

PANCHMUKHI HOSPITAL

Dr C P Dadhaniya

Dr R C Dadhaniya
MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639, 8320711901

policy number :
full name : RISHABH UPADHYAY
identity proof : Adhaar card
identity proof no : (0958)
gender : male
height : 181 cm
weight : 89 kg
B P : 110/68
pluse : 72/min
blood sample : YES
fasting mode : Fasting
non fasting mode : — YES

past history : NO H/O HT, DM, Thyroid
 = NO operative H/O
 Colour Blindness : Not seen
 Dental check up = Normal.

Rishab

DR. C. P. DADHANIYA
 M.B. Diabetologist
 Ind. Physician (CIH)
 Regd. No. G19798
 Code No. 378943
 Panchmukhi Hospital
 Mavdi Chowki,
 150 Ft. Ring Road, RAJKOT.

NAME : Rishabh Upadhyay
AGE/GENDER: male / 29

DIAG. DATE: 20/09/23

PATIENT'S REFRACTION DETAILS

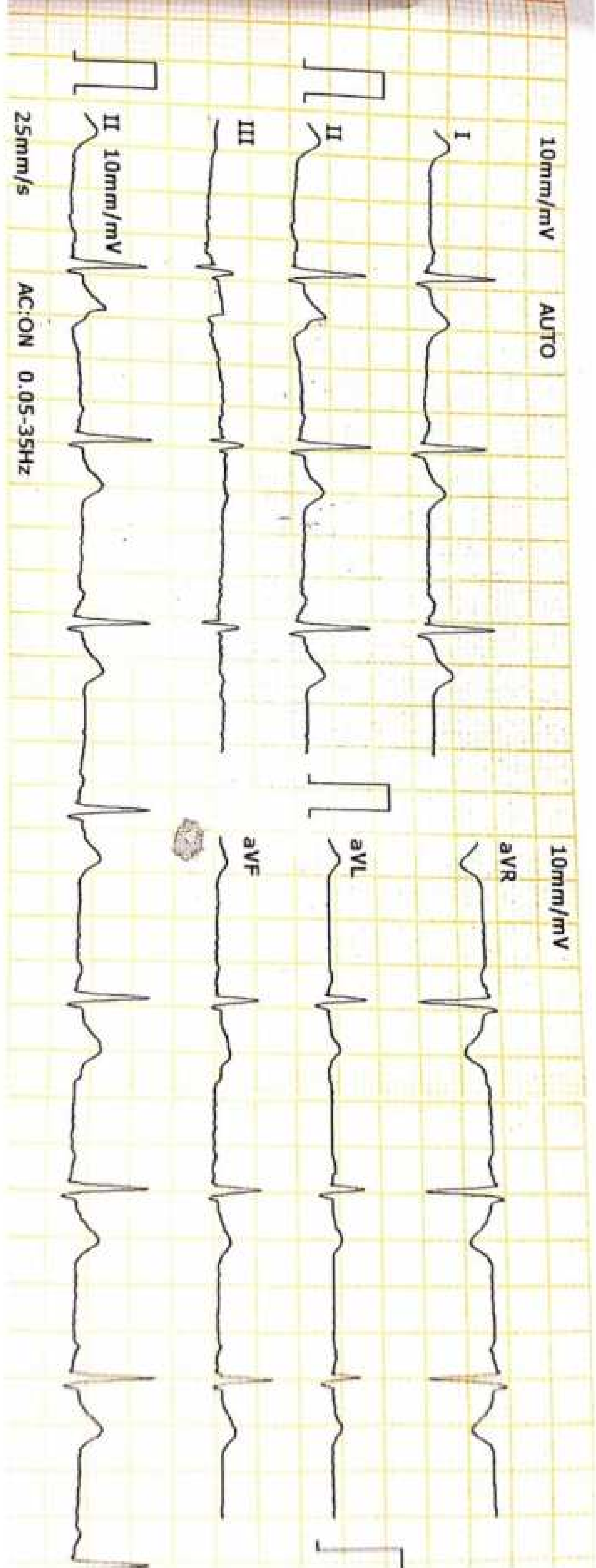
		SPHE	CYL	AXIS	VN
R	D	-1	2	2	6/a
	N	2			6/a
L	D	-1	2	2	6/a
	N	2			6/a

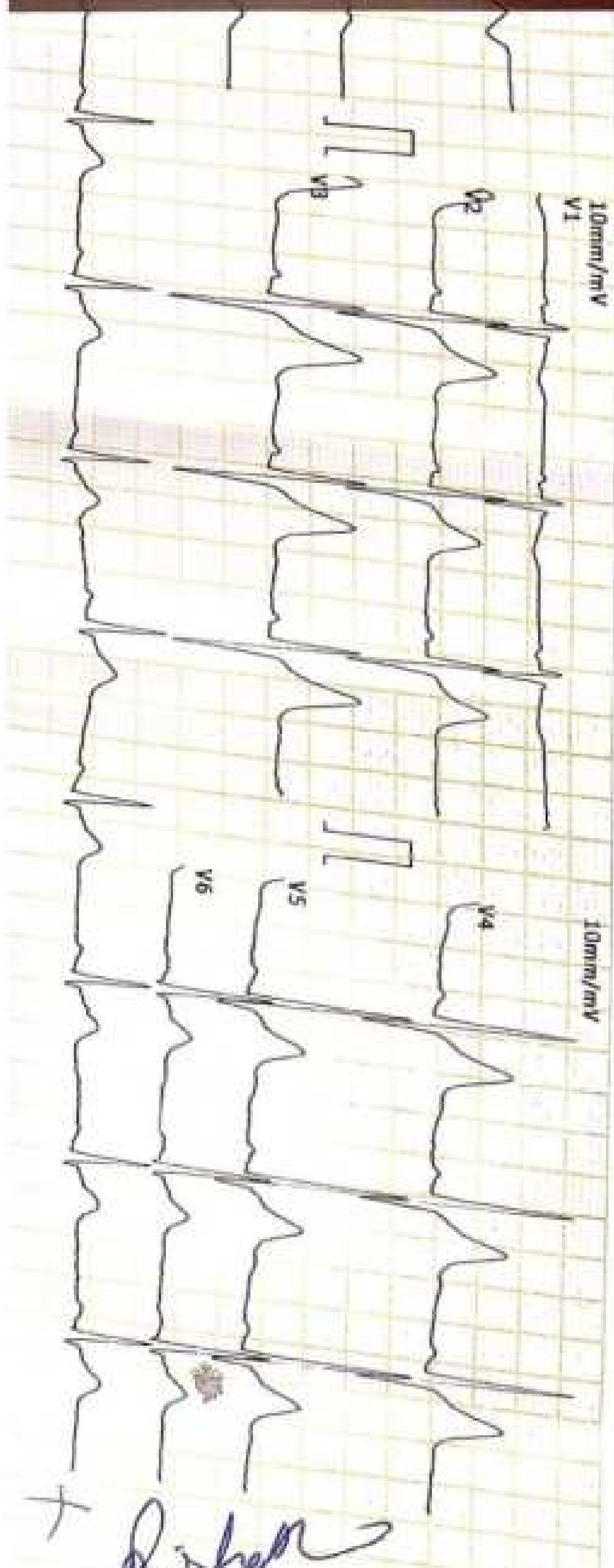
REMARKS : colour blindness - normal

CHECKED BY : Dr. C. P. Dadhaniya

Rishabh Upadhyay

DR. C. P. DADHANIYA
M.B. (Diabetologist)
Ind. Physician (CIH)
Regd. No. G19798
Code No. 378943
Panchmukhi Hospital
Mavdi Chowki,
150 Ft. Ring Road, RAJKOT.





2023-9-20 12:30:15 ID: 00003430
 ID Card: _____
 Name: Rishabh Wadhvani
 Age: 29 Height(cm): 170
 Weight(Kg): _____ Bp(mmHg): 110/70
 HR: _____
 P-R: DR. C. P. WADHAVANI Dr. B. Dabde 120
 Q-R-S: Dr. B. Dabde Cardiologist
 Ind. Physician (CIT) 106
 QT/QTc: 380/413
 P/QRS/T AXES: 378/99/59 59/34/42
 Code No.: 378999
 RVS/SV1: Panchmukhi Hospital mv 1.84/0.64
 RVS/SV6: M. V. D. Chowki mv 2.48
 *The result must be confirmed by doctor/COF
 150 Ft. King Road, Mumbai
 Report Confirmed by: _____

Pt.'s Name: RISHABH UPADHYAY

Date: 20 September, 2023

Radiograph of chest (PA view)

- *Both the lung fields are clear.*
- *No e/o consolidation, cavitations or collapse.*
- *Both the hila appears normal*
- *Both costophrenic angles appear clear.*
- *Both domes of diaphragm appear normal.*
- *Cardiac size is within normal limit.*
- *Bones underview reveals no evident abnormality.*

Thanks for reference.



DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS

Pat.s' Name: RISHABH UPADHYAY

DATE: 20 September 2023

U.S.G. OF ABDOMEN AND PELVIS

- **LIVER:** is normal size and shows bright parenchymal echotexture. No focal lesion noted. Intrahepatic billiary radicals appear normal. C.B.D and portal vein appears normal in calibre.
- **GALL BLADDER:** Well distended and appears normal. No evidence of gallstone or changes of cholecystitis.
- **PANCREAS:** appears normal in size, shape, echogenicity and echotexture. No focal lesion noted. No e/o peripancreatic fluid collection.
- **SPLEEN:** normal in size, shape, echogenicity and echotexture. No focal lesion noted.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No e/o calculi or hydronephrosis on either side.
- **URINARY BLADDER:** Well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **PROSTATE:** is normal in size, shape and echogenicity. No focal lesion.
- Visualised bowel loops show no evident abnormality. No e/o lymphadenopathy. RIF/ LIF CLEAR. Bilateral C-P angels clear.

CONCLUSION:

- Grade I fatty changes in liver.

Thanks for reference.



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MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS

Tread Mill Test

Patient Name	:	Rishabh Upadhyay	Age	:	29yrs/M
Ref. By	:	Dr. C.P.Dadhaniya	Resting BP	:	120/80
Report Date	:	19/09/2023	Max. BP	:	150/80

Patient Reaches exercise limit at 7.00 METS.

No signs of ischemia at the exercise level.

Adequate increase of HR & BP.

No significant Arrhythmia.


The stress test was terminated after 5:59 minutes as patient complained of Fatigue.
Patient achieved 98% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.

DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY


DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

Cure Cardiology Clinic
Partner.

CURE CARDIOLOGY CLINIC

2nd floor, Kansaagra Hospital, Astron Chowk, Sardarnagar main road, RAJKOT - 360 001. Ph. 0281-2483799, M. 93 13 12 19 87

CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 293 / RISHAB UPADHYAY 29 Yrs / Male 0 Kg/0 Cms
 Date: 20-Sep-2023 01:29:12 PM
 Ref. By : DR. C. P. DADHANIVA
 Medication :
 Objective :

Summary

Protocol : BRUCE
 History :

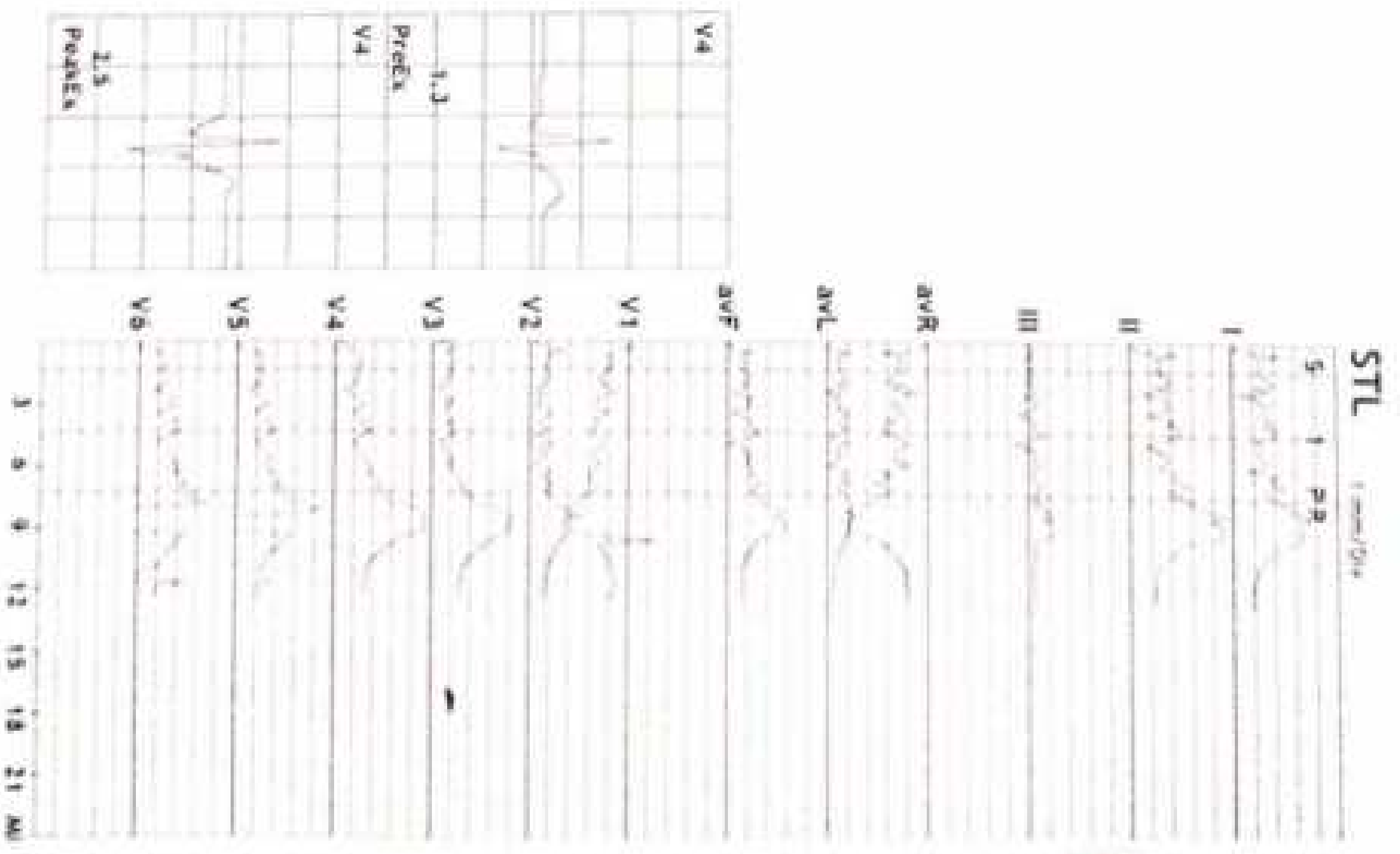



Stage	StageTime (min:Sec)	PhaseTime (min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. (mmHg)	PVC	Comments
Supine	0:01	0:52	0.0	0.0	1.0	96	120/80	115	-	
Standing	0:01	0:55	0.0	0.0	1.0	97	120/80	116	-	
HV	0:01	1:01	0.0	0.0	1.0	96	120/80	115	-	
EXStart	0:01	1:18	0.0	0.0	1.0	103	120/80	123	-	
Stage 1	3:00	3:00	2.7	10.0	4.6	170	130/80	221	1	
PeakEx	2:57	5:58	4.0	12.0	7.0	188	150/80	282	-	
Recovery	1:00	6:00	0.0	0.0	1.0	154	150/80	231	-	
Recovery	2:00	6:00	0.0	0.0	1.0	129	150/80	193	-	
Recovery	3:00	6:00	0.0	0.0	1.0	120	140/80	168	-	
Recovery	4:00	6:00	0.0	0.0	1.0	111	140/80	155	-	
Recovery	5:00	6:00	0.0	0.0	1.0	108	130/80	140	-	

Findings :

Exercise Time : 5:59 minutes
 Max HR attained : 188 bpm 98% of Max Predictable HR 191
 Max BP : 150/80(mmHg)
 Workload attained : 7 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 5:59
 Test Complete

Advice/Comments:



CURE CARDIOLOGY CLINIC
ZND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 293 / RISHABH UPADHYAY
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 96 bpm
 METS: 1.0
 BP: 120/80

