



**PRAMUKH**

**MULTI SPECIALITY**

**HOSPITAL**

Above Punjab National Bank,  
Nr. Railway Crossing, Maninagar (E)  
Ahmedabad - 380 008.

**MEDICAL EXAMINATION**

DATE :- 15/04/2022

NAME :- SOUVIK KARTIC KOLEY

AGE /SEX :- 34 yrs / male

O/E :

T: Normal

BP : 130/82 mmHg.

P: S2'nt

RS: BAFA

SPO2 : 98% on RA.

CNS : Contolari.

CVS : S1+S2+

P/A : Soft

ADV :

Height : 168 Cms .

Weight : 73 Kgs

BMI : 26

Eye Exam. : Vision Normal. (-8.5 in both eyes.)

Ear Exam. : Hearing Normal



B.A. Panchal

**Dr. Brijesh Panchal**  
MBBS  
Regd. No. G-28095  
PRAMUKH MULTISPECIALITY HOSPITAL  
Maninagar, Ahmedabad-8.

*Souvik*



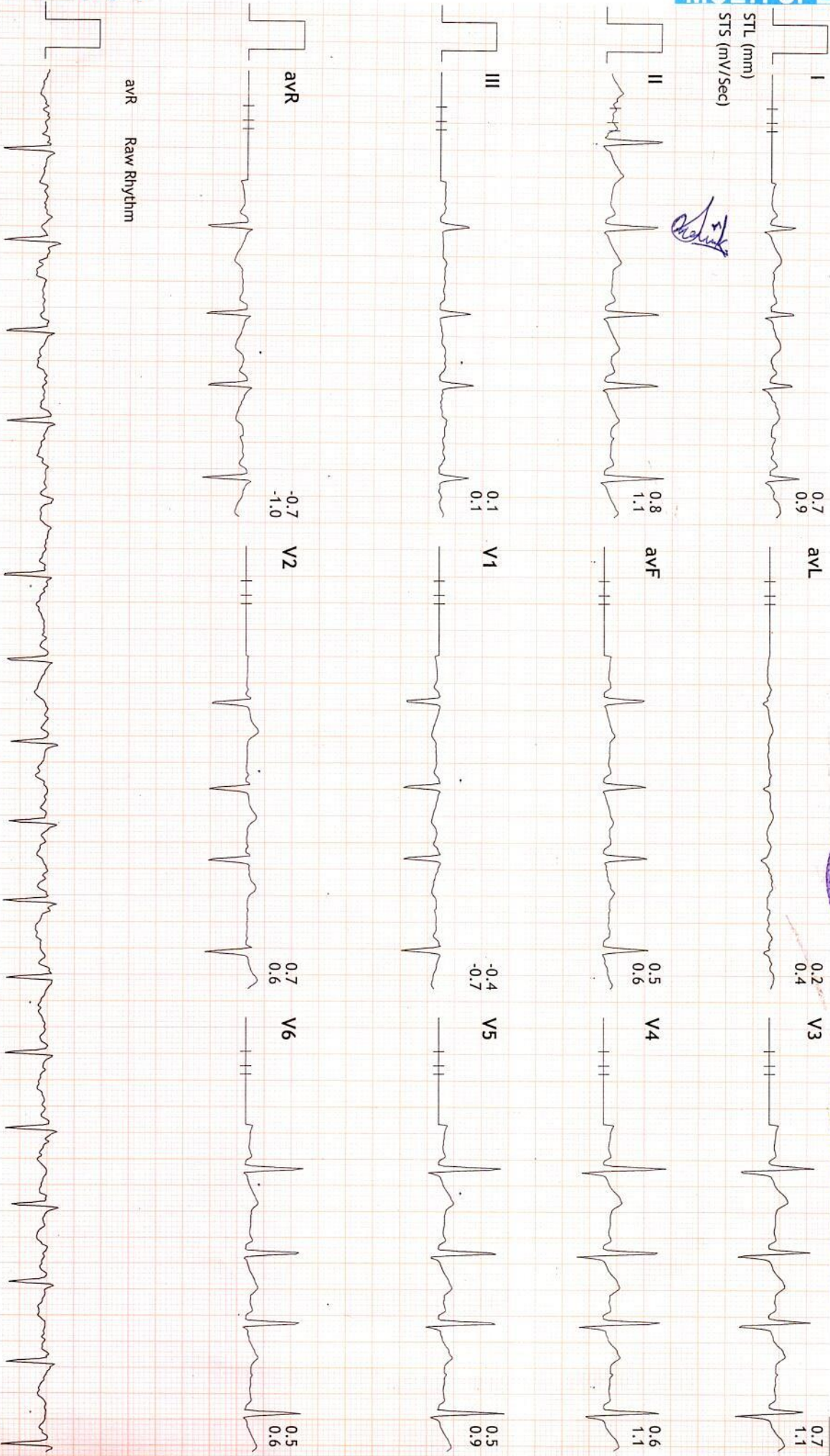
# PRAMUKH MULTI SPECIALITY

National Bank,  
Crossing, Maninagar (E)  
380 008.

*Normal ECG  
Dhruv 82147  
nshwv*



*DR. KAMLESH N. SHAH*  
**DR. KAMLESH N. SHAH**  
M.D. (FICA-USA)  
Reg. No. G-1345  
PRAMUKH MULTISPECIALITY HOSPITAL  
MANINAGAR, AHMEDABAD.





**NAME: SOUVIK K. KOLEY**

**M/34YRS.**

**DATE: 15/04/2022**

**REF.BY: PRAMUKH HOSPITAL**

**X RAY CHEST PA VIEW**

Both lung fields under vision appears normal.

No evidence of koch's lesion or consolidation is seen.

Both CP angles are clear.

Cardiac size is within normal limits.

Bony thoracic cage and both domes of diaphragm appears normal.

DR. SANDIP MEVADA  
M.D.

DR. ANIRUDDHSINH RAHEVAR  
DMRD DNB

DR. RUCHIT SHAH  
M.D.

DR. AMISHA PATEL  
M.D.

  
DR. PRANAY PATEL  
M.D.





NAME: SOUVIK K. KOLEY

M/34YRS.

DATE: 15/04/2022

REF.BY: PRAMUKH HOSPITAL

**U.S.G. OF ABDOMEN PELVIS**

**Liver:** appears normal in size & shows bright echopattern. No focal lesion is seen. No dilated IHBR is seen. Portal vein and CBD appear normal in course and caliber.

**Gall bladder:** is moderately distended & shows few calculi within, average size measures 8-9 mm in size. Gall bladder wall thickness appears normal.

**Pancreas:** appears normal in size & echopattern. No focal lesion is seen.

**Spleen:** appears normal in size and shows normal echotexture. No focal lesion is seen. Splenic vein appears normal.

**Both Kidneys** appear normal in size, position and echopattern.

C-M differentiation is well preserved on either side.

No calculus or hydronephrosis on either side.

Cortical thickness appears normal on both sides.

No focal lesion is seen on either side.

**Urinary bladder** is moderately distended & appears normal. No calculus, internal echoes or mass is seen. Urinary bladder wall thickness appears normal.

**Prostate** appears normal in size & echopattern. No focal lesion is seen.

Para-aortic region appears normal.

No abdominal lymphadenopathy is seen.

Bowel loops appear normal in caliber & show normal peristalsis.

No abnormal dilatation of bowel loops or wall thickening is seen.

No fluid collection or lump formation is seen in RIF.

No ascites is seen.

**IMPRESSION:**

- Grade I fatty changes in liver.
- Gallbladder calculi. No cholecystitis.



DR. SANDIP MEVADA  
M.D.

DR. ANIRUDDHSINH RAHEVAR  
DMRD DNB

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M.D.

DR. AMISHA PATEL  
M.D.

  
DR. PRANAY PATEL  
M.D.





Summary

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
 NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOLEY 34 Yrs/Male

