >180 Diabetic |

*** End Of Report ***



The highlighted values should be correlated clinically



| | | | |
|-------------|---------------------|------------------|-----------------------|
| NAME | : MR. JASWANT SINGH | Requisition Date | : 25/Feb/2023 10:33AM |
| DOB/Gender | : 01-Jan-1964/M | SampleCollDate | : 25/Feb/2023 11:08AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:08AM |
| Ivy. No. | : 3175622 | Approved Date | : 25/Feb/2023 01:06PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

IMMUNOASSAY

PSA TOTAL

| | | | |
|---|------|-------|------|
| Serum PSA Total <small>(C.T. / Vitos 3600)</small> | 0.31 | ng/mL | <4.0 |
|---|------|-------|------|

Sig. & Interpretation:

Elevated concentrations of PSA in serum are generally indicative of a patho-logic-condition of the prostate (prostatitis, benign hyperplasia or carcinoma). PSA determinations are employed for the monitoring of progress and efficiency of therapy in patients with prostate carcinoma or receiving hormonal therapy. An inflammation or trauma of the prostate (e.g. In case of urinary retention or following rectal examination, cystoscopy, coloscopy, transurethral biopsy, laser treatment or ergometry) can lead to PSA elevations of varying duration and magnitude.

Polo



The highlighted values should be correlated clinically



| | | | |
|-------------|---------------------|------------------|-----------------------|
| NAME | : MR. JASWANT SINGH | Requisition Date | : 25/Feb/2023 10:33AM |
| DOB/Gender | : 01-Jan-1964/M | SampleCollDate | : 25/Feb/2023 11:08AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:58AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 01:18PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

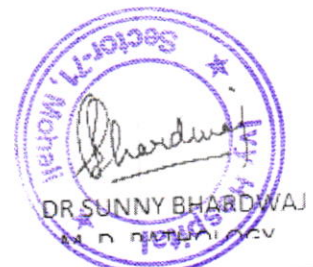
HAEMATOLOGY

Glycosylated HB (HbA1c)

| | | | |
|---|-----|-------|--|
| Whole Blood HbA1c (Boronate Affinity HPLC/Trinity) | 7.6 | % | Non diabetic:4.0-6.0 Target of therapy:<7.0 Change of therapy:>8.0 |
| Estimated Average Glucose (eAG) (Calculated) | 171 | mg/dL | |

ADA criteria for correlation between HbA1c & Mean plasma glucose levels:
(Last three month's average).

| HbA1c (%) | Mean Plasma Glucose (mg / dl) |
|-----------|-------------------------------|
| 6 | 126 |
| 7 | 154 |
| 8 | 183 |
| 9 | 212 |
| 10 | 240 |
| 11 | 269 |
| 12 | 298 |





| | | | |
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| DOB/Gender | : 01-Jan-1964/M | SampleCollDate | : 25/Feb/2023 11:08AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:32AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 12:05PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

HAEMATOLOGY

BLOOD GROUP RH TYPE

ABO & RH Typing

Forward Grouping

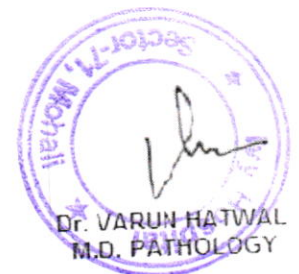
- Anti A
- Anti B
- Anti AB
- Anti D
- Reverse Grouping A Cells
- Reverse Grouping B Cells
- Reverse Grouping O Cells
- Final Blood Group**

POSITIVE
Negative
POSITIVE
POSITIVE
Negative
POSITIVE
Negative
A POSITIVE

NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

AMENDED



| | | | |
|-------------|---------------------|------------------|-----------------------|
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| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 12:44PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
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| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

BIOCHEMISTRY

GLUCOSE FASTING

Primary Sample Type: Fluoride Plasma

Asma Glucose Fasting
(Gokimase/ AU480)

