



Reg. No. NH/6333/DEC-2017

# GREEN CITY HOSPITAL

Near V-Mart, DIG Bungalow, Berasia Road, Bhopal

AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



Pt. Name *Mr. Maan Singh Gowar*

Age *31y* Sex *m* Date *26/8/23*

Bp - 90/60 mmHg

P - 69/m

SpO2 - 97+

Ht - 171 cm

Wt - 61 kg

Vision - R - 6/6

L - 6/6

ECG } WNL  
USG }

- No Haematological variations

Medically fit

*[Signature]*  
26/8/23  
DR. ASHISH JAIN  
M.B.B.S., M.D., D.C.D.  
Reg. No. MP-4465  
GREEN CITY HOSPITAL BHOPAL



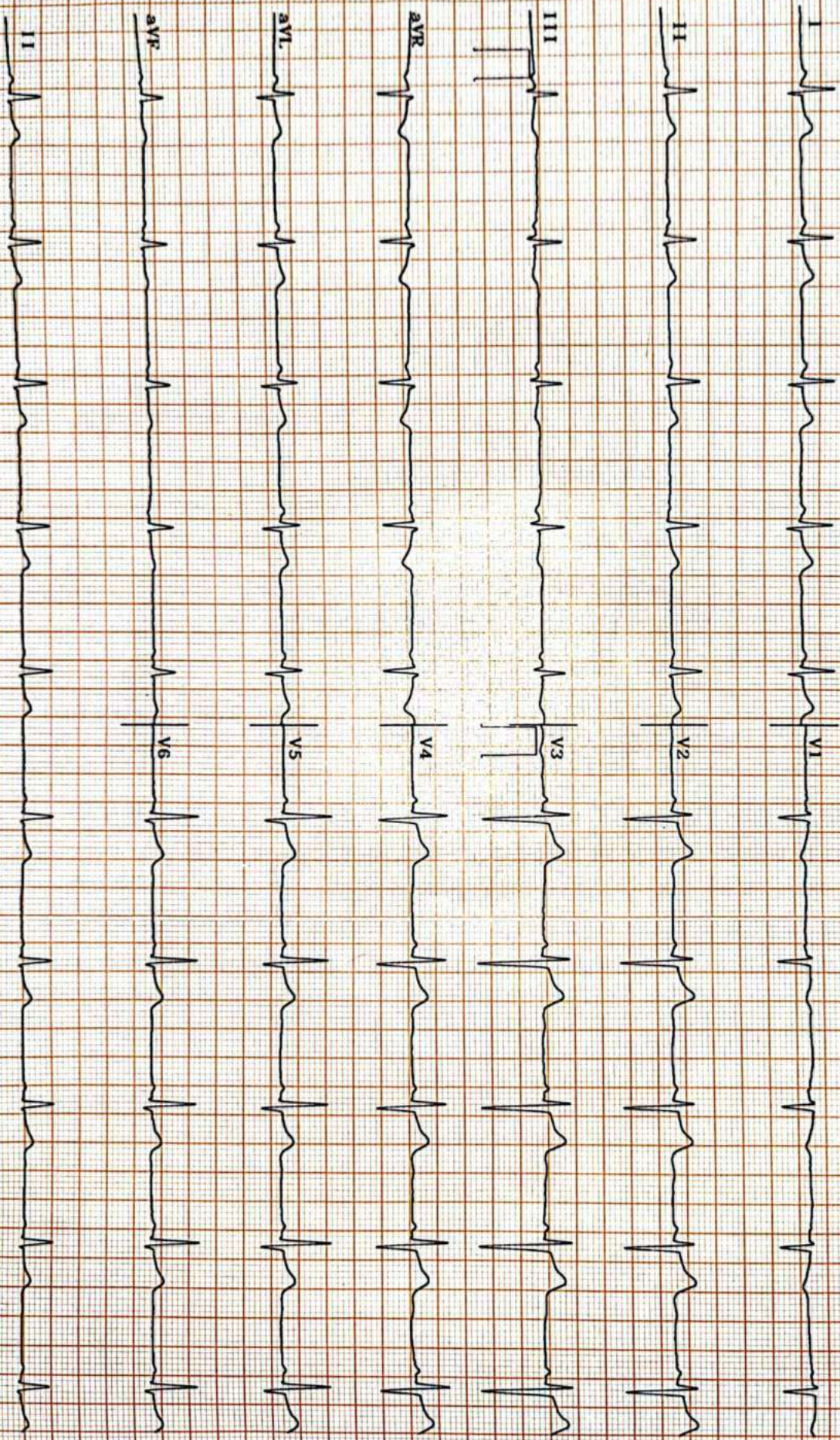
For Emergency / Ambulance Service Ph. : 0755-2733323



