

ID: 134
PRIYANKA KUMARI
Female 29Years

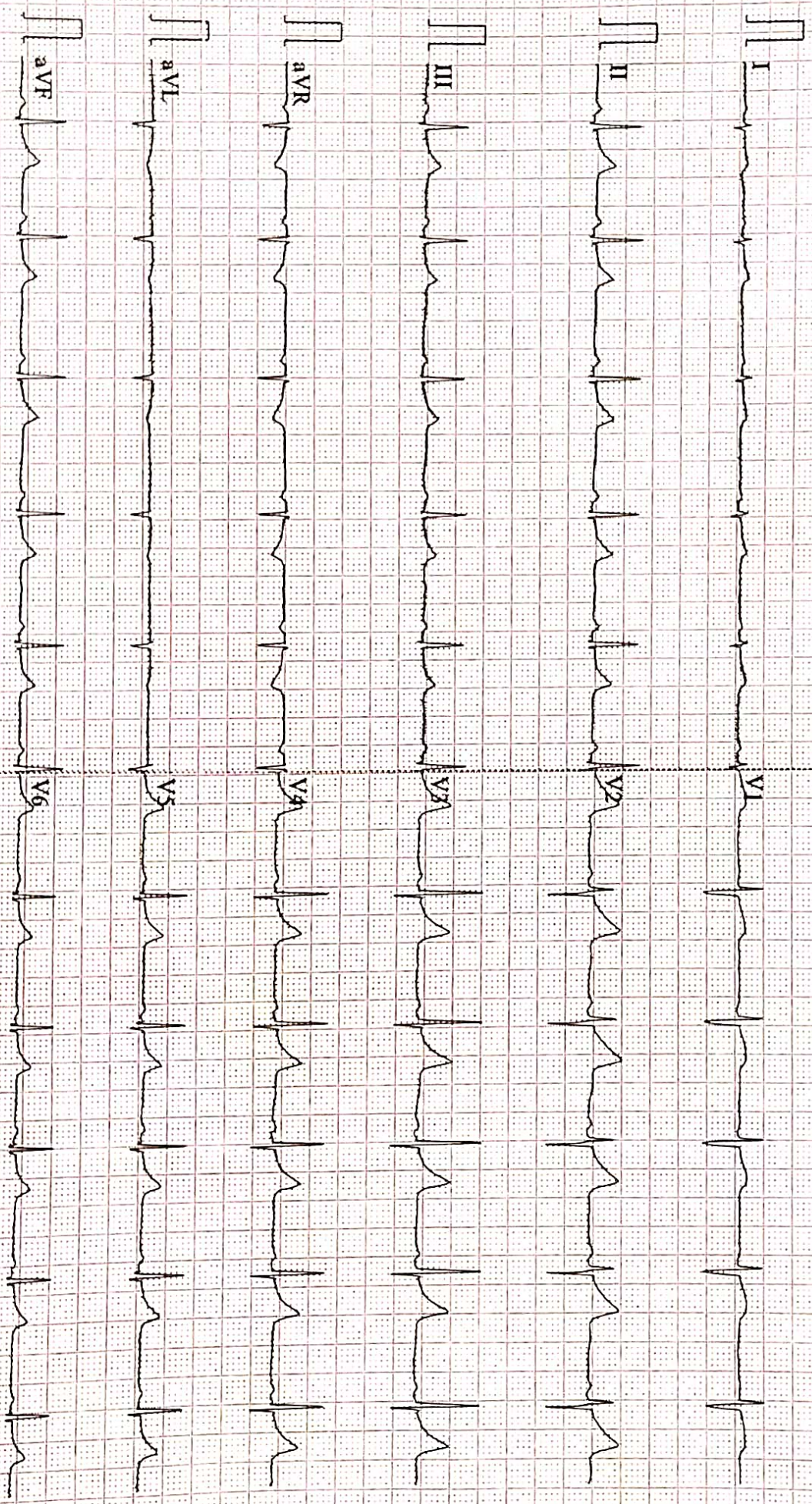
10-07-2022 10:13:47 AM

BPL-12

HR : 65 bpm
P : 85 ms
PR : 140 ms
QRS : 73 ms
QT/QTc : 390/408 ms
PQRST : 64/88/71
RV5/SV1 : 0.766/0.620 mV

Diagnosis Information:
Sinus Arrhythmia

Ref-Phys. :
Report Confirmed by:



0.07-100Hz AC50 25mm/s 10mm/mV 250us V2.2 SEMIP V1.81 DIAGNOSTIC

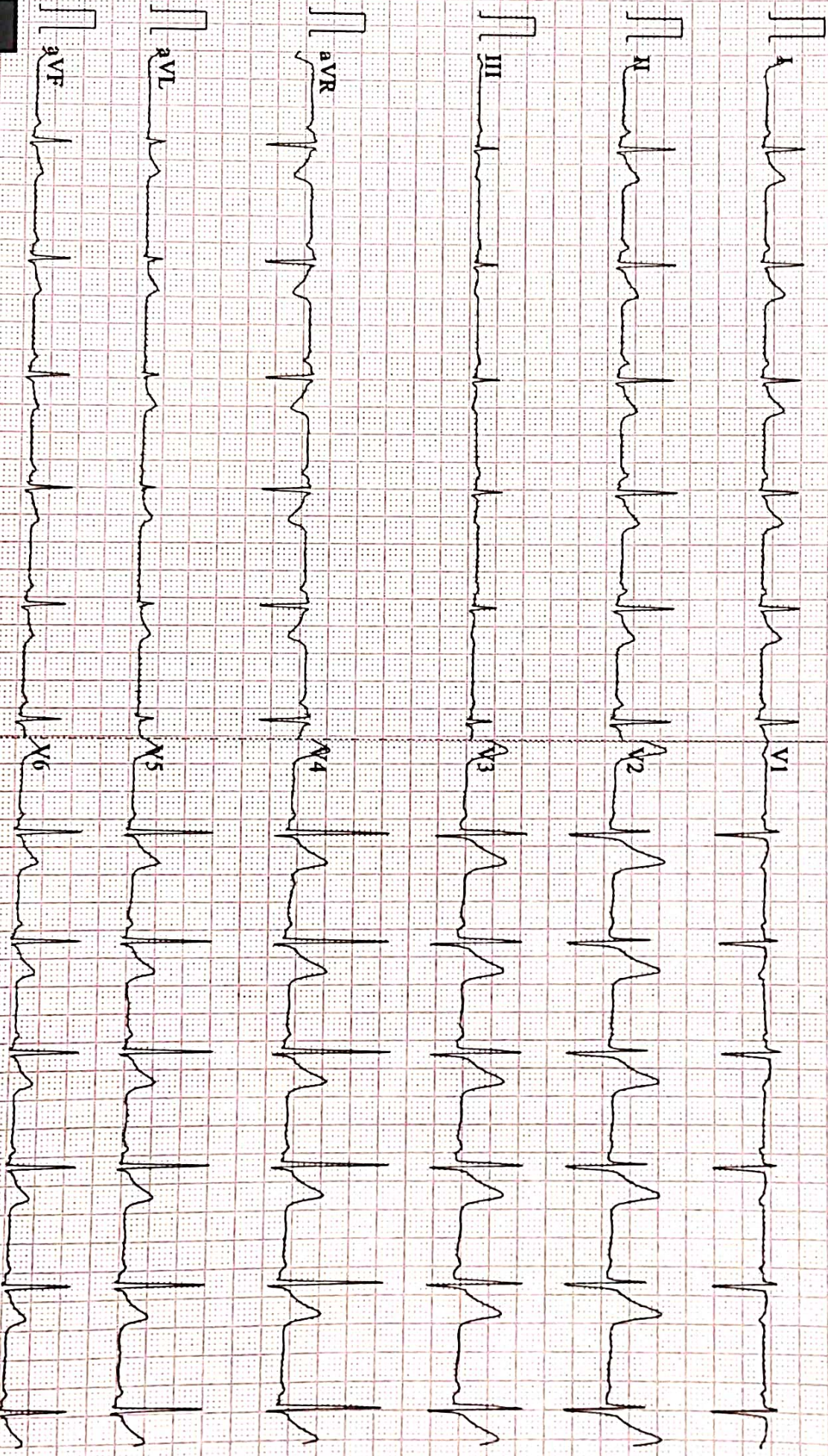
ID: 132
CHANDAN KUMAR
Male 40Years

10-07-2022 09:55:22 AM

HR : 72 bpm
P : 96 ms
PR : 148 ms
QRS : 78 ms
QT/QTc : 336/370 ms
P/QRS/T : 49/47/23 °
RV5/SV1 : 1.476/0.871 mV

Diagnosis Information:
Sinus Rhythm
Slight ST Elevation(V4,V5)

Ref-Phys. :
Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 25.0s V2.2 SHMIT V1.31 DAIGNOSTIC

