



**Name:** SHARMA PRADEEP KUMAR .  
**Age :** 035 Years  
**Gender:** M  
**PID:** P00000540538  
**OPD :**

**Exam Date :** 17-Jul-2023 09:03  
**Accession:** 103389145349  
**Exam:** CHEST X RAY  
**Physician:** HOSPITAL CASE<sup>^^^</sup>

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: 17-Jul-2023 21:41:13



Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

<b>Name:</b> SHARMA PRADEEP KUMAR.	<b>Exam Date :</b> 17-Jul-2023 08:51
<b>Age :</b> 035Y	<b>Accession:</b> 103300085808
<b>Gender:</b> M	<b>Exam:</b> ABDOMEN AND PELVIS
<b>PID:</b> P00000540538	<b>Physician:</b> HOSPITAL CASE^^^^
<b>OPD :</b>	

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and 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.

Right kidney measures 10.6 x 4.4 cms. Left kidney measures 9.9 x 5.1 cms. 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 : No significant abnormality noted.**

**Suggest : Clinical correlation.**

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

Date: 17-Jul-2023 21:42:11



**2DECHO&DOPPLER REPORT**

**NAME: MR SHARMA PRADEEP AGE:35 Yrs/M DATE: 17/07/2023**

MITRAL VALVE: has thin leaflets with normal subvalvar motion.  
 No mitral regurgitation .E= 0.99 & A=0.73 m/sec, E/A ratio- 1.36, E/E' ratio- 6.45  
 AORTIC VALVE : has three thin leaflets with normal opening  
 No aortic regurgitation.AVPG= 6.22 mmHg  
 PULMONARY VALVE; NORMAL,PVPG= 4.92 mmHg  
 LEFT VENTRICLE : is normal , has normal wall thickness, No RWMA at rest .  
 Normal LV systolic function. EF - 60%.  
 LEFT ATRIUM: is normal.  
 RIGHT ATRIUM & RIGHT VENTRICLE: normal in size. TAPSE = 24 mm.  
 TRICUSPID VALVE & PULMONARY VALVES : normal.  
 Trivial TR, PPG = 21 mmHg. PA Pressure = 26 mmHg.  
 No PH.  
 No pericardial effusion.  
 M- MODE :

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
31mm	33mm	49mm	31mm	10mm	10mm	60%

**IMP :**            **Normal LV Systolic function. EF-60%.**  
                       **No diastolic dysfunction**  
                       **No RWMA at rest**  
                       **Normal Valves and Chambers**  
                       **IAS & IVS Intact**  
                       **No clot / vegetation / thrombus / pericardial effusion.**



**DR. KEDAR KULKARNI**  
**DNB(MEDICINE), DNB(CARDIOLOGY)**  
**CONSULTANT INTERVENTIONAL CARDIOLOGIST**





Grant Medical Foundation  
**Ruby Hall Clinic**  
 Hinjawadi

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

**OPHTHALMOLOGY**

NAME : *Pradeep. Sharma.*

AGE : *35/M*

R - *3.50 SPH*

L - *3.50 SPH*

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

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

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

4) Colour Vision *NAD*

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

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

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

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

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

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

Date : *17/7/20*

*[Signature]*  
 (Signature)

