


The Signature
ADVANCED SUPER SPECIALITY
HOSPITAL
Prescription



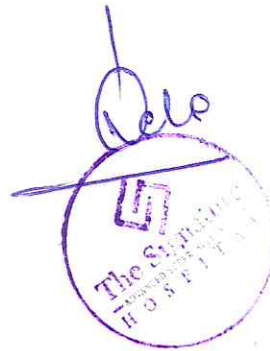
UHID : 19066	Date&Time : 31/03/2022 9.22 AM
Name : Mr. HEMANT KUMAR PAL	Sex : Male
Doctor Name : Dr. NEHA LUTHRA	Age : 38Years 8Months 21Days
Address : H.NO 4087 SEC 23A,Gurgaon,Gurgaon,Haryana	Mobile No : 9899092897
	Organisation : MEDIWHEEL

B.P	H.R	P.R	SPO2	Temp.	Height	Weight

Routine check up.

Vu < 6/6
6/6

→ A/S will be



Created By ALISHA1196	Create Date &Time 31/03/2022 9.22 AM	(Authorised Signatory)
Printed By ALISHA1196	Print Date & Time 31/03/2022 11.51 AM	 19066

(This is only professional opinion and not the diagnosis. Please correlate clinically)

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Ph.: 0124-6034444, 8526000000, E-mail : signaturehospital@gmail.com, Web.: www.thesignaturehealthcare.com
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Sample ID : 2210332	Sample Receiving Dt & Tm : 31/03/2022/ 12:00 PM
Patient Type : OPD	Report Released on : 31/03/2022/ 2.10 PM
Bed No :	

HEMATOLOGY

Complete Blood Count -CBC(HB\TLC\PCV\RBC\Platelet)

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
Hemoglobin (Hb) (Colorimetry)	15.6	gm/dl	13.5 - 18.0	WHOLE BLOOD
TLC (Electrical Impedence)	4520	cell/cumm	4500 - 11000	EDTA WHOLE
DIFFERENTIAL COUNT				
Neutrophils (Flow Cytometry)	60	%	40 - 75	EDTA WHOLE
Lymphocytes (Flow Cytometry)	27	%	20 - 45	EDTA WHOLE
Monocytes (Flow Cytometry)	09	%	1 - 10	EDTA WHOLE
Eosinophil (Flow Cytometry)	04	%	1 - 6	EDTA WHOLE
Basophil	00	%	0 - 1	
RBC (Electrical Impedence)	5.6	millions/cumm	4.7 - 6.1	EDTA WHOLE

-*** End of Report ***-

This is Provisional Report

Lab Technician 

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HEMATOLOGY

PCV (Electrical Impedence Calculation)	50.2	%	40 - 50	EDTA WHOLE
MCV (Electrical Impedence Calculation)	88.8	fl	76 - 96	EDTA WHOLE
MCH (Electrical Impedence Calculation)	28.0	pg	27 - 34	EDTA WHOLE
MCHC (Electrical Impedence Calculation)	31.6	gm/dl	30 - 36	EDTA WHOLE
RDW	14.3	%	11 - 16	
PLATELETE COUNT (Electrical Impedence)	155	1000/microLit	150 - 450	EDTA WHOLE



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BIOCHEMISTRY

Blood Sugar Fasting

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	SPECIMEN TYPE
TEST METHOD				
BLOOD SUGAR FASTING (God- Trinders)	92	mg/dl	75 - 115	Flouride Plasma

Increased In:
 Diabetes Mellitus
 Stress (e.g, emotion, burns, shock, anesthesia)
 Acute Pancreatitis
 Chronic Pancreatitis
 Wernicke encephalopathy (Vitamin B1 deficiency)
 Effect of drugs (e.g. corticosterogens, alcohol, phenytoin, thiazides)

Decreased in :
 Pancreatitis disorders
 Extrapancreatic tumors
 Endocrine disorders
 Malnutrition
 Hypothalamic lesions
 Alcoholism
 Endocrine Disorders



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BIOCHEMISTRY

Blood Sugar 2 Hr. Pp

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
BLOOD SUGAR POST PRANDIAL(BSPP)	126	mg/dl	90 - 140

