



UHID : OP:2024/006890
 Name : Mr. RAVI SRIVASTAVA Age : 48 Y , Sex - M
 Patient Type : Normal Aadhaar No: 543086921082
 Bill Date : 14/09/2024
 Referred By. : MEDICINE DEPT.,
 Collection Date/Time : 14/09/2024 10:22:13 AM Lab Refno : LB:2024/014737
 Reporting Date/Time : 14/09/2024 12:46:53 PM

HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
CBC			
HAEMOGLOBIN(HB) Method : CALORIMETRIC /CYNAMETH HAEMOGLOBIN	14.3	gm/dl	(M:13-17) (F:12-15)
RBC COUNT Method : FLOW CYTOMETRY	4.89*	million/cumm	(M) 4.5 - 5.5 (F) 3.8 - 4.8 (AT BIRTH) 5 - 7 (1 YR) 3.9 - 5.1 (2 - 12 YR) 4.0 - 5.2
HCT Method : CALCULATED	<u>40.1</u>	%	M :45 - 5% F: 41 - 5%
MCV Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	<u>82.0</u>	fl	83-101 fl
MCH Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	29.2	pg	27-32 pg
MCHC Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	<u>35.6</u>	gm/dl	31.5 - 34.5 gm
TOTAL LEUKOCYTE COUNT (TLC) (1390) Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL Sample Type : Whole Blood (K2 EDTA WB)			
TOTAL LEUKOCYTE COUNT (TLC)	7600	/cmm	Adult (4000-10000) At birth (10000-26000) 1 Year (6000-16000) 2-7 years (6000-15000) 6-12Years (5000-13500)
DIFFRENTIAL LEUCOCYTE COUNT (DLC) Method : MANUAL / MICROSCOPIC Sample Type : Whole Blood (K2 EDTA WB)			
POLYMORPHS	62	%	40-70



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Test Description	Result	Unit	Biological Reference Interval
LYMPHOCYTES	32	%	20-40
MONOCYTES	04	%	2-10
EOSINOPHILS	02	%	1-6
BASOPHILS	00	%	1-2
PLATELET COUNT	1,68,000	/cumm	1.5 - 4.5 Lacs New Born 1 - 4.50 Lacs
Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL Sample Type : Whole Blood (K2 EDTA WB)			
MEDIWHEEL FULL BODY HEALTH PLUS CHECK-UP- ESR - WINTROBE			
Sample Type : Whole Blood (K2 EDTA WB)			
ESR (WHOLE BLOOD)	24 MM		(M) 0 -10 (F) 0 - 20

Machines Used: HAEMAT ANALYSER, Mindray BC 5150
 Checked By: Shashank Srivastava



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 Collection Date/Time : 14/09/2024 11:08:58 AM Lab Refno : LB:2024/014777
 Reporting Date/Time: 14/09/2024 12:43:38 PM

BIO - CHEMISTRY Report

Test Name	Results	Units	Bio.Ref.Interval
HbA1c (Glycosylated Hemoglobin)	6.5	%	Blood @ (HPLC)

Interpretation

As per American Diabetes Association (ADA)

Reference Group

HbA1c in %

Non diabetic adults ≥ 18 years
 At risk
 Diagnosing Diabetes
 Therapeutic goals for glycemic
 Control

4.0 - 6.0
 ≥ 6.0 to ≤ 6.5
 > 6.5
 Age > 19 years
 Goal of therapy: < 7.0
 Action suggested: > 8.0

Age < 19 years
 Goal of therapy: < 7.5

Note: 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly



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BIO - CHEMISTRY Report

controlled.

2.Target goals of <7.0% may be beneficial in patients with short

duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications

of diabetes, limited life expectancy or extensive co-morbid conditions

targeting a goal of <7.0% may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past

8-12 weeks and is a much better indicator of long term glycemic control

as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels

HbA1c (%)	Mean Plasma Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Machines Used: AUTO - ANALYSER OPTIMA - 1

Checked By: Shashank Srivastava



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End of Report



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Reporting Date/Time : 14/09/2024 12:41:02 PM

BIO - CHEMISTRY Report

Test Description	Result	Unit	Biological Reference Interval
LIPID (PROFILE)			
VLDL (SERUM)			
Method : CALCULATED			
Sample Type : SERUM			
VLDL (SERUM)*	53.0	mg/dl	10-40 mg/dl
TRIGLYCERIDES (SERUM)			
Method : ENZYMATIC METHOD			
Sample Type : SERUM			
TRIGLYCERIDES	<u>265.0</u>	mg/dl	Upto 170

Machines Used: AUTO - ANALYSER OPTIMA - 1
Checked By: Shashank Srivastava





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 Reporting Date/Time : 14/09/2024 12:43:12 PM

