

26.08.2023 9:55:35

Location:
Room:
Order Num:
Indics
Medication 1:
Medication 2:
Medication 3:

Normal sinus rhythm
Normal ECG

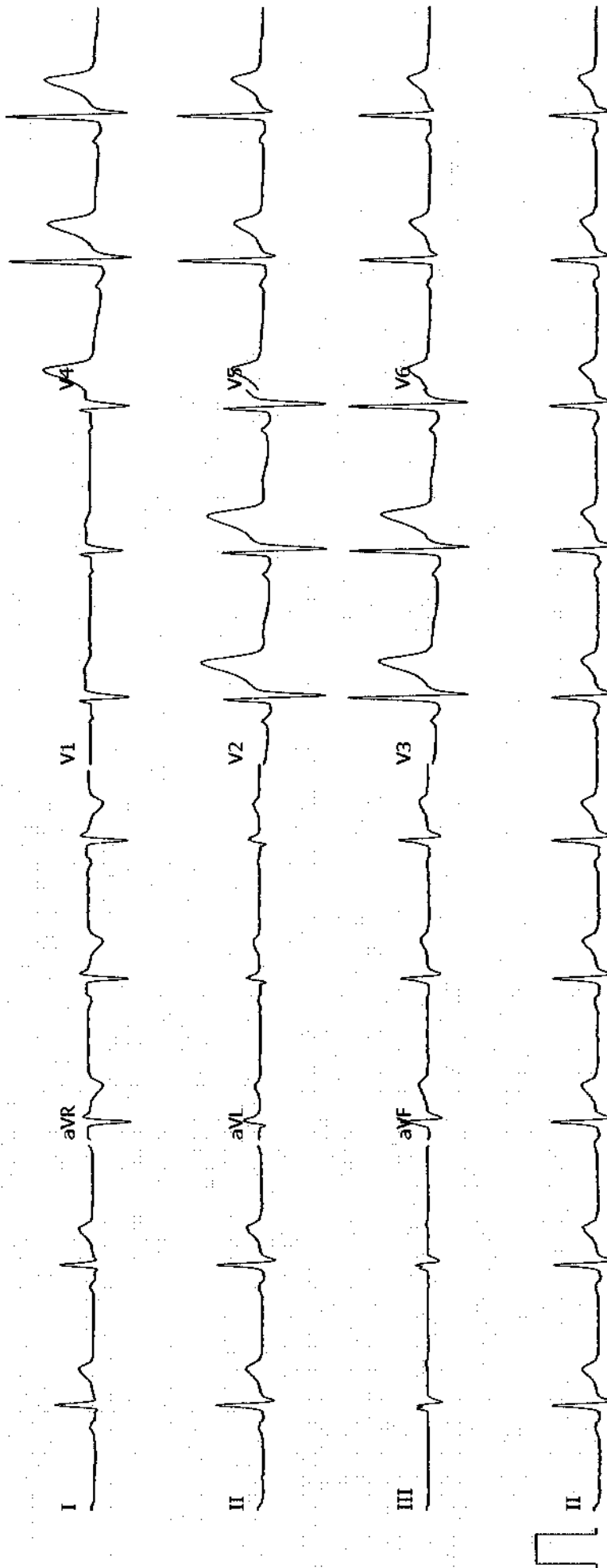
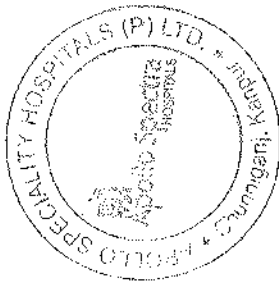
QRS : 90 ms
QT / QTcBaz : 374 / 382 ms
PR : 146 ms
P : 88 ms
RR / PP : 954 / 952 ms
P / QRS / T : 19 / 45 / 31 degrees

63 bpm

-- / -- mmHg

Mr Sudip Biswas
Age → 33/M
WT → 61 kg
Height → 159 cm

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



Vu { R.E! 2.50 sph - 6/c
 L.E! 4.00 sph 6/c
 (Distant)

NAME Mr. Poojara
 DATE 26/08/23.
 (VD = 12.00)

<R>	S	C	A
-	2.75		
-	2.75		
-	2.50		
*	2.75		

<L>	S	C	A
-	4.00	-0.50	59
-	4.25	-0.50	49
-	4.00	-0.50	60
-	3.75	-0.50	47
-	4.00	-0.25	47
-	4.00	-0.50	59
*	4.00	-0.50	59

PD = 0mm

Nu { N/b
 N/b

Colour Vision { W-12
 AA
 no active interventions

26/08/23
 0512-2555991
 0512-2555992

Patient Name : Mr. SUDIP BISWAS

Age : 33 Y M

UHID : SKAN.0000128560

OP Visit No : SKANOPV152328

Reported on : 26-08-2023 12:24

Printed on : 26-08-2023 12:24

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal.

