

PANCHMUKHI HOSPITAL

Dr C P Dadhaniya

Dr R C Dadhaniya

MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639, 8320711901

policy number :
 full name : TRIVEDI DILIP
 identity proof : Aadhar card
 identity proof no : 7707
 gender : male
 height : 175
 weight : 60 kg
 B P : 120/82
 pluse : 64/min *regulated*
 blood sample : YES
 fasting mode : YES
 non fasting mode : YES

 past history : NO

D.S Trivedi

DR. C. P. DADHANIYA

CP
 M.B. Diabetologist
 Ind. Physician (G.O)

Regd. No. G1

Code No. 378

Panchmukhi Hospital

Mavdi Chowki,

150 Ft. Ring Road, RAJKOT.



NAME : Tøive di dilip
AGE/GENDER: male 15y

DIAG. DATE: 23/09/23

PATIENT'S REFRACTION DETAILS

		SPHE	CYL	AXIS	VN
R	D	N	N	N	6/6
	N	N			6/6
L	D	N	N	N	6/6
	N	N			6/6

REMARKS :

CHECKED BY : Dr. C.P. Dadhaniya

X D.S. Tøive di

DR. C. P. DADHANIYA

M.B. Diabetologist
Ind. Physician (CIH)

Regd. No. G1

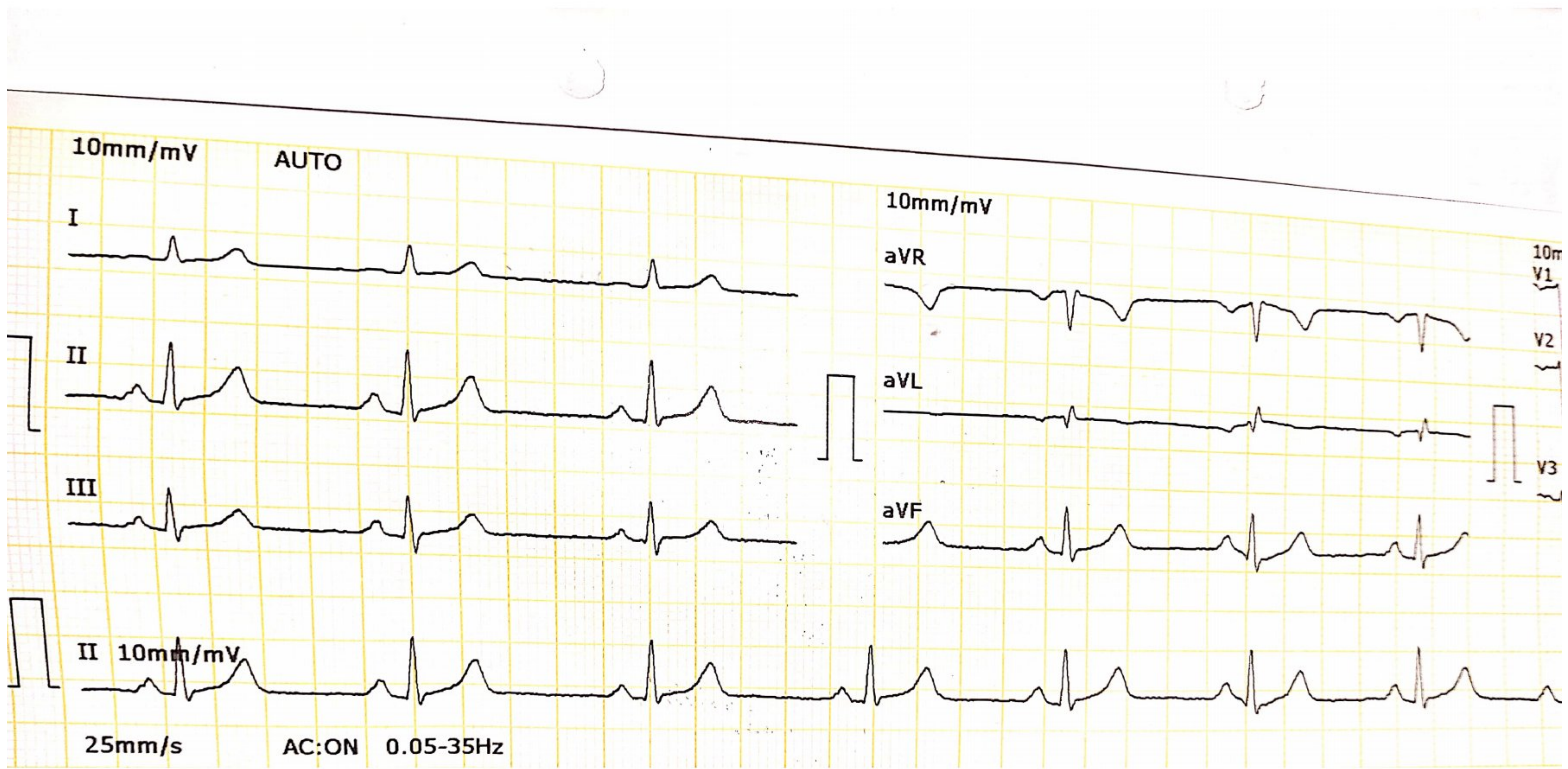
Code No. 37

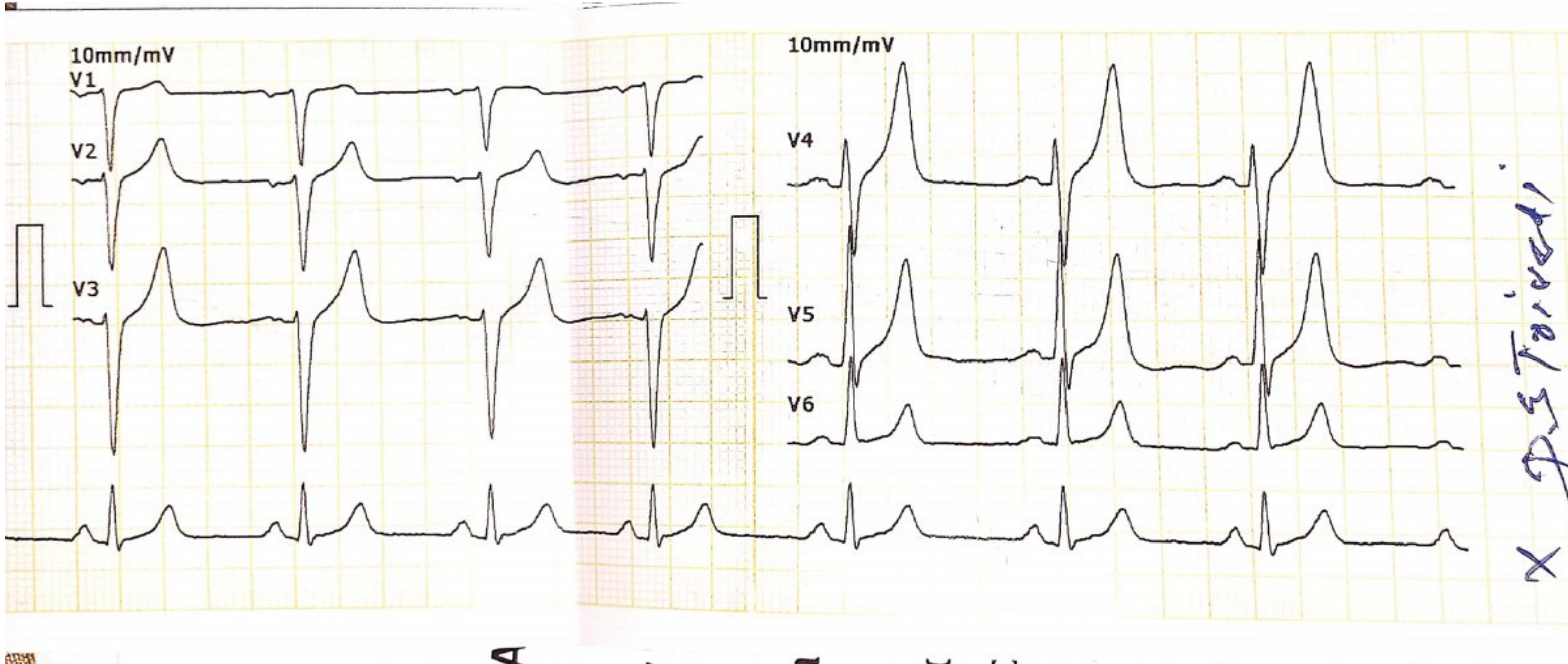
Panchmukhi Hospital

Mavdi Chowki,

150 Ft. Ring Road, RAJKOT.







2023-9-23 10:31:24 ID: 00003437
 ID Card: _____
 Name: Trivedi Dilip Gender: male
 Age: 54 Height(cm): _____
 Weight(Kg): _____ BP(mmHg): 1

HR.....bpm 63
 P-R.....136
 Q-R-S.....110
 QT/QTc.....Ind: Physician-(CIN) 403/410
 P/QRS/T AXES.....Reg: No. 619798 83/58/67
 RV5/SV1.....Coa: No. 378943 1.49/0.86
 RV5-T.....mV 2.35
 *The result must be confirmed by doctor!
 Report confirmed by Ring Road, RAJKOT.

