

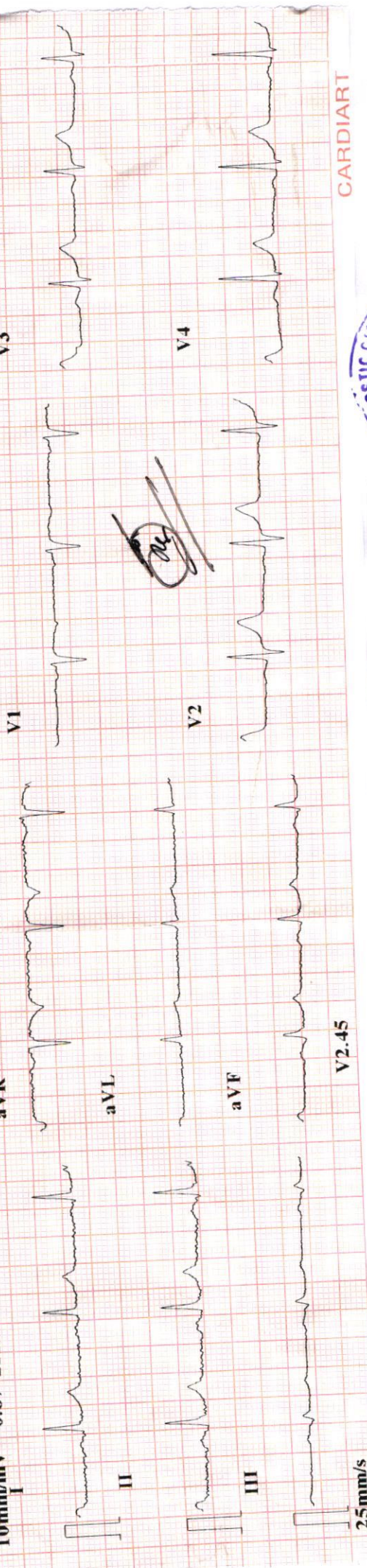
56/M

Bray Mohan

BPL-02 Mx.

12-03-2022 10:54:19

10mm/mV 0.67-25Hz AC50



CARDIART



6/2

Dr. Mahendra Chourasiya
M.D., D.M. (Cardio)

BPL-02 Minnesota Code:

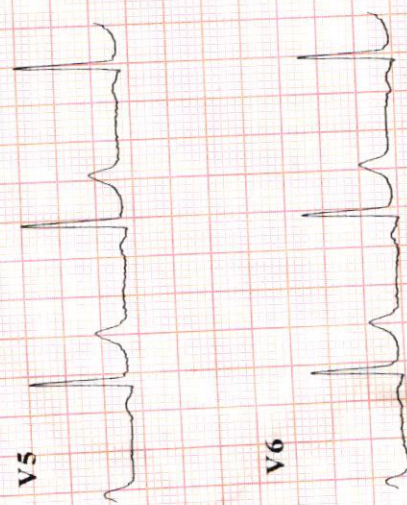
9-4-1(V3)

ID : 220312-1054

Name	: 56 yr
Age	: Male
Sex	: mmHg
BP	: cm
Height	: kg
Weight	: 72 bpm
HR	: 112 ms
P Dur	: 151 ms
PR int	: 102 ms
QRS Dur	: 351/385 ms
QT/QTc int	: 60/37/39 °
P/QRST axis	: 1.487/0.559 mV
RV5/SV1 amp	: 2.046 mV
RV5+SV1 amp	: 1.331/0.351 mV
RV6/SV2 amp	

Diagnosis Information:
800: Sinus Rhythm
Normal ECG

Report Confirmed by:



MR. BRAJMOHAN TANWAR

56 YEARS /MALE

BANK OF BARODA

12-03-2022

Height: 177 CM.

Weight: 86 KG.

BP: - 135/90 mmhg

Pulse: 72/- Regular

BMI: - 27.5

The Medical Examiner should record the findings under one of the following categories:-

- ✓ 1. FIT
- 2. UNFIT



Dr. D. S. Chhabra
DR. D. S. CHHABRA
MBBS. MD.

BOB

बैंक ऑफ बड़ौदा
Bank of Baroda

नाम
 Name: **Brajmohan Tanwar**

कार्डनं. सं. सं.
 E.C. No.: **61206**

जारीकर्ता प्राधिकारी
 Issuing Authority



धारकक हस्ताक्षर
 Signature of Holder

Dr. D. S. Chhabra
 M.B.B.S., M.D.
 Reg. No.-5007

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MR. BRAJ MOHAN TANWAR

56 Yrs./M.

BOB

12th Mar. 2022

X-RAY CHEST PA VIEW

Bony cage is normal.

Trachea is central.

C.P. angles are clear.

Cardiac contour and cardiothoracic ratio are normal.

Lung fields are clear.

DR.D.S.CHHABRA.

M.D.

MR. BRAJ MOHAN TANWAR

56 Yrs./M.

BOB

12th Mar. 2022

ABDOMINAL SONOGRAPHY

Liver is of normal size, shape, has smooth margins & regular contours and the parenchyma is mildly hyperechoic in echostructure, **fatty changes (Grade I)**. No focal lesion.

Gall bladder is of normal size, shape, has thin walls & the contents are clear fluid. No evidence of any calculus. Biliary tree is undilated.

Pancreas is normal, no focal / diffuse pathology. Spleen is normal. The Portal and splenic veins are normal in calibre.

Both Kidneys are normal in size [measure about 11 cms. in length], shape and echostructure. No calculus in both. The collecting system and ureter on both side are undilated.

Urinary bladder is normal in size, shape & has thin walls.

Prostate is of normal size (around 16 gms.) & is normal in echostructure.

No vesical residue in post-mic exam.

There is no ascitis. No obvious abdominal lymphadenopathy. No sub / supra diaphragmatic pathology on either side.

IMPRESSION :

Fatty changes in liver (Grade I).



DR.D.S.CHHABRA.

M.D.



