



भारत सरकार

Government of India



Issue Date: 11/08/2015



नवनीत कुमार सिंह

Navneet Kumar Singh

जन्म तिथि / DOB : 29/01/1991

पुरुष / Male



8274 6243 7368

8274 6243 7368

मेरा **आधार**, मेरी पहचान



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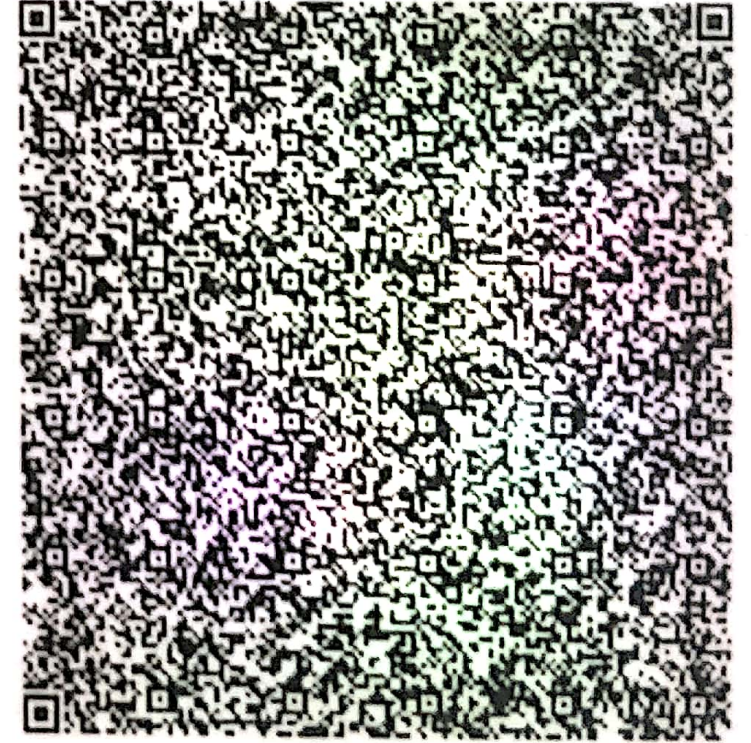
भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



पता: आत्मज: अनिल प्रसाद सिंह, ग्राम-बखरी,
पोस्ट-बखरी बाजार, बखरी, बेगुसराई, बिहार,
848201

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Begusarai, Bihar, 848201



Print Date: 04/08/2022

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CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)
Phone No. : 0755-4272669, 4250134



Patient Name : MR NAVNEET KUMAR SINGH



CMSH24/5714

Age/Gender : 33 Yrs/Male

Registration Date : 08/03/2024 11:29 AM

Ref. Dr. : Dr. APOLLO CLINIC

Collection Date : 08/03/2024 11:31 AM

Center : CMH OPD

Report Date : 08/03/2024 02:29 PM



HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	6.9	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0 Diabetic: >= 7.0

Estimated Average Glucose : 151 mg/dL

Reference Range (Average Blood Sugar):

Excellent control : 90 - 120 mg/dl

Good control : 121 - 150 mg/dl

Average control : 151 - 180 mg/dl

Action suggested : 181 - 210 mg/dl

Panic value : > 211 mg/dl

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %

Dr. Subhash Parmar
Consultant Pathologist



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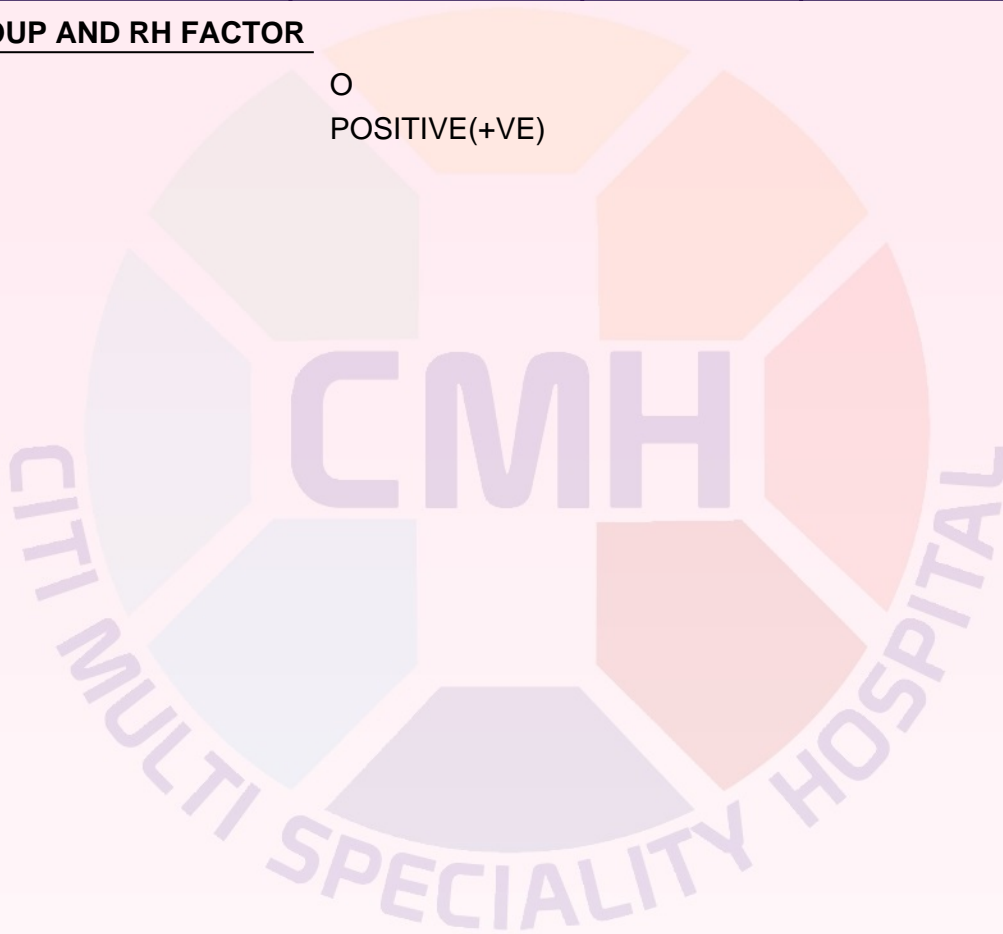
BLOOD GROUP AND RH FACTOR

