

एक एहशाश क्षपनेपन का Sparsh Multispecialty Hospital

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

CIN: U85110CT2005PTC017751 GSTIN/UIN: 22AADCP8009N2Z9

UHID : 161653 Visit ID

: 0000303842

Patient Name : MR. BINAY KUMAR VERMA

Spec No.

Age / Sex Consultant : 40Y / MALE

: MEDIWHEEL

Order Date

: 27/01/2024 10:33AM

Ref. By

: DR. HOSPITAL CASE

Samp.Date

Category

. DR. HOSPITAL CASE

Report Date

: 27/01/24 10:57AM

SONOGRAPHY **USG WHOLE ABDOMEN**

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION:

Fatty Liver.

Please correlate clinically, followup USG is recommended.

LIP KUMAR SONI MBBS, DMRD CGMC 102/2003

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

^{*} LIVER : Normal in size and shape. Diffuse increase in echogenecity seen - Suggestive of fatty infiltration. IHBRs are not dilated. No focal lesions seen.

^{*}PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.

^{*}COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.

^{*}GALL BLADDER: Seen in distended state with normal wall and lumen is echofree

^{*}SPLEEN:Normal in size, shape & echo texture. No focal lesions seen.

^{*}PANCREAS:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.

^{*}KIDNEYS: Both kidneys are of normal shape, size and position.

^{*}URINARY BLADDER: Seen in distended state and has normal wall architecture. Lumen is echo free.

^{*}PROSTATE:Normal in shape, size and echotexture.No median lobe bulge is seen.



UHID

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: 40Y / MALE

Consultant : DR. HOSPITAL CASE Order Date : 27/01/2024 10:33AM

: DR. HOSPITAL CASE Ref. By Samp.Date

Category : MEDIWHEEL Report Date : 27/01/24 02:04PM

X-RAY X-RAY CHEST PA. VIEW

- Bibasal mild vascular congestion is noted Needs further revaluation.
- Cardiothoracic ratio is within normal limits.
- Bilateral C.P. angles are clear.

: 161653

Bony cage and soft tissue normal.

- Please correlate clinically, Followup radiograph is recommended.

Dr. SAMIR KATHALE MBBS, DNB(RADIO), MNAMS, MANBD Reg No: CGMC-4404/2012

: 0000303842

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CIN: U85110CT2005PTC017751 GSTIN/UIN: 22AADCP8009N2Z9



UHID

: 161653

. 101055

VISITID

: 0000303842

PATIENT NAME

CONSULTANT DOCTOR

: HOSPITAL CASE

: MR. BINAY KUMAR VERMA

ORDER DATE

: 27/01/2024 10:33:00

AGE/SEX : 40Y/MALE

SAMP. DATE

: 27/01/2024 12:56:00

SPEC. NO

: 10495941

RESULT DATE

: 27/01/2024 15:13:00

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COUNT)			
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	14.9 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	4.83 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	42.5 %	Normal	41.5 - 50.4
RBC INDICES			
MCV	88.0 fl	Normal	78 - 96
MCH	30.9 pg	Normal	27 - 32
MCHC	35.2 %	Normal	33 - 37
RDW	13.1 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	5300 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	54 %	Normal	0 - 75
LYMPHOCYTES	38 % .	Normal	22 - 48
EOSINOPHILS	02 %	Normal	0 - 6
MONOCYTES	06 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	154000 /cumm	Normal	150000 - 450000

TECHNICIAN

Dr. AVISHESH SINGH MD PATH CONSULTANT



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PATIENT NAME

: MR. BINAY KUMAR VERMA

: 27/01/2024 10:33:00

AGE/SEX

: 40Y/MALE

: 27/01/2024 12:56:00

CONSULTANT DOCTOR

SPEC. NO : 10495939

: HOSPITAL CASE

: 27/01/2024 14:25:00 **RESULT DATE**

TPA

VISITID

ORDER DATE

SAMP. DATE

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUPING AND RH TYPIN	G		
BLOOD GROUP	"A"		
RH FACTOR	Positive		- (-
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	10.28 mg / dl	Normal	8 - 23
CREATININE			
SERUM CREATININE	1.06 mg/dL	Normal	0.3 - 1.5
GGT (GAMMA GLUTAMYL TRANSFE	ERASE)		
GGT (GAMMA GLUTAMYL TRANSFERASE)	21 U/L	Normal	8 - 52
LIPID PROFILE			
CHOLESTEROL TOTAL	287 mg / dl	High	150 - 220
TRIGLYCERIDES - SERUM	166 mg / dl	High	60 - 165
HDL	51.78 mg / dl	Normal	35 - 80
LDL	202.02 mg/dL	High	90 - 160
VLDL	33.20	Normal	20 - 50
CHOL: HDL Ratio	5.54:1		3.5 - 5.5
LDL: HDL Ratio	3.90:1		•
URIC ACID			
URIC ACID	5.88 mg/dL	Normal	3.6 - 7.7

TECHNICIAN

Dr. AVISHESH SINGH MD



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AGE/SEX

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VISITID

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: 27/01/2024 10:33:00

ORDER DATE SAMP. DATE

: 27/01/2024 12:56:00

SPEC. NO

: 10495932

RESULT DATE

: 27/01/2024 16:15:00

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.943 ng/ml

Normal

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.

