



ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	30/07/2022	Srl No.	11	Patient Id	2207300011
Name	Mr. MANISH KUMAR	Age	33 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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HAEMATOLOGY

HB A1C	5.1	%	
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EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	13.2	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,200	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	66	%	40 - 75
LYMPHOCYTE	31	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	02	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	12	mm/1st hr.	0 - 15
R B C COUNT	4.26	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	39.6	%	40 - 54
M C V	92.96	fl.	80 - 100
M C H	30.99	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.16	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"AB"		
RH TYPING	POSITIVE		

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BIOCHEMISTRY

BLOOD SUGAR FASTING	84.7	mg/dl	70 - 110
SERUM CREATININE	0.88	mg%	0.7 - 1.4
BLOOD UREA	23.6	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.6	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			
BILIRUBIN TOTAL	0.59	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.20	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.39	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.6	gm/dl	6.6 - 8.3
ALBUMIN	3.2	gm/dl	3.4 - 5.2
GLOBULIN	3.4	gm/dl	2.3 - 3.5
A/G RATIO	0.941		
SGOT	36.7	IU/L	5 - 40
SGPT	39.2	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	99.1	U/L	40.0 - 130.0
GAMMA GT	25.1	IU/L	8.0 - 71.0

LFT INTERPRET**LIPID PROFILE**

TRIGLYCERIDES	177.3	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	208.7	mg/dL	29.0 - 199.0



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Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
H D L CHOLESTEROL DIRECT	56.2	mg/dL	35.1 - 88.0
V L D L	35.46	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	117.04	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.714		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.083		0.00 - 3.55
THYROID PROFILE			
T3	0.84	ng/ml	0.60 - 1.81
T4	9.25	ug/dl	4.5 - 10.9
Chemiluminescence			
TSH	1.03	uIU/ml	
Chemiluminescence			

REFERENCE RANGE

PAEDIATRIC AGE GROUP

0-3 DAYS	1-20	ulu/ ml
3-30 DAYS	0.5 - 6.5	ulu/ml
1 MONTH -5 MONTHS	0.5 - 6.0	ulu/ml
6 MONTHS- 18 YEARS	0.5 - 4.5	ulu/ml

ADULTS 0.39 - 6.16 ulu/ml

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates $\pm 50\%$, hence time of the day has influence on the measured serum TSH concentration.



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Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

QUANTITY	20	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.015	
PH	6.0	

CHEMICAL EXAMINATION

ALBUMIN	NIL
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Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	0-1	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

**** End Of Report ****

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Madhuban

Name :- Manish Kumar
Refd by :- BoB

Age/Sex:- 33Yrs/M
Date :- 30/07/22

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size (13.9cm) with slightly raised echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (7.8cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.4cm and Left Kidney measures 8.6cm.
- U. Bladder** :- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (9cc) & echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- Mild Fatty Liver.
Otherwise Normal Scan.

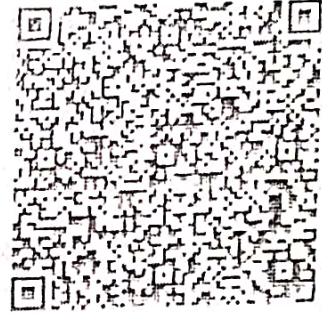
Dr. U. Kumar
MBBS, MD(Radio-Diagnosis)
Consultant Radiologist

105523437 21/12/2011

To
मनीष कुमार
Manish Kumar
S/O Munindar Kumar
Madhopur
Madhopur
Nalanda
Bihar 803108
8178600101



ME055234376FH



आपका आधार क्रमांक / Your Aadhaar No. :

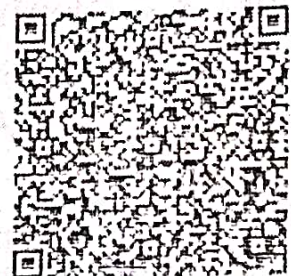
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मेरा आधार, मेरी पहचान



