

Patient Name : **MR. HEMANT SHARMA**
Patient ID : 37898
Age / Sex : 32 years / Male
Referred by : MEDIWHEEL
Bill ID : 64096

Collected : Jun 11, 2022, 10:38 a.m.
Reported : Jun 11, 2022, 11:25 a.m.
Sample ID :



Test Description	Results	Units	Biological Reference Range
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ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)

Sample Type : Serum

Ultrasensitive Thyroid Stimulative Hormone (TSH) [CLIA]	2.48	μIU/mL	0.3 - 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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Clinical Significance :-

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<u>FASTING BLOOD SUGAR</u>			
Sample Type : Flouride R			
Fasting Blood Sugar [GOD - POD]	93.10	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

END OF REPORT



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POST PRANDIAL BLOOD SUGAR

Sample Type : Flouride PP

Post Prandial Blood Sugar [GOD - POD]	115.24	mg/dl	110-180
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Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT******Dr. Sudhamani S. MD**
Consultant Pathologist
Reg. No. : 90461

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BLOOD GROUP

Sample Type : EDTA / Whole Blood

ABO Grouping

"A"

Rh Grouping

POSITIVE

Note:

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

END OF REPORT



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LIPID PROFILE

Sample Type : Serum

TOTAL CHOLESTEROL [CHOD-PAP]	173.60	mg/dL	Desirable : <200 mg/dl Borderline : 200 - 239mg/dl High : >240 mg/dl
TRIGLYCERIDES [Glycerol Phosphate Oxidase]	199.00	mg/dL	Desirable : <150 mg/dl Borderline : 150 - 199mg/dl High : >200mg/dl
HDL CHOLESTEROL [Direct]	35.10	mg/dL	Desirable : >40 mg/dl Borderline Risk : 35 mg/dl High Risk : <30 mg/dl
LDL CHOLESTEROL [Calculated]	98.70	mg/dL	Desirable : <100 mg/dl Borderline : 130 - 160mg/dl High : >160mg/dl
VLDL Cholesterol [Calculated]	39.80	mg/dL	Desirable : <26 mg/dl Borderline : >30 mg/dl
Total Chol / HDL Chol Ratio [Calculated]	4.95	mg/dL	Desirable : <5 %
LDL / HDL Ratio [Calculated]	2.81		1.00 - 3.55
NON-HDL CHOLESTEROL [Calculated]	138.50	mg/dL	Desirable : <130 mg/dl Borderline : 160 - 189 mg/dl High : >220 mg/dl

Technique: Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****

Dr. Sudhamani S. MD
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URINE ANALYSE REPORT

Sample Type : Urine

PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	Slightly Hazy		
REACTION (PH)	6.0		4.8 - 7.6
SPECIFIC GRAVITY	1.025		1.010 - 1.030
ALBUMIN	Present (+)		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

MICROSCOPY

PUS CELLS/hpf	2-4		
RBCs/hpf	Absent		
EPI.CELLS/hpf	2-4		
CASTS	Absent		
CRYSTALS	Absent		
BACTERIA	Absent		
Other	Absent		

END OF REPORT

Dr. Sudhamani S. MD
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LIVER FUNCTION TEST

Sample Type : Serum

TOTAL BILIRUBIN [DIAZO]	0.37	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [DIAZO]	0.19	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [CALCULATED]	0.18	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [IFCC without Pyridoxal Phosphate]	22.80	IU/L	5-40 IU/L
S.G.P.T.(ALT) [IFCC without Pyridoxal Phosphate]	30.00	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [Amino Methyl Propanol (AMP)]	102.30	IU/L	44-147 IU/L
TOTAL PROTEINS [BIURET]	7.54	IU/L	6.0 - 8.5g/dL
ALBUMIN [BROMO CRESOL GREEN (BCG)]	4.26	g/dl	3.5-5.0 g/dl
GLOBULIN [CALCULATED]	3.28	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [CALCULATED]	1.30		
GAMMA GT	12.10	U/L	0 - 45

