



## DEPARTMENT OF BIOCHEMISTRY

<b>Patient Name</b> :	Mr. MOHAN	<b>Bill Date</b> :	26/08/2023
<b>MR No</b> :	27051	<b>Reporting Date</b> :	26/08/2023
<b>Age/Sex</b> :	33 Years / Male	<b>Sample ID</b> :	163671
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	23310421
<b>TPA/Corporate</b> :	MEDIWHEEL	<b>Ref Doctor</b> :	Dr. Chand Kishore
<b>IP No.</b> :			
<b>Current Bed no.</b> :			

Test	Result	Bio. Ref. Interval	Units
<b>BLOOD GLUCOSE FASTING AND PP</b>			
PLASMA GLUCOSE(FASTING)	<b>112</b> <i>H</i>	70 - 110	mg/dl

### BLOOD GROUP

BLOOD GROUP	" O " RH POSITIVE
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### COMPLETE HAEMOGRAM

#### CBC

HAEMOGLOBIN	15.7		12.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT	8200		4000 - 11000	/cumm
RED BLOOD CELL COUNT	5.29		4.0 - 6.0	millions/cumm
PCV (HAEMATOCRIT)	48.9		40.0 - 54.0	%
MEAN CORPUSCULAR VOLUME	92.4		78 - 98	fL
MEAN CORPUSCULAR HAEMOGLOBIN	29.7		26.5 - 32.5	Picogrames
MEAN CORPUSCULAR HB CONC	32.1		32 - 37	g/dL
PLATELET COUNT	2.22		1.50 - 4.50	Lakh/cumm
NEUTROPHILS	50		40 - 73.0	%
LYMPHOCYTES	<b>42</b>	<i>H</i>	20 - 40	%
EOSINOPHILS	03		0.0 - 6.0	%
MONOCYTES	05		2.0 - 10.0	%
BASOPHILS	00		0.0 - 1.0	%
ABSOLUTE NEUTROPHIL	4100		2000 - 7000	cells/cumm
ABSOLUTE LYMPHOCYTE	<b>3444</b>	<i>H</i>	1000 - 3000	cells/cumm
ABSOLUTE EOSINOPHIL	246		20 - 500	cells/cumm
ABSOLUTE MONOCYTES	410		200 - 1000	cells/cumm
ABSOLUTE BASOPHILS	<b>0</b>	<i>L</i>	20 - 100	cells/cumm
RDW-CV	12.6		11.5 - 14.5	%

Checked By : *Pradip*



**Dr. Pradip Kumar**  
(Consultant Microbiologist)

**Dr. Nisha Rana**  
(Consultant Pathologist)



## DEPARTMENT OF HAEMATOLOGY

<b>Patient Name</b> :	Mr. MOHAN	<b>Bill Date</b> :	26/08/2023
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<b>IP No.</b> :			
<b>Current Bed no.</b> :			

Test	Result	Bio. Ref. Interval	Units
E.S.R.	10	0 - 15	mm/hr

### HBA1C

HBA1C	<b>8.4</b>	<i>H</i>	%
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**Note :** HBA1c result is suggestive of Diabetes/ higher than glycemic goal in a known Diabetic patient.  
 Please note, glycemic goal should be individualized based on duration of diabetes, age/life expectancy, comorbid conditions, known CVD or advanced microvascular complications, hypoglycaemia unawareness, and individual patient considerations.  
 Please Correlate Clinically.

### KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

SERUM UREA	23	13.0 - 45.0	mg/dL
SERUM CREATININE	1.0	0.5 - 1.4	mg/dL
SERUM URIC ACID	4.8	3.6 - 7.2	mg/dL
SERUM SODIUM	134	130 - 149	mmol/L
SERUM POTASSIUM	4.2	3.5 - 5.5	mmol/L

### LFT(LIVER FUNCTION TEST)

<b>LFT</b>			
TOTAL BILIRUBIN	0.7	0.1 - 1.2	mg/dL
DIRECT BILIRUBIN	0.3	0.00 - 0.30	mg/dL
INDIRECT BILIRUBIN	0.4	Adult: 0 - 0.8	mg/dL
SGOT (AST)	<b>79</b>	<i>H</i> 0.0 - 45	IU/L
SGPT (ALT)	<b>176</b>	<i>H</i> 00 - 45.00	IU/L
ALP	98	41 - 137	U/L
TOTAL PROTEINS	6.7	6.0 - 8.2	g/dL
ALBUMIN	4.4	3.20 - 5.00	g/dL

Checked By :

*Pradip Kumar*



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## DEPARTMENT OF BIOCHEMISTRY

**Patient Name** : Mr. MOHAN  
**MR No** : 27051  
**Age/Sex** : 33 Years / Male  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL  
**IP No.** :  
**Current Bed no.** :

**Bill Date** : 26/08/2023  
**Reporting Date** : 26/08/2023  
**Sample ID** : 163671  
**Bill/Req. No.** : 23310421  
**Ref Doctor** : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
GLOBULIN	2.3	2.0 - 3.50	g/dL
A/G RATIO	1.91		

## LIPID PROFILE

Test	Result	Ref. Interval	Units
<b>LIPID PROFILE</b>			
SERUM CHOLESTROL	196	0 - 200	mg/dl
SERUM TRIGLYCERIDES	102	Up to 150	mg/dl
HDL CHOLESTEROL	38	30 - 60	mg/dl
VLDL CHOLESTEROL	20.4	*Less than 30	mg/dL
LDL CHOLESTEROL	137.6	Optimal <100, Above Opt. 100-129 -high 160-189	mg/dl
LDL CHOLESTEROL/HDL RATIO	3.62	Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0	