No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal.

No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification.

No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

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Adm/Consult Doctor :

Ref Doctor : SELF

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate is normal in size and echo texture.No evidence of necrosis/calcification seen.

II RESSION:-

No significant abnormality detected.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

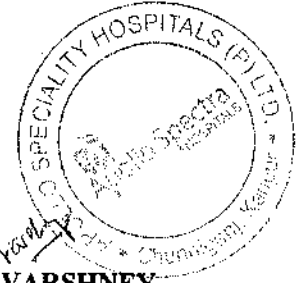
Printed on:26-08-2023 12:24

---End of the Report---

Dr. DUSHYANT KUMAR VARSHNEY

MD, DNB

Radiology



Patient Name :- MR SUDIP BISWAS	Date :- 26 August 2023
Referred By :- MHC	Age/Sex: 33Y/MALE
IPD/OPD:- OPD	UHID NO-128560

HEART STATION ECHO REPORT

PROCEDURES:	M-MODE/2D/DOPPLER/COLOR/CONTRAST	B.S.A. M²
MEASUREMENTS:		NORMAL
Aortic root diameter	2.3	2.0-3.7 cm < 2.2 cm
Aortic valve opening	1.8	1.5-2.6 cm
Right ventricular dimension	2.5	0.7-2.6 cm < 1.4 cm / M ²
Right atrial dimension	2.3	0.3-2.9 cm
Left atrial dimension	1.4	1.9-4.0 cm < 2.2 cm / M ²
Left ventricular ED dimension	4.3	3.7-5.6 cm < 3.2 cm / M ²
Left ventricular ES dimension	2.8	2.2-4.0 cm
Interventricular septal thickness	ED 1.1 ES 1.6	0.6-1.2 cm
Left vent PW thickness	ED 1.3 ES 1.7	0.5-1.0 cm

INDICES OF LEFT VENTRICLE FUNCTION

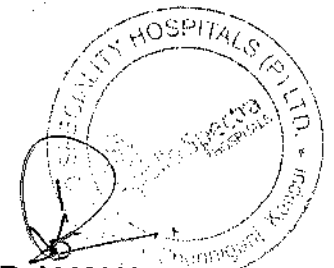
LV Ejection Fraction 60% 60-62%

DOPPLER

MV	90	Cm/sec	MR	Nil
AoV	111	Cm/sec	AI	Nil
TV	85	Cm/sec	TR	Nil
PV	72	Cm/sec	PI	Nil

FINAL DIAGNOSIS:

- Normal cardiac chamber dimensions.
 - No regional wall motion abnormality.
 - LVEF 60%
 - Normal valves and flows.
 - No evidence of pericardial effusion.
 - No evidence of RHD/ASD/VSD/PDA.
 - No LA/LV, Clot/Vegetation/mass
- (Kindly correlate clinically and further investigation)



DR. V K YADAV
MD, DM (Cardiology)
Consultant Cardiologist

Please correlate clinically
 Kindly Note

Please intimate us for any typing mistakes and send the report for correction within 7 days.
 The science of Radiological diagnosis is based on the interpretation of various shadows produced by both the normal and abnormal tissues and are not always conclusive. Further biochemical and radiological investigation & clinical correlation is required to enable the clinician to reach the final diagnosis.