ABO Type

O

Rh Factor

POSITIVE(+VE)



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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
RENAL FUNCTION TEST (RFT)			
Blood Urea	21.0	mg/dl	15 - 50
Serum Creatinine	0.67	mg/dl	0.7 - 1.5
eGFR	126	ml/min	
Blood Urea Nitrogen-BUN	9.81	mg/dl	7 - 20
Serum Sodium	141.6	mmol/L	135 - 150
Serum Potassium	4.76	mmol/L	3.5 - 5.0
Chloride	103.0	mmol/L	94.0 - 110.0
Ionic Calcium	1.21	mmol/L	1.10 - 1.35
Uric Acid	4.9	mg/dl	3.2 - 7.0

NOTE : Please correlate with clinical conditions.

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
LIVER FUNCTION TEST (LFT)			
TOTAL BILIRUBIN	0.87	mg/dl	0 - 1.2
DIRECT BILIRUBIN	0.13	mg/dL	0 - 0.3
INDIRECT BILIRUBIN	0.74	mg/dl	0.1 - 0.8
SGOT (AST)	55.2	U/L	0 - 35
SGPT (ALT)	106.5	U/L	0 - 45
ALKALINE PHOSPHATASE	66.0	U/L	40 - 140
GAMMA GLUTAMYL TRANSFERASE	34.5	IU/L	15 - 45
TOTAL PROTEIN	7.20	g/dl	6.4 - 8.3
SERUM ALBUMIN	3.91	g/dl	3.5 - 5.2
SERUM GLOBULIN	3.29	g/dl	1.8 - 3.6
A/G RATIO	1.19		1.2 - 2.2

NOTE : Please correlate with clinical conditions.

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
LIPID PROFILE			
Cholesterol-Total	204	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	201.7	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	43.5	mg/dL	< 40 Major Risk for Heart > 40 Normal
LDL Cholesterol	120.16	mg/dL	< 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high 160-189 High > 190 Very High
VLDL Cholesterol	40.34	mg/dL	6 - 38
CHOL/HDL RATIO	4.69		3.5 - 5.0
LDL/HDL RATIO	2.76		2.5 - 3.5

NOTE

8-10 hours fasting sample is required

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Post-Prandial Blood Sugar	142.0	mg/dl	70 - 140

Method : Hexokinase

Interpretation:-

Normal: 70-140

Impaired Glucose Tolerance: 140-200

Diabetes mellitus: ≥ 200

(on more than one occasion)



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CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
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Fasting Blood Sugar

113.5

mg/dl

Normal: 70-110

Method: GOD-POD

Impaired Fasting
Glucose(IFG):

100-125

Diabetes mellitus: ≥ 126

Note:- An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.



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IMMUNOASSAY REPORT

Test Description	Result	Unit	Biological Reference Ranges
TRI-IODOTHYRONIN, (T3)	1.49	ng/mL	0.69 - 2.15
THYROXIN, (T4)	98.2	ng/mL	52 - 127
Thyroid Stimulating Hormone(TSH)- Serum	3.46	μIU/mL	0.3-4.5 Pregnancy (As per American Thyroid Association)

First Trimester : 0.1-2.5
Second Trimester : 0.2-3.0
Third trimester : 0.3-3.0

Method: CLIA

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radioiodine • Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion"
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

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URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
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URINE ROUTINE

General Examination

Colour	Pale Yellow		Pale Yellow
Transparency (Apperance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.015		-1.005-1.030

Chemical Examination

Urine Protein	Absent		Absent
Urine Ketones (Acetone)	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative

Microscopic Examination

RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Yeast Cells	Not seen		Not seen

Note : 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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Test Description	Result	Unit	Biological Reference Ranges
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COMPLETE BLOOD COUNT

Haemoglobin	13.7	gm/dL	12.0 - 16.0
RBC Count	5.48	mil/cu.mm	4.00 - 5.50
Hematocrit HCT	40.0	%	40.0 - 54.0
Mean Corp Volume MCV	73.0	fL	80.0 - 100.0
Mean Corp Hb MCH	25.0	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	34.3	gm/dL	32.0 - 36.0
Platelet Count	1.52	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	6.1	10 ³ /cu.mm	4.0 - 11.0

DIFFERENTIAL LEUCOCYTE COUNT

Neutrophils	63	%	40 - 70
Lymphocytes	31	%	20 - 40
Monocytes	04	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01

Absolute Differential Count

Absolute Neutrophils Count	3.8	thou/mm ³	2.00 - 7.00
Absolute Lymphocyte Count	1.9	thou/mm ³	1.00 - 3.00
Absolute Monocytes Count	0.2	thou/mm ³	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm ³	0.02 - 0.50

EDTA Whole Blood - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.

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Test Description	Result	Unit	Biological Reference Ranges
ESR - ERYTHROCYTE SEDIMENTATION RATE	13	mm/hr	0 - 09

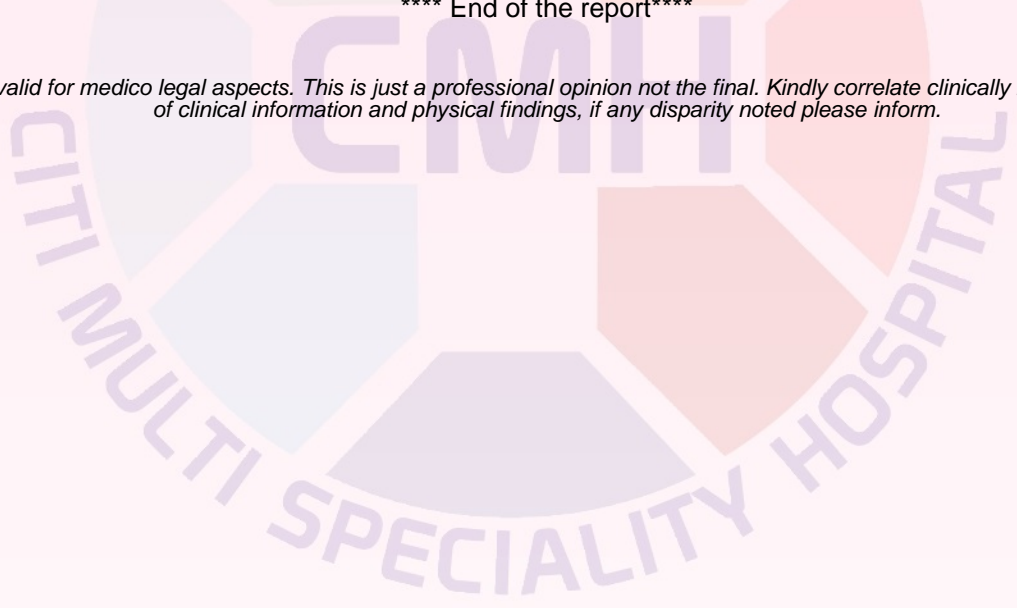
Method: Wintrob's

INTERPRETATION :

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

**** End of the report****

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.



Dr. Subhash Parmar
Consultant Pathologist

MER- MEDICAL EXAMINATION REPORT

Date of Examination	08-3-24		
NAME	Navneet Kumar Singh		
AGE	33	Gender	Male
HEIGHT(cm)	165	WEIGHT (kg)	73
B.P.	120/80 mmHg		
ECC	WNL		
X Ray	NORMAL		
Vision Checkup	Color Vision: No		
	Far Vision Ratio : No		
	Near Vision Ratio : No.		
Present Ailments	No. Any present ailments		
Details of Past ailments (If Any)	No. Any past ailments		
Comments / Advice : She /He is Physically Fit	He is physically fit.		

Dr. SABYASACHI GUPTA

MBBS (Gold Medalist) (Med.), RCGP (U.K.)

Reg. No. 11671

Signature with Stamp of Medical Examiner





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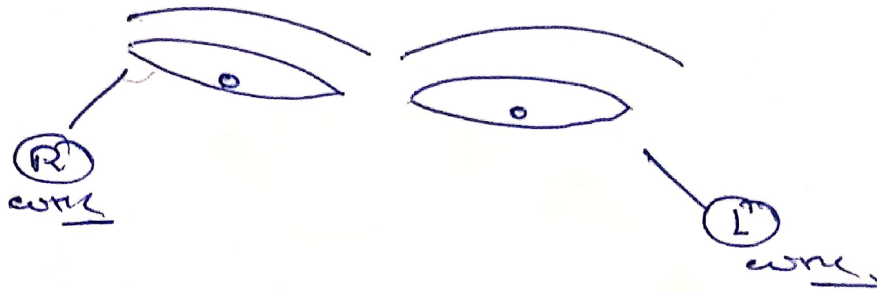
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Mayank Kumar Singh
33/10

08/3/24

cl
no. any complaint
in 3-24 - 2024



O/G

VA
R.E. 2/000
L.E. 2/000

no. any fresh complaint in
R.E. & L.E.

no. water-discharge in
Both eyes

clear vision in R.E. & L.E.