X P. Trivedi



भारत सरकार

GOVERNMENT OF INDIA



त्रिवेदी दिलीप

Trivedi Dilip

जन्म वर्ष / Year of Birth : 1969

पुरुष / Male

3047 5080 7707



आधार — आम आदमी का अधिकार



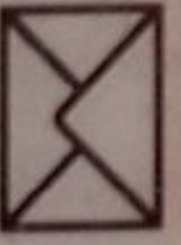
भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता: S/O शांतिलाल, ड-३१, अलाप
ग्रीन सिटी, वासवानी रोड, रैया रोड,
राजकोट, गुजरात, 360005

Address: S/O Shantilal, d-31, Alap
Green city, Vasvani road, Raiya
road, Rajkot, Gujarat, 360005



1947
1800 180 1947



help@uidai.gov.in

WWW

www.uidai.gov.in



P.O. Box No.1947,
Bengaluru-560 001





*Mediwheel trivedi
dilip*

 **GPS Map**
Camera Lite

1/13 udaynagar B/h indraprasht hall, Mavdi Main
Road, Poonam Society, Chandreshnagar, Rajkot, Gujarat
360004, India

Latitude

22.2661111°

Longitude

70.7846792°

Local 05:02:34 PM

GMT 11:32:34 AM

Altitude 146 meters

Saturday, 23.09.2023



Scanned with OKEN Scanner

Scanned with OKEN Scanner





TRIVEDI DILIP 25YM CHEST PA 23-Sep-23
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)



Pat.s' Name: TRIVEDI DILIP

DATE: 23 September 2023

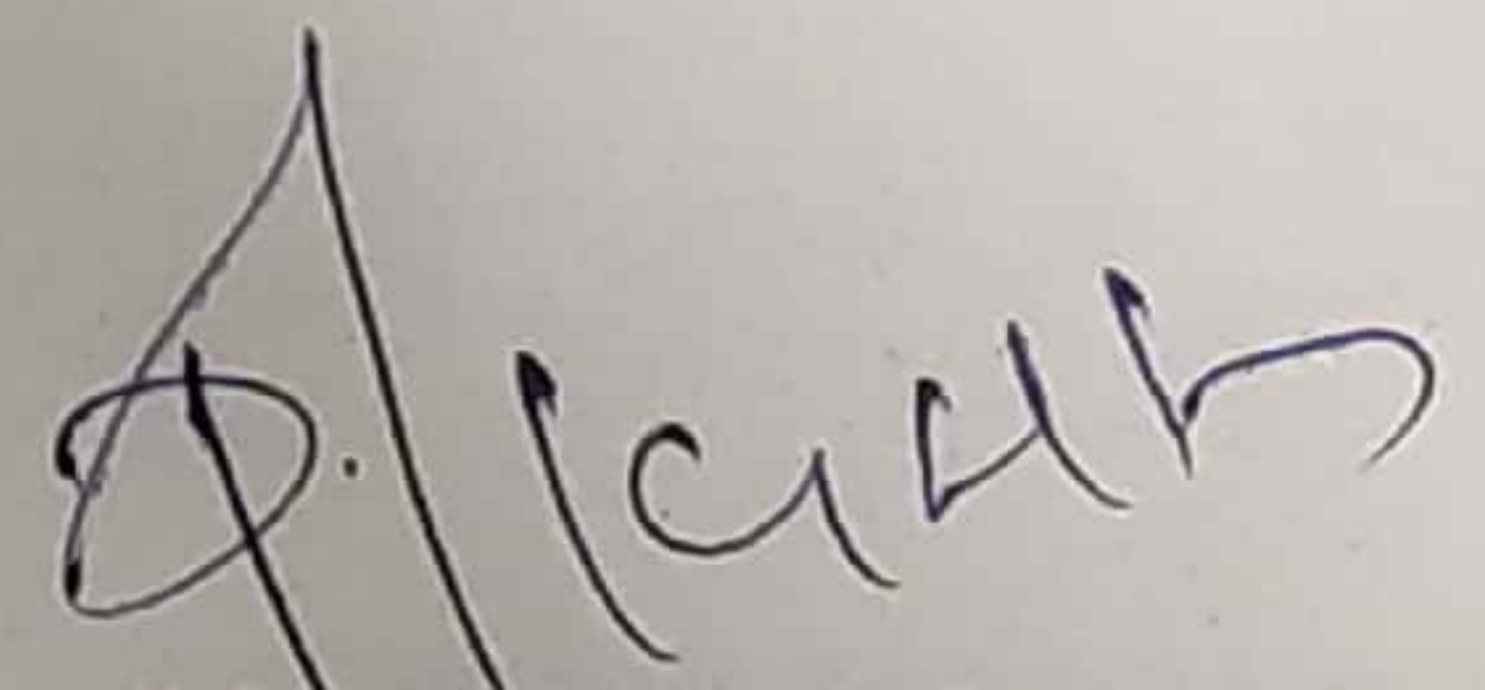
U.S.G. OF ABDOMEN AND PELVIS

- **LIVER:** is normal size and shows normal parenchymal echotexture. No focal lesion noted. Intrahepatic billiary radicals appear normal. C.B.D and portal vein appears normal in calibre.
- **GALL BLADDER:** Well distended and appears normal. No evidence of gallstone or changes of cholecystitis.
- **PANCREAS:** appears normal in size, shape, echogenicity and echotexture. No focal lesion noted. No e/o peripancreatic fluid collection.
- **SPLEEN:** normal in size, shape, echogenicity and echotexture. No focal lesion noted.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No e/o calculi or hydronephrosis on either side.
- **URINARY BLADDER:** Minimally distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **PROSTATE:** is borderline enlarged in size (volume 22 cc), shape and echogenicity. No focal lesion.
- Visualised bowel loops show no evident abnormality. No e/o lymphadenopathy. RIF/ LIF CLEAR. Bilateral C-P angels clear.

CONCLUSION:

- **No significant abnormality seen in present study.**

Thanks for reference.



DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

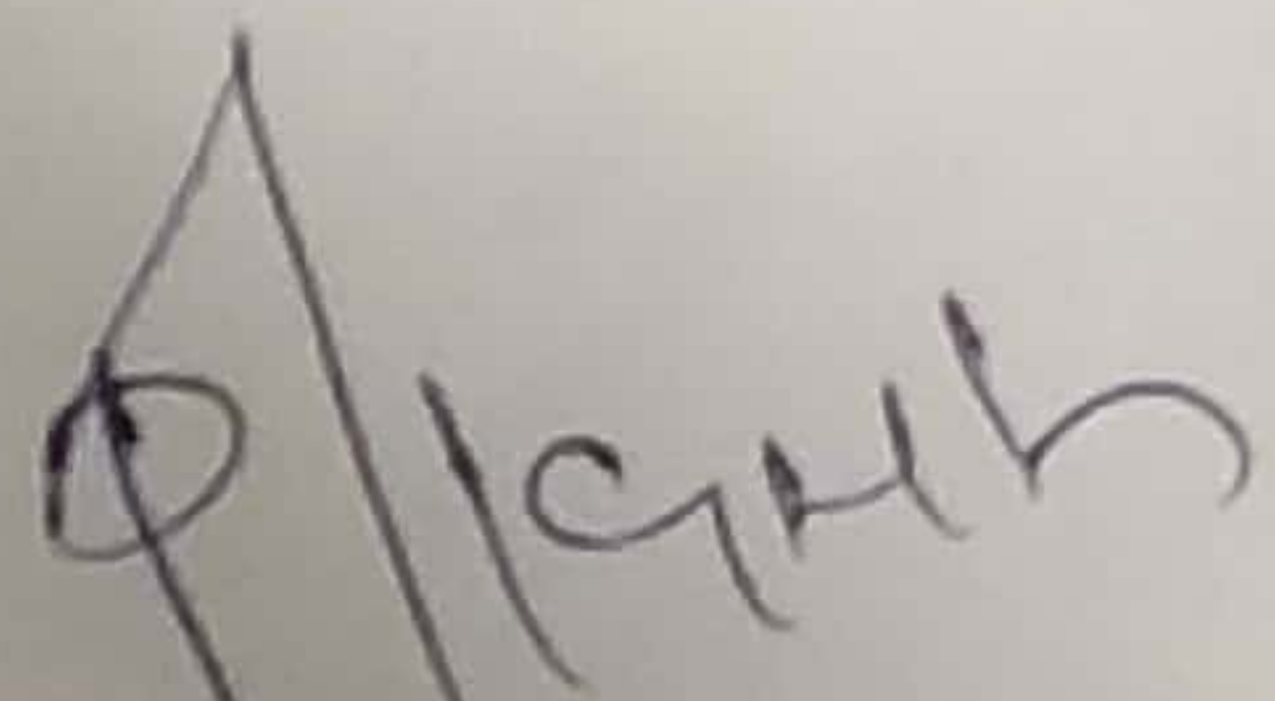
Pt.'s Name: TRIVEDI DILIP

Date: 23 September, 2023

Radiograph of chest (PA view)

- *Both the lung fields are clear.*
- *No e/o consolidation, cavitations or collapse.*
- *Both the hila appears normal*
- *Both costophrenic angles appear clear.*
- *Both domes of diaphragm appear normal.*
- *Cardiac size is within normal limit.*
- *Bones underview reveals no evident abnormality.*

Thanks for reference.



DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

Tread Mill Test

Patient Name	:	Dilip Trivedi	Age	:	54yrs/M
OPD/IPD	:	OPD	ID. No.	:	
Ref. By	:	Dr. C.P.Dadhaniya	Resting BP	:	130/80
Report Date	:	23/09/2023	Max. BP	:	160/80

Patient Reaches exercise limit at 7.00 METS.

No signs of ischemia at the exercise level and during recovery phase.

Adequate increase of HR & BP.


No significant Arrhythmia.

