

Patient ID	1224505		Specimen	WB-EDTA
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:12

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

Complete Blood Count with ESR (CBC+ESR)
Complete Blood Count (CBC)

Automation+ Manual

Hemoglobin (Hb) Colorimetric Method	10.0	g/dL	13.0 - 17.0
Total Leucocyte Count (TLC) Flow Cytometry method	6290	cells/uL	4000 - 10000
Erythrocyte Count (RBC Count) Electric Impedance method	4.50	10 ⁶ /uL	4.50 - 5.50
Packed Cell Volume (PCV) Calculated	31.0	%	40.0 - 50.0
Mean Corpuscular Volume (MCV) Calculated	68.9	fL	83.0 - 101.0
MCH (Mean Corp Hb) Calculated	22.2	pg	27.0 - 32.0
MCHC (Mean Corp Hb Conc) Calculated	32.3	gm/dL	31.5 - 34.5
Platelet Count Electric Impedance Method	150.00	10 ³ /uL	150.00 - 450.00
RDW (CV) Calculated	16.2	%	11.5 - 14.0
MPV Calculated	13.1	fL	9.1 - 11.9
PCT calculated	0.16	%	0.18 - 0.39
PDW-SD calculated	15.1	fL	9.0 - 15.0

Differential Leucocyte Count (DLC)

Automation+Manual

Neutrophil Laser Flow Cytometry & Microscopy	60	%	40 - 70
Lymphocyte Laser Flow Cytometry & Microscopy	31	%	20 - 45
Eosinophil Laser Flow Cytometry & Microscopy	04	%	01 - 07



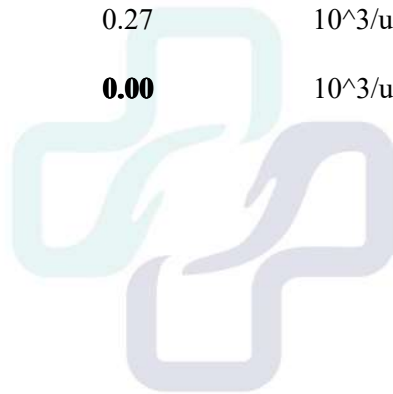
Dr. Sankarsan Bhaduri
 M.B.B.S, M.D (Pathology)
 Consultant Pathologist

Page No: 1 of 13



Patient ID	1224505		Specimen	WB-EDTA
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:15

Test Name	Value	Unit	Biological Ref Interval
Monocyte Laser Flow Cytometry & Microscopy	05	%	00 - 10
Basophil Laser Flow Cytometry & Microscopy	00	%	00 - 01
Absolute Neutrophils Count (ANC) Calculated	3.75	10 ³ /uL	2.00 - 7.00
Absolute Lymphocytes Count (ALC) Calculated	1.96	10 ³ /uL	1.00 - 3.00
Absolute Monocytes Count (AMC) Calculated	0.31	10 ³ /uL	0.20 - 1.00
Absolute Eosinophil Count (AEC) Calculated	0.27	10 ³ /uL	0.02 - 0.50
Absolute Basophil count (ABC) Calculated	0.00	10 ³ /uL	0.02 - 0.10



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Patient ID	1224505		Specimen	WB-EDTA
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:17

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

Erythrocyte Sedimentation Rate (ESR) <small>Automated</small>	18	mm/1st hr.	00 - 20
--	----	------------	---------

Blood Grouping (A,B,O) and Rh Factor

Tube method

Blood Group ABO <small>Tube Agglutination</small>	A
--	---

Rh Typing <small>Tube Agglutination</small>	POSITIVE
--	----------



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist

Patient ID	1224505		Specimen	WB-EDTA
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:19

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

Glycosylated Hemoglobin (HbA1C)

HbA1C	4.8	%
Estimated average plasma Glucose	91	%

Interpretation:

As per American Diabetes Association (ADA)

Reference Group	HbA1c in %
Non diabetic adults ≥ 18 years	< 5.7
At risk (Prediabetes)	5.7-6.4
Diagnosing Diabetes	≥ 6.5
Therapeutic goals for glycemic control	Age > 19 years: Goal of therapy: < 7.0 Age < 19 years: Goal of therapy: < 7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
2. Target goals of $< 7.0\%$ may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of $< 7.0\%$ may not be appropriate.

