

Mr. R. Sengupta  
Age - 34 Y/M

B.P - 100/70

P - 100/100

H - 165 cm

Wt - 82 kg



**EXAMINATION OF EYES :- ( BY OPHTHALMOLOGIST )**

Patient Name Mr. R. Sajan

Date 4/11/23

Sex/Age 34/m

MR No .....

Employee Id .....

<b>EXTERNAL EXAMINATION</b>				
SQUINT <span style="float:right">- No</span>				
NYSTAGMUS <span style="float:right">- No</span>				
COLOUR VISION <span style="float:right">- normal</span>				
FUNDUS:(RE):- <span style="float:right">veel</span> (LE):- <span style="float:right">veel</span>				
<b>INDIVIDUAL COLOUR IDENTIFICATION</b>				
DISTANT VISION:(RE):- <span style="float:right">6/6</span> (LE):- <span style="float:right">6/6</span>				
NEAR VISION:(RE):- <span style="float:right">N/6</span> (LE):- <span style="float:right">N/6</span>				
<b>NIGHT BLINDNESS</b>				
	SPH	CYL	AXIS	ADD
RIGHT	-	-	-	-
LEFT	-	-	-	-
REMARKS :- <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 10px;"> <div style="text-align: left;"> <p>Vh <math>\left\{ \begin{matrix} 6/6 \\ 6/6 \end{matrix} \right.</math></p> <p>veel <math>\left\{ \begin{matrix} N/6 \\ N/6 \end{matrix} \right.</math></p> </div> <div align="center" style="border: 1px solid black; border-radius: 50%; padding: 10px; width: 60px; height: 60px; display: flex; flex-direction: column; justify-content: center; align-items: center;"> <p align="center">APOLLO ★ RAIPUR ★ CLINIC</p> </div> </div>				

**Dr. Sweety Lath**

BDS (Cosmetic Dental Surgeon)



**Dr. Vivek Lath**

Chief Dental Consultant  
BDS, MDS, Diplomate (WCOI, Japan)  
Professor, MCDRC - Durg  
Reg. No. CGDC/14/PG/45

- Consult for : Digital Dentistry • Fixed Teeth • RCT • Dental Implants • Gums Diseases • Dentures • Cosmetic Filling • Tooth Jewellery
- Digital OPG • Braces Treatment • Tooth Removal • Kids Dental Treatment • All Kind of Dental Surgeries

Mr. R. Sagar

4/11

Ch: Pt came for routine dental check up.

Obs: stain & car +  
Stainless steel crown 1/c

Adv: oral prophylaxis



Handwritten signature



**Patient Name** : MR R. SAGAR  
**UHID/ MR No** : 7483  
**Visit Date** : 04/11/2023  
**Sample Collected On** : 04/11/2023 03:50PM  
**Ref. Doctor** : SELF  
**Sponsor Name** :

**Age/Gender** : 34 Y. Male  
**OP Visit No** : OPD-UNIT-II-2  
**Reported On** : 05/11/2023 12:55PM

### HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>HEMOGRAM</b>			
Haemoglobin(HB) Method: CELL COUNTER	14.9	gm/dl	12 - 17
Erythrocyte (RBC) Count Method: CELL COUNTER	5.11	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	44.70	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	87.5	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	29.2	pg	26 - 34
MCHC (Mean Corpuscular Hb Conc.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	12.8	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	5.88	cells/cumm	3.50 - 10.00
Neutrophils Method: CELL COUNTER	64	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	28	%	15.0 - 45.0
Eosinophils Method: CELL COUNTER	02	%	1-6%
Monocytes	05	%	4.0 - 12.0
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

**End of Report**

*Results are to be correlated clinically*

Lab Technician / Technologist  
path

Page 4 of 5

*Ram*  
**DR DHANANJAY RAMCHANDRA PRASAD**  
**M.D. PATHOLOGY**

Patient Name : MR R. SAGAR  
UHID/ MR No : 7483  
Visit Date : 04/11/2023  
Sample Collected On : 04/11/2023 03:50PM  
Ref. Doctor : SELF  
Sponsor Name :

Age/Gender : 34 Y. Male  
OP Visit No : OPD-UNIT-II-2  
Reported On : 05/11/2023 12:55PM

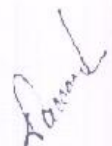
### HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	231	lacs/cu.mm	150-400
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	10	mm /HR	0 - 10
<b>Blood Group (ABO Typing)</b>			
Blood Group (ABO Typing)	A		
RhD factor (Rh Typing)	POSITIVE		

**End of Report**  
*Results are to be correlated clinically*

Lab Technician / Technologist  
path

Page 5 of 5

  
DR DHANANJAY RAMCHANDRA PRASAD  
M.D. PATHOLOGY

**Patient Name** : MR R. SAGAR  
**UHID/ MR No** : 7483  
**Visit Date** : 04/11/2023  
**Sample Collected On** : 04/11/2023 03:50PM  
**Ref. Doctor** : SELF  
**Sponsor Name** :

