

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : VISHNU DABARIYA

Age / Gender : 31 years / Male

Endo ID : 180293

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Apr 02, 2024, 11:25 a.m.

Reported Date & Time : Apr 02, 2024, 02:59 p.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	12.5	gm/dl	13.5 - 18.0
Erythrocyte (RBC) Count	3.79	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	39.3	%	42 - 52
Mean Cell Volume (MCV)	103.8	FL	78 - 100
Mean Cell Haemoglobin (MCH)	33.0	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	31.8	g/dl	32 - 36
Red Cell Distribution Width (RDW)	14.6	%	11.5 - 14.0
Total Leucocytes Count (WBC)	3850	Cell/cu.mm	4000 - 10000
Neutrophils	53	%	40 - 80
Lymphocytes	36	%	20 - 40
Monocytes	06	%	2 - 10
Eosinophils	05	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	12.3	fL	7.2 - 11.7
PCT	0.18	%	0.2 - 0.5
Platelet Count	151	10 ³ /ul	150 - 450

END OF REPORT

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)



Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

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Collected Date & Time : Apr 02, 2024, 11:25 a.m.

Reported Date & Time : Apr 02, 2024, 03:00 p.m.

Sample ID :



240930052

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HAEMATOLOGY

ESR	40	mm	0 - 20
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END OF REPORT

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CLINICAL PATHOLOGY

URINE ROUTINE

General Examination

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.015		1.005-1.030

Chemical Examination

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

Microscopic Examination

Pus cells (WBCs)	1-2	/hpf	0-4
Epithelial cells	2-3	/hpf	0-5
Red blood cells	NIL	/hpf	NIL
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Absent		Absent
Other	Absent		Absent

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240930052

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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

'B' POSITIVE

Method : Gel Technique & Tube Agglutination

Medical Remark :

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

END OF REPORT

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BIOCHEMISTRY

LIPID PROFILE

Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	147.0	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	121.7	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	56.0	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	24.34	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	66.66	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	2.63		2.6-4.9
LDL/HDL Ratio Method : Calculated	1.19		0.5-3.4

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BIOCHEMISTRY

LIVER FUNCTION TEST

Bilirubin - Total	1.09	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.25	mg/dL	0.00 - 0.30
Bilirubin - Indirect	0.84	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	36.9	U/L	5.0-40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	23.6	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	74.0	U/L	MALE & FEMALE
Method : IFCC with Serum			4-19 YEAR: 54-369 U/L
			20-59 YEAR: 42-98 U/L
			>60 YEAR: 53-141 U/L
Total Protein	7.32	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.92	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.40	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	2.05		1.5 - 2.5
Method : Calculated			

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Reported Date & Time : Apr 02, 2024, 01:04 p.m.

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HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)

4.8

%

> 8% Action Suggested

BLOOD

7 - 8 % Good Control

Method : Nephelometry Methodology

6 - 7 % Near Normal Glycemia

< 6% Normal level

Instrument: Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE

91.06

90 - 120 Very Good Control

121 - 150 Adequate Control

151 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

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IMMUNOLOGY			
T3-Triiodothyronine Method : CHEMILUMINOSCECE	1.68	ng/mL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINOSCECE	10.1	ug/dL	4.5 - 10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINOSCECE	2.33	uIU/mL	0.35 - 5.50

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves 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. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

****END OF REPORT****

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Test Description	Value(s)	Unit(s)	Reference Range
BIOCHEMISTRY			
Urea	38.8	mg/dL	10.0 - 40.0
Method : Uricase			
CREATININE	0.87	mg/dL	0.60 - 1.40
Method : Serum, Jaffe			

END OF REPORT

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BIOCHEMISTRY

Uric Acid	4.9	mg/dL	3.5-7.0
Method : Uricase, Colorimetric			

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BIOCHEMISTRY

Calcium Method : Arsenazo III	9.6	mg/dL	8.50 - 10.20
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BIOCHEMISTRY

Glucose fasting Method : Fluoride Plasma-F, Hexokinase	86.2	mg/dL	70.0-110.0
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END OF REPORT

Dr. Kusum Heda
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Dr. Nishi Prasad
M.D.(Patho.)