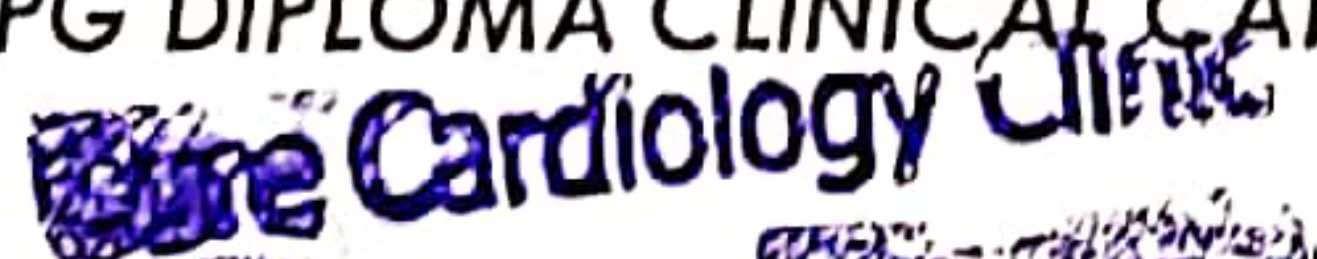

The stress test was terminated after 5:59 minutes as patient complained of Fatigue.
Patient achieved 97% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.


DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY



Partner

DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

CURE CARDIOLOGY CLINIC

2nd floor, Kansagra Hospital, Astron Chowk, Sardarnagar main road, RAJKOT - 360 001. Ph. 0281-2483799, M. 93 13 12 19 87

CURE CARDIOLOGY CLINIC

24175 / DILIP TRIVEDI

54 Yrs / Male

54 Yrs / Male

23-Sep-2023 12:40:48 PM

(X) P.S. Fairly

Protocol : BRUCE

Objective :

History :

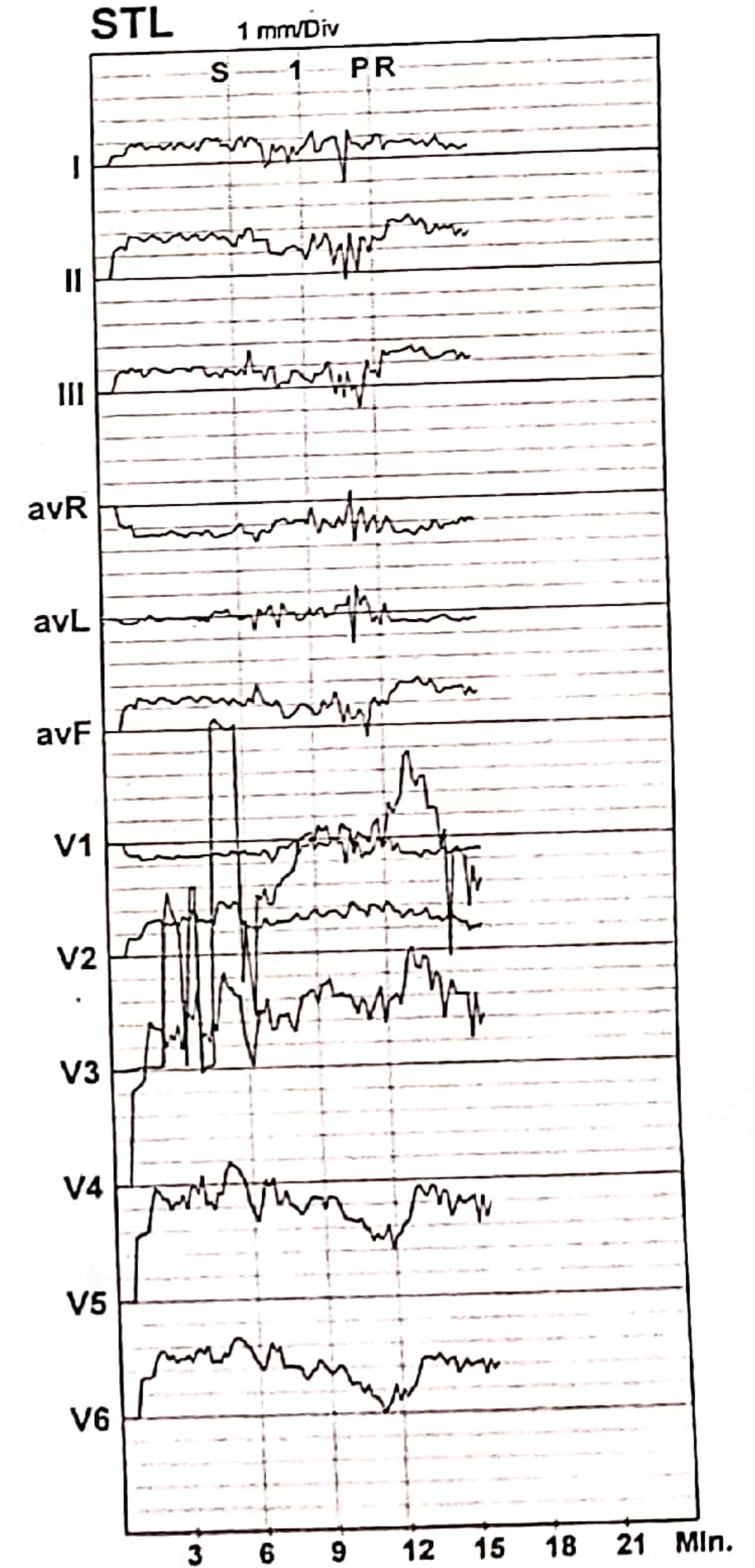
Medication :
Ref. By : DR C P DADHANIYA

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	91	130/80	118	9	
Standing					1.0	91	130/80	118	-	
HV					1.0	93	130/80	120	-	
ExStart					1.0	98	130/80	127	-	
Stage 1	3:00	3:01	4.3	10.0	4.6	130	140/80	182	-	
PeakEx	3:00	5:59	6.4	12.0	7.0	155	160/80	248	-	
Recovery	1:00		0.0	0.0	1.0	118	160/80	188	-	
Recovery	2:00		0.0	0.0	1.0	98	150/80	147	-	
Recovery	3:00		0.0	0.0	1.0	90	140/80	126	-	
Recovery	4:00		0.0	0.0	1.0	86	140/80	120	1	
Recovery	4:01		0.0	0.0	1.0	87	140/80	121	-	

Findings :

Exercise Time : 5:59 minutes
 Max HR attained : 161 bpm 97% of Target 166
 Max BP : 160/80(mmHg)
 Max WorkLoad attained : 7 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.

Summary



Advice/Comments:

CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 24175 / DILIP TRIVEDI
 54 Yrs / Male
 0 Kg / 0 Cm/
 Date: 23-Sep-2023 12:40:48 PM

HR: 91 bpm
 METS: 1.0
 BP: 130/80

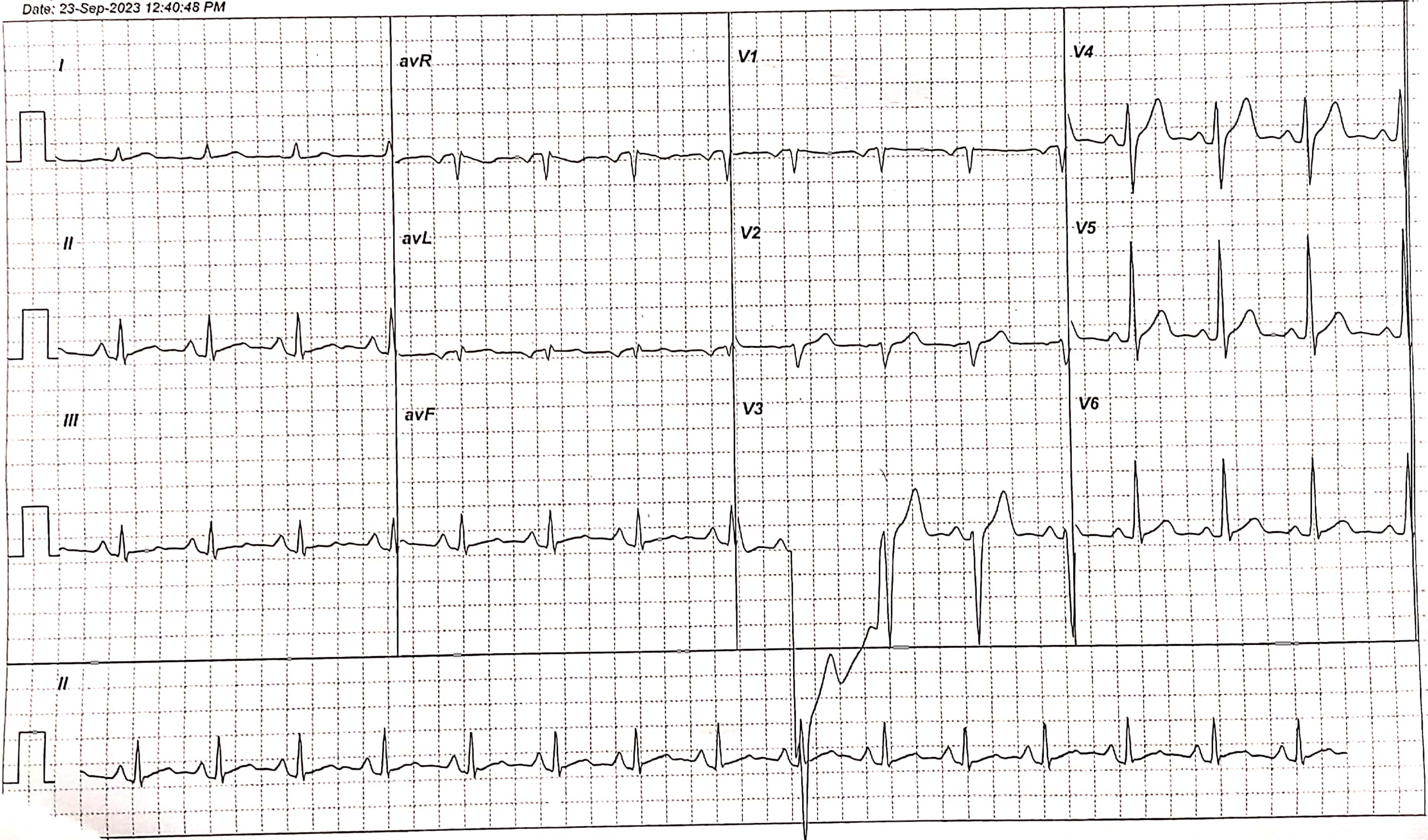
Tgt HR: 54% of 166
 Speed: 0.0 mph,
 Grade: 0.0%

