



# Shri Panchnath Sarvajanic Medical Trust

Reg. E 7629

Managed

**Smt. Manglaben Dayabhai Kotecha Hospital**

Panchnath Temple, Limda Chowk, Rajkot-360001. Ph. 2223249

Email :- [Panchnathtrust@gmail.com](mailto:Panchnathtrust@gmail.com). Website :- [www.Panchnath.in](http://www.Panchnath.in).

Facebook :- <https://www.facebook.com/panchnathmahadev>



\* 8 8 9 7 \*

Patient's name	: MAHESHKUMAR H ODHARIA	Reg. ID	: P-77930-21
Age/Sex	: 55 Years/Male	Sample No.	: 8897
Referred by	: C/o. Mediwheel (arcofemi Healthcare Ltd)	Order Dt/time	: 12/02/2022 09:26

## Prostate specific antigen - PSA

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
Prostate Specific Antigen (PSA)	: 0.31	ng/ml	[ 0.0 - 4.0 ]

- \* Generally recommended in : prostatic malignancy
- \* Schedule for tumour marker determination  
Pre-operatively  
Post operatively - At regular intervals until the values have shown a marked decrease.
- \* Potential clinical applications of tumour markers are :

Prognosis - The level of tumour marker is corresponds to the mass of tumour. Moderate elevations are suggestive of better prognosis than persistent high levels.

Monitoring - The profile of tumour marker concentration against time can mirror the condition of patients diagnosed to have cancer.

- \* Tumour marker profile usually reflects one of the following classical patterns :

A rapid decline in the concentration following surgery or therapy indicates successful treatment. The lack of a decline to basal level following first line therapy indicates partial success in the treatment.

Continue low level of the tumour marker indicates that remission has been maintain.

A subsequent rise in the concentration of the tumour marker suggests a recurrence of the disease.

If tumour marker concentration remain elevated after treatment, the tumour may be resistant to the therapeutic method and prognosis is poor.





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**Dr. Pravin Gojiya**  
**M.D. (Path)**

Print Date Time : 12/02/2022 19:36



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## BLOOD GROUP- (ABO, Rh)

**ABO System** : "O"

**Rh Typing** : "POSITIVE"

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## HEMOGRAM

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
<b>Hemoglobin</b>	: 13.8	g/dl	[13.0-18.0]
<b>Total RBC Count</b>	: 5.49	mill/cmm	[4.7-6.0]
<b>RBC Indices</b>			
P.C.V	: 43.7	%	[42-52]
M.C.V.	: 79.5	femtolitre	[78-100]
M.C.H.	: <b>25.1</b>	pg	[27-31]
M.C.H.C.	: <b>31.6</b>	g/dl	[32-36]
R.D.W.	: 13.7	%	[11.5-14.0]
<b>Total WBC Count</b>	: 8970	/cmm	[4000-11000]
<b>Differential WBC Count</b>			
Polymorphs	: 59	%	[40-70]
Lymphocytes	: 21	%	[20-40]
Eosinophils	: <b>14</b>	%	[01-05]
Monocytes	: 06	%	[02-08]
Basophils	: 00	%	[00-01]
<b>Platelet Count</b>	: 327000	/cmm	[150000-450000]
<b>Platelet Indices</b>			
M.P.V	: 9.7	femtolitre	[7.4-10.4]
P.D.W	: <b>16.3</b>	%	[9-16]
P.C.T	: 0.318	%	[0.110-0.280]

Test performed on 6 part / 5 part hematology cell counter.

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## ERYTHROCYTE SEDIMENTATION RATE (ESR)

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
After 1 hour	: 15	mm	[M: 1 - 7 / F: 3 - 12 ]

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## FASTING BLOOD SUGAR

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Fasting blood sugar	: 91.0	mg/dl	Non Diabetic: 70 - 109 Impaired : 110 - 125 Diabetic: >126
Fasting urine sugar	: Nil	-	
Fasting urine Ketone	: Absent		

Test performed on fully automated SIEMENS DIMENSION EXL-200.

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## Gamma Glutamyltransferase (GGT)

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
G.G.T.	: 25.0	U/L	15-85

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## HbA1c [Glycosylated Haemoglobin]

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range (%)</u>
Glycosylated Haemoglobin : 5.8 (HbA1c)		%	Non Diabetic Level: 4 - 6 Therapy Range: <7 Change of Therapy: >8
Estimated Average glucose : 119.76		mg/dl	70-126

### Method : By HPLC (Performed on Biorad D10)

#### Interference:

- Elevated fetal haemoglobin (HbF) variant may cause falsely elevated HbA1c result.
- Conditions that shortens RBC life span (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results.
- Iron deficiency anemia is associated with higher HbA1c concentration and iron replacement therapy lowers HbA1c concentrations.
- Clinical correlation and alternate methods of glucose estimation should be consider in above interference cases.