## URINE ROUTINE EXAMINATION

### PHYSICAL EXAMINATION

VOLUME	15		ml
COLOUR	Pale Yellow	Pale Yellow	
APPEARANCE	Clear	Clear	
SPECIFIC GRAVITY	1.020		

### CHEMICAL EXAMINATION

REACTION	Acidic		
BLOOD	NIL		
ALBUMIN	NIL	NIL	
GLUCOSE	NIL	NIL	
PH	6.5		

### MICROSCOPIC EXAMINATION

PUS CELL	2-3	2-4	/HPF
RED BLOOD CELLS	Nil	NIL	/HPF

Checked By : *Mayer*



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(Consultant Microbiologist)

**Dr. Nisha Rana**  
(Consultant Pathologist)



## DEPARTMENT OF CLINICAL PATHOLOGY

**Patient Name** : Mr. MOHAN  
**MR No** : 27051  
**Age/Sex** : 33 Years / Male  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL  
**IP No.** :  
**Current Bed no.** :  
**Bill Date** : 26/08/2023  
**Reporting Date** : 26/08/2023  
**Sample ID** : 163671  
**Bill/Req. No.** : 23310421  
**Ref Doctor** : Dr. Chand Kishore

Test	Result	Bio. Ref. Interval	Units
EPITHELIAL CELLS	1-2	2-4	/HPF
CASTS	NIL	NIL	
CRYSTALS	NIL	NIL	

**Note** : Albumin test positive by Multistrip Method is confirmed by Sulphosalicylic acid method.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*

Checked By : *Mayer*



**Dr. Pradip Kumar**  
(Consultant Microbiologist)

**Dr. Nisha Rana**  
(Consultant Pathologist)



# Prognosis Laboratories

National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-110075

8130192290 www.prlworld.com care@prlworld.com

<b>Lab No.</b>	012308260823	<b>Age/Gender</b>	33 YRS/MALE	<b>Coll. On</b>	26/Aug/2023 06:38PM
<b>Name</b>	Mr. MOHAN 27051			<b>Reg. On</b>	26/Aug/2023
<b>Ref. Dr.</b>	NIDAAN PARK HOSPITAL			<b>Approved On</b>	26/Aug/2023 08:21PM
<b>Rpt. Centre</b>	Dr. OTHER			<b>Printed On</b>	07/Sep/2023 05:26PM

Test Name	Value	Unit	Biological Reference Interval
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### Thyroid profile, Total (T3,T4,TSH)

T3 (Triiodothyronine) , serum Method : ECLIA	1.81	ng/mL	0.80 - 2.0
T4 (Thyroxine) , serum Method : ECLIA	8.54	ug/dL	5.1 - 14.1
TSH (Thyroid Stimulating Hormone) , serum Method : ECLIA	1.55	uIU/ml	0.27 - 4.2

#### Interpretation:

- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values alongwith depressed TSH levels
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- High T3 levels coupled with normal T4 and suppressed TSH may be seen in T3 toxicosis.

**Note:** Total T3 and total T4 are highly bound to plasma proteins and are amenable to fluctuations with plasma protein content as well as due to binding defects in the thyroid hormone binding proteins.

**The following ranges are recommended for pregnant females:**

Gcstation period	TSH (uIU/ml)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

**\*Disclaimer:** This is an electronically validated report, if any discrepancy found should be confirmed by user.

\*\*\* End Of Report \*\*\*



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Consultant Pathologist

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Lab Director

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MBBS,MD (Pathology)  
Consultant Pathologist

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# Nidaan Hospital



Patient Id 27051 Name MOHAN 33Y Accession No  
Study Date 26-Aug-2023 Age - Gender Female

## CHEST X RAY (PA VIEW)

### OBSERVATION:

Both lung fields appears normal.  
Both costo-phrenic angles appear clear.  
Cardiothoracic ratio is normal.  
Both domes of diaphragm appear normal.  
Thoracic soft tissue and skeletal system appear unremarkable.

### IMPRESSION:

- No Significant abnormality is noted.

ADVICE: Please Correlate Clinically.

*This Report is not valid for any medico legal purpose. This report is prepared on the basis of digital DICOM images transmitted via internet without identification of patient, not on the films or plates provided to the patient.*

Disclaimer: -It is an online interpretation of medical image based on clinical data. It is subject to the limitations of their own limitation. If there is any clinical discrepancy, this investigation may be repeated or re-evaluated. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.

*Prashant*



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

the **health** care providers

the **health** care providers



## DEPARTMENT OF RADIOLOGY

Patient Name	Mr MOHAN	Billed Date	: 26/08/2023	9.22 AM
Reg No	27051	Reported Date	: 26/08/2023	
Age/Sex	33 Years 7 Months 26Days / Male	Req. No.	: 23310421	
Ref. Doctor	Self	Consultant Doctor	: Dr. Chand Kishore	
Type	OPD			

## USG WHOLE ABDOMEN/KUB

### FINDINGS:

**LIVER** is normal in size (14.8 cm) and **shows grade I fatty infiltration**. No evidence of any focal lesion or IHBR dilation is present. Portal and hepatic veins are normal in caliber at porta.

**GALL BLADDER** is partially distended.  
**CBD** is normal in course and caliber.

**SPLEEN** is mildly enlarged in size (12.4 cm).

**PANCREAS:** Head and body of pancreas are normal in size and echotexture. Tail of pancreas is obscured by bowel gas shadows.

**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 minimally distended.

**PROSTATE** is normal in size [vol: ~ 12 cc]. It has normal echotexture.

No free fluid is seen in the abdomen.

### IMPRESSION:

- Grade I fatty liver
- Mild splenomegaly

To be correlate clinically