5 Seconds ECG Report

Patient Name: Mr. VISHNU PRASAD 31/M

HR : 68 bpm BP : 0 / 0 mmHg

April 02, 2024

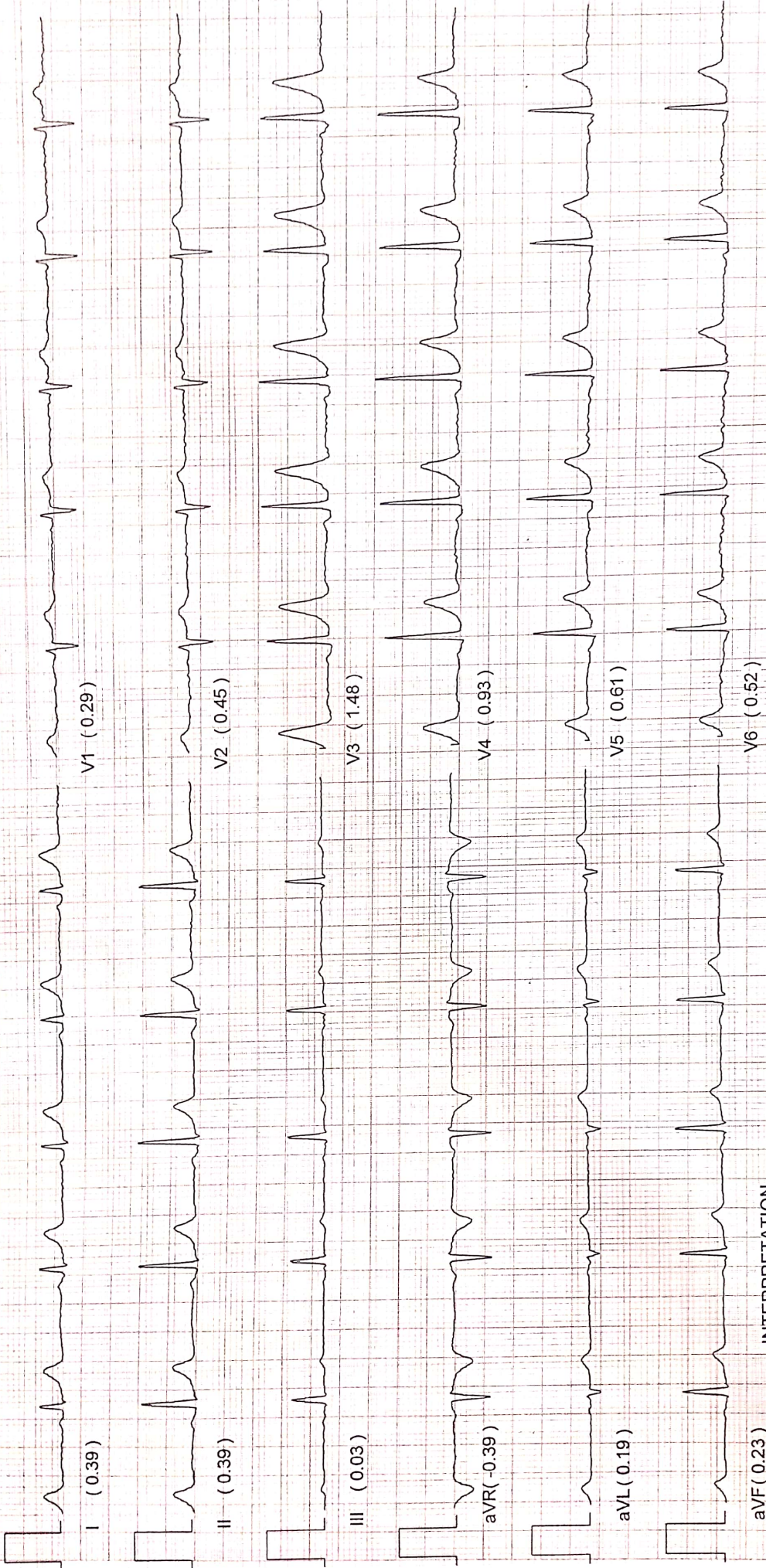
RR Interval: 0.88 sec

Time: 09:50:07

PR Interval: 0.12 sec

QRS Duration : 0.080 Sec

P-QRS-T Axis (38)-(64)-(30) deg



INTERPRETATION

Sinus Rhythm, PR is normal, Normal QRS Width, Normal QT interval, QRS Axis is normal,

Normal ECG

DR
MD

*Unconfirmed Reporting, Refer to Clinician



ant Radiologist & Sonologist

Roopa Goyal

Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

O. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948, 7976525010

NAME :-- Vishnu Prasad

AGE :-- 30 Yrs

Date:-- 02-Apr-24

REF BY :- BOB

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS

Dr. ROOPA
Consultant
RMC No.

ग लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

TER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
AGNOSIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IN NOT MEANT FOR MEDICO-LEGAL PURPOSE.

Consultant Radiologist & Sonologist

Roopa Goyal
(Radio-Diagnosis)

NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948, 7976525010

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

USG ABDOMEN-PELVIS

NAME - Vishnu Prasad Dabariya

AGE-- 31 Yrs

Date -- 02-Apr-24

REF BY -- BOB

LIVER: is enlarged in size 14.5 cm and shows homogeneous echotexture.
No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion.
The portal vein (measuring 11.9mm) and common bile duct show normal caliber.

GALL BLADDER: distended and shows smooth walls. Wall thickness appears normal.
No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: enlarged in size 13.3 cm and shows normal echopattern.

PANCREAS: Normal in size , shape and position. Parenchyma is homogenous.

RT.KIDNEY- Normal in size, shape and position . Measures :--10.1 x 3.7cm