- 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.

TECHNICIAN

Dr. AVISHESH SINGH MD

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UHID

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PATIENT NAME

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AGE/SEX

: 40Y/MALE

CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

: 0000303842

ORDER DATE

: 27/01/2024 10:33:00

SAMP. DATE

: 27/01/2024 12:56:00

SPEC. NO

TPA

: 10495934

RESULT DATE

: 27/01/2024 16:31:00

255

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
BLOOD SUGAR - FASTING AND PP				
BLOOD SUGAR FASTING	102 mg/dL	Normal	80 - 120	
BLOOD SUGAR PP	123 mg/dL	Normal	120 - 140	
URINE SUGAR FASTING				
URINE FOR SUGAR	Nil			
URINE SUGAR PP				
URINE FOR SUGAR	Nil		-	

Dr. AVISHESH SINGH MD

PATH.

CONSULTANT

TECHNICIAN



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UHID : 161653 VISITID : 0000303842

: 27/01/2024 10:33:00 PATIENT NAME : MR. BINAY KUMAR VERMA ORDER DATE

: 27/01/2024 12:56:00 SAMP. DATE AGE/SEX : 40Y/MALE

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10495930

> **RESULT DATE** : 27/01/2024 16:15:00

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER VALUE RESULT REFERENCE RANGE T3 (TRIIODOTHYRONINE) Normal 1.320 ng/ml 0.69 - 2.15T4 (THYROXINE) 83.59 ng/ml Normal 52 - 127 TSH (THYROID STIMULATING 2.211 uIU/ml Normal 0.3 - 4.5HORMONE)

REFERENCE GROUP

REFERENCE RANGE in uIU/mL

0.30 - 4.5

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

1st Trimester 0.10-2.50 2nd Trimester 0.20 - 3.003rd 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.
- 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

Dr. AVISHESH SINGH MD

PATHIN

TECHNICIAN



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UHID

: 161653

: MR. BINAY KUMAR VERMA

ORDER DATE

VISITID

: 0000303842 : 27/01/2024 10:33:00

AGE/SEX

PATIENT NAME

: 40Y/MALE

SAMP. DATE

: 27/01/2024 12:56:00

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

RESULT DATE

: 10495940

: 27/01/2024 15:05:00

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED **HEAMOGLOBIN**)

6.2 %

High

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0At risk (Prediabetes)

->=6.0 to <=6.5

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

Note:

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.

Comments

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.

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PATIENT NAME : MR. BINAY KUMAR VERMA

AGE/SEX : 40Y/MALE

CONSULTANT DOCTOR : HOSPITAL CASE

VISITID : 0000303842

ORDER DATE : 27/01/2024 10:33:00

SAMP. DATE : 27/01/2024 12:56:00

SPEC. NO : 10495935

RESULT DATE : 27/01/2024 15:16:00

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PHYSICAL EXAMINATION			
QUANTITY	10 ml		
COLOUR	Straw		
APPEARANCE	Clear		
REACTION	Acidic		
REACTION	Acidic		
CHEMICAL EXAMINATION			
ALBUMIN	Nil		
SUGAR	Nil		
MICROSCOPIC EXAMINATION			
EPITHELIAL CELLS	1-2 /hpf		0 - 5
PUS CELLS	Nil /hpf		1 - 2
RBC	Nil /hpf		-
CAST	Nil /lpf		
CRYSTAL	Nil		
AMORPHOUS MATERIAL DEPOSIT	Nil		
OTHERS	Nil		

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ORDER DATE : 27/01/2024 10:33:00

SAMP. DATE : 27/01/2024 12:56:00

SPEC. NO : 10495933

RESULT DATE : 27/01/2024 15:05:00

AVISHESH SINGH MD

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)			
PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.63 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.16 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.47 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	101 U/L	Normal	0 - 270
SGOT	27 U/L	Normal	10 - 55
SGPT	48 U/L	High	0 - 40
TOTAL PROTEIN	7.83 g/dl	Normal	6 - 8
ALBUMIN	4.98 g/dl	Normal	4 - 5
GLOBULIN	2.85 g/dl	Normal	2 - 3.5
A.G.RATIO	1.74:1		1 - 2.5

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SPEC. NO

: 10495942

CONSULTANT DOCTOR : HOSPITAL CASE

RESULT DATE : 27/01/2024 16:31:00

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	15 mm at end of 1 hr	Normal	0 - 15

PATHCISIA

TECHNICIAN