BIO - CHEMISTRY Report

Test Description	Result	Unit	Biological Reference Interval
LFT (PROFILE)			
BILIRUBIN (TOTAL) Method : JENDRASSIK MODIFIED METHOD Sample Type : SERUM	0.79	mg/dl	Upto 1.0
BILIRUBIN DIRECT Method : JENDRASSIK MODIFIED METHOD Sample Type : SERUM	0.23	mg/dl	Upto 0.25
BILIRUBIN INDIRECT Method : JENDRASSIK MODIFIED METHOD BILIRUBIN INDIRECT (SERUM)	0.56	mg/dl	0.2 - 0.8
SGPT (ALT) Method : IFCC METHOD Sample Type : SERUM SGPT	47.0	IU/L	Upto 49
SGOT (AST) Method : IFCC METHOD Sample Type : SERUM SGOT	33.0	IU/L	Men - Upto 46 Women - Upto 40
ALKALINE PHOSPHATASE (ALP) Method : UV KINETIC Sample Type : SERUM ALKALINE PHOSPHATASE	158.0	U/L	ADULT(>15Years) : 110-310 U/L CHILD(<15Years) : 270-810 U/L
PROTEIN(TOTAL) Method : Biuret method Sample Type : SERUM PROTEIN(TOTAL)*	8.4	gm/dl	6.0 - 8.5
ALBUMIN(1461) Method : BROMOCRESOL METHOD Sample Type : SERUM ALBUMIN	4.2	gm/dl	3.2 - 5.5
LIPID (PROFILE)			
CHOLESTROL(TOTAL) (SERUM) Method : ENZYMATIC METHOD Sample Type : SERUM CHOLESTROL(TOTAL)	159.0	mg/dl	Normal < 200 Borderline high 200 - 239 High >240



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BIO - CHEMISTRY Report

Test Description	Result	Unit	Biological Reference Interval
HDL (SERUM) Method : DIRECT HOMOGENOUS METHOD Sample Type : SERUM	42.0	mg/dl	Men - 35 - 55 Women - 45 - 65
LDL (SERUM) Method : DIRECT HOMOGENOUS METHOD Sample Type : SERUM	64.0	mg/dl	<100
MEDIWHEEL FULL BODY HEALTH PLUS CHECK-UP- BLOOD SUGAR FASTING Method : GOD-POD METHOD Sample Type : Flouride Plasma	81.0	mg/dl	70-110
RFT (PROFILE)			
BUN (BLOOD UREA NITROGEN) Method : UV KINETIC Sample Type : SERUM			
BUN	12.8	mg/dl	6 - 21
CREATININE Method : JAFFE KINETIC METHOD Sample Type : SERUM	1.31	mg/dl	0.5 - 1.4
SODIUM (NA+) Method : I.S.E. Sample Type : SERUM			
SODIUM (NA+)	134.0	mmol/L	136 - 146
POTASSIUM (K+) Method : I.S.E. Sample Type : SERUM	4.11	mmol/L	3.5 - 5.5

Machines Used: AUTO - ANALYSER OPTIMA - 1, HDC
 Lyte Semi Autometed, Rayto 240, Fully
 Autometed, SEMI AUTO - ANALYZER
Checked By: Shashank Srivastava

DR. ANKITA KATARA
 PANDEY
 MD. PATHOLOGY

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HORMONE Report

Sl.No.	Test	Result	Reference Values
THYROID PROFILE (TOTAL T3, T4 & TSH)			
Sample Type : Serum			
1.	TOTAL T3 (TRIIODOTYRONINE)	2.15	0.92-2.33 nmol/l
2.	TOTAL T4 (TYROXINE)	125.23	60-120 nmol/l
3.	TSH (THYROID STIMULATING HORMONE)	1.33	Euthyroid 0.25-5 ulU/ml Hyperthyroid <0.15 ulU/ml Hypothyroid >7.0 ulU/m

Comments: INTERPRETATION (AS PER KIT INSERT)

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

Thyroid

1. Primary HypoThyroidism is accompanied by depressed serum T values and elevated serum TSH level³ & T⁴
2. Primary Hyper Thyroidism is accompanied by elevated serum T levels along with depressed TSH values³ & T⁴
3. Normal T⁴ levels are accompanied by increased T³ in patient³ Thyrotoxicosis with
4. Slightly elevated T³ levels may be found in pregnancy and estherapy, while depressed levels may be encountered in severe illness³ , renal failure and during therapy with drugs like propranopropylthiouracillol and
5. Although elevated TSH levels are nearly always indicative of phyphthyroidism, and may be seen in secon dary thyrotoxicosis.

REMARKS: Normal/Reference ranges given are as per kit literature. Ccorrelation is advised. Clinical

Note:- Maximum reading in our instrument is 100. In case of reading greater than 100, instrument given result with greater than (>) sign.