APHR: 50% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

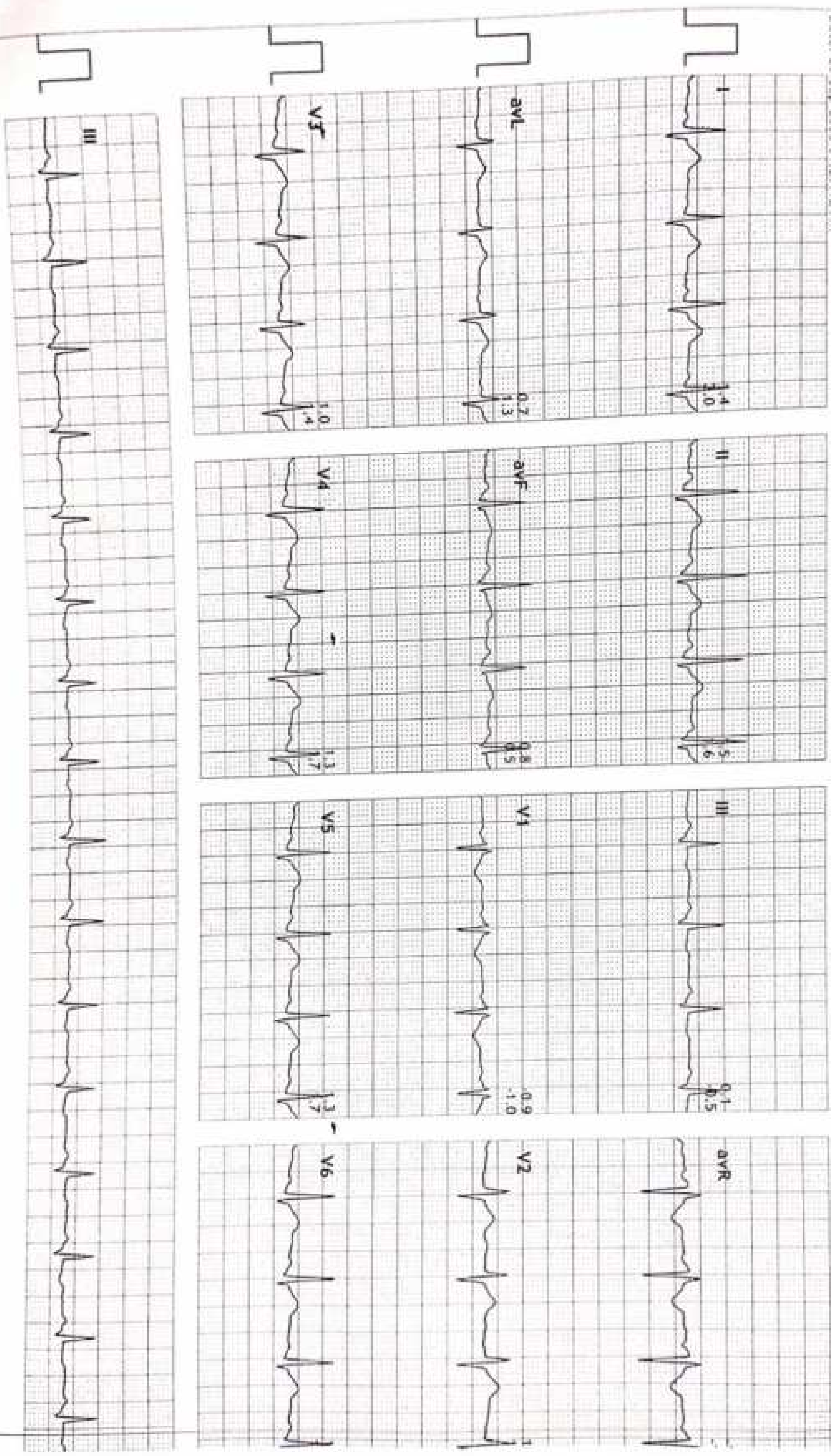
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:51
 BLC : On
 Notch : On

Supine
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



Printed on: 20-Sep-2023 01:29:12 PM

DR MAULIK HANSALIYA/DR NISHANT SIRODARIYA

Scanned with OKEN Scanner

CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 97 bpm
 METS: 1.0
 BP: 120/80

MPHR: 50% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

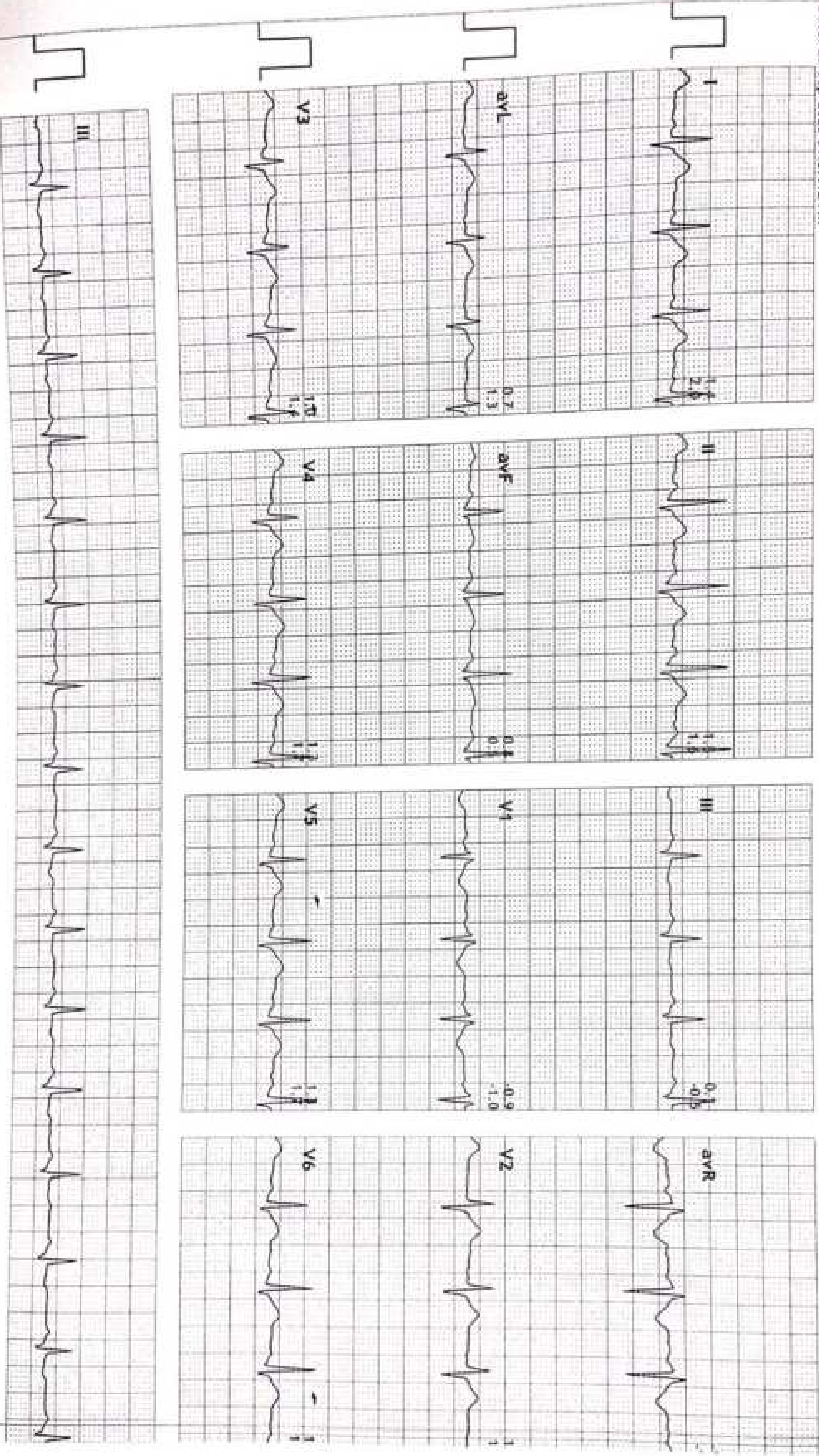
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:54
 BLC : On
 Match : On

Standing
 10.0 mm/mv
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 96 bpm
 METS: 1.0
 BP: 120/80