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

Dr. Sudhamani S. MD
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SR. URIC ACID

Sample Type : Serum

Uric Acid [Uricase - POD]	5.30	mg/dl	3.6 - 7.7
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****



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CREATININE

Sample Type : Serum

Creatinine	0.84	mg/dl	0.40 - 1.40
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[Enzymatic]

Formula

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

END OF REPORT



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BLOOD UREA LEVEL (BUL)

Sample Type : Serum

Urea	17.00	mg/dl	10 - 40
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[Urease - GLDH]

Bun	7.94	mg/dl	6 - 21
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[Calculated]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

END OF REPORT

**Dr. Sudhamani S. MD**
Consultant Pathologist
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COMPLETE BLOOD COUNT

Sample Type : EDTA / Whole Blood

Hemoglobin	13.6	g/dl	13.0 - 17.0
RBC COUNT	4.86	Millions/c	4.5 - 5.5
PCV(Hematocrit)	42.1	%	40.0 - 50.0
Mean Cell Volume(MCV)	86.63	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	27.98	pg	27.0 - 33.0
Mean Cell Hb Conc(MCHC)	32.30	g/dl	32 - 36
RDW	13.2	%	11.50 - 14.50
Total Leucocytes (WBC) Count	5120	/cumm	4000-11000

DIFFERENTIAL COUNT

Neutrophils	47.6	%	40 - 70
Lymphocytes	39.2	%	20 - 50
Eosionphils	2.6	%	01 - 06
Monocytes	10.2	%	00 - 08
Basophils	0.40	%	00-01

SMEAR STUDY

RBC Morphology	Normocytic Normocromic.		
WBC Morphology	Monocytosis		
Platelets On Smear	Adequate on Smear		
Platelet Count	202000	/cumm	150000 - 450000
MPV	11.9	fL	6.5 - 10.0

Comments :-**Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

Technique :-

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

END OF REPORT



Dr. Sudhamani S. MD
Consultant Pathologist
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TOTAL THYROXINE (T4)

Sample Type : Serum

Total Thyroxine (T4) [CLIA]	92.30	ng/ml	52 - 127
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****END OF REPORT******Dr. Sudhamani S. MD**
Consultant Pathologist
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TOTAL TRIIODOTHYRONINE (T3)

Sample Type : Serum

TotalTriiodothyronine (T3) [CLIA]	1.25	ng/dL	0.69 - 2.15
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****END OF REPORT******Dr. Sudhamani S. MD**
Consultant Pathologist
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<u>GLYCOCYLATED HAEMOGLOBIN</u>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [Tosoh HPLC]	5.0	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	96.80	mg/dL	116.89 - 154.2

****END OF REPORT******Dr. Sudhamani S. MD**
Consultant Pathologist
Reg. No. : 90461

ECHO Report

Date: 11/06/2022

Patient Details

Patient ID – 19793
Name- MR HEMANT SHARMA
Age- 33 YEARS
Gender- MALE
Referral By - MEDI WHEEL

Doctor Incharge DR. MAHESH PADSALGE

Clinical Status of Patient -

Finding description -

- 1. Normal cardiac chambers dimensions.**
- 2. Normal LV systolic function.**
- 3. No RWMA.**
- 4. All cardiac valves are structurally normal.**
- 5. Trivial MR, Trivial PR, NO AR.**
- 6. No PAH.**
- 7. Normal RV systolic function.**
- 8. No clot/vegetation/pericardial effusion.**
- 9. No coarctation of aorta.**

Dr. Mahesh V. Padsalge

MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)

Chamber Dimensions-M mode Findings

LVID (Diastole)35-56(mm)	- 41.00	LVID(Systole) 24-42(mm)	- 28.00
IVS(Diastole)8-12(mm)	- 9.00	IVS(Systole) 14-42(mm)	- 13.00
LVPWT(Diastole)6-11(mm)	- 9.00	EPSS	- 2.00
LVEF (%)	- 60%	LVFS(%)	- 32.00

