

Free Home Sample Collection  +91 7835 999 444 , 7835 999 555

Patient Name : Mr. SINGH MAHENDRA PRATAP [UHIDNO:FHP28653126082023]



Age / Gender : 34 Yr / Male

UHIDNO:FHP286531260820

Address : SECT-117 NOIDA, Gautam Buddha Nagar, UTTAR PRADESH

Requesting Doctor: Dr. ANSHUMALA SINHA

Reg. ID : OPD.23-24-57729

BIOCHEMISTRY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 12:18 PM

Collection Date : 26-08-2023 09:39 AM[B134648]

Reporting Status : Finalized

Acceptance Date : 26-08-2023 09:39 AM | **TAT:** 02:39
[HH:MM]

Investigations	Method	Result	Biological Reference
LIPID PROFILE *[Plain tube (red top)]			
TOTAL CHOLESTEROL Enzymatic (CHE/CHO/POD)*		257.2 mg/dL	Normal <200, Borderline High 200 - 240, High >240
TRIGLYCERIDES Enzymatic (Lipase/GK/GPO/POD)*		145.8 mg/dL	Normal : <200, Borderline High: 200 - 400 High: >400 Very High : >650
HDL -CHOLESTEROL PTA/ MgCl ₂ -enzymatic*		51.8 mg/dL	Low <40, high ≥ 60
LDL(Low density lipid) Calculated		176.24 mg/dL	Desirable ≤130, Borderline High Risk 130-160, High Risk >160
VLDL(Very low density lipid) Calculated		29.16 mg/dL	16.00 - 45.00 mg/dL
CHOL/HDL Ratio Calculated		4.97	3.00 - 6.00
<i>Performed On: DIASYS SYS400 PRO</i>			
<i>Please correlate clinically</i>			

END OF REPORT.



Prepared By
SURAJ KUMAR

VAIBHAV TIWARI
MBBS, MD
(PATHOLOGY)

ON PANEL OF : CGHS, ECHS, ESI, DGHS, PSUs, GIPSA, All MAJOR TPA, Health Insurance Companies, Noida & Gr. Noida Authority
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Reg. ID : OPD.23-24-57729

HAEMATOLOGY

Request Date : 26-08-2023 09:36 AM
Collection Date : 26-08-2023 09:39 AM[HA27189]
Acceptance Date : 26-08-2023 09:39 AM | **TAT:** 01:21 [HH:MM]

Reporting Date : 26-08-2023 11:00 AM
Reporting Status : Finalized

Investigations	Method	Result	Biological Reference
HAEMOGRAM (CBC & ESR)			
HEMOGLOBIN(NON CYNAMETH/PHOTOMETRY)*		14.90 gm/dL	M 13.00 - 17.00 gm/dL (Age 13 Y - 100 Y)
TOTAL LEUCOCYTE COUNT (TLC) (FLOWCYTOMETRY)*		7560 /cumm	M 4000.00 - 10000.00 /cumm (Age 13 Y - 100 Y)
DLC (FLOWCELL & CYTOCHEMISTRY/MANUAL)*			
NEUTROPHIL		58.90 %	40.00 - 80.00 % (Age 13 Y - 100 Y)
LYMPHOCYTE		25.00 %	20.00 - 40.00 % (Age 13 Y - 100 Y)
MONOCYTE		7.50 %	2.00 - 10.00 % (Age 13 Y - 100 Y)
EOSINOPHIL		8.30 % *	1.00 - 6.00 % (Age 13 Y - 100 Y)
BASOPHIL		0.30 %	0.00 - 1.00 % (Age 13 Y - 100 Y)
RBC (IMPEDENCE)*		5.14 millions/cumm	M 4.50 - 6.50 millions/cumm (Age 13 Y - 100 Y)
HEMATOCRIT/P.C.V (RBC PULSE HEIGHT)*		44.20 %	M 40.00 - 54.00 % (Age 13 Y - 100 Y)
MCV(Calculated)*		86.00 fL	80.00 - 100.00 fL (Age 13 Y - 100 Y)
MCH(Calculated)*		29.00 Picogram	27.00 - 32.00 Picogram (Age 13 Y - 100 Y)
MCHC(Calculated)*		33.70 %	31.50 - 34.50 % (Age 13 Y - 100 Y)
PLATELET COUNT (IMPEDANCE)*		3.23 Lakh/cumm	1.50 - 4.00 Lakh/cumm (Age 13 Y - 100 Y)
ESR(Westergren's Method)*		26 mm/hr	M 0 - 10 F 5 - 20