APHR: 50% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

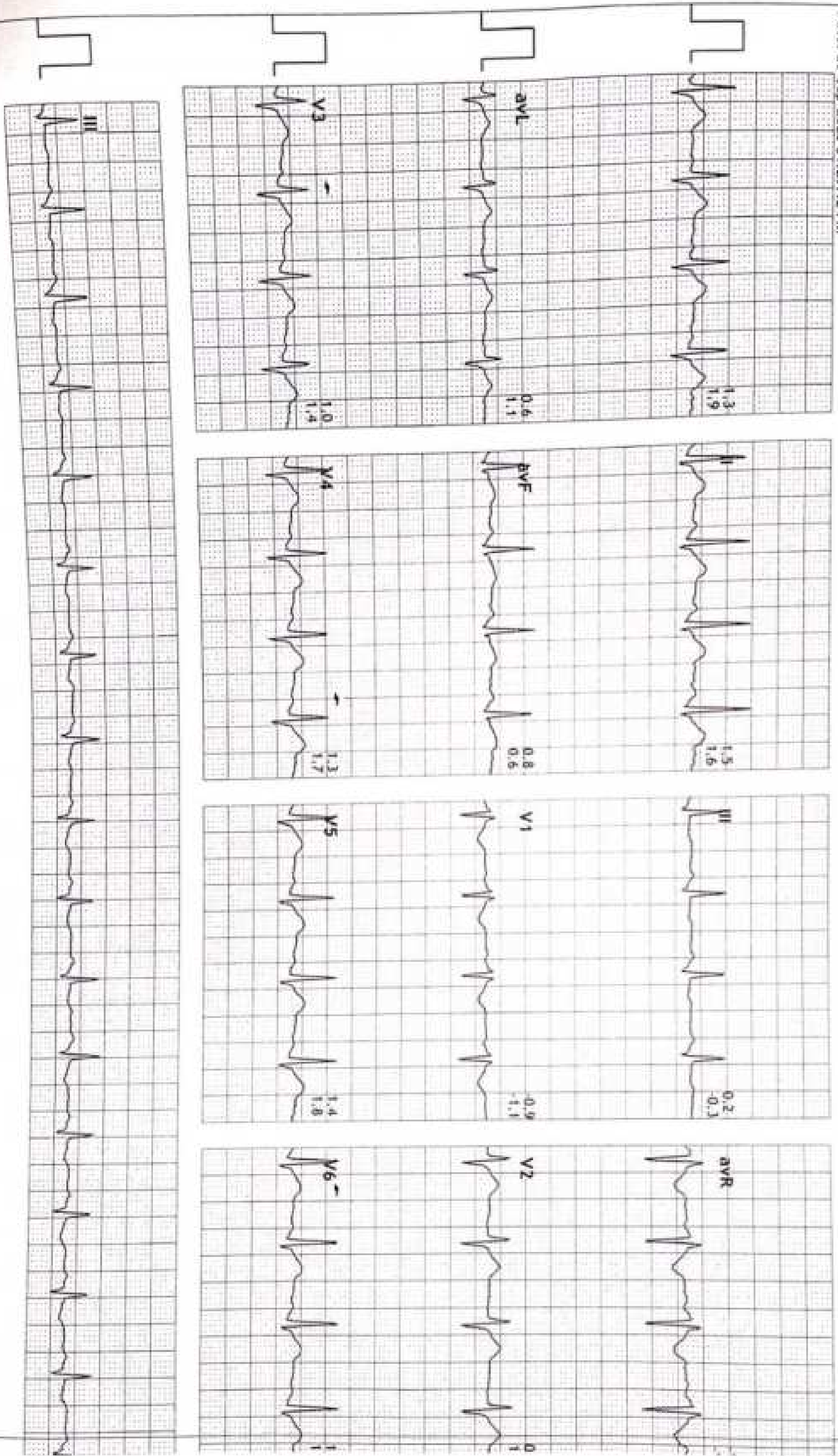
Raw ECG
 BAUCE
 0.05-100Hz

Ex Time 01:00
 BLC : On
 Motch : On

HV
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

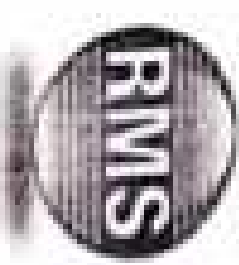
Hr: 103 bpm
 METS: 1.0
 BP: 120/80

MPHR: 53% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

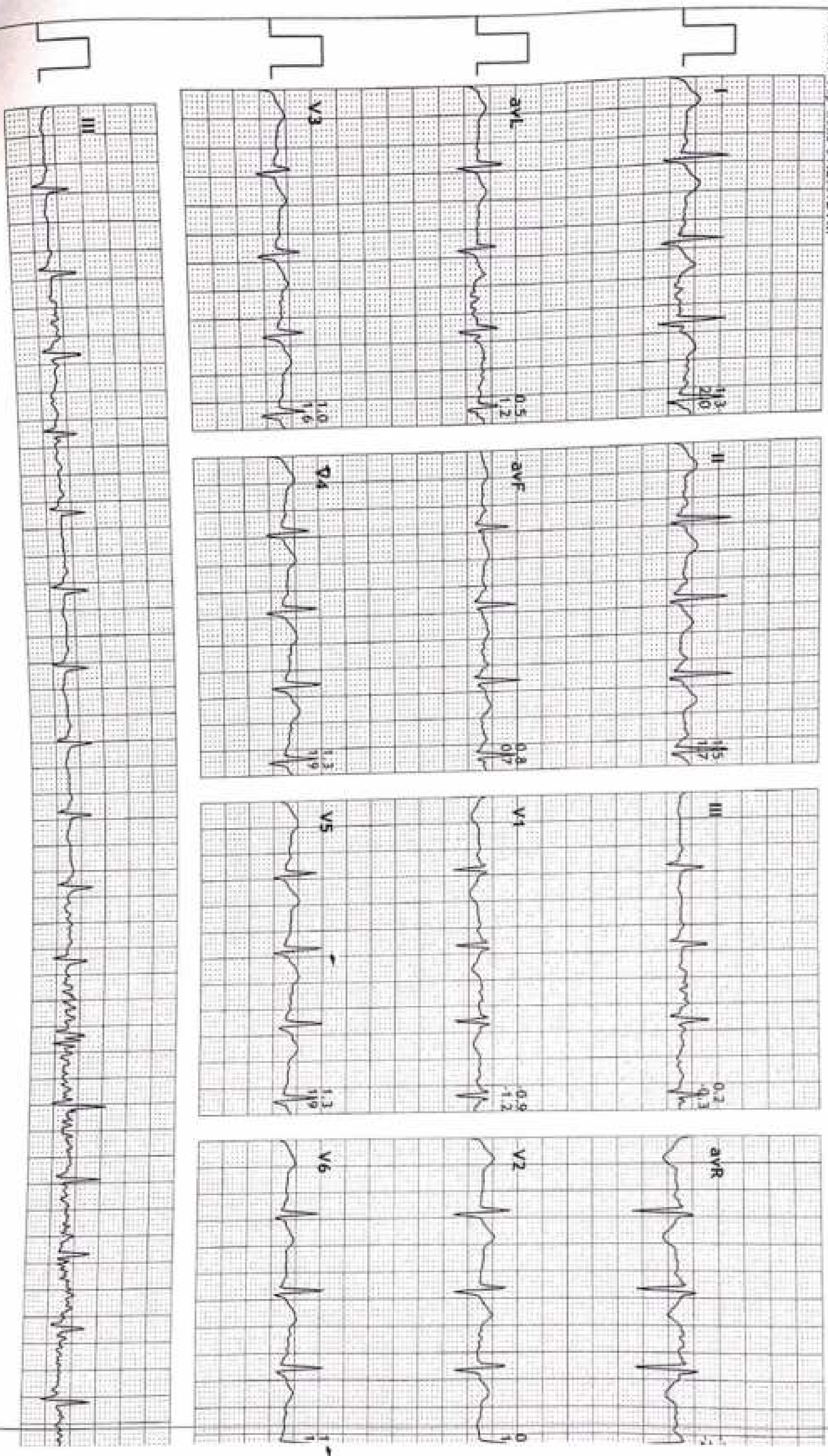
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time: 01:17
 BLC: On
 Notch: On

ExStart
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 170 bpm
 METS: 4.6
 BP: 130/80