ID: 134
SUMAN KUMARI
Female 30Y ears

10-07-2022 10:25:26 AM

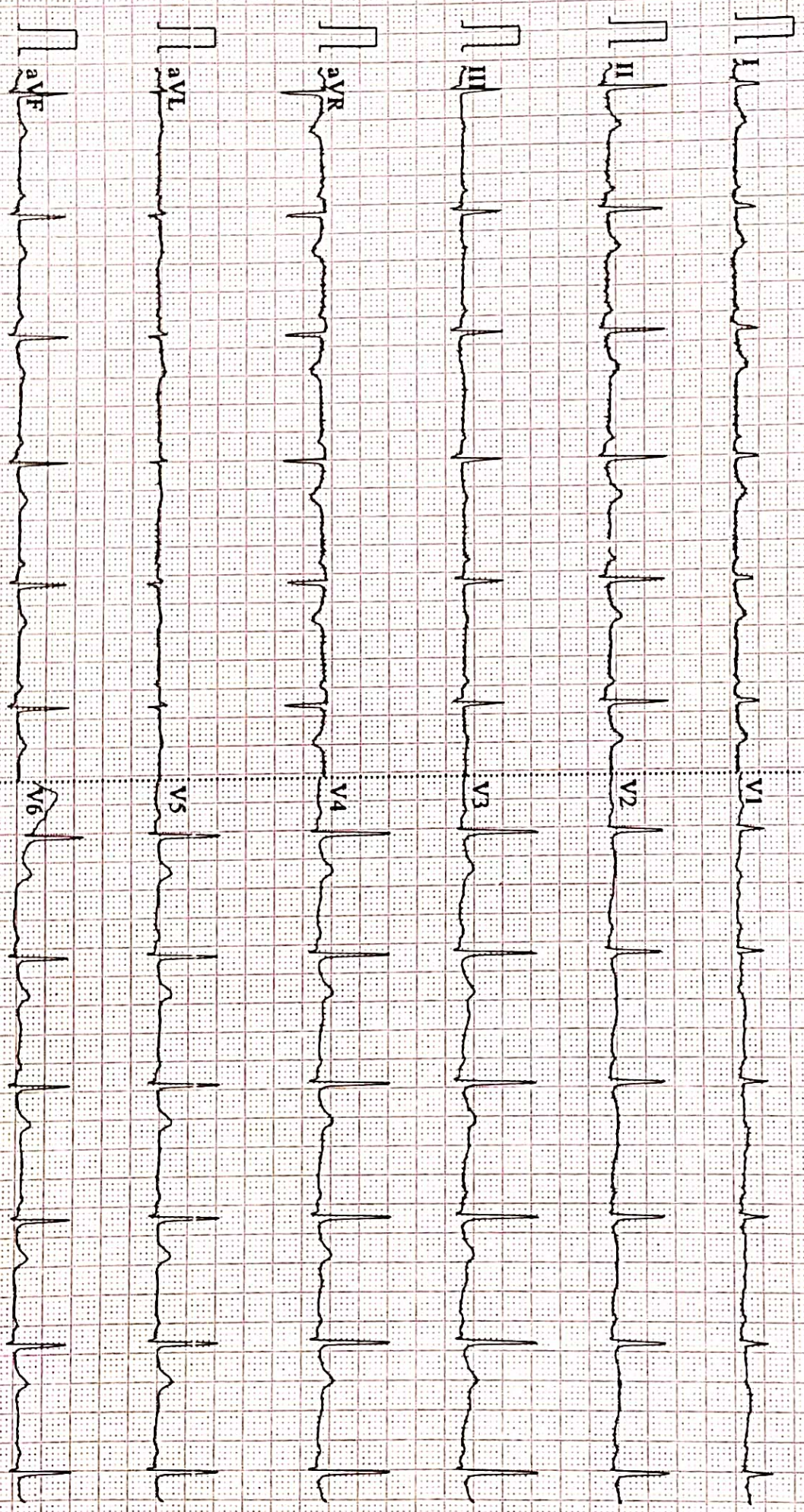
BPL-12

HR : 68 bpm
P : 95 ms
PR : 160 ms
QRS : 76 ms
QT/QTc : 401/428 ms
P/QRS/T : 62/66/45 °
RV5/SV1 : 1.098/0.000 mV

Diagnosis Information:

Sinus Rhythm
Normal ECG

Ref-Phys. :
Report Confirmed by:



Diagnosis Information:

Sinus Rhythm

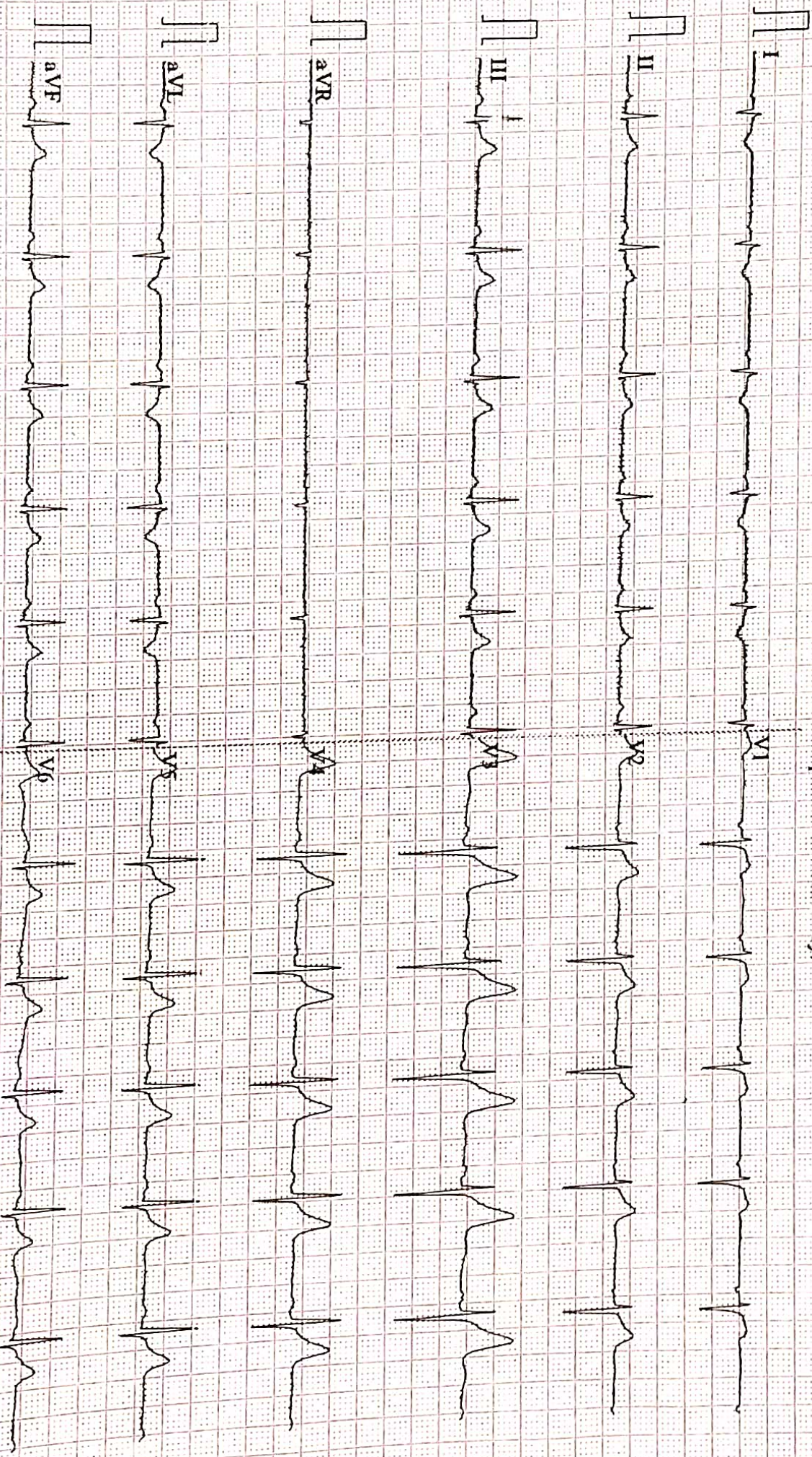
High Lateral Myocardial Infarction

Inverted T Wave(aVL)

Right Axis Deviation

Ref-Phys. :

Report Confirmed by:





ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT.LTD.)

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info@aarogyamdiagnostics.com
www.aarogyamdiagnostics.com

Name :- Priyanka Kumari

Refd by :- BoB

Age/Sex:-29Yrs/F

Date:-10/07/2022

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size (10.9cm)with normal echotexture. No focal or diffuse lesion is seen.
IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder :-** It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (9.1cm)with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 8.9cm and Left Kidney measures 9.2cm.
- Ureters** :- Ureters are not dilated.
- U. Bladder:-** It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Uterus** :- Normal in size (60mm x 26mm) and anteverted in position with normal myometrial echotexture and endometrial thickness.
- Ovaries** :- Both ovaries show normal echotexture and follicular pattern. Right ovary measures 23mm x 14mm and Left ovary measures 24mm x 14mm.
Trace pelvic (POD) collection is seen.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Trace collection in POD.
Otherwise Normal Scan.*