Performed On: PENTRA ES60 (Horiba),5-Part differential cell counter

END OF REPORT.

ON PANEL OF : CGHS, ECHS, ESI, DGHS, PSUs, GIPSA, All MAJOR TPA, Health Insurance Companies, Noida & Gr. Noida Authority
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 PIYUSH SHUKLA MBBS, MD (PATHOLOGY)

• **24X7 Emergency** • **Ambulance** • **Pharmacy** • **Lab** • **Blood Bank**

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HAEMATOLOGY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 12:00 PM

Collection Date : 26-08-2023 09:39 AM[HA27189]

Reporting Status : Finalized

Acceptance Date : 26-08-2023 09:39 AM | **TAT:** 02:21 [HH:MM]

Investigations	Method	Result	Biological Reference
Blood Group (RH Type) *[EDTA tube(purple top)]			
Blood Group	Forward Grouping Method	A	
Rh Type	Forward Grouping Method	POSITIVE	

END OF REPORT.



Prepared By
PIYUSH SHUKLA

VAIBHAV TIWARI
MBBS, MD
(PATHOLOGY)

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Requesting Doctor: Dr. ANSHUMALA SINHA

Reg. ID : OPD.23-24-57729



BIOCHEMISTRY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 12:59 PM

Collection Date : 26-08-2023 09:39 AM[B134649]

Reporting Status : Finalized

Acceptance Date : 26-08-2023 09:40 AM | **TAT:** 03:19
[HH:MM]

Investigations	Method	Result	Biological Reference
BLOOD SUGAR FASTING (BSF) *[Sodium fluoride(grey top)] <i>Performed On: DIASYS SYS400 PRO</i>		82.00 mg/dL	74.00 - 110.00 mg/dL (Age <= 100)

Please correlate clinically

END OF REPORT.



Prepared By
SURAJ KUMAR

VAIBHAV TIWARI
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(PATHOLOGY)

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Requesting Doctor: Dr. ANSHUMALA SINHA

Reg. ID : OPD.23-24-57729

CLINICAL PATHOLOGY

Request Date : 26-08-2023 09:36 AM
Collection Date : 26-08-2023 09:39 AM[CLP5488]
Acceptance Date : 26-08-2023 11:42 AM | **TAT:** 01:22 [HH:MM]

Reporting Date : 26-08-2023 01:04 PM
Reporting Status : Finalized

Investigations	Method	Result	Biological Reference
URINE ROUTINE AUTOMATED *[Random Urine]			
VOLUME		25 ML	>10
COLOUR		PALE YELLOW	PALE YELLOW
APPEARANCE		CLEAR	CLEAR
SPECIFIC GRAVITY (pKA CHANGE)		1.030	1.005 - 1.030
pH (DOUBLE INDICATOR)		6.0	5.00 - 8.50
URINE PROTEIN (PROTEIN ERROR/ 3% SULPHOSALICYLIC ACID)		NIL	NIL
GLUCOSE (GOD-POD/ BENEDICTS)		NIL	NIL
MICROSCOPIC EXAMINATION			
PUS CELLS		1-2 /HPF	0.0-3.0
RBC		NIL /HPF	NIL
CASTS		ABSENT	ABSENT
CRYSTALS		ABSENT	ABSENT
EPITHELIAL CELLS		0-1 /HPF	M 0.00 - 3.00 /HPF
BACTERIA		ABSENT	ABSENT
OTHER		ABSENT	

Please correlate clinically

END OF REPORT.



Prepared By
BRAJESH KUMAR RANA

VAIBHAV TIWARI
MBBS, MD
(PATHOLOGY)

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BIOCHEMISTRY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 01:05 PM

Collection Date : 26-08-2023 09:39 AM[B134648]


Reporting Status : Finalized

Acceptance Date : 26-08-2023 09:39 AM | **TAT:** 03:26
[HH:MM]

Investigations	Method	Result	Biological Reference
GGTP *[Plain tube (red top)] <i>Performed On: DIASYS SYS400 PRO</i>	KINETIC	41.80 U/L	M 0.00 - 55.00 U/L

END OF REPORT.

Prepared By
SURAJ KUMAR


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(PATHOLOGY)

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BIOCHEMISTRY

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Collection Date : 26-08-2023 09:39 AM[B134648]
Acceptance Date : 26-08-2023 09:39 AM | **TAT:** 04:21 [HH:MM]

Reporting Date : 26-08-2023 02:00 PM
Reporting Status : Finalized

Investigations	Method	Result	Biological Reference																
GLYCOSYLATED HAEMOGLOBIN (Hb A1c) *[edta tube(purple top)] (Method:HPLC Assay) <u>Ref Range for HbA1c</u> Non Diabetic:< 5.7 % Pre-Diabetic: 5.7 - 6.5 % Diabetic: > 6.5 %		5.2 %																	
<p><i>Remark: Hemoglobin A1c criteria for diagnosing diabetes have not been established for patients who are <18 years of age.</i></p> <p><u>HbA1c goals in treatment of diabetes:</u></p> Ages 0-6 years: 7.6% - 8.4% Ages 6-12 years: <8% Ages 13-19 years: <7.5% Adults: <7% <p><u>Comments:</u></p> HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations. <p><i>(Note: If a person has anemia, hemolysis, or heavy bleeding, HbA1c test results may be falsely low. If someone is iron-deficient, the HbA1c level may be increased. If a person has had a recent blood transfusion, the HbA1c may be inaccurate and may not accurately reflect glucose control for 2 to 3 months.)</i></p> <p><u>ADA criteria for correlation between HbA1c & Mean plasma glucose levels:</u></p> <table border="0"> <tr> <td>HbA1c(%):</td> <td>6</td> <td>7</td> <td>8</td> <td>9</td> <td>10</td> <td>11</td> <td>12</td> </tr> <tr> <td>Mean Plasma Glucose:</td> <td>126</td> <td>154</td> <td>183</td> <td>212</td> <td>240</td> <td>269</td> <td>298</td> </tr> </table> (mg/dL)				HbA1c(%):	6	7	8	9	10	11	12	Mean Plasma Glucose:	126	154	183	212	240	269	298
HbA1c(%):	6	7	8	9	10	11	12												
Mean Plasma Glucose:	126	154	183	212	240	269	298												
<p><i>Please correlate clinically</i></p>																			

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Reg. ID : OPD.23-24-57729



IMMUNOLOGY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 05:28 PM

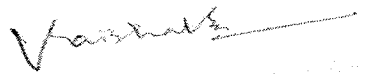
Collection Date : 26-08-2023 03:46 PM [IMMU27276]

Reporting Status : Finalized

Acceptance Date : 26-08-2023 03:47 PM | **TAT:** 01:41 [HH:MM]