ID :  
Name: MAANSINGH  
Age : 31 years  
Sex : Female  
H : 0 cm / W : 0 kg

Heart Rate: 59 bpm  
PR/RR Int.: 112/1017 ms  
QRS Dur.: 102 ms  
QT/QTc: 404/401 ms  
P-R-T axes: -4 58 14  
SV1/RV5/R+S: 0.53/0.83/1.36mV

# Analysis Result # (To be finally confirmed by physician)  
Sinus Bradycardia (HR: 50-59)  
[ Minimally Abnormal or Normal Variation ECG ]





भारत सरकार  
Government of India

मां सिंह गौर  
Maan Singh Gour  
जन्म तिथि/DOB: 10/06/1992  
पुरुष/ MALE

Download Date: 04/01/2021

Issue Date: 12/12/2020

5152 8286 6515  
VID : 9117 9347 9465 2170

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

पता:  
S/O: शोभाराम गौर, 47, ग्राम मेंदोरा, मंडोरा, सीहोर,  
मध्य प्रदेश - 466665

Address:  
S/O: Shobharam Gour, 47, gram mendora,  
Mendora, Sehore,  
Madhya Pradesh - 466665

5152 8286 6515  
VID : 9117 9347 9465 2170

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

क्र. नं 7.566734687



Date: 26.08.2023

**PATIENT'S NAME: MR. MAAN SINGH**  
**REF. BY: SELFG**

**AGE: 31Y**  
**SEX: MALE**

**Ultrasonography : Whole Abdomen**

**Liver:** Is normal in size, shape and echotexture measures 14.2 cm in long axis in mid clavicular line. Margins are smooth and regular. Intra and extra hepatic biliary and vascular channels are normal. No evidence of any focal or diffuse mass lesion seen. Gaseous distension of bowel loops noted.

**Gall Bladder:** Reveals a clear anechoic non-lithiatic lumen. Its walls are of normal thickness. No pericholecystic pathology seen.

- CBD & PV are of normal calibre.

**Right Kidney:** Normal in size measures 10.2 x 4.1 cm, shape echotexture. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, scarring seen. Tiny renal concretion 3mm at interpole region.

**Left Kidney:** Normal in size measures 10.2 x 4.1 cm, shape echotexture. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, scarring seen. Tiny renal concretion 3mm at interpole region.

**Spleen:** Normal in size, shape & echotexture measures 9.0 cm in long axis.

**Pancreas:** Is normal in size, shape and echotexture. Pancreatic duct is not dilated.

**Urinary Bladder:** Is central smooth in contour & reveal a clear lumen. Its walls are of normal thickness.

**Prostate:** Is normal in size, shape & echotexture measures 13 cc in volume and 14 grams in weight.

- No evidence of retroperitoneal lymphadenopathy / ascites seen.

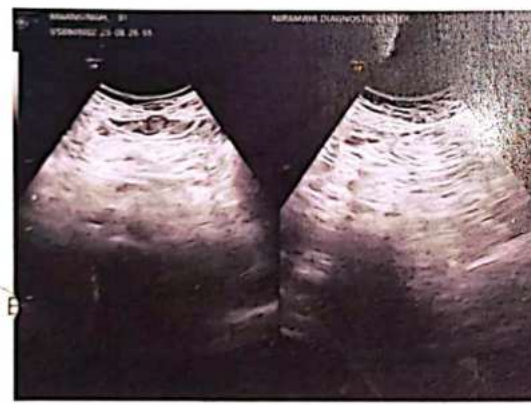
**Impression: USG Study Reveals:**

- Gaseous distension of bowel loops noted.
- Bilateral tiny renal concretions.

**Dr. Ritesh Kumawat**  
MBBS, DMRD, DNB (Radio Diagnosis)  
Consultant Radiologist  
Reg. No: MP - 12614









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## PATHOLOGY REPORT

Patient Name : Mr. Man Singh Gour Corp  
 Age : 31 Years Gender : Male  
 Mobile No. : 0 Lab ID: CORP/1  
 Referring Dr. : Dr.Green City Hospital  
 Collected From :

Perm.Pat. ID : 3351  
 Sample Date : 26-Aug-2023 9:53 am  
 Authorise Date : 26-Aug-2023 10:36 am  
 Printed Date : 26/08/2023 10:42 am  
 Collected By :

### HAEMATOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
<u>Complete Blood Count</u>				
HAEMOGLOBIN	14.7	gm/dl	13-17	
RBC Count	5.24	mil/cumm	4.5-5.5	
Total WBC Count	7400	/cumm	4000-11000	
PCV	40.3	%	40-50	
Differential Count				
Neutrophils	60	%	40-80	
Lymphocytes	35	%	20-40	
Monocytes	03	%	2-8	
Eosinophil	02	%	1-6	
Basophils	0.00	%	0-1	
RBC Indices				
MCV	76.91 (L)	fl	83-101	
MCH	28.05	picograms	27-32	
MCHC	36.48 (H)	g/dl	31.5-34.5	
Platelet Indices				
PLATELET COUNT	2.65	Lacs/cumm	1.5-4.5	
ESR	08	mm/Fhr	0-20	
Blood Group	" AB " POSITIVE			

Interpretation &gt;

Note: - (L) - Low, (H) - High

End Of Report

Checked By :



Authorised By :

Dr. Pritha Dutta  
MD (Biochemistry)

Page 1 of 1

  
Technologist

Please Correlate clinically as well as with other investigative findings. This report is not valid for medico legal purpose.

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## PATHOLOGY REPORT

<b>Patient Name</b> : Mr. Man Singh Gour Corp	 <b>Perm.Pat. ID</b> : 3351
<b>Age</b> : 31 Years <b>Gender</b> : Male	<b>Sample Date</b> : 26-Aug-2023 9:53 am
<b>Mobile No.</b> : 0 <b>Lab ID</b> : CORP/1	<b>Authorise Date</b> : 26-Aug-2023 10:39 am
<b>Referring Dr.</b> : Dr.Green City Hospital	<b>Printed Date</b> : 26/08/2023 10:39 am
<b>Collected From</b> :	<b>Collected By</b> :

### BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Blood Sugar - Fasting	110.0	mg/dl	70-110	Rare Care
SERUM UREA	23.5	mg/dl	15-40	
Blood Sugar - PP	135.2	mg/dl	70-140	post blood
Serum Creatinine	1.3	mg/dl	0.6-1.4	Enzymatic

Interpretation >

Serum Uric Acid

5.2

mg/dL

3.4-7.0

Interpretation >

A uric acid blood test, also known as a serum uric acid measurement, determines how much uric acid is present in your blood. The test can help determine how well your body produces and removes uric acid. Uric acid is a chemical produced when your body breaks down foods that contain organic compounds called purines. Foods and beverages with a high purine content include:  
liver, anchovies, mackerel, dried beans, beer, wine  
Purines are also created through the natural process of cell breakdown in the body. Most uric acid is dissolved in the blood, filtered through the kidneys, and expelled in the urine. Sometimes the body produces too much uric acid or doesn't filter out enough of it. Hyperuricemia is the name of the disorder that occurs when you have too much uric acid in your body.

Note: - (L) - Low, (H) - High

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Dr. Pritha Dutta  
MD (Biochemistry)

  
Technologist

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Perm.Pat. ID : 3351

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Collected By :

### BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
<b>LIPID PROFILE</b>				
Serum Appearance	Clear		##	
S. Cholesterol	245.5 (H)	mg/dL	125-200	CHOD-PAP
S. Triglycerides	392.7 (H)	mg/dL	50-165	GPO-TOPS
HDL Cholesterol	42.1	mg/dL	35-79.5	Selective Inhibition
LDL Cholesterol	124.86	mg/dl	85-130	Calculated
VLDL Cholesterol	78.54 (H)	mg/dl	10-50	Calculated
S.Cholesterol/HDLC Ratio	5.83		3.0-6.0	Calculated
LDLC/HDLC RATIO	2.97		2.5-3.5	Calculated

**Interpretation :-**

Note : - Blood normally contains more than one type of fat. The typical lipid panel measures two main types of blood fat, cholesterol and triglycerides. Their functions and the effect of high levels on your health can be quite different. While both contribute to premature cardiovascular disease, high levels of triglycerides have also been found to increase your chance of having a heart attack or stroke even when the LDL-Cholesterol is not elevated (see below). Triglycerides can also cause an acute medical condition called pancreatitis when triglycerides are extremely high.

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### BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
<u>Liver Function Test</u>				
Bilirubin - Total	0.38	mg/dl	0.1-1.2	Jendrassik & Grof
Bilirubin - Direct	0.11	mg/dl	0.0-0.4	Jendrassik & Grof
Bilirubin - Indirect	0.27	mg/dl	0.1-1.0	Calculated
SGOT	28.1	IU/L	05-40	Kinetic UV
SGPT	35.1	IU/L	05-40	Kinetic UV
Alkaline Phosphatase	212.9	IU/L	60-306	Enzymatic - Kinetic
Total Protein	7.0	gm/dl	6.0-8.0	Biuret Endpoint
Albumin	4.1	gm/dl	3.2-5.5	Bromocresol Green
Globulin	2.90	gm/dl	2.3-3.5	Calculated
Albumin Globulin Ratio	1.41		-	Calculated

Interpretation :-

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### CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
-------------	--------	------	-----------------------	--------

#### URINE ROUTINE MICROSCOPY

##### PHYSICAL EXAMINATION

Volume	20 ml	-	
Colour	Pale Yellow		
Appearance	Clear		
Specific gravity	1.015		1.005-1.035

##### CHEMICAL EXAMINATION

Reaction (pH)	Acidic		4.5-8.0
Albumin	Negative		Negative
Sugar	Negative		Negative

##### MICROSCOPIC EXAMINATION

PUS(WBC) Cells	4-5	/hpf	0-2
RBC	Nil	/hpf	0-2
Epithelial Cells	2-3	/hpf	0-2
Casts	Nil		Nil
Crystals	Nil		Nil
Bacteria	Nil		-
Protozoa	Absent		

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<b>Collected From</b> :	<b>Collected By</b> :

### CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Urine Sugar (PP)	Nil			

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### CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
<u>STOOL EXAMINATION</u>				
<b>Physical Examination</b>				
Colour	LIGHT BROWN			
Consistency	Soft			
Mucus	Trace			
Blood	nil			
<b>Chemical Examination</b>				
Reaction	Acidic			
Occult blood	Absent			
Fat Globules	Absent			
<b>Microscopic Examination</b>				
RBC	Absent	/hpf	-	
Pus cells	2-3	/hpf	-	
Epithelial cells	1-2			
Veg. cells / Fibres	Few+	/hpf	-	
	LIGHT BROWN			
<b>IMPRESSION</b>	No Abnormality detected			

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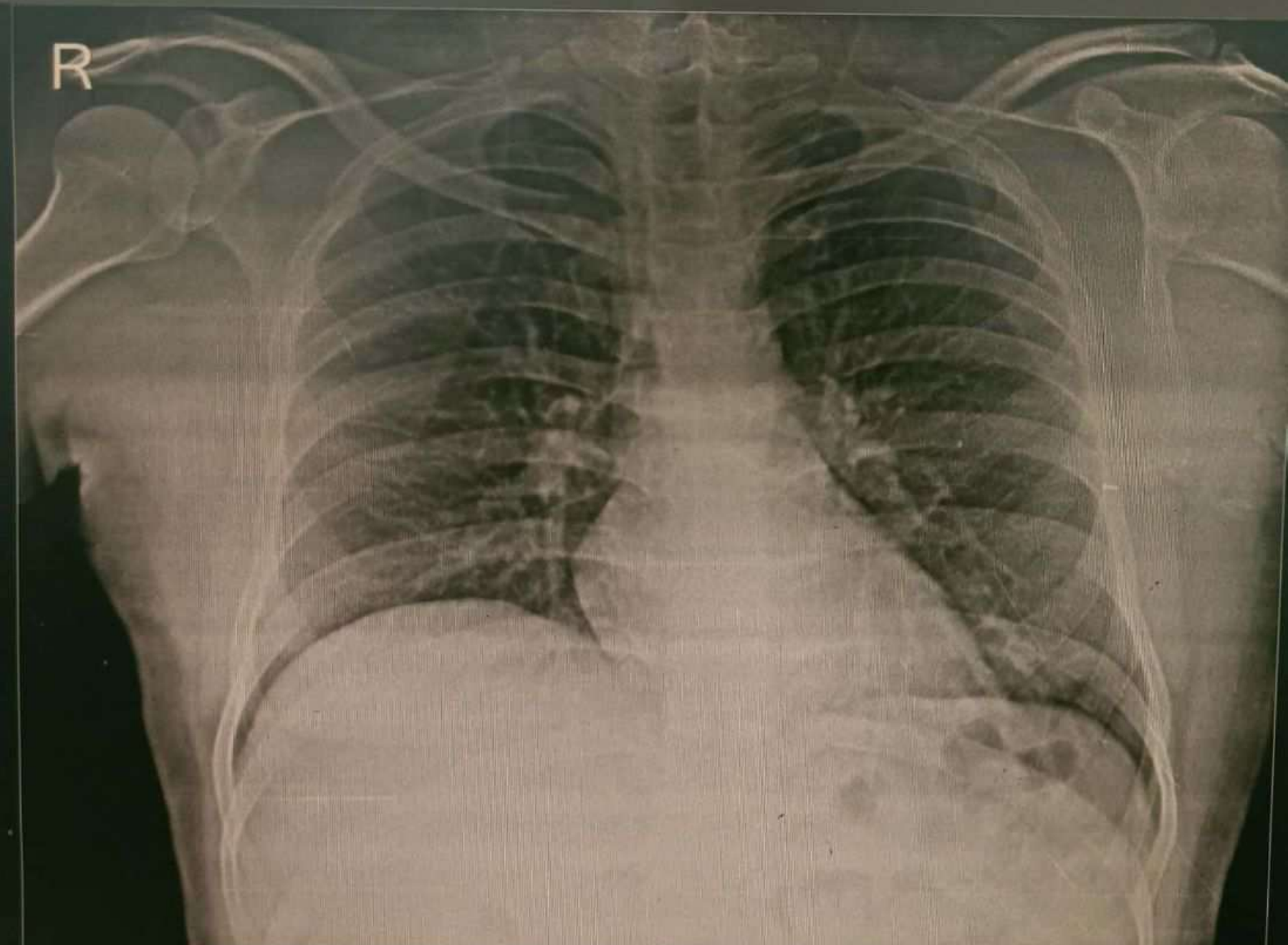
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MR.MAAN SINGH 31 YRS .... 35803 CHEST PA 26-Aug-23  
GREEN CITY HOSPITAL, D.I.G. BUNGLOW, BHOPAL





Reg. No. NH/6333/DEC-2017

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Ph.: 0755-2733323

AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



<b>NAME OF PATIENT: MAAN SINGH GOUR</b>	<b>Age/Sex: 31Y/M</b>	<b>Procedure Date : 26-08-2022</b>
<b>Ref. By: Green City Hospital</b>		<b>Reporting Date : 26-08-2022</b>

## X-RAY CHEST

- Bilateral lung parenchyma is clear.
- Bilateral hilar shadow is normal.
- Trachea midline is normal.
- Bilateral CP angle are clear.
- Cardio thoracic ratio is normal.

**Impression: No remarkable abnormality seen in present study.**

**DR. NITIN KHANTAL**  
**CONSULTANT RADIOLOGIST**



SCIENCE OF RADIOLOGICAL DAIGNOSIS IS BASED ON INTERPRETATION OF VARIOUS SHADOW PRODUCED BY BOTH NORMAL AND ABNORMAL TISSUES, DISSIMILAR DIVERSE DISEASES PRODUCE SIMILAR SHADOWS, HENCE THIS REPORT REPRESENT VARIOUS POSSIBILITIES AND NOT MEANT FOR MEDICO-LEGAL PURPOSES



Aug 26, 2023, 09:17