Dr. U. Kumar
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist



Name :- Suman Kumari
Refd by :- BoB

Age/Sex:-30Yrs/F
Date:-10/07/2022

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size (12.8cm) with normal echotexture. No focal or diffuse lesion is seen.
IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (8.7cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.5cm and Left Kidney measures 9.3cm.
- Ureters** :- Ureters are not dilated.
- U. Bladder** :- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Uterus** :- **Mildly Enlarged in size (88mm x 44mm)** and anteverted in position with normal myometrial echotexture and endometrial thickness.
- Ovaries** :- Both ovaries show normal echotexture and follicular pattern. Right ovary measures 31mm x 17mm and Left ovary measures 25mm x 18mm.
Trace pelvic (POD) collection is seen.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *A/V Mild Bulky Uterus.*
Trace collection in POD.
Otherwise Normal Scan.

Dr. U. Kumar
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist



Name :- Bikash Kumar
Refd by :- BoB

Age/Sex:- 38Yrs/M
Date :- 10/07/22

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size (13.2cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (10.7cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 8.8cm and Left Kidney measures 9.2cm.
- U. Bladder** :- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (1 cc) & echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- Normal Scan Of Whole Abdomen.

Dr. U. Kumar
MBBS, MD(Radio-Diagnosis)
Consultant Radiologist



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Date 10/07/2022	Srl No. 4	Patient Id 2207100004
Name Mr. CHANDAN KUMAR	Age 40 Yrs.	Sex M
Ref. By Dr.BOB		

Test Name	Value	Unit	Normal Value
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HAEMATOLOGY

HB A1C	5.0	%	
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EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Date	10/07/2022	Srl No.	4	Patient Id	2207100004
Name	Mr. CHANDAN KUMAR	Age	40 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	14.2	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,600	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	62	%	40 - 75
LYMPHOCYTE	33	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN`s METHOD)	13	mm/1st hr.	0 - 15
R B C COUNT	4.89	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	42.6	%	40 - 54
M C V	87.12	fl.	80 - 100
M C H	29.04	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.18	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Date	10/07/2022	Srl No.	4	Patient Id	2207100004
Name	Mr. CHANDAN KUMAR	Age	40 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR FASTING	84.1	mg/dl	70 - 110
SERUM CREATININE	0.72	mg%	0.7 - 1.4
BLOOD UREA	26.9	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.0	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			
BILIRUBIN TOTAL	0.62	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.20	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.42	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.9	gm/dl	6.6 - 8.3
ALBUMIN	3.5	gm/dl	3.4 - 5.2
GLOBULIN	3.4	gm/dl	2.3 - 3.5
A/G RATIO	1.029		
SGOT	29.6	IU/L	5 - 40
SGPT	28.4	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	85.7	U/L	40.0 - 130.0
GAMMA GT	26.0	IU/L	8.0 - 71.0

LFT INTERPRET

LIPID PROFILE

TRIGLYCERIDES	93.5	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	174.9	mg/dL	29.0 - 199.0



Date	10/07/2022	Srl No.	4	Patient Id	2207100004
Name	Mr. CHANDAN KUMAR	Age	40 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
H D L CHOLESTEROL DIRECT	45.8	mg/dL	35.1 - 88.0
V L D L	18.7	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	110.4	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.819		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.41		0.00 - 3.55
THYROID PROFILE			
T3	1.03	ng/ml	0.60 - 1.81
T4 Chemiluminescence	9.21	ug/dl	4.5 - 10.9
TSH Chemiluminescence	1.58	uIU/ml	
REFERENCE RANGE			
PAEDIATRIC AGE GROUP			
0-3 DAYS	1-20	ulu/ ml	
3-30 DAYS	0.5 - 6.5	ulu/ml	
1 MONTH -5 MONTHS	0.5 - 6.0	ulu/ml	
6 MONTHS- 18 YEARS	0.5 - 4.5	ulu/ml	
ADULTS	0.39 - 6.16	ulu/ml	

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates $\pm 50\%$, hence time of the day has influence on the measured serum TSH concentration.



Date	10/07/2022	Srl No.	4	Patient Id	2207100004
Name	Mr. CHANDAN KUMAR	Age	40 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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Assay performed on enhanced chemi luminescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

QUANTITY	15	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.030	
PH	6.0	

CHEMICAL EXAMINATION

ALBUMIN	NIL
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Date	10/07/2022	Srl No.	4	Patient Id	2207100004
Name	Mr. CHANDAN KUMAR	Age	40 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	0-1	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

**** End Of Report ****

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