Raw ECG
 Protocol: BRUCE
 (0.05-100)Hz

ⓧ DSTarved 13x4+1 Rhythm Lead

Ex Time 05:35
 BLC : On
 Notch : On

Supine
 1.0 Cm/mV
 25 mm/Sec.



CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 24175 / DILIP TRIVEDI
 54 Yrs / Male
 0 Kg / 0 Cm/
 Date: 23-Sep-2023 12:40:48 PM

HR: 91 bpm
 METS: 1.0
 BP: 130/80

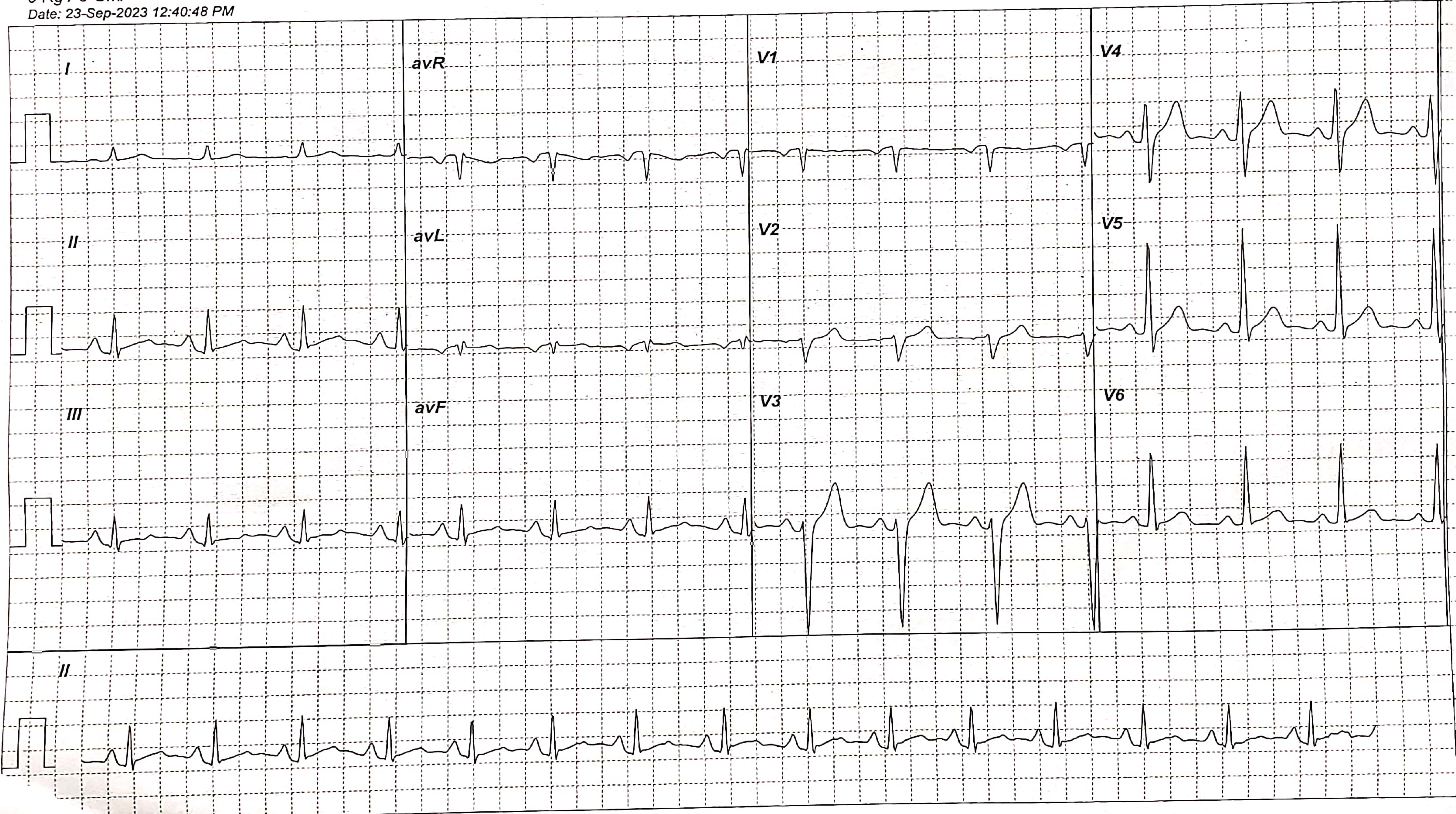
Trgt HR: 54% of 166
 Speed: 0.0 mph,
 Grade: 0.0%

Raw ECG
 Protocol: BRUCE
 (0.05-100)Hz

Ex Time 05:39
 BLC : On
 Notch : On

3x4+1 Rhythm Lead

Standing
 1.0 Cm/mV
 25 mm/Sec.



24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM

HR: 93 bpm
METS: 1.0
BP: 130/80

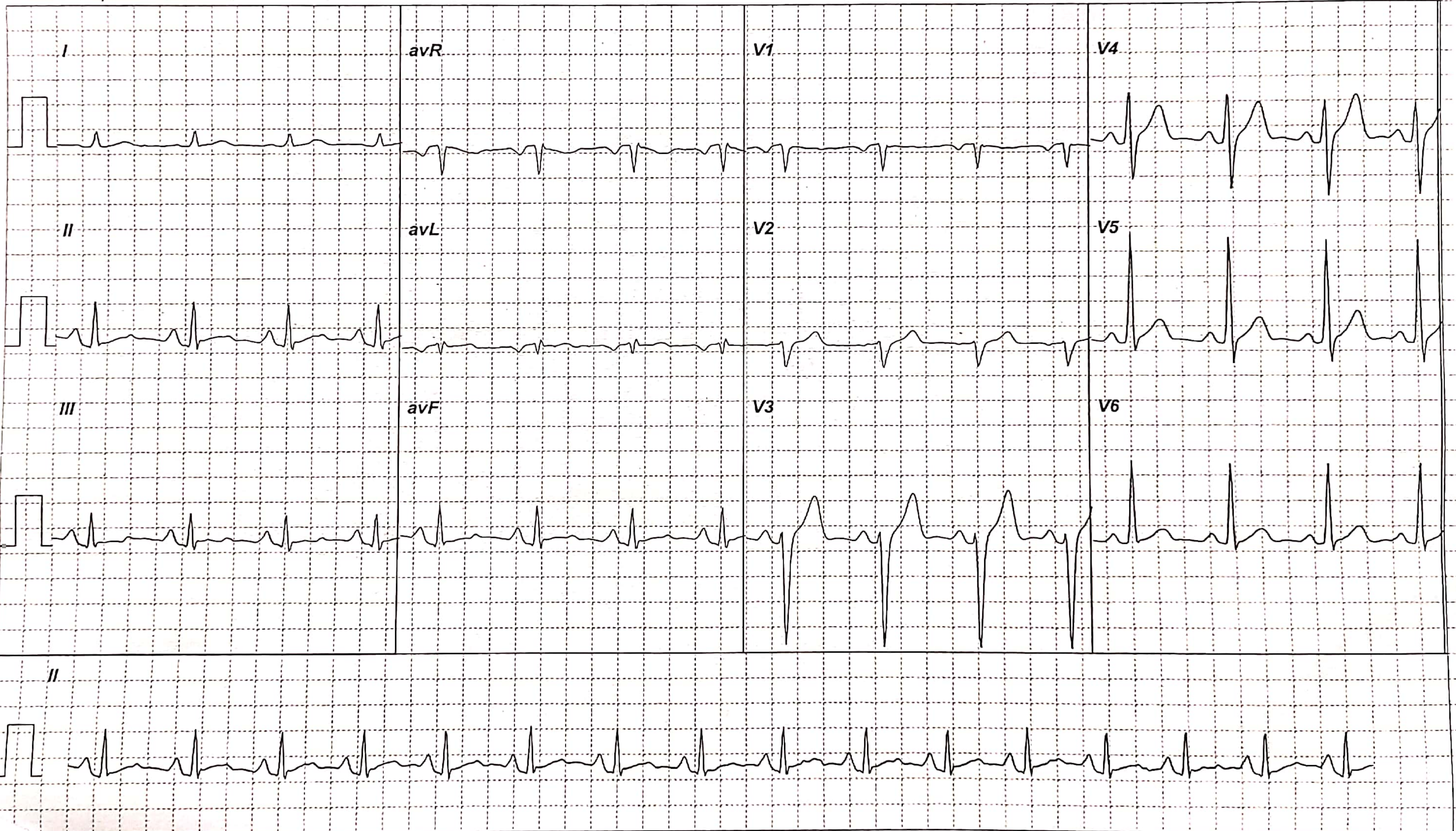
Trgt HR: 56% of 166
Speed: 0.0 mph,
Grade: 0.0%

Raw ECG
Protocol: BRUCE
(0.05-100)Hz

Ex Time 05:43
BLC : On
Notch : On

3x4+1 Rhythm Lead

HV
1.0 Cm/mV
25 mm/Sec.



CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM

HR: 130 bpm
METS: 4.6
BP: 140/80

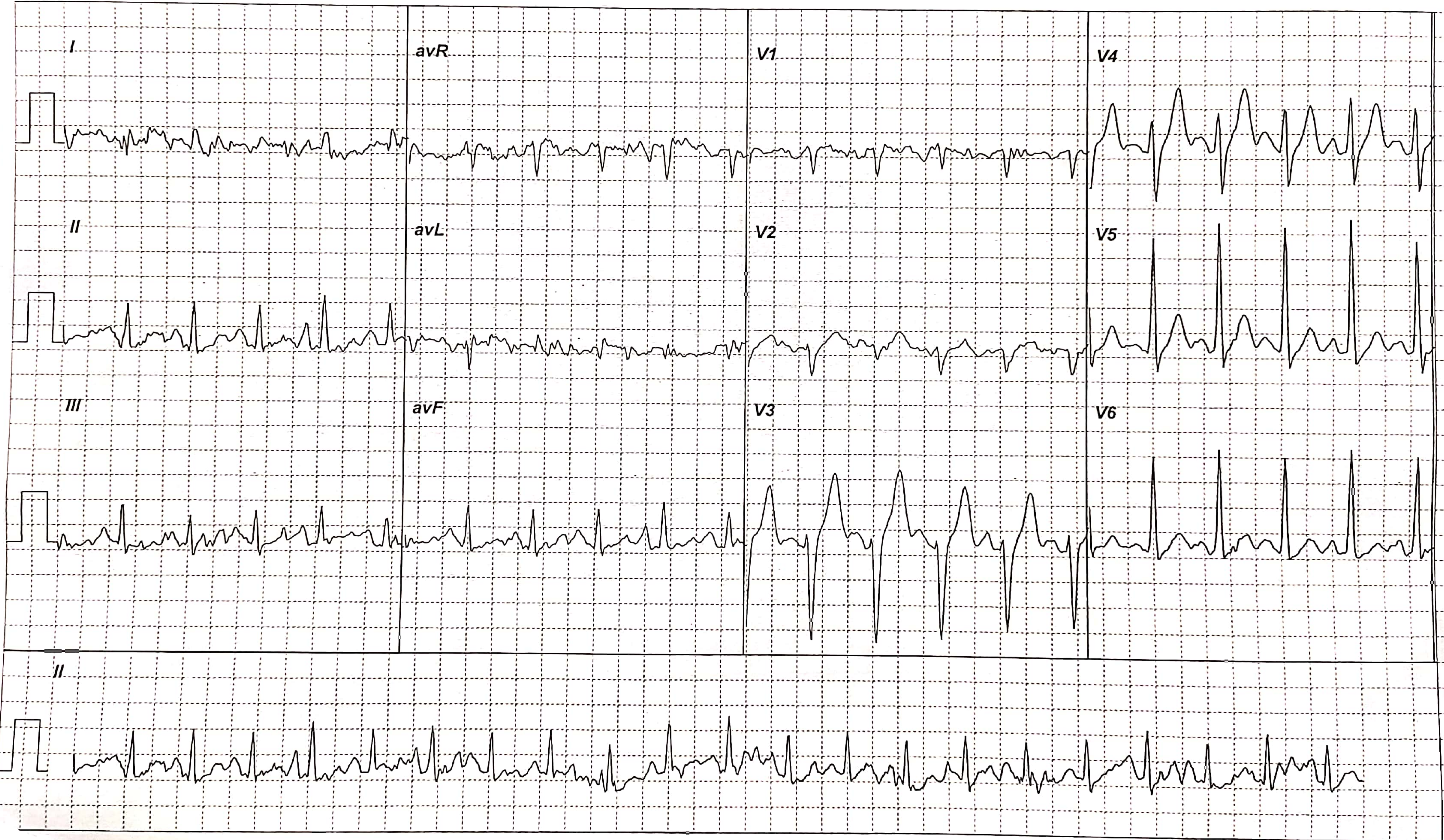
Trgt HR: 78% of 166
Speed: 2.7 mph,
Grade: 10.0%

Raw ECG
Protocol: BRUCE
(0.05-100)Hz

Ex Time 03:00
BLC :On
Notch :On

3x4+1 Rhythm Lead

BRUCE: Stage 1(3:00)
1.0 Cm/mV
25 mm/Sec.



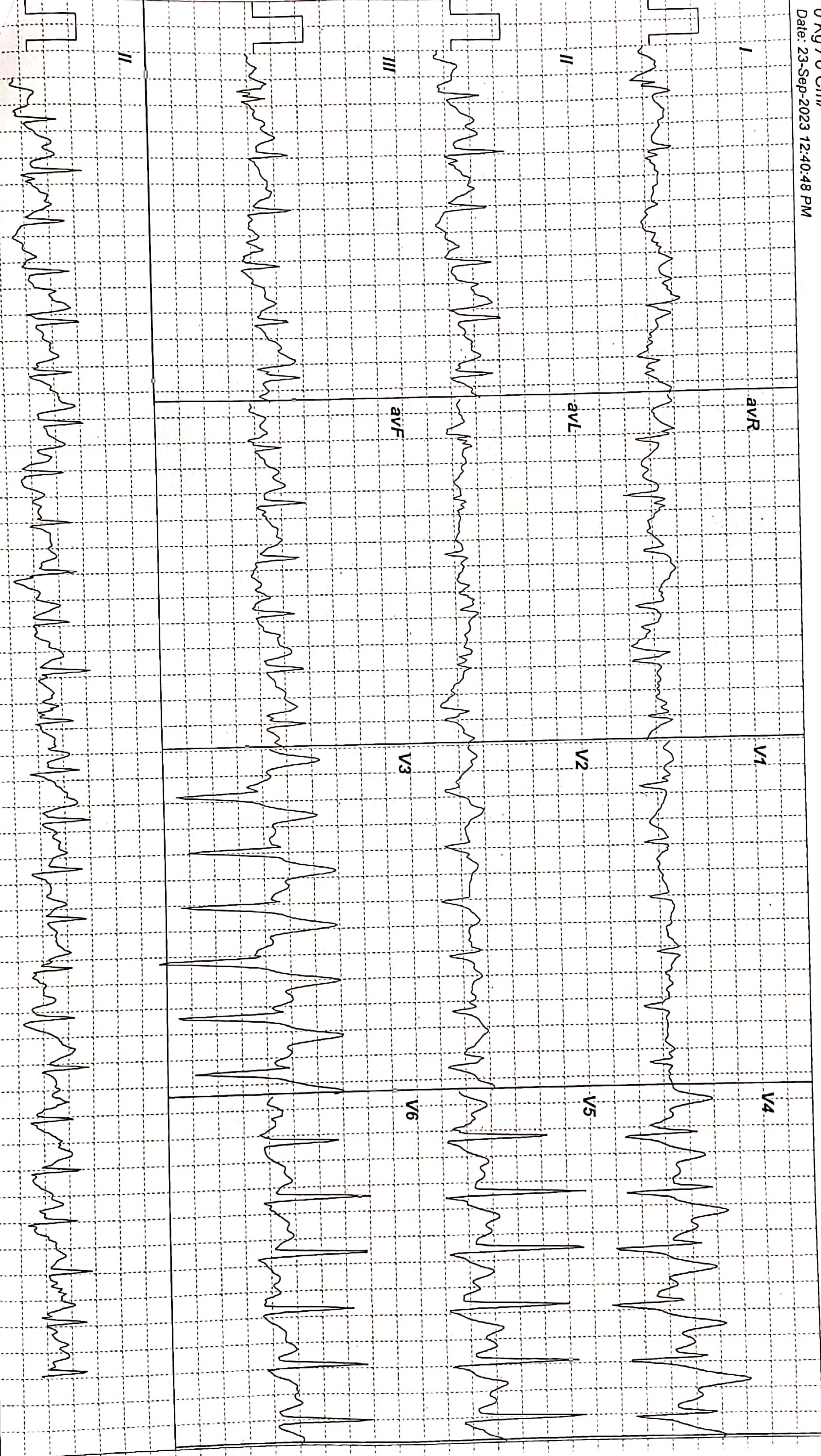
CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, **ASTRON CHOWK, RAJKOT.**
24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM

HR: 155 bpm
METs: 7.0
BP: 160/80
Tgt HR: 93% of 166
Speed: 4.0 mph,
Grade: 12.0%

Raw ECG
Protocol: BRUCE
(0.05-100)Hz

Ex Time 05:58
BLC: On
Notch: On

3x4+1 Rhythm Lead
BRUCE: PeakEx(3:00)
1.0 Cm/mV
25 mm/Sec.



CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM

HR: 118 bpm
METs: 1.0
BP: 160/80

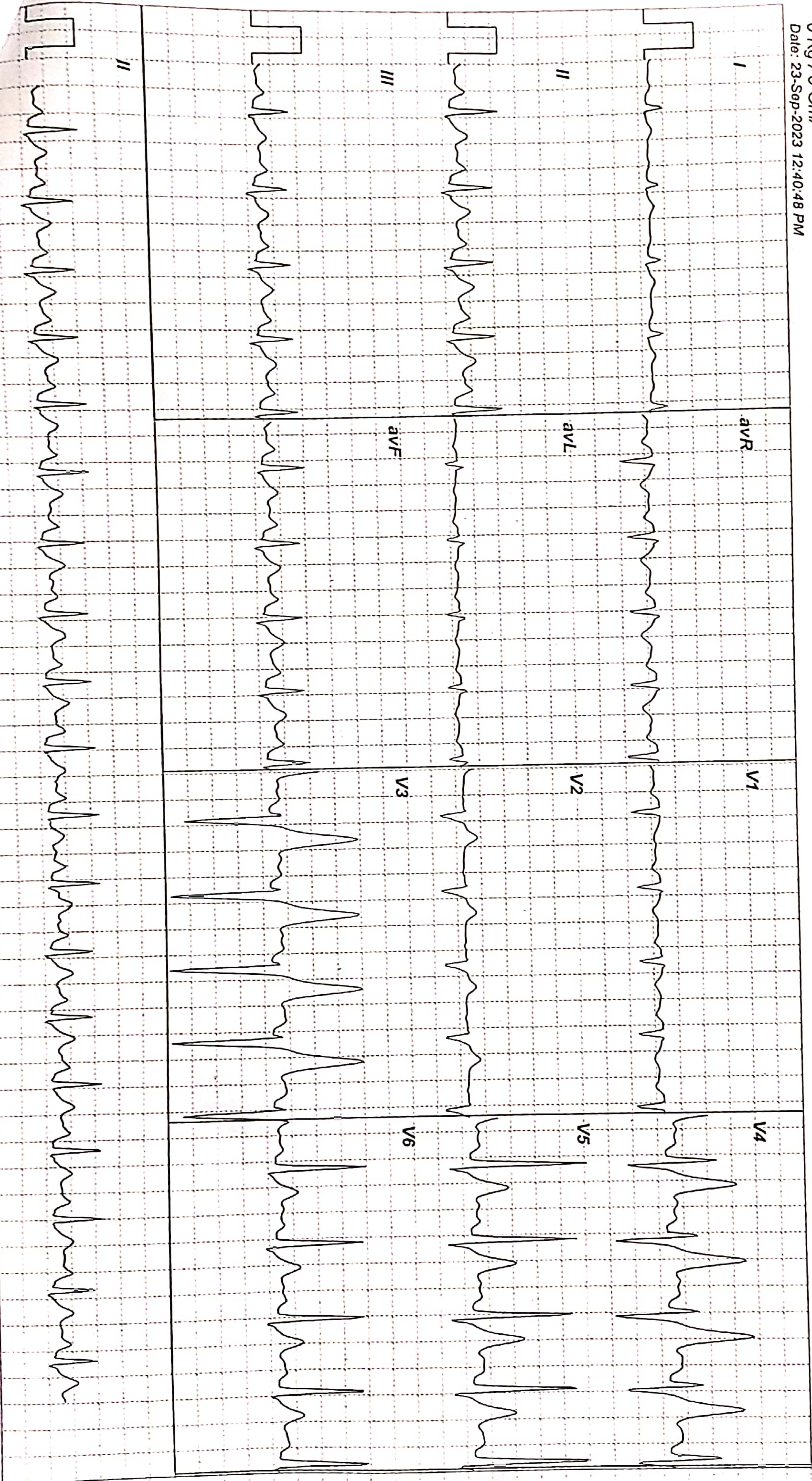
Tgt HR: 71% of 166
Speed: 0.0 mph,
Grade: 0.0%

Raw ECG
Protocol: BRUCE
(0.05-100)Hz

Ex Time 05:59
BLC : On
Notch : On

Recovery(1:00)
1.0 Cm/mV
25 mm/Sec.

3x4+1 Rhythm Lead



3X4+1 Rhythm Lead

Recovery(2:00)
1.0 cm/mV
25 mm/Sec

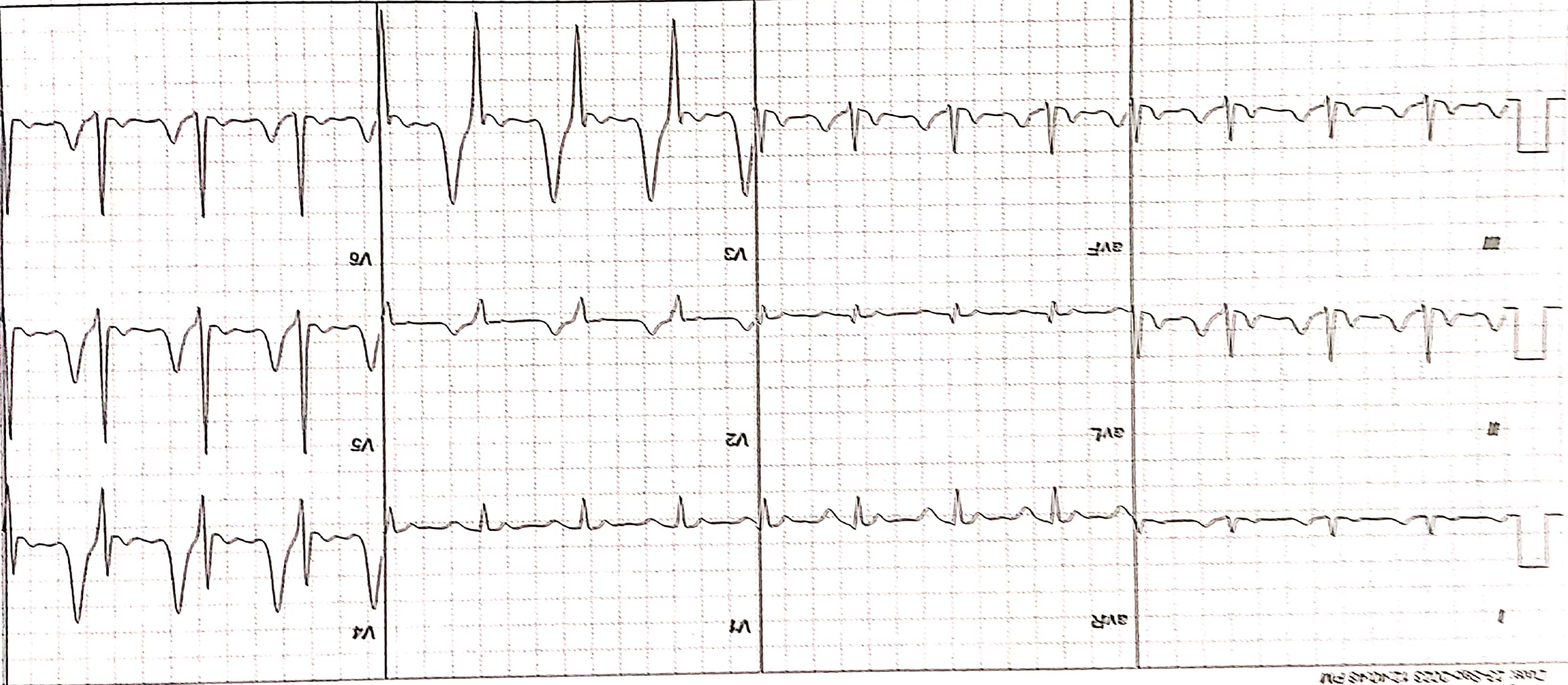
Ex Time 05:59
E.C. On
Notch On

Raw ECG
Protocol:SRUCF
(0.05-100)Hz

Right Lead of 100
Speed 60 mm/s
Gain: 0.05

7/25/88
10:10 AM

CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL,
RAJKOT
7/25/88 (DIP/MSD)
7/25/88
07/10/88
7/25/88



