

(A Unit of Sparsh Multispecialty Hospital Private Limited)
(Formerly known as Paedia Health Private Limited)

CIN: U85110CT2005PTC017751

UHID : 143858 VISITID : 0000263298

PATIENT NAME : MR. MASSEY VISHWAS ORDER DATE : 22/01/2022 9:47:00AM

AGE/SEX : 36Y/MALE SAMP. DATE : 22/01/2022 10:49:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10349927

RESULT DATE : 22/01/2022 2:26:00PM

TPA : MEDIWHEEL

Sharma

NIANA SHARMA B PATHOLOGY

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD	COUNT)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	15.4 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	5.42 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	44.5 %	Normal	41.5 - 50.4
RBC INDICES			
MCV	82.2 fl	Normal	78 - 96
MCH	28.3 pg	Normal	27 - 32
MCHC	34.5 %	Normal	33 - 37
RDW	13.5 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	10200 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	58 %	Normal	0 - 75
LYMPHOCYTES	35 %	Normal	22 - 48
EOSINOPHILS	03 %	Normal	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	295000 /cumm	Normal	150000 - 450000

TECHNICIAN



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SPEC. NO : 10349928

RESULT DATE : 22/01/2022 4:06:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE		REFERENCE RANGE	
ESR	48 mm at end of 1 hr	High	0 - 15	

TECHNICIAN

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Med correlated clinically.

DISHNIANA SHARMA D.N.B.PATHOLOGY

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purposes and should be



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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10349919

RESULT DATE : 22/01/2022 3:58:00PM

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SHARMA OŁOGY

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
LFT (LIVER FUNCTION TEST)			
BILIRUBIN TOTAL	0.46 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.20 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.26 mg / dl	Normal	0.1 - 0.4
ALKALINE PHOSPHATASE	74 U / L	Normal	0 - 270
GGOT	30 U/L	Normal	10 - 55
GGPT	44 U/L	High	0 - 40
TOTAL PROTEIN	6.82 g / dl	Normal	6 - 8
ALBUMIN	4.02 g/dl	Normal	4 - 5
GLOBULIN	2.80 g / dl	Normal	2 - 3.5
A.G.RATIO	1.44:1		1 - 2.5
IPID PROFILE			
CHOLESTEROL TOTAL	150 mg / dl	Normal	150 - 220
RIGLYCERIDES - SERUM	230 mg / dl	High	60 - 165
IDL	34.90 mg / dl	Low	35 - 80
DL	69.10 mg/dL	Low	90 - 160
'LDL	46.0	Normal	20 - 50
CHOL: HDL Ratio	4.30:1		3.5 - 5.5
DL: HDL Ratio	1.98:1		

TECHNICIAN



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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10349926

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TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER VALUE RESULT REFERENCE RANGE

HBA1 C (GLYCOSYLATED 8.2 % High 4 - 6 HEAMOGLOBIN)

Interpretation

As per American diabetes Association (ADA)

Reference Group - HbA1c In% Non diabetic >= 18 years - 4.0 - 6.0

At risk (Prediabetes) ->=6.0 to <=6.5

Diagnosing diabetes ->=6.5

Therapeutic goals for glycemic control

- Age> 19 years

Goal of therapy: <7.0Action suggested: >8.0

Age< 19 years

goal of therapy: < 7.5

Note:

- 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.
- 2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

TECHNICIAN

Medico-legal purposes and should be



PATIENT NAME

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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10349925

> **RESULT DATE** : 22/01/2022 3:41:00PM

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TPA : MEDIWHEEL

ORDER DATE

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUPING AND RH TYPIN	IG		
BLOOD GROUP	"B"		-
RH FACTOR	Positive		
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	8.41 mg / dl	Normal	8 - 23
CREATININE			
CREATININE	1.05 mg / dl	Normal	0.6 - 1.2
GGT (GAMMA GLUTAMYL TRANSFE	RASE)		
GGT (GAMMA GLUTAMYL TRANSFERASE)	28 U/L	Normal	8 - 52
URIC ACID			
URIC ACID	5.44 mg/dL	Normal	3.6 - 7.7

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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10349914

RESULT DATE : 22/01/2022 3:45:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER VALUE RESULT REFERENCE RANGE

 T3 (TRIIODOTHYRONINE)
 1.948 ng/ml
 Normal
 0.69 - 2.15

 T4 (THYROXINE)
 95.10 ng/ml
 Normal
 52 - 127

 TSH (THYROID STIMULATING HORMONE)
 0.687 uIU/ml
 Normal
 0.3 - 4.5

REFERENCE GROUP REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years) 0.30- 4.5

Pregnancy

 1st Trimester
 0.10- 2.50

 2nd Trimester
 0.20 - 3.00

 3rd Trimester
 0.30 - 3.00

Note:

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.

- 1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness

TECHNICIAN

- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

Dri Anjana sharma D.N.B RATHOLOGY CONSULTANT



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ORDER DATE : 22/01/2022 9:47:00AM SAMP. DATE

: 22/01/2022 10:49:00AM

SPEC. NO : 10349918

RESULT DATE : 22/01/2022 3:45:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.339 ng/ml

Normal

0 - 4

Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely.

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen

Clinical Use

1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.