LV Volume(Diastolic)(mm³)
Meridional Wall Stress in System

LV Volume (Systolic)(mm³)
Cubed LV Volume in Diastole(mm³)

Cubed LV+ myocardial volume(mm³)

Velocity of circumferential
Shortening(mm)

Aortic root 22-37(mm)	- 26.00
Left Atrium Length(mm)	- 25.00
Left Atrium Volume(mm ³)	
RV size	Normal
Normal	
RV volume(mm ³)	
Normal	
Pericardium	Normal
Effusion	None
Resp Variation	Present
Predicted RV Systolic Pressure	

Left Atrium Width(mm)
Left Atrium Area(mm²)
RV Function

RA Size

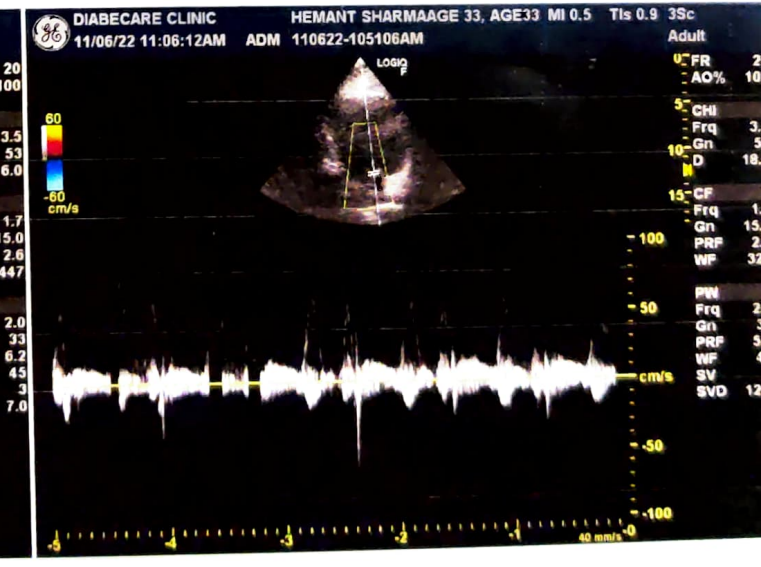
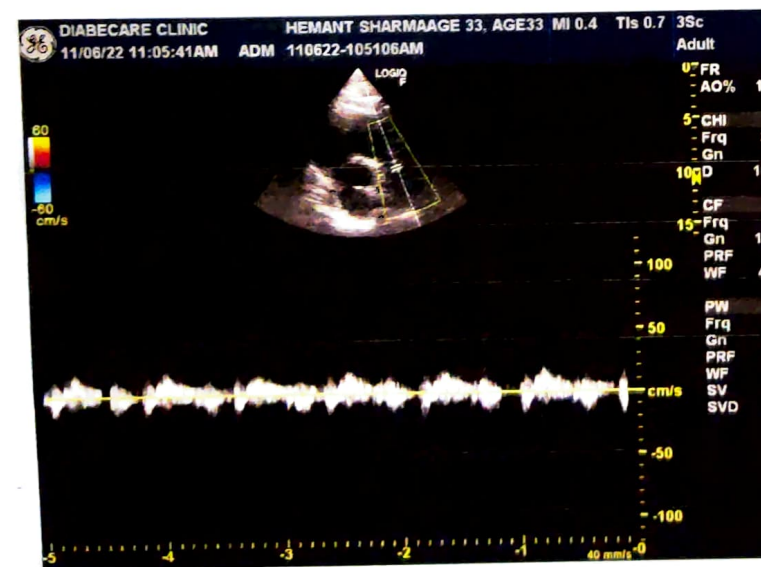
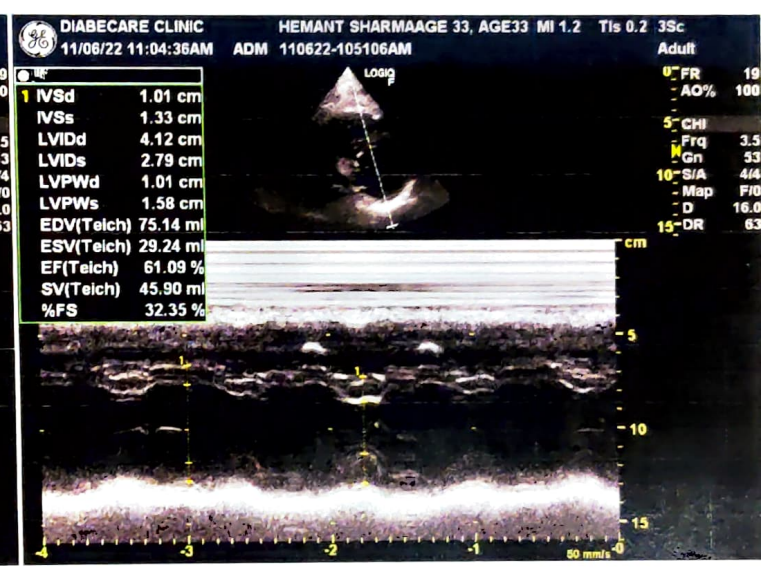
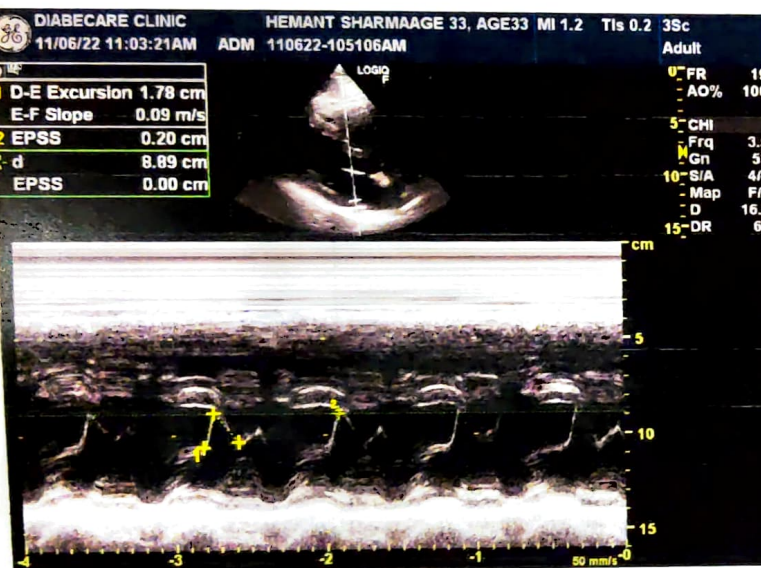
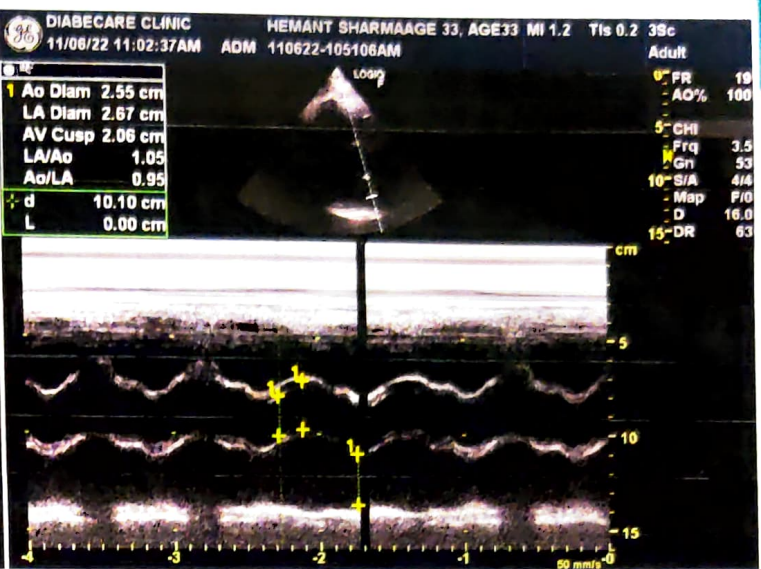
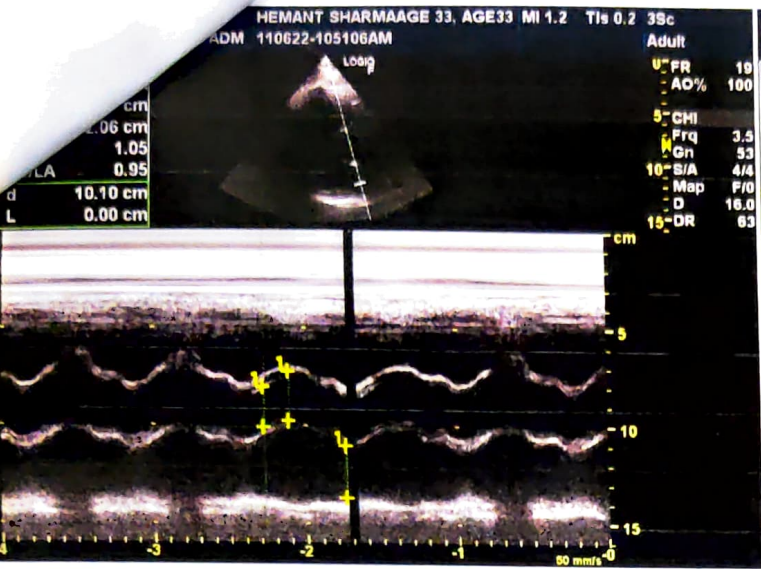
IVC Size(mm) – 12 mm Collapsible