125

mg/dL < 106 Normal
 107 - 125 Impaired Tolerance
 >126 Diabetic



The highlighted values should be correlated clinically



NAME : MR. JASWANT SINGH
DOB/Gender : 01-Jan-1964/M
UHID : 341850
Inv. No. : 3175622
Panel Name : Ivy Mohali
Bar Code No : 12679488

Requisition Date : 25/Feb/2023 10:33AM
SampleCollDate : 25/Feb/2023 11:08AM
Sample Rec.Date : 25/Feb/2023 11:08AM
Approved Date : 25/Feb/2023 12:24PM
Referred Doctor : Self

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

BIOCHEMISTRY

RFT (RENAL FUNCTION TESTS)

| | | | |
|---|-------|-------|-----------|
| Serum Urea (Urease/GI/DH/AU480) | 21.00 | mg/dl | 17-43 |
| Serum Creatinine (Jaffe Kinetic/AU480) | 0.70 | mg/dl | 0.67-1.17 |
| Serum Uric acid (Uricase/AU480) | 5.30 | mg/dl | 3.5-7.2 |

LIVER FUNCTION TEST WITH GGT

| | | | |
|--|------|-------|-------------|
| Serum Bilirubin Total (JPD/AU480) | 1.00 | mg/dL | 0.3-1.2 |
| Serum Bilirubin Direct (JPD/AU480) | 0.20 | mg/dl | <0.3 |
| Serum Bilirubin Indirect (Calculated) | 0.80 | mg/dl | 0.1-1.0 |
| Serum SGOT(AST) (IFCC Without PSP/AU480) | 19 | U/L | <35 |
| Serum SGPT(ALT) (IFCC Without PSP/AU480) | 19 | U/L | <50 |
| Serum AST/ALT Ratio (Calculated) | 1.00 | | |
| Serum GGT (IFCC/AU480) | 27 | IU/L | 9-52 |
| Serum Alkaline Phosphatase (IFCC/BNPAMPKinetic/AU480) | 69 | U/L | 30-120 |
| Serum Protein Total (Biot) | 7.1 | gm/dl | 6.40 - 8.20 |
| Serum Albumin (BICG/AU480) | 3.3 | g/dL | 3.5-5.2 |
| Serum Globulin (Calculated) | 3.80 | gm/dl | 2.0-3.5 |
| Serum Albumin/Globulin Ratio (Calculated) | 0.87 | % | 1.0 - 1.8 |



The highlighted values should be correlated clinically



DR. BHUMIKA BISHT
M.D. PATHOLOGY

| | | | |
|-------------|---------------------|------------------|-----------------------|
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| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:08AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 12:24PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|---|----------------|-------|--|
| LIPID PROFILE | | | |
| Serum Cholesterol (CHO-P/D/AU 480) | 154 | mg/dL | Desirable: <200 Borderline High: 200-239 High: > 240 |
| Serum Triglycerides (GPO-PAP/ AU480) | 143 | mg/dL | <150 Normal 150-199 Borderline High 200-499 High >500 Very High |
| Serum HDL Cholesterol (Immunoenzymatic/AU 480) | 47 | mg/dL | <40 Major risk factor for CHD >60 Negative risk factor for CHD |
| Serum VLDL cholesterol (Calculated) | 29 | mg/dL | 7-35 |
| Serum LDL cholesterol (Calculated) | 78 | mg/dL | 50-100 |
| Serum Cholesterol-HDL Ratio (Calculated) | 3.28 | | 3-5 |
| Serum LDL-HDL Ratio (Calculated) | 1.67 | | 1.5 - 3.5 |

Polo

The highlighted values should be correlated clinically





| | | | |
|-------------|---------------------|------------------|-----------------------|
| NAME | : MR. JASWANT SINGH | Requisition Date | : 25/Feb/2023 10:33AM |
| DOB Gender | : 01-Jan-1964/M | Sample CollDate | : 25/Feb/2023 11:08AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:08AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 12:39PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
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| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