Machines Used: MINI VIDAS
 Checked By: Shweta Awasthi



DR. ANKITA KATARA PANDEY
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HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
1418 BLOOD GROUP &RH TYPE- Method : METHYL RESORSINOL METHOD			
BLOOD GROUPING	"B"		
RH TYPING	POSITIVE	(as per sample collection)	

Machines Used:AUTO - ANALYSER OPTIMA - 1,HDC Lyte
Semi Autometed
Checked By: Shweta Awasthi


Dr. ANKITA KATARA PANDEY
MD (Pathology)



PATIENT NAME	RAVI SRIVASTAVA	AGE/SEX	48 YRS / M
REFERRED BY	SHEKHAR HOSPITAL	REPORTING DATE	14/09/2024

X-RAY CHEST PA VIEW

Soft tissue shadows appears normal.

Bony cage is normal.

Diaphragmatic shadows are normal on both sides.

Costo-phrenic angles are bilaterally clear.

Trachea is central in position.

Hilar shadows are normal.

Cardiac size and contours are normal.

Vascular markings are normal on both sides in all zones.

Pulmonary parenchyma does not reveal any significant lesion.

PLEASE CORRELATE CLINICALLY



DR. AMRITA SINGH
MD RADIO DIAGNOSIS

SHEKHAR HEART LUNG CENTRE

"Centre of Excellence in Cardiac & Lung Care with a difference"

2D- ECHO REPORT

T NAME: MR. RAVI SRIVASTAVA	AGE: 48 YEARS	SEX :MALE
PT: OPD	BED NO: 0000	DATE: 14/09/2024

MITRAL VALVE

Morphology AML - Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming
 PML - Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.
 Subvalvular deformity Present/Absent

Doppler Normal/Abnormal
 Mitral stenosis Present/Absent RR interval..... msec
 EDG.....mmHg MDG.....mmHg MVA..... cm'
 Mitral regurgitation. Absent/Trivial/Mild/Moderate/Severe

TRICUSPID VALVE

Morphology Normal/Thickening/Calcification/Prolapse/Vegetation/Doming
 Doppler Normal/Abnormal
 Tricuspid stenosis Present/ Absent RR interval..... msec
 Tricuspid regurgitation EDG..... mmHg MDG..... mmHg
 Absent/Trivial/Mild/Moderate/Severe Fragmented Signals
 Velocity m/sec Pred. RVSP= RAP+ mmHg
 TAPSE=

PULMONARY VALVE

Morphology Normal/Thickening/Doming/Vegetation
 Doppler Normal/Abnormal PVmax 0.8 m/s
 Pulmonary stenosis Present/Absent Level Pulmonary annulus..... mm
 PSG 2.6 mmHg
 Pulmonary regurgitation Present/Absent
 Early diastolic gradient.....mmHg End diastolic gradientmmHg
 Pred. PA mean P..... mm Hg

AORTIC VALVE

Morphology Normal/Thickening/Calcification/Restricted Opening/Flutter/Vegetation No. of cusps 1/2/3/4
 Doppler Normal/Abnormal AVmax 1.2 m/s
 Aortic stenosis Present/ Absent Level
 PSG 6.3 mmHg Aortic annulusmm
 Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe

~2



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Measurements

Aorta	26	LAes	35
IVS ed.	10	IVS es.	12
LVed	47	LVes	31
PW(LV)ed	09	PW(LV)es	12
RVed	-	RV anterior wall	-
IVS Motion Normal/Flat/Paradoxical	-	IVC size	10

Aorta: SOV = mm; Normal / dilated,

STJ = mm Asc AO = mm;

Normal / dilated

Arch & Desc Ao: Normal / dilated / coarct

MPA: Normal / dilated

PA Branches: Normal / dilated

CHAMBERS

LV

Normal/Enlarged/Clear/Thrombus/Hypertrophy

Contraction - Normal/Reduced

LV diastolic function - Normal/dysfunction grade = I

LA

Normal/ Enlarged/ Clear/ Thrombus

RA

Normal/ Enlarged/ Clear/ Thrombus

RV

Normal/Enlarged/Clear/Thrombus

Pericardium

Normal/Thickened/Calcification/Effusion

FINAL IMPRESSION:

- NORMAL LV SYSTOLIC FUNCTION
- LVEF = 65 %
- NO RWMA
- LVDD GRADE I
- NO MR/AR/PR/TR
- NO CLOT/PERICARDIAL EFFUSION/THROMBUS



CONSULTANT

Dr. Harshit Gupta

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WHOLE ABDOMEN ULTRASOUND

LIVER: Liver is mild enlarged in size measuring ~16.8 cm and has increased echogenicity with normal visualization of intrahepatic portal channel, biliary radicles and diaphragm. No focal lesion seen. The intra hepatic portal channels are normal. Porta hepatis is normal.