**Age/Gender** : 34 Y Male  
**OP Visit No** : OPD-UNIT-II-2  
**Reported On** : 05/11/2023 12:55PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>GLUCOSE - (POST PRANDIAL)</b>			
Glucose -Post prandial Method: REAGENT GRADE WATER	373.0	mg/dl	70-140
<b>GLUCOSE (FASTING)</b>			
Glucose- Fasting SUGAR REAGENT GRADE WATER	210.0	mg/dl	70 - 120
<b>KFT - RENAL PROFILE - SERUM</b>			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	10	mg/dl	7 - 20
<b>Creatinine</b> METHOD: Spectrophotometric	0.92	mg/dl	0.6-1.4
<b>Uric Acid</b> Method: Spectrophotometric	3.3	mg/dL	2.6 - 7.2

**End of Report**  
*Results are to be correlated clinically*

Lab Technician / Technologist  
 path





**Patient Name** : MR R. SAGAR  
**UHID/ MR No** : 7483  
**Visit Date** : 04/11/2023  
**Sample Collected On** : 04/11/2023 03:50PM  
**Ref. Doctor** : SELF  
**Sponsor Name** :

**Age/Gender** : 34 Y. Male  
**OP Visit No** : OPD-UNIT-II-2  
**Reported On** : 05/11/2023 12:55PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>LIPID PROFILE TEST (PACKAGE)</b>			
Cholesterol - Total	210.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	517.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotometric			
HDL Cholesterol	36.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotometric			
LDL Cholesterol	70.60	mg/dl	Optimal:< 100      Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189      Very High :>=190
Method: Spectrophotometric			
VLDL Cholesterol	103.40	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	5.83		3.5-5
Method: Spectrophotometric			

**End of Report**  
*Results are to be correlated clinically*

Lab Technician / Technologist  
 path



Patient Name : MR R. SAGAR  
 UHID/ MR No : 7483  
 Visit Date : 04/11/2023  
 Sample Collected On : 04/11/2023 03:50PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 34 Y. Male  
 OP Visit No : OPD-UNIT-II-2  
 Reported On : 05/11/2023 12:55PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>LIVER FUNCTION TEST</b>			
<b>Bilirubin - Total</b> Method: Spectrophotometric	0.8	mg/dl	0.1- 1.2
<b>Bilirubin - Direct</b> Method: Spectrophotometric	0.2	mg/dl	0.05-0.3
<b>Bilirubin (Indirect)</b> Method: Calculated	0.60	mg/dl	0 - 1
<b>SGOT (AST)</b> Method: Spectrophotometric	19	U/L	0 - 40
<b>SGPT (ALT)</b> Method: Spectrophotometric	24	U/L	0 - 41
<b>ALKALINE PHOSPHATASE</b>	78	U/L	25-147
<b>Total Proteins</b> Method: Spectrophotometric	6.5	g/dl	6 - 8
<b>Albumin</b> Method: Spectrophotometric	4.3	mg/dl	3.4 - 5.0
<b>Globulin</b> Method: Calculated	2.2	g/dl	1.8 - 3.6
<b>A/G Ratio</b> Method: Calculated	1.95	%	1.1 - 2.2

**End of Report**  
*Results are to be correlated clinically*

Lab Technician / Technologist  
 path

Page 3 of 5

*Dhananjay*  
 DR DHANANJAY RAMCHANDRA PRASAD  
 M.D. PATHOLOGY



**Patient Name** : MR R. SAGAR  
**UHID/ MR No** : 7483  
**Visit Date** : 04/11/2023  
**Sample Collected On** : 04/11/2023 03:50PM  
**Ref. Doctor** : SELF  
**Sponsor Name** :

**Age/Gender** : 34 Y Male  
**OP Visit No** : OPD-UNIT-II-2  
**Reported On** : 05/11/2023 12:55PM

### CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>URINE ROUTINE EXAMINATION</b>			
<b>Physical Examination</b>			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.020		1.001 - 1.030
Reaction (pH)	6.0		
<b>Chemical Examination</b>			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Present 3 +		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
<b>Microscopic Examination</b>			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	4-6	/hpf	0 - 5
Epithelial Cell	2-4	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

**End of Report**

*Results are to be correlated clinically*

Lab Technician / Technologist  
path



Patient Name : Mr.R. SAGAR	Collected : 05/Nov/2023 11:43AM
Age/Gender : 34 Y 0 M 0 D /M	Received : 05/Nov/2023 12:14PM
UHID/MR No : DSUS.0300005449	Reported : 05/Nov/2023 03:06PM
Visit ID : DSUSOPV6290	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDDHI AR
IP/OP NO :	Patient location : Raipur,Raipur

**DEPARTMENT OF IMMUNOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

**THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM**

TRI-IODOTHYRONINE (T3, TOTAL)	1.53	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	11.80	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	3.390	µIU/mL	0.35-5.5	CLIA

**Comment:**

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotrocinoma

\*\*\* End Of Report \*\*\*

*Sandhya Verma*

Dr. SANDHYA VERMA

MBBS, MD, (Pathology)

Apollo Consultant Pathologist

\*THIS PAPER IS USED FOR CLINICAL REPORTING PURPOSE ONLY\*

LICENSEE : SAMRIDDHI AROGYAM PVT. LTD

Apollo Clinic @ Tiara Complex A.T. Classic Near Ashoka Ratan, VIP Estate, Shankar Nagar, Raipur (C.G.)

Email : raipur1@apolloclinic.com | Website : www.apolloclinic.com

Online appointments: www.askapolc.com | Online reports: https://phr.apolloclinic.com

Page 1 of 2

**+91 96918 26363**

**0771 4033341/42**