Investigations	Method	Result	Biological Reference
THYROID PROFILE TOTAL (T3, T4, TSH) *[Plain tube (red top)]	CLIA		
Total T3		1.59 nmol/L	1.11 - 2.29 nmol/L (Age 0 - 100)
Total T4		170.4 nmol/L	62.00 - 201.40 nmol/L (Age 0 - 100)
TSH		1.79 µIU/mL	0.38 - 5.33 µIU/mL (Age 0 - 100)
<i>Performed On: ACCESS 2 (BECKMAN COULTER)</i>			
<p>1. A circadian variation in serum TSH in healthy subjects is well documented. TSH level is reaching peak levels between 2-4 am 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 value of TSH.</p> <p>2. TSH levels between 6.3 and 15.0 may represent subclinical or compensated hypothyroidism or show considerable physiological & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.</p> <p>3. TSH levels may be transiently altered because of non-thyroid illness, like severe infection, renal disease, liver disease, heart disease, severe burns, trauma, surgery etc. Few drugs also altered the TSH values.</p> <p>4. A high TSH result often means an underactive thyroid gland caused by failure of the gland (hypothyroidism). A low TSH result can indicate an overactive thyroid gland (hyperthyroidism) or damage to the pituitary gland that prevents it from producing TSH.</p> <p>5. Resistance to thyroid hormone (RTH) and central hyperthyroidism (TSH-oma) are rare conditions associated with elevated TSH, T4 and T3 levels.</p>			
<i>Performed on: ACCESS 2 (BECKMAN COULTER)</i>			

END OF REPORT.



Prepared By
SURAJ KUMAR

VAIBHAV TIWARI
MBBS, MD
(PATHOLOGY)

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BIOCHEMISTRY

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 05:38 PM

Collection Date : 26-08-2023 03:22 PM [BI34727]

Reporting Status : Finalized

Acceptance Date : 26-08-2023 03:23 PM | **TAT:** 02:15
[HH:MM]

Investigations	Method	Result	Biological Reference
BLOOD SUGAR POST PRONDIAL (BSPP) *[Sodium fluoride(grey top)] <i>Performed On: DIASYS SYS400 PRO</i>		121.00 mg/dL	80.00 - 140.00 mg/dL (Age <= 100)

Please correlate clinically

END OF REPORT.




Prepared By
AVANISH KUMAR YADAV

VAIBHAV TIWARI
MBBS, MD
(PATHOLOGY)

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BIOCHEMISTRY

Request Date : 26-08-2023 09:36 AM
Collection Date : 26-08-2023 09:39 AM[B134648]
Acceptance Date : 26-08-2023 09:39 AM | TAT: 02:37 [HH:MM]

Reporting Date : 26-08-2023 12:16 PM
Reporting Status : Finalized

Investigations	Method	Result	Biological Reference
KIDNEY FUNCTION TEST(KFT) *[Plain tube (red top)]			
UREA (UREASE METHOD)*		24.7 mg/dL	M 19.00 - 44.00 mg/dL (Age 20 Y - 50 Y)
S.CREATININE (ENZYMATIC)*		0.89 mg/dL	M 0.67 - 1.17 mg/dL
S.URIC ACID (URICASE, COLORIMETRY)*		6.30 mg/dL	M 3.50 - 7.20 mg/dL
S.CALCIUM (ARSENAZO DYE)*	Arsenazo III	9.40 mg/dL	8.60 - 10.30 mg/dL
S. SODIUM (DIRECT I.S.E.)*		138.60 mmol/L	137.00 - 145.00 mmol/L
S. POTASSIUM (DIRECT I.S.E.)*		4.37 mmol/L	3.50 - 5.10 mmol/L
S. PHOSPHORUS (PMA PHENOL)*		3.02 mg/dL	2.60 - 4.50 mg/dL
S. CHLORIDE (DIRECT I.S.E)		109.30 mmol/L *	98.00 - 107.00 mmol/L (Age 0 - 100)
<i>Performed On: DIASYS SYS400 PRO</i>			
LIVER FUNCTION TEST *[Plain tube (red top)]			
TOTAL BILIRUBIN (AZOBILIRUBIN/DIPHYLLINE)*		0.53 mg/dL	Adult 0.10 - 1.20 mg/dL
CONJUGATED(D.Bilirubin) (CALCULATED)		0.18 mg/dL	<= 0.20 mg/dL
UNCONJUGATED(I.D.Bilirubin) (SPECTROPHOTOMETRY)		0.35 mg/dL	Adult 0.00 - 1.00 mg/dL
S.G.O.T (AST) (KINETIC LEUCO DYE)*	IFCC(Modified)	21.6 IU/L	M < 31.00 IU/L
S.G.P.T (ALT) (KINETIC LDH/NADH)*	IFCC(Modified)	29.9 IU/L	M < 41.00 IU/L
ALKALINE PHOSPHATASE (pNPP/AMP)*	IFCC(Modified)	65.1 IU/L	M 40.00 - 129.00 IU/L
TOTAL PROTEIN (BIURET)*		7.30 gm/dL	Adult 6.60 - 8.80 gm/dL
ALBUMIN (BROMOCRESOL GREEN)*		4.80 gm/dL	Adult 3.50 - 5.20 gm/dL
GLOBULIN (CALCULATED)*	Calculated	2.5 gm/dL	Adult 2.00 - 3.50 gm/dL
A/G RATIO (CALCULATED)		1.92	1.00 - 2.10
<i>Performed On: DIASYS SYS400 PRO</i>			