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



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Patient- Name:	MR. NAVNEET KUMAR SINGH	Age/Sex:	33 Y/M
Referred. By:	INS	Date:	08.03.2024

X-RAY CHEST PA VIEW

- Bilateral Lungs Fields Appear Clear.
- Bilateral Hilar Shadows Appear Clear.
- Bilateral CP Angels Appear Clear.
- Both The Domes Of Diaphragm Appear normal in shape and position.
- Visualized bony cage and soft tissue appear normal.

IMPRESSION

No Significant Abnormality.

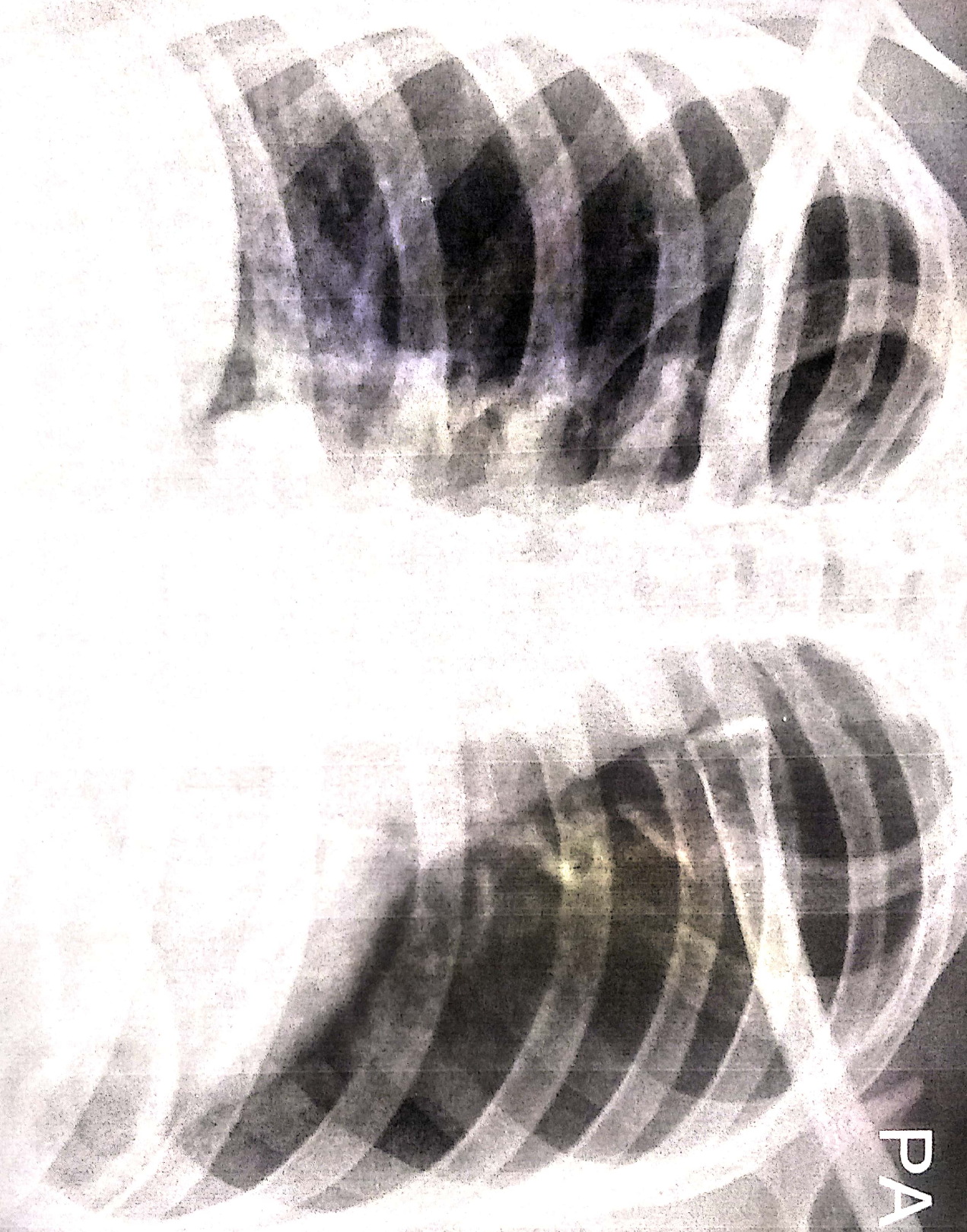
Dr. SANJAY
CONSULTANT RADIOLOGIST

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



RT

PA



Name: MR. NAVNEET KUMAR SINGH 33 Y/M

Sex: M

08.03.2024



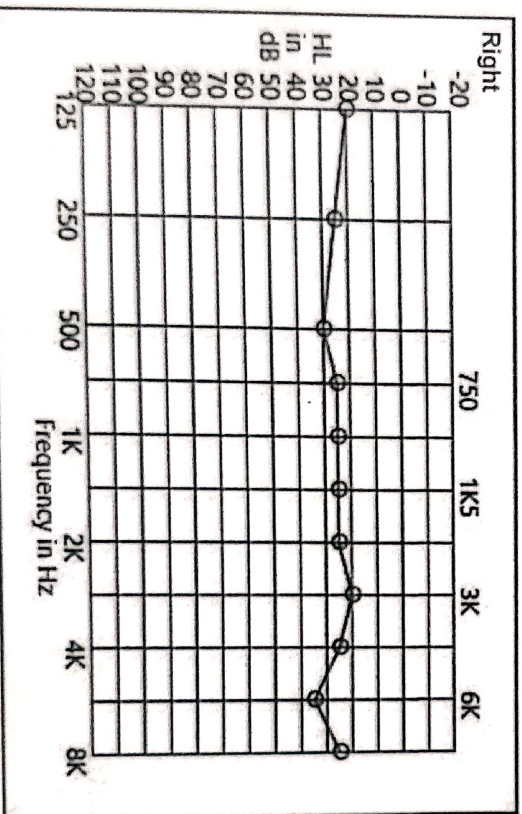
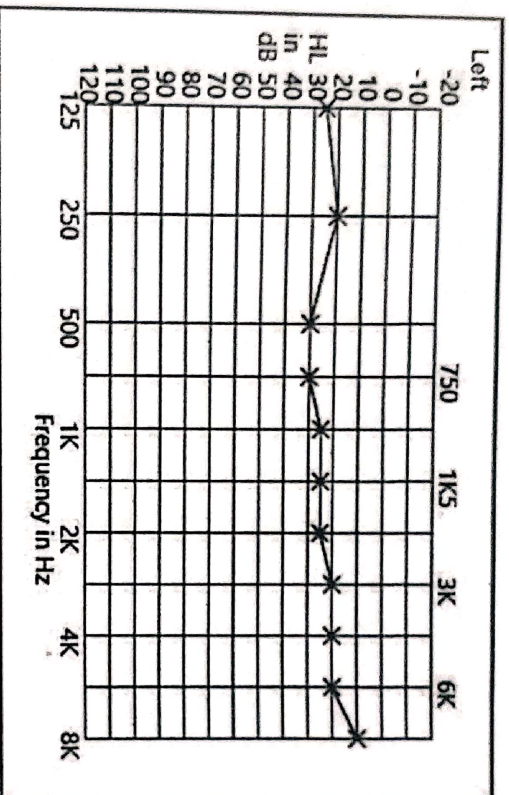
CITI MULTISPECIALITY HOSPITAL

MIG 216, Gaulam Nagar

BHOPAL

462023

Name	MR NAVNEET KUMAR SINGH	Case No.	804	Age	33	Sex	Male	Phone No.	9279577244
Address	CITY CENTER GANJ BASODA			Referred By	HELTH ASSURE		Date & Time	8/3/24	



Interpretation
NORMAL HEARING STUDY

Doctor/Audiologist
DR. SARBASACHI GUPTA
DR S S GUPTA (MD) (Gold Medalist), MD (Med), RCGP (U.K.)
Reg. No. 11671





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NAME –MR. NAVNEET KUMAR SINGH

AGE – 33Y/M

REF: BY.- HEALTH ASSURE

DATE- 08/03/2024

2D- ECHO COLOUR DOPPLER EVALUATION:-

- ❖ Normal great vessel relationship
- ❖ ALL cardiac valve are Normal
- ❖ Normal Four chambered heart
- ❖ Normal LV Size with Normal LV function LVEF- 60%
- ❖ No intracardiac shunt
- ❖ No Pericardium effusion
- ❖ FINAL IMPRESSION
- ❖ Normal LV Size with Normal LV function LVEF-60%

Dr. SBYASACHI GUPTA
DR. S. S. GUPTA (M.D.)
Reg. No.11671

CONSULTANT ECHOCARDIOLOGIST

Disclaimer:-The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate, hence, findings should always be interpreted in to the light of clinic-pathological correlation. This is a professional opinion, not a diagnosis. In case of any discrepancy a

For Emergency Contact: 7771008660

Sister Concern: Citi Hospital, 115 Zone II, MP Nagar, Bhopal-462011, Ph: 0755-487772-73
Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



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MIG-215-216 GAUTAM NAGAR GOVINDPURA, BHOPAL
MOB-7987913713