73 Kg/168 Cms

Date: 15-Apr-2022 09:09:40 AM

Protocol : BRUCE

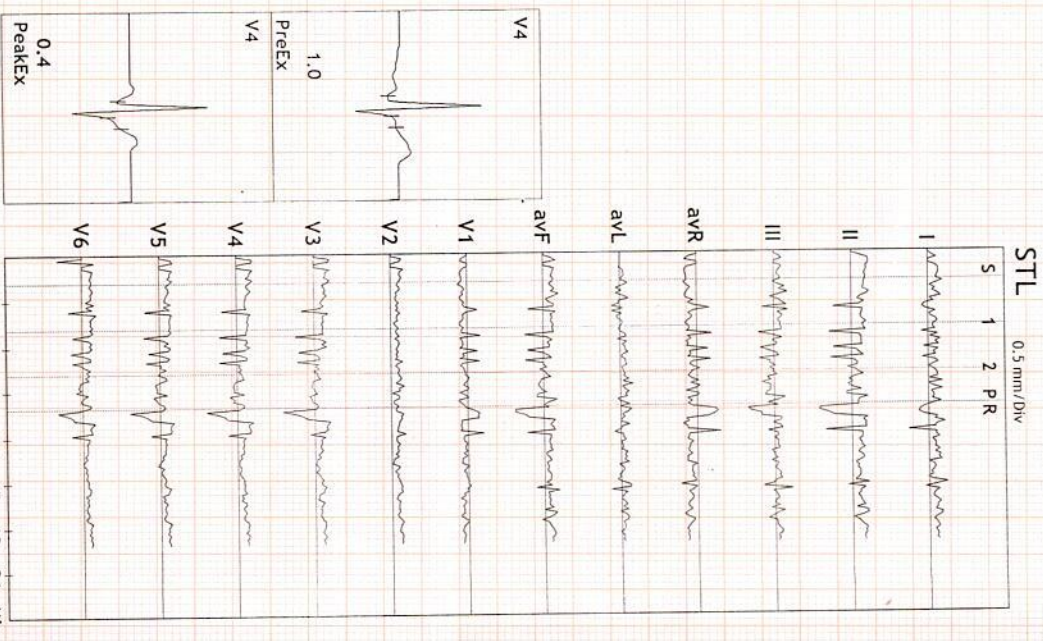
History : NO

Ref. By : B03  
 Medication : NO  
 Objective : NO

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	93	130/82	120	-	
Supine					1.0	95	130/82	123	-	
Standing					1.0	97	130/82	126	-	
HV					1.0	97	130/82	126	-	
ExStart					1.0	107	130/82	139	-	
Stage 1	3:01	3:02	1.7	10.0	4.7	127	136/88	172	-	
Stage 2	3:01	6:02	2.5	12.0	7.1	142	142/92	201	-	
PeakEx	2:16	8:17	3.4	14.0	9.4	168	154/102	258	-	
Recovery	1:00		0.0	0.0	1.2	142	154/102	218	-	
Recovery	4:00		0.0	0.0	1.0	107	142/96	151	-	
Recovery	7:00		0.0	0.0	1.0	104	136/84	141	-	
Recovery	9:02		0.0	0.0	1.0	113	136/84	153	-	

Findings :

Exercise Time : 8:16 minutes  
 Max HR attained : 168 bpm 90% of Max Predictable HR 186  
 Max BP : 154/102(mmHg)  
 Workload attained : 9.4 (Good Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischemia.  
 Maximum Depression: 8:16  
 TARGET HR ACHIEVED.



Advice/Remarks:

*Normal TMT  
 Target is met*



ST Summary

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
 NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOLEY 34 Yrs/Male

73 Kg/168 Cms

Date: 15-Apr-2022 09:09:40 AM

Protocol : BRUCE

STL (mm) 60 mSecs Post J	I	II	III	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6
Supine	0.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Supine	0.7	0.9	0.2	-0.8	0.2	0.6	-0.5	0.6	0.8	0.8	0.7	0.6
Standing	0.7	0.8	0.1	-0.7	0.2	0.5	-0.4	0.7	0.7	0.6	0.5	0.5
HV	0.6	0.9	0.4	-0.7	0.1	0.7	-0.4	0.6	1.0	1.0	0.8	0.6
EXStart	0.6	0.9	0.4	-0.7	0.1	0.7	-0.4	0.6	1.0	1.0	0.8	0.6
Stage 1	0.6	0.9	0.4	-0.8	0.1	0.7	-0.5	0.3	0.6	0.7	0.7	0.7
Stage 2	0.0	-0.3	-0.3	0.2	0.1	-0.3	-0.2	0.5	-0.1	0.1	0.0	0.2
PeakEx	0.8	0.4	-0.4	-0.6	0.6	0.0	-0.2	0.5	0.2	0.4	0.3	0.4
Recovery	0.5	1.0	0.5	-0.7	0.0	0.7	-0.4	0.5	1.0	1.0	0.9	0.8
Recovery	0.0	0.2	0.2	-0.1	-0.1	0.2	0.0	0.5	0.2	0.2	0.2	0.2
Recovery	0.5	0.2	-0.3	-0.4	0.4	0.0	-0.3	0.5	0.4	0.5	0.3	0.3
STS mV/Sec.	0.0	1.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Supine	1.7	0.9	-0.8	-1.4	1.2	0.1	-1.0	-0.1	0.8	0.8	0.7	0.2
Supine	0.9	1.1	0.1	-1.0	0.4	0.6	-0.7	0.6	1.1	1.1	0.9	0.6
Standing	0.4	0.7	0.4	-0.6	0.0	0.6	-0.5	0.1	1.1	1.0	0.9	0.4
HV	0.4	0.7	0.4	-0.6	0.0	0.6	-0.5	0.1	1.1	1.0	0.9	0.4
EXStart	0.4	0.7	0.4	-0.6	0.0	0.6	-0.5	0.1	1.1	1.0	0.9	0.4
Stage 1	0.9	1.2	0.2	-1.1	0.4	0.7	-0.8	0.1	1.2	1.4	1.4	1.1
Stage 2	0.9	1.5	0.5	-1.2	0.2	1.0	-1.0	0.0	1.3	1.4	1.4	1.0
PeakEx	0.9	2.2	1.3	-1.6	-0.2	1.7	-0.9	-0.1	2.7	2.9	2.7	2.0
Recovery	0.9	2.9	2.0	-1.9	-0.5	2.4	-1.5	0.0	2.9	3.2	2.9	2.1
Recovery	0.1	1.2	1.0	-0.7	-0.4	1.1	-0.5	0.3	1.3	1.3	1.3	0.9
Recovery	0.8	0.8	0.0	-0.9	0.4	0.4	-0.8	0.0	0.9	1.1	0.9	0.6

STI on Next Page

*Dr. Kamlesh N. Shah*



STI	μVs	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6
	Supine	0.0	4.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	Supine	0.9	3.5	2.6	-2.2	-0.8	3.1	-0.9	3.4	3.2	3.5	2.8	2.7
	Standing	3.0	3.0	0.0	-2.8	1.4	1.4	-1.3	2.8	1.9	1.5	1.3	1.3
	HV	0.9	4.2	3.3	-2.4	-1.4	3.8	-0.7	4.0	5.0	5.3	4.2	3.4
	EXStart	0.9	4.2	3.3	-2.4	-1.4	3.8	-0.7	4.0	5.0	5.3	4.2	3.4
	Stage 1	1.6	3.8	2.3	-2.6	-0.4	3.1	-1.4	1.8	1.7	1.6	1.7	2.2
	Stage 2	-1.0	-4.0	-2.9	2.6	1.0	-3.4	0.4	3.0	-2.5	-1.8	-2.4	-0.5
	PeakEx	2.9	-1.5	-4.7	-0.6	3.8	-3.2	0.3	2.7	-3.1	-2.4	-2.6	-1.5
	Recovery	1.9	0.8	-1.0	-1.2	1.4	0.0	-0.1	2.6	0.4	0.1	0.1	0.1
	Recovery	-0.1	-0.8	-0.6	0.5	0.3	-0.6	1.0	2.2	-0.5	-0.8	-0.8	-0.3
	Recovery	1.6	0.1	-1.5	-0.8	1.5	-0.7	-0.3	3.0	1.2	1.7	0.8	1.1

*Handwritten signature*





Linked Medians Report

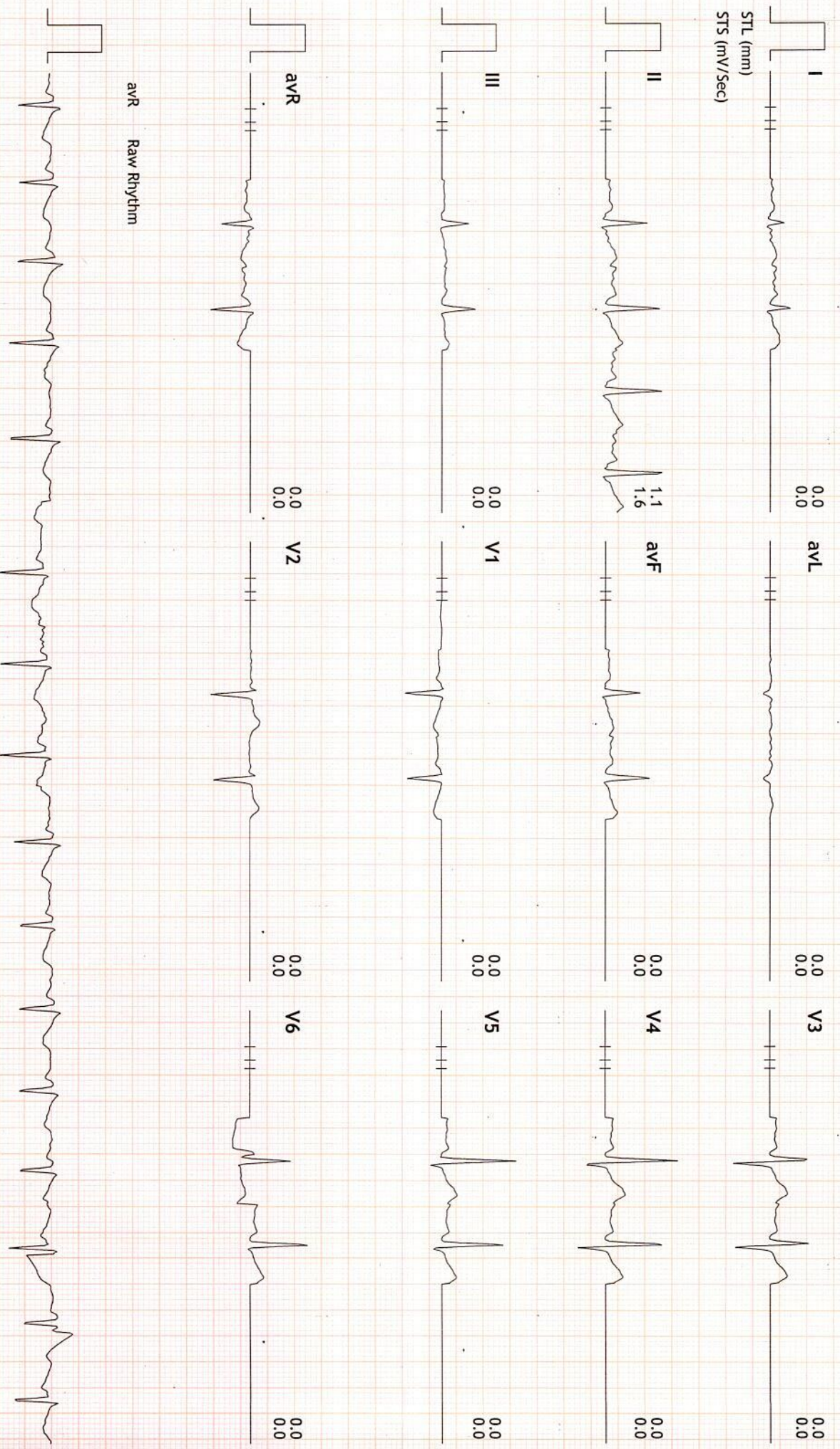
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MAINNAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOLER: 93 bpm  
34 Yrs/Male METS: 1.0  
73 Kg/168 Cms BP: 130/82  
Date: 15-Apr-2022 09:09:40 AM