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24X7 {Helpline - 7835 999 444 , 7835 999 555}

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34 Yr /Male
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PRADESH
Requesting Doctor: Dr. ANSHUMALA SINHA



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Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 11:09 AM
Report Status : Finalized

X-RAY CHEST PA VIEW WITH COMPUTED RADIOGRAPHY

X-RAY CHEST PA

FINDINGS

Lung fields are clear.
Both hilar shadows are normal.
Both domes of diaphragm are normal.
Both costophrenic angles are clear.
Cardiac silhouette is normal.
Soft tissues and bony thoracic cage are normal.
IMPRESSION-NORMAL CHEST X-RAY.
Please correlate clinically.

Dr. Ashma Mehta
Senior Consultant Radiology,
MBBS,DMRD Gold Medalist

END OF REPORT

Dr Sai Naren V S
MBBS, MD
CONSULTANT RADIOLOGIST

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24X7 {Helpline - 7835 999 444 , 7835 999 555}

Patient Name: Mr. SINGH MAHENDRA PRATAP /
Age / Gender: UHIDNO:FHP28653126082023
34 Yr /Male
Address: SECT-117 NOIDA, Gautam Buddha Nagar, UTTAR
PRADESH
Requesting Doctor: Dr. ANSHUMALA SINHA



Reg. No.: OPD.23-24-57729

Request Date : 26-08-2023 09:36 AM

Reporting Date : 26-08-2023 11:29 AM
Report Status : Finalized

ULTRASOUND WHOLE ABDOMEN MALE

Liver is normal in size, shape and shows homogenous echopattern. No focal lesion is seen. Intrahepatic biliary radicles and venous channels appear normal.
Gall bladder is distended and shows smooth walls and the lumen is echofree. CBD is not dilated.
Pancreas is normal in size, shape and echotexture.
Spleen is normal in size and echotexture.
Both kidneys are normal in size, shape and echopattern. Cortico-medullary differentiation and parenchymal thickness is well maintained. No evidence of any pelvicalyceal separation is seen. No evidence of any significant retroperitoneal lymphadenopathy is seen.
No evidence of fluid in peritoneal cavity.
Urinary bladder is normal in distensibility and wall thickness. The lumen is echofree.
Prostate is normal in size, shape and echotexture.

IMPRESSION: No significant abnormality detected.

Advice: Clinical Correlation.

