

UHID

Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)
(Formerly known as Paedia Health Private Limited)
CIN: U85110CT2005PTC017751

Visit ID : 0000304468

Patient Name : MR. JITENDER SINGH Spec No. :

Age / Sex : 40Y / MALE :

Consultant : DR. HOSPITAL CASE Order Date : 11/03/2023 1:04PM

Ref. By : DR. HOSPITAL CASE Samp.Date :

Category : MEDIWHEEL Report Date : 11/03/23 06:36PM

X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.

: 161921

- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

No Remarkable Abnormality Detected .

- Please correlate clinically

Dr. SAMIR KATHALE

MBBS, DNB(RADIO), MNAMS MANBD

Fetal Ultrasound & Fetal Medicine (FGI-BFMC)

Reg No. CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference,



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AGE/SEX

: 161921

: MR. JITENDER SINGH

VISITID ORDER DATE : 0000304468

PATIENT NAME

CONSULTANT DOCTOR

: 40Y/MALE

: 11/03/2023 01:04:00PM

: HOSPITAL CASE

SAMP. DATE

: 11/03/2023 03:54:00PM

SPEC. NO

: 10425476

RESULT DATE

: 11/03/2023 07:54:00PM

RANGE

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LIPID PROFILE

PARAMETER	VALUE	RESULT	REFERENCE !
CHOLESTEROL TOTAL	247 mg / dl	High	150 - 220
TRIGLYCERIDES - SERUM	125 mg / dl	Normal	60 - 165
HDL	60.94 mg / dl	Normal	35 - 80
LDL	161.06 mg/dL	High	90 - 160
VLDL	25.00	Normal	20 - 50
CHOL: HDL Ratio	2.64:1		3.5 - 5.5
LDL: HDL Ratio	0.90:1		. •

TECHNICIAN





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SPEC. NO

: 11/03/2023 03:54:00PM

No commence and the second of the second of

: 10425488

RESULT DATE : 11/03/2023 04:57:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COL	INT)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	14.6 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	4.13 Million/cumm	Low	4.5 - 5.9
HAEMATOCRIT (PCV)	39.4 %	Low	41.5 - 50.4
RBC INDICES			
MCV	95.5 fl	Normal	78 - 96
мсн	35.3 pg	High	27 - 32
MCHC	36.9 %	Normal	33 - 37
RDW	14.1 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	6300 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	60 %	Normal	0 - 75
LYMPHOCYTES	33 %	Normal	22 - 48
EOSINOPHILS	03 %	Normal	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	181000 /cumm	Normal	150000 - 450000

TECHNICIAN

Dr. ANJANA SHARMA DA.B PATHOLOGY



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: 10425486

RESULT DATE

: 11/03/2023 05:10:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"O"		-
RH FACTOR	Positive		-
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	12.6 mg / dl	Normal	8 - 23
GGT (GAMMA GLUTAMYL TRANSFERASE	:)		
GGT (GAMMA GLUTAMYL TRANSFERASE)	14 U / L	Normal	8 - 52
URIC ACID			
URIC ACID	5.58 mg/dL	Normal	3.6 - 7.7

Asharma

Dr. ANJANA SHARMA D.N.B PATHOLOGY

TECHNICIAN

CONSULTANT



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RESULT DATE

: 11/03/2023 07:56:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
CREATININE				
SERUM CREATININE	0.90 mg/dL	Normal	0.3 - 1.5	
URINE SUGAR FASTING				
URINE FOR SUGAR	Nil		- ×	

Wharma

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DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.497 ng/ml

Normal

0 - 4

Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely. Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

Clinical Use

1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.

2) Followup and management of Prostate cancer patients

3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

Note:

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

Dr. ANJANA SHARMA

D.N.B PATHOLOGY

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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10425475

RESULT DATE : 11/03/2023 07:20:00PM

TPA : MEDIWHEEL

SAMP, DATE

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

AGE/SEX

PARAMETER VALUE RESULT REFERENCE RANGE T3 (TRIIODOTHYRONINE) 1.320 ng/ml Normal 0.69 - 2.15T4 (THYROXINE) Normal 52 - 127 74.37 ng/ml TSH (THYROID STIMULATING High 5.326 uIU/ml 0.3 - 4.5HORMONE)

REFERENCE GROUP REFERENCE RANGE in uIU/mL

: 40Y/MALE

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

1st Trimester 0.10- 2.50 2nd Trimester 0.20 - 3.00 3rd Trimester 0.30 - 3.00

Note:

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

0.30 - 4.5

1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

TECHNICIAN

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D.N.B PATHOLOGY
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: 10425487

CONSULTANT DOCTOR

: HOSPITAL CASE

RESULT DATE

: 11/03/2023 07:55:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED **HEAMOGLOBIN**)

5.8 %

Normal

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0

->=6.0 to <=6.5

At risk (Prediabetes) Diagnosing diabetes

- >=6.5

Therapeutic goals for glycemic control

- Age> 19 years

- Goal of therapy: <7.0

- Action suggested: >8.0

- Age < 19 years

- goal of therapy: < 7.5

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appopriate.

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

TECHNICIAN

D.N.B PATHOL CONSULTANT



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CONSULTANT DOCTOR

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SPEC. NO

RESULT DATE

: 11/03/2023 05:51:00PM

RESULT

: MEDIWHEEL

REFERENCE RANGE

: 10425482

DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICROSCOPY **PARAMETER** VALUE

PHYSICAL EXAMINATION **OUANTITY** 10 ml COLOUR Pale Yellow

APPEARANCE REACTION

Clear Acidic

CHEMICAL EXAMINATION

ALBUMIN Nil SUGAR Nil

MICROSCOPIC EXAMINATION

EPITHELIAL CELLS 1-2 /hpf 0 - 5 **PUS CELLS** Occasional /hpf 1 - 2 RBC Nil /hpf CAST Nil /lpf CRYSTAL Nil

Nil

AMORPHOUS MATERIAL DEPOSIT

OTHERS Nil

Dr. ANJANA SWARMA D.N.B PATHOL

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: 11/03/2023 07:56:00PM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO RESULT DATE : 10425480

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	1.48 mg/dL	High	0.1 - 1.2
BILIRUBIN DIRECT	0.49 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.99 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	106 U/L	Normal	0 - 270
SGOT	23 U/L	Normal	10 - 55
SGPT	16 U/L	Normal	0 - 40
TOTAL PROTEIN	7.96 g/dl	Normal	6 - 8
ALBUMIN	4.69 g/dl	Normal	4 - 5
GLOBULIN	3.27 g / dl	Normal	2 - 3.5
A.G.RATIO	1.43:1		1 - 2.5

Sharma

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: 10425489

RESULT DATE : 11/03/2023 06:56:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
ESR	40 mm at end of 1 hr	High	0 - 15	***

Dr. ANJANA SHARMA D.N.B PATHOLOGY

TECHNICIAN

CONSULTANT

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

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