MPPR: 50% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE (1.0-100)Hz  
Ex Time 00:46  
BLC : On  
Notch : On

SUPINE  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

975/SOUVIK KARTIC KOLHER: 92 bpm  
34 Yrs/Male METTS: 1.0  
73 Kg/168 Cms BP: 130/82  
Date: 15-Apr-2022 09:09:40 AM

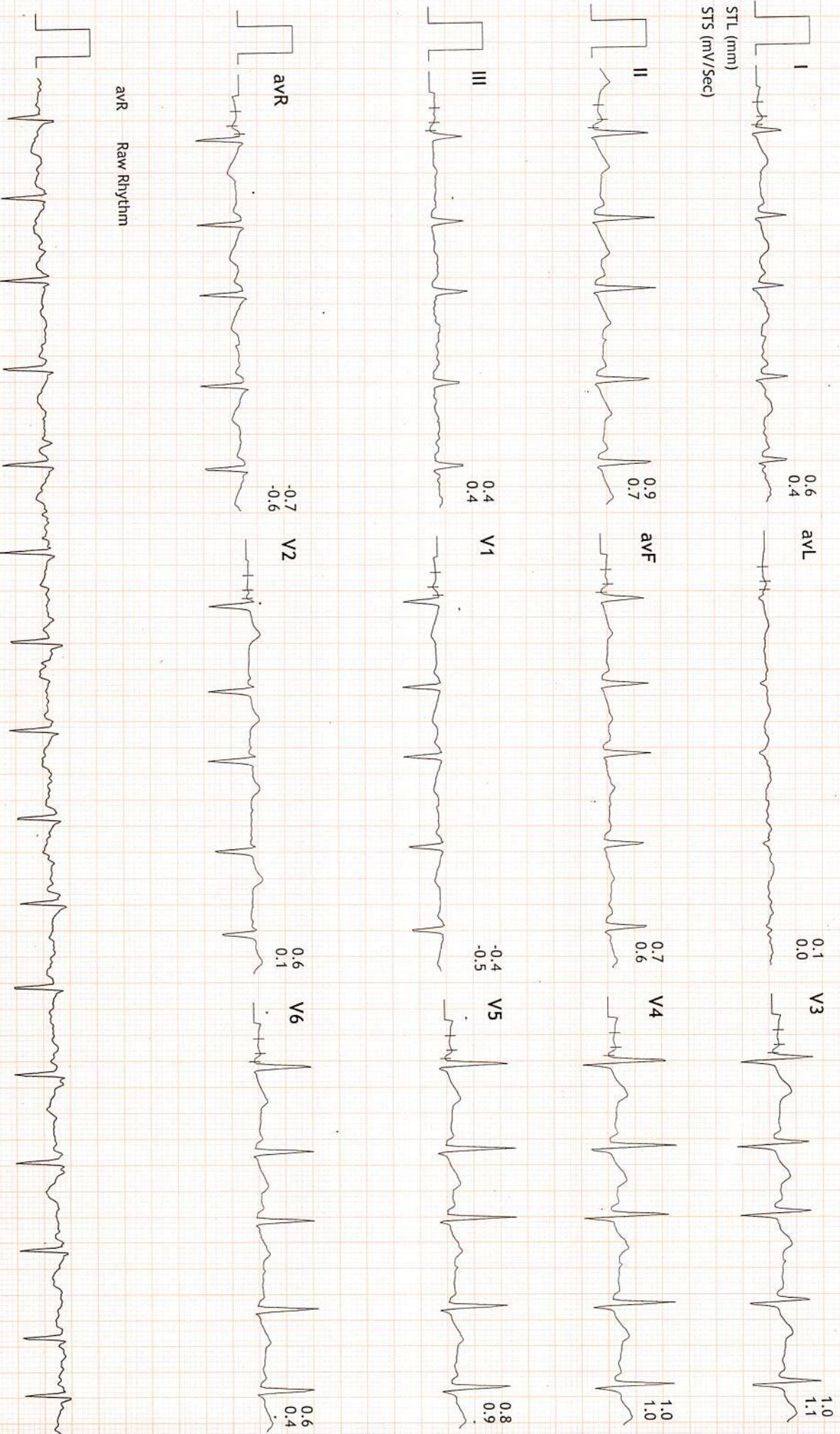
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANNINAGAR (E) Ahm. 08.

MPHR: 49% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE  
(1.0-100)HZ

Ex Time 01:32  
BLC : On  
Notch : On

STANDING  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANNINAGAR (E) Ahm. 08.

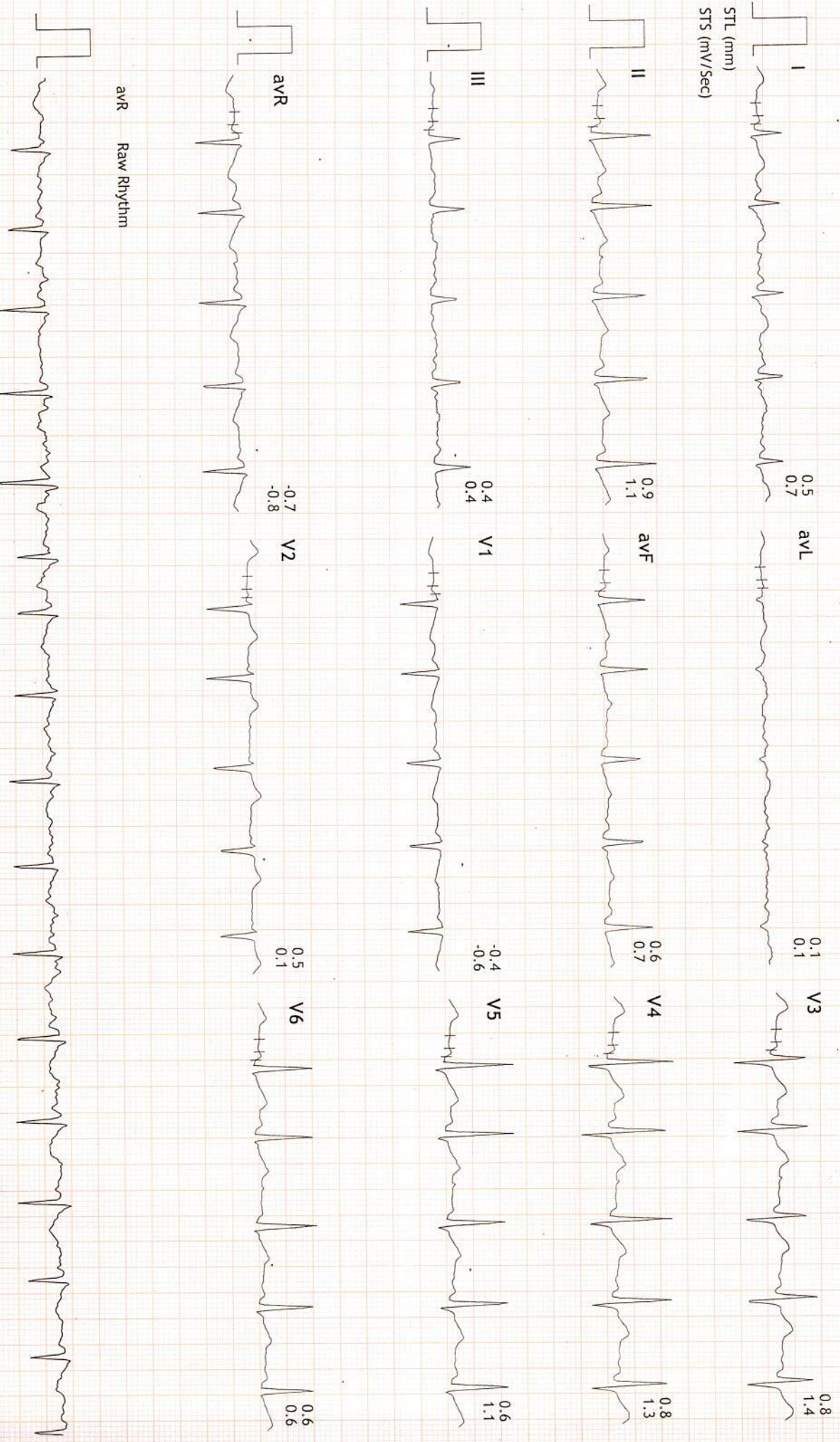
975/SOUVIK KARTIC KOLHER: 97 bpm  
34 Yrs/Male  
73 Kg/168 Cms  
Date: 15-Apr-2022 09:09:40 AM

MPHR: 52% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE  
(1.0-100)Hz

Ex Time 01:45  
BLC : On  
Notch : On

HV  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

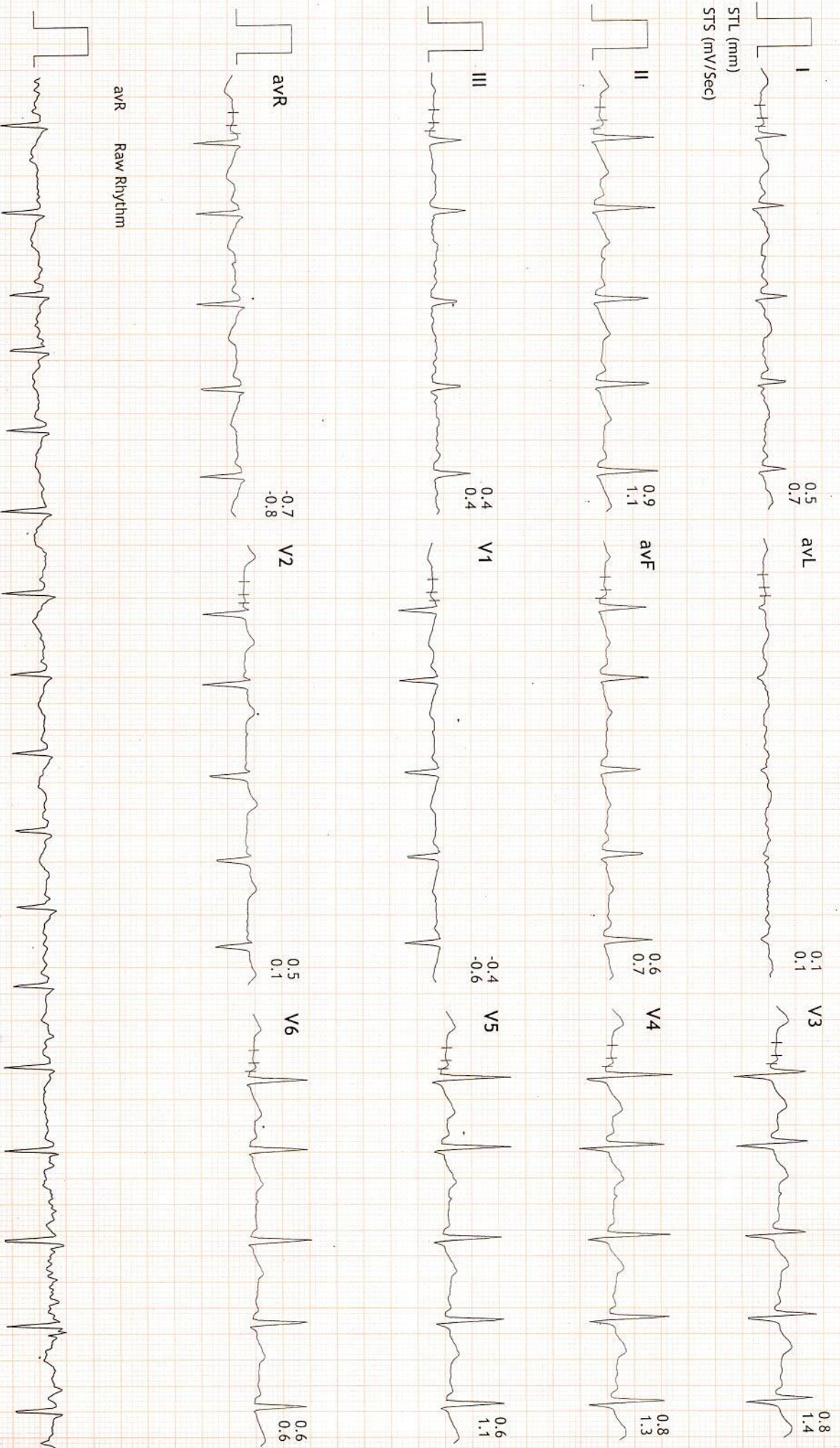
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOJER: 107 bpm  
34 Yrs/Male  
73 Kg/168 Cms  
Date: 15-Apr-2022 09:09:40 AM

MPHR:57% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE (1.0-100)HZ  
Ex Time 00:00  
BLC :On  
Notch :On

ExStart  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

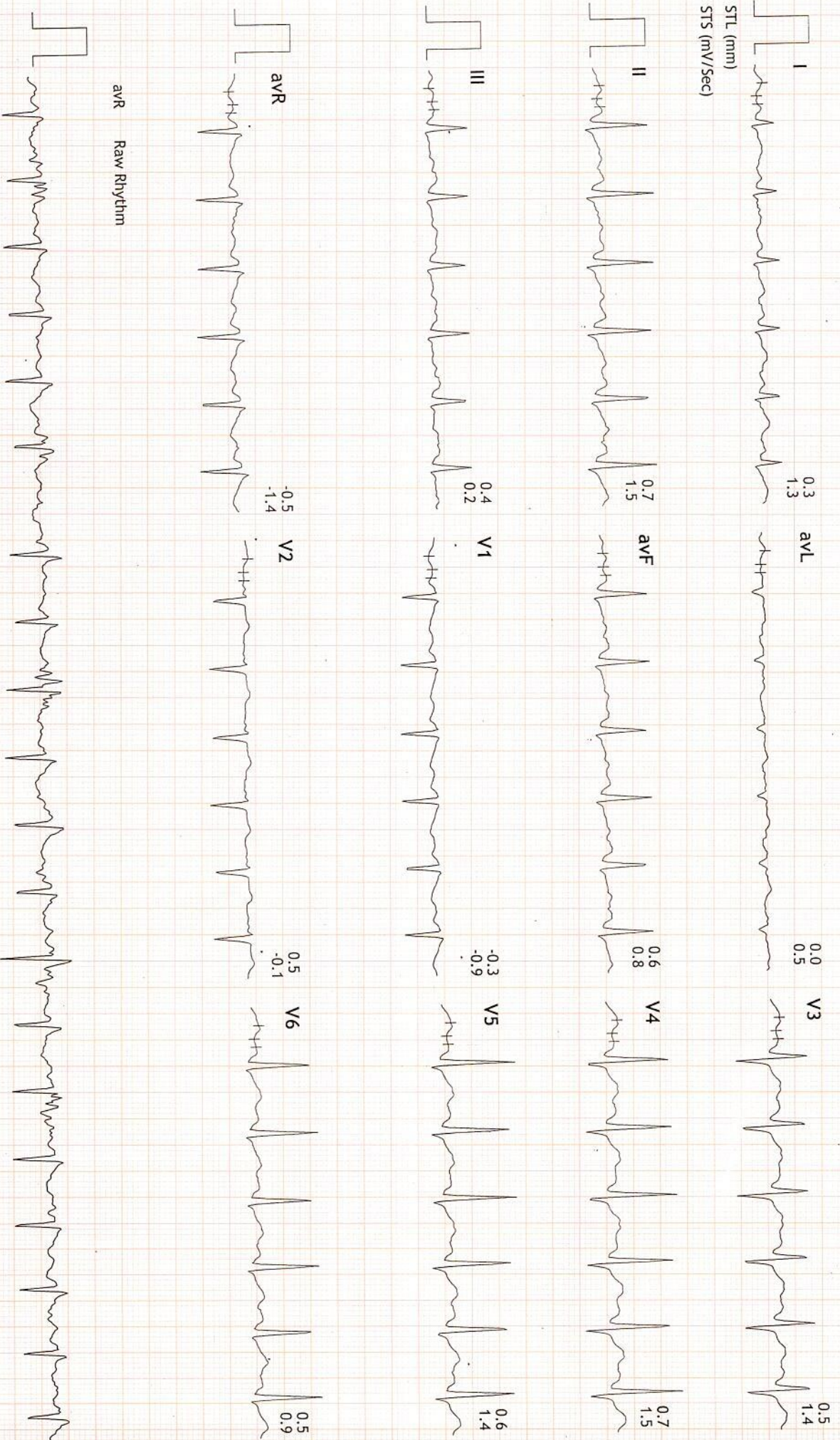
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOJER: 127 bpm  
34 Yrs/Male METS: 4.7  
73 Kg/168 Cms BP: 136/88  
Date: 15-Apr-2022 09:09:40 AM