Method: God-Trinders

Increased In:
Diabetes Mellitus
Stress (e.g, emotion, burns, shock, anesthesia)
Acute Pancreatitis
Chronic Pancreatitis
Wernicke encephalopathy (Vitamin B1 deficiency)
Effect of drugs (e.g. corticosterogens, alcohol, phenytoin, thiazides)

Decreased in :
Pancreatitis disorders
Extrapancratic tumors
Endocrine disorders
Malnutrition
Hypothalamic lesions
Alcoholism
Endocrine Disorders



****** End of Report ******

Please Correlate With Clinical Findings If Necessary Discuss
** This is an Electronically Authenticated Report **

*** Some of the test is performed in PARK HOSPITAL GROUP SUPER SPECIALITY HOSPITAL

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Bed No :	

SEROLOGY/IMMUNOLOGY

Thyroid Profile

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
Triiodothyronine (T3)	1.22	ng/ml	0.60 - 1.81	SERUM
Thyroxine (T4) CLIA	9.6	ug/dL	5.01 - 12.45	
TSH (Thyroid Stimulating Hormone) CLIA	3.73	uIU/ml	0.55 - 5.55	

Remarks :

(1) 4.2 to 15 IU/mL - Correlate clinically as physiological and other factors may falsely elevate TSH level. (2) TSH Values may be transiently altered because of non thyroidal illness. (3) Some drugs may decrease TSH values, e.g., L-dopa, Glucocorticoids. (4) Some drugs may increase TSH values, e.g., Iodine, Lithium, Amiodarone. Abbreviations.



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BIOCHEMISTRY


Lipid Profile

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	SPECIMEN TYPE
TEST METHOD				
<u>LIPID PROFILE</u>				
CHOLESTROL (CHOD-TRINDER)	182	mg/dl	00 - 200	SERUM
TRIGLYCERIDES (GPO-Trinders)	126	mg/dl	35 - 170	SERUM
HDL- CHOL (Direct Method/ Enzymatic Colorometric)	49	mg/dl	40 - 60	SERUM
VLDL-CHOL CALCULATED	25.2	mg/dl	10 - 40	
LDL-CHOLESTROL	107.8	mg/dl	0 - 130	
LDL/HDL RATIO	2.2		0-3	
CHOLESTROL/HDL RATIO	3.71			



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BIOCHEMISTRY

Liver Function Test Profile

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
<u>BILIRUBIN TOTAL AND DIRECT</u>				
BILIRUBIN TOTAL (Diazonium Salt)	0.8	mg/dl	0.1 - 1.2	SERUM
BILIRUBIN DIRECT (Diazonium Salt)	0.3	mg/dl	00 - 0.3	SERUM
BILIRUBIN INDIRECT (CALCULATED)	0.5	md/dl	0 - 0.9	
SGOT/AST (UV-KINETIC)	35	U/I	0 - 45	SERUM
SGPT/ALT (UV-KINETIC)	56	U/I	0 - 45	SERUM
ALKALINE PHOSPHATASE (ALP) (Kinetic)	109	U/I	41 - 137	SERUM



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BIOCHEMISTRY

PROTEINS

TOTAL PROTEIN (Biuret)	6.7	g/dl	6.0 - 8.3	SERUM
ALBUMIN (BCG- DYE)	4.5	g/dl	3.2 - 5.0	SERUM
GLOBULIN Calculated	2.2	gm/dl	1.5 - 3.6	
A/G RATIO Calculated	2.05		0.9 - 2.0	

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Bed No :	

BIOCHEMISTRY

Renal Profile

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
BLOOD UREA (Urease UV/GLDH)	27	mg/dl	13 - 45	SERUM
SERUM CREATININE (Jaffe Rate)	1.1	mg/dl	0.6 - 1.4	SERUM
URIC ACID (Enzymatic/Uricase)	6.1	mg/dl	3.6 - 7.2	SERUM
<u>ELECTROLYTES</u>				
SODIUM (ISE-Indirect)	137	mmol/L	132 - 150	SERUM
POTASSIUM (ISE-Indirect)	4.4	mmol/L	3.5 - 5.5	SERUM



