

MER- MEDICAL EXAMINATION REPORT

Date of Examination	23/12/2023	
NAME	Rohit Karaki	
AGE	33	Gender Male
HEIGHT(cm)	155	WEIGHT (kg) 80
B.P.	118/80	
ECG	Normal	
X Ray	Normal	
Vision Checkup	Color Vision : Normal	
	Far Vision Ratio : } Normal	
	Near Vision Ratio : }	
Present Ailments	NA	
Details of Past ailments (If Any)	NA	
Comments / Advice : She /He is Physically Fit	Fit	


 Dr. Vipul Chavda
 MD (Internal Medicine)
 Reg. No. G-18004


Signature with Stamp of Medical Examiner



NAME :	PANUGANTI VENKATA HARSHA	DATE :	23/12/2023
AGE/SEX:	32Y/M	REG.NO :	00
REFERRED BY: HEALTH CHECK UP			

X-RAY CHEST PA VIEW

- Both lung fields are clear.
- No evidence of consolidation or Koch's lesion seen.
- Heart size is within normal limit.
- Both CP angles are clear.
- Both dome of diaphragm appear normal.
- Bony thorax under vision appears normal.


Dr. VIDHI SHAH
MD RADIODIAGNOSIS

Rohit. M/33

→ $\frac{1}{5}$ extr. → $\frac{1}{5}$ implant

→ $\frac{8}{8}$ extr.

→ scaling advised.

Jayant

NAME :	ROHIT KARKI	DATE :	23/12/2023
AGE/SEX:	33Y/M	REG.NO :	00
REFERRED BY: HEALTH CHECK UP			

X-RAY CHEST PA VIEW

- Both lung fields are clear.
- No evidence of consolidation or Koch's lesion seen.
- Heart size is within normal limit.
- Both CP angles are clear.
- Both dome of diaphragm appear normal.
- Bony thorax under vision appears normal.


Dr. Vidhi Shah
M.D. Radiologist
G - 41469
Dr. VIDHI SHAH
MD RADIODIAGNOSIS

NAME :	ROHIT KARKI	DATE :	23/12/2023
AGE/SEX:	33Y/M	REG.NO :	00
REFERRED BY: HEALTH CHECK UP			

USG ABDOMEN

LIVER: normal in size & bright in echotexture s/o fatty liver grade I. No evidence of dilated IHBR. No evidence of focal or diffuse lesion. CBD & Portal vein appears normal.

GALL-BLADDER: normal, No evidence of Gall Bladder calculi.

PANCREAS: appears normal in size & echotexture, No evidence of peri-pancreatic fluid collection.

SPLEEN: normal in size & shows normal echogenicity.

KIDNEYS: Right kidney measures 99 x 51 mm. Left kidney measures 105 x 51 mm. Both kidneys appear normal in size & echotexture. No evidence of calculus or hydronephrosis on either side.

URINARY BLADDER: appears normal and shows normal distension & normal wall thickness. No evidence of calculus or mass lesion.

PROSTATE: normal in size & echotexture.

No evidence of Ascites.

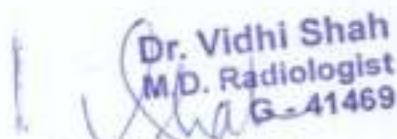
No evidence of significant lymphadenopathy.

USG WITH HIGH FREQUENCY SOFT TISSUE PROBE:

Visualized bowel loops appears normal in caliber. No evidence of focal or diffuse wall thickening. No collection in RIF.

CONCLUSION:

- Fatty liver grade I.