LABORATORY REPORT



Name : BRAJMOHAN TANWAR	Sex/Age : Male / 56 Years	Case ID : 20301603242
Ref. By :	Dis. At :	Pt. ID :
Bill. Loc. : UNIQUE DIAGNOSTIC CENTRE INDORE		Pt. Loc. :
Reg Date and Time : 12-Mar-2022 12:30	Sample Type : Serum	Mobile No. :
Sample Date and Time : 12-Mar-2022 12:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 12-Mar-2022 14:13	Acc. Remarks	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Prostate Specific Antigen <small>CMIA</small>	1.269	ng/mL	0.00 - 4.00	
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INTERPRETATIONS:

Useful for Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year. Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment. Prostate-specific antigen (PSA) values are reported with the 95th percentile limits by decade of age. These reference limits include men with benign prostatic hyperplasia. They exclude all cases with proven cancer. PSA values exceeding the age-specific limits are suspicious for prostate disease, but further testing, such as prostate biopsy, is needed to diagnose prostate pathology. Values >0.2 ng/mL are considered evidence of biochemical recurrence of cancer in men after prostatectomy

CAUTIONS:

Serum markers are not specific for malignancy, and values may vary by method. When age is not supplied, the results cannot be flagged as high or low. Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate biopsy may increase PSA levels. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results

- If total PSA is above cut off value (between 4 to 20 ng/ml) free PSA should be advised to differentiate benign prostatic hyperplasia from prostatic malignancy.
- Free PSA levels above 20 to 25 % of total PSA are more likely to be associated with BPH.
- Prostate biopsy is required for the diagnosis of cancer.

RELATIONSHIP BETWEEN PROBABILITY OF PROSTATE MALIGNANCY & FREE PSA% TO TOTAL PSA

..... Free PSA % to total PSA	0-10%	10-15%	15-20%	20-25%	>25%.
fr Probability of malignancy	56%.	28%	20%	16%	8%

DILUTION PROTOCOL:

At our lab with kit, manual dilution protocol has been validated for PSA up to 1:20 dilution and result up to 2000 NG/ML. After above dilution, it will be done manually and because of Ag-Ab reaction curve it may be erroneous if diluted after validated dilution. * Test results, interpretation & notes are meant for Medical Personal only.

----- End Of Report -----

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Yogesh Pawde
 MD Pathology

Dr. A Mishra
 M.D. Microbiology

Dr. Ankita Kothari
 MD, DNB (Pathology)

Page 3 of 4
 Printed On : 12-Mar-2022 14:24



LABORATORY REPORT



Name : BRAJMOHAN TANWAR	Sex/Age : Male / 56 Years	Case ID : 20301603242
Ref. By :	Dis. At :	Pt. ID :
Bill. Loc. : UNIQUE DIAGNOSTIC CENTRE INDORE		Pt. Loc. :
Reg Date and Time : 12-Mar-2022 12:30	Sample Type : Serum	Mobile No. :
Sample Date and Time : 12-Mar-2022 12:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 12-Mar-2022 14:11	Acc. Remarks	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
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Thyroid Function Test

Triiodothyronine (T3) CMIA	102.33	ng/dL	58 - 159	
Thyroxine (T4) CMIA	8.7	µg/dL	4.6 - 10.5	
TSH CMIA	2.5759	µIU/mL	0.5 - 8.9	

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Soma Yadav
M.D. (Pathology)

Dr. A Mishra
M.D. Microbiology

Dr. Ankita Kothari
MD, DNB (Pathology)

Page 2 of 4

Printed On : 12-Mar-2022 14:24



LABORATORY REPORT



Name : BRAJMOHAN TANWAR	Sex/Age : Male / 56 Years	Case ID : 20301603242
Ref. By :	Dis. At :	Pt. ID :
Bill. Loc. : UNIQUE DIAGNOSTIC CENTRE INDORE		Pt. Loc. :
Reg Date and Time : 12-Mar-2022 12:30	Sample Type : Whole Blood EDTA	Mobile No. :
Sample Date and Time : 12-Mar-2022 12:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 12-Mar-2022 13:30	Acc. Remarks	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Glycated Haemoglobin Estimation

HbA1C <i>(IT)</i>	H	6.90	% of total Hb	4.80 - 6.00
Avg. PI Glucose (Last 3 Months) <i>Calculated</i>	H	151.33	mg/dL	80.00 - 140.00

Please Note change in reference range as per ADA 2021 guidelines.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Ankita

Dr. Ankita Kothari
MD, DNB (Pathology)

Dr. A Mishra
M.D. Microbiology

Dr. Soma Yadav
M.D. (Pathology)

Page 1 of 4

Printed On : 12-Mar-2022 14:24



Summary

UNIQUE DIAGNOSTIC CENTER INDORE

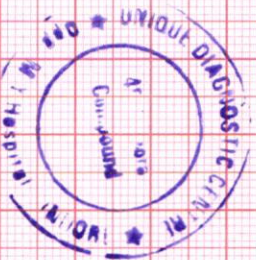
Ref. by : BOB
Medication : H/O HTN ON REGULAR MEDICATION
Objective : H/O HTN ON REGULAR MEDICATION

Protocol : BRUCE
History : H/O HTN ON REGULAR MEDICATION
54816/MR BRAJMOHAN 57 Yrs/Male 0 Kg/0 Cms
Date: 12-Mar-2022 11:14:38 AM