Comments:

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long-term glycemic control as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c (%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212
10	240
11	269
12	298



S. Bhaduri.

Dr. Sankarsan Bhaduri
 M.B.B.S, M.D (Pathology)
 Consultant Pathologist

Patient ID	1224505		Specimen	Serum
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:20

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

BIOCHEMISTRY

Lipid Profile

Cholesterol - Total Spectro-photometry	129.0	mg/dl	Desirable = < 200 Borderline = 200-239 High Cholesterol = = 240 Child Desirable = < 170 Borderline = 170-199 High Cholesterol = >199
Triglycerides (TG) Glycerol/Peroxidase	96.0	mg/dl	0.0 - 161.0 High : 161-199 Hypertriglyceridemic : 200-499 Very High : > 499
Cholesterol - HDL Spectro-ophotometry	28.0	mg/dl	35.3 - 79.5
Cholesterol - LDL Spectro-photometry	81.8	mg/dl	60.0 - 130.0 Borderline High : 130 - 159 High : > 160
VLDL Cholesterol Calculated	19.2	mg/dl	4.7 - 22.1
Serum Total / HDL Cholesterol Ratio Calculated	4.61		4.50 - 6.00
Serum LDL / HDL Cholesterol Ratio Calculated	2.92		0.00 - 3.50

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol vary with age. Values above 220 mg/dl are associated with increased risk of CHD regardless of HDL & LDL values.

TRIGLYCERIDE level >250 mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of TRIGLYCERIDE can be seen in obesity, medication, fast less than 12 hrs., alcohol intake, diabetes mellitus, and pancreatitis.

HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels



S. Bhaduri.
Dr. Sankarsan Bhaduri
 M.B.B.S, M.D (Pathology)
 Consultant Pathologist

Page No: 5 of 13

Patient ID	1224505		Specimen	Serum
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:24

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

of cholesterol and LDL-cholesterol.

LDL-CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL- cholesterol ratio, patients may be divided into three risk categories:

	<u>CHOLESTEROL</u>	<u>LDL-CHOLESTEROL</u>	<u>CHO/HDL RATIO</u>
Acceptable/Low Risk	<200 mg/dL.	<130 mg/dL.	< 4.5
Borderline High Risk	200-239 mg/dL.	130-159 mg/dl	4.5-6.0
High Risk	> 240 mg /dL.	>160 mg/dL.	>6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of coronary artery disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B:Apo A1 is >1 in cases of increased CHD risk.



S. Bhaduri.

Dr. Sankarsan Bhaduri
 M.B.B.S, M.D (Pathology)
 Consultant Pathologist



Patient ID	1224505		Specimen	Serum
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:25

Test Name	Value	Unit	Biological Ref Interval
<u>Kidney Function Test/Renal Function Test</u>			
Urea (Method :Urease GLDH)	20.0	mg/dl	19.0 - 45.0
Blood Urea Nitrogen (BUN) Urease Endpoint	9.3	mg%	6.0 - 20.0
Creatinine Method:Spectr-photometry	0.82	mg/dl	0.70 - 1.30
Uric Acid (Method:URICASE POD)	6.6	mg/dl	3.5 - 7.2
Sodium Method : ISE	141.00	meq/l.	136.00 - 145.50
Potassium (Done on EasyLite)	4.50	meq/L	3.50 - 5.50
Chloride Method- IS Electrode	108.0	mmol/L	98.0 - 109.0
Calcium Method :Spectro-photometry	9.0	mg/dl	8.6 - 10.2
Phosphorus UV Molybdate	3.1	mg/dl	2.5 - 4.5



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Patient ID	1224505		Specimen	Fluoride- F, Fluoride- PP
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:53
Ref. By	Self		Print Date	10/09/2024 20:16:27

Test Name	Value	Unit	Biological Ref Interval
Glucose- Fasting Blood <small>Hexokinase</small>	95.0	mg/dl	74.0 - 100.0
Glucose Postprandial Blood <small>Method: GOD-POD</small>	110.0	mg/dl	74.0 - 120.0



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist

Patient ID	1224505		Specimen	Serum
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:54
Ref. By	Self		Print Date	10/09/2024 20:16:29

