



<b>Patient Name</b>	: Mr.JAIN ANKIT	<b>Bill Date</b>	: 11-03-2023 08:25 AM
<b>Age / Gender</b>	: 34 Y(s) /Male	<b>Collected Date</b>	: 11-03-2023 08:41 AM
<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 06:36 PM
<b>Lab No/Result No</b>	: 2300011483/19661	<b>Specimen</b>	: SERUM
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

## Department Of Laboratory -BIOCHEMISTRY

<u>Investigation</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
<b><u>BUN</u></b>			
UREA NITROGEN(BUN)	: 9.91	6.0 - 20.0 mg/dL	Calculated
UREA	: 21.2	12.8-42.8 mg/dL	Urease
CALCIUM	: 8.8	8.6 - 10.2 mg/dL	Arsenazo
CREATININE	: 0.8	0.6 - 1.3 mg/dL	Enzymatic
<b><u>ELECTROLYTES (Na &amp; K)</u></b>			
SODIUM	: 141.0	136.0 - 145.0 mmol/L	Potentiometric
POTASSIUM	: 4.4	3.5 - 5.1 mmol/L	Potentiometric
<b><u>Liver Function Test</u></b>			
TOTAL BILIRUBIN	: 0.7	0.3 - 1.2 mg/dL	Diazo
DIRECT BILIRUBIN	: 0.3	0-0.4 mg/dL	Diazo
INDIRECT BILIRUBIN	: 0.4	0.0 - 0.8 mg/dL	Diazo
ALANINE TRANSAMINASE	: 33.0	<50 U/L	Kinetic
ASPARTATE TRANSAMINASE	: 29.0	10.0 - 40.0 U/L	Kinetic
ALKALINE PHOSPHATASE	: 97.0	30.0 - 115.0 U/L	4NPP/AMP BUFFER
TOTAL PROTEIN	: 7.1	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.1	3.5-4.8 g/dl	BCG
GLOBULIN	: 3	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.37		Calculated
<b><u>LIPID PROFILE</u></b>			
CHOLESTEROL	: 161.0	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 106.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: <b>31.0</b>	35-65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 108.8	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 21.2	5.0-36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 5.19	2.0-6.2	Calculated
<b><u>PHOSPHOROUS</u></b>			
PHOSPHORUS	: <b>2.5</b>	2.7-4.5 mg/dL	Phospho Molybdate
<b><u>PPBS</u></b>			
GLUCOSE (POST PRANDIAL)	: 100.0	60-140 mg/dL	GOD-POD
<b><u>T3-T4-TSH -</u></b>			
Tri-iodothyronine, (Total T3)	: 1.13	0.87-1.78 ng/ml	ECLIA
THYROXINE (T4), TOTAL	: 7.93	4.6 - 10.5 ug/dl	ECLIA
THYROID STIMULATING HORMONE (ULTRA).	: 1.67	0.28-3.89 uIU/mL	ECLIA

TSH - For pregnancy the reference range is as follows -  
1st -trimester : 0.6 - 3.4 uIU/mL



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**Referred By** : HOSPITAL CASE

**Bill Date** : 11-03-2023 08:25 AM  
**Collected Date** : 11-03-2023 08:41 AM  
**Report Date** : 11-03-2023 02:36 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi

2nd trimester : 0.37 - 3.6 uIU/mL  
3rd trimester : 0.38 - 4.04 uIU/mL


**TOTAL PROTEINS (Total Protein Albumin+Globulin)**

TOTAL PROTEIN	: 7.1	6.0 - 8.0 g/dl	Biuret
ALBUMIN	: 4.1	3.5-4.8 g/dl	BCG
GLOBULIN	: 3	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.37		Calculated
URIC ACID	: 5.1	3.5-7.2 mg/dL	Uricase

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated analyzer - VITROS250**

**Verified By**  
SOPAN

  
**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**

NOTE :

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.
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<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 01:24 PM
<b>Lab No/Result No</b>	: 2300011483-F/19661	<b>Specimen</b>	: SERUM
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

