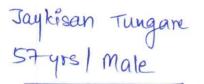
🔰 Siddhivinayak Hospital

Hosp. Reg. No.: TMC - Zone -386



24/02/2024

No fresh complaints No comosbialities No PIH No SIH. FIH - mother Jexpired due to father-J old age

> BP-110/20 marty P-100/win SPO2-98%.

It is fit and can resume his noanal during,

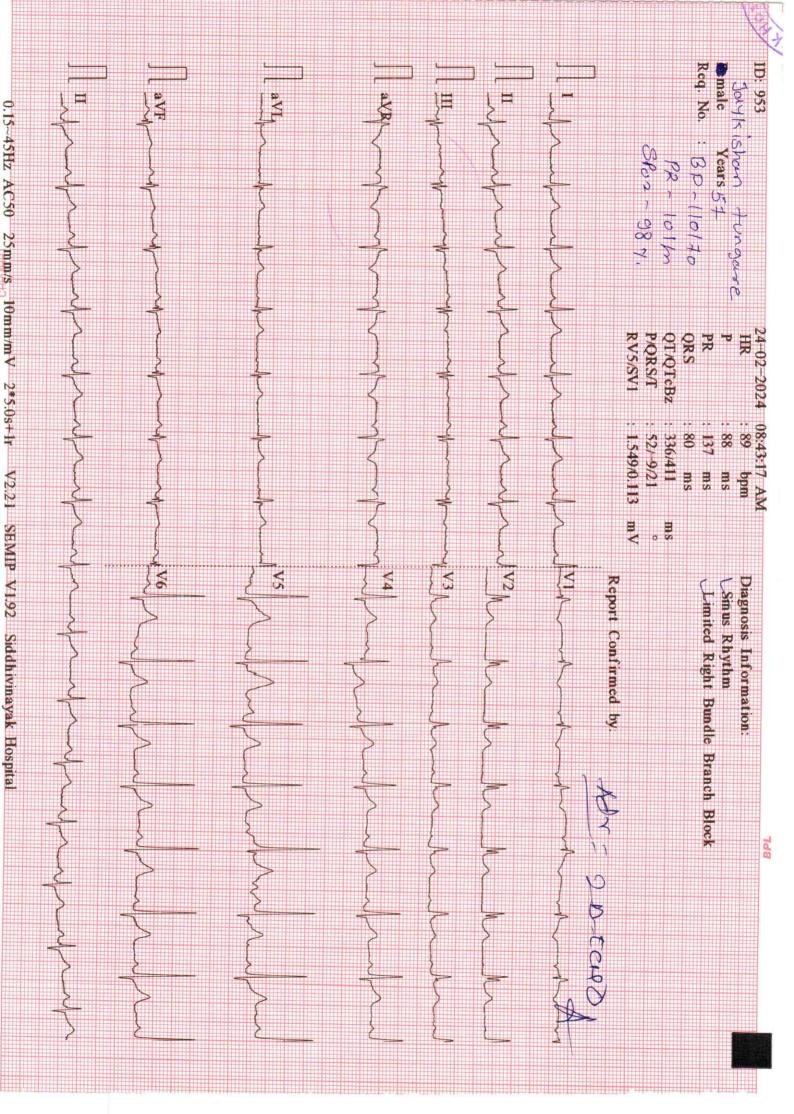
Censult with physician for blood changes blood Sugar saised, Chalesterry Mg





022 - 2588 3531 S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606 www.siddhivinayakhospitals.org





OPTHAL CHECK UP SCREENING

- 3TAO

NAME OF EMPLOYEE

AGE

JAYKISAN TUNGARE

24.02.2024

Spects : Without Glasses

25

Color Blind Test	NORMAL	
TNAT2IO	9/9	9/9
ЯАЗИ	8T/N	9ɛ/N
	RT Eye	Lt Eye



SIDDHIVINAYAK HOSPITALS



Siddhivinayak Hospital

Sonography | Colour Doppler | 3D / 4D USG

Ref by Dr Siddhivinayak Hospital	- əte -	\$24/02/2024
Name – Mr. Jaikishan Tungare	- 9 <mark>8</mark> A	W/X ZS

USG ABDOMEN & PELVIS

- :SONIGNI

The **liver** dimension is normal in size. It appears normal in morphology with **raised echogenicity**. No evidence of intrahepatic ductal dilatation.