Test Name	Value	Unit	Biological Ref Interval
Liver Function Test (LFT)- 2			
Bilirubin Total <small>Method - Spectro-photometry</small>	0.87	mg/dl	0.00 - 1.20
Bilirubin Direct <small>Method:- Spectro.-photometry</small>	0.24	mg/dl	0.00 - 0.40
Bilirubin Indirect <small>Spectro-photometry</small>	0.63	mg/dl	0.00 - 0.75
Aspartate Aminotransferase (AST/ SGOT) <small>Spectro-photometry</small>	23.0	U/L	0.0 - 35.0
Alaline Transaminase ALT/ SGPT <small>(Method-Spectro-photometry)</small>	17.0	U/L	0.0 - 45.0
Alkaline Phosphatase (ALP) <small>Spectro-photometry</small>	75.0	IU/L	54.0 - 369.0
Protein Total <small>(METHOD:BIURET)</small>	7.5	gm/dl	6.4 - 8.3
Albumin <small>(Method-Spectro-photometry)</small>	4.2	gm/dl	3.5 - 5.2
Globulin <small>(METHOD:BCG)</small>	3.3	g/dl	2.3 - 3.5
A/G Ratio <small>COLORIMETRIC</small>	1.27		1.30 - 2.10
Gamma Glutamyl Transferase (GGT) <small>Method :Glupa C</small>	13.6	U/L	0.0 - 55.0



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist

Patient ID	1224505		Specimen	Serum
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:54
Ref. By	Self		Print Date	10/09/2024 20:16:31

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

IMMUNOASSAY**Thyroid Profile Total**

Triiodothyronine Total (TT3) Method:- CLIA	1.02	ng/dL	0.69 - 2.15
Thyroxine - Total (TT4) CLIA	86.10	ug/dl	52.00 - 127.00
Thyroid Stimulating Hormone (TSH) Method:- CLIA	4.70	uIU/ml	0.30 - 4.50

COMMENTS:

Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy.

PREGNANCY	REFERENCE RANGE for TSH IN uIU / ml (As per American Thyroid Association)
1 st Trimester	0.10-2.50 uIU /mL
2 nd Trimester	0.20-3.00 uIU /mL
3 rd Trimester	0.30-3.00 uIU /ml

TSH IS DONE BY ULTRASENSITIVE 4TH GENERATION CHEMIFLEX ASSAY

INTERPRETATIONS:

1. Primary hyperthyroidism is accompanied by elevated serum T3 & T4 values along with depressed TSH level.
2. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values & elevated serum TSH levels.
3. Normal T4 levels accompanied by high T3 levels and low TSH are seen in patients with T3 thyrotoxicosis.
4. Normal or low T3 & high T4 levels indicate T4 thyrotoxicosis (problems in conversion of T4 to T3).
5. Normal T3 & T4 along with low TSH indicate mild / subclinical HYPERTHYROIDISM.
6. Normal T3 & low T4 along with high TSH is seen in HYPOTHYROIDISM.
7. Normal T3 & T4 levels with high TSH indicate Mild / Subclinical HYPOTHYROIDISM.
8. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drug like propranolol.
9. Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



S. Bhaduri.
Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist

Page No: 10 of 13



Patient ID	1224505		Specimen	Urine
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:54
Ref. By	Self		Print Date	10/09/2024 20:16:34

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

CLINICAL PATHOLOGY

Urine Routine & Microscopy

Strip/Microscopy

Physical Examination

Volume	20	ml	10
Colour	Light Yellow		Light Yellow
Appearance	Clear		Clear
Deposit	Absent		
Turbidity	Absent		
Reaction	Acidic		
Specific Gravity <small>Refractometric</small>	1.010		1.000 - 1.030

Chemical Examination

Urine Protein <small>Protein Error of Indicator</small>	Nil		Nil
Urine Glucose <small>Oxidase Peroxidase Reaction</small>	Nil		Nil
Urine Ketone body <small>Sodium Nitropruside</small>	Nil		Nil
Nitrite	Nil		Nil

Bile Pigment (Urine)

<small>Method- FOUCHET</small>	Nil		Nil
Bile Salt (Urine) <small>Method: Sulphur</small>	Nil		Nil
PH <small>Double Indicators test</small>	6.0		4.6 - 8.0