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Registered Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad-500 016, Telangana, India.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE



Consultant Pathologist :
Dr. Poonam Kainth
 M.D. (Pathology)
Dr. Ritu Pradhan
 M.D. (Pathology)

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS **Age / Gender** : 33Y/Male
UHID/MR No. : SKAN.0000128560 **OP Visit No** : SKANOPV152328
Sample Collected on : 26-08-2023 09:42 **Reported on** : 26-08-2023 14:07
LRN# : LAB13073216 **Specimen** : Blood(EDTA)
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
 ANNUAL PLUS MALE - 2D ECHO - PAN INDIA -
 FY2324
Emp/Auth/TPA ID : 107756 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	14.4	13 - 17	g/dL
RBC Count Method: Electrical Impedance	4.70	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	41.5	40 - 50	%
MCV Method: Calculated	88.3	83 - 101	fl
MCH Method: Calculated	30.6	27 - 32	pg
MCHC Method: Calculated	34.7*	31.5 - 34.5	g/dl
RDW	13.6	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.50	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	4400	4000 - 11000	cells/cumm



Results are to be correlated clinically

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Excel Hospitals (P) Ltd.

Dr. SAHINDER SINGH
 SONI
 MD 38, Chunniganj, Kanpur - 208001
 Ph. 0512-2555991, 2555992
 Email: excelhospitals@gmail.com
 ♦ Emergency No. 9935577550



Consultant Pathologist :
Dr. Poonam Kainth
 M.D. (Pathology)
Dr. Ritu Pradhan
 M.D. (Pathology)

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS	Age / Gender : 33Y/Male
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Sample Collected on : 26-08-2023 09:42	Reported on : 26-08-2023 14:07
LRN# : LAB13073216	Specimen : Blood(EDTA)
Ref Doctor : SELF	
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Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)

Neutrophils	50	40 - 80	%
Lymphocytes	47*	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	01	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	12	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
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BLOOD GROUP ABO AND RH FACTOR

ABO Method: Microplate Hemagglutination	A
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE

End of the report



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Excel Hospitals (P) Ltd.
 Pathology, 0512-2555991, 2555992
 Email : excelhospitals@gmail.com
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 M.D. (Pathology)
Dr. Ritu Pradhan
 M.D. (Pathology)

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS	Age / Gender : 33Y/Male
UHID/MR No. : SKAN.0000128560	OP Visit No : SKANOPV152328
Sample Collected on : 26-08-2023 09:42	Reported on : 26-08-2023 14:09
LRN# : LAB13073216	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Emp/Auth/TPA ID : 107756	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology	: Microscopic
RBC	: Normocytic Normochromic
WBC	: Within Normal limits.DLC is as mentioned.
Platelets	: Adequate in Number
Parasites	: No Haemoparasites seen
IMPRESSION	: Normocytic normochromic blood picture
Note/Comment	: Please Correlate clinically

End of the report



Results are to be correlated clinically

Dr. SATINDER SINGH

Excel Hospitals (P) Ltd.

Pathology

14/138, Chunniganj, Kanpur - 208001
 Ph. 0512-2555991, 2555992
 Email : excelhospitals@gmail.com
 ♦ Emergency No. 9935577550

Lab Technician / Technologist

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Consultant Pathologist :

Dr. Poonam Kainth

M.D. (Pathology)

Dr. Ritu Pradhan

M.D. (Pathology)

DEPARTMENT OF LABORATORY SERVICES

Patient Name :	Mr. SUDIP BISWAS	Age / Gender :	33Y/Male
UHID/MR No. :	SKAN.0000128560	OP Visit No :	SKANOPV152328
Sample Collected on :	26-08-2023 09:42	Reported on :	26-08-2023 17:32
LRN# :	LAB13073216	Specimen :	Serum
Ref Doctor :	SELF		
Package Name :	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID :	107756	Adm/Consult Doctor :	
Sponsor Name :	ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT	19	< 55	U/L
Method: Kinetic Photometric			
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA	0.8	0.7 - 1.3	mg/dl
Method: Jaffe's Kinetic			
URIC ACID - SERUM	6.0	3.5 - 7.2	mg/dl
Method: Modified Uricase			
UREA - SERUM/PLASMA	19	Male: 19 - 43	mg/dl
Method: Urease with indicator dye			
CALCIUM	8.64	8.5 - 10.1	mg/dl
Method: O-Cresolphthalein complexone			
BUN	8.86*	9-20	mg/dl
Method: Urease with indicator dye			
ELECTROLYTES (Na)	139	135 - 145	meq/L
Method: ISE-Direct			
ELECTROLYTES (K)	4.0	3.5 - 5.1	meq/L
Method: ISE-Direct			
GLUCOSE, FASTING			



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 Pathology 0512-2555991, 2555992
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M.D. (Pathology)

Dr. Ritu Pradhan

M.D. (Pathology)