3x4+1 Rhythm Lead

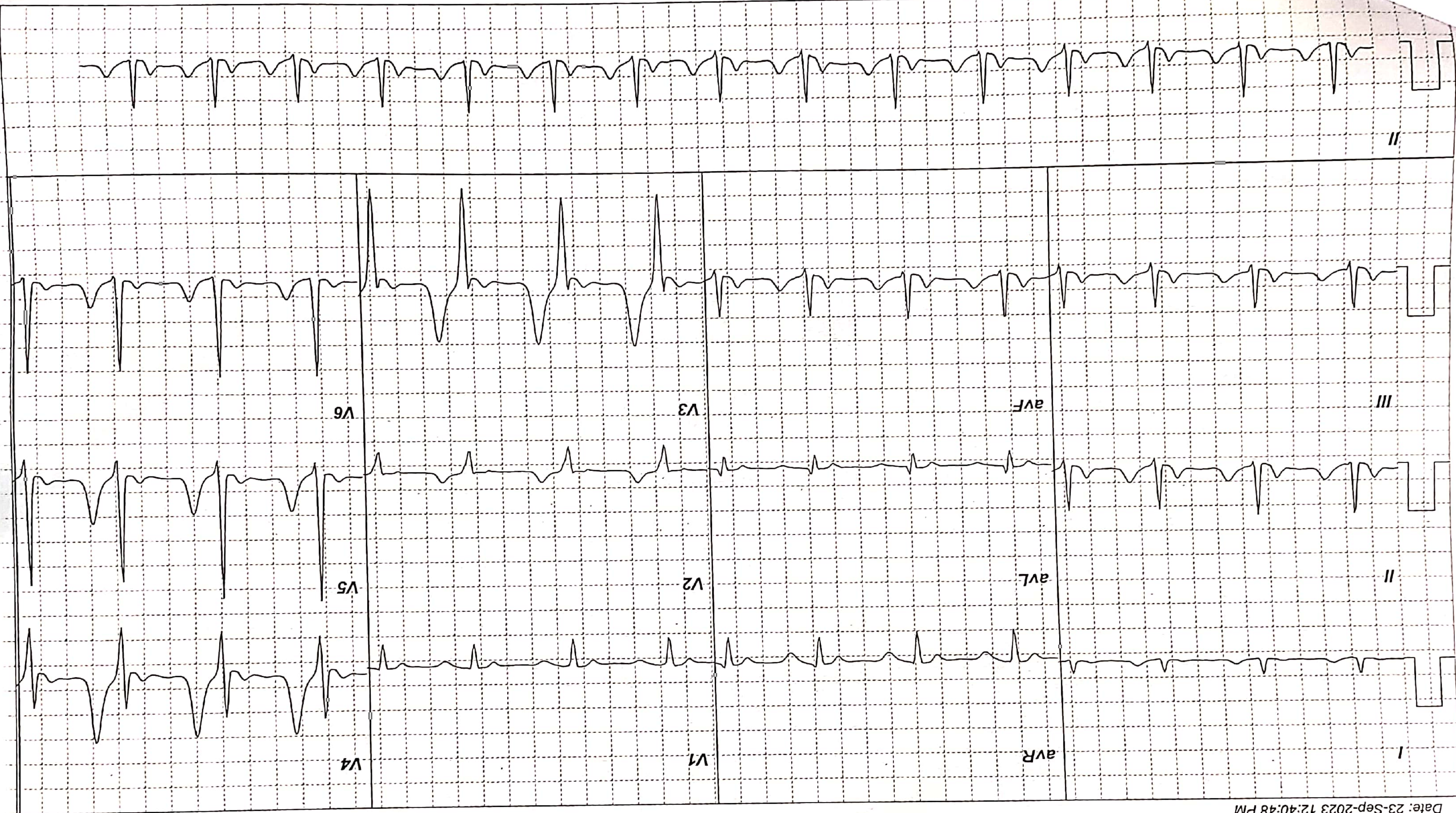
Recovery(3:00)
1.0 cm/mV
25 mm/Sec.

Ex Time 05:59
BLC: On
Notch: On

Raw ECG
Protocol:BRUCE
(0.05-100)Hz

Trgt HR:54% of 166
Speed: 0.0 mph,
Grade: 0.0%
HR: 90 bpm
METS: 1.0
BP: 140/80

CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM



3x4+1 Rhythm Lead

Recovery(4:00)

1.0 cm/mV
25 mm/Sec

Ex Time 05:59

BLC: On

Notch: On

Raw ECG

Protocol:BRUCE

(0.05-100)Hz

Trgt HR:51% of 166

Speed: 0.0 mph,

Grade: 0.0%

HR: 86 bpm

METS: 1.0

BP: 140/80

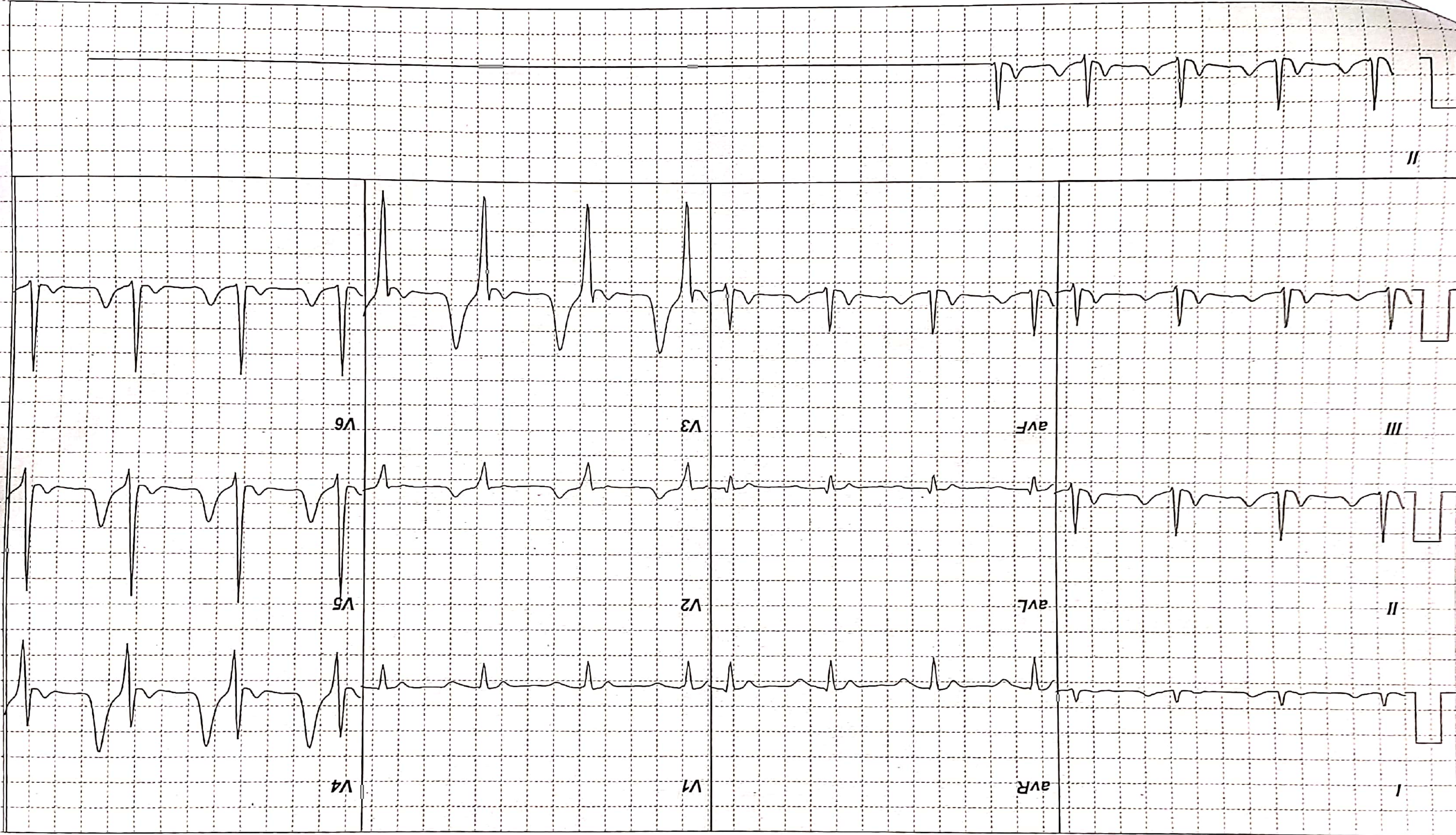
CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

24175 / DILIP TRIVEDI

54 Yrs / Male

0 Kg / 0 Cm/

Date: 23-Sep-2023 12:40:48 PM



3x4+1 Rhythm Lead

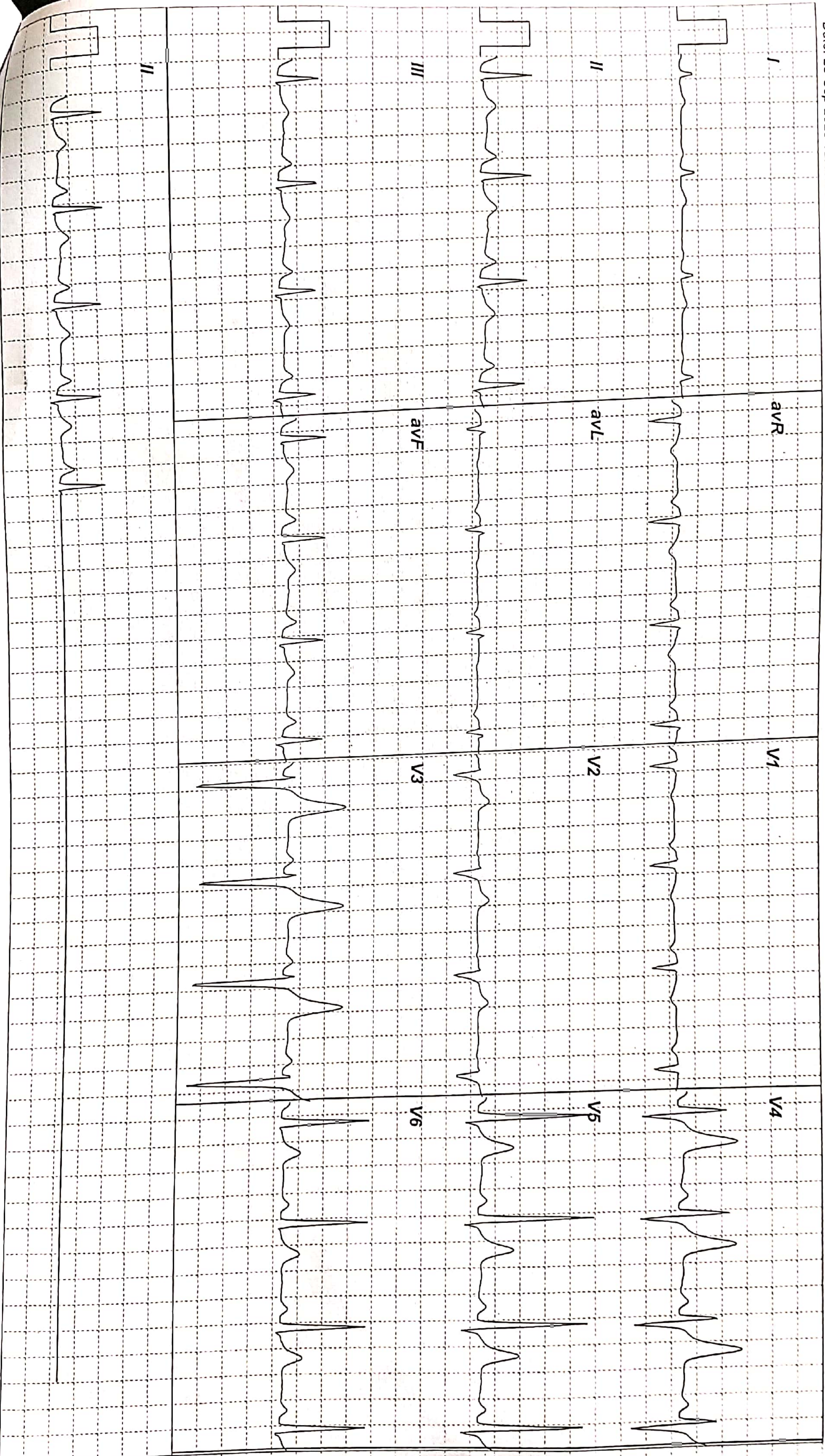
CURE CARDIOLOGY CLINIC
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
24175 / DILIP TRIVEDI
54 Yrs / Male
0 Kg / 0 Cm/
Date: 23-Sep-2023 12:40:48 PM