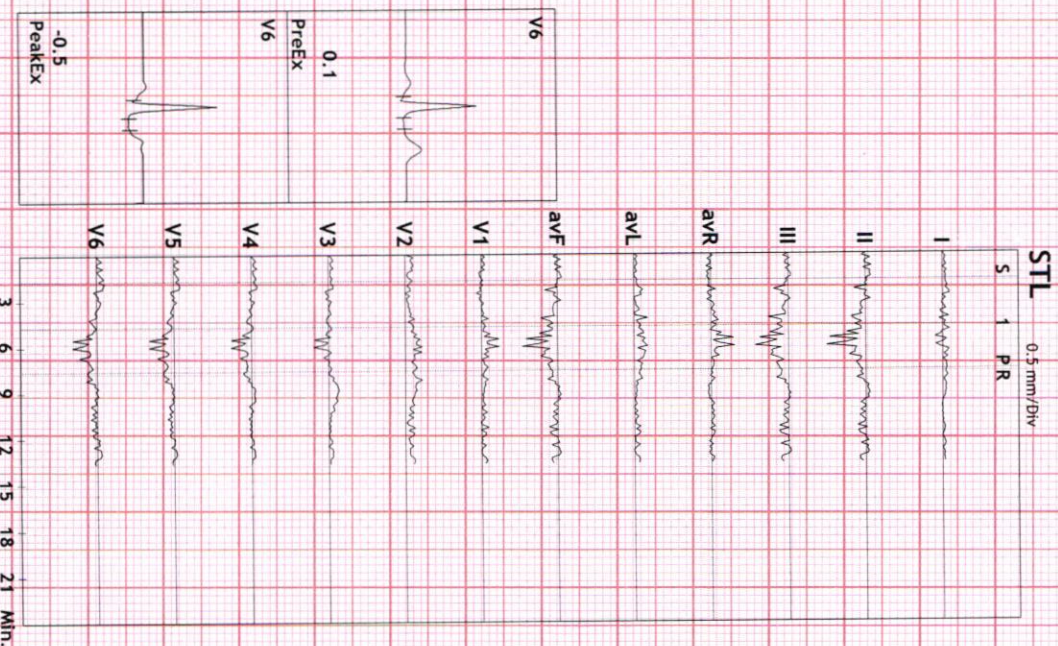
Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	89	124/80	110	-	
Standing					1.0	89	124/80	110	-	
HV					1.0	91	124/80	112	-	
EXStart					1.0	89	124/80	110	-	
Stage 1	3:01	3:02	1.7	10.0	4.7	136	134/88	182	-	
PeakEx	2:54	5:55	2.5	12.0	7.0	158	146/92	230	-	
Recovery	1:00		0.0	0.0	1.0	141	146/92	205	-	
Recovery	3:00		0.0	0.0	1.0	102	138/90	140	-	
Recovery	5:00		0.0	0.0	1.0	95	128/84	121	-	

Findings :

PROTOCOL : BRUCE
 OBJECT OF TEST : INSURANCE
 Max BP : 146/92(mmHg)
 RISK FACTOR: H/O HTN ON REGULAR MEDICATION
 MEDICATION : H/O HTN ON REGULAR MEDICATION
 REASON FOR TERMINATION : THR ACHIVE
 TAGE ICC EXCERCISE TOLERANCE : GOOD
 EXCERCISE INDUCED ARRHYTHMIA : NO
 HEMO RESPONSE : NORMAL
 FINAL INPRATION: TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA



Advice/Comments:



Dr. Mahendra Chourasiya
 M.D. D.M. (Cardio)



Summary

Ref. By : BOB

Protocol : BRUCE

UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN 57 Yrs/Male 0 Kg/0 Cms
Date: 12-Mar-2022 11:14:38 AM

Objective : H/O HTN ON REGULAR MEDICATION

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	89	124/80	110	-	
Standing					1.0	89	124/80	110	-	
HV					1.0	91	124/80	112	-	
ExStart					1.0	89	124/80	110	-	
Stage 1	3:01	3:02	1.7	10.0	4.7	136	134/88	182	-	
PeakEx	2:54	5:55	2.5	12.0	7.0	158	146/92	230	-	
Recovery	1:00		0.0	0.0	1.0	141	146/92	205	-	
Recovery	3:00		0.0	0.0	1.0	102	138/90	140	-	
Recovery	5:00		0.0	0.0	1.0	95	128/84	121	-	

Medication : H/O HTN ON REGULAR MEDICATION
History : H/O HTN ON REGULAR MEDICATION

Test End Reason :

Findings :

The patient exercised according to BRUCE for 5:54, achieving a work level of Max METS:7. Resting heart rate initially 89 bpm, rose to a max. heart rate of 158 bpm which represents 97% of maximum age predicted heart rate. Resting blood pressure 124/80 mmhg, rose to a maximum blood pressure of 146/92 mmhg. The exercise stress test was stopped due to

Parameters :

- PROTOCOL : BRUCE
- OBJECT OF TEST : INSURANCE
- Max BP : 146/92(mmHg)
- RISK FACTOR: H/O HTN ON REGULAR MEDICATION
- MEDICATION : H/O HTN ON REGULAR MEDICATION
- REASON FOR TERMINATION : THR ACTIVE
- TAGE ICC EXERCISE TOLERANCE : GOOD
- EXERCISE INDUCED ARRHYTHMIA : NO
- HEMO RESPONSE : NORMAL
- FINAL INPRATION: TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Advice/Comments:

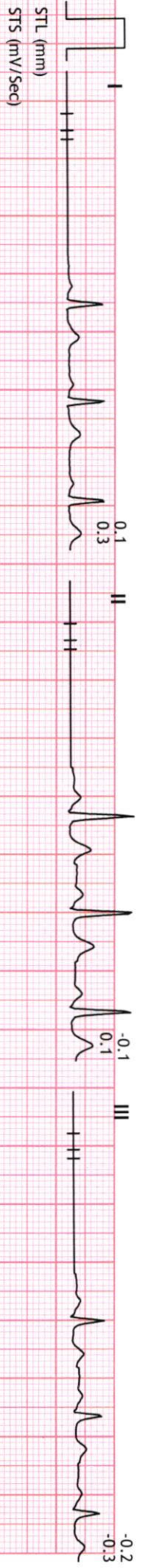


54816/MR BRAJMOHAN HR: 89 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 124/80
Date: 12-Mar-2022 11:14:38 AM

MPHR: 54% of 163
Speed: 0.0 mph (1.0-100)Hz
Grade: 0.0%

Ex Time 00:33
BLC : On
Notch : On

SUPINE
10.0 mm/mV
25 mm/Sec.



Raw Rhythm





Linked Medians Report

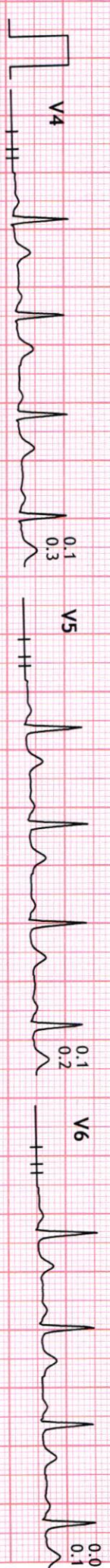
UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN HR: 89 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 124/80
Date: 12-Mar-2022 11:14:38 AM

MPHR:54% of 163
Speed: 0.0 mph
Grade: 0.0%

BRUCE (1.0-100)Hz
Ex Time 00:46
BLC :On
Notch :On

STANDING
10.0 mm/mV
25 mm/Sec.