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS **Age / Gender** : 33Y/Male
UHID/MR No. : SKAN.0000128560 **OP Visit No** : SKANOPV152328
Sample Collected on : 26-08-2023 09:42 **Reported on** : 26-08-2023 17:32
LRN# : LAB13073216 **Specimen** : Serum
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
 ANNUAL PLUS MALE - 2D ECHO - PAN INDIA -
 FY2324
Emp/Auth/TPA ID : 107756 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

FASTING SUGAR	88	70 - 110	mg/dl
Method: GOD-PAP			
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)			
GLUCOSE - SERUM / PLASMA (POST PRANDIAL)	107	70 - 140	mg/dl
Method: Glucose Oxidase-Peroxidase			
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	1.52*	0.2 - 1.3	mg/dL
Method: Azobilirubin/dyphylline			
BILIRUBIN (DIRECT)	0.49	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
Method: Dual Wavelength Spectrophotometric			
BILIRUBIN UNCONJUGATED(INDIRECT)	1.03	0.0 - 1.1	mg/dL
Method: Dual Wavelength Spectrophotometric			
ALBUMIN	5.0	3.0 - 5.0	g/dL
Method: Bromocresol Green dye binding			
PROTEIN TOTAL	7.5	6.0 - 8.2	g/dL
Method: Biuret Reaction			
AST (SGOT)	21	14 - 36	U/L
Method: Kinetic (Leuco dye) with P 5 P			
GLOBULIN	2.5*	2.8 - 4.5	g/dL
Method: Calculation			
ALT(SGPT)	28	9 - 52	U/L



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 KAN. EHL/003
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DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS **Age / Gender** : 33Y/Male
UHID/MR No. : SKAN.0000128560 **OP Visit No** : SKANOPV152328
Sample Collected on : 26-08-2023 09:42 **Reported on** : 26-08-2023 17:32
LRN# : LAB13073216 **Specimen** : Serum
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
 ANNUAL PLUS MALE - 2D ECHO - PAN INDIA -
 FY2324
Emp/Auth/TPA ID : 107756 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

LIPID PROFILE

CHOLESTEROL	175	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
Method: CHOD-End Point POD (Enzymatic)			
HDL	53	<40 - Low ≥60 - High	mg/dL
Method: Direct Measure PEG			
LDL	104.4	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
Method: Calculation Friedewald's Formula			
TRIGLYCERIDES	88	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥ 500	mg/dl
Method: Enzymatic GPO/POD/End Point			
VLDL	17.6	10-40	mg/dL
Method: Calculated			

Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.

End of the report



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 Dr. Ritu Pradhan

MD88, Chunniganj, Kanpur - 208001
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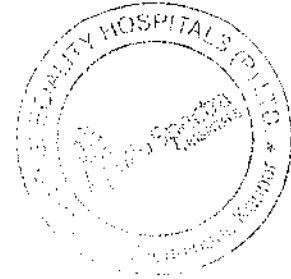
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DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS **Age / Gender** : 33Y/Male
UHID/MR No. : SKAN.0000128560 **OP Visit No** : SKANOPV152328
Sample Collected on : 26-08-2023 09:42 **Reported on** : 26-08-2023 14:15
LRN# : LAB13073216 **Specimen** : Urine
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY
 ANNUAL PLUS MALE - 2D ECHO - PAN INDIA -
 FY2324
Emp/Auth/TPA ID : I07756 **Adm/Consult Doctor** :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.005	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	5.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	1-2	2-3	/hpf



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Excel Hospitals (P) Ltd.

MD. SANKU DEB SINGH
 SGT
 14/38, Chunniganj, Kanpur - 208001
 Pathology. 0512-2555991, 2555992
 Email : excelhospitals@gmail.com
 ♦ Emergency No. 9935577550



Consultant Pathologist :
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M.D. (Pathology)
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DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mr. SUDIP BISWAS
UHID/MR No. : SKAN.0000128560
Sample Collected on : 26-08-2023 09:42
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Emp/Auth/TPA ID : 107756
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 33Y/Male
OP Visit No : SKANOPV152328
Reported on : 26-08-2023 14:15
Specimen : Urine
Adm/Consult Doctor :

RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

End of the report

Results are to be correlated clinically

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Excel Hospitals (P) Ltd.

