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गुणवत्ता पुर्ण चिकित्सा सेवाओं के लिये
भारत सरकार की
क्वालिटी कार्डिसल ऑफ इंडिया (QCIN-NABH)
द्वारा प्रमाणित

Ref No.	Date : 27-08-2022		
Patient's Name :	MR. NAVDEEP PAHAR	Age 34 yrs	Sex: M
Ref. By :	DR.		

X-RAY EXAMINATION REPORT

Part X-Rayed : CHEST PA View

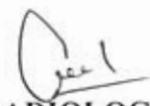
Contrast Medium Used : None

Report :

- ❖ The lungs on either side show equal translucency and show normal vasculature.
- ❖ No focal lung parenchymal or interstitial lesion is seen.
- ❖ No evidence of any infiltration is seen.
- ❖ The hilar shadows are normal in size, shape and position.
- ❖ The pleural cavities are clear.
- ❖ The domes of the diaphragm are smooth.
- ❖ The cardiac size is normal.

Impression:

- ❖ NO CARDIO PULMONARY ABNORMALITY IS SEEN.


RADIOLOGIST

Note: This report is not valid for medico legal purpose.
Every report needs to be correlated and interpreted clinically.



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Date : 27/08/2022

Patient's Name :	MR NAVDEEP JI	Age: 34 yrs	Sex: Male
Ref. By :	DR.		

ULTRA SONOGRAPHY REPORT – UPPER AND LOWER ABDOMEN

- Liver Liver is normal in size, shape, position & contour with normal homogenous echopattern. No evidence of any focal lesion is seen. IHBR are not dilated. Portal vein measures 12 mm. IVC is normal.
- Gall bladder GB is normal in size & shape. Its wall thickness is normal. No evidence of any calculi is seen. No pericholecystic fluid collection is seen.
- Pancreas Pancreas is normal in size, shape, position & contour with normal homogenous echo pattern. Pancreatic duct is not dilated.
- Spleen Spleen is normal in size, shape, position and contour with normal homogenous echo pattern. Splenic vein is not dilated.
- Kidneys Both kidneys are normal in size, shape, position & contour with well differentiated corticomedullary junction and normal cortical thickness. Pelvicalyceal system is not dilated. No evidence of any calculi is seen. Visualized portion of ureters appears normal.
Right Kidney measures 101x39 mm.
Left Kidney measures 100x39 mm.
- Urinary Bladder Urinary bladder is well distended with urine & is normal in size, shape & contour with normal & smooth walls.
- Prostate Prostate is normal in size, shape, position & contour with normal homogenous echo pattern. It reveals normal & smooth capsule. Seminal vesicles are normal.
Prostate measures 44x27x27 mm. with vol 17 cc.

IMPRESSION NORMAL STUDY

Dr. SUHAIR KHAN

MBBS, MSc (Radiology)
Consultant Radiologist
(RMC- 17463)

Dr. ANAND GUPTA

MBBS, DMRE,
Consultant Radiologist
(RMC- 17548)

Note: This report is not valid for medico legal purpose.
Every report needs to be correlated and interpreted clinically.
In case of any query, investigation may be repeated.
The foetal gender has not been detected nor disclosed to the