Linked Medians Report

UNIQUE DIAGNOSTIC CENTER INDORE

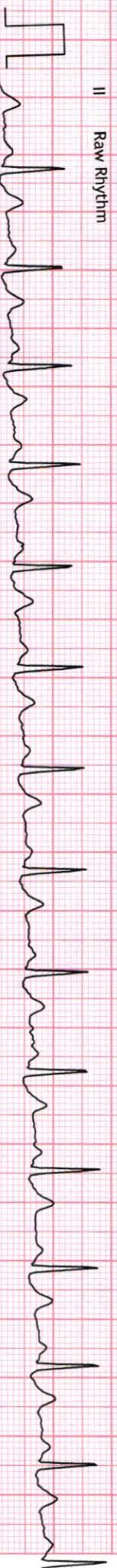
54816/MR BRAJMOHAN HR: 91 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 124/80
Date: 12-Mar-2022 11:14:38 AM

MPHR:55% of 163
Speed: 0.0 mph
Grade: 0.0%

BRUCE
(1.0-100)HZ

Ex Time 00:59
BLC :On
Notch :On

HV
10.0 mm/mV
25 mm/Sec.





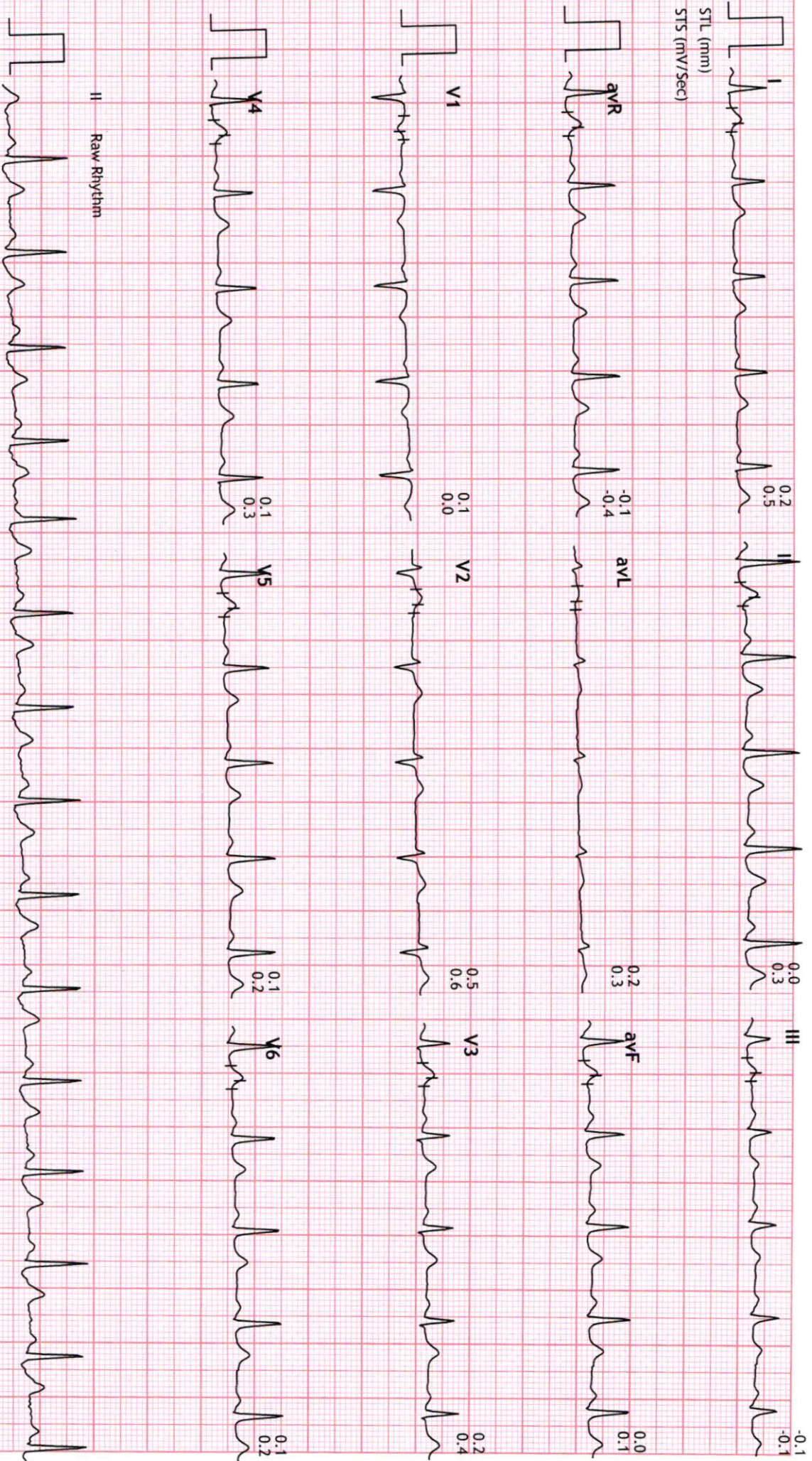
54816/MR BRAJMOHAN HR: 89 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 124/80
Date: 12-Mar-2022 11:14:38 AM

MPHR:54% of 163
Speed: 0.0 mph
Grade: 0.0%

BRUCE
(1.0-100)Hz

Ex Time 00:00
BLC :On
Notch :On

ExStart
10.0 mm/mv
25 mm/Sec.