APHR: 89% of 191
 Speed: 2.7 kmph
 Grade: 10.0%

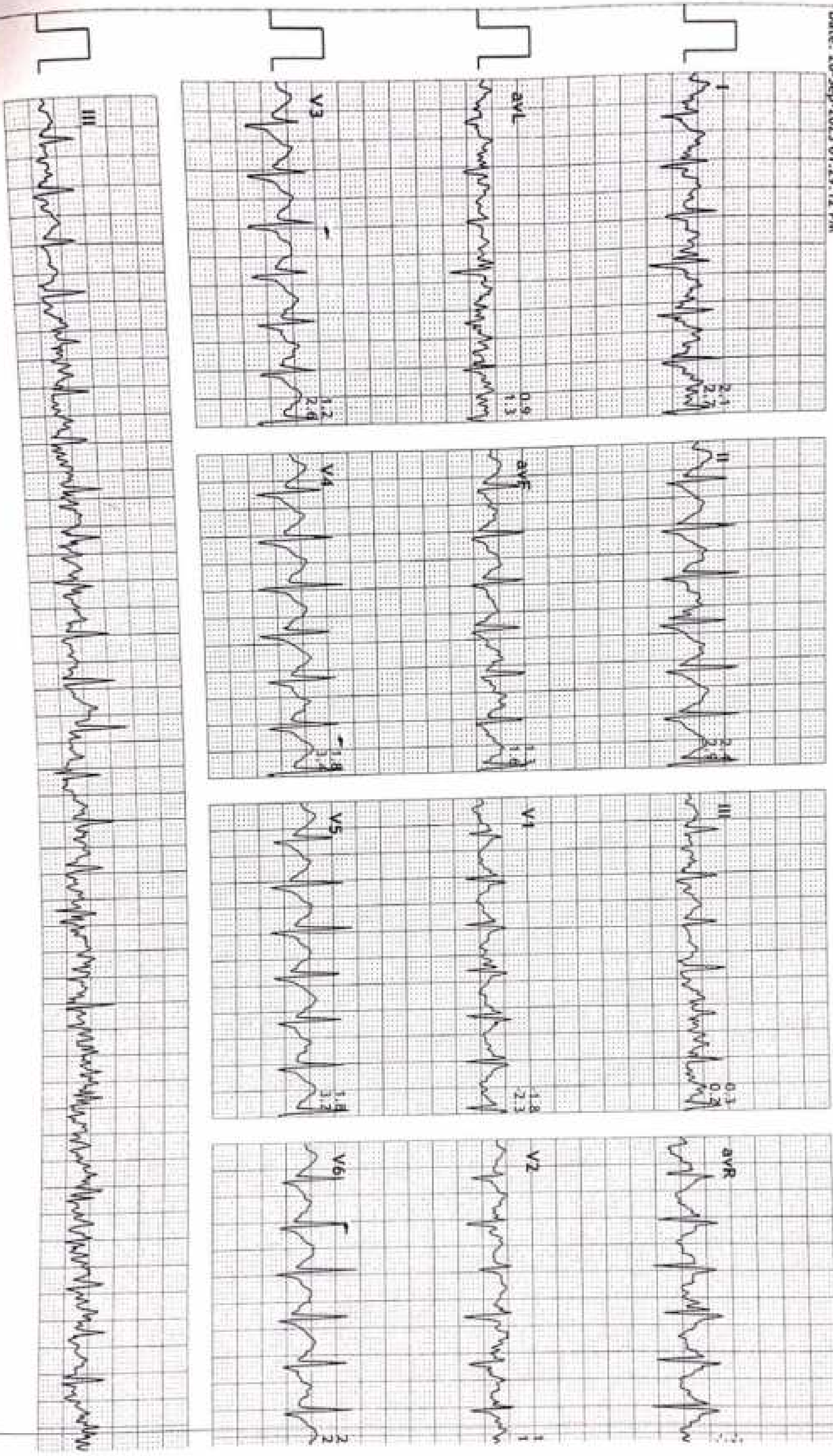
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 02:59
 BLC :On
 Notch :On

BRUCE: Stage 1
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 293 / RISHAB UPADHYAY
 29 Yrs / Male
 6 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 188 bpm
 METS: 7.0
 BP: 150/80

MPHR: 98% of 191
 Speed: 4.0 kmph
 Grade: 12.0%

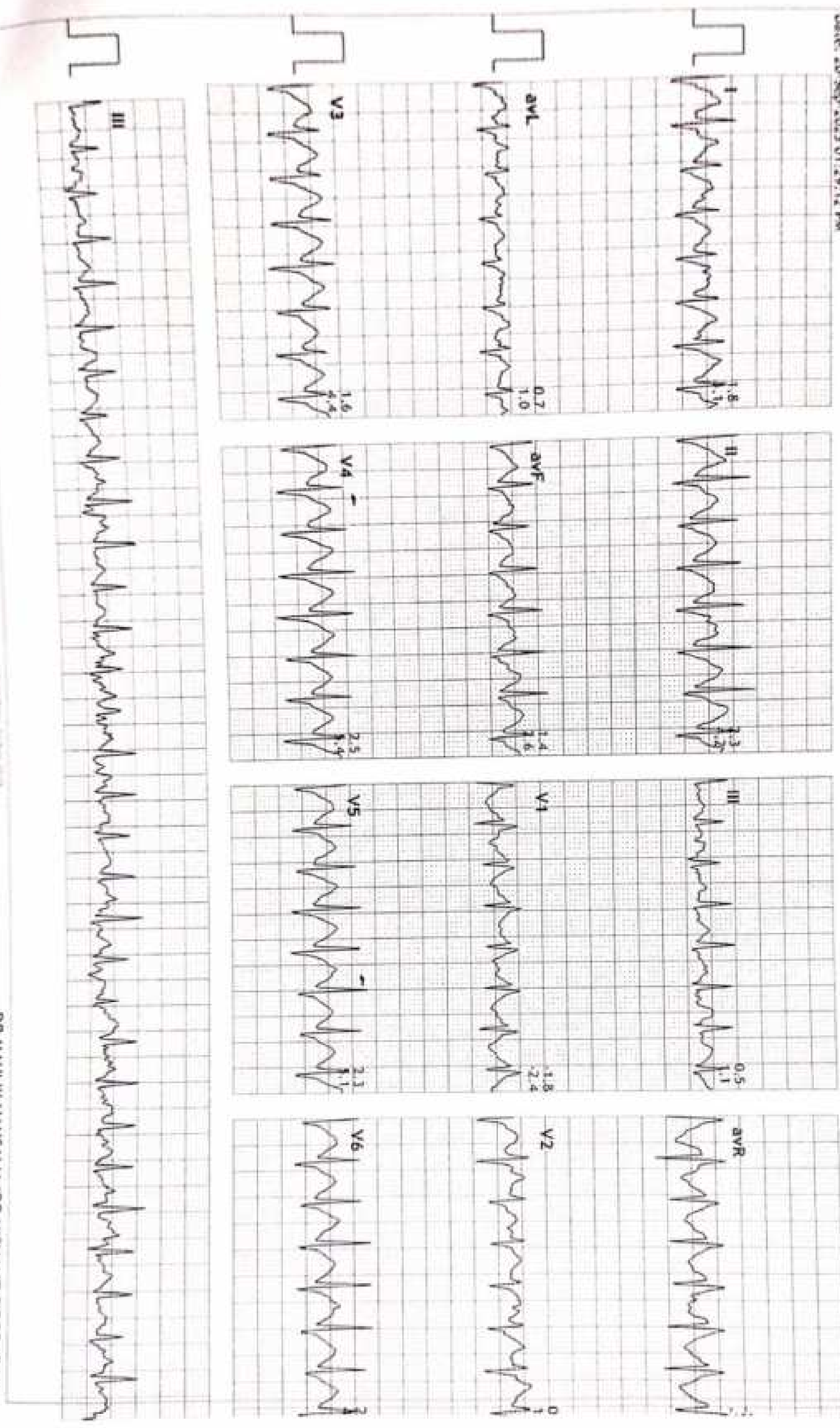
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 05:57
 BLC : On
 Match : On

BRUCE: PeakEx
 10.0 mm/mv
 25 mm/Sec.