2) Followup and management of Prostate cancer patients

3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

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TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
URINE ROUTINE AND MICROSCOPY				
PHYSICAL EXAMINATION				
QUANTITY	10 ml		-	
COLOUR	Yellow		E	
APPEARANCE	Clear			
REACTION	Acidic			
CHEMICAL EXAMINATION				
ALBUMIN	Trace		- 1	
SUGAR	Nil			
•				
MICROSCOPIC EXAMINATION				
EPITHELIAL CELLS	1-2 /hpf		0 - 5	
PUS CELLS	6-8 /hpf		1 - 2	
RBC	2-3 /hpf			
CAST	Nil /lpf			
CRYSTAL	Nil			
AMORPHOUS MATERIAL DEPOSIT	Nil			
OTHERS	Nil			
URINE SUGAR FASTING				
URINE FOR SUGAR	Nil		-	

TECHNICIAN

Dr. ANJANA SHARMA
D.N.B PATHOLOGY
CONSULTANT



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: 143858

PATIENT NAME

: MR. MASSEY VISHWAS

AGE/SEX

: 36Y/MALE

CONSULTANT DOCTOR

BLOOD SUGAR FASTING

: HOSPITAL CASE

VISITID

: 0000263298

ORDER DATE

: 22/01/2022 9:47:00AM

SAMP. DATE

: 22/01/2022 10:49:00AM

SPEC. NO

: 10349920

RESULT DATE

: 22/01/2022 5:44:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

BLOOD SUGAR - FASTING AND PP

PARAMETER

BLOOD SUGAR PP

VALUE

202 mg/dL

261 mg/dL

RESULT

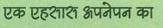
REFERENCE RANGE

High High

80 - 120 120 - 140

TECHNICIAN

Dr. ANJANA GANGA D.N.BYATHOLOGY CONSULTANT





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Patient Name : MR. MASSEY VISHWAS

Spec No.

: 0000263298

Age / Sex

: 36Y / MALE

: MEDIWHEEL

Visit ID

Consultant

: DR. HOSPITAL CASE

Order Date

: 22/01/2022 9:47AM

Ref. By Category : DR. HOSPITAL CASE

Samp.Date Report Date

: 22/01/22 01:54PM

SONOGRAPHY USG WHOLE ABDOMEN

- * LIVER : Measures 17.02 cm Longitudinally, Enlarged in size and shows diffuse fine increased echogenicity of parenchyma with no evidence of any focal lesion seen. IHBRs are not dilated.
- *PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- *COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.
- *GALL BLADDER : Not visualized Post Cholecystectomy status.
- *SPLEEN: Normal in size, shape & echo texture. No focal lesions seen.
- *PANCREAS:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.
- *KIDNEYS: Both kidneys are of normal shape, size and position.

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

- *URINARY BLADDER: Seen in distended state and has normal wall architecture. Lumen is echo free.
- *PROSTATE:Normal in shape, size and echotexture.No median lobe bulge is seen.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION:

- Enlarged Fatty Liver (Grade II)
- Gall Bladder Not visualized Post Cholecystectomy status.
- Please correlate clinically, followup USG is recommended.

SAMUR KATHALE MBBS, DNB

Reg No: CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference.



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Spec No.

Age / Sex

: 36Y / MALE

: MEDIWHEEL

Consultant

: DR. HOSPITAL CASE

Order Date

: 22/01/2022 9:47AM

OPP

Ref. By Category : DR. HOSPITAL CASE

Samp.Date

Report Date

: 22/01/22 12:45PM

X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

No Remarkable Abnormality Detected .

- Please correlate clinically

MIR KATHALE AMS MANBO

Reg No: CGMC-4404/2012

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: MR. MASSEY VISHWAS

AGE: 36 YEARS

SEX:MALE

REF BY : DR . HOSPITAL (CASE)

DATE: 22 / 01 / 2022

ECHOCARDIOGRAPHY & COLOUR DOPPLER STUDY

	rement	Pts Value (mm)	Normal Value (mm)	Measurement	Pts Value (mm)	Normal Value (mm)
AO	:	30	20 - 37	IVS	10	6 -11
LA	:	35	29 - 40	LVID (d)	44	35 - 50
MACS	:		15 - 26	LVPW (d)	11	6 – 11
EPSS	•		< 8mm	LVID (s)	25	23 - 39
FS RA	:		<26mm	EF RV	60%	(60+62%) <26

2 D ECHO & CFI

CHAMBERS

AllCardiac Chambers are Normal Size

VALVES

AV /MV THICKENED

RWMA SEPTAE

NIL INTACT

EF (Overall) CLOT/ VEGETATION

60% NIL

PER EFFUSION

NIL

CONTINUOUS WAVE & COLOUR WAVE DOPPLER

Valve

Regurgitation

Mitral Valve Aortic Valve

TRIVIAL MR

TRIVIAL AR

Pulmonary Valve

Tricuspid Valve

NIL

NIL

Gradient (mmHg) Not Significant

Not Significant

Not Significant

Not Significant

PULSE WAVE DOPPLER

Mitral Valve Inflow Shows

E Waves <<< A Waves

FINAL IMPRESSION:

- NO RWMA, LVEF 60%
- AV/MV THICKENED
- TRIVIAL MR
- TRIVIAL AR
- **GRADE I DIASTOLIC DYSFUNCTION**
- NO CLOT/PE/ VEGETATION

WID DNB FSCAI)

SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST

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