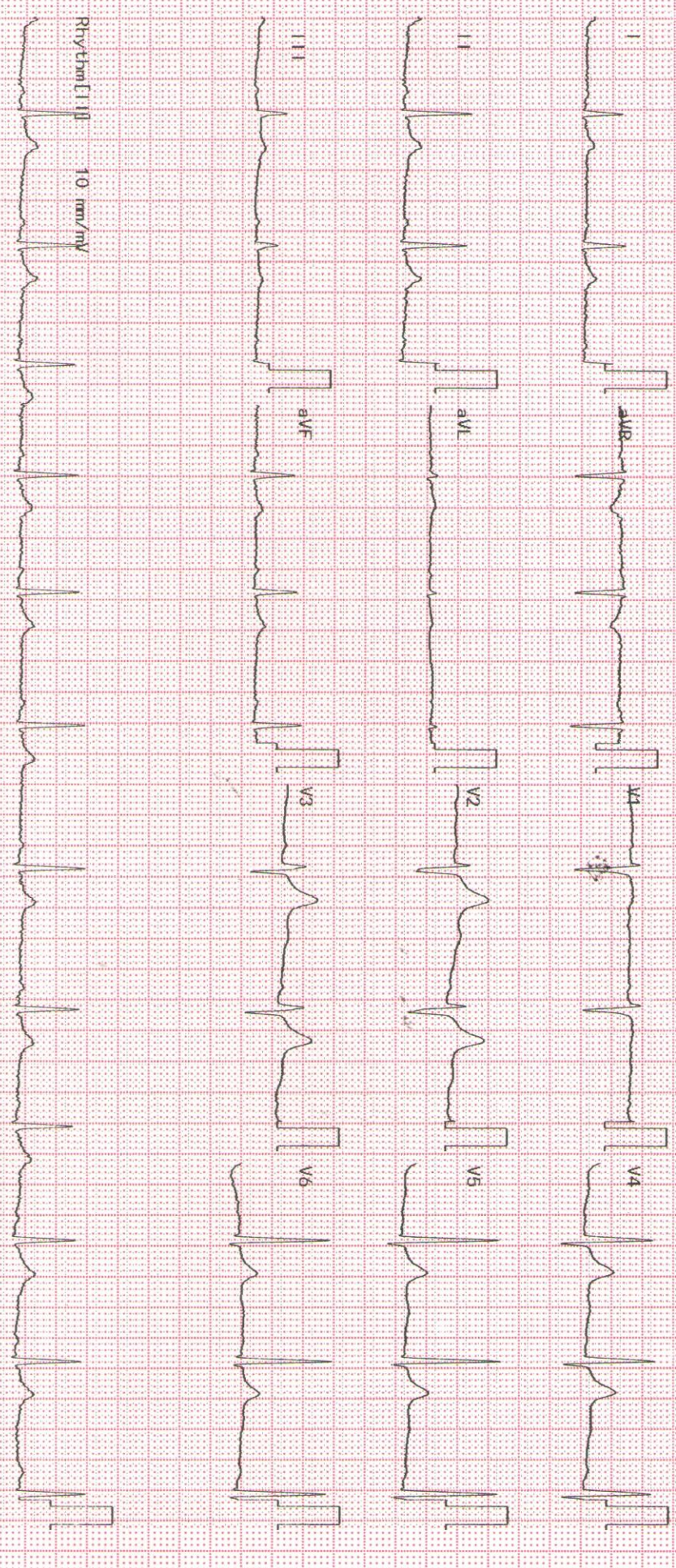


Name: pr adeep  
 Sex: M Birth date: / / mm/yy  
 cm kg  
 Medication:  
 Symptoms:  
 History:  
 Vent. rate 72 bpm  
 PR int 160 ms  
 QRS dur 88 ms  
 QT/QTc (E) int 334/ 358 ms  
 P/ORS/T axis 55/ 54/ 51  
 RV5/SV1 amp 1.65/ 0.87 mV  
 RV5+SV1 amp 2.52 mV

35 years  
 1100 Sinus rhythm  
 1102 Sinus arrhythmia  
 8305 Short QTc interval  
 9150 \*\* abnormal ECG \*\*

Unconfirmed Report  
 Reviewed by:  
 MR. SHARMA/PRADEEP KUMAR  
 Ref: PS005683-Reg: OP/S00004366  
 35.1.11/M - NH - 17/07/2023  
 P00000540538 -

10 mm/mV 25 mm/s Filter: H60 D 35 Hz 10 mm/mV 10 mm/mV 10 mm/mV



2350K 02-03 04-05 Dept: Exm: RUBY HALL CLINIC HINJERADI





Grant Medical Foundation

**Ruby Hall Clinic**

Pimple Saudagar

Mr. Pradeep Sharma

35/M.