3x4+1 Rhythm Lead



DR MAULIK HANSALIYA/DR NISHANT SIRODARIYA

DR MAULIK HANSALIYA/DR NISHANT SIRODARIYA

DR MAULIK HANSALIYA/DR NISHANT SIRODARIYA

CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

293 / RISHABH UPADHYAY

29 Yrs / Male

0 Kg / 0 Cm

Date: 20-Sep-2023 01:29:12 PM

3x4+1 Rhythm Lead

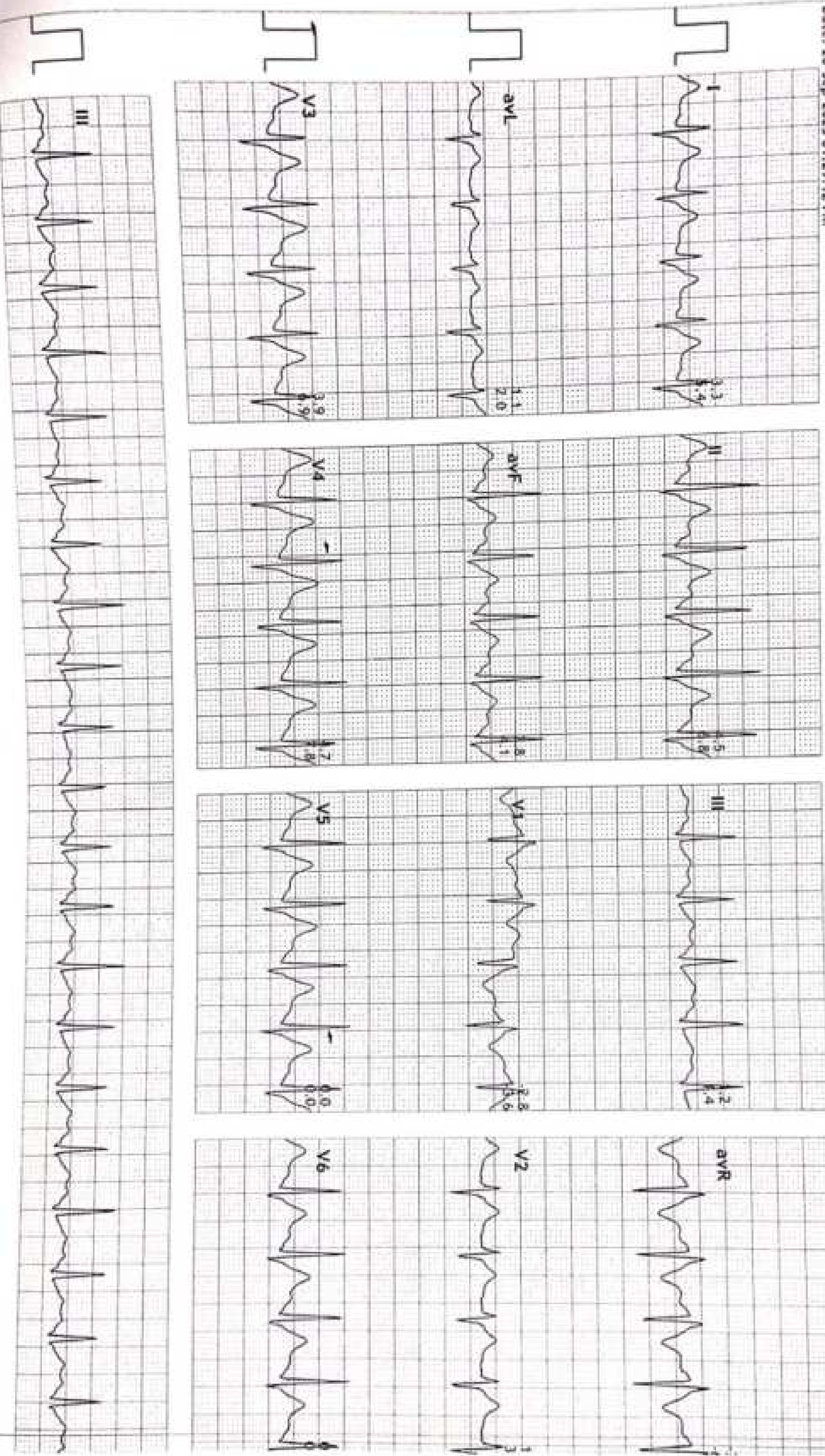
HR: 129 bpm
METS: 1.0
BP: 150/80

APHR: 67% of 191
Speed: 0.0 kmph
Grade: 0.0%

Raw ECG
BRUCE
10.05-100JHz

Ex Time 05:59
BLC : On
Notch : On

Recovery(2:00)
10.0 mm/mV
25 mm/Sec.



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 293 / RISHABH UPADHYAY
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 120 bpm
 METS: 1.0
 BP: 140/80

MPHR: 62% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

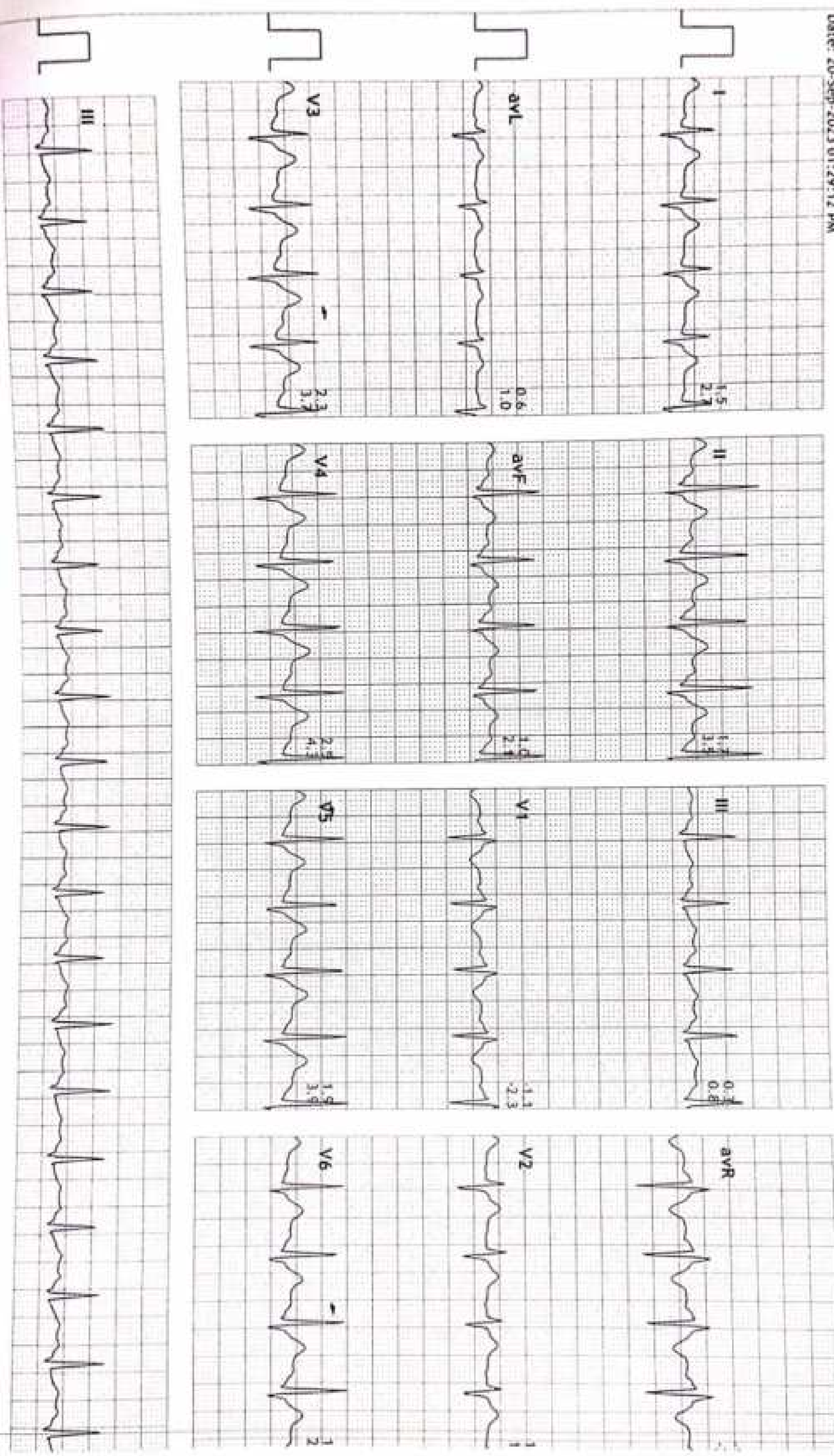
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 05:59
 BLC : On
 Notch : On