MPHR: 68% of 186  
Speed: 1.7 mph  
Grade: 10.0%

BRUCE (1.0-100)Hz  
Ex Time 03:00  
BLC :On  
Notch :On

Stage 1 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

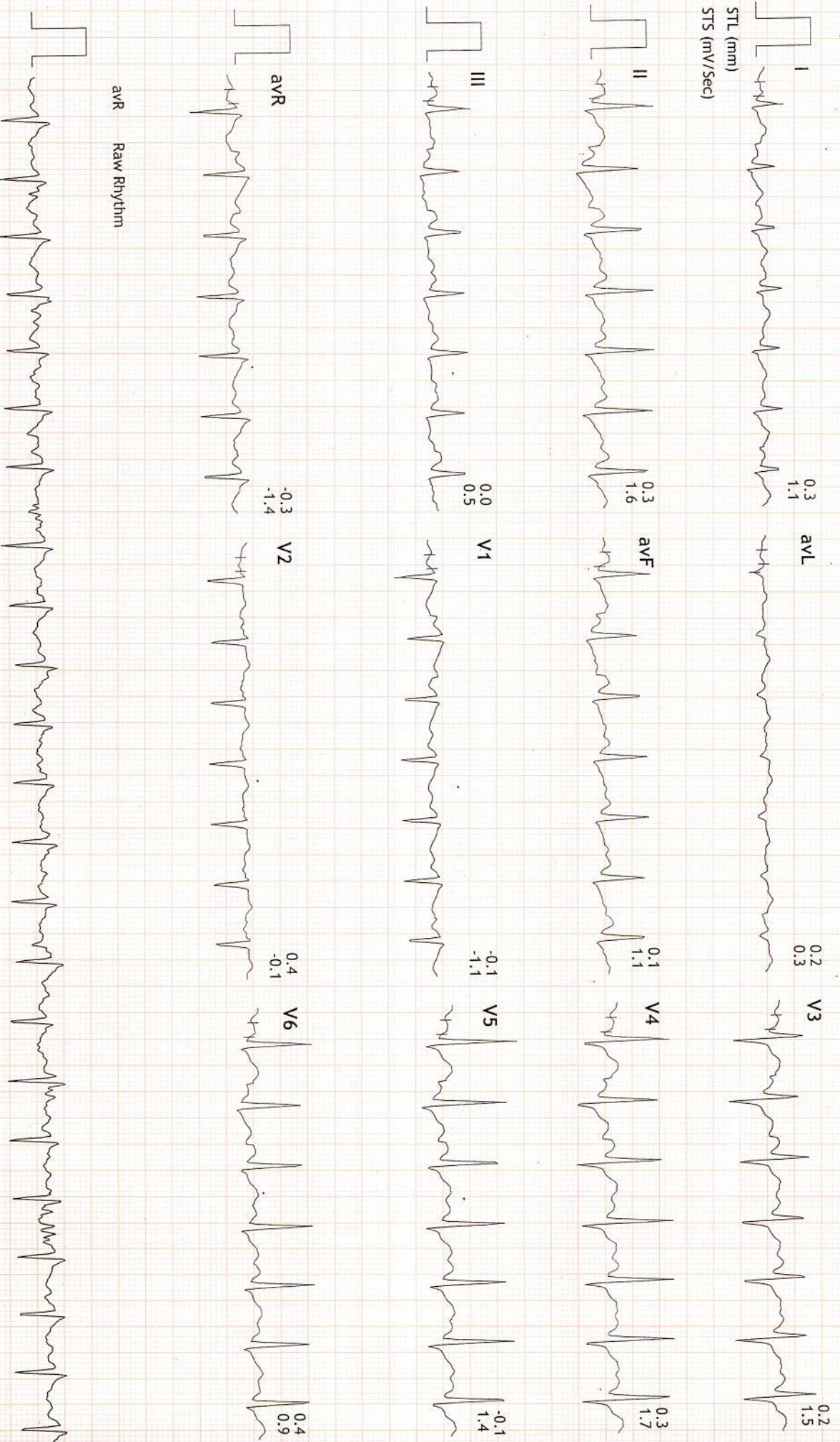
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOJER: 142 bpm  
34 Yrs/Male METS: 7.1  
73 Kg/168 Cms BP: 142/92  
Date: 15-Apr-2022 09:09:40 AM

MPHR: 76% of 186  
Speed: 2.5 mph  
Grade: 12.0%

BRUCE  
(1.0-100)Hz  
Ex Time 06:00  
BLC : On  
Notch : On

Stage 2 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

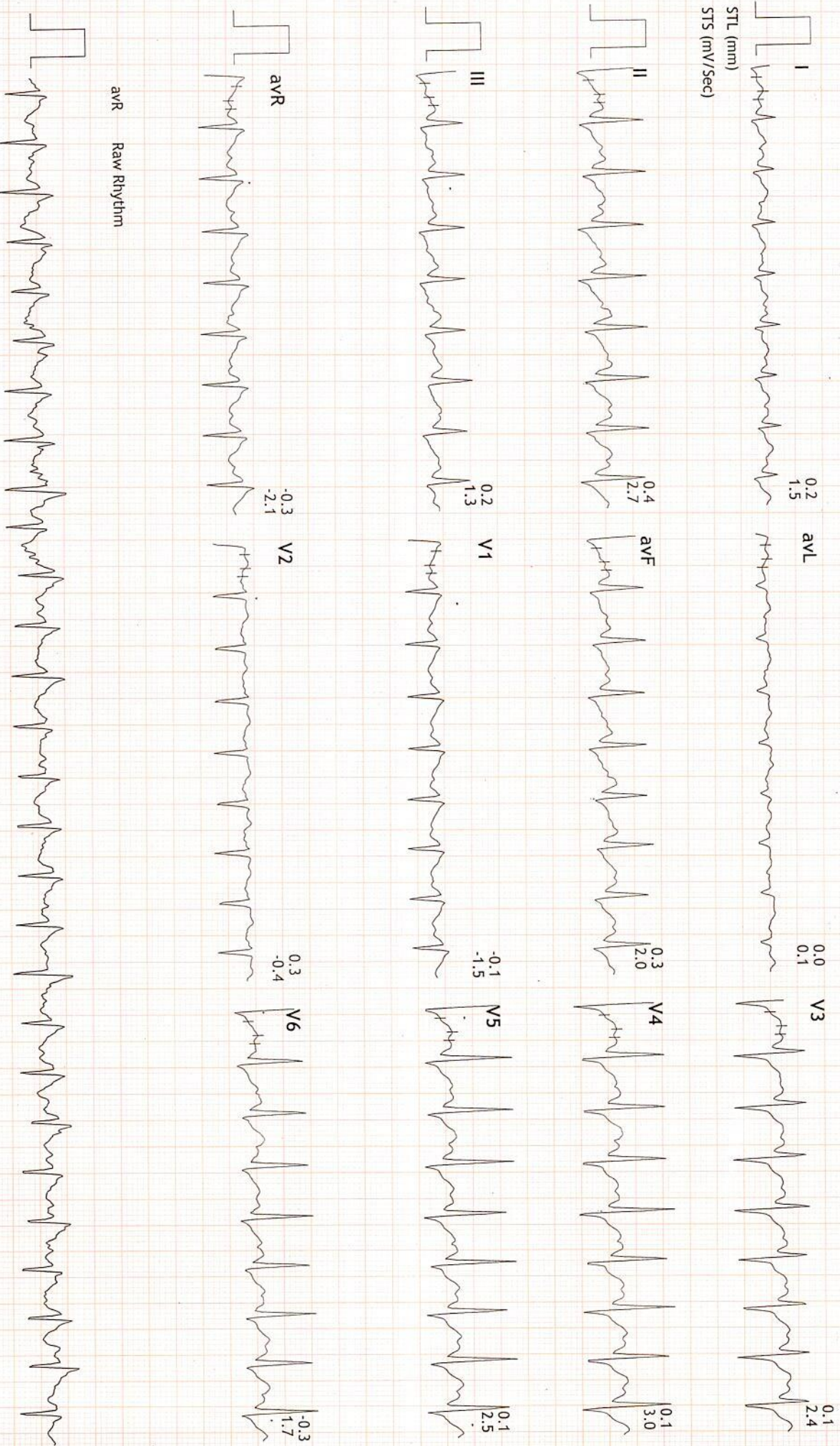
975/SOUVIK KARTIC KOLHER: 168 bpm  
34 Yrs/Male METS: 9.4  
73 Kg/168 Cms BP: 154/102  
Date: 15-Apr-2022 09:09:40 AM

MpHR:90% of 186  
Speed: 3.4 mph  
Grade: 14.0%

BRUCE  
(1.0-100)Hz

Ex Time 08:15  
BLC :On  
Notch :On

PeakX  
10.0 mm/mV  
25 mm/Sec.



avR Raw Rhythm



Linked Medians Report

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANINAGAR (E) Ahm. 08.

