



URMILA HEART

& MULTI SPECIALITY HOSPITAL

Address

Naya Tola, Opp. Polytechnic

Muzaffarpur

Ph. : 0621-2222211

0621-2268042

Mob. : 9661179794

9471013402

Mangal Kumar

37/m

Δ- Hypertension
Dyslipidemia

BP - 120/80

PM - 89

CH
M

ck
+ controlled
7 Cur

ph

S.B - 2.2

→ T. Lipidogram 4mg 20

→ T. Lipidogram - 200 mg

→ Lipidogram 20 mg 200 mg



PATHOLOGY REPORT

Name:- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

<u>TEST</u>	<u>CBC (Complete Blood Count)</u>		<u>Reference Values</u>
	<u>RESULT</u>	<u>UNIT</u>	
Hb (Haemoglobin)	13.0	gm/dl	12 - 17
Total Leukocyte Count	3,600	/Cumm.	4000 - 11000
RBC Count	4.77	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	40.8	%	30 - 50
Platelet Count	1.32	Lakhs/c.mm	1.5 - 4.5
MCV	84.5	fl	80 - 100
MCH	26.8	pg	26 - 34
MCHC	31.8	gm/dl	31.5 - 35
Differential Leukocyte Count			
Neutrophil	50	%	40 - 70
Lymphocyte	40	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	08	%	01 - 06
Basophil	00	%	< 1 - 2 %
ESR	14	mm/1 st hr.	00 - 20

end of report

Signature

PATHOLOGY REPORT

Name:- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	26.0	mg/dl	13 - 45
S. Creatinine	1.02	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	12.14	mg/dl	6.0 - 21
S. Sodium (Na ⁺)	142.0	mmol/ltr	135 - 150
S. Potassium(K ⁺)	4.26	mmol/ltr	3.5 - 5.5
S. Chloride(Cl ⁻)	100.8	mmol/ltr	94 - 110
S. Calcium	9.32	mg/dl	8.7 - 11.0
S. Uric Acid	7.04	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

BLOOD GROUPING

Grouping (ABO)	:	"A" Group
Rh Typing	:	Positive.

end of report

Signature

PATHOLOGY REPORT

Names- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	2.26	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	58.0	U/L	05 - 40
S. SGOT (AST)	52.0	U/L	05 - 40
S. GGT	48.0	U/L	05 - 45
S. Alkaline Phosphatase	121.8	U/L	Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390
S. Total Protein	6.98	g/dl	6.0 - 8.3
S. Albumin	3.78	g/dl	3.2 - 5.0
S. Globulin	3.20	g/dl	2.8 - 4.5
S. A/G Ratio	1.18		

end of report

Signature

PATHOLOGY REPORT

Name:- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	238.0	mg/dl	130 - 200
S. Triglycerides	120.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	24.0	mg/dl	10 - 40
S. HDL-Cholesterol	56.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	158.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	4.25		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.82		1.5 - 3.5

BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	102.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	128.0	mg/dl	80 - 160

end of report

Signature

PATHOLOGY REPORT

Name:- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	4.2	%

Mean Blood Glucose level (MBG) – 89.8 mg/dl

Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

Summary :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

end of report

Signature

PATHOLOGY REPORT

Name:- Mr. Mangesh Kumar	Age :37Y/M	Date :-22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No99531)	Serial Number :- 0222

TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	128.8	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	6.58	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	3.43	µIU/mL	(0.3 - 5.5)

Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwisch Competitive Chemi Luminescent Immuno Assay

REMARK :

THYROID HORMONES -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism.The expeted increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland.Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism.The increase in total T4 and T3 is associated with pregnancy,oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration,which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR).a
end of report

Signature



URMILA HEART
& MULTI SPECIALITY HOSPITAL

ADDRESS
Haya Tola, Opp. Polytechnic
Muzaffarpur
Ph. : 0621-2222211
0621-2268042
Mob. : 9661179794
9471013402

PATHOLOGY REPORT

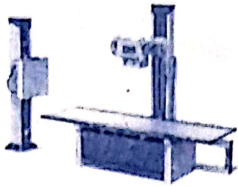
Name: Mr. Mangesh Kumar	Age: 37Y/M	Date: 22/07/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No) 99531	Serial Number :- 0222

Urine Routine And Microscopy

<u>TEST</u>	<u>RESULTS</u>
Physical Examination	
Volume	20 ml
Colour	Straw
Specific Gravity	1.020
Appearance	Clear
pH	6.0
(Acidic)	
Chemical Examination	
Protein	Nil
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D
Microscopic Examination	
Pus Cells	1-2 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	Present (+)
Crystal/Cast	Nil
Other	Nil
end of report	

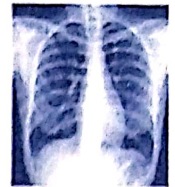
Signature





Raj Digital X-Ray

CHATA CHOWK, MUZAFFARPUR (BIHAR)



No.:

Date

Patient's Name :

Part X-Rayed.....

Referred by Dr.....