17/7/23

K/d Asthma

↳ sexoflow 250

1-0-1

FIH

Mother - Nil

Father - (?) CAD

Height - 168 cm

Weight - 83

Asymptomatic.

O/E

conscious oriented.

BP - 128/80.

P.R - soft

CVS - S<sub>1</sub>+S<sub>2</sub>+

RS - NO Rhund

P/A - SN

LD - w

ECG w/w

**Patient Name** : Mr.SHARMA PRADEEP KUMAR  
**Age / Gender** : 35Y(s) 1M(s) 11D(s)/Male  
**Bill No/UHID No** : PS005683/P00000540538  
**Lab No/Result No** : 2300048130/88470  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 17-07-2023 08:55 AM  
**Collected Date** : 17-07-2023 08:56 AM  
**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 12:03 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



### DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
<b>BUN</b>			
Urea Nitrogen(BUN)	:8.88	mg/dL	6.0 - 20.0
<i>Method : Calculated</i>			
Urea	:19	mg/dL	12.8-42.8
<i>Method : Urease</i>			
<b>CALCIUM</b>			
Calcium	:8.9	mg/dL	8.6 - 10.2
<i>Method : Arsenazo</i>			
<b>CREATININE</b>			
Creatinine	:0.9	mg/dL	0.6 - 1.3
<i>Method : Enzymatic</i>			
<b>FBS</b>			
Glucose (Fasting).	:80	mg/dL	Prediabetic : 100 - 125 Diabetic : >= 126 Normal : < 100.0
<i>Method : GOD-POD</i>			

REFERENCE : ADA 2015 GUIDELINES

### LFT

Total Bilirubin	:0.3	mg/dL	0.3 - 1.2
<i>Method : Diazo</i>			
Direct Bilirubin	:0.2	mg/dL	0-0.4
<i>Method : Diazo</i>			
Indirect Bilirubin	:0.1	mg/dL	0.0 - 0.8
<i>Method : Diazo</i>			
Alanine Transaminase (ALT)	:30.0	U/L	<50
<i>Method : Kinetic</i>			
Aspartate Transaminase (AST)	:25.0	U/L	10.0 - 40.0
<i>Method : Kinetic</i>			
Alkaline Phosphatase	:102.0	U/L	30.0 - 115.0
<i>Method : 4NPP/AMP BUFFER</i>			
Total Protein	:7.3	g/dl	6.0 - 8.0
<i>Method : Biuret</i>			
Albumin	:4.1	g/dl	3.5-4.8
<i>Method : BCG</i>			
Globulin	:3.2	gm/dL	2.3-3.5
<i>Method : Calculated</i>			

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A/G Ratio : 1.28  
Method : Calculated

### PHOSPHOROUS

Phosphorus : 3.2 mg/dL 2.7-4.5  
Method : Phospho Molybdate

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

Total Protein : 7.3 g/dl 6.0 - 8.0  
Method : Biuret  
Albumin : 4.1 g/dl 3.5-4.8  
Method : BCG  
Globulin : 3.2 gm/dL 2.3-3.5  
Method : Calculated  
A/G Ratio : 1.28  
Method : Calculated

### URIC ACID

Uric Acid : 6.3 mg/dL 3.5-7.2  
Method : Uricase

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

**Verified By**  
SANDEEP

**Dr. Anjana Sanghavi**  
Consultant Pathologist

**NOTE :**

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.
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**Received Date** : 17-07-2023 08:56 AM  
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**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>ELECTROLYTES (Na &amp; K)</b>			
Sodium <i>Method : Potentiometric</i>	: 143.0	mmol/L	136.0 - 145.0
Potassium <i>Method : Potentiometric</i>	: 4.4	mmol/L	3.5 - 5.1
Chloride <i>Method : Potentiometric</i>	: 104.0	mmol/L	98.0 - 107.0

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

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**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 11:42 AM  
**Specimen** : WHOLE BLOOD  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**GLYCOCYLATED HB% (HbA1C)**

