

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited ) CIN: U85110CT2005PTC017751



UHID

: 159135

PATIENT NAME

: MR. MEENA SIYARAM

AGE/SEX

: 33Y/MALE

CONSULTANT DOCTOR : HOSPITAL CASE

VISITID

: 0000298095

ORDER DATE : 05/01/2023 9:02:00AM

SAMP. DATE

: 05/01/2023 9:36:00AM

SPEC. NO

: 10412402

RESULT DATE: 05/01/2023 12:42:00PM

TPA

: BANK OF BARODA

# **DEPARTMENT OF PATHOLOGY**

# **ESR (ERYTHROCYTE SEDIMENTATION RATE)**

PARAMETER	VALUE		
ESR	VALUE	RESULT	REFERENCE RANGE
	20 mm at end of 1 hr	High	0 15
		· · · · · ·	0 - 15

**TECHNICIAN** 

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be

24/01/2023 10:24AM

Page 1 of 1



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# **DEPARTMENT OF PATHOLOGY**

# LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE		
BILIRUBIN TOTAL		RESULT	REFERENCE RANGE
BILIRUBIN DIRECT	0.68 mg/dL	Normal	0.1 - 1.2
BILIRUBIN INDIRECT	0.10 mg/dl	Normal	0.1 - 0.6
ALKALINE PHOSPHATASE	0.58 mg / dl	High	0.1 - 0.4
SGOT	104 U/L	Normal	0 - 270
SGPT	31 U/L	Normal	10 - 55
TOTAL PROTEIN	49 U/L	High	0 - 40
ALBUMIN	7.43 g/dl	Normal	6 - 8
GLOBULIN	4.00 g/dl	Normal	4 - 5
A.G.RATIO	3.43 g/dl	Normal	2 - 3.5
	1.17:1		1 - 2.5

**TECHNICIAN** 

Dr. ANJANA SHARMAG D.N.B PATHOLOGY CONSULTANT



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# **DEPARTMENT OF PATHOLOGY**

	THOLOGY	
ROSCOPY		
VALUE	PEG	
10 ml Pale Yellow Clear Acidic	RESULT	REFERENCE RANGE
Nil		
Nil		
4-6 /hpf 1-2 /hpf Nil /hpf Nil /lpf Nil Nil Nil		0 - 5 1 - 2 - - -
	ROSCOPY VALUE  10 ml Pale Yellow Clear Acidic  Nil Nil  4-6 /hpf 1-2 /hpf Nil /hpf Nil /lpf Nil /lpf Nil Nil	VALUE  RESULT  10 ml Pale Yellow Clear Acidic  Nil Nil  4-6 /hpf 1-2 /hpf Nil /hpf Nil /lpf Nil /lpf Nil Nil

**TECHNICIAN** 

Dr. ANJANA SHARMA

Asharma

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24/01/2023 😚 Shirlam Market, Ram Nagar, Supela, Bhilai (C.G.) 🕲 Ph.: 0788 4252222, 4052040



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## **DEPARTMENT OF PATHOLOGY**

#### HBA1c (GLYCOSYLATED HAEMOGLOBIN) PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED HEAMOGLOBIN)

6.0 %

Normal

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0

At risk (Prediabetes)

->=6.0 to <=6.5

Diagnosing diabetes

->=6.5

Therapeutic goals for glycemic control

- Age> 19 years

Goal of therapy: <7.0

- Action suggested: >8.0

- Age< 19 years

- goal of therapy: < 7.5

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid

#### Comments

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

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#### **DEPARTMENT OF PATHOLOGY**

#### **T3,T4 TSH**

**PARAMETER** 

T3 (TRIIODOTHYRONINE)

T4 (THYROXINE) TSH (THYROID STIMULATING HORMONE)

VALUE

1.886 ng/ml 71.42 ng/ml

1.063 uIU/ml

RESULT

REFERENCE RANGE Normal 0.69 - 2.15

Normal

52 - 127

Normal

0.3 - 4.5

REFERENCE GROUP

REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

0.30 - 4.5

1st Trimester 2nd Trimester

0.10-2.50 0.20 - 3.00

3rd Trimester

0.30 - 3.00

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured

- 1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

TECHNICIAN

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SPEC. NO

: 10412397

RESULT DATE

: 07/01/2023 7:21:00PM

TPA

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# **DEPARTMENT OF PATHOLOGY**

URINE SUGAR PP

PARAMETER

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

harma

Dr. ANJANA SHARMA D.N.B PATHOLOGY

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**TECHNICIAN** 



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AGE/SEX

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CONSULTANT DOCTOR

: HOSPITAL CASE

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SAMP. DATE

: 05/01/2023 9:36:00AM

SPEC. NO

: 10412395

RESULT DATE

: 07/01/2023 7:21:00PM : BANK OF BARODA

### **DEPARTMENT OF PATHOLOGY**

## **BLOOD SUGAR - FASTING AND PP**

PARAMETER

**BLOOD SUGAR PP** 

**BLOOD SUGAR FASTING** 

VALUE

127 mg/dL 135 mg/dL RESULT

TPA

REFERENