Mediwheel
Your wellness partner

011-41195959

Dear MR. NATH RAJ SHEKHAR,

We are pleased to confirm your health checkup booking request with the following details:

Hospital Package Name	: Mediwheel Full Body Health Checkup Male Below 40
Name of Diagnostic/Hospital	: Aashka Multispeciality Hospital
Address of Diagnostic/Hospital-	: Between Sargasan & Reliance Cross Road, Gandhinagar -0382421
City	: Gandhi Nagar
State	: Gujarat
Pincode	: 382421
Appointment Date	: 09-11-2024
Confirmation Status	: Booking Confirmed
Preferred Time	: 08:30 AM - 09:00 AM
Booking Status	: Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MR. NATH RAJ SHEKHAR	37 year	Male

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre)
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel

बैंक ऑफ़ बड़ौदा
Bank of Baroda

नाम : राज शेखर नाथ
Name : Raj Shekhar Nath

कर्मचारी कूट क्र.
E.C. No. 100593

Raj Shekhar Nath

जारीकर्ता प्राधिकारी
Issuing Authority: CM (Coord), EZ

धारक के हस्ताक्षर
Signature of Holder

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL RATINA)
REG.NO.G-21350

UHID:

Date: 07/11/24 Time: 6:00

Patient Name: Ras Shekhar Nath

Age /Sex: 34

Height:

Weight:

History:

c/o Redness one eye.

Allergy History:

Nutritional Screening: Well-Nourished / Malnourished / Obese

Examination:

VA < 6/6
6/6
N/6

Colour Vision - Normal

Diagnosis:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

Other Advice:

Follow-up:

Consultant's Sign:

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Doctor Name:- DR PRIYANK CHAUDHARY

UHID: OSP35384 Date: 9-11-2024 Time: 5:30PM

Patient Name: RAJ SHEKHAR NATH

Age/Sex: 37Y/M

Height:

Weight:

Chief Complain:

Fox Routein Health check up

ECG : WNL (N) sinus rhythm

History:

— NAD —

Allergy History: Not know

Nutritional Screening: Well-Nourished /Malnourished/Obese

Examination:

BLAE : (+)

P/A : soft, Non-tender

CVS : $S_1 S_2$ (N)

CNS : concious, oxiented

Diagnosis:

Fox Routein Health check up

Investigation

2D Echo ÷ LVEF : 65%

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Advice:

NAD

Follow-up:

Consultant's Sign:

09.11.2024 10:09:22
MATHIKA HOSPITAL LTD
GANDHINAGAR

Location:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

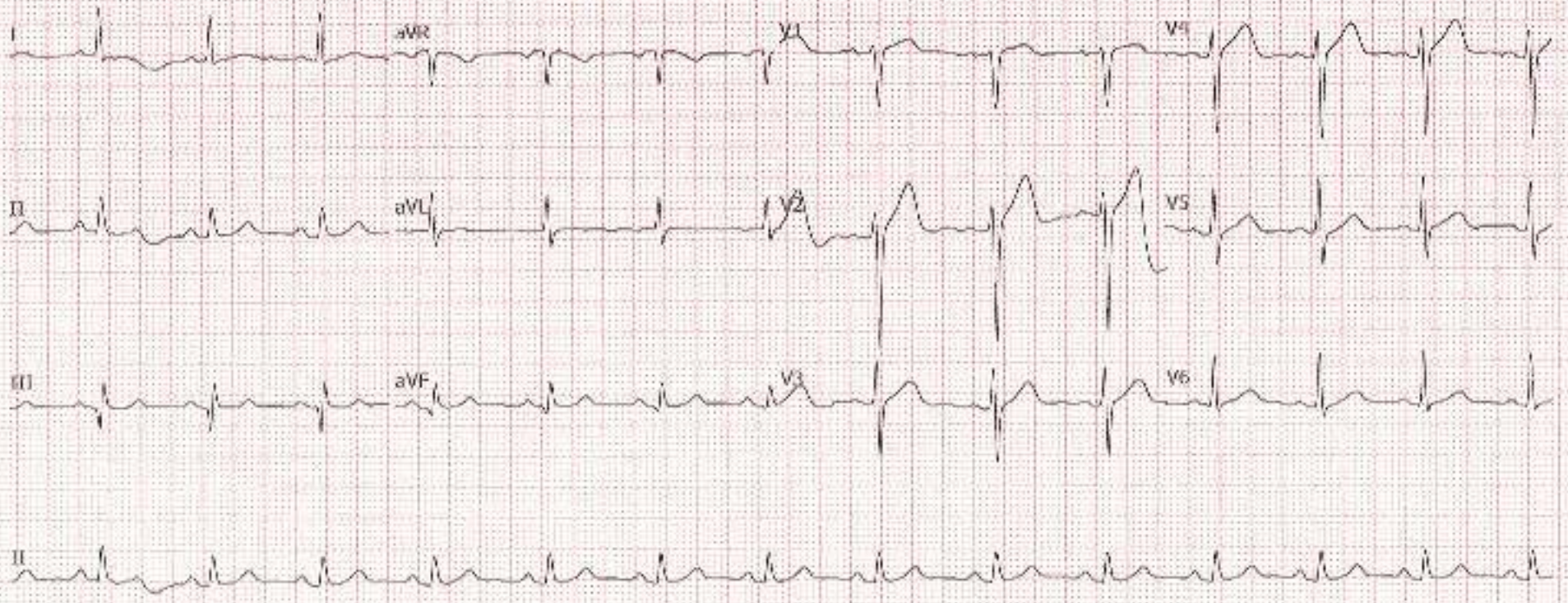
Room:

84 bpm
-- / -- mmHg

Technician:
Referring Dr:
Referring Dr:
Attending Dr:

QRS :	88 ms	Normal sinus rhythm
QT / QTcBaz :	368 / 434 ms	Normal ECG
PR :	140 ms	
P :	92 ms	
RR / PP :	714 / 714 ms	
P / QRS / T :	71 / 25 / 56 degrees	

Raj shekhar Nath



Unconfirmed

GE MAC 5500 HR PSL** v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4x2.5x3_2S_R1 1/1

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aashka HOSPITAL

PATIENT NAME:RAJ SHEKHAR NATH
GENDER/AGE:Male / 37 Years
DOCTOR:
OPDNO:OSP35384

DATE:09/11/24

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows increased parenchymal echoes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of perichofecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.0 x 4.1 cms in size.
Left kidney measures about 10.2 x 4.2 cms in size.

No evidence of suprarenal mass lesion is seen on either side.
Aorta, IVC and para aortic region appears normal.
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 96 cc.

PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen. Prostate volume measures about 14 cc.

COMMENT: Grade I fatty changes in liver.
Normal sonographic appearance of GB; Pancreas, spleen, kidneys, bladder and prostate.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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aashka HOSPITAL

PATIENT NAME:RAJ SHEKHAR NATH
GENDER/AGE:Male / 37 Years
DOCTOR:
OPDNO:OSP35384

DATE:09/11/24

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
No evidence of cervical rib is seen on either side.

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aashka HOSPITAL

PATIENT NAME:RAJ SHEKHAR NATH
GENDER/AGE:Male / 37 Years
DATE:09/11/24
DOCTOR:DR.HASIT JOSHI
OPDNO:OSP35384

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 34mm	
LEFT ATRIUM	: 37mm	
LV Dd / Ds	: 43/27mm	EF 65%
IVS / LVPW / D	: 11.7/11mm	BORDERLINE LVH
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.9/0.6m/s	
AORTIC	: 1.2m/s	
PULMONARY	: 1.0m/s	
COLOUR DOPPLER	: NO MR/AR; MILD TR	
RVSP	: 28mmHg	
CONCLUSION	: BORDERLINE LVH; NORMAL LV FUNCTION.	

CARDIOLOGIST
DR.HASIT JOSHI (9825012235)

Neuberg Supratech
REFERENCE LABORATORIES
(A unit of Neuberg Diagnostics Private Limited)

LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age	: Male / 37 Years	Case ID	: 41102200124
Ref.By	:	Dis. At	:	Pt. ID	: 5019876
Bill. Loc.	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	:	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	:	Acc. Remarks	: Normal	Ref Id2	: 024256560

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Glyco Hemoglobin (HbA1c)			
HbA1C	**5.90**	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Haemogram (CBC)			
RBC (Electrical Impedance)	**5.71**	millions/cumm	4.50 - 5.50
MCV (RBC histogram)	**76.8**	fL	83.00 - 101.00
MCH (Calc)	**25.0**	pg	27.00 - 32.00
Platelet Count	**53000**	/µL	150000.00 - 410000.00
Lipid Profile			
HDL Cholesterol	**37.1**	mg/dL	40 - 60
Chol/HDL	**5.25**		0 - 4.1
LDL Cholesterol	**135.10**	mg/dL	0.00 - 100.00
Liver Function Test			
S.G.P.T.	**76.50**	U/L	0 - 55
S.G.O.T.	**41.76**	U/L	5.0 - 34.0
Alkaline Phosphatase	**165.11**	U/L	40.00 - 150.00
Proteins (Total)	**8.48**	gm/dL	6.40 - 8.30
Albumin	**5.32**	gm/dL	3.5 - 5.2
Plasma Glucose - F	**107.33**	mg/dL	70.0 - 100
Plasma Glucose - PP	**184.19**	mg/dL	70.0 - 140.0

Abnormal Result(s) Summary End

Note:LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5019876
Bill. Loc.	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 06:57	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35394
Report Date and Time	: 09-Nov-2024 10:04	Acc. Remarks	: Normal	Ref Id2	: 024256560

HAEMOGRAM REPORT

TEST		RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
HB AND INDICES					
Haemoglobin		14.3	G%	13.00 - 17.00	
RBC (Electrical Impedance)	H	5.71	millions/cumm	4.50 - 5.50	
PCV(Calc)		43.85	%	40.00 - 50.00	
MCV (RBC histogram)	L	76.8	fL	83.00 - 101.00	
MCH (Calc)	L	25.0	pg	27.00 - 32.00	
MCHC (Calc)		32.6	gm/dL	31.50 - 34.50	
RDW (RBC histogram)		13.3	%	11.00 - 16.00	
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)					
Total WBC Count		7210	/µL	4000.00 - 10000.00	

	[%]		EXPECTED VALUES	[Abs]		EXPECTED VALUES
Neutrophil	55.0	%	40.00 - 70.00	3965	/µL	2000.00 - 7000.00
Lymphocyte	34.0	%	20.00 - 40.00	2451	/µL	1000.00 - 3000.00
Eosinophil	4.0	%	1.00 - 6.00	288	/µL	20.00 - 500.00
Monocytes	7.0	%	2.00 - 10.00	505	/µL	200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/µL	0.00 - 100.00

PLATELET COUNT (Optical)				
Platelet Count	L	63000	/µL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)		1.62		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Microcytic hypochromic RBCS.
WBC Morphology	Total WBC count within normal limits.
Platelet	Thrombocytopenia
Parasite	Malarial Parasite not seen on smear.

Note:(L-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathology)

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LABORATORY REPORT

Name : RAJ SHEKHAR NATH		Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By :		Dis. At :	Pt. ID : 5019876
Bill. Loc. : Aashka hospital			Pt. Loc :
Reg Date and Time : 09 Nov-2024 08:57	Sample Type : Whole Blood EDTA		Mobile No :
Sample Date and Time : 09-Nov-2024 08:57	Sample Coll. By :		Ref Id1 : OSP35384
Report Date and Time : 09-Nov-2024 10:36	Acc. Remarks : Normal		Ref Id2 : O24258560

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR *Westergren Method*	12	mm after 1hr	3 - 15	

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5019876
Bill. Loc	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	: 09-Nov-2024 09:48	Acc. Remarks	: Normal	Ref Id2	: 024256560

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
HAEMATOLOGY INVESTIGATIONS				
BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)				
ABO Type	O			
Rh Type	POSITIVE			

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5019576
Bill. Loc.	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Plasma Fluoride F,Plasma Fluoride PP,Serum	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	: 09-Nov-2024 10:36	Acc. Remarks	: Normal	Ref Id2	: 024256560

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F Photometric,Hexokinase	H	107.33	mg/dL	70.0 - 100	
Plasma Glucose - PP Photometric,Hexokinase	H	184.19	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitrogen) GLDH		9.4	mg/dL	8.90 - 20.60	
Uric Acid Uricase		5.20	mg/dL	3.5 - 7.2	
Creatinine		0.76	mg/dL	0.50 - 1.50	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5019878
Bill. Loc.	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	: 09-Nov-2024 15:30	Acc. Remarks	: Normal	Ref Id2	: 024256560

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation					
HbA1C HPLC	H	5.90	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated		122.63	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Niyur Nagori
M. D. (Path)

Dr. Aakash Shah
MD. Path.
Consultant Pathologist

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age	: Male / 37 Years	Case ID	: 41102200124
Ref.By	:	Dis. At	:	Pt. ID	: 5019876
Bill. Loc.	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Serum	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35364
Report Date and Time	: 09-Nov-2024 10:35	Acc. Remarks	: Normal	Ref Id2	: 024256560

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Cholesterol CHOD-POD		194.93	mg/dL	110 - 200	
HDL Cholesterol Accelerator Selective Detergent	L	37.1	mg/dL	40 - 60	
Triglyceride Glycerol Phosphate Oxidase		113.66	mg/dL	<150	
VLDL Calculated		22.73	mg/dL	10 - 40	
Chol/HDL Calculated	H	5.25		0 - 4.1	
LDL Cholesterol Calculated	H	135.10	mg/dL	0.00 - 100.00	