भारत सरकार
Government of India

मनीष कुमार
Manish Kumar
जन्म तिथि / DOB : 23/10/1988
पुरुष / Male



5471 0761 3161

मेरा आधार, मेरी पहचान

ID: 51

MANISH KUMAR3

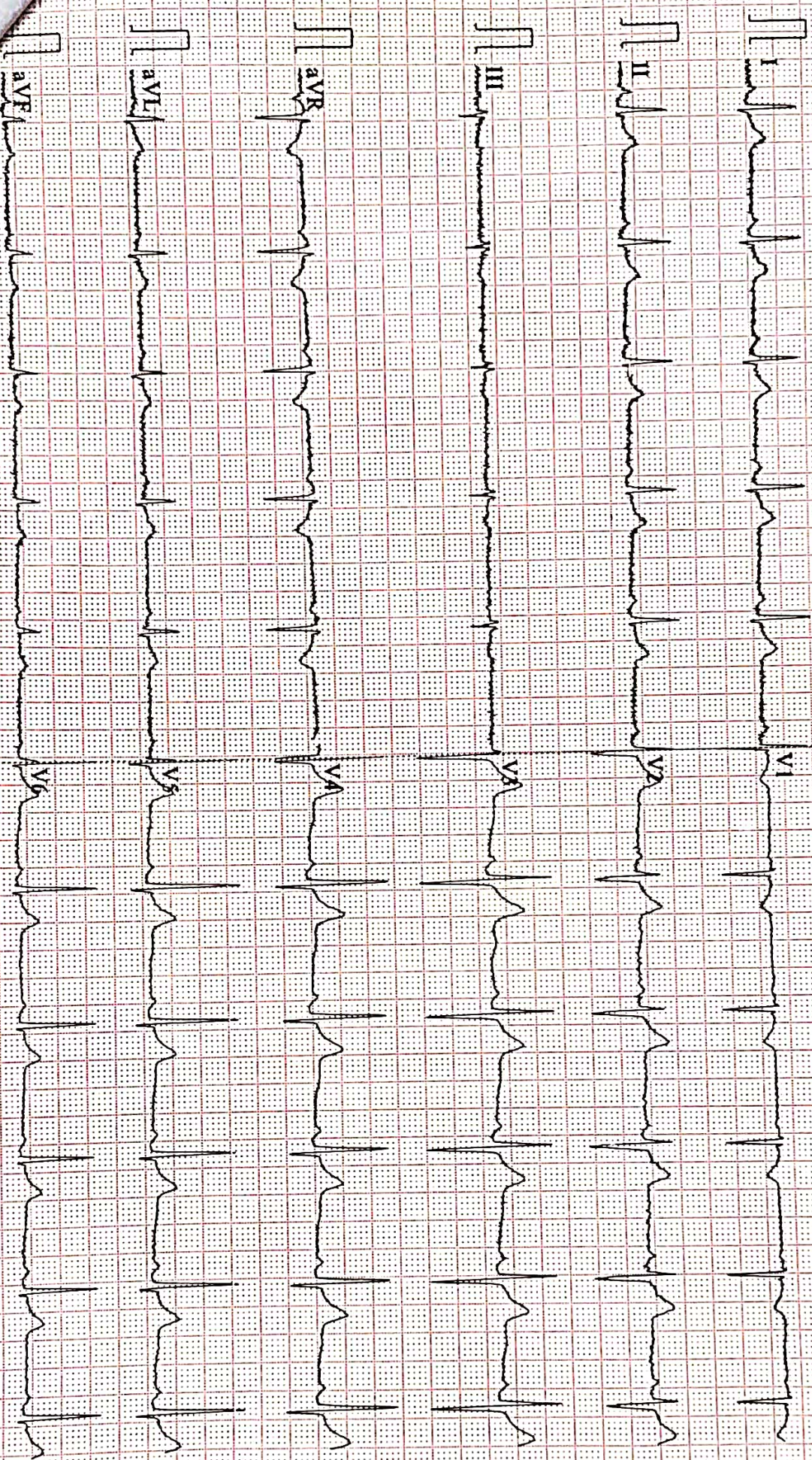
Male 33Y ears

30-07-2022 11:08:30 AM

HR	: 64	bpm
P	: 107	ms
PR	: 160	ms
QRS	: 81	ms
QT/QTc	: 353/364	ms
P/QRS/T	: 16/30/22	°
RV5/SV1	: 1.59/40.908	mV

Diagnosis: Information:
Sinus Arrhythmia

Ref-Phys :
Report Confirmed by:



1000Hz AC50 25mm/s 10mm/mV 2550s 64 V2.2 SEMIP V1.81 DIAGNOSTIC