Doppler Findings- I



Dr. Mahesh Padsalge

Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



भारत सरकार
GOVERNMENT OF INDIA

हेमंत जगदीशप्रसाद शर्मा
Hemant Jagdishprasad Sharma

जन्म वर्ष / Year of Birth : 1988
पुरुष / Male

8921 9834 3356

आधार – सामान्य माणसाचा अधिकार

भारतीय विशिष्ट ओळख प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता S/O जगदीशप्रसाद शर्मा, रूम
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Padalge

Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)

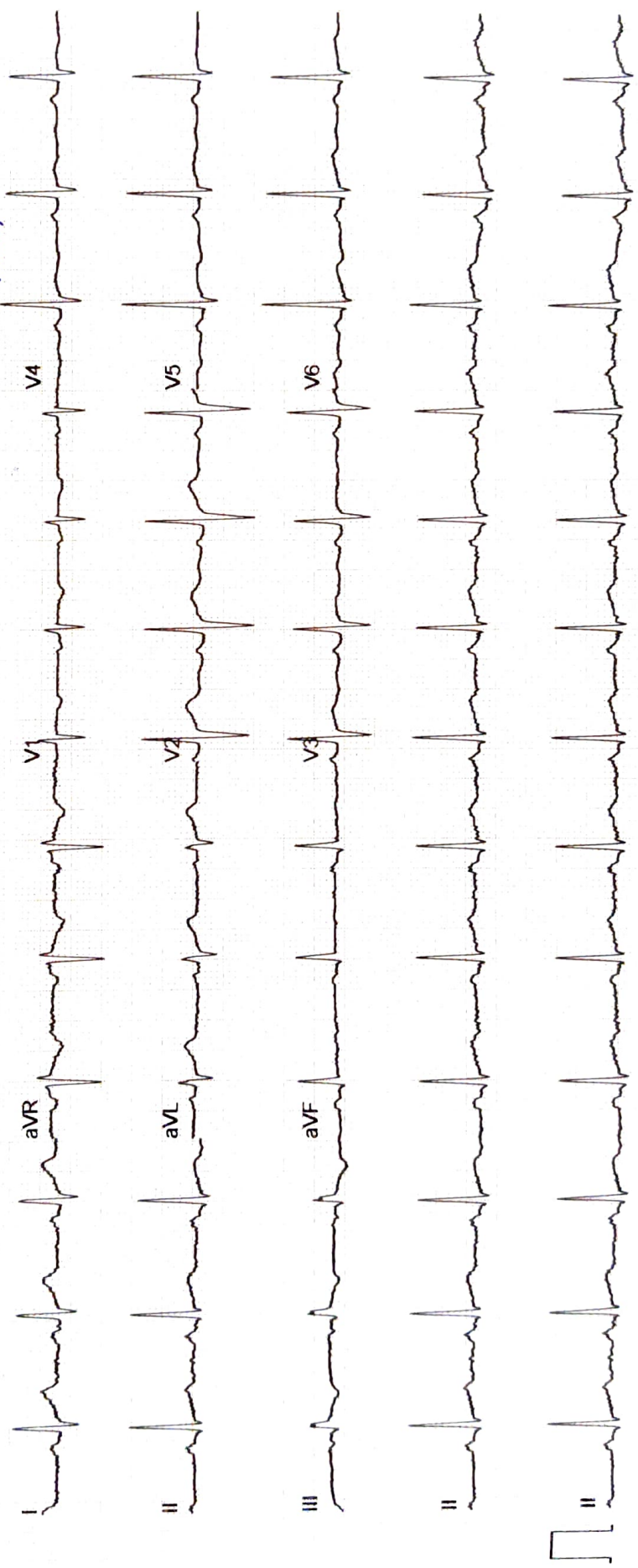
Male

QRS : 84 ms
QT / QTcBaz : 368 / 424 ms
PR : 144 ms
P : 88 ms
RR / PP : 750 / 750 ms
P / QRS / T : 28 / 59 / 12 degrees

Normal sinus rhythm
Nonspecific T wave abnormality
Abnormal ECG

Handwritten notes:
T wave abnormality
T wave inversion

Signature: Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



11/06/2023

Ms. Hemant Shama
33/M

Eye check up

	(R)		(L)
VA @	6/6	(A)	6/6
	N6		NL
Axes	@		@
Color Vm	wnt		wnt
(F)	PPA		PPA
	(BS)	wnt	

→

Name- HEMANT SHARMA**Date-11/6/2022****Age- 33/M****X-Ray Chest PA**

The Soft Tissues And Bony Thorax Are Normal.