Recovery(3:00)
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

293 / RISHABH UPADHYAY

29 Yrs / Male

0 Kg / 0 Cm

Date: 20-Sep-2023 01:29:12 PM

3x4+1 Rhythm Lead

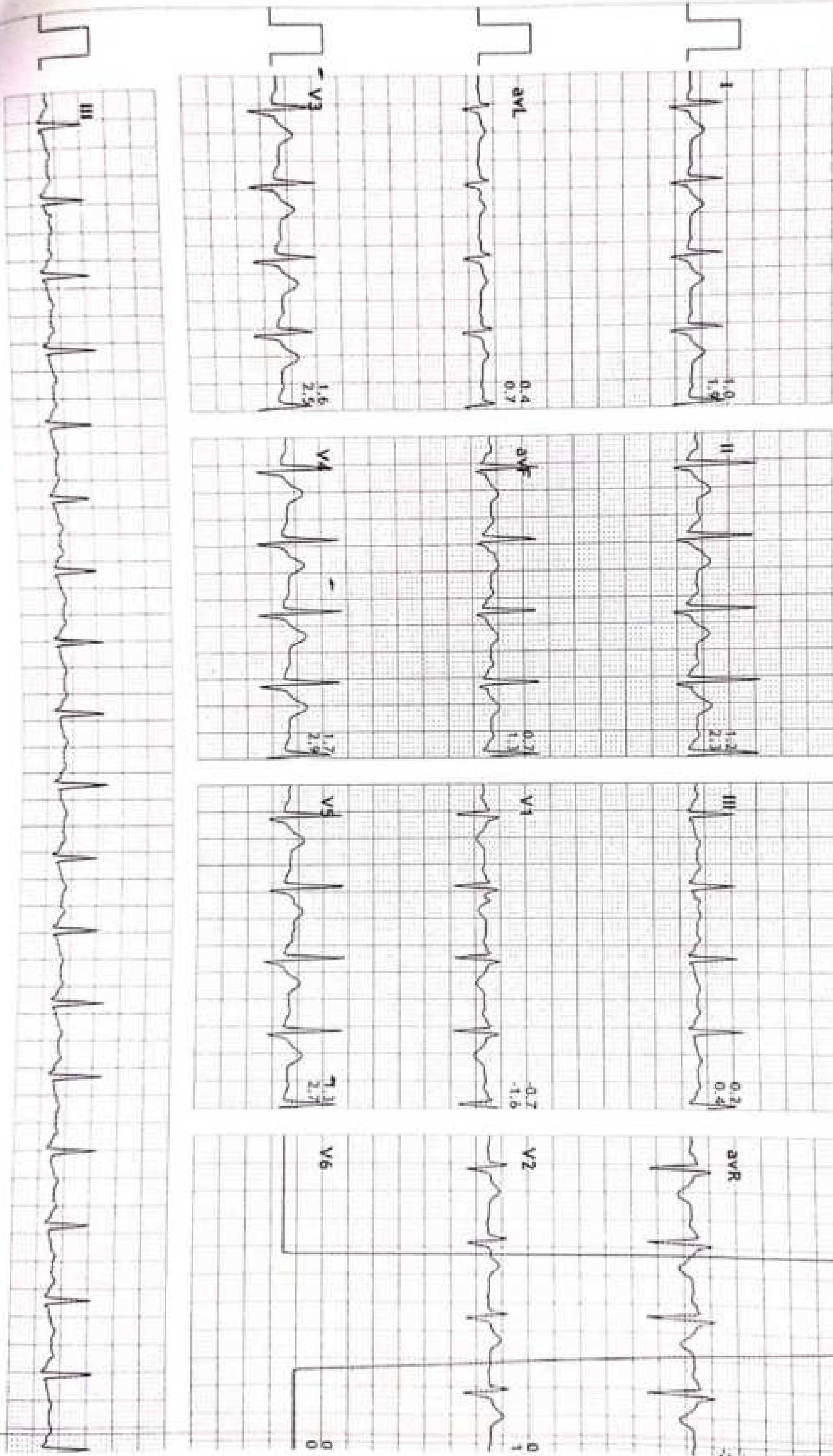
HR: 111 bpm
METs: 1.0
BP: 140/80

MPHR: 58% of 191
Speed: 0.0 kmph
Grade: 0.0%

Raw ECG
BRUCE
10.05-100Hz

Ex Time 05:59
BLC : On
Notch : On

Recovery(4:00)
10.0 mm/mV
25 mm/Sec.



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 293 / RISHABH UPADHYAY
 29 Yrs / Male
 0 Kg / 0 Cm
 Date: 20-Sep-2023 01:29:12 PM

HR: 108 bpm
 METS: 1.0
 BP: 130/80

MPHR: 56% of 191
 Speed: 0.0 kmph
 Grade: 0.0%

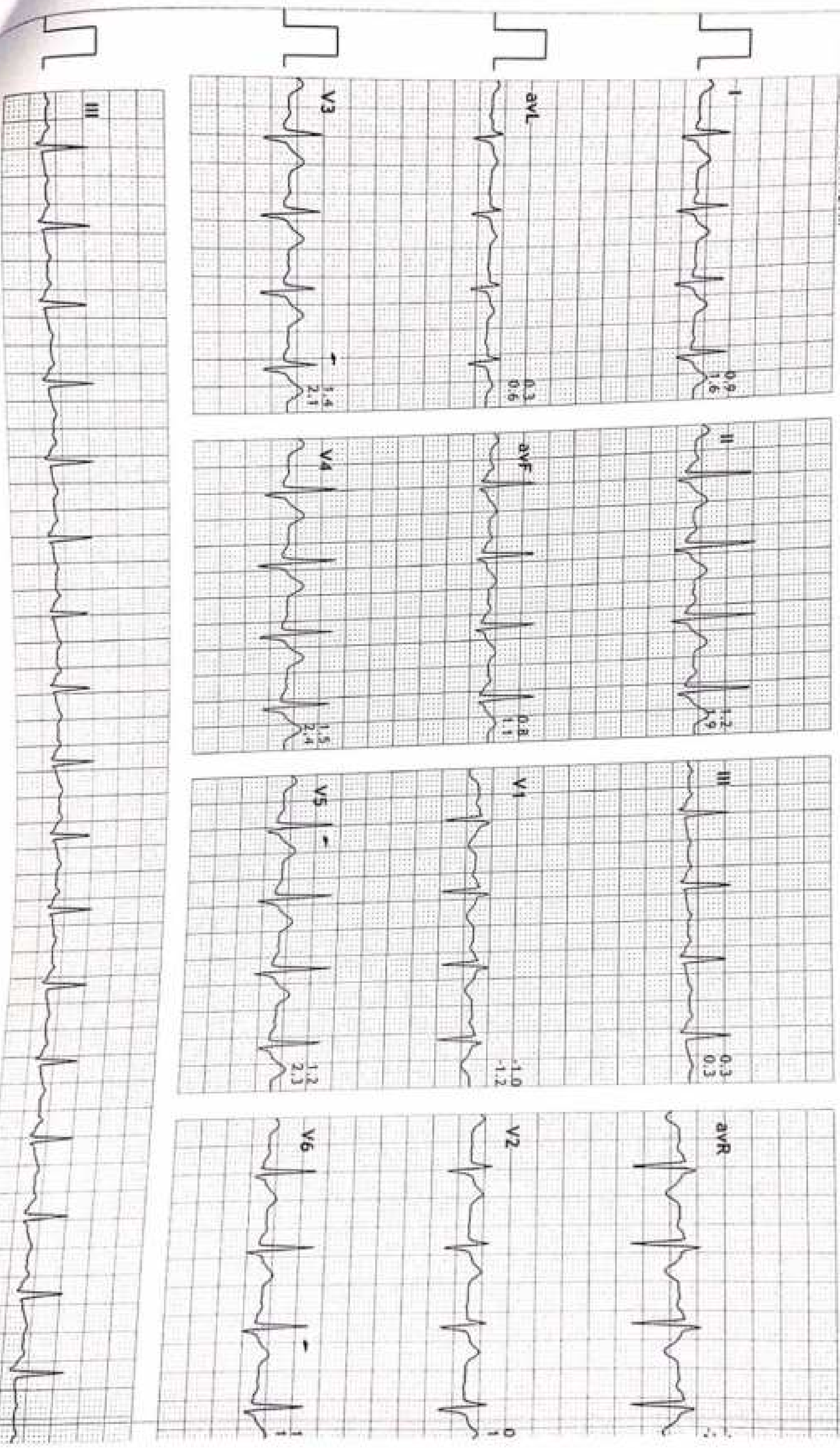
Raw ECG
 BRUCE
 10.05-100/Hz

Ex Time 05:59
 BLC : On
 Match : On

Recovery(5:00)
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead







 GPS Map
Camera Lite

Near Devayat Bodar Stechue, Vadintha Dulex pan Mavdi Chokdi, 150 Feet Ring Rd, Sri Nath Society, Uday Nagar, Rajkot, Gujarat 360004, India

Latitude
22.2647807°

Longitude
70.7848857°

Local 12:37:50 PM
GMT 07:07:50 AM

Altitude 143 meters
Wednesday, 20.09.2023



नाम

Name Rishabh Upadhyay

कर्मचारी कूट कं.