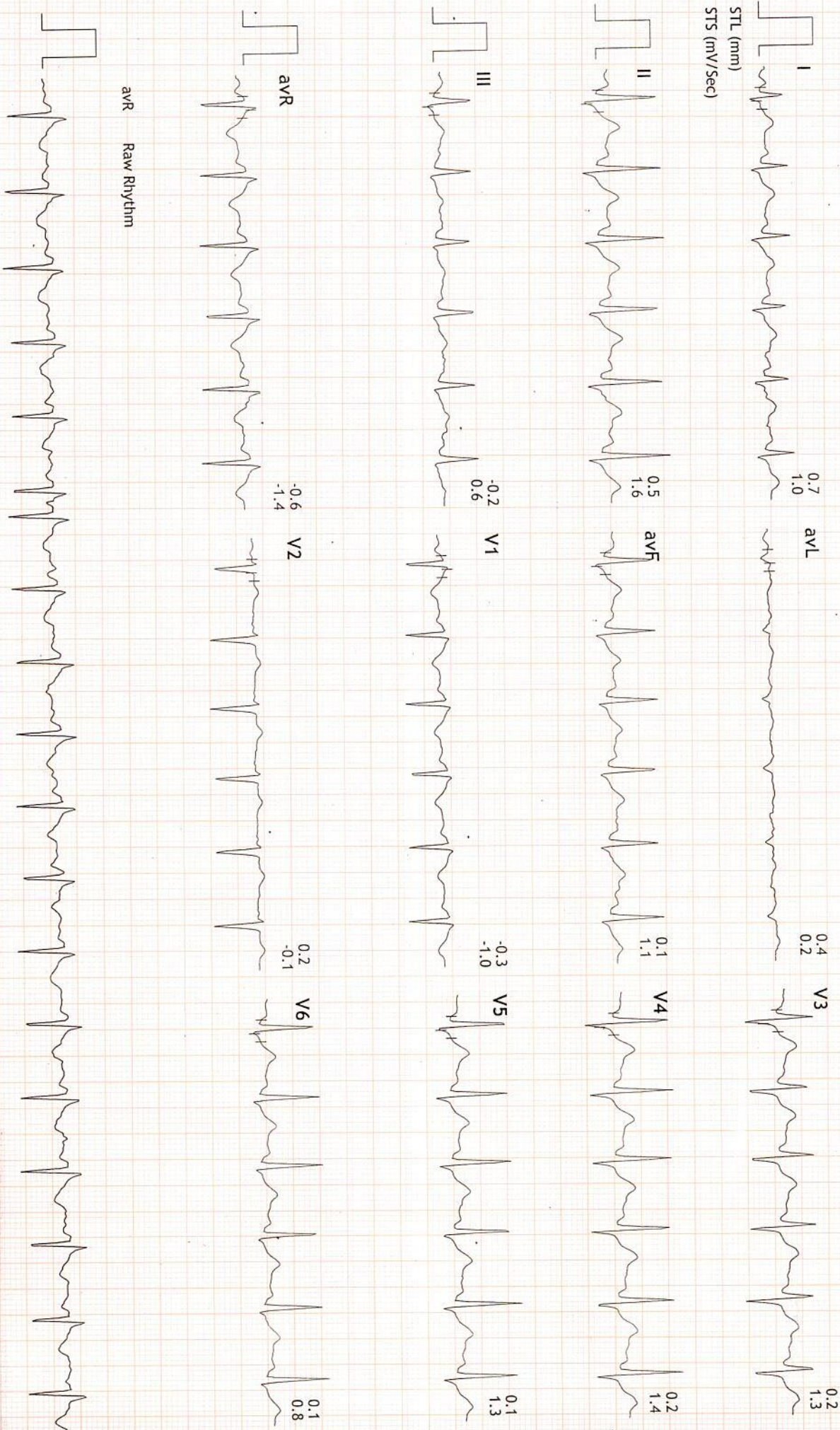
975/SOUVIK KARTIC KOLHER: 109 bpm  
34 Yrs/Male METS: 1.0  
73 Kg/168 Cms BP: 154/102  
Date: 15-Apr-2022 09:09:40 AM

MpHR: 58% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE  
(1.0-100)HZ

Ex Time 08:15  
BLC : On  
Notch : On

Recovery : ( 02:59 )  
10.0 mm/mV  
25 mm/Sec.



avR Raw Rhythm





Linked Medians Report

**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MAINNAGAR (E) Amn. 08.

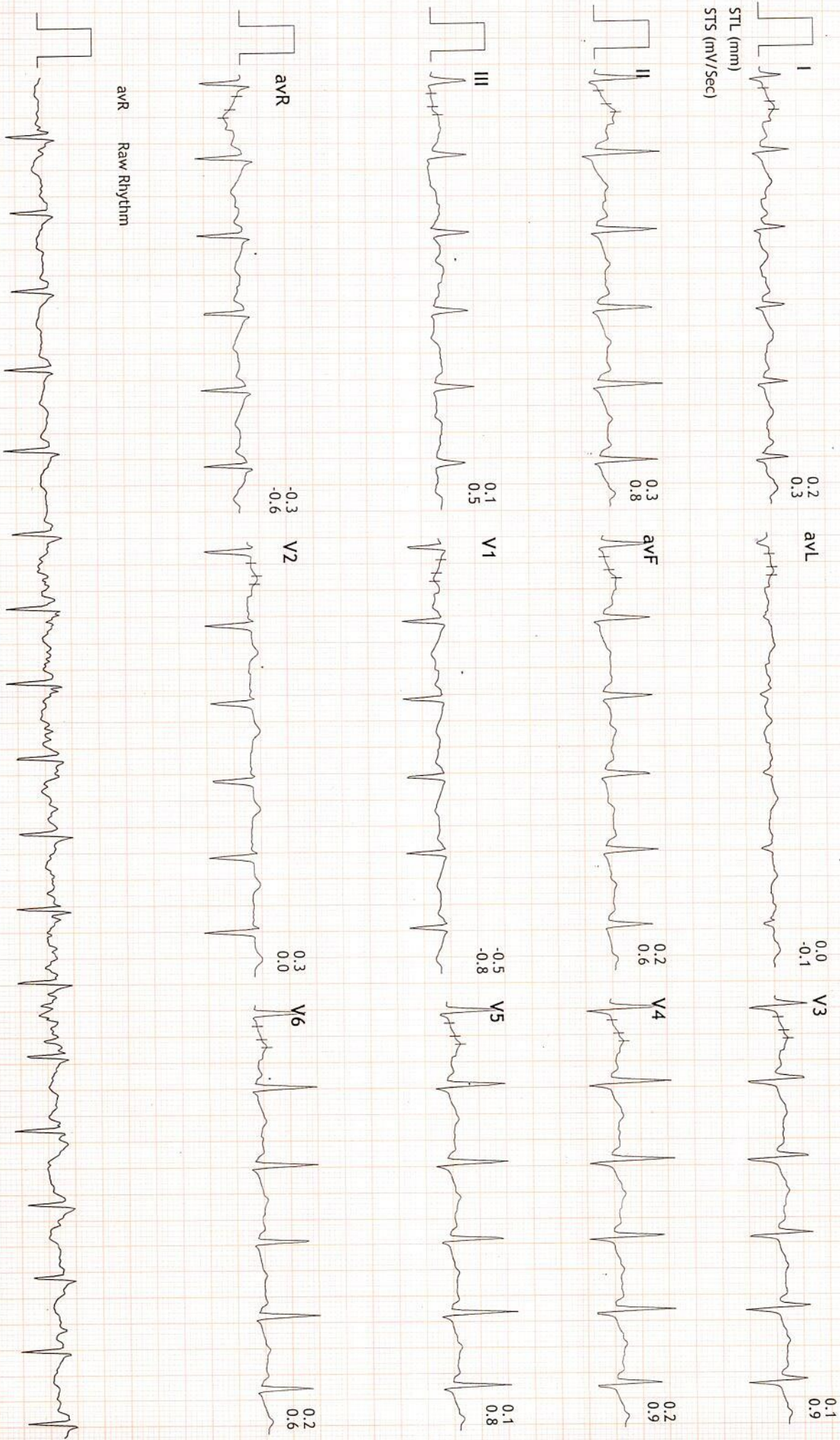
975/SOUVIK KARTIC KOLHER: 104 bpm  
34 Yrs/Male METS: 1.0  
73 Kg/168 Cms BP: 142/96  
Date: 15-Apr-2022 09:09:40 AM

MPHR: 55% of 186  
Speed: 0.0 mph  
Grade: 0.0%

BRUCE  
(1.0-100)Hz

Ex Time 08:15  
BLC : On  
Notch : On

Recovery : ( 05:59 )  
10.0 mm/mV  
25 mm/Sec.