Name: MR NAVNEET KUMAR SINGH Patient Id: 080324-113826

Date: 08/03/2024

33

Birthdate:

Sex: Male

Accession #:

Perf.Physician:

Ref.Physician:

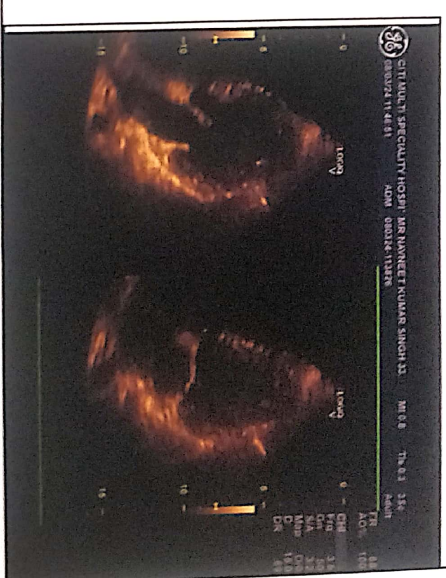
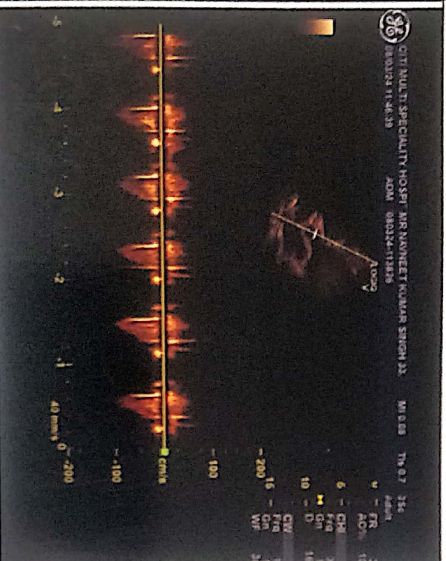
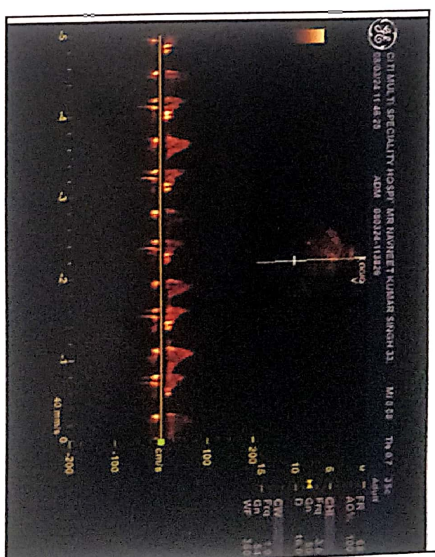
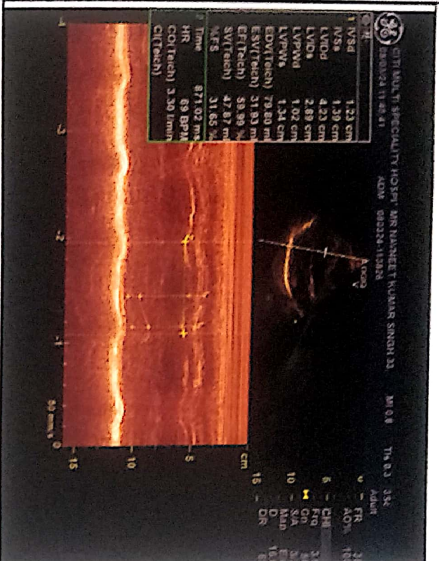
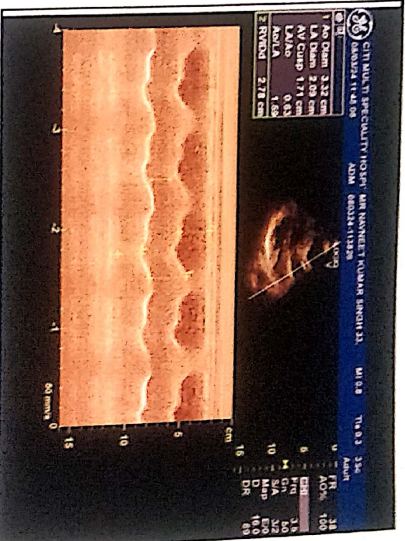
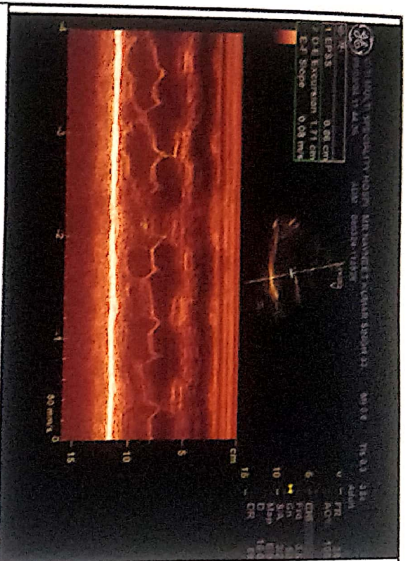
Operator: ADM