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BIOCHEMISTRY

PROTEINS

TOTAL PROTEIN (Biuret)	6.7	g/dl	6.0 - 8.3	SERUM
ALBUMIN (BCG- DYE)	4.5	g/dl	3.2 - 5.0	SERUM
GLOBULIN Calculated	2.2	gm/dl	1.5 - 3.6	
A/G RATIO Calculated	2.05		0.9 - 2.0	




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HEMATOLOGY

Blood Group And Rh Factor

TEST NAME	RESULT	UNITS	BIOLOGICAL
TEST METHOD			REFERENCE INTERVAL SPECIMEN TYPE
BLOOD GROUP(ABORh)	"AB" POSITIVE		

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BIOCHEMISTRY

Glycosylated Haemoglobin

TEST NAME	RESULT	UNITS	BIOLOGICAL
TEST METHOD			REFERENCE INTERVAL SPECIMEN TYPE
HbA1C (GLYCOSYLATED HEMOGLOBIN)	4.7	%	4.6 - 6.2

Metabolically Healthy Patients 4.5 6.0
 Good Control 6.1 6.5
 Fair Control 6.6 7.0
 Poor Control > 7.0

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CLINICAL PATHOLOGY

Urine Routine And Microscopy.

TEST NAME	RESULT	UNITS	BIOLOGICAL
TEST METHOD			REFERENCE INTERVAL SPECIMEN TYPE
QUANTITY	30 ML		
COLOUR	PALE YELLOW		
TURBIDITY	CLEAR		
SPECIFIC GRAVITY (Bromthymol Blue)	1.030		1.003-1.030 Urine
PH (Chromatography)	5.5		4.7-7.0 Urine

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CLINICAL PATHOLOGY

CHEMICAL EXAMINATION

UROBILINOGEN (Ehrlich's Aldehyde Reaction)	NORMAL	NORMAL	Urine
PROTEIN	NIL	NIL	
BLOOD	NIL	NIL	
KETONE (Sodium Nitroprusside)	NIL	NIL	Urine
BILIRUBIN (Diazonium Salt)	NIL	NIL	SERUM
GLUCOSE (Benedict's Test)	NIL	NIL	Urine
NITRITE	NEGATIVE		



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CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION - URINE

PUS CELLS (Microscopic)	1-2	/HPF	0 - 3	Urine
RBC- Urine (Per Oxidase Reaction)	NIL	/HPF	NIL	Urine
EPITHELIAL CELLS	1-2	/HPF	0 - 5	
CAST	NIL		NIL	
CRYSTALS	NIL		NIL	
BACTERIA	NIL			
OTHERS	NIL			

COMMENTS: Actual numerical values for WBCs, RBCs and Epithelial cells are not defined and must be correlated clinically.

Test Methods: Reagent strip analysis and urine sediment microscopy.

Reagent strip / chemical analysis are based on: pH-Double Indicator principle; Specific gravity Ion exchange method; Glucose Glucose oxidase-peroxidase/Benedicts; Protein Acid-base indicator/Sulfosalicylic acid; Urobilinogen Coupling reaction/Ehrlichsreaction, Bilirubin Coupling reaction, Ketones Nitroprusside method/Rotheras test.

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Dr. Neha Gupta
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(Consultant Pathologist)

Dr. Neha Kaushal
MBBS,MD(Microbiology)
(Consultant Microbiologist)

(This is only professional opinion and not the diagnosis. Please correlate clinically)

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TRANSTHORACIC ECHO- DOPPLER REPORT