Cortex is homogeneous. Corticomedullary differentiation is maintained
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

LT. KIDNEY- Normal in size, shape and position. Measures :-- 10.1 x 4.0cm
Cortex is homogeneous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

URINARY BLADDER : is distended with smooth walls .
No evidence of diverticulum or calculus is Seen

PROSTATE: is Normal in size and shows normal homogeneous echotexture

IMPRESSION:-

- Hepatosplenomegaly.
- Rest of the abdominal organs are within normal limits.

(Adv- clinical correlation , further evaluation)

Dr. DEVENDRA GOYAL (M.D.)
RMC No.: 00130/15000
Consultant Radiologist
And Sonologist

Please note :- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no us finding is path genomic .
All findings are only S/O , hence advice These findings are observations at the time of study.
Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost
This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .

पूर्ण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

ALTER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
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NAME	: VISHNU PRASAD	DATE	: 02-Apr-24
AGE	: 31 YRS		
SEX	: MALE	REF BY	: BOB

INTERPRETATION SUMMARY

- . NORMAL CHAMBER DIMENSIONS
- . INTACT IAS/ IVS
- . ALL VALVES ARE NORMAL.
- . TRACE TR
- . RVSP 20 MM HG
- . NO RWMA : LVEF 60 %
- . NO CLOT, VEGITATION.
- . NO PERICARDIAL EFFUSION
- . NORMAL PERICARDIUM .
- . SIZE OF MAIN PULMONARY ARTERY 16 MM

M.MODE/2D MEASUREMENTS (MM) & CALCULATIONS (ML)

LVID d	32.2	LVEDV	
LVID s	22.0	LVESV	
RVID(d)	---	SV	-
IVS d	9.9	F.S	32%
IVS S	13.6	EF	60%
LVPW d	9.3	C.O	-
LVPWS	13.3	MITRAL VALVE	-
AORTIC ROOT	24.0	EF SLOPE	-
LEFT ATRIUM	25.5	OPENING AMPLITUDE	-
AORTIC CUSP OPENING	-	E.P.S.S	-