HR: 87 bpm
METs: 1.0
BP: 140/80
Tgt HR: 52% of 166
Speed: 0.0 mph,
Grade: 0.0%

Raw ECG
Protocol: BRUCE
(0.05-100)Hz

Ex Time 05:59
BLC: On
Notch: On

Recovery(4:01)
1.0 Cm/mV
25 mm/Sec.





TEST REPORT

Name : Drivedi Dilip	Reg. No : 309101287
Age/Sex : 54 Years / Male	Reg. Date : 23-Sep-2023 03:49 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 23-Sep-2023 03:49 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 23-Sep-2023 06:14 PM

COMPLETE BLOOD COUNT (CBC)
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval
RBC Parameters			
Hemoglobin (SLS method)	13.5	g/dL	13.0 - 18.0
Hematocrit (Electrical Impedance)	39.10	%	47 - 52
RBC Count (Electrical Impedance)	5.08	million/cmm	4.7 - 6.0
MCV (Calculated)	77.0	fL	78 - 110
MCH (Calculated)	26.6	Pg	27 - 31
MCHC (Calculated)	34.5	%	30 - 35
RDW (Calculated)	13.3	%	11.5 - 14.0
WBC Parameters			
WBC Count (Flowcytometry)	5430	/cmm	4000 - 10500
DIFFERENTIAL WBC COUNT			
Neutrophils (%)	59 %	% Range 42.0 - 75.2	Abs. Value 3204 /cmm Abs. Range 1800 - 7700
Lymphocytes (%)	31 %	20 - 45	1683 /cmm 1000 - 3900
Eosinophils (%)	03 %	1 - 4	163 /cmm 0 - 450
Monocytes (%)	07 %	2 - 8	380 /cmm 200 - 1000
Basophils (%)	00 %	0 - 1	0 /cmm 20 - 100
Platelete Parameter			
Platelet Count	243000	/cmm	150000 - 450000
MPV	9.2	fL	7.4 - 10.4
P-LCR	18.40	%	11.9 - 66.9
PDW	9.3	%	8.3 - 56.6
PCT (Platelet Haematocrit)	0.22	%	0.2 - 0.5

DRJ

This is an Electronically Authenticated Report.

Page 1 of 12

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name	: Drivedi Dilip	Reg. No	: 309101287
Age/Sex	: 54 Years / Male	Reg. Date	: 23-Sep-2023 03:49 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 23-Sep-2023 03:49 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 23-Sep-2023 06:14 PM

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	"O"		
Rh (D)	Negative		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

DRJ.

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Page 2 of 12

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)

towards the healthiness...





TEST REPORT

Name : Drivedi Dilip	Reg. No : 309101287
Age/Sex : 54 Years / Male	Reg. Date : 23-Sep-2023 03:49 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 23-Sep-2023 03:49 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 23-Sep-2023 06:14 PM

Test	Result	Unit	Biological Ref. Interval
Erythrocyte sedimentation rate Sample, EDTA whole blood			
ESR (After 1 hour)	06	mm/hr	1 - 7

DRJ.

This is an Electronically Authenticated Report.

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)

towards the healthiness...





TEST REPORT

Name	: Drivedi Dilip	Reg. No	: 309101287
Age/Sex	: 54 Years / Male	Reg. Date	: 23-Sep-2023 03:49 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 23-Sep-2023 03:49 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 23-Sep-2023 06:14 PM

RANDOM PLASMA GLUCOSE

Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Random Blood Sugar (RBS)	87.00		70 - 160
Urine Glucose - R <i>Glucose Oxidase-Peroxidase</i>	Nil		
Urine Acetone - R	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 *Or
- Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

D.R.J.

This is an Electronically Authenticated Report.

Page 4 of 12

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)



towards the healthiness...



TEST REPORT

Name	: Drivedi Dilip	Reg. No	: 309101287
Age/Sex	: 54 Years / Male	Reg. Date	: 23-Sep-2023 03:49 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 23-Sep-2023 03:49 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 23-Sep-2023 06:14 PM

LIPID PROFILE
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <i>Cholesterol Oxidase</i>	171.00	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>Enzymatic Reaction With Glycerol Kinase</i>	112.00	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <i>Siemens AHDL</i>	56.00	mg/dL	High Risk : < 40 Low Risk : \geq 60
LDL Cholesterol <i>Siemens ALDL</i>	92.60	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : \geq 190
VLDL Cholesterol <i>Calculated</i>	22.40	mg/dL	15 - 35
LDL / HDL RATIO <i>Calculated</i>	1.65		0 - 3.5
Cholesterol /HDL Ratio <i>Calculated</i>	3.05		0 - 5.0

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Dr. Viral Jethava
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towards the healthiness...



TEST REPORT

Name	: Drivedi Dilip	Reg. No	: 309101287
Age/Sex	: 54 Years / Male	Reg. Date	: 23-Sep-2023 03:49 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 23-Sep-2023 03:49 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 23-Sep-2023 06:14 PM

RENAL FUNCTION TEST

Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Creatinine <i>ALKALINE PICRATE, COLORIMETRIC KINETIC</i>	1.14	mg/dL	0.7 - 1.3
eGFR	58.01	ml/min/1.73 sq m	Normal or High: >=90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15
Urea <i>Calculated</i>	24.00	mg/dL	17 - 43
Blood Urea Nitrogen (BUN) <i>UREASE/GLDH</i>	11.21	mg/dL	7.0 - 18.0
Uric Acid <i>Uricase</i>	6.21	mg/dL	3.5 - 7.2
Sodium <i>Direct ion selective electrode</i>	138.2	mmol/L	137 - 145
Potassium <i>Direct ion selective electrode</i>	4.20	mmol/L	3.5 - 5.1
Chloride <i>Direct ion selective electrode</i>	104.0	mmol/L	98 - 107
Calcium <i>Cresolphthalein Complexone</i>	9.20	mg/dL	8.5 - 10.1

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HEMOGLOBIN A1 C (HBA1C)
Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HbA1C <i>Siemens Dimension</i>	4.98	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <i>Calculated</i>	96.23	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

Explanation :

- Total hemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

HbA1c assay Interferences :

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
Thyroid Stimulating Hormone (TSH) <small>CLIA</small>	3.580	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012:2170

Triiodothyronine (T3) <small>CLIA</small>	1.20	ng/mL	0.6 - 1.81
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Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

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Thyroxine (T4) 9.41 µg/dL 4.5 - 12.6
CLIA

Clinical Significance :

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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STOOL EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Colour	Yellow		
Consistency	Semi Solid		
CHEMICAL EXAMINATION			
Occult Blood <i>Peroxidase Reaction with o-Dianisidine</i>	Negative		
Reaction <i>pH Strip Method</i>	Alkaline		
Reducing Substance	Absent		
MICROSCOPIC EXAMINATION			
Mucus	Absent		
Pus Cells	1 - 5/hpf		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.

False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occassinal unruptured RBCs.

False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

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URINE ROUTINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
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PHYSICAL EXAMINATION

Quantity	30 cc		
Colour	Pale Yellow		
Clarity	Clear		

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	6.0		4.6 - 8.0
Sp. Gravity	1.010		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	1 - 3/hpf
Erythrocytes (Red Cells)	Absent
Epithelial Cells	3 - 4/hpf
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

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LIVER FUNCTION TEST

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <i>BIURET</i>	7.20	g/dL	6.4 - 8.2
Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i>	4.52	g/dL	3.40 - 5.00
Globulin <i>Calculated</i>	2.68	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.69		0.8 - 3.1
SGOT (AST) <i>Siemens/37C</i>	32.00	U/L	15 - 37
SGPT (ALT) <i>Siemens/37C</i>	62.00	U/L	16 - 63
Alakaline Phosphatase <i>Siemens/37C</i>	105.00	U/L	46 - 116
Total Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.37	mg/dL	0.2 - 1
Conjugated Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.14	mg/dL	0 - 0.20
Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.23	mg/dL	0.0 - 1.1

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