MD8, Chunniganj, Kanpur - 208001
Pathology
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550



SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MR. SUDIP BISWAS

Age / Gender : 33 years / Male

Patient ID : 36315

Source : Excel Hospital

Referral : SELF

Collection Time : 26/08/2023, 01:36 p.m.

Reporting Time : 26/08/2023, 04:56 p.m.

Sample ID :



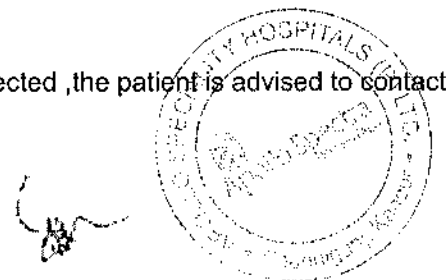
Test Description	Value(s)	Reference Range	Unit(s)
T3,T4,TSH			
SAMPLE TYPE : SERUM			
T3 Method : CLIA	0.98	0.79 - 1.58	ng/mL
T4 Method : CLIA	7.87	5.2-12.7	µg/dL
TSH Method : CLIA	1.72	0.3-4.5	µIU/mL

Interpretation

TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS; RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.



Dr. S.S.Soni
M.D. (PATHOLOGY)

All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.



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Age / Gender : 33 years / Male

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Source : Excel Hospital

Referral : SELF

Collection Time : 26/08/2023, 01:36 p.m.

Reporting Time : 26/08/2023, 04:56 p.m.

Sample ID :



232380019

Test Description	Value(s)	Reference Range	Unit(s)
HbA1C			
Sample Type : EDTA			
HbA1C	5.5	Normal - Less than 5.7 Prediabetes - 5.7% - 6.4 Diabetes - 6.5% or Higher	%
Method : Nephelometry			

A1C	Average Blood Sugar
%	mg/dL
6.0	126
6.5	140
7.0	154
7.5	169
8.0	183
8.5	197
9.0	212
9.5	226
10.0	240
11.0	269
12.0	298

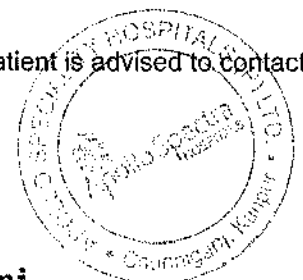
****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni

M.D. (PATHOLOGY)

All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.





भारत सरकार, विश्वविद्यालय कक्षा अधिकरण

Unique Identification Authority of India

Address: S/O Prabhatal Biswas,
Vill Bablaban Po Chandannagar
Ps Krishnaganj, Chandan Nagar,
Chandannagar, Nadia, West
Bengal, 741509

6594 5353 4447



1947



help@uidai.gov.in



www.uidai.gov.in



भारत सरकार



Sudip Biswas

DOB: 12/12/1989

Male

6594 5353 4447



मेरा आधार, मेरी पहचान

Patient Name : Mr. SUDIP BISWAS

Age/Gender : 33 Y/M

UHID/MR No. : SKAN.0000128560

OP Visit No : SKANOPV152328

Sample Collected on : 26-08-2023 09:42

Reported on : 26-08-2023 17:32

LRN# : LAB13073216

Specimen : Serum

Ref Doctor : SELF

Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D
ECHO - PAN INDIA - FY2324

Emp/Auth/TPA ID : 107756

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT Method: Kinetic Photometric	19	< 55	U/L
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	0.8	0.7 - 1.3	mg/dl
URIC ACID - SERUM Method: Modified Uricense	6.0	3.5 - 7.2	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	19	Male: 19 - 43	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.64	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	8.86*	9-20	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	139	135 - 145	meq/L
ELECTROLYTES (K) Method: ISE-Direct	4.0	3.5 - 5.1	meq/L
GLUCOSE, FASTING			
FASTING SUGAR Method: GOD-PAP	88	70 - 110	mg/dl
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)			
GLUCOSE - SERUM / PLASMA (POST PRANDIAL) Method: Glucose Oxidase-Peroxidase	107	70 - 140	mg/dl
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL Method: Azobilirubin/dyphylline	1.52*	0.2 - 1.3	mg/dL
BILIRUBIN (DIRECT) Method: Dual Wavelength Spectrophotometric	0.49	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
BILIRUBIN UNCONJUGATED(INDIRECT) Method: Dual Wavelength Spectrophotometric	1.03	0.0 - 1.1	mg/dL
ALBUMIN Method: Bromocresol Green dye binding	5.0	3.0 - 5.0	g/dL
PROTEIN TOTAL Method: Biuret Reaction	7.5	6.0 - 8.2	g/dL
AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	21	14 - 36	U/L
GLOBULINN Method: Calculation	2.5*	2.8 - 4.5	g/dL
ALT(SGPT)	28	9 - 52	U/L
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	175	<200 - Desirable 200-239 - Borderline High >=240 - High	mg/dL
HDL Method: Direct Measure PEG	53	<40 - Low >=60 - High	mg/dL
LDL	104.4	< 100 - Optimal	