Blood <small>peroxidase reaction</small>	Negative		Negative
---	----------	--	----------

Urobilinogen <small>Modified Ehrlich Reaction</small>	Normal		Normal
--	--------	--	--------

Urine Bilirubin <small>diazotisation</small>	Negative		Negative
---	----------	--	----------

Leukocyte <small>Diazonization Reaction</small>	Negative		Negative
--	----------	--	----------

Microscopic Examintaion

Pus Cells	Occasional	/HPF	2-4
-----------	------------	------	-----



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Patient ID	1224505		Specimen	Urine
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:54
Ref. By	Self		Print Date	10/09/2024 20:16:38

Test Name	Value	Unit	Biological Ref Interval
Epithelial Cells	Occasional	/HPF	0-3
RBC's	Nil	/HPF	Nil
Casts	Nil		Nil
Crystals	Nil		Nil
Bacteria	Nil		Nil
Budding yeast cells	Negative		Negative
Others	Nil		Nil



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Patient ID	1224505		Specimen	WB-EDTA
Patient Name	Mr. Firoz Anwar		Booked Date	10/09/2024 13:15:49
Gender/Age	Male /37 Yrs		Collected Date	10/09/2024 13:37:01
Mobile No.			Received Date	10/09/2024 13:37:04
Organization	Apollo Clinic DGDS		Report Date	10/09/2024 18:36:54
Ref. By	Self		Print Date	10/09/2024 20:16:40

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

HAEMATOLOGY

Peripheral Blood Smear (P/S)

Cell Counter/Microscopy

RBCs Microcytic Hypochromic.
WBCs Are with in normal range.
PLATELETS Are adequate on smear.

*** End of Report ***



S. Bhaduri.

Dr. Sankarsan Bhaduri
M.B.B.S, M.D (Pathology)
Consultant Pathologist



Date: 10.09.2024

Name: MD FIROJ ANWAR

Age/Gender: 38 Y/M

Mobile No.: 7903269494

Ref By: AHCN

Demographics:

Height	Weight	BP	BMI
171 cm	61 kgs	100/70 mmHg	20.9

Personal History:

Habits:	Smoking: No
	Alcohol: No
	Drugs/Medicines: No

Family History:

Relation	Age	Health Status
Father	73	Healthy
Mother	65	HTN
Brother	45	Healthy
Sister	No	

Past History:

Hypertension	No
Diabetes	No
Asthma	No
Thyroid	No
Tuberculosis	No
Cancer	No

Others:

Allergic History	No
Surgical History	No

Ophthalmic Examination:

Distance vision		Near vision		Colour vision	
Right Eye	Left Eye	Right Eye	Left Eye	Right Eye	Left Eye
6/6	6/6	N6	N6	Normal	Normal

Amo
Dr. SUNEEL KUMAR GARG
MD, FNB, IFCCM, EDIC, FICCM, FCCP, FCCM,
Founder & MD
Saiman Healthcare Pvt. Ltd.
DMC Regn. No. 34400

Dr Suneel Kumar Garg

MD, FNB (Critical Care Medicine), IFCCM, EDIC, FICCM, FCCP (USA), FCCM (USA)

Senior Critical Care Physician

DMC-34400

If test results are alarming or unexpected, patients are advised to contact the laboratory immediately for the possible remedial action.

+91-9999 399 344 | +91-11-6138 4456 | dgdlabs@saimanhealthcare.com

For Doctor Consultation & Home Health Care Services contact : +91-9999 500 123



D.G.G.DTM
 DR GARG'S DIAGNOSTICS
 (A Division of Saiman Healthcare)