Both The Costoprehnic And Cardiophrenic Angles Are Clear.

The Lung Field Appears Normal.

The Cardiac Shape And Size Are Normal.

Both The Hila Are Normal In Density And Position.

Both The Domes Of Diaphragm And Mediastinum Are Normal.

Impression: Normal Chest X-Ray.

For, 

DR. MRUDULA BABAR
CONSULTANT RADIOLOGIST**Dr. MRUDULA BABAR**
DMRE.CPS Mumbai 2009
(RADIOLOGIST)
Reg. No. 2005/03/2139

Name : MR. HEMANT SHARMA	Age/sex: 33/Yrs. /MALE
Ref by: MEDI WHEEL	Date: 11/06/2022

ULTRASOUND EXAMINATION OF ABDOMEN & PELVIS

Findings-

Suboptimal scan due to excessive bowel gases.

The Liver is mild enlarged in size (15.5cm), shape and raised echogenicity. No focal lesion is seen. The Hepatic veins appear normal. There is no IHBR dilatation. The portal vein appears normal.

The gall bladder is distended. The proximal C.B.D. is normal caliber

Visualized head of Pancreas appears normal in size and reflectivity. The pancreatic duct is not dilated. Rest of the pancreas and retro peritoneum is obscured by bowel gases

The spleen is normal in size, No focal lesion is seen. Splenic vein is normal at hilum.