M-MODE & PW

D-E Excursion	1.71 cm
E-F Slope	0.08 m/s
EPSS	0.86 cm
Ao Diam	3.32 cm
LA Diam	2.09 cm
AV Cusp	1.71 cm
LA/Ao	0.63
Ao/LA	1.59
RVIDd	2.78 cm
IVSd	1.23 cm
LVIDd	4.23 cm
LVPWd	1.02 cm
IVSs	1.39 cm
LVIDs	2.89 cm
LVPWs	1.34 cm
EDV(Teich)	79.80 ml
ESV(Teich)	31.93 ml
EF(Teich)	59.99%
%FS	31.65%
SV(Teich)	47.87 ml
Time	871.02 ms
HR	69 BPM
CO(Teich)	0.00 l/min

Print Date: 3/8







CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)
Phone No. : 0755 - 4250134
Mobile No. : 7771008660, 8319214664, 9303135719



Patient's Name : MR. NAVNEET KUMAR SINGH

Age/Sex : 33years/M

Date : 08/03/2024

USG ABDOMEN

Liver : Liver is normal in size, shape and have smooth contour. Hepatic parenchyma is homogenous in echotexture. Intra and extra hepatic biliary and vascular channels are normal. No gross or diffuse mass lesions seen.

Gall Bladder : Gall bladder seen as an anechoic thin walled cavity with normal size and shape. No cholelithiasis or mass lesions seen. CBD is normal in calibre.

Spleen : Normal in size, shape and echotexture.

Pancreas : Normal in size, shape and echotexture.

Kidneys : Both the kidney are normal in size, shape, axe and position. Cortico medullary differentiation are normal and maintained bilaterly. No caliceal dilatation seen on either side.

Urinary bladder : Urinary bladder is normal and contents are echofree.

Prostate: Prostate is Normal in size shape size with PROSTATIC CALCIFICATION size -1.5 x1cm?PROSTATIC CALCULUS.

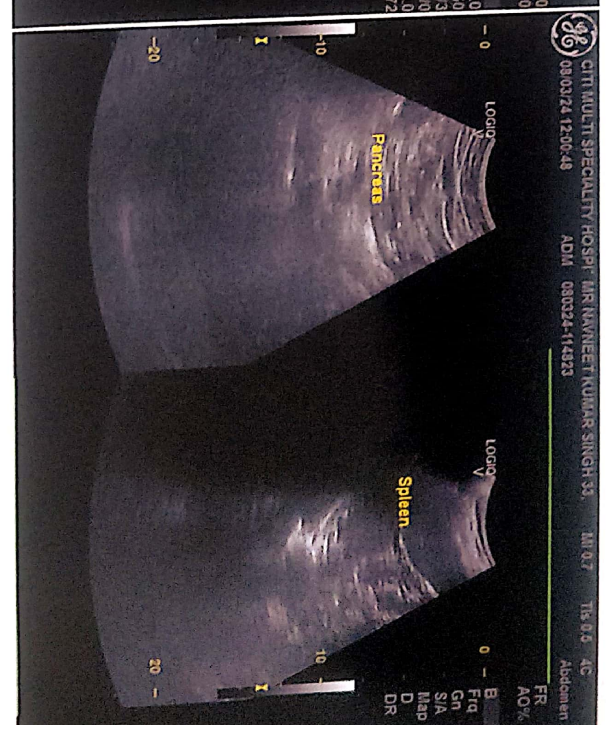
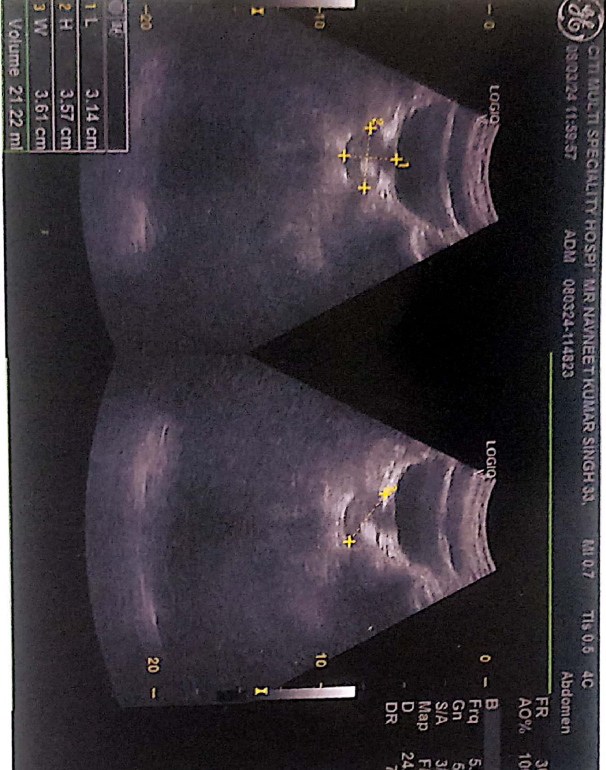
Retroperitoneum: No lymphadenopathy seen. No free fluid or ascitis seen.