### Department Of Laboratory -BIOCHEMISTRY

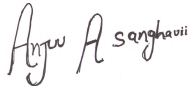
<u>Investigation</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
<b>FBS</b> GLUCOSE (FASTING).	: <b>88.0</b>	Prediabetic : 100 - 125 mg/dL Diabetic : $\geq$ 126 mg/dL Normal : $<$ 100.0 mg/dL	GOD-POD

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated analyzer - VITROS250**

**Verified By**  
SANDEEP

  
**Dr.Anjana Sanghavi**  
**Consultant Pathologist**

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<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 02:24 PM
<b>Lab No/Result No</b>	: 2300011485-G/19661	<b>Specimen</b>	: WHOLE BLOOD
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

### **Department Of Laboratory -HAEMATOLOGY**

<b><u>Investigation</u></b>	<b><u>Result</u></b>	<b><u>Biological Reference Interval</u></b>	<b><u>Method</u></b>
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#### **GLYCOCYLATED HB% (HbA1C)**

GLYCOSYLATED HAEMOGLOBIN : 5.4  
(HBA1c)

Prediabetic : 5.7 - 6.4 %  
Diabetic : >= 6.5 %  
Therapeutic Target : <7.0 %


HPLC

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated analyzer - BIORAD D10**

**Verified By**  
Ruhi S

  
**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**

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<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 03:18 PM
<b>Lab No/Result No</b>	: 2300011484/19661	<b>Specimen</b>	: URINE
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

## Department Of Laboratory -CLINICAL PATHOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
<b><u>URINE ROUTINE</u></b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
COLOUR	: Pale Yellow		Colourometry
APPEARANCE	: Clear		Colourometry
<b><u>CHEMICAL TEST</u></b>			
PH	: 6.5	5.0-7.0	
SPECIFIC GRAVITY	: 1.020	1.015-1.030	
ALBUMIN	: Absent	Abset	
URINE SUGAR	: Absent	Absent	
KETONE BODIES	: Absent	Absent	
BILE PIGMENTS/ BILIRUBIN	: Absent	Absent	
UROBILINOGEN	: Normal	Normal	Azo Coupling
NITRITES	: Absent	Absent	Griess method
LEUCOCYTES ESTERASE	: Absent	Absent	Photometric measurement of LE activity
<b><u>MICROSCOPIC TEST</u></b>			
PUS CELLS.	: 1-2	0 - 5 /hpf	
RED BLOOD CELLS.	: Absent	0 - 2 /hpf	
EPITHELIAL CELLS.	: 1-2	0-5 /hpf	
BACTERIA	: Absent	Absent	Fluorescence Flowcytometry
CAST	: Absent	Absent	
YEAST CELLS	: Absent	Absent	MICROSCOPY
CRYSTALS	: Absent	Absent	
OTHERS	: Absent	Absent	

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated analyzer - URI PLUS200**

**Verified By**  
AMOL

  
**Dr.POOJA PATHAK**  
**ASSOCIATE CONSULTANT**

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<b>Age / Gender</b>	: 34 Y(s) /Male	<b>Collected Date</b>	: 11-03-2023 08:41 AM
<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 02:56 PM
<b>Lab No/Result No</b>	: 2300011485/19661	<b>Specimen</b>	: WHOLE BLOOD
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

### **Department Of Laboratory -HAEMATOLOGY**

<b><u>Investigation</u></b>	<b><u>Result</u></b>	<b><u>Biological Reference Interval</u></b>	<b><u>Method</u></b>
BLOOD GROUP	: B RH POSITIVE		
<b><u>Erythrocyte Sedimentation Rate</u></b>			
ESR at 1 Hour	: 15	0 - 15 mm/hr	Modified Westergren Method