GALL BLADDER: post op status.
CBD is normal.

PANCREAS: The head, body and tail portion of pancreas is normal in size and shape and has a normal homogenous echotexture. No focal lesion seen.

SPLEEN: Spleen is normal in size and has a normal homogenous echotexture. No focal lesion seen. Splenic vein is normal in caliber.

RIGHT KIDNEY: Is normal in size and has a normal cortical echotexture. Cortico-medullary demarcation is distinct. The cortical thickness is normal. **Few calculi are noted, largest measuring ~11 mm at lower pole.**

LEFT KIDNEY: Is normal in size and has a normal cortical echotexture. Collecting system of is normal and cortico-medullary demarcation is distinct. The cortical thickness is normal. **Few calculi are noted, largest measuring ~7 mm at lower pole.**

URINARY BLADDER: Urinary bladder is partially distended.

PROSTATE: grossly normal.

No free fluid is noted in abdomen

IMPRESSION:

- MILD HEPATOMEGALY WITH GRADE I FATTY LIVER
- BILATERAL RENAL CALCULI



DR. AMRITA SINGH
MD RADIO DIAGNOSIS

Ravi Sivasdava

GE Healthcare REF: 019728LS

14.09.2024 10:13:36
SHEKHAR HOSPITAL PVT LTD
INDIRA NAGAR, SECTOR-B
LUCKNOW U.P.

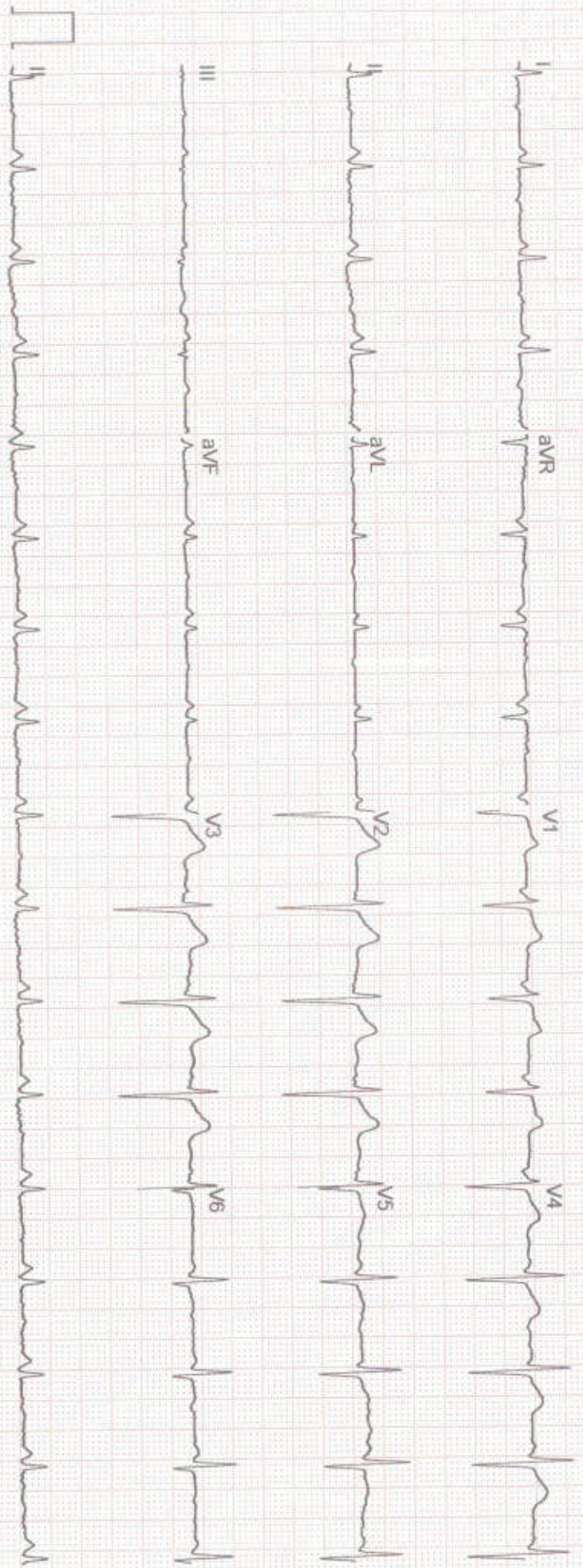
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician
Ordering Ph:
Referring Ph:
Attending Ph:

97 bpm
- / - mmHg

QRS : 78 ms
QT / QTcBaz : 362 / 459 ms
PR : 96 ms
P : 88 ms
RR / PP : 618 / 618 ms
P / QRS / T : 44 / 29 / 90 degrees

Sinus rhythm with short PR
Nonspecific T wave abnormality
Abnormal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

4x2.5x3_25_R1

Unconfirmed

1/1