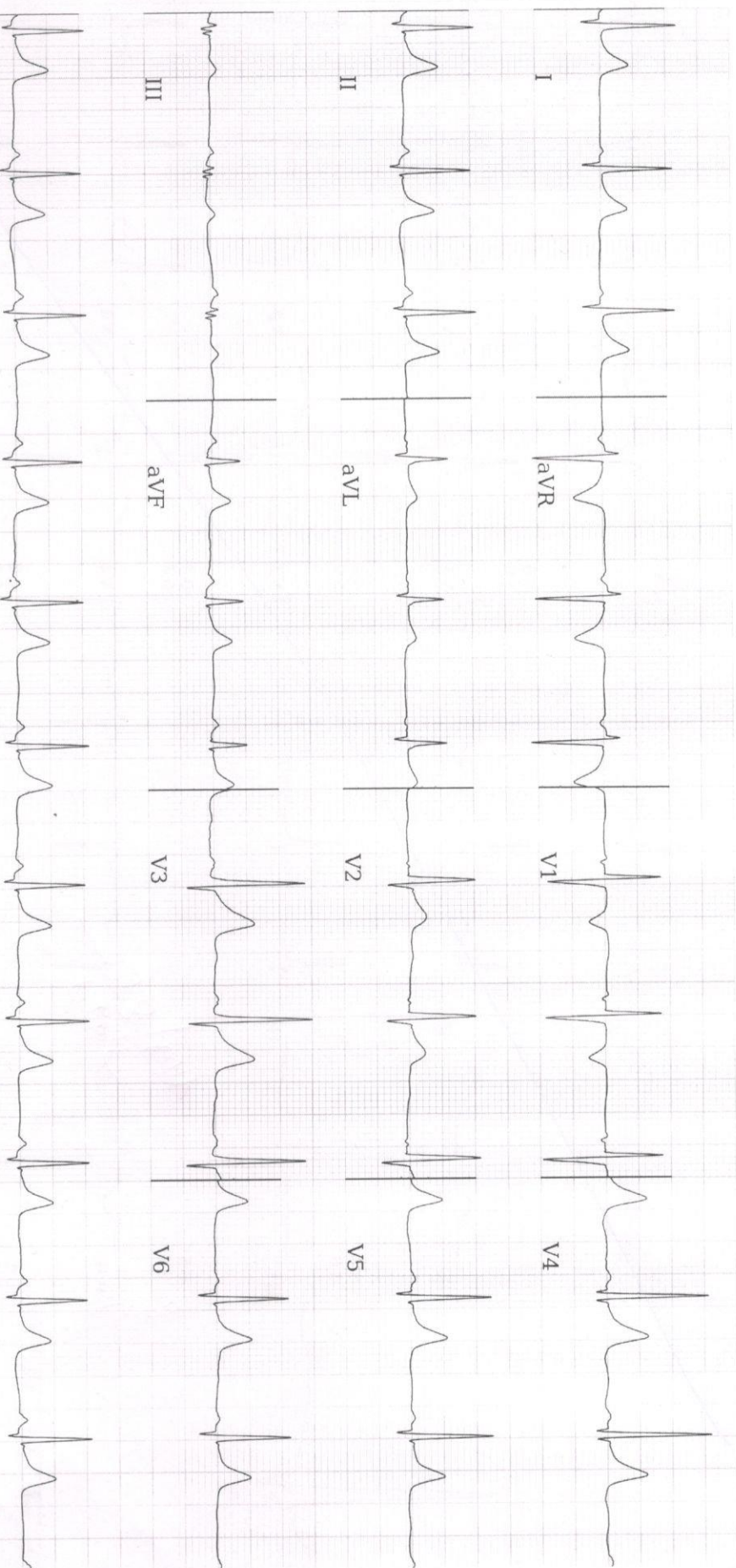
17/6/76/69, Meghnath Saha Sarani, Pradhan Nagar, Siliguri -734003, West Bengal. +91 9355090808.
 +91 3533571619

Date and Time: 10th Sep 24 11:59 AM

Age / Gender: 37/Male

Patient ID: 600

Patient Name: Md Firoz Alam



AR: 69bpm

VR: 69bpm

QRSD: 82ms

QT: 380ms

QTcB: 408ms

PRI: 128ms

P-R-T: 66° 34° 43°

25.0 mm/s 10.0 mm/mV

0-20Hz, 50Hz

Copy right 2013-2024 Tridog Health All Rights Reserved



Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

DR. SUNEEL KUMAR GARG
 MD, FNB, IFCCM, EDIC, FICCM, FCCP, FCCM,
 Founder & MD
 Saiman Healthcare Pvt. Ltd.
 DMC Regn. No. 34400

69 bpm
 69 bpm