#### **INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

**Dr.Anjana Sanghavi  
Consultant Pathologist**

**Verified By**  
Ruhi S

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<b>Bill No/UHID No</b>	: PS004437/P00000494439	<b>Report Date</b>	: 11-03-2023 12:33 PM
<b>Lab No/Result No</b>	: 2300011485/19661	<b>Specimen</b>	: WHOLE BLOOD
<b>Referred By</b>	: HOSPITAL CASE	<b>Processing Loc</b>	: RHC Hinjawadi

### Department Of Laboratory -HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Method</u>
<b><u>HAEMOGRAM REPORT</u></b>			
W.B.C.COUNT	: 5080	4000-11000 /ul	Coulter Principle
NEUTROPHILS	: 53.9	40-75 %	Derived from WBC Histogram
LYMPHOCYTES	: 38.2	20-40 %	Fluorescence flow cytometry
MONOCYTES	: 4.8	2-10 %	MAPSS
EOSINOPHILS	: <b>0.8</b>	1.0-6.0 %	MAPSS
BASOPHILS	: <b>2.3</b>	0.0-1.0 %	Fluorescence flow cytometry
%IMMATURE GRANULOCYTES	: 0.01	0.00-0.10 %	Fluorescence flow cytometry
ABSOLUTE NEUTROPHIL COUNT	: 2.74	2-7 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE LYMPHOCYTE COUNT	: 1.94	1 - 3 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE MONOCYTE COUNT	: 0.24	0.2-1.0 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE EOSINOPHIL COUNT	: 0.04	0.02-0.5 x10 <sup>3</sup> cells/ul	Calculated
ABSOLUTE BASOPHIL COUNT	: <b>0.11</b>	0.02-0.1 x10 <sup>3</sup> cells/ul	Calculated
R.B.C COUNT	: 4.91	4.5 - 6.5 million/ul	Coulter Principle
HAEMOGLOBIN	: 14.8	13 - 17 g/dl	Cyanmethemoglobin Photometry
HAEMATOCRIT	: 43.6	40-50 %	Calculated
MCV	: 88.8	83-99 fl	Coulter Principle
MCH	: 30.0	27 - 32 pg	Calculated
MCHC	: 33.8	31.5 - 34.5 g/dl	Calculated
RDW	: <b>10.6</b>	11.6-14.0 %	Calculated From RBC Histogram
PLATELET COUNT	: 257	150 - 450 x10 <sup>3</sup> /ul	Coulter Principle
MPV	: 9.3	7.8-11 fl	Coulter Principle
RBC MORPHOLOGY	: Normocytic Normochromic		
WBC MORPHOLOGY	: Within normal range		
PLATELET	: Adequate		

\*\*\* End Of The Report \*\*\*

**Note : This test is performed on automated analyzer - HORIBA YUMIZEN H550**

*Anjana A. Sanghavi*

**Dr.Anjana Sanghavi  
Consultant Pathologist**

**Verified By**

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Grant Medical Foundation

**Ruby Hall Clinic**

Hinjawadi

<b>Name:</b> JAIN ANKIT.	<b>Exam Date :</b> 11-Mar-2023 17:33
<b>Age :</b> 034Y	<b>Accession:</b> 91577173643
<b>Gender:</b> M	<b>Exam:</b> ABDOMEN AND PELVIS
<b>PID:</b> P00000494439	<b>Physician:</b> HOSPITAL CASE <sup>^^^</sup>
<b>OPD :</b>	

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and bright in echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.

Pancreas appears normal in size and echotexture. No focal lesion is seen.

Spleen appears normal in size and echotexture. No focal lesion is seen.

Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

Visualised bowel loops are non-dilated and show normal peristalsis.

There is no ascites or significant lymphadenopathy seen.