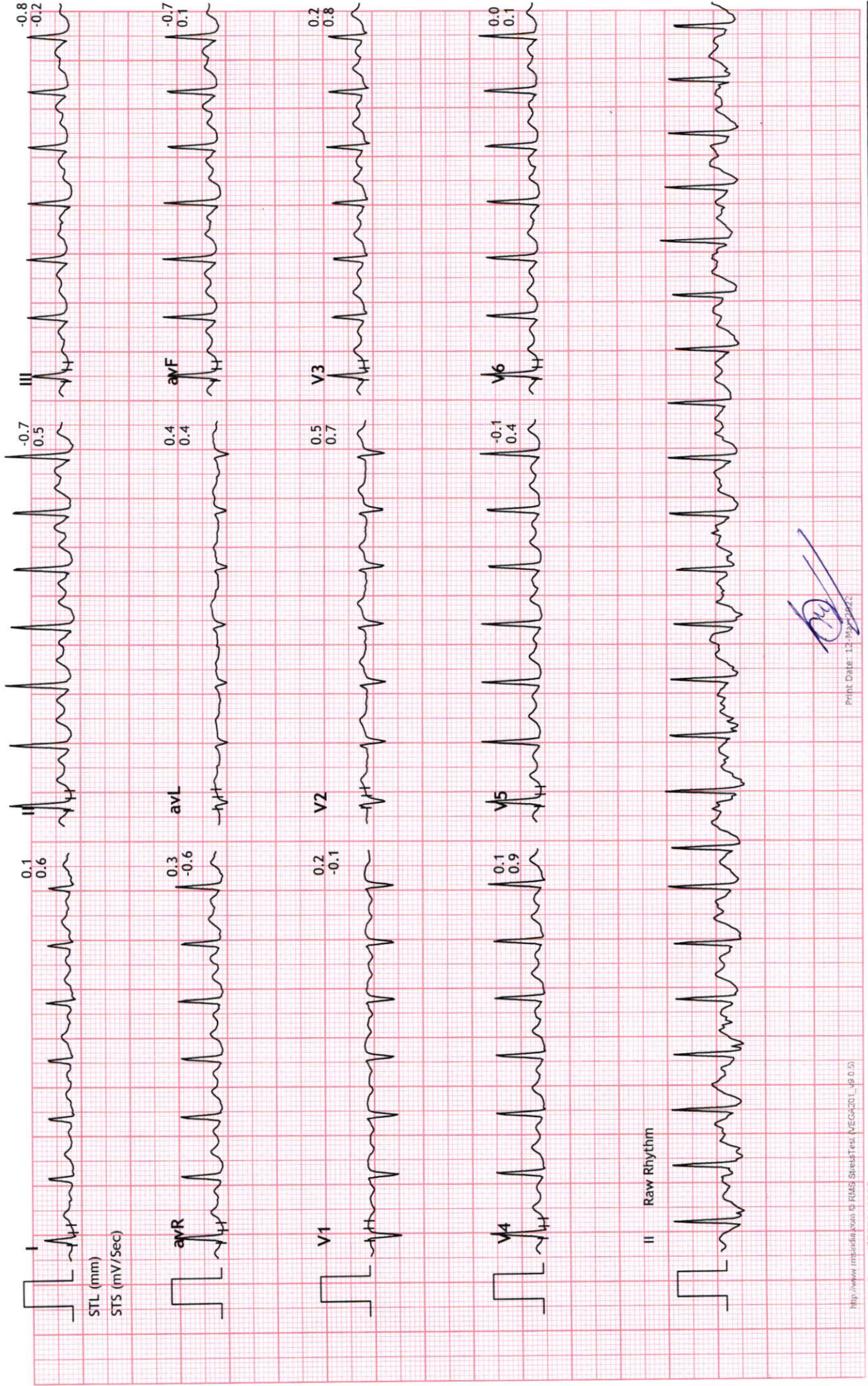


54816/MR BRAJMOHAN HR: 136 bpm
57 Yrs/Male METS: 4.7
0 Kg/0 Cms BP: 134/88
Date: 12-Mar-2022 11:14:38 AM

BRUCE
(1.0-100)Hz

Ex Time 03:00
BLC : On
Notch : On

Stage 1 (03:00)
10.0 mm/mV
25 mm/Sec.



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Linked Medians Report

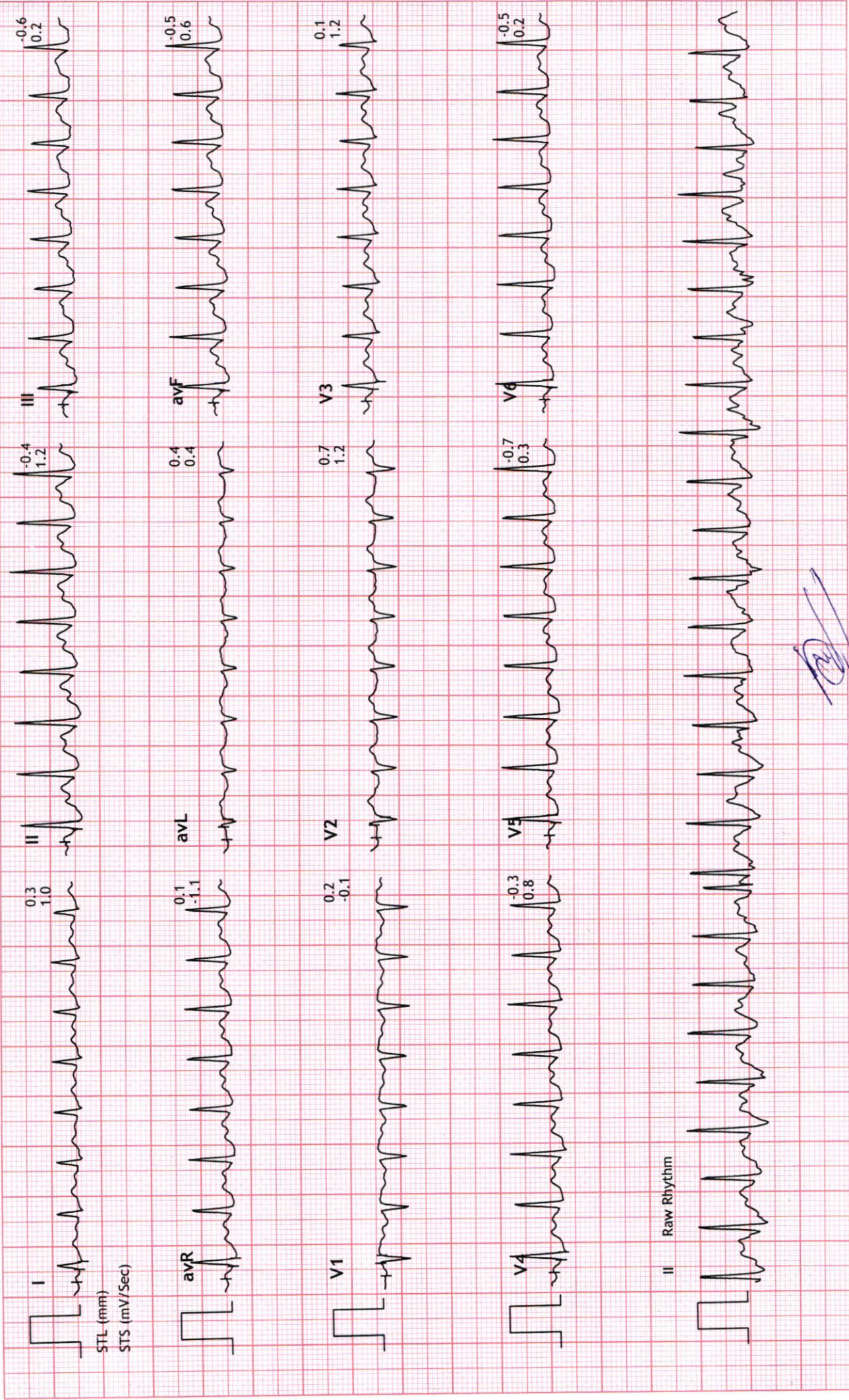
UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN HR: 158 bpm
57 Yrs/Male METS: 7.0
0 Kg/0 Cms BP: 146/92
Date: 12-Mar-2022 11:14:38 AM