The **GB**-gallbladder is distended normally. Wall thickness is normal.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The spleen is normal in size (7.8 cm) and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 8.7 x 4.7cm.

The left kidney measures 8.6 x 4.3 cm.

Urinary bladder: -normally distended. Wall thickness - normal.

Prostate is enlarged in size: 38.0 gms

No free fluid is seen.

-:NOISS384MI

- Fatty liver (Grade I).
- Prostatomegaly.



DR. AMOL BENDRE MBBS; DMRE CONSULTANT RADIOLOGIST













Date - 24/02/2024	Ref by Dr Siddhivinayak hospital
$M \setminus Y \setminus S$ -9gA	Vame – Mr. Jaikishan Tungare

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

.nəəs si noisəl ynod suoivdo oN

IMPRESSION:

No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. AMOL BENDRE MBBS; DMRE CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.



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Siddhivinayak Hospital

Sonography | Colour Doppler | 3D / 4D USG

ECHOCARDIOGRAM

NOLLE OF EXAMINATION	t205/207 <i>t</i>
KEFERRED BY	TVLIdSOH XVAVNIAIHOOIS
VCE/SEX	W/SHA LS
AAME	MR. JAIKISHAN TUNGARE

2D/M-MODE ECHOCARDIOGRAPHY

ERICARDICM: Normal	1
EBIC V BUILT VI VICE	brewowyby veinal Pormal
SVC: Normal IVC: Normal and collapsing >20% with respiration	CORONARY SINES: Normal
ERACAYAE:	COBONABLES: Proximal coronaries normal
• INS: Intact • IVIS: Intact	butwonverververververververververververververv
EPTAE:	
Contraction: Normal Contraction: Normal	
SICHL AENLBICE: Notinal	LBICORBID AVEAE: Notitial
SICHT ATRUM: Normal	PULLMONARY VALVE: Normal
Contraction: Normal	• No. of cusps: 3
• BANNY: NO	VOBLIC AVEAE: Notitial
TELL AEMIKICTE: NOLUISI	1 Inoscha (yiimrofob trainview-duc •
	BML: Normal
 Left atrial appendage: Normal 	• AML: Vormal
TEET ATRIUM: Normal	
CHVMBERS:	ĀVĒĀEZ [;]

WEASUREMENTS:

BIGHT VENTRICLE STUDY		ICLE STUDY	LEFT VENTRI	VLNOV	
AVECAE OBSEBAED	PARAMETER	AVERE OBSEBAED	равалетев	AVERE OBSEBAED	PARAMETER
uuu	Right atrium	uuu EE	Left atrium	mm 02	sulunns sittor
шш	(926d) bVA	mm 8.14	ΓΛΙD9	เนเน	sunis situs
%	BAEF	um 9.92	raids.	աա	noitonular junction
uitti	TAPSE	uuu 6.8	PSAI	աա	stros guibnoos/
<u>uu</u>	VdW	uuu 6.8	PANdAT	աա	stron to don't
шш	RVOT	% 29	LAEF	шш	esc. thoracic aorta
mm 0.41	JAI	uuu	LOAT	utu	stros IsnimobdA





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COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	
	MR. JAIKISHAN TUNGARE
AGE/SEX	57 YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	24 /02/2024

FLOW VELOCITY (m/s)	MITRAL	TRICUSPID	AORTIC	PULMONARY
PPG (mmHg)	-		1.24	
MPG (mmHg)				1.01
VALVE AREA (cm ²)			-	
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/				
DECELERATION TIME (ms)				
PHT (ms)				
VENA CONTRACTA (mm)	-			
REGURGITATION				
		TRJV= m/s PASP= mmHg		
E/A		mining		
E/E'	1.15	_		
	9.5			

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 67%)
 Good RV systolic function
- Good RV systolic function
 Normal diastolic function
- Normal diastolic function
- All cardiac valves are normal
 All cardiac about
- All cardiac chambers are normal
- IAS/IVS intact
 No pericardial
- No pericardial effusion/ clot/vegetations