Linked Medians Report

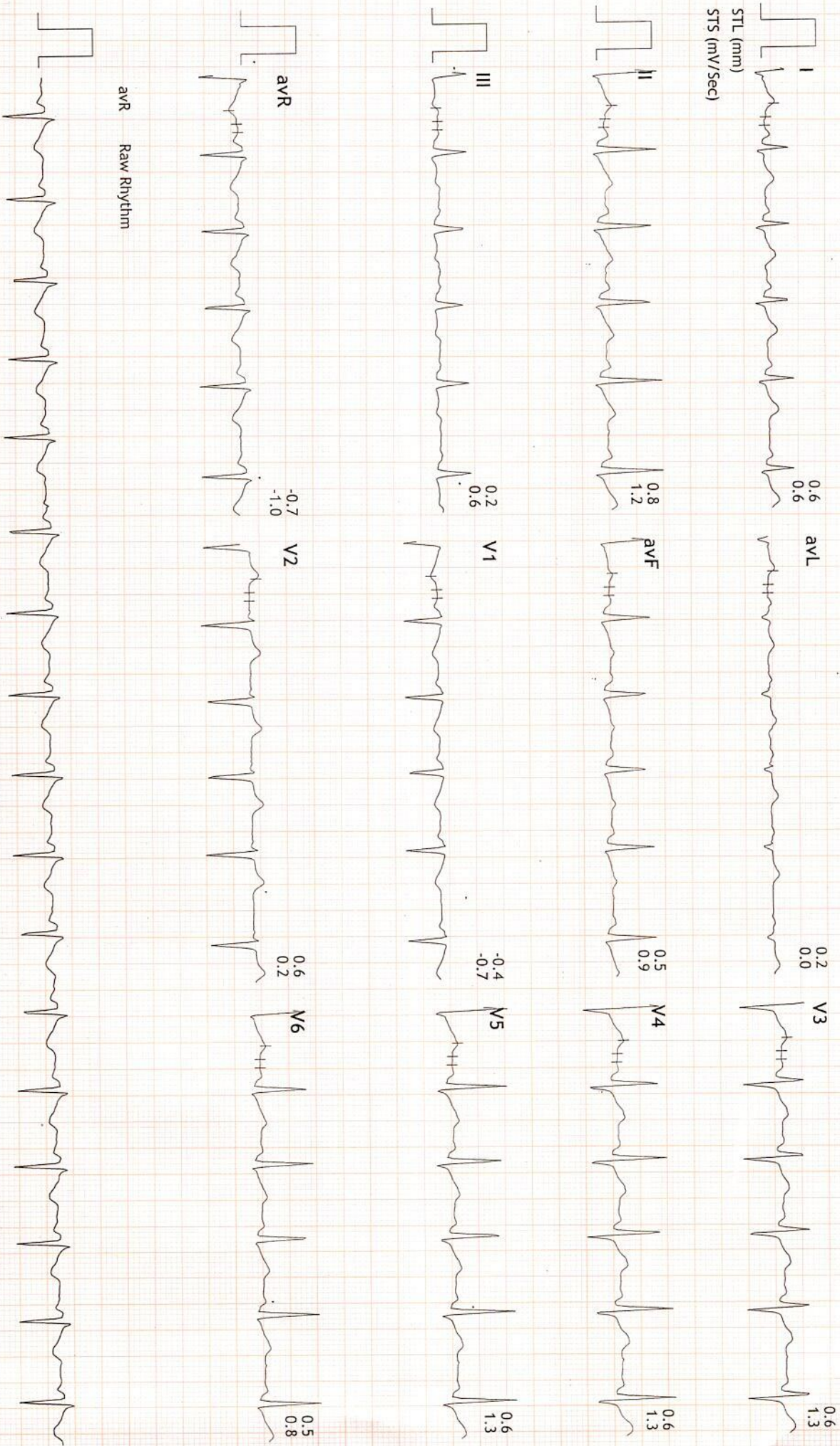
**PRAMUKH MULTI SPECIALITY HOSPITAL**  
NR. RAILWAY CROSSING, MANNINAGAR (E) Ahm. 08.

975/SOUVIK KARTIC KOLIER: 103 bpm  
34 Yrs/Male METS: 1.0  
73 Kg/168 Cms BP: 136/84  
Date: 15-Apr-2022 09:09:40 AM

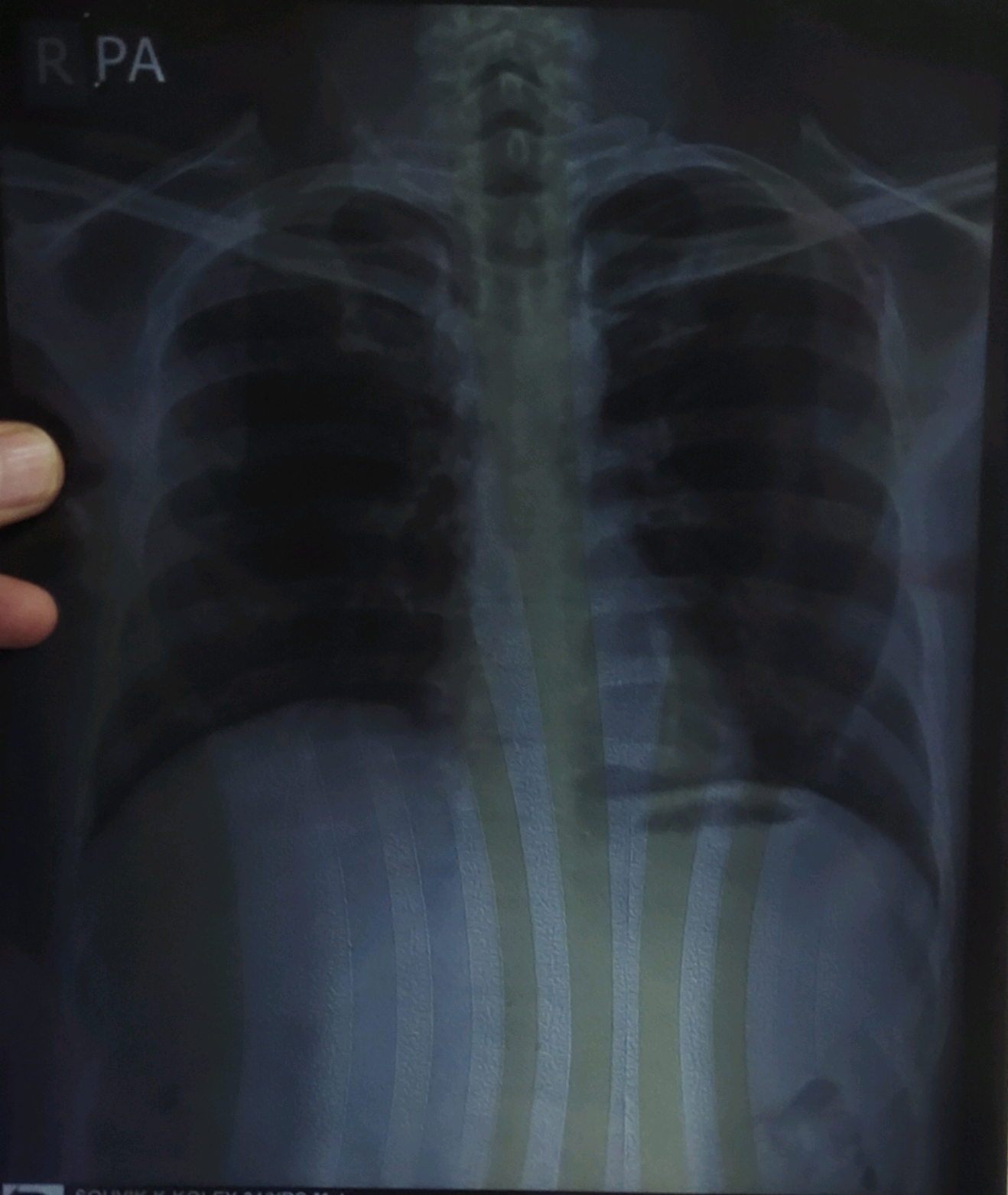
MPHR:55% of 186 BRUCE  
Speed: 0.0 mph (1.0-100)Hz  
Grade: 0.0%

Ex Time 08:15  
BLC :On  
Notch :On

Recovery : ( 08:59 )  
10.0 mm/mV  
25 mm/Sec.



R PA




SOUVIK K KOLEY 34/YRS Male

Chest PA

15/04/2022 10:55:07 AM

SANYA DIAGNOSTICS , MANINAGAR , AHMEDABAD.



 GPS Map Camera



## Ahmedabad, Gujarat, India

Bhawan Avenue, Mansarovar Rd, Ahbab Nagar, Maninagar East, Khokhra, Ahmedabad, Gujarat 380008, India

Lat 22.995184°

Long 72.613652°

15/04/22 09:17 AM



कर्मचारी कूट क्र.  
E.C. No. 168721

नाम | Name SOUVIK KARTIC KOLEY  
सौविक कार्तिक कोले

पदनाम | Designation OFFICER

धारक के हस्ताक्षर  
Signature of Holder

22 / 01 / 2022

जारी करने की तारीख

Date of Issue

जारीकर्ता प्राधिकारी

Issuing Authority





**PRAMUKH**  
**MULTI SPECIALITY**  
**HOSPITAL**

Above ilage Medical Store,  
Nr. Railway Crossing, Maninagar (E)  
Ahmedabad - 380 008.