Patient Name : Mr. SUDIP BISWAS

Age/Gender : 33 Y/M

Method: Calculation Friedewald's Formula

TRIGLYCERIDES

Method: Enzymatic GPO/POD/End Point

88

100-129 - Near Optimal & Above Optimal

Normal : <150

Border High : 150 - 199

High : 200 - 499

Very High : \geq 500

Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.

mg/dl

VLDL

Method: Calculated

17.6

10-40

mg/dL

---End Of Report---

Patient Name	: Mr. SUDIP BISWAS	Age/Gender	: 33 Y/M
UHID/MR No.	: SKAN.0000128560	OP Visit No	: SKANOPV152328
Sample Collected on	: 26-08-2023 09:42	Reported on	: 26-08-2023 17:27
LRN#	: LAB13073216	Specimen	: Serum(Spl)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 107756		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)			
TOTAL T3: TRI IODOTHYRONINE - SERUM Method: CLIA	0.98	0.6 - 1.81 ng/mL	ng/mL
TOTAL T4: THYROXINE - SERUM Method: CLIA	7.87	3.2 - 12.6	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM Method: CLIA	1.72	0.35 - 5.5	µIU/mL
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method: HPLC	5.5	<=5.6: Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	111.15		mg/dL

---End Of Report---

Patient Name	: Mr. SUDIP BISWAS	Age/Gender	: 33 Y/M
UHID/MR No.	: SKAN.0000128560	OP Visit No	: SKANOPV152328
Sample Collected on	: 26-08-2023 09:42	Reported on	: 26-08-2023 14:15
LRN#	: LAB13073216	Specimen	: Urine
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 107756		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.005	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	5.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	1-2	2-3	/hpf
RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

---End Of Report---

Patient Name : Mr. SUDIP BISWAS

Age/Gender : 33 Y/M

UHID/MR No. : SKAN.0000128560

OP Visit No : SKANOPV152328

Sample Collected on : 26-08-2023 09:42

Reported on : 26-08-2023 14:09

LRN# : LAB13073216

Specimen : Blood(EDTA)

Ref Doctor : SELF

Emp/Auth/TPA ID : 107756

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : Within Normal limits.DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

---End Of Report---

Patient Name	: Mr. SUDIP BISWAS	Age/Gender	: 33 Y/M
UHID/MR No.	: SKAN.0000128560	OP Visit No	: SKANOPV152328
Sample Collected on	: 26-08-2023 09:42	Reported on	: 26-08-2023 14:07
LRN#	: LAB13073216	Specimen	: Blood(EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 107756		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	14.4	13 - 17	g/dL
RBC Count Method: Electrical Impedance	4.70	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	41.5	40 - 50	%
MCV Method: Calculated	88.3	83 - 101	fl
MCH Method: Calculated	30.6	27 - 32	pg
MCHC Method: Calculated	34.7*	31.5 - 34.5	g/dl
RDW	13.6	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.50	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	4400	4000 - 11000	cells/cumm
Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)			
Neutrophils	50	40 - 80	%
Lymphocytes	47*	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	01	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	12	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	A		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

---End Of Report---

Patient Name	: Mr. SUDIP BISWAS	Age/Gender	: 33 Y/M
UHID/MR No.	: SKAN.0000128560	OP Visit No	: SKANOPV152328
Sample Collected on	:	Reported on	: 26-08-2023 12:24
LRN#	: RAD2082818	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 107756		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal.
No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal.
No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification.
No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and
CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening
or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate is normal in size and echo texture.No evidence of necrosis/calcification seen.

IMPRESSION:-

No significant abnormality detected.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation

Patient Name : Mr. SUDIP BISWAS **Age/Gender** : 33 Y/M

finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. DUSHYANT KUMAR VARSHNEY
MD, DNB
Radiology