Both kidneys are normal in position and size. They show normal cortical reflectivity and cortico-medullary differentiation. There is no evidence of renal calculus, hydronephrosis or mass.

Right kidney measures 11.2 X 6.0 cm

Left kidney measures 11.0 x 5.3cm

The Urinary bladder is well distended. No evidence of any intraluminal mass or calculi.

The visualized Prostate appears normal in size, shape and homogenous echotexture.

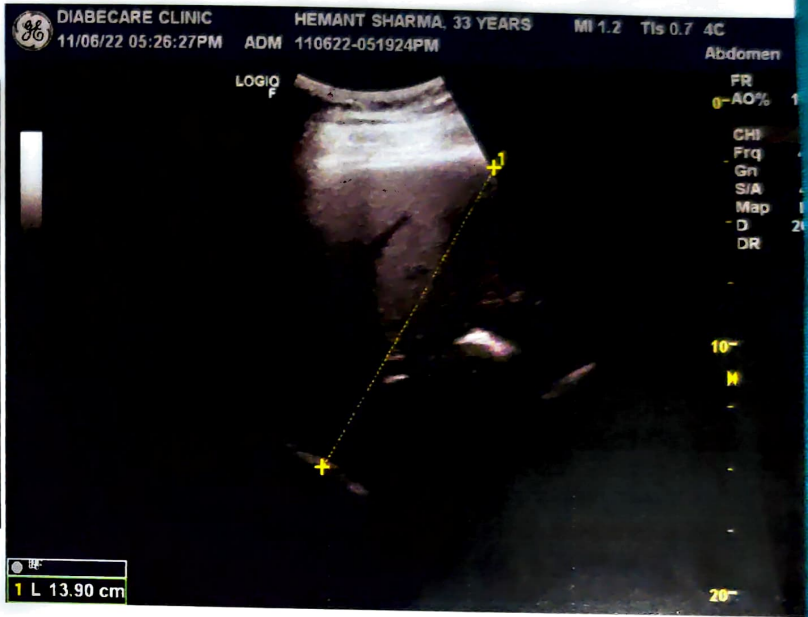
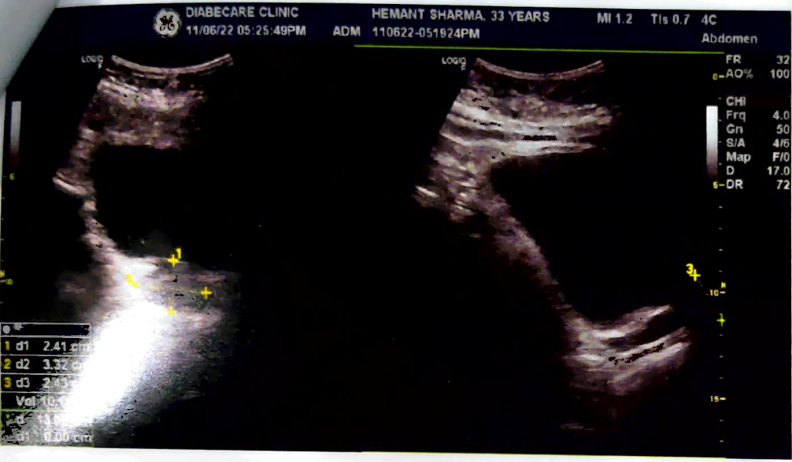
There is no free fluid is seen in the pelvis. No probe tenderness in present study.