BRUCE
(1.0-100)Hz

Ex Time 05:53
BLC :On
Notch :On

PeakEx
10.0 mm/mV
25 mm/Sec.





Linked Medians Report

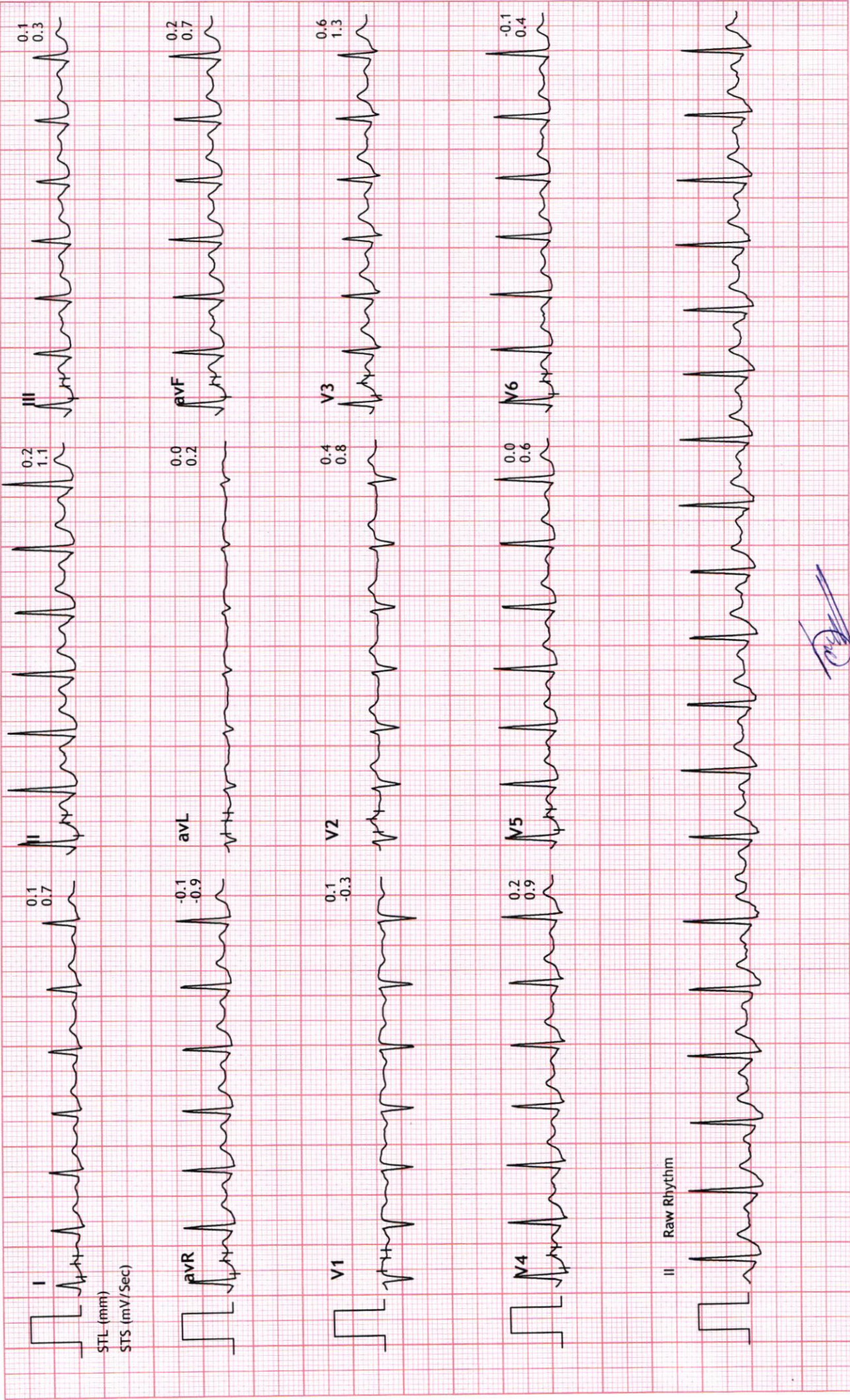
UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN HR: 115 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 146/92
Date: 12-Mar-2022 11:14:38 AM

BRUCE
(1.0-100)Hz

Ex Time 05:53
BLC :On
Notch :On

Recovery : (01:59)
10.0 mm/mV
25 mm/Sec.