NEW ATP III GUIDELINES (MAY 2001). MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
  Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5016876
Bill. Loc.	: Aashka hospital		Pt. Loc :
Reg Date and Time	: 09-Nov-2024 08:57	Sample Type : Serum	Mobile No :
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By :	Ref Id1 : OSP35384
Report Date and Time	: 09-Nov-2024 10:35	Acc. Remarks : Normal	Ref Id2 : 024256560

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
S.G.P.T. NADH (Without P-5-P)	H	76.50	U/L	0 - 55	
S.G.O.T. NADH (Without P-5-P)	H	41.76	U/L	5.0 - 34.0	
Alkaline Phosphatase Para-Nitrophenyl Phosphate	H	165.11	U/L	40.00 - 150.00	
Gamma Glutamyl Transferase L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate		40.70	U/L	0 - 55	
Proteins (Total) Colorimetric, Biuret	H	8.48	gm/dL	6.40 - 8.30	
Albumin Colorimetric-Bromo-Cresol Green	H	5.32	gm/dL	3.5 - 5.2	
Globulin Calculated		3.16	gm/dL	2 - 4.1	
A/G Ratio Calculated		1.68		1.0 - 2.1	
Bilirubin Total Photometry		0.97	mg/dL	0.3 - 1.2	
Bilirubin Conjugated Diazotization reaction		0.30	mg/dL	0 - 0.50	
Bilirubin Unconjugated Calculated		0.67	mg/dL	0 - 0.8	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref.By	:	Dis. At :	Pt. ID : 5019876
Bill. Loc	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Serum	MedTo No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	: 09-Nov-2024 10:35	Acc. Remarks	: Normal	Ref Id2	: O24258560

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3) CMIA	122.97	ng/dL	70 - 204	
Thyroxine (T4) CMIA	7.19	ng/dL	4.87 - 11.72	
TSH CMIA	3.91	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipent hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a supressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

Note:(LL-VeryLow L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref By	:	Dis. At :	Pt. ID : 5019876
Bill. Loc.	: Aashka hospital		Pt. Loc :
Reg Date and Time	: 09-Nov-2024 08:57	Sample Type : Serum	Mobile No :
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By :	Ref Id1 : OSP35384
Report Date and Time	: 09-Nov-2024 10:35	Acc. Remarks : Normal	Ref Id2 : 024256560

Interpretation Note:
Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone.Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test). When the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.
Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.
Normal ranges of TSH & thyroid hormone vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.7
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Note:(LL-VeryLow L-Low H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

Name	: RAJ SHEKHAR NATH	Sex/Age : Male / 37 Years	Case ID : 41102200124
Ref By	:	Dis. At :	Pt. ID : 5019870
Bill. Loc.	: Aashka hospital		Pt. Loc :

Reg Date and Time	: 09-Nov-2024 08:57	Sample Type	: Spot Urine	Mobile No	:
Sample Date and Time	: 09-Nov-2024 08:57	Sample Coll. By	:	Ref Id1	: OSP35384
Report Date and Time	: 09-Nov-2024 10:36	Acc. Remarks	: Normal	Ref Id2	: O24256660

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
URINE EXAMINATION				
Physical Examination				
Colour	Pale yellow			
Transparency	Clear			
Chemical Examination				
Sp.Gravity	1.015		1.005 - 1.030	
pH	8.5		5 - 8	
Leucocytes (ESTERASE)	Negative		Negative	
Protein	Negative		Negative	
Glucose	Negative		Negative	
Ketone Bodies Urine	Negative		Negative	
Urobilinogen	Negative		Negative	
Bilirubin	Negative		Negative	
Blood	Negative		Negative	
Nitrite	Negative		Negative	
Microscopic Examination				
Leucocyte	Nil	/HPF	Nil	
Red Blood Cell	Nil	/HPF	Nil	
Epithelial Cell	Present +	/HPF	Present(+)	
Bacteria	Nil	/µL	Nil	
Yeast	Nil	/µL	Nil	
Cast	Nil	/HPF	Nil	
Crystals	Nil	/HPF	Nil	

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

Name : RAJ SHEKHAR NATH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Male / 37 Years
Dis. At :

Case ID : 41102200124
Pt. ID : 5019876
Pt. Loc :

Reg Date and Time : 09-Nov-2024 08:57
Sample Date and Time : 09-Nov-2024 08:57
Report Date and Time : 09-Nov-2024 10:36

Sample Type : Spot Urine
Sample Coll. By :
Acc. Remarks : Normal

Mobile No :
Ref Id1 : OSP35384
Ref Id2 : 024256580

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(L-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

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