END OF REPORT



Dr. PULKIT SONI
MBBS, DMRD, DNB
(CONSULTANT RADIOLOGIST)

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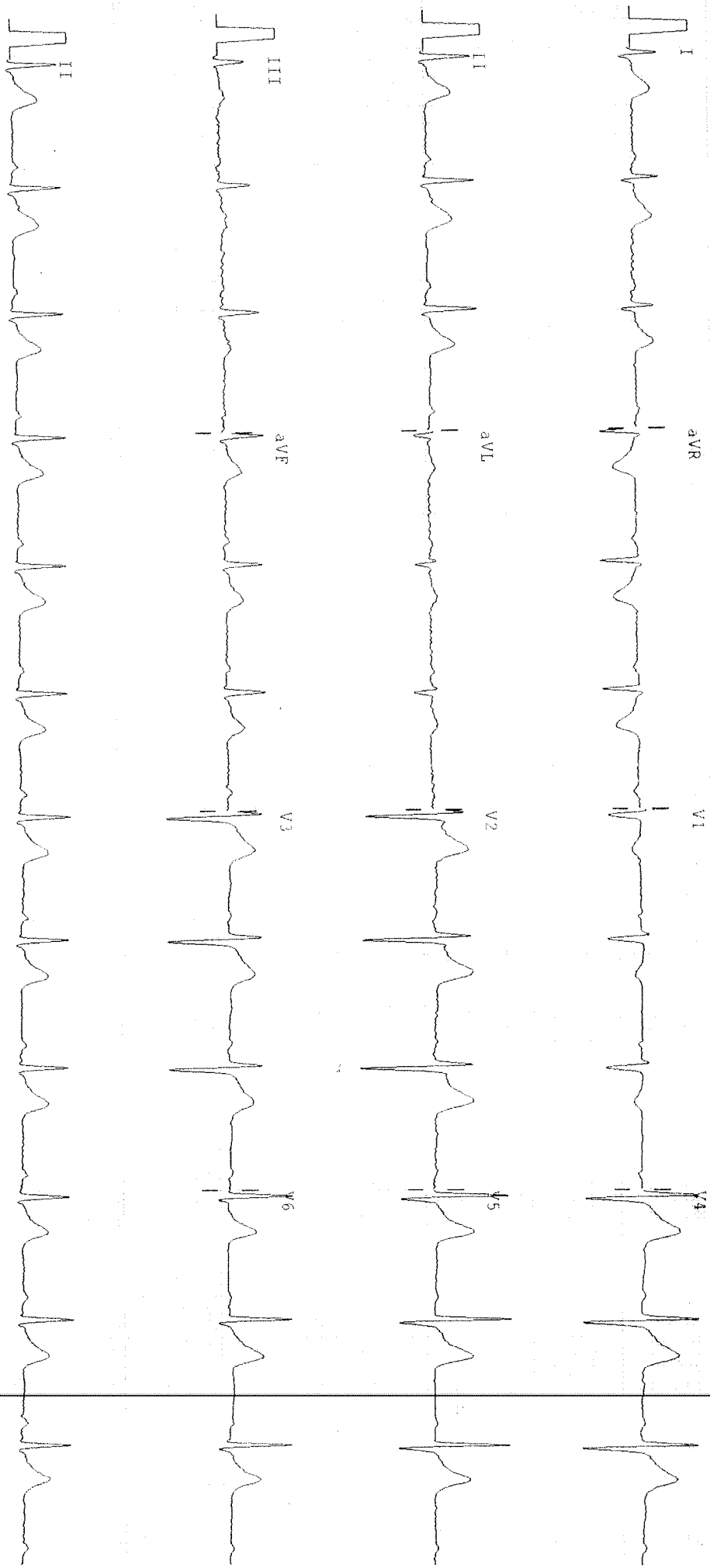
RATE : 71 bpm SINUS RHYTHM
R-R : 835 ms
P-R : 150 ms
QRS : 88 ms
QT : 372 ms
QTc : 391 ms

--AXIS--
P : 42°
QRS : 69°
T : 46°

12 SL. REPORT FORMAT 3x4+1L SQ

REF:

Dr. DR RAHUL ARORA



25mm/sec 10mm/mV Notch: ON BLC:ON 0 05 35Hz ALLENGERS PISCES 10121 VER-1.9:CLINICALLY CORRELATE THE FINDINGS