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Linked Medians Report

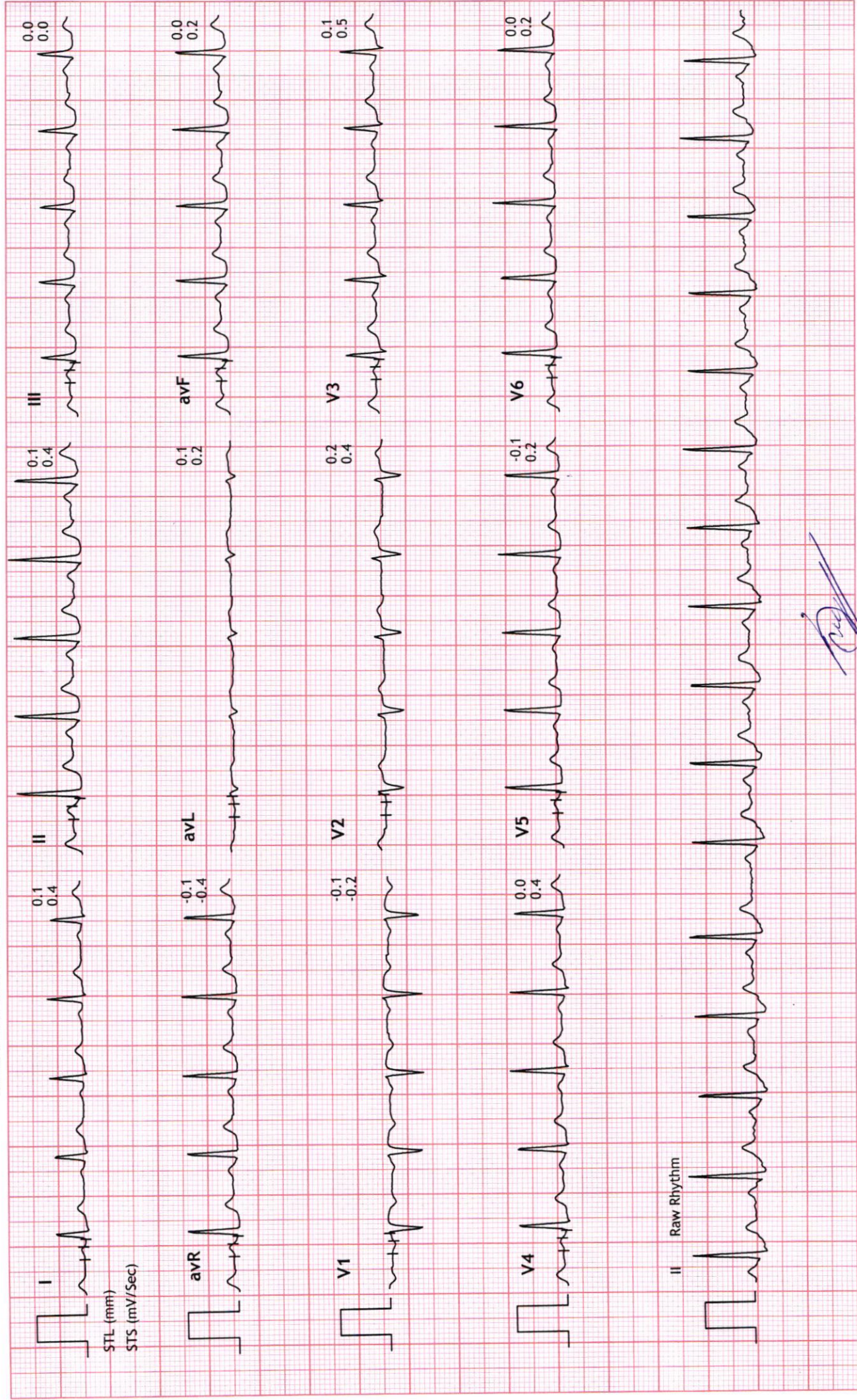
UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN HR: 97 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 138/90
Date: 12-Mar-2022 11:14:38 AM

MPHR: 59% of 163
Speed: 0.0 mph
Grade: 0.0%

Ex Time 05:53
BLC :On
Notch :On

Recovery : (03:59)
10.0 mm/mV
25 mm/Sec.