#### IMPRESSION :

**Grade I fatty liver.**

**No other significant abnormality noted.**

**Suggest : Clinical correlation.**

**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
**MBBS, DMRD**  
**Regd. No. 090812**

Date: 13-Mar-2023 17:16:26





**Name:** JAIN ANKIT .  
**Age :** 034 Years  
**Gender:** M  
**PID:** P00000494439  
**OPD :**

**Exam Date :** 11-Mar-2023 08:27  
**Accession:** 91608174750  
**Exam:** CHEST X RAY  
**Physician:** HOSPITAL CASE^^^^

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

DR. YATIN R. VISAVE  
CONSULTANT RADIOLOGIST  
MBBS, DMRD  
Regd. No. 090812

Date: 13-Mar-2023 15:38:31

## OPHTHALMOLOGY

NAME : ANKIT, TAIN.

AGE : 34 / M

R - 0.75 SPH

L - 0.75 SPH

1) Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

2) Near Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{-1-} \end{array} \right.$

3) Binocular Vision \_\_\_\_\_

4) Colour Vision \_\_\_\_\_ NAD

5) Tension \_\_\_\_\_

6) Anterior Segment \_\_\_\_\_


7) Pupils \_\_\_\_\_

8) Lens \_\_\_\_\_

9) Media & Fundus \_\_\_\_\_

10) Remarks \_\_\_\_\_

Date : 11 / 03 / 23

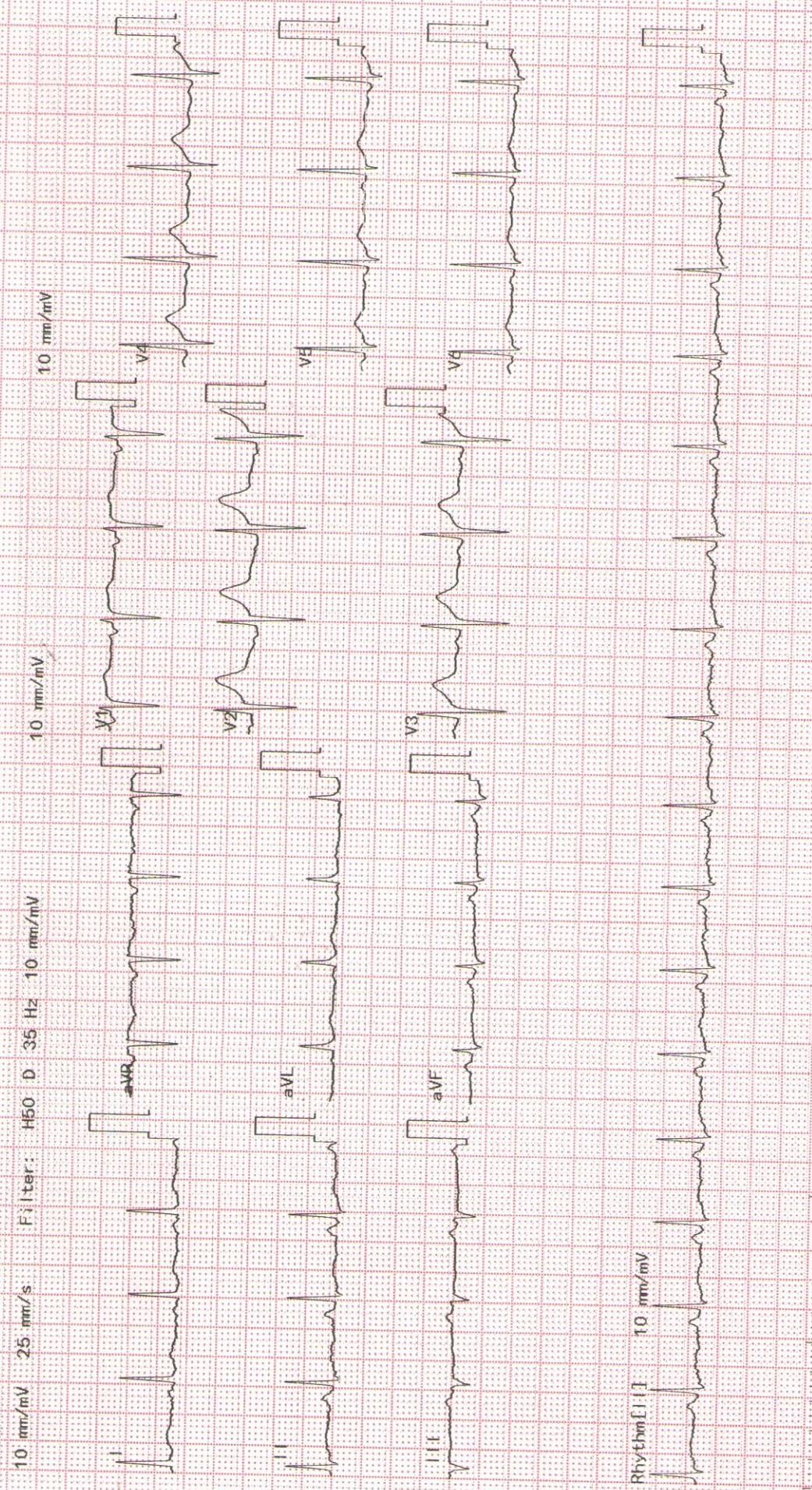
  
(Signature)



Name: MR. JAIN ANKIT  
 Sex: M  
 Ref: PS004437- Reg: OPS00003265  
 34.11.3/M - NH - 11/03/2023  
 P00000494439

Medication: years 1120 Sinus tachycardia  
 Symptoms: 4068 Nonspecific Twave abnormality  
 History: 9140 \*\* abnormal rhythm ECG \*\*  
 Vent. rate 100 bpm  
 PR int 122 ms  
 QRS dur 80 ms  
 QT/QTc(E) int 324/381 ms  
 P/QRS/T axis 57/ 24/ 16 °  
 RV5/SV1 amp 1.32/ 0.85 mV  
 RV5+SV1 amp 2.17 mV

Unconfirmed Report  