PATIENT ID	: 2207202303	PATIENT NAME	: MANGESH KUMAR AGE 37YRS
AGE	: -	SEX	: M
REF. PHY.	: DR A K SINGH M B B S	STUDY DATE	: 22-Jul-2023

RADIOLOGY REPORT

EXAM:X RAY CHEST PA

TECHNIQUE:

Frontal projections of the chest were obtained

FINDINGS

Both lung fields are clear.
Both costophrenic angles appear normal.
The tracheal lucency is centrally placed.
The mediastinal and diaphragmatic outlines appear normal.
The heart shadow is normal.
The bony thoracic cage and soft tissues are normal.

IMPRESSION

1. The study is within normal limits.

V S Sai Naren

Dr. Sai Naren

Consultant Radiologist
MD RADIO DIAGNOSIS
Regn No: 2017/08/3835

Dr Sai Naren
22 nd Jul 2023

(NOT VALID FOR MEDICO LEGAL PURPOSE)

Facilities Available : 300 MA X-Ray Machine (Digital CR) # Computerised ECG



NAME :- MANGESH KUMAR.

REFD.BY:- DR./SELF.

DATE :- 22/07/2023

SEX:- M

Thanks for the kind referral.
USG of Whole Abdomen

Liver:- **Liver is enlarged in size [16.69 cm] and shows fatty infiltration.**
GB:- Normal distention. No evidence of calculus ,sludge ,or mass lesion seen.
C.B.D:- C.B.D. is normal in caliber.
Pancreas:- Pancreas normal in size shape and echo texture.
Spleen:- Normal in shape, size & contour .{9.60cm.}.
Kidneys:- Rt. Kidney :- 8.24 x 3.69 cm Lt. Kidney :- 9.22 x 4.34 cm
Both kidneys are normal in shape, size, contour, cortical
echo texture, and sinus echoes. No evidence of calculus,
calcification, hydronephrotic changes or mass lesion seen.
UB:- Urinary bladder is smoothly outlined. There is no calculus within.
prostate:- The prostate is normal in size .
Free fluid:- No free fluid is noted in the peritoneal cavity.
Other :- Few fecal gas seen in abdominal cavity .

IMPRESSION :- Hepatomegaly with fatty liver. Grade. II.


(sonologist)



URMILA HEART
& MULTI SPECIALITY HOSPITAL

Address

Naya Tola, Opp. Polytechnic
Muzaffarpur
Ph. : 0621-2222211
0621-2268042
Mob. : 9661179794
9471013402

ECHOCARDIOGRAPHY REPORT

Name : Mr. Mangesh Kumar
Date : 22/07/2023
IPID No. :
Ref. By : Self

Age/Sex : 37/M
ECHO No. :
UHID No. :
Done By : Dr. Anil Kr. Singh

MITRAL VALVE

Morphology AML-Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming
PML-Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.
Subvalvular deformity Present/Absent. Score: _____
Doppler Normal/Abnormal E>A A>E
Mitral Stenosis Present/Absent RRInterval _____ msec
EDG _____ mmHg MDG mmHg MVAcm2
Mitral Regurgitation Absent/Trivial/Mild/Moderate/Severe.

TRICUSPID VALVE

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

PULMONARY VALVE

Morphology Normal/Atresia/Thickening/Doming/Vegetation.
Doppler Normal/Abnormal.
Pulmonary stenosis Present/Absent Level
PSG _____ mmHg Pulmonary annulus _____ mm
Pulmonary regurgitation Present/Absent
Early diastolic gradient _____ mmHg. End diastolic gradient _____ mmHg

AORTIC VALVE

Morphology Normal/Thickening/Calcification/Restricted opening/Flutter/Vegetation
No. of cusps 1/2/3/4
Doppler Normal/Abnormal
Aortic Stenosis Present/Absent Level
PSG mmHg Aortic annulus _____ mm
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe.



<u>Measurements</u>	<u>Normal Values</u>
Aorta 2.8	(2.0 - 3.7cm)
LV es 2.9	(2.2 - 4.0cm)
IVS ed 1.1	(0.6 - 1.1cm)
RVed	(0.7 - 2.6cm)
LVVd (ml)	
EF 60%	(54%-76%)

<u>Measurements</u>	<u>Normal values</u>
LAes 3.9	(1.9 - 4.0cm)
LV ed 4.3	(3.7 - 5.6cm)
PW (LV) 1.2	(0.6 - 1.1cm)
RV Anterior wall	(upto 5 mm)
LVVs (ml)	
IVS motion	Normal/Flat/Paradoxical

CHAMBERS:

LV Normal/Enlarged/Clear/Thrombus/Hypertrophy
Contraction Normal/Reduced

Regional wall motion abnormality Absent/Present

LA Normal/Enlarged/Clear/Thrombus

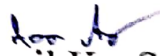
RA Normal/Enlarged/Clear/Thrombus

RV Normal/Enlarged/Clear/Thrombus

PERICARDIUM Normal/Thickening/Calcification/Effusion

COMMENTS & SUMMARY

All Chambers are Normal in Size
Normal LV Systolic & Diastolic Function
No RWMA/LVEF=60%
No MR/AR /PR/TR
Normal Pericardium


Dr. Anil Kr. Singh
Cardiologist