HAEMATOLOGY

ESR

Primary Sample Type: EDTA Blood

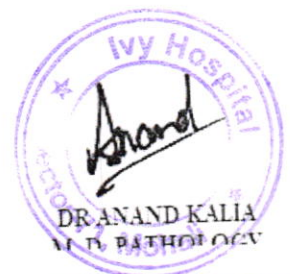


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mm/h

0-10

Polo



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| | | | |
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| DOB/Gender | : 01-Jan-1964/M | Sample CollDate | : 25/Feb/2023 11:08AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:08AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 11:52AM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

HAEMATOLOGY

COMPLETE BLOOD COUNT (Sample Type- Whole Blood EDTA)

| | | | |
|--|-------|----------------------|-------------|
| Haemoglobin <small>(Non-cyanmethaemoglobin)</small> | 14.7 | g/dl | 13.0 - 17.0 |
| Hematocrit(PCV) <small>(Calculated)</small> | 46.0 | % | 36-48 |
| Red Blood Cell (RBC) <small>(Impedence/DC Detection)</small> | 5.20 | 10 ⁶ / μl | 4.5-5.5 |
| Mean Corp Volume (MCV) <small>(Impedence/DC Detection)</small> | 88.8 | fL | 83-97 |
| Mean Corp HB (MCH) <small>(Calculated)</small> | 28.4 | pg/mL | 27-31 |
| Mean Corp HB Conc (MCHC) <small>(Calculated)</small> | 32.0 | gm/dl | 32-36 |
| Red Cell Distribution Width -CV <small>(Calculated)</small> | 13.8 | % | 11-15 |
| Platelet Count <small>(Impedence/DC Detection/Microscopy)</small> | 171 | 10 ³ /ul | 150-450 |
| Mean Platelet Volume (MPV) <small>(Impedence/DC Detection)</small> | 13.3 | fL | 7.5-10.3 |
| Total Leucocyte Count (TLC) <small>(Impedence/DC Detection)</small> | 7.3 | 10 ³ /μl | 4.0 - 10.0 |
| Differential Leucocyte Count (VCS/ Microscopy) | | | |
| Neutrophils | 65 | % | 40-75 |
| Lymphocytes | 23 | % | 20-40 |
| Monocytes | 8 | % | 0-8 |
| Eosinophils | 4 | % | 0-4 |
| Basophils | 0 | % | 0-1 |
| Absolute Neutrophil Count <small>(VCS Microscopy)</small> | 4,745 | μl | 2000-7000 |
| Absolute Lymphocyte Count | 1,679 | uL | 1000-3000 |
| Absolute Monocyte Count | 584 | uL | 200-1000 |
| Absolute Eosinophil Count <small>(VCS Microscopy)</small> | 292 | μl | 20-500 |

*** End Of Report ***



The highlighted values should be correlated clinically





NAME : MR. JASWANT SINGH
 DOB/Gender : 01-Jan-1964/M
 UHID : 341850
 Inv. No. : 3175622
 Panel Name : Ivy Mohali
 Bar Code No : 12679488

Requisition Date : 25/Feb/2023 10:33AM
 SampleCollDate : 25/Feb/2023 11:08AM
 Sample Rec.Date : 25/Feb/2023 11:08AM
 Approved Date : 25/Feb/2023 02:38PM
 Referred Doctor : Self

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

IMMUNOASSAY

TOTAL THYROID PROFILE

Serum Total T3 1.15 ng/mL 0.970 – 1.69
(CLIA/Vitros 3600)

Summary & Interpretation:
 Thyrothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by deiodination of T4. A reduction in the conversion of T4 to T3 results in a fall in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI). The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

Serum Total T4 6.44 µg/dL 5.53 – 11.0
(CLIA/Vitros 3600)

Summary & Interpretation:
 The hormone thyroxine (T4) is the main product secreted by the thyroid gland. The major part of total thyroxine (T4) in serum is present in protein-bound form. As the concentration of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism and the monitoring of TSH-suppression therapy.