Glycosylated Haemoglobin : 5.9 % 4-6.5  
(HbA1C)

Method : Turbidometric Inhibition  
Immunoassay

Prediabetic : 5.7 - 6.4 %  
Diabetic :  $\geq$  6.5 %  
Therapeutic Target :  $<$ 7.0 %

REFERENCE : ADA 2015 GUIDELINES

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

**Verified By**  
Ruhi S

**Dr. Anjana Sanghavi**  
Consultant Pathologist

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**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 12:06 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LIPID PROFILE</b>			
Cholesterol <i>Method : Enzymatic</i>	: 204.0	mg/dL	130.0 - 220.0
Triglycerides <i>Method : Enzymatic</i>	: <b>190</b>	mg/dL	35.0 - 180.0
HDL Cholesterol <i>Method : Enzymatic</i>	: 42	mg/dL	35-65
LDL Cholesterol <i>Method : Calculated</i>	: 124	mg/dL	10.0 - 130.0
VLDL Cholesterol <i>Method : Calculated</i>	: <b>38</b>	mg/dL	5.0-36.0
Cholestrol/HDL Ratio <i>Method : Calculated</i>	: 4.86	--	2.0-6.2

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

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SANDEEP

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**Collected Date** : 17-07-2023 02:27 PM  
**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 04:42 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>PPBS</b> Glucose (Post Prandial) <i>Method : GOD-POD</i>	:106	mg/dL	60-140

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

**Verified By**  
Ruhi S

**Dr.POOJA PATHAK**  
Associate Consultant

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**Collected Date** : 17-07-2023 08:56 AM  
**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 01:18 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



### DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
<b>T3-T4-TSH -</b>			
Tri-Iodothyronine, (Total T3) <i>Method : ECLIA</i>	: 1.07	ng/ml	0.87-1.78
Thyroxine (T4), Total <i>Method : ECLIA</i>	: 8.22	ug/dl	4.6 - 10.5
Thyroid Stimulating Hormone (Ultra). <i>Method : ECLIA</i>	: 2.05	uIU/mL	0.28-3.89

1.The TSH levels are subject to diurnal/circadian variation. reaching to peak level between 2 to 4 am. and at a minimum between 6 to 10 pm. The variation is to the order of 50%, hence the time when sample is collected has influence on the levels of TSH. 2.Many substances produced in central nervous system, even in healthy euthyroid individuals, may enhance or suppress TSH production in addition to the feedback effect of thyroid hormone. 3.Furthermore, although TSH levels rise and fall in response to changes in the concentration of Free T4, individuals appear to have their own setpoints and factors such as race and age also contribute to variability in TSH levels. Alterations of normal pituitary response are also common in patients with a variety of illnesses which can affect the levels of TSH. 4.Interassay variations are possible on different Immunoassay platforms.

TSH - For pregnancy the reference range is as follows -  
1st trimester : 0.6 - 3.4 uIU/mL  
2nd trimester : 0.37 - 3.6 uIU/mL  
3rd trimester : 0.38 - 4.04 uIU/mL

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

**Verified By**  
Ruhi S

**Dr.Anjana Sanghavi**  
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**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 03:33 PM  
**Specimen** : URINE  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>URINE ROUTINE</b>			
<b>PHYSICAL EXAMINATION</b>			
Colour	: Pale Yellow		
Appearance	: Clear		
<b>CHEMICAL TEST</b>			
Ph	: 6.0		5.0-7.0
Specific Gravity	: 1.025		1.015-1.030
Albumin	: Absent		Abset
Urine Sugar	: Absent	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments/ Bilirubin	: Absent		Absent
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent
Leucocytes Esterase	: Absent		Absent
<b>MICROSCOPIC TEST</b>			
Pus Cells.	: 1-2	/hpf	0 - 5
Red Blood Cells.	: Absent	/hpf	0 - 2
Epithelial Cells.	: 1-2	/hpf	0-5
Bacteria	: Absent	/hpf	Absent
Cast	: Absent		Absent
Yeast Cells	: Absent		Absent
Crystals	: Absent		Absent
Others	: Absent		Absent