IMPRESSION :-

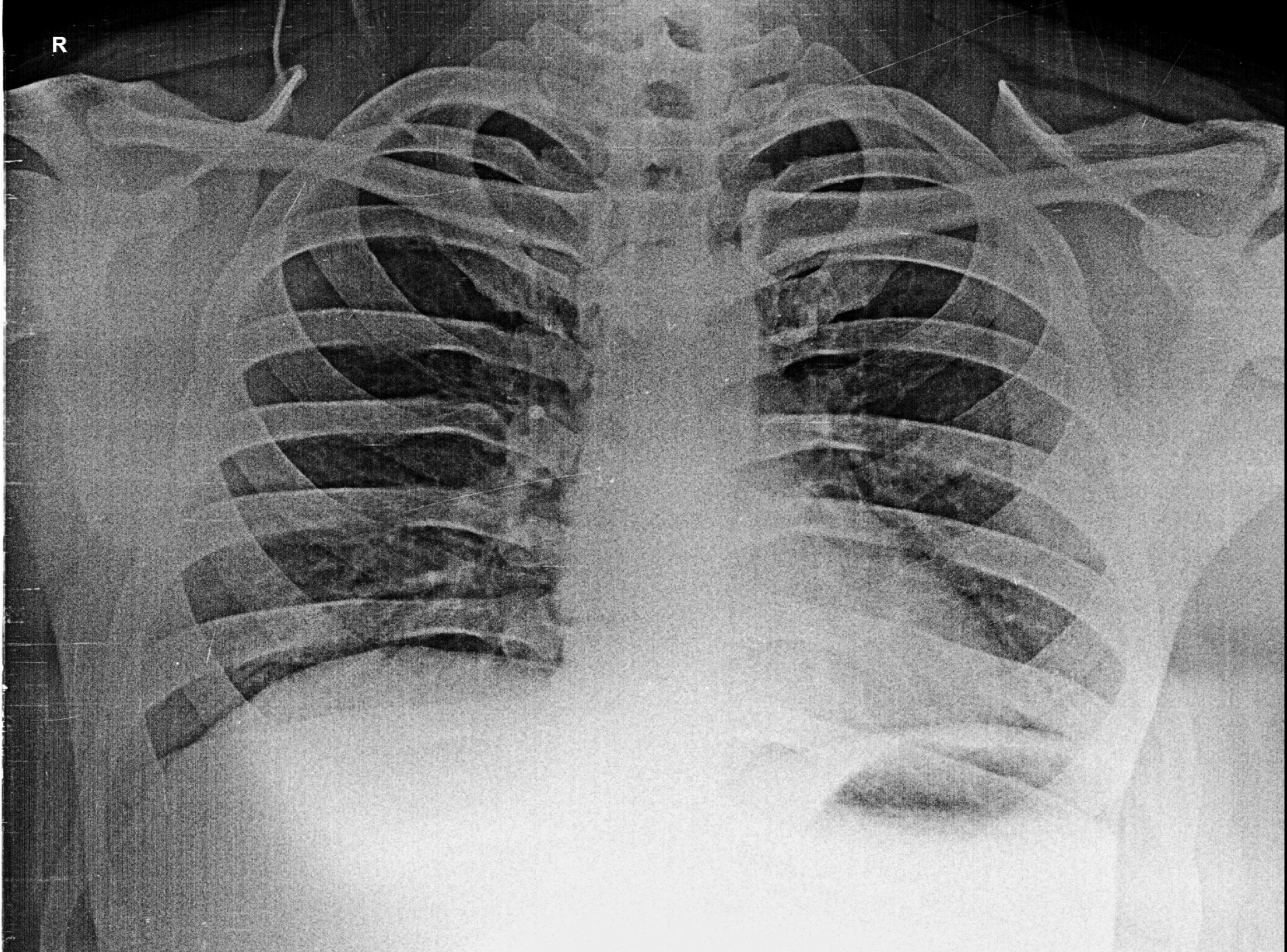
- **Mild hepatomegaly with grade1 fatty infiltration.**
- **Adv: clinical correlation.**



Dr. MRUDULA BABAR
CONSULTANT RADIOLOGIST



R



HEMANT SHARMAAGE 33YRS

6/11/2022

OLIVE DIAGNOSTIC, SEAWOOD SEC40