ADVICE: Nil

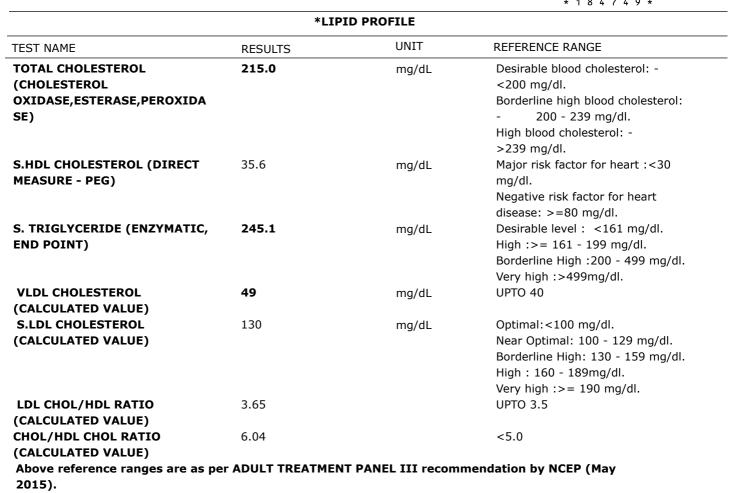
ECHOCARDIOGRAPHER: Dr. ANANT MUNDE DNB, DM (CARDIOLOGY) INTERVENTIONAL CARDIOLOGIST

Dr. Anant Ramkishanrao Munde MBBS, DNB, DM (Cardiology) Peg. No. 2005021222





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
Lab ID.	[:] 184749	Received On	: 24/2/2024 11:13 am
Age/Sex	: 57 Years / Male	Reported On	: 24/2/2024 6:20 pm
Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL



Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By Priyanka Deshmukh



DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 1 of 13





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL

COMPLETE BLOOD COUNT				
TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
HEMOGLOBIN	14.8	gm/dl	13 - 18	
HEMATOCRIT (PCV)	44.4	%	42 - 52	
RBC COUNT	5.16	x10^6/uL	4.70 - 6.50	
MCV	86	fl	80 - 96	
MCH	28.7	pg	27 - 33	
MCHC	33	g/dl	33 - 36	
RDW-CV	13.5	%	11.5 - 14.5	
TOTAL LEUCOCYTE COUNT	8200	/cumm	4000 - 11000	
DIFFERENTIAL COUNT				
NEUTROPHILS	60	%	40 - 80	
LYMPHOCYTES	29	%	20 - 40	
EOSINOPHILS	05	%	0 - 6	
MONOCYTES	06	%	2 - 10	
BASOPHILS	00	%	0 - 1	
PLATELET COUNT	294000	/ cumm	150000 - 450000	
MPV	10.6	fl	6.5 - 11.5	
PDW	16	%	9.0 - 17.0	
PCT	0.310	%	0.200 - 0.500	
RBC MORPHOLOGY WBC MORPHOLOGY PLATELETS ON SMEAR	Normocytic Normochromi Normal Adequate	c		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By SHAISTA Q



184749

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 2 of 13





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Ref By	SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	

URINE ROUTINE EXAMINATION				
TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
URINE ROUTINE EXAMINATION				
PHYSICAL EXAMINATION				
VOLUME	30ml			
COLOUR	Pale Yellow		Pale Yellow	
APPEARANCE	Clear		Clear	
CHEMICAL EXAMINATION				
REACTION	Acidic		Acidic	
(methyl red and Bromothymol blue ind	licator)			
SP. GRAVITY	1.010		1.005 - 1.022	
(Bromothymol blue indicator)				
PROTEIN	Absent		Absent	
(Protein error of PH indicator)				
BLOOD	Absent		Absent	
(Peroxidase Method)				
SUGAR	Absent		Absent	
(GOD/POD)				
KETONES	Absent		Absent	
(Acetoacetic acid)				
BILE SALT & PIGMENT	Absent		Absent	
(Diazonium Salt)				
UROBILINOGEN	Normal		Normal	
(Red azodye)				
LEUKOCYTES	Absent		Absent	
(pyrrole amino acid ester diazonium sa	llt)			
NITRITE	Absent		Negative	
(Diazonium compound With tetrahydro	benzo quinolin 3-phenol)			
MICROSCOPIC EXAMINATION				
RED BLOOD CELLS	Absent	/ HPF	Absent	
PUS CELLS	1-3	/ HPF	0 - 5	
EPITHELIAL	0-2	/ HPF	0 - 5	
CASTS	Absent			

Checked By

Priyanka_Deshmukh



* 1 8 4 7 4 9 *

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Page 3 of 13





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Ref By	SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL
Rei by	SIDDINANANAN NOSENAL CONSTLUSION		



TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		
REMARK	Result relates to s	ample tested. Kindly	correlate with clinical findings.
Result relates to sample tested, Kindly correlate with clinical findings.			