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R

MR. NAVDEEP PAHAR BOB M CHEST PA 27-Aug-22 11:12 AM
ARAVALI HOSPITAL, 332 AMBAMATA SCHEME, UDAIPUR

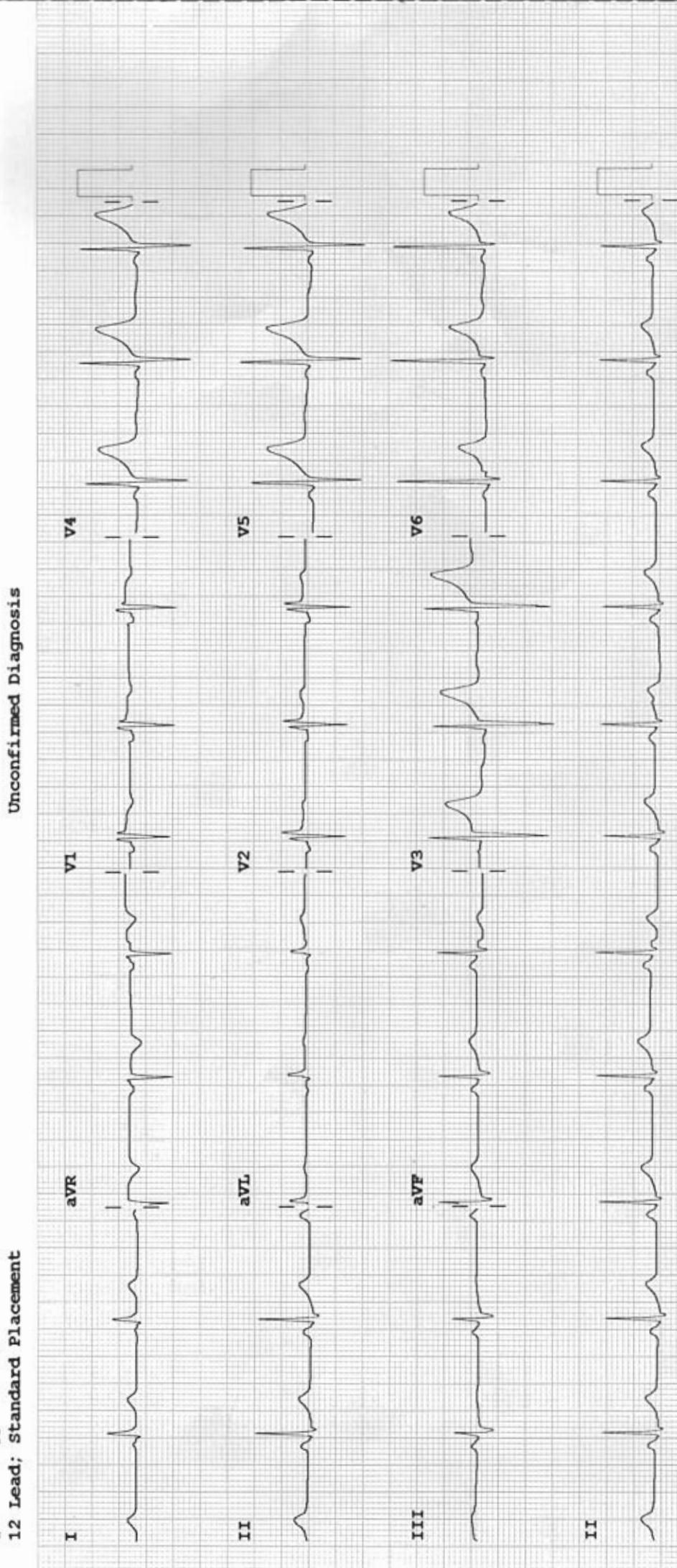
Rate 68 · Age not entered, assumed to be 50 years old for purpose of ECG interpretation
 P 72 · Sinus rhythm.....
 PR 114 · Borderline short PR interval.....
 QRSD 92 · RSR' in V1 or V2, probably normal variant.....
 QT 375 · ST elev, probable normal early repol pattern.....
 QTc 399 · small R' only
 ST elevation, age<55

--AXIS--

P 72
 QRS 34
 T 48

12 lead; standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

P 60~ 0.15-100 Hz 100B CL P?

A uow C



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द्वारा प्रमाणित

LABORATORY REPORT



Name : Mr. NAVDEEP PAHAR	Sex/Age : Male / 34 Years	Case ID : 20801505180
Ref. By :	Dis. At :	Pt. ID :
Bill. Loc. : Aravali pathlabs Udaipur		Pt. Loc :
Reg Date and Time : 27-Aug-2022 13:22	Sample Type : Serum	Mobile No. :
Sample Date and Time : 27-Aug-2022 13:22	Sample Coll. By : non	Ref Id1 : 11223954
Report Date and Time : 27-Aug-2022 14:31	Acc. Remarks	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
Thyroid Function Test				

Triiodothyronine (T3) CMIA	117.15	ng/dL	70 - 204
Thyroxine (T4) CMIA	6.9	μg/dL	4.6 - 10.5
TSH CMIA	0.7988	μIU/mL	0.4 - 4.2

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.

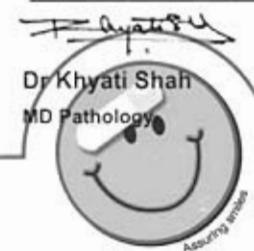
Normal ranges of TSH & thyroid hormones vary according to trimester in pregnancy.

Reference range (microU/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)



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Reg Date and Time : 27-Aug-2022 13:22	Sample Type : Serum	Mobile No. :
Sample Date and Time : 27-Aug-2022 13:22	Sample Coll. By : non	Ref Id1 : 11223954
Report Date and Time : 27-Aug-2022 14:32	Acc. Remarks	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS				

Prostate Specific Antigen CMIA	0.717	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%

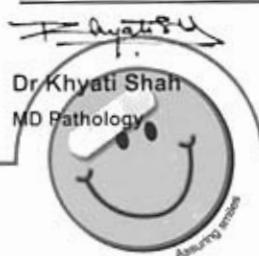
DILUTION PROTOCOL:

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)



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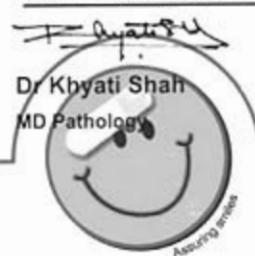
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Sample Date and Time : 27-Aug-2022 13:22	Sample Coll. By : non	Ref Id1 : 11223954
Report Date and Time : 27-Aug-2022 14:32	Acc. Remarks	Ref Id2 :

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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



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Name Mr. NAVDEEP PAHAR	Visit Date & Time 27/08/2022 11:53:45	PATIENT ID 11223954
Age 34 Yrs Sex Male	Sample Accepted : 27/08/2022 20:16:34 Test Authenticated at : 27/08/2022 18:10:06	Ref. By

Test Name	Value	Status	Unit	Biological Ref Interval
HAEMOGLOBIN (HB)	16.0		gm %	11.0 - 16.0
RBC Count	5.48		X10 ⁶ /uL	3.50 - 5.50
PCV	45.4		%	36.0 - 48.0
MEAN CORP. VOLUME (MCV)	92.4		fL	80.0 - 99.0
MEAN CORP. HB (MCH)	32.0		pg	27.0 - 32.0
MEAN CORP. HB CON. (MCHC)	36.2		g/dL	32.0 - 36.0
RDW-CV	12.0		%	11.0 - 16.0
RDW-SD	42.6		fl	35.0 - 56.0
TLC Count	7.84		/cmm	4.00 - 11.00
Differential Leucocyte Count (DLC)				
POLYMORPH	68		%	45 - 75
LYMPHOCYTE	23		%	20 - 45
EOSINOPHIL	03		%	01 - 06
MONOCYTE	06		%	01 - 10
BASOPHIL	00		%	00 - 01
TOTAL PLATELET COUNT	302		x10 ³ /uL	150 - 450
MPV	10.0			7.4 - 10.4
PDW	14.3		%	10.0 - 17.0
PCT	0.3		%	0.1 - 0.3
P-LCR	28.8		%	11.0 - 45.0
P-LCC	87.0			30.0 - 90.0
ESR	6		mm/Ist hr.	0 - 20

PBF EXAMINATION :

R.B.C's : Normochromic normocytic RBC's

W.B.C's : Total WBC's count within normal limits , No premature cells seen

Platelets : Plateles are adequate in number

Blood Group (ABORH)

'B' POSITIVE



DR. HUSSAIN ALI RANGWALA
MD Pathologist
Rmc No. 271607

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Test Name	Value	Status	Unit	Biological Ref Interval
THYROID PROFILE				
T3	1.17		ng/ml	0.87 - 1.78
T4	6.90		ug/dl	4.82 - 15.65
TSH	0.798		micro U/ml	0.340 - 5.600

TSH levels may be affected by acute illness and drugs like dopamine and gluco corticoids.

Low or undetectable TSH is suggestive of Grave's disease

TSH between 5.5 to 15.0 with normal T3,T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3,T4 with slightly low TSH suggests subclinical hyperthyroidism

TSH suppression does not reflect severity of hyperthyroidism therefore, measurement of FT3,FT4 is important.

Free T3 is first hormone to increase in early hyperthyroidism.
Only TSH level can prove to be misleading in patients on treatment.

Therefore Free T3, Free T4 along with TSH should be checked.
During pregnancy clinically T3T4 can be high and TSH can be slightly low.



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Test Authenticated at : 27/08/2022 18:10:06

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Ref. By



IMMUNOLOGY

Test Name	Value	Status	Unit	Biological Ref Interval
PSA	0.72		ng/ml	0.00 - 4.00

40-49 years = 0 to 2.5 ng/m
50-59 years = 0 to 3.5 ng/m
60-69 years = 0 to 4.5 ng/m
70-79 years = 0 to 6.5 ng/m

Note:

1. This test is not solely recommended to screen prostate cancers in the general population.
2. False negative/ positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.
3. PSA Total and free levels may appear consistently elevated/ depressed due to the interference by heterophilic antibodies & nonspecific protein binding.
4. PSA Total and free values obtained with different assay methods or kits cannot be used interchangeably.
5. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as it falsely elevates Total and Free PSA levels.
6. Total and Free PSA values regardless of levels should not be interpreted as absolute evidence of the presence or clinical finding and results of other investigations.