Serum TSH 2.000 mIU/L 0.4001 – 4.049
(CLIA/Vitros 3600)

Summary & Interpretation:
 TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The determination of TSH serves as the initial test in thyroid diagnostics. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

Note:
 1. 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.
 2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
 3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
 4. Clinical Use: Primary Hypothyroidism, Hyperthyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Nonthyroidal illness, Autoimmune thyroid disease, Pregnancy associated thyroid disorders.

| PREGNANCY | REFERENCE RANGE FOR TSH IN uIU/mL |
|---------------|-----------------------------------|
| 1st Trimester | 0.05 – 3.70 |
| 2nd Trimester | 0.31 – 4.35 |
| 3rd Trimester | 0.41 – 5.18 |

The highlighted values should be correlated clinically





| | | | |
|-------------|---------------------|------------------|-----------------------|
| NAME | : MR. JASWANT SINGH | Requisition Date | : 25/Feb/2023 10:33AM |
| DOB/Gender | : 01-Jan-1964/M | SampleCollDate | : 25/Feb/2023 11:45AM |
| UHID | : 341850 | Sample Rec.Date | : 25/Feb/2023 11:45AM |
| Inv. No. | : 3175622 | Approved Date | : 25/Feb/2023 02:38PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12679488 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

CLINICAL PATHOLOGY

COMPLETE URINE EXAMINATION

Physical Examination

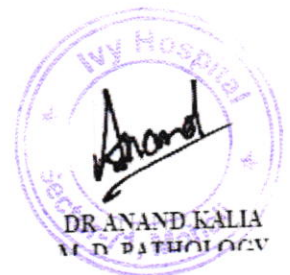
| | | | |
|------------------|--------|----|--------------|
| Urine Volume | 25.00 | mL | |
| Urine Colour | Yellow | | Light Yellow |
| Urine Appearance | Clear | | Clear |

Chemical Examination (Reflectance Photometry)

| | | | |
|---------------------------------------|--------|--|-------------|
| Urine pH | 6.00 | | 4.8-7.6 |
| Urine Specific Gravity | 1.020 | | 1.010-1.030 |
| Urine Glucose | Absent | | Absent |
| Urine Protein (Protein Ionization) | Absent | | NIL |
| Urine Ketones | Absent | | Absent |
| Urine Bilirubin | Absent | | Absent |
| Urine for Urobilinogen | Absent | | Absent |
| Urine Nitrite | Absent | | Absent |

Microscopic Examination

| | | | |
|------------------------|--------|------|--------|
| Urine Pus Cells | 1-2 | | 0-5 |
| Urine RBC | Absent | /hpf | Absent |
| Urine Epithelial Cells | Absent | /hpf | 0-5 |
| Urine Casts | Absent | /lpf | Absent |
| Urine Crystals | Absent | /hpf | Absent |
| Urine Bacteria | Absent | /hpf | Absent |
| Urine Yeast Cells | Absent | /hpf | Absent |
| Amorphous Deposit | Absent | | Absent |





| | | | |
|-------------|---------------------|------------------|-----------------------|
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| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

STOOL ROUTINE

Physical Examination

| | | | |
|-------------------|-------------|--|--------|
| Stool Colour | Yellowish | | |
| Stool Consistency | Semi formed | | |
| Stool Mucus | Absent | | Absent |

Microscopic Examination

| | | | |
|---------------------------------|--------|------|--------|
| Stool Pus Cells (Microscopy) | 0-1 | /hpf | Absent |
| Stool RBC | Absent | /hpf | Absent |
| Stool Ova (Microscopy) | Absent | | Absent |
| Stool Cysts (Microscopy) | Absent | | Absent |

*** End Of Report ***

Polo

