



## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. AMEET SINGH

MR No : 27710

Age/Sex : 34 Years / Male

Type : OPD

TPA/Corporate : MEDIWHEEL

IP No. :

Current Bed no. :

Bill Date : 30/03/2023 8.29.28 AM

Reporting Date : 30/03/2023 9.19.16 AM

Sample ID : 131686

Bill/Req. No. : 23252534

Ref Doctor : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
<b>BLOOD GLUCOSE FASTING AND PP</b>			
PLASMA GLUCOSE (FASTING)	94	70 - 110	mg/dl
PLASMA POST-GLUCOSE	98	80 - 150	mg/dL

## BLOOD GROUP

BLOOD GROUP " B " RH POSITIVE

## COMPLETE HAEMOGRAM

### CBC

HAEMOGLOBIN	15.3		12.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT	8600		4000 - 11000	/cumm
RED BLOOD CELL COUNT	5.62		4.0 - 6.0	millions/cumm
PCV (HAEMATOCRIT)	47.8		40.0 - 54.0	%
MEAN CORPUSCULAR VOLUME	85.1		78 - 98	fL
MEAN CORPUSCULAR HAEMOGLOBIN	27.2		26.5 - 32.5	Picograms
MEAN CORPUSCULAR HB CONC	32.0		32 - 37	g/dL
PLATELET COUNT	2.88		1.50 - 4.50	Lakh/cumm
NEUTROPHILS	<b>38</b>	L	40 - 73.0	%
LYMPHOCYTES	<b>53</b>	H	20 - 40	%
EOSINOPHILS	03		0.0 - 6.0	%
MONOCYTES	06		2.0 - 10.0	%
BASOPHILS	00		0.0 - 1.0	%
ABSOLUTE NEUTROPHIL	3268		2000 - 7000	cells/cumm
ABSOLUTE LYMPHOCYTE	<b>4558</b>	H	1000 - 3000	cells/cumm
ABSOLUTE EOSINOPHIL	258		20 - 500	cells/cumm
ABSOLUTE MONOCYTES	516		200 - 1000	cells/cumm
ABSOLUTE BASOPHILS	<b>0</b>	L	20 - 100	cells/cumm

Checked By : *Mayur*



Dr. Pradip Kumar  
(Consultant Microbiologist)

Dr. Nisha Rana  
(Consultant Pathologist)



## DEPARTMENT OF HAEMATOLOGY

Patient Name : Mr. AMEET SINGH  
 MR No : 27710  
 Age/Sex : 34 Years / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL  
 IP No. :  
 Current Bed no. :

Bill Date : 30/03/2023 8.29.28 AM  
 Reporting Date : 30/03/2023 9.12.44 AM  
 Sample ID : 131686  
 Bill/Req. No. : 23252534  
 Ref Doctor : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
RDW-CV	12.6	11.5 - 14.5	%

### HBA1C

HBA1C	5.8		%
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**Note :** HBA1c result is suggestive of Diabetes/ higher than glycemic goal in a known Diabetic patient.  
 Please note, glycemic goal should be individualized based on duration of diabetes, age/life expectancy, comorbid conditions, known CVD or advanced microvascular complications, hypoglycaemia unawareness, and individual patient considerations.  
 Please Correlate Clinically.

### KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

SERUM UREA	18	13.0 - 45.0	mg/dL
SERUM CREATININE	1.0	0.5 - 1.4	mg/dL
SERUM URIC ACID	5.9	3.6 - 7.2	mg/dL
SERUM SODIUM	138	130 - 149	mmol/L
SERUM POTASSIUM	4.2	3.5 - 5.5	mmol/L

### LFT(LIVER FUNCTION TEST)

LFT	Result	Ref. Interval	Units
TOTAL BILIRUBIN	0.9	0.1 - 1.2	mg/dL
DIRECT BILIRUBIN	0.3	0.00 - 0.30	mg/dL
INDIRECT BILIRUBIN	0.6	Adult: 0 - 0.8	mg/dL
SGOT (AST)	56 <i>H</i>	0.0 - 45	IU/L
SGPT (ALT)	76 <i>H</i>	00 - 45.00	IU/L
ALP	92	41 - 137	U/L
TOTAL PROTEINS	6.7	6.0 - 8.2	g/dL
ALBUMIN	4.0	3.20 - 5.00	g/dL
GLOBULIN	2.7	2.0 - 3.50	g/dL

Checked By : *Jaysh*

Dr. Pradip Kumar  
(Consultant Microbiologist)

Dr. Nisha Rana  
(Consultant Pathologist)



## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. AMEET SINGH  
 MR No : 27710  
 Age/Sex : 34 Years / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL  
 IP No. :  
 Current Bed no. :

Bill Date : 30/03/2023 8.29.28 AM  
 Reporting Date : 30/03/2023 9.20.42 AM  
 Sample ID : 131686  
 Bill/Req. No. : 23252534  
 Ref Doctor : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
A/G RATIO	1.48		

### LIPID PROFILE

#### LIPID PROFILE

SERUM CHOLESTROL	149	0 - 200	mg/dl
SERUM TRIGLYCERIDES	92	Up to 150	mg/dl
HDL CHOLESTEROL	33	30 - 60	mg/dl
VLDL CHOLESTEROL	18.4	*Less than 30	mg/dL
LDL CHOLESTEROL	97.6	Optimal <100, Above Opt. 100-129 -high 160-189	mg/dl
LDL CHOLESTEROL/HDL RATIO	2.96	Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0	

### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATION

VOLUME	20		ml
COLOUR	Pale Yellow	Pale Yellow	
APPEARANCE	Clear	Clear	
SPECIFIC GRAVITY	1.020		

#### CHEMICAL EXAMINATION

REACTION	Acidic		
BLOOD	NIL		
ALBUMIN	Traces	NIL	
GLUCOSE	NIL	NIL	
PH	6.0		

#### MICROSCOPIC EXAMINATION

PUS CELL	2-3	2-4	/HPF
RED BLOOD CELLS	Nil	NIL	/HPF
EPITHELIAL CELLS	1-2	2-4	/HPF

Checked By : *Pradip Kumar*



Dr. Pradip Kumar  
(Consultant Microbiologist)

Dr. Nisha Rana  
(Consultant Pathologist)



## DEPARTMENT OF CLINICAL PATHOLOGY

Patient Name : Mr. AMEET SINGH  
MR No : 27710  
Age/Sex : 34 Years / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL  
IP No. :  
Current Bed no. :

Bill Date : 30/03/2023 8.29.28 AM  
Reporting Date : 30/03/2023 10.22.32 AM  
Sample ID : 131686  
Bill/Req. No. : 23252534  
Ref Doctor : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
CASTS	NIL	NIL	
CRYSTALS	NIL	NIL	

**Note :** Albumin test positive by Multistrip Method is confirmed by Sulphosalicylic acid method.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*

Checked By :



Dr. Pradip Kumar  
(Consultant Microbiologist)

Dr. Nisha Rana  
(Consultant Pathologist)



# Prognosis Laboratories



National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-110075

8130192290 www.prlworld.com care@prlworld.com

Lab No.	012303300603	Age/Gender	34 YRS/MALE	Coll. On	30/Mar/2023 05:13PM
Name	Mr. AMEET SINGH 27710			Reg. On	30/Mar/2023
Ref. Dr.	NIDAAN HOSPITAL			Approved On	30/Mar/2023 07:40PM
Rpt. Centre	NIDAAN HOSPITAL			Printed On	08/Apr/2023 10:35AM

Test Name	Value	Unit	Biological Reference Interval
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### Thyroid profile, Total (T3,T4,TSH)

T3 (Triiodothyronine) , serum Method : ECLA	1.73	ng/mL	0.80 - 2.0
T4 (Thyroxine) , serum Method : ECLA	8.47	ug/dL	5.1 - 14.1
TSH (Thyroid Stimulating Hormone) , serum Method : ECLA	2.80	uIU/ml	0.27 - 4.2

#### Interpretation:

- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values alongwith depressed TSH levels
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- High T3 levels coupled with normal T4 and suppressed TSH may be seen in T3 toxicosis.

Note: Total T3 and total T4 are highly bound to plasma proteins and are amenable to fluctuations with plasma protein content as well as due to binding defects in the thyroid hormone binding proteins.

The following ranges are recommended for pregnant females:

Gestation period	TSH (uIU/ml)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

\*Disclaimer: This is an electronically validated report, if any discrepancy found should be confirmed by user.  
This test was performed at Prognosis Laboratories, 515-516, Sector 19, Dwarka, New Delhi-110075.  
\*\*\* End Of Report \*\*\*



Dr. Smita Sadwani  
MD(Biochemistry)  
Technical Director

Dr. Anita  
MD Pathology  
Sr. Consultant Pathologist

*Gadwani*  
Dr. Deepak Sadwani  
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Consultant Pathologist



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#### OUR FOOTPRINT

Delhi NCR | Gujarat | Punjab | Haryana | Uttar Pradesh | J&K



Patient Id	27710	Name	AMEET SINGH 34YR	Accession No	-
Study Date	30-Mar-2023	Age	-	Gender	Male

## X-RAY CHEST PA VIEW

### FINDINGS :-

The lungs on the either side show equal translucency.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

Bilateral CP angles are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.


The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

**IMPRESSION :- No significant abnormality detected.**

**ADVICE :- Clinical correlation and follow up.**

*This case has been reported by tele-radiology through webrad.*

  
**Dr. Harleen Singh Pabra**  
MBBS, MD, DNB  
Consultant Radiologist



## DEPARTMENT OF RADIOLOGY

Patient Name	Mr AMEET SINGH	Billed Date	: 30/03/2023	8.29 AM
Reg No	27710	Reported Date	: 30/03/2023	
Age/Sex	34 Years 8 Months 22Days / Male	Req. No.	: 23252534	
Ref. Doctor	Self	Consultant Doctor	: Dr. Chand Kishore	
Type	OPD			

### USG WHOLE ABDOMEN

#### **FINDINGS:**

**LIVER** is normal in size (13.7 cm) and **shows grade I fatty infiltration**. No evidence of any focal lesion or IHBR dilation is present. Portal and hepatic veins are normal in caliber at porta.

**GALL BLADDER** is partially distended.

**CBD** is normal in course and caliber. No evidence of intraluminal calculus seen in visualized segments.

**SPLEEN** is normal in size (8.5 cm) and echotexture. No focal lesion is seen.

**PANCREAS:** Head of pancreas is normal in size and echotexture. Body and tail of pancreas are obscured by bowel gas shadows.

**RIGHT KIDNEY:** is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

**LEFT KIDNEY:** is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

**URINARY BLADDER** is minimally distended.

**PROSTATE** is normal in size. [vol: ~ 14 cc]. It has normal echotexture and there is no evidence of focal lesion.

No free fluid is seen in the abdomen.

**IMPRESSION:** Grade I fatty liver

To be correlate clinically



Dr. Harleen Singh Pabla  
MBBS,MD,DNB  
Consultant Radiologist