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

**Verified By**  
AMOL

**Dr.POOJA PATHAK**  
Associate Consultant

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**Collected Date** : 17-07-2023 08:56 AM  
**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 02:25 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK**

Investigation	Result	Units	Biological Reference Interval
Blood Group	: B RH POSITIVE		

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

**Verified By**  
Ardeore

**Dr.POOJA PATHAK**  
Associate Consultant

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**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 03:08 PM  
**Specimen** : EDTA WHOLE BLC  
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**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**ESR**

ESR At 1 Hour : **19** mm/hr 0 - 15

Method : 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 \*\*\*

**Verified By**  
Shrikant.A

**Dr.POOJA PATHAK**  
**Associate Consultant**

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**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>HAEMOGRAM/CBC/CYTO</b>			
<b>W.B.C.Count</b>	: 6780	/ul	4000-11000
<i>Method : Coulter Principle</i>			
Neutrophils	: 41.9	%	40-75
<i>Method : Derived from WBC Histogram</i>			
Lymphocytes	: 33.8	%	20-40
Monocytes	: 8.6	%	2-10
Eosinophils	: <b>14.7</b>	%	1.0-6.0
Basophils	: 1.0	%	0.0-1.0
%Immature Granulocytes	: 0.3	%	0.00-0.10
Absolute Neutrophil Count	: 2.8	x10 <sup>3</sup> cells/ul	2-7
<i>Method : Calculated</i>			
Absolute Lymphocyte Count	: 2.3	x10 <sup>3</sup> cells/ul	1 - 3
<i>Method : Calculated</i>			
Absolute Monocyte Count	: 0.6	x10 <sup>3</sup> cells/ul	0.2-1.0
<i>Method : Calculated</i>			
Absolute Eosinophil Count	: <b>1.0</b>	x10 <sup>3</sup> cells/ul	0.02-0.5
<i>Method : Calculated</i>			
Absolute Basophil Count	: 0.1	x10 <sup>3</sup> cells/ul	0.02-0.1
<i>Method : Calculated</i>			
R.B.C Count	: 4.69	million/ul	4.5 - 6.5
<i>Method : Coulter Principle</i>			
<b>Haemoglobin</b>	: 15.0	g/dl	13 - 17
<i>Method : Cyanmethemoglobin Photometry</i>			
Haematocrit	: 46.2	%	40-50
<i>Method : Calculated</i>			
MCV	: 98.5	fl	83-99
<i>Method : Coulter Principle</i>			
MCH	: 32.0	pg	27 - 32
<i>Method : Calculated</i>			
MCHC	: 32.5	g/dl	31.5 - 34.5
<i>Method : Calculated</i>			
RDW	: 13.3	%	11.6-14.0
<i>Method : Calculated From RBC Histogram</i>			
<b>Platelet Count</b>	: 266.0	x10 <sup>3</sup> /ul	150 - 450
<i>Method : Coulter Principle</i>			
MPV	: <b>11.3</b>	fl	7.8-11
<i>Method : Coulter Principle</i>			



**Patient Name** : Mr.SHARMA PRADEEP KUMAR  
**Age / Gender** : 35Y(s) 1M(s) 11D(s)/Male  
**Bill No/UHID No** : PS005683/P00000540538  
**Lab No/Result No** : 2300048132/88470  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 17-07-2023 08:55 AM  
**Collected Date** : 17-07-2023 08:56 AM  
**Received Date** : 17-07-2023 08:56 AM  
**Report Date** : 17-07-2023 11:33 AM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



RBC Morphology : Normocytic  
normochromic

WBC Morphology : Eosinophilia  
Platelet : Adequate

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

**Verified By**  
Ruhi S

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

**NOTE :**

- \* Clinically correlate, Kindly discuss if necessary.
- \* This report relates only to the item received.
- \* For Terms and Conditions of Reporting, kindly visit our website : [www.Rubyhall.com](http://www.Rubyhall.com)