DOPPLER MEASUREMENTS & CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY(cm/sec.)	GRADIENT P/M	REGURGITATION
MITRAL VALVE	NORMAL	E-133 A- 70	-	NIL
TRICUSPID VALVE	NORMAL	159	-	TRACE
PUL VALVE	NORMAL	108	-	NIL
AORTIC VALVE	NORMAL	120	-	NIL

PULMONARY ARTERY	MITRAL VALVE AREA (BY P 1/2 T)
PEAK ACCELERATION TIME	PRESSURE HALF TIME
SYSTOLIC PRESSURE 20 MM HG	MVA

Dr. ROOPA GOYAL (M.B.B.S.)
Consultant Radiologist & Sonologist
RMC No. - 0045071156

धूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

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भारत सरकार

Government of India



विष्णु प्रसाद डबरिया

Vishnu Prasad Dabariya

जन्म तिथि / DOB : 18/06/1992

पुरुष / Male

3882 1000 0917

मेरी आधिक, मेरी पहचान

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No.-004507/15600



3882 1000 0917



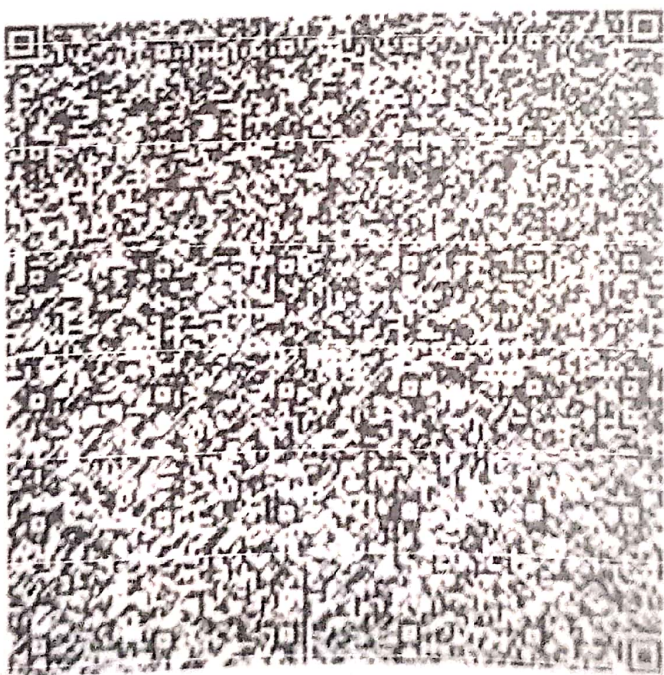


भारतीय विशिष्ट पहचान प्राधिकरण

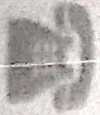
Unique Identification Authority of India



पता: S/O जगदीश प्रसाद, 15 बी, कृष्णा
कोलोनी, बी-ब्लॉक के सामने, चन्द्रवरदाई नगर,
अजमेर, अजमेर, राजस्थान, 305001
Address: S/O, Jagdish Prasad, 15 B, Krishna
Colony, Opposite B-block, Chandravrdayi
Nagar, Ajmer, Ajmer, Rajasthan, 305001



3882 1000 0917



1947



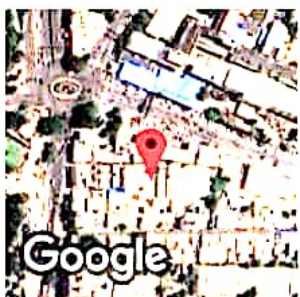
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Bagh, Ajmer, Rajasthan 305001, India
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02/04/24 10:06 AM GMT +05:30

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

AD (Radio-Diagnosis)

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Endo ID : 180293

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Apr 02, 2024, 03:45 p.m.

Reported Date & Time : Apr 02, 2024, 04:14 p.m.

Sample ID :



240930156



Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

Blood Glucose-Post Prandial	115.3	mg/dL	70 - 140
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Method : Hexokinase

****END OF REPORT****

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)



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