Linked Medians Report

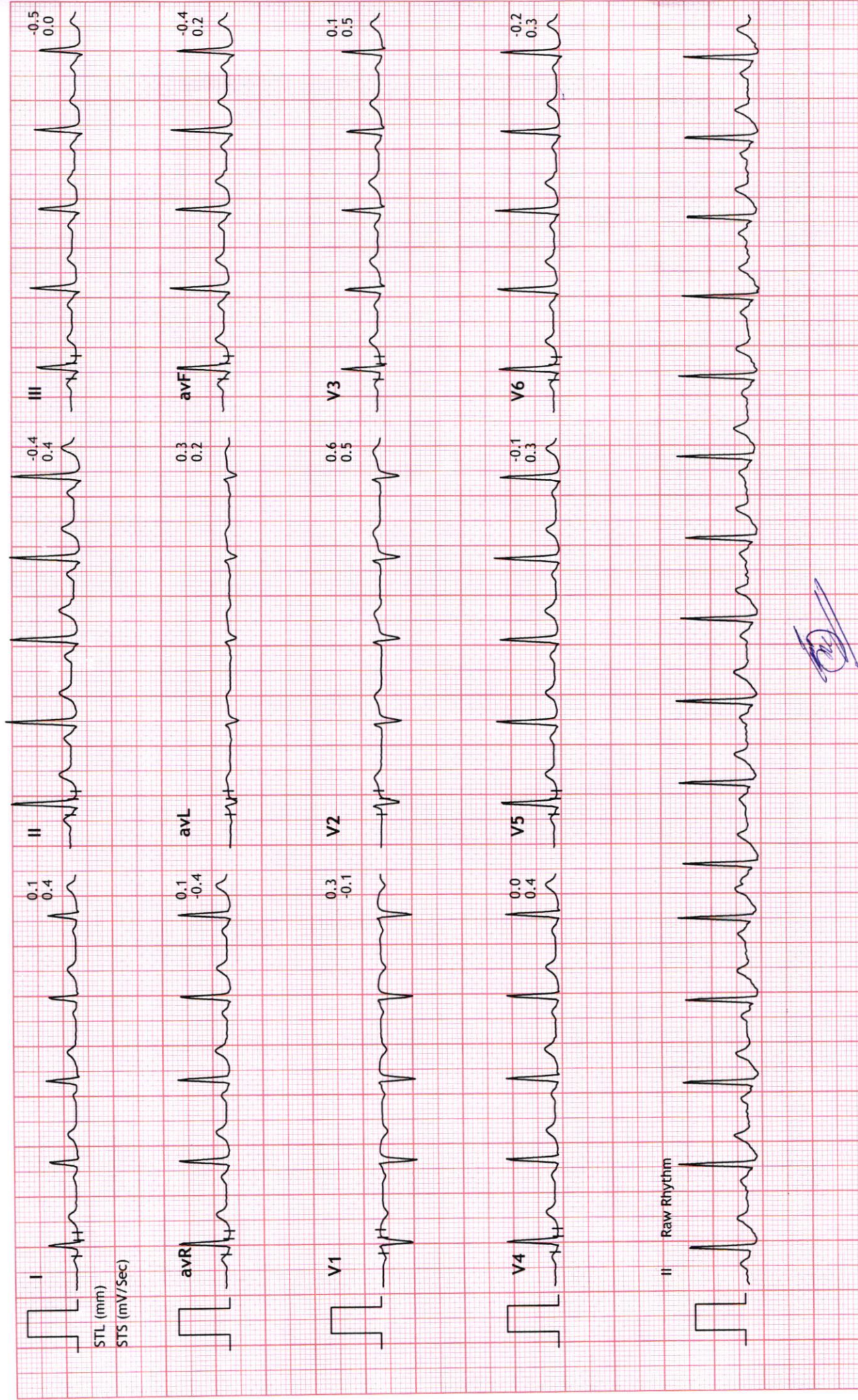
UNIQUE DIAGNOSTIC CENTER INDORE

54816/MR BRAJMOHAN HR: 94 bpm
57 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 128/84
Date: 12-Mar-2022 11:14:38 AM

MPHR: 57% of 163
Speed: 0.0 mph
Grade: 0.0%

BRUCE
(1.0-100)HZ
Ex Time 05:53
BLC : On
Notch : On

Recovery : (05:59)
10.0 mm/mV
25 mm/Sec.



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MR. BRAJMOHAN TANWAR
BANK OF BARODA**56 Years /M**
12-03-2022**LIPID PROFILE**

Test Name	Results	Normal Range
TOTAL LIPIDS	561	400 - 700 mg/dl
CHOLESTROL	188.0	<200 mg/dl- Desirable 200 - 239 mg/dl - Borderline High >240 Mg/dl High
HDL CHOLESTROL	41.0	35- 60 mg/dl
TRIGLYCERIDE	135.0	<150 mg/dl Normal 150 - 199 mg/dl Borderline High 200 - 499 mg/dl High
LDL CHOLESTROL	120	<100 mg/dl Optimal 100- 129 mg/dl Borderline high 160 - 189 mg/dl High
VLDL CHOLESTROL	27	<40 mg/dl
RISK RATIO	4.59	3 - 6

Dr. POOJA PRAPANNA
DR. POOJA PRAPANNA MD
M.D.

MR. BRAJMOHAN TANWAR
BANK OF BARODA56 Years /M
12-03-2022**HEAMOGRAM**

Test Name	Results	Normal Range
Haemoglobin (HB)	8.8	13 - 18 gm%
R.B.C. Count	5.12	4.5 - 5.5 milli./cu.mm
PCV	24.0	40 - 50 %
MCV	46.88	80 - 95 fl
MCH	17.19	27 - 32 pg
MCHC	36.67	31.5 - 34.5 %
TOTAL WBC COUNT	5,500	4,000 to 11,000 /cu.mm
DIFFERENTIAL WBC COUNT	.	
Neutrophils	60	40 - 75 %
Lymphocytes	36	20 - 40 %
Monocytes	02	02 - 08 %
Eosinophils	02	01 - 05 %
Basophils	00	00 - 01 %
PLATELET COUNT	3.25	1.5 - 4 Lacs/cu.mm.
E.S.R	15	M- 0-10 at the end of 1 hr. F- 0-20 at the end of 1 hr

DR. POOJA PRAPANNA
MD
DR. POOJA PRAPANNA
M.D.

MR. BRAJMOHAN TANWAR
BANK OF BARODA56 Years /M
12-03-2022**URINE EXAMINATION**

Test Name	Results	Normal Range
PHYSICAL EXAMINATION		
Quantity	30 ml	
Colour	Pale Yellow	
Appearance	Clear	
Deposits	Absent	
Specific Gravity	1.015	
Reaction	Acidic	
CHEMICAL EXAMINATION		
Albumin	Nil	
Sugar	Nil	
Ketones	Absent	
Bile Pigments	Negative	
Bile Salt	Negative	
Hematuria	Negative	
MICROSCOPIC EXAMINATION		
Pus Cells	1- 2 /hpf	
Red Blood Cells	Nil/hpf	
Epithelial Cell	1 - 2 /hpf	
Crystals	Nil	
Casts	Absent	

DR. POOJA PRAPANNA
DR. POOJA PRAPANNA
ME
MI

MR. BRAJMOHAN TANWAR
BANK OF BARODA

56 Years /M
12-03-2022

BLOOD GROUP

Test Name	Results	Normal Range
BLOOD GROUP	: -	
"ABO " GROUP	"O"	
Rh (D) Factor	Positive	
	.	
	.	
	.	

(Cross matching & recheck of Blood Group is mandatory before any transfusion)

Dr. POOJA PRABANNA

DR. POOJA PRABANNA

M.E

MR. BRAJMOHAN TANWAR
BANK OF BARODA56 Years /M
12-03-2022

Test Name	Results	Normal Range
<u>BIOCHEMISTRY</u>		
FASTING BLOOD SUGAR	98.0	70 - 110 mg/dl
Corresponding Urine Sugar	NII	Nil
P.P. BLOOD SUGAR	105.0	upto 140 mg/dl
Corresponding Urine Sugar	NIL	Nil
TOTAL BILIRUBIN	0.66	0 - 1 mg/dl
DIRECT BILIRUBIN	0.21	<0.25 mg/dl
INDIRECT BILIRUBIN	0.45	< 1.0 mg/dl
S.G.O.T	24.0	0 - 45 IU/L
S.G.P.T	14.0	0 - 45 IU/L
ALKALINE PHOSPHATE	105.0	Adult - 42 - 128 IU/L Child - 150 - 630 IU/L
GAMA GT	22.0	5 - 43 Iu/l
TOTAL PROTEIN	7.66	6.0 to 8.0 g/dl
ALBUMIN	4.23	3.2 to 5.0 g/dl
GLOBULIN	3.43	1.9 to 3.5
A:G RATIO	1.23	1.2 TO 2.3
CREATININE	1.33	0.6 - 1.4 mg\dl
URIC ACID	4.12	3.5 - 7 mg\dl
BUN	10.0	5 - 21 Mg/dl

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