IMPRESSION :

Prostate is Normal in size shape size with PROSTATIC CALCIFICATION size -1.5 x1cm?PROSTATIC CALCULUS.

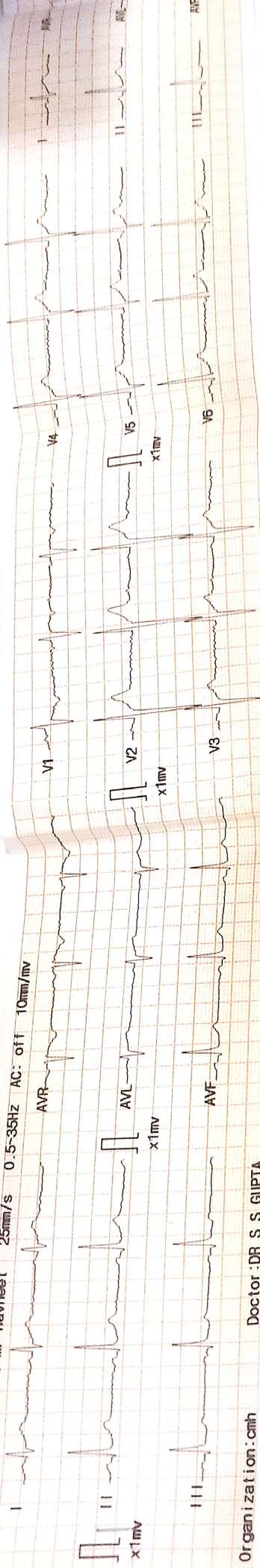

CONSULTANT SONOLOGIST

mpanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank
Food Corporation of India, Ayushman Bharat



1 L	3.14 cm
2 H	3.57 cm
3 W	3.61 cm
Volume 21.22 ml	

ID: 20240308163338 Name: mr navneet 25mm/s 0.5-35Hz AC: off 10mm/mv

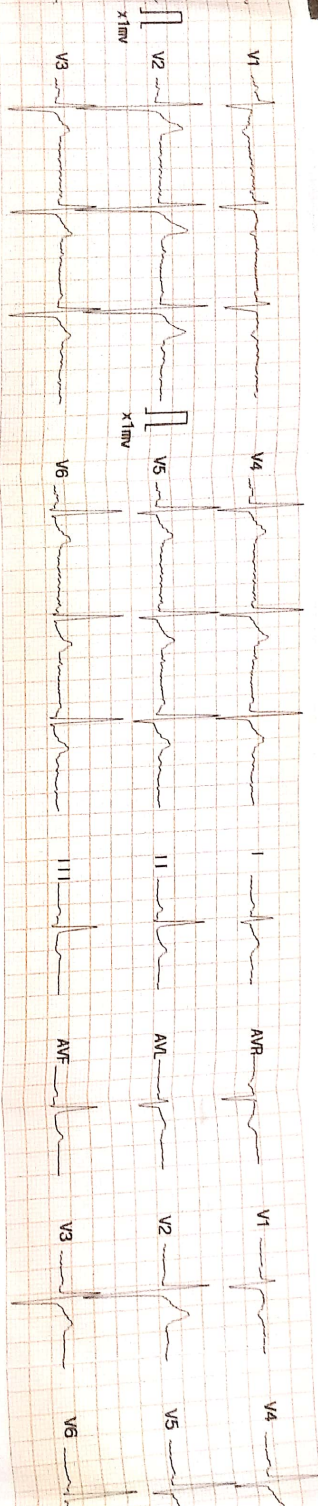


Organization: cnih Doctor: DR. S. S. GUPTA



Age: 35 years


Sex (Male/Female): Male



ID : 20240308163338
 Name : mr naureat
 Sex : Male
 Age : 35
 HR : 70 bpm
 R-R : 984 ms
 P-R : 141 ms
 QRS : 94 ms
 QT/QTc : 364/393 ms
 P/QRS/T : 46/ 80/ 35 mV
 RV5/SV1 : 1.365/-0.707 mV
 RV5/SV1 : 0.658 mV
 QTcF : 0.389

001: Sinus Rhythm
 171: Normal ECG
 001: GUNAA
 001: 11671
 Reg: 11671
 Reference Report Comment
 09-08-2024 18:33:57
 Dr. M. M. M. M.



 **GPS Map Camera**

Bhopal, Madhya Pradesh, India
M-216, Janata Quarter Internal Rd, Gautam Nagar, Housing Board Colony,
Maharana Pratap Nagar, Bhopal, Madhya Pradesh 462016, India
Lat 23.235072°
Long 77.441101°
08/03/24 12:12 PM GMT +05:30