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## LIPID PROFILE

<u>TEST</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>NORMAL VALUES</u>
Cholesterol	: 162.0	mg/dl	Desirable level/low risk : < 200 Borderline level/moderate risk : 200-239 Elevated level/ high risk : > 240
Triglyceride	: 91.0	mg/dl	Normal : <150 Borderline high :150-200 High : 200 -499 Very high: >500
HDL Cholesterol	: <b>43.0</b>	mg/dl	Low risk : >60 Moderate risk : 35-60 High risk : <35
LDL Cholesterol (Direct)	: 96.0	mg/dl	Desirable level/low risk : <130 Borderline level/moderate risk : 130-159 Elevated level/ high risk : >160
VLDL	: 18.2	mg/dl	Upto 34
Chol./HDL Ratio	: 3.8		3.5-5
LDL/HDL Ratio	: <b>2.2</b>		2.5-3.5

Test performed on fully automated SIEMENS DIMENSION EXL-200.

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## LIVER FUNCTION TEST

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S.G.P.T. (ALT)	: 28.0	IU/L	[16-63]
S.G.O.T. (AST)	: 20.0	IU/L	[15-37]
S. Alkaline Phosphatase	: 92.0	IU/L	[50-136]
S. Bilirubin (Total)	: 1.0	mg/dl	[0.2-1.0]
S. Bilirubin (Direct)	: 0.2	mg/dl	[0.0-0.2]
S. Bilirubin (Indirect)	: 0.8	mg/dl	[0.0-0.9]
S. Proteins: (Total)	: 7.9	gm/dl	[6.4-8.2]
S. Albumin	: 4.0	gm/dl	[3.4-5.0]
S. Globulin	: <b>3.9</b>	gm/dl	[2.5-3.5]
A/G Ratio	: <b>1</b>		

Test performed on fully automated SIEMENS DIMENSION EXL-200

HBsAg : Non Reactive  
(Hepatitis B surface antigen)  
(Method: Immunochromatography)

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## POSTPRANDIAL BLOOD SUGAR

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Post prandial bl.sugar	: 89.0	mg/dl	Non Diabetic: < 140 Impaired : 140 - 200 Diabetic: > 200
Post prandial urine sugar	: Nil		
Post prandial urine Ketone	: Absent		

Test performed on fully automated SIEMENS DIMENSION EXL-200.

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## Thyroid Hormone Study

Test	Result	Unit	Reference Range
Serum T3	: 1.81	ng/ml	0.60-1.81
Serum T4	: 11.8	µg/dl	3.2-12.6
Serum TSH (Ultrasensitive- TSH3UL)	: 4.612	µIU/ml	0.55-4.78

Pregnancy Ref. Range:

1st Trimester- 0.1-2.5

2nd Trimester- 0.2-3.0

3rd Trimester- 0.3-3.0

The test is done on fully automated ADVIA Centaur CP - USA by ECLIA Method.

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## BLOOD UREA NITROGEN/CREATININE RATIO

Test	Result	Unit	Normal Range
Blood Urea	: 22.0	mg/dl	14.9-38.5
Blood Urea Nitrogen(BUN)	: 10.3	mg/dl	7-21
Creatinine	: 0.92	mg/dl	0.70 -1.30
BUN/Creatinine Ratio	: 11.2		

The test is carried out on fully automated Siemens Dimension EXL-200

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## SERUM URIC ACID

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Serum uric acid	: 4.9	mg/dl	[3.5-7.2]

Test performed on fully automated SIEMENS DIMENSION EXL-200.

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## URINE EXAMINATION

### PHYSICAL EXAMINATION:

Volume - 20 ml  
Colour - Pale Yellow  
Blood - Absent  
Appearance - Clear  
Deposit - Absent

### CHEMICAL EXAMINATION:

Sp. Gravity - 1.010  
Protein - Absent  
Glucose - Absent  
Ketone - Absent  
Urobilinogens - Normal  
Bile Salts - Absent  
Bile Pigments - Absent  
Reaction - 5.5

### MICROSCOPIC EXAMINATION: [ After centrifugation at 2000 r.p.m. for 5 minutes ]

Pus Cells - 1-2 /H.P.F  
Red Cells - Occasional/H.P.F.  
Epithelial Cells - 1-2 /H.P.F.  
Casts - Absent  
Crystals - Absent  
Yeast Cells - Absent  
Trichomonas Vag. - Absent  
Bacteria - Absent

Test is performed on 10 parameter semiauto urine chemistry analyser- Uriscan-PRO.

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