Reviewed by:





# RUBY HALL CLINIC PIMPLE SAUDAGAR

Name: JAIN ANKIT .

Date: 11-03-2023 Time: 09:33

Age: 34

Gender: M

Height: 169 cms

Weight: 78 Kg

ID: PS004437

Clinical History: NIL

Medications: NIL

## Test Details:

Protocol: Bruce

Predicted Max HR: 186

Target HR: 158

Exercise Time: 0:08:00

Achieved Max HR: 171 (92% of Predicted MHR)

Max BP: 150/70

Max BP x HR: 25650

Max Mets: 9

Test Termination Criteria:

## Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:07	1	0	0	79	130/80	10270	2.3 V3	1.4 V3
Standing	00:07	1	0	0	80	130/80	10400	1.8 V3	1.2 V3
HyperVentilation	00:07	1	0	0	83	130/80	10790	1.5 V3	1.1 V3
PreTest	00:06	1	1.6	0	81	130/80	10530	2.2 V4	1.3 V3
Stage: 1	03:00	4.7	2.7	10	122	140/80	17080	3.1 V3	2.1 V5
Stage: 2	03:00	7	4	12	142	150/70	21300	1.3 V3	1.9 V3
Peak Exercise	02:00	9	5.5	14	171	150/70	25650	13.4 V5	-8.9 V5
Recovery1	01:00	1	0	0	147	150/70	22050	1.9 V4	3.4 V3
Recovery2	01:00	1	0	0	127	150/70	19050	1.6 V4	2.8 V4

## Interpretation

The Patient Exercised according to Bruce Protocol for 0:08:00 achieving a work level of 9 METS.

Resting Heart Rate, initially 79 bpm rose to a max. heart rate of 171bpm (92% of Predicted Maximum Heart Rate).

Resting Blood Pressure of 130/80 mmHg, rose to a maximum Blood Pressure of 150/70 mmHg

Good Effort Tolerance

No Angina or Arrhythmias

No Angina or Arrhythmias

No Significant ST-T Changes Noted During Exercise

Negative Stress Test



Ref. Doctor: ---

Doctor: DR.KEDAR KULKARNI

**SCHILLER**

The Art of Diagnostics

( Summary Report edited by User )

Spandan CS 10 Version:2.12.0