E.C. No. 126436

JAGJEET KUMAR
DY.REGIONAL MANAGER(AGM)
REGIONAL OFFICE, RAJKOT

जारीकर्ता प्राधिकारी

Issuing Authority

धारक के हस्ताक्षर

Signature of Holder



भारत सरकार

GOVERNMENT OF INDIA

ऋषभ उपाध्याय

Rishabh Upadhyay

जन्म तिथि/ DOB: 04/01/1994

पुरुष / MALE



2360 0840 0958

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

Address:

S/O: विनोद कुमार
उपाध्याय, भियापुर, राजेश्वरी
सर्विस स्टेशन, अरजी नेवादा,
जौनपुर,
उत्तर प्रदेश - 222002

S/O: Vinod Kumar Upadhyay,
MIYAPUR, RAJESHWARI SERVICE
STATION, Arazi Newada, Jaunpur,
Uttar Pradesh - 222002

2360 0840 0958



1947
1800 300 1947



help@uidai.gov.in

WWW

www.uidai.gov.in



P.O. Box No. 1947,
Bengaluru-560 001



TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 04:31 PM

COMPLETE BLOOD COUNT (CBC)
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval
RBC Parameters			
Hemoglobin (SLS method)	14.9	g/dL	13.0 - 18.0
Hematocrit (Electrical Impedance)	42.60	%	47 - 52
RBC Count (Electrical Impedance)	5.60	million/cmm	4.7 - 6.0
MCV (Calculated)	76.1	fL	78 - 110
MCH (Calculated)	26.6	Pg	27 - 31
MCHC (Calculated)	35.0	%	30 - 35
RDW (Calculated)	12.4	%	11.5 - 14.0
WBC Parameters			
WBC Count (Flowcytometry)	7900	/cmm	4000 - 10500
DIFFERENTIAL WBC COUNT			
Neutrophils (%)	60 %	% Range 42.0 - 75.2	Abs. Value 4740 /cmm Abs. Range 1800 - 7700
Lymphocytes (%)	24 %	20 - 45	1896 /cmm 1000 - 3900
Eosinophils (%)	10 %	1 - 4	790 /cmm 0 - 450
Monocytes (%)	06 %	2 - 8	474 /cmm 200 - 1000
Basophils (%)	00 %	0 - 1	0 /cmm 20 - 100
Platelete Parameter			
Platelet Count	261000	/cmm	150000 - 450000
MPV	11.8	fL	7.4 - 10.4
P-LCR	38.90	%	11.9 - 66.9
PDW	15.1	%	8.3 - 56.6
PCT (Platelet Haematocrit)	0.31	%	0.2 - 0.5

DRJ

This is an Electronically Authenticated Report.

Page 1 of 14

Dr. Viral Jethava
M.D. (Path. PDCC)

Dr. Viral R. Jethava
M.D. (Path. PDCC)



towards the healthiness...



TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 04:31 PM

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	"O"		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

D.R.J.

This is an Electronically Authenticated Report.

Dr. Viral Jethava
M.D. (Path. PDCC)

Dr. Viral R. Jethava
M.D. (Path. PDCC)



towards the healthiness...



TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 04:31 PM

Test	Result	Unit	Biological Ref. Interval
Erythrocyte sedimentation rate Sample, EDTA whole blood			
ESR (After 1 hour)	05	mm/hr	1 - 7

D.R.J.

This is an Electronically Authenticated Report.

Page 3 of 14

Dr. Viral Jethava
M.D. (Path. PDCC)

Dr. Viral R. Jethava
M.D. (Path. PDCC)



towards the healthiness...



TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 04:31 PM

FASTING PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <i>HEXOKINASE</i>	80.00	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic
Urine Glucose -F <i>Glucose Oxidase-Peroxidase</i>	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose \geq 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34: 511.

towards the healthiness...

D.R.J.

This is an Electronically Authenticated Report.

Page 4 of 14

Dr. Viral Jethava
M.D. (Path. PDCC)

Dr. Viral R. Jethava
M.D. (Path. PDCC)





TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 06:04 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 06:32 PM

POST PRANDIAL PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) <small>HEXOKINASE</small>	78.00	mg/dL	70 - 140
Urine Glucose- PP <small>Glucose Oxidase-Peroxidase</small>	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34: 511.

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TEST REPORT

Name : Rishabh Upadhyay	Reg. No : 309101079
Age/Sex : 29 Years / Male	Reg. Date : 20-Sep-2023 03:34 PM
Ref. By :	Collected On : 20-Sep-2023 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 20-Sep-2023 04:31 PM

LIPID PROFILE
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <small>Cholesterol Oxidase</small>	158.00	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <small>Enzymatic Reaction With Glycerol Kinase</small>	121.00	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <small>Siemens AHDL</small>	50.72	mg/dL	High Risk : < 40 Low Risk : >= 60
LDL Cholesterol <small>Siemens ALDL</small>	83.00	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol <small>Calculated</small>	24.20	mg/dL	15 - 35
LDL / HDL RATIO <small>Calculated</small>	1.64		0 - 3.5
Cholesterol /HDL Ratio <small>Calculated</small>	3.12		0 - 5.0

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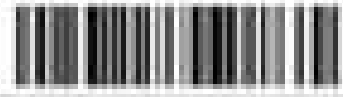
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RENAL FUNCTION TEST

Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Creatinine <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small>	0.88	mg/dL	0.7 - 1.3
eGFR	92.46	ml/min/1.73 sq m	Normal or High: >=90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15
Urea <small>Calculated</small>	25.00	mg/dL	17 - 43
Blood Urea Nitrogen (BUN) <small>UREASE/GLDH</small>	11.68	mg/dL	7.0 - 18.0
Uric Acid <small>Uricase</small>	4.10	mg/dL	3.5 - 7.2
Sodium <small>Direct ion selective electrode</small>	138.0	mmol/L	137 - 145
Potassium <small>Direct ion selective electrode</small>	4.1	mmol/L	3.5 - 5.1
Chloride <small>Direct ion selective electrode</small>	103.0	mmol/L	98 - 107
Calcium <small>Cresolphthalein Complexone</small>	8.90	mg/dL	8.5 - 10.1

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Parameter	Result	Unit	Biological Ref. Interval
GGT <small>Siemens/37C</small>	55.00	U/L	15 - 85

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HEMOGLOBIN A1 C (HBA1C)
Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HbA1C <small>Siemens Dimension</small>	4.90	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <small>Calculated</small>	93.93	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

Explanation :

- Total hemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HBA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HBA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences :

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
Thyroid Stimulating Hormone (TSH) <small>CLIA</small>	1.963	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A.Burtis,Edward R.Ashwood,David E.Bruno. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

Triiodothyronine (T3) <small>CLIA</small>	0.90	ng/mL	0.6 - 1.81
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Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.



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Thyroxine (T4) 4.89 µg/dL 4.5 - 12.6
CLIA

Clinical Significance :

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

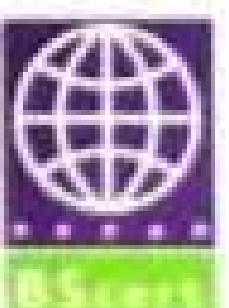
- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.



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STOOL EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Colour	Brown		
Consistency	Liquid		
CHEMICAL EXAMINATION			
Occult Blood <small>Peroxidase Reaction with o-Dianisidine</small>	Negative		
Reaction <small>pH Strip Method</small>	Alkaline		
Reducing Substance	Absent		
MICROSCOPIC EXAMINATION			
Mucus	Absent		
Pus Cells	1 - 5/hpf		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.

False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occassinal unruptured RBCs.

False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

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URINE ROUTINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
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PHYSICAL EXAMINATION

Quantity	10 cc		
Colour	Pale Yellow		
Clarity	Clear		

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	5.5		4.6 - 8.0
Sp. Gravity	1.010		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	1 - 3/hpf
Erythrocytes (Red Cells)	Absent
Epithelial Cells	Occasional
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

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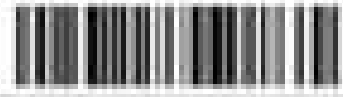
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LIVER FUNCTION TEST

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <i>BIURET</i>	7.10	g/dL	6.4 - 8.2
Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i>	4.20	g/dL	3.40 - 5.00
Globulin <i>Calculated</i>	2.90	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.45		0.8 - 3.1
SGOT (AST) <i>Siemens/37C</i>	25.00	U/L	15 - 37
SGPT (ALT) <i>Siemens/37C</i>	35.00	U/L	16 - 63
Alkaline Phosphatase <i>Siemens/37C</i>	96.00	U/L	46 - 116
Total Bilirubin <i>Diazo-Caffeine-Benzocaine Coupling (Jendrassik-Grof) w/bilirubin</i>	0.30	mg/dL	0.2 - 1
Conjugated Bilirubin <i>Diazo-Caffeine-Benzocaine Coupling (Jendrassik-Grof) w/bilirubin</i>	0.18	mg/dL	0 - 0.20
Unconjugated Bilirubin <i>Sulph acid diphcalf-benz</i>	0.12	mg/dL	0.0 - 1.1

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RISHABH UPADHYAY 29Y/M CHEST PA 20-Sep-23
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)