----- END OF REPORT ------

Checked By Priyanka_Deshmukh



* 1 8 4 7 4 9 *

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Page 4 of 13



COMPLETE PATHOLOGICAL SOLUTION

Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
Lab ID.	: 184749	Received On	_: 24/2/2024 11:13 am
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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL

IMMUNO ASSAY					
TEST NAME		RESULTS		UNIT	REFERENCE RANGE
TFT (THYROID	D FUNCTION T	<u>EST)</u>			
SPACE				Space	-
SPECIMEN		Serum			
Т3		164.6		ng/dl	84.63 - 201.8
T4		9.74		µg/dl	5.13 - 14.06
TSH		2.22		µIU/ml	0.270 - 4.20
T3 (Triido Thyr hormone)	onine)	T4 (Thyroxine	e)	TSH(Th	nyroid stimulating
AGE	RANGE	AGE	RANGES	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6	0-14 D	ays 1.0-39
1-11 months	105-245	1-2 weeks	9.9-16.6	2 wks -	5 months 1.7-9.1
1-5 yrs	105-269	1-4 months	7.2-14.4	6 mon	ths-20 yrs 0.7-6.4
6-10 yrs	94-241	4 -12 months	7.8-16.5	Pregna	ancy
11-15 yrs	82-213	1-5 yrs	7.3-15.0	1st Tr	imester
0.1-2.5					
15-20 yrs	80-210	5-10 yrs	6.4-13.3	2nd T	rimester
0.20-3.0		·			
		11-15 yrs	5.6-11.7	3rd T	Trimester

0.30-3.0

INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By Priyanka_Deshmukh



* 1 8 4 7 4 9 *

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Page 5 of 13





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL

HAEMATOLOGY				
TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
BLOOD GROUP				
SPECIMEN	WHOLE BLOOD E	DTA & SERUM		
* ABO GROUP	'AB'			
RH FACTOR POSITIVE				
Method: Slide Agglutination	and Tube Method (Forward gro	ouping & Reverse gro	ouping)	
Result relates to samp	le tested, Kindly correlate with	clinical findings.		
		OF DEDODT		

----- END OF REPORT ------

Checked By Priyanka_Deshmukh



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Page 6 of 13





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	*RENAL	FUNCTION TEST	* 0 4 / 4 7 *
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA	30.5	mg/dL	18 - 55
(Urease UV GLDH Kinetic)	50.5	ing/uL	10 00
BLOOD UREA NITROGEN	14.25	mg/dL	5 - 20
(Calculated)	11125	ing, at	5 20
S. CREATININE	0.84	mg/dL	0.6 - 1.4
(Enzymatic)		ing, at	
S. URIC ACID	6.4	mg/dL	3.5 - 7.2
(Uricase)	-	. 57	
S. SODIUM	141.2	mEq/L	137 - 145
(ISE Direct Method)		-17	
S. POTASSIUM	4.26	mEq/L	3.5 - 5.1
(ISE Direct Method)		,	
S. CHLORIDE	103.2	mEq/L	98 - 110
(ISE Direct Method)			
S. PHOSPHORUS	3.45	mg/dL	2.5 - 4.5
(Ammonium Molybdate)			
S. CALCIUM	9.7	mg/dL	8.6 - 10.2
(Arsenazo III)			
PROTEIN	6.6	g/dl	6.4 - 8.3
(Biuret)			
S. ALBUMIN	4.12	g/dl	3.2 - 4.6
(BGC)			
S.GLOBULIN	2.48	g/dl	1.9 - 3.5
(Calculated)			
A/G RATIO	1.66		0 - 2
calculated			
NOTE	BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.		