NAME - MR. HEMANT KUMAR PAL	AGE/SEX - 38 / M
MR. NO. - 19066	DATE - 31/3/2022

M-MODE / 2-D DESCRIPTION

- ❖ **Left Ventricle:** No regional wall motion abnormality. LVEF ~ 60 %.
- ❖ **Left Atrium:** Normal.
- ❖ **Right atrium:** It is Normal Sized.
- ❖ **Right ventricle:** It is Normal Sized. RV Systolic Function is Normal.
- ❖ **Aortic valve:** Aortic Cusps are Normal.
- ❖ **Mitral valve:** It Appears Normal.
- ❖ **Tricuspid valve:** It Appears Normal.
- ❖ **Pulmonic valve:** It Appears Normal.
- ❖ **Main pulmonary artery & its branches:** Appear Normal.
- ❖ **Pericardium:** No Pericardial Effusion Seen
- ❖ **Inter atrial septum:** It is Intact.
- ❖ **Inter ventricular septum:** It is Intact.
- ❖ **IVC:** It is Normal in Size, collapsing & Respiratory Variability.
- ❖ **Clot / Vegetation:** No Intracardiac Clot, Vegetation.

Measurements (mm):

LEFT HEART			RIGHT HEART		
	Observed values (mm)	Normal values		Observed values (mm)	Normal values
Aortic root	32	20-36 (22mm/M ²)	IVC size	-	17-21mm
Aortic valve opening		15-26 (mm/M ²)	IVC respiratory variability		>50%
LA size	38	19-40 (mm/M ²)	RA size	-	<18cm ²
LA volume index (ml/M ²)		<34 ml/M ²		-	
LVID(D)	45.6	(ED=37-56)	RV basal		24-42mm
LVID(S)	33		RV mid cavity	-	20-35mm
IVS(D)	8	(ED=6-12)	RV longitudinal	-	56-86mm
			RVOT proximal	-	18-33mm
PW(D)	8	(ED=5-10)	TAPSE	-	>15mm
			RV free wall thickness	-	<5mm
LVEF(%)	60 %	55%-70%	RVEF		>44%

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Doppler velocities (cm/sec)

Aortic valve		Pulmonary valve	
Max/ Vel	82	Max velocity	86
Max/ PG		Max PG	
Mitral valve		Tricuspid valve	
E	58	Max Velocity	
A	56	PASP	-
DT	-	E/E' (>6)	-
E/A	-	S' Velocity (>10cm2/sec)	-

Regurgitation

MR		TR	
Severity	Mild	Severity	Nil
AR		PR	
Severity	Nil	Severity	Nil

Final Interpretation:

- No regional wall motion abnormality. LVEF ~ 60 %
- Normal Cardiac Chamber.
- NO MR, No AR, No TR.
- NORMAL MIP.
- No Vegetation, Pericardial Effusion



Dr. AJAY DUA
 DNB (Medicine), DNB (Cardiology)
 Sr. Consultant Interventional Cardiology

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DEPARTMENT OF IMAGING & INTERVENTIONAL RADIOLOGY, THE SIGNATURE HOSPITAL

NAME: HEMANT KUMAR PAL	DATE: 31/03/2022
AGE: 38 Y/M	MR NO.: 19066

USG WHOLE ABDOMEN

LIVER: is normal in size and echotexture. No evidence of any focal lesion or IHBR dilation is present. Portal vein and CBD are normal in caliber at porta.

GALL BLADDER is well distended with multiple echogenic foci of 3-7 mm casting posterior shadowing. No pericholecystic fluid is seen.

SPLEEN is normal in size and echotexture. No focal lesion is seen.

PANCREAS is normal in size and echotexture. Peripancreatic fat planes are clear. MPD is not dilated.

RIGHT KIDNEY: is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

LEFT KIDNEY: is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

URINARY BLADDER is well distended and lumen is echofree. Wall thickness is normal. No evidence of any focal lesion.

PROSTATE: is normal in size.

No free fluid is noted.

IMPRESSION:

- **Cholelithiasis.**

Please correlate clinically.



Dr. Guru

Senior Consultant

Diagnostic & Interventional Radiology

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UID: 19066 Date: 31 Mar 2022
Name/Age/Sex : HEMANT KUMAR PAL 38Y/M / Male
Treating Dr. :

X-RAY CHEST PA VIEW

FINDINGS:

The lungs on the either side show equal translucency.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

Bilateral CP angles are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

IMPRESSION:

No significant abnormality detected.

Suggest clinical correlation and follow up.



Dr. Avinash Rathod (DMRD)
Consultant Radiologist
Reg. No. 2011/05/1616/1616