Patient Name : Souvik Kartic Koley  
Sample No.. : 1531  
Referred : Bank Of Baroda

Age/Sex : 34 Years/Male  
Registration On:15/04/2022/14:01  
Approved On :15/04/2022 17:35

### **THYROID FUNCTIONS**

<b><u>TEST</u></b>	<b><u>RESULT</u></b>	<b><u>UNIT</u></b>	<b><u>NORMAL VALUE</u></b>
Serum T3 :	<b>1.28</b>	ng/dl	0.60 - 1.80 ng/dl
Serum T4 :	<b>8.6</b>	microgm/dl	4.50 - 10.9 microgm/dl
Serum T.S.H :	<b>1.45</b>	microU/ml	0.35 - 5.55 microU/ml

#### **COMMENTS :**

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids.

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 ,FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

During pregnancy clinically T3 T4 can be high and TSH can be slightly low

**PATHOLOGIST**  
**Dr.Satishkumar Patel**  
**M.D.,Patho**  
**Reg No :G-6486**



**PRAMUKH**  
**MULTI SPECIALITY**  
**HOSPITAL**

Above ilage Medical Store,  
Nr. Railway Crossing, Maninagar (E)  
Ahmedabad - 380 008.

Patient Name : Souvik Kartic Koley  
Sample No.. : 1531  
Reffered : Bank Of Baroda

Age/Sex : 34 Years/Male  
Registration On:15/04/2022/14:01  
Approved On :15/04/2022 17:34

## **COMPLETE BLOOD COUNT**

<b>Test</b>		<b>Sample :</b>	<b>Result</b>	<b>Unit</b>	<b>Biological Ref. Interval</b>
<b><u>BLOOD COUNT</u></b>					
Hemoglobin	colorimetric		13.4	g/dL	13 - 17
R.B.C Count	Electrical impedance		6.1	mill/cmm	4.5 - 5.5
W.B.C Count	Electrical impedance		8.4	10 <sup>3</sup> /uL	4.0 - 10.0
Platelet Count	Electrical impedance		337	10 <sup>3</sup> /uL	150 - 450
<b><u>DIFFERENTIAL COUNT</u></b>					
Polymorphs	Microscopic		60	%	60 - 70
Lymphocytes	Microscopic		37	%	20 - 40
Eosinophils	Microscopic		01	%	1 - 6
Monocytes	Microscopic		02	%	2 - 10
Basophils	Microscopic		00	%	0 - 2
<b><u>BLOOD INDISES</u></b>					
HCT	Rbc Histogram		42.5	%	40 - 50
MCV	Calculated		<u>69.7</u>	fl	80 - 100
MCH	Calculated		<u>22</u>	pg	27 - 32
MCHC	Calculated		<u>31.5</u>	g/dl	32 - 36
RDW-CV	Calculated		14.3	%	10 - 16.5

### **PERIPHERAL SMEAR EXAMINATION**

SMEAR RBC Line 1: Normochromic normocytic red cells.

SMEAR Platelets: Adequate

Page 2 of 10

### **Erythrocyte sedimentation rate**

ESR AT 1 hour westergren 10 mm/Hour 00 - 15

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Age/Sex : 34 Years/Male  
Registration On:15/04/2022/14:01  
Approved On :15/04/2022 19:09

**BLOOD GROUP**

<b><u>Test</u></b>	<b><u>Result</u></b>
BLOOD GROUP	: " B "
RH GROUP	: POSITIVE.

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## COMPLETE BLOOD CHEMISTRY

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
S. Cholesterol	: 217.3	mg/dl	Desirable : < 200 Borderline High : 200 - 239 High : > 240
Serum Triglycerides	: 121.9	mg/dl	Normal : Normal < 150 Borderline : 150 - 199 High : > 200
HDL Cholesterol	: 42.5	mg/dl	40 - 60 mg/dl
Serum LDL Cholesterol (Calculated)	: <b>150.42</b>	mg/dl	Up to 150
Cholesterol/HDL Ratio (Calculated)	: <b>5.11</b>	mg/dl	Up to 5.0
Serum VLDL Cholesterol (Calculated)	: 24.38	mg/dl	Up to 35
LDLC/HDL Ratio (Calculated)	: <b>3.54</b>	mg/dl	Up to 3.4
Total Lipid (Calculated)	: 682.12	mg/dl	400 - 1000 mg/dl
Sr. Creatinine	: 0.99	mg/dl	0.6 - 1.2 mg/dl
Sr. Uric Acid	: 4.8	mg/dl	3.2 - 7.2 mg/dl
S. Bilirubin (Total)	: 0.45	mg/dl	up to 1.2
S. Bilirubin (Direct)	: 0.10	mg/dl	up to 0.2
S. Bilirubin (Indirect)	: 0.35	mg/dl	up to 1.0
SGOT	: 29.1	U/L	up to 40
SGPT	: <b>59.2</b>	U/L	up to 42
GGT	: 17.4	U/L	12 - 64
S. Alkaline Phosphatase	: 86.7	U/L	40 - 129
Total Proteins	: 7.51	g/dl	6.0 - 8.3
Albumin	: 4.60	g/dl	3.5 - 5.2
Globulins	: 2.91	g/dl	2.4 - 3.7



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AGRATIO : 1.581

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## **Glycosylated HB - (HBA1C)**

<b><u>Test</u></b>	<b><u>Result</u></b>	<b><u>Unit</u></b>	<b><u>Biological Ref Interval</u></b>
<b>HBA1C:</b> (Immunoturbidimetric)	4.9	%	Normal : $\leq 5.6$ Prediabetes : 5.7 - 6.4 Diabetes : $\geq 6.5$ <b><u>DIABETES CONTROL CRITERIA</u></b> 6 - 7 : Near Normal Glycemia < 7 : Goal 7 - 8 : Good Control > 8 : Action Suggested
<b>Mean Blood Glucose:</b>	<b>93.93</b>	<b>mg/dl</b>	

### **Criteria for the diagnosis of diabetes**

1. HbA1c  $\geq 6.5$  \*  
Or
2. Fasting plasma glucose  $>126$  gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.  
Or
3. Two hour plasma glucose  $\geq 200$ mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.  
Or.
4. 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.

#### Limitation of HbA1c

- 1) In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population. 2) Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values. 3) Glycated HbF is not detected by this assay and hence specimens containing high HbF ( $>10\%$ ) may result in lower HbA1c values than expected.

Page 6 of 10

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**PROSTATE SPECIFIC ANTIGEN**

<b><u>Test</u></b>	<b><u>Result</u></b>	<b><u>Normal Range</u></b>
PSA	: 0.42 ng/ml	Less than 4.0ng/ml

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## **BLOOD SUGAR LEVEL**

Specimen :

<b><u>Test</u></b>	<b><u>Result</u></b>	<b><u>Unit</u></b>	<b><u>Biological Ref. Interval</u></b>
<b>Fasting Blood Sugar:</b> (GOD-POD)	79.7	mg/dl	70-110
<b>Post Prandial Blood Glucose: 101</b> (GOD-POD)		mg/dl	100 - 150

American Diabetes Association Reference Range :  
Normal : < 100 mg/dl  
Impaired fasting glucose(Prediabetes) : 100 - 126 mg/dl  
Diabetes : >= 126 mg/dl

Conditions that can result in an elevated blood glucose level include: Acromegaly, Acute stress (response to trauma, heart attack, and stroke for instance), Chronic kidney disease, Cushing syndrome, Excessive consumption of food, Hyperthyroidism, Pancreatitis. A low level of glucose may indicate hypoglycemia, a condition characterized by a drop in blood glucose to a level where first it causes nervous system symptoms (sweating, palpitations, hunger, trembling, and anxiety), then begins to affect the brain (causing confusion, hallucinations, blurred vision, and sometimes even coma and death). A low blood glucose level (hypoglycemia) may be seen with: Adrenal insufficiency, Drinking excessive alcohol, Severe liver disease, Hypopituitarism, Hypothyroidism, Severe infections, Severe heart failure, Chronic kidney (renal) failure, Insulin overdose, Tumors that produce insulin (insulinomas), Starvation.

Page 8 of 10

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## URINE EXAMINATION

### PHYSICAL :

Colour - **Pale Yellow**  
Deposits - **Absent**  
Transparency - **Clear**  
Reaction - **Acidic**  
Sp. Gravity - **1.005**

### CHEMICAL :

Albumin - **Absent**  
Sugar - **Absent**  
Bile Salts - **Absent**  
Bile Pigments - **Absent**

### MICROSCOPIC: ( After centrifugation at 2000 r.p.m. for 5 minutes )

Pus Cells - **Not seen** /h.p.f.  
Red Cells - **Not seen** /h.p.f.  
Epithelial Cells - **2 - 3** /h.p.f.  
Casts - **Not seen**/l.p.f.  
Crystals - **Not seen**  
Amorphous - **Not seen**



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**BLOOD UREA NITROGEN**

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
Urea:	13.1	mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen:	<u>6.12</u>	mg/dl	08 - 23 mg/dl

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