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CLINICAL PATHOLOGY

Test Name	Value	Status	Unit	Biological Ref Interval
URINE EXAMINATION				
QUANTITY	20			
COLOUR	PALE YELLOW			
SPECIFIC GRAVITY	QNS			
APPEARANCE	CLEAR			
DEPOSITS	NIL			
PH	ACIDIC			
PHYSICAL EXAMINATION				
ALBUMIN	NIL			
SUGAR	NIL			
CHEMICAL EXAMINATION				
EPITHELIAL CELLS	OCCASIONAL	/HPF		
PUS CELLS	2-3	/HPF		
RBC'S	5-6	/HPF		
CASTS	ABSENT			
CRYSTALS	ABSENT			
BACTERIA	NIL			
YEAST CELLS	NIL			
TRICHOMONAS VAGINALIS	NIL			
SPERMATOZOA	NIL			
OTHERS	NIL			
MICROSCOPY EXAMINATION				



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Report ***

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BIOCHEMISTRY

Test Name	Value	Status	Unit	Biological Ref Interval
HBA1C	5.97		%	Non Diabetic <6.0 % Excellent control 6 –7 % Good Control 7 –8 % Fair Control 8 –9 % Poor Control >9 %
Average Blood Glucose (mg/dl)		Glycosalated Hemoglobin (% A1 C)		
360		14		
330		13		
300		12		
240		11		
240		10		
210		9		
180		8		
150		7		
120		6		
90		5		



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BIOCHEMISTRY

Test Name	Value	Status	Unit	Biological Ref Interval
BLOOD SUGAR (FASTING)	83.2		mg/dl	60.0 - 110.0
BLOOD SUGAR (PP)	111.4		mg/dl	110.0 - 140.0
CREATININE	0.67		mg/dl	0.30 - 1.50
URIC ACID	3.97		mg/dl	2.00 - 7.00
BUN	6.70	L	mg/dl	7.00 - 22.00



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Test Name	Value	Status	Unit	Biological Ref Interval
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LIVER FUNCTION TEST (LFT)

BILIRUBIN-TOTAL	0.77		mg/dl	0.20 - 1.20
BILIRUBIN-DIRECT	0.26		mg/dl	0.10 - 0.60
BILIRUBIN-INDIRECT	0.51	H	mg/dl	0.10 - 0.40
SGOT-AST	21.90		U/L	9.00 - 49.00
SGPT-ALT	19.20		U/L	9.00 - 49.00
ALKALINE PHOSPHATASE	41.00		IU/L	38.00 - 126.00
PROTIEN-TOTAL	6.89		gm/dl	6.00 - 8.00
ALBUMIN	5.00		gm/dl	3.50 - 5.00
GLOBULIN	1.89	L	gm/dl	2.50 - 4.00
A:G RATIO	2.65	H		1.10 - 2.20



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MD Pathologist
Rmc No. 271607

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गुणवत्ता पुर्ण चिकित्सा सेवाओं के लिये
भारत सरकार की
क्वालिटी काउंसिल ऑफ इंडिया (QCI-NABH)
द्वारा प्रमाणित

Name Mr. NAVDEEP PAHAR

Age 34 Yrs Sex Male

Visit Date & Time 27/08/2022 11:53:45
Sample Accepted : 27/08/2022 20:16:34
Test Authenticated at : 27/08/2022 18:10:06

PATIENT ID 11223954

Ref. By

Test Name	Value	Status	Unit	Biological Ref Interval
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LIPID PROFILE

CHOLESTEROL TOTAL	183.00		mg/dl	<200.00
TRIGLYCERIDES	75.49		mg/dl	60.00 - 170.00
HDL CHOLESTEROL	46.00		mg/dl	30.00 - 65.00
LDL CHOLESTROL	122.00	H	mg/dl	35.00 - 100.00
VLDL CHOLESTEROL	15.00		mg/dl	12.00 - 35.00
CHOLESTEROL TOTAL / HDL RATIO	3.98			0.00 - 4.90
CHOLESTEROL LDL / HDL RATIO	2.65			0.00 - 5.00



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