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By Priyanka_Deshmukh

Sum

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Page 7 of 13



Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.
	Neutrophils:60 %
	Lymphocytes:30 %
	Monocytes:05 %
	Eosinophils:05 %
	Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.
Result relates to sample teste	d, Kindly correlate with clinical findings.
	END OF REPORT

Checked By SHAISTA Q



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Page 8 of 13





Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL
-			

LIVER FUNCTION TEST						
TEST NAME RESULTS UNIT REFERENCE RANGE						
TOTAL BILLIRUBIN	0.40	mg/dL	0.1 - 1.2			
(Method-Diazo)						
DIRECT BILLIRUBIN	0.12	mg/dL	0.0 - 0.4			
(Method-Diazo)						
INDIRECT BILLIRUBIN	0.28	mg/dL	0 - 0.8			
Calculated						
SGOT(AST)	20.3	U/L	0 - 37			
(UV without PSP)						
SGPT(ALT)	19.5	U/L	UP to 40			
UV Kinetic Without PLP (P-L-P)						
ALKALINE PHOSPHATASE	53.1	U/L	53 - 128			
(Method-ALP-AMP)						
S. PROTIEN	6.45	g/dl	6.4 - 8.3			
(Method-Biuret)						
S. ALBUMIN	4.11	g/dl	3.5 - 5.2			
(Method-BCG)						
S. GLOBULIN	2.34	g/dl	1.90 - 3.50			
Calculated						
A/G RATIO	1.76		0 - 2			
Calculated						

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By Priyanka_Deshmukh

Sum

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) Consultant Histocytopathologist

Page 9 of 13



COMPLETE PATHOLOGICAL SOLUTION

Collected On : 24/2/2024 11:03 am Name : Mr. JAIKISHAN TUNGARE (A) . 24/2/2024 11:13 am Lab ID. **Received On** : 184749 **Reported On** : 24/2/2024 6:20 pm Age/Sex : 57 Years / Male **Report Status** : FINAL **Ref By** : SIDDHIVINAYAK HOSPITAL CGHS /ESIS



TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	11	mm/1hr.	0 - 20

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By Priyanka_Deshmukh



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Page 10 of 13



COMPLETE PATHOLOGICAL SOLUTION

Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Age/Sex	: 57 Years / Male	Reported On	: 24/2/2024 6:20 pm
5	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL
Ref By	· SIDDHIVINATAK HOSPITAL CORS /ESIS /		

BIOCHEMISTRY				
TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
GAMMA GT	63.1	U/L	13 - 109	
BLOOD GLUCOSE FASTING & PP				
BLOOD GLUCOSE FASTING	133.2	mg/dL	70 - 110	
BLOOD GLUCOSE PP	155.7	mg/dL	70 - 140	

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.

2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

***Any positive criteria should be tested on subsequent day with same or other criteria.

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED	7.2	%	Hb A1c
HAEMOGLOBIN)			> 8 Action suggested
			< 7 Goal
			< 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B.	159.9	mg/dL	NON - DIABETIC : <=5.6
G.)			PRE - DIABETIC : 5.7 - 6.4
			DIABETIC : >6.5

METHOD

Particle Enhanced Immunoturbidimetry

Checked By Priyanka Deshmukh

m ···· DR. SMITA RANVEER.

M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 11 of 13



	COMPLETE PATHOLOGICAL SOLUTIC	COMPLETE PATHOLOGICAL SOLUTION			
Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am		
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Age/Sex	: 57 Years / Male	Reported On	: 24/2/2024 6:20 pm		
Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: FINAL		

BIOCHEMISTRY					
TEST NAME	RESULTS	UNIT	REFERENCE RANGE		

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By Priyanka_Deshmukh



184749

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Page 12 of 13



COMPLETE	PATHOLOGICAL	SOLUTION

Name	: Mr. JAIKISHAN TUNGARE (A)	Collected On	: 24/2/2024 11:03 am
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Age/Sex	: 57 Years / Male	Reported On	: 24/2/2024 6:20 pm
Ref By	SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	



REPORT ON IMMUNOLOGYTEST NAMERESULTSUNITREFERENCE RANGEPSA (PROSTATE SPECIFIC
ANTIGEN)(TOTAL)
(CLIA)2.772ng/ml0 - 4INTERPRETATION:VVV

Increased levels are noted in prostate cancer, benign prostatic hypertrophy, prostatitis **Result relates to sample tested, Kindly correlate with clinical findings.**

----- END OF REPORT -----

Checked By Priyanka_Deshmukh



DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) Consultant Histocytopathologist

Page 13 of 13