Dr. Vidhi Shah
 M.D. Radiologist
 G-41469
Dr. VIDHI SHAH
 MD RADIODIAGNOSIS

CONCEPT DAIGNOSTICS

Summary

121/ROHIT KABI 33 Yrs/Male 80 Kg/155 Cms
 Date: 23 Dec 2023 09:21:55 AM

Ref Sy :
 Medication : Nil
 Objective :

Protocol : BRUCE
 history :

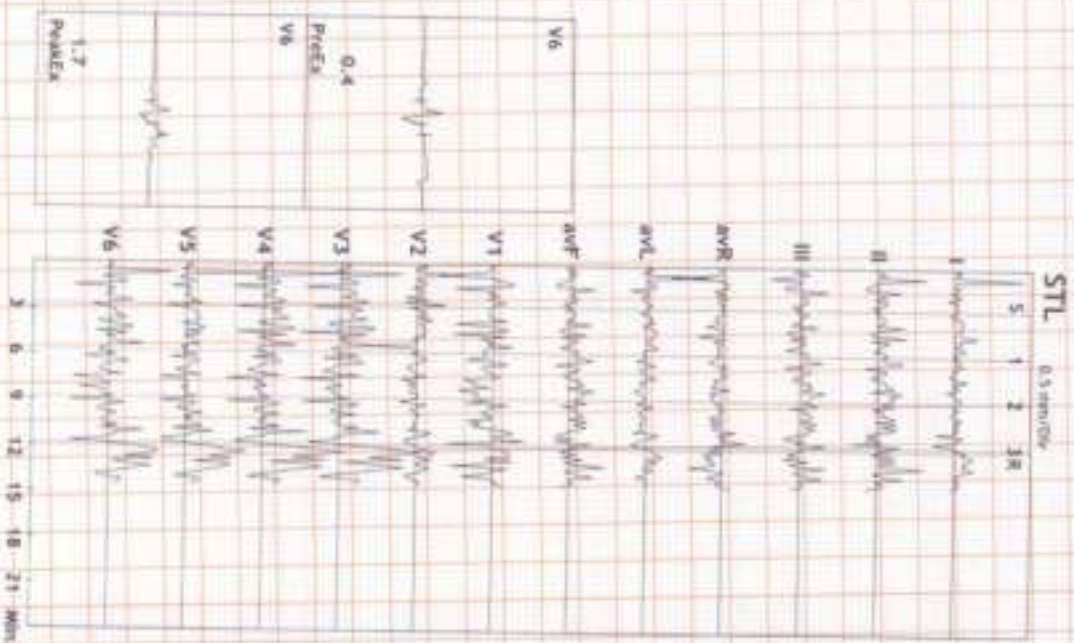
Stage	StageTime (min:sec)	PhaseTime (min:sec)	Speed (kmph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. (%)	PVC	Comments
Supine	0:01	0:55	0.0	0.0	1.0	60	124/80	74	-	
Standing	0:01	1:06	0.0	0.0	1.0	46	124/80	57	-	
HV	0:01	1:13	0.0	0.0	1.0	68	124/80	84	-	
ExStart	0:01	2:47	0.0	0.0	1.0	64	124/80	79	-	
Stage 1	3:00	3:01	2.7	10.0	4.6	45	126/80	56	-	
Stage 2	3:00	6:01	4.0	12.0	7.0	127	134/88	170	-	
Stage 3	3:00	9:01	5.5	14.0	10.2	185	142/94	262	-	
PeakEx	0:15	9:16	6.8	16.0	10.5	160	142/94	227	-	
Recovery	2:00	9:17	1.8	0.0	1.0	119	140/90	166	-	

Findings :

Exercise Time : 9:16 minutes
 Max HR attained : 185 bpm 99% of Max Predictable HR 187
 Max BP : 142/94(mmHg)
 Workload attained : 10.5 (Good Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 8:55
 Test Complete, Heart Rate Achieved

Advice/Comments:

DR. PARTH THAKKAR
 MD (Internal Medicine) (Cardiology)
 Interventional Cardiologist
 G-3-304B



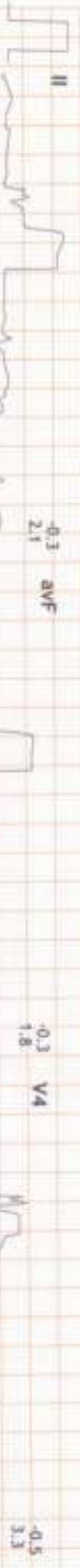
121/ROHIT KARNI
33 Yrs/Male
80 Kg/155 Cms
Date: 23-Dec-2023 09:21:55 AM

HR: 60 bpm
METYS: 1.0
BP: 124/80
Stage Report Time: 23-Dec-2023 09:23:54 AM

BRUCE
(1.0-100)Hz

Ex Time 00:55
RLC :On
Notch :On

SUPINE
10.0 mm/mV
25 mm/Sec.



II Raw Rhythm

121/ROHIT KARRI

33 Yrs/Male

80 Kg/155 Cms

Date: 23-Dec-2023 09:21:55 AM

HR: 54 bpm

MEETS: 1.0

BP: 124/80

Scale Report Time: 23-Dec-2023 09:24:04 AM

MPHR: 28% of 187

Speed: 0.0 kmph

Grade: 0.0%

BRUCE

(1.0-100)Hz

Ex Time 01:06

BLC :On

Watch :On

STANDING

10.0 mm/mV

25 mm/Sec



II Raw Rhythm

Print Date: 23-Dec-2023

121/ROHIT KARRU
33 Yrs/Male
80 Kg/155 Cms
Date: 23-Dec-2023 09:21:55 AM

HR: 67 bpm
METs: 1.0
BP: 124/80
Scale Report Time: 23-Dec 2023 09:24:11 AM

BRUCE
11.0-100Hz

Ex Time 01:13
RLC :On
Morph :On

RV
10.0 mm/mV
25 mm/Sec



121/ROHIT KARRI
33 Yrs/Male
80 Kg/155 Cms
Date: 23-Dec-2023 09:21:55 AM

HR: 65 bpm
METs: 1.0
BP: 124/80
Scale Report Time: 23-Dec-2023 09:25:45 AM

BRUCE
11.0-100Hz

Ex Time 00:00
RLC :On
Notch :On

ExStart
10.0 mm/mV
25 mm/Sec.



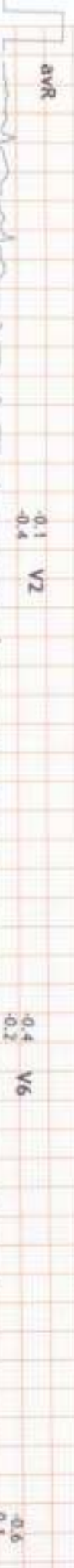
121/ROHIT KARRI
33 Yrs/Male
80 Kg/155 Cms
Date: 23-Dec-2023 09:21:55 AM

HR: 45 bpm
METS: 4.6
BP: 126/80
Stage Report Time: 23-Dec-2023 09:28:46 AM

BRUCE
(1.0-100)kt

Ex Time 03:00
EC: On
Natch: On

Stage 1 (03:00)
10.0 mm/mV
25 mm/Sec.



CONCEPT DIAGNOSTICS

121/ROBERT KARRU

33 Yrs/Male

80 Kg/155 Cms

Date: 23-Dec-2023 09:21:55 AM

Linked Medians Report

BRUCE

(1.0-500/Hz

Ex Time 06:00

BLC :On

Notch :On

Stage 2 (03:00)

10.0 mm/mV

25 mm/Sec.

HRC: 127 bpm
METS: 7.0
BP: 134/88
Stage Report Time: 23-Dec-2023 09:31:47 AM

MPHR: 67% of 187
Speed: 4.0 kmph
Grade: 12.0%



1211 ROBERT KARRD
33 yrs/Male
80 kg/155 cms
Date: 23-Dec-2023 09:21:55 AM

HR: 185 bpm
METs: 10.2
BP: 142/94
Stage Report Time: 23-Dec-2023 09:34:49 AM

BRUCE
11.0-100Hz

Ex Time 09:00
RLC -On
Meds: -On

Stage 3 (03:00)
10.0 mm/mV
25 mm/Sec



0.0

0.6

1.7

0.0

1.2

0.0

0.4

0.0

0.7

0.0

1.4

Raw Rhythm

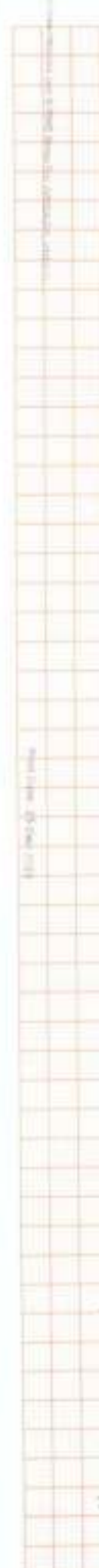
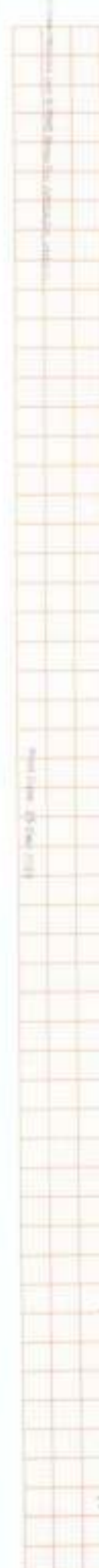
12-7-R04HT KARVI
33 Yrs/Male
80 kg/155 Cms
Date: 23-Dec-2023 09:21:55 AM

HR: 109 bpm
METS: 4.2
BP: 142/94
Stage Report Time: 23-Dec-2023 09:36:05 AM

BRUCE
11.0-100Hz

Ex Time 09:15
BLC :On
Watch :On

Recovery : (00:59)
10.0 min/mV
25 mm/Sec.



TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 10:16
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
Complete Blood Count			
<u>Specimen: EDTA blood</u>			
Hemoglobin			
Hemoglobin(SLS method)	15.2	g/dL	13.0 - 17.0
Hematocrit (calculated)	42.6	%	40 - 50
RBC Count(Ele.Impedence)	5.14	X 10 ¹² /L	4.5 - 5.5
MCV (Calculated)	L 82.9	fL	83 - 101
MCH (Calculated)	29.6	pg	27 - 32
MCHC (Calculated)	H 35.7	g/dL	31.5 - 34.5
RDW (Calculated)	12.7	%	11.5 - 14.5
Differential WBC count (Impedance and flow)			
Total WBC count	10000	/μL	4000 - 10000
Neutrophils	63	%	38 - 70
Lymphocytes	30	%	21 - 49
Monocytes	04	%	3 - 11
Eosinophils	03	%	0 - 7
Basophils	00	%	0 - 1
Platelet			
Platelet Count (Ele.Impedence)	241000	/cmm	150000 - 410000
MPV	8.80	fL	6.5 - 12.0
EDTA Whole Blood			

Note: All abnormal hemograms are reviewed and confirmed microscopically. Peripheral blood smear and malarial parasite examination are not part of CBC report.

Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Swati Shah

M.B.D.C.P.
G-5456

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Generated On : 23-Dec-2023 16:35

Approved On: 23-Dec-2023 10:16

TEST REPORT

Reg. No. : 312100657 Reg. Date : 23-Dec-2023 08:45 Ref.No : Approved On : 23-Dec-2023 13:35
Name : Mr. ROHIT KARKI Collected On : 23-Dec-2023 08:58
Age : 33 Years Gender: Male Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
ESR	5	mm/hr	17-50 Yrs : <12, 51-60 Yrs : <19, 61-70 Yrs : <20, >70 Yrs : <30

Capillary Microphotometry

Sample Type: EDTA Whole Blood

Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Avinash B Panchal

MBBS,DCP
G-44623

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Approved On: 23-Dec-2023 13:35

TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 11:35
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
<u>STOOL EXAMINATION</u>			
Quantity	3 gms		
<u>Physical examination</u>			
Colour	Brown		
Consistency	Semi solid		
Mucus	Absent		Absent
Blood(Gross Examination)	Absent		Absent
<u>Chemical examination</u>			
Reaction	Acidic		
Reducing Substance	Absent		Absent
Pus	Absent		Absent
Parasites	Absent		Absent
<u>Microscopic examination</u>			
Pus Cells	Nil		Absent
Red Cells	Nil		Absent
Epithelial Cells	Nil		Absent
Vegetable Cells	Nil		Present
Neutral Fat	Nil		Nil
Monilia	Nil		Nil
Trophozoites	Nil		Absent
Cysts	NIL		Absent
Ova	Nil		Absent
Stool			

Test done from collected sample.

This is an electronically authenticated report.



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M.B.D.C.P.
G-5456

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Approved On: 23-Dec-2023 11:35

TEST REPORT

Reg. No. : 312100657 Reg. Date : 23-Dec-2023 08:45 Ref.No : Approved On : 23-Dec-2023 10:48
Name : Mr. ROHIT KARKI Collected On : 23-Dec-2023 08:58
Age : 33 Years Gender: Male Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
BLOODGROUP & RH			
<u>Specimen: EDTA and Serum; Method: Gel card system</u>			
Blood Group "ABO" <i>Agglutination</i>	"B"		
Blood Group "Rh" <i>Agglutination</i>	Positive		
EDTA Whole Blood			

Test done from collected sample.

This is an electronically authenticated report.



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M.B.D.C.P.
G-5456

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Approved On: 23-Dec-2023 10:48

TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 11:01
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE			
CHOLESTEROL	202.00	mg/dL	Desirable <=200 Borderline high risk 200 - 240 High Risk >240
Triglyceride <i>Enzymatic Colorimetric Method</i>	H 389.00	mg/dL	<150 : Normal, 150-199 : Border Line High, 200-499 : High, >=500 : Very High
Very Low Density Lipoprotein(VLDL) <i>Calculated</i>	H 78	mg/dL	0 - 30
Low-Density Lipoprotein (LDL) <i>Calculated Method</i>	103.60	mg/dL	< 100 : Optimal, 100-129 : Near Optimal/above optimal, 130-159 : Borderline High, 160-189 : High, >=190 : Very High
High-Density Lipoprotein(HDL)	20.40	mg/dL	<40 >60
CHOL/HDL RATIO <i>Calculated</i>	H 9.90		0.0 - 3.5
LDL/HDL RATIO <i>Calculated</i>	H 5.08		1.0 - 3.4
TOTAL LIPID <i>Calculated</i>	H 1142.00	mg/dL	400 - 1000
Serum			

As a routine test to determine if your cholesterol level is normal or falls into a borderline-, intermediate- or high-risk category.
 To monitor your cholesterol level if you had abnormal results on a previous test or if you have other risk factors for heart disease.
 To monitor your body's response to treatment, such as cholesterol medications or lifestyle changes.
 To help diagnose other medical conditions, such as liver disease.
 Note : biological reference intervals are according to the national cholesterol education program (NCEP) guidelines.

Test done from collected sample.

This is an electronically authenticated report.



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M.B.D.C.P.
G-5456

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Approved On: 23-Dec-2023 11:01

TEST REPORT

Reg. No. : 312100657 **Reg. Date :** 23-Dec-2023 08:45 **Ref.No :** **Approved On :** 23-Dec-2023 11:01
Name : Mr. ROHIT KARKI **Collected On :** 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At :**
Ref. By : APOLLO **Tele No. :** 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
LIVER FUNCTION TEST			
TOTAL PROTEIN	6.89	g/dL	6.6 - 8.8
ALBUMIN	4.54	g/dL	3.5 - 5.2
GLOBULIN <i>Calculated</i>	L 2.35	g/dL	2.4 - 3.5
ALB/GLB <i>Calculated</i>	1.93		1.2 - 2.2
SGOT	19.10	U/L	<35
SGPT	16.40	U/L	<41
Alkaline Phosphatase <i>ENZYMATIC COLORIMETRIC IFCC, PNP, AMP BUFFER</i>	59.90	U/L	40 - 130
TOTAL BILIRUBIN	1.09	mg/dL	0.1 - 1.2
DIRECT BILIRUBIN	0.30	mg/dL	<0.2
INDIRECT BILIRUBIN <i>Calculated</i>	0.79	mg/dL	0.0 - 1.00
Serum			

Test done from collected sample.

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M.B.D.C.P.
G-5456

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Generated On : 23-Dec-2023 16:35

Approved On: 23-Dec-2023 11:01

TEST REPORT

Reg. No. : 312100657 Reg. Date : 23-Dec-2023 08:45 Ref.No : Approved On : 23-Dec-2023 11:00
Name : Mr. ROHIT KARKI Collected On : 23-Dec-2023 08:58
Age : 33 Years Gender: Male Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY FUNCTION TEST			
Urea	28.0	mg/dL	17 - 43
Uric Acid (UA) <i>Uricase</i>	6.83	mg/dL	3.4 - 7.0
Creatinine	0.95	mg/dL	0.67 - 1.5
Serum			

Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Swati Shah

M.B.D.C.P.
G-5456

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Generated On : 23-Dec-2023 16:35

Approved On: 23-Dec-2023 11:00

TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 15:29
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
HEMOGLOBIN A1C (HBA1C) <i>High Performance Liquid Chromatography (HPLC)</i>	5.70	%	Normal: <= 5.6 Prediabetes: 5.7-6.4 Diabetes: >= 6.5 6-7 : Near Normal Glycemia, <7 : Goal , 7-8 : Good Control ,>8 : Action Suggested.
Mean Blood Glucose <i>(Calculated)</i>	117	mg/dL	

Sample Type: EDTA Whole Blood

Criteria for the diagnosis of diabetes

- HbA1c ≥ 6.5 * Or Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs. Or
- Two hour plasma glucose ≥ 200 mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water. Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose ≥ 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34:S11.

Limitation of HbA1c

- In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population.
- Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values.
- Glycated HbF is not detected by this assay and hence specimens containing high HbF ($>10\%$) may result in lower HbA1c values than expected. Importance of HbA1C (Glycated Hb.) in Diabetes Mellitus

- HbA1C, also known as glycated hemoglobin, is the most important test for the assessment of long term blood glucose control (also called glycemic control).
 - HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
 - HbA1c is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
 - Long term complications of diabetes such as retinopathy (Eye-complications), nephropathy (kidney-complications) and neuropathy (nerve complications), are potentially serious and can lead to blindness, kidney failure, etc.
 - Glycemic control monitored by HbA1c measurement using HPLC method (GOLD STANDARD) is considered most important. (Ref. National Glycohemoglobin Standardization Program - NGSP)

Note : Biological reference intervals are according to American Diabetes Association (ADA) Guidelines.

Test done from collected sample.

This is an electronically authenticated report.



Approved by: **Dr. Hiral Arora**

M.D. Biochemistry Page 8 of 12
Reg. No.: G-32999

Generated On : 23-Dec-2023 16:35

Approved On: 23-Dec-2023 15:29

TEST REPORT

Reg. No. : 312100657 **Reg. Date :** 23-Dec-2023 08:45 **Ref.No :** **Approved On :** 23-Dec-2023 15:29
Name : Mr. ROHIT KARKI **Collected On :** 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At :**
Ref. By : APOLLO **Tele No. :** 9572766968
Location :

Bio-Rad CDM System
Bio-Rad Variant V-II Instrument #1

PATIENT REPORT
V2TURBO_A1c_2.0

Patient Data

Sample ID: 131203500524
Patient ID:
Name:
Physician:
Sex:
DOB:

Analysis Data

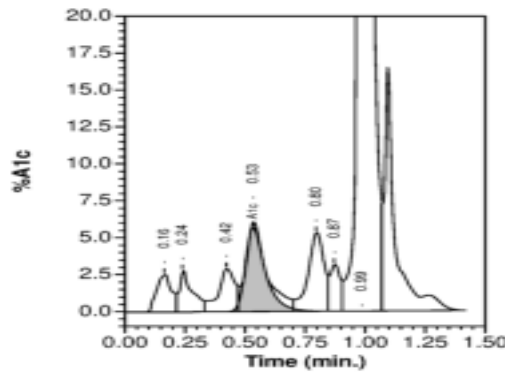
Analysis Performed: 23/12/2023 14:35:36
Injection Number: 9138
Run Number: 403
Rack ID:
Tube Number: 1
Report Generated: 23/12/2023 15:16:21
Operator ID:

Comments:

Peak Name	NGSP %	Area %	Retention Time (min)	Peak Area
A1a	---	1.6	0.163	25594
A1b	---	1.5	0.240	24245
LA1c	---	1.8	0.422	28329
A1c	5.7	---	0.534	76713
P3	---	3.6	0.796	57260
P4	---	1.4	0.871	21558
Ac	---	85.2	0.985	1342742

Total Area: 1,576,440

HbA1c (NGSP) = 5.7 %



Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Hiral Arora

M.D. Biochemistry Page 9 of 12
Reg. No.:- G-32999

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TEST REPORT

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Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <small>CMIA</small>	0.95	ng/mL	0.70 - 2.04
T4 (Thyroxine), Total <small>CMIA</small>	7.88	µg/dL	4.6 - 10.5
TSH (Thyroid stimulating hormone) <small>CMIA</small>	1.453	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Avani Patel

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TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 16:33
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
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Prostate Specific Antigen (PSA)	0.240	ng/mL	0 - 4
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CMIA

Sample Type: Serum**Useful For**

1. Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year
2. Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
3. Prostate cancer screening.

Comments

-Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels.

-Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate biopsy may increase PSA levels.

Test done from collected sample.

This is an electronically authenticated report.

**Approved by:** Dr. Avani Patel**Generated On :** 23-Dec-2023 16:35M.D. Biochemistry Page 11 of 12
Reg No.- G-34103**Approved On:** 23-Dec-2023 16:33

TEST REPORT

Reg. No. : 312100657 **Reg. Date** : 23-Dec-2023 08:45 **Ref.No** : **Approved On** : 23-Dec-2023 11:42
Name : Mr. ROHIT KARKI **Collected On** : 23-Dec-2023 08:58
Age : 33 Years **Gender:** Male **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** : 9572766968
Location :

Test Name	Results	Units	Bio. Ref. Interval
<u>URINE ROUTINE EXAMINATION</u>			
<u>Physical Examination</u>			
Colour	Pale Yellow		
Clarity	Clear		
<u>CHEMICAL EXAMINATION (by strip test)</u>			
pH	6.5		4.6 - 8.0
Sp. Gravity	1.010		1.002 - 1.030
Protein	Nil		Absent
Glucose	Nil		Absent
Ketone	Nil		Absent
Bilirubin	Nil		Nil
Nitrite	Negative		Nil
Leucocytes	Nil		Nil
Blood	Absent		Absent
<u>MICROSCOPIC EXAMINATION</u>			
Leucocytes (Pus Cells)	Nil		0 - 5/hpf
Erythrocytes (RBC)	Nil		0 - 5/hpf
Casts	Nil	/hpf	Absent
Crystals	Nil		Absent
Epithelial Cells	Nil		Nil
Monilia	Nil		Nil
T. Vaginalis	Nil		Nil
Urine			

----- End Of Report -----

Test done from collected sample.

This is an electronically authenticated report.



Approved by: Dr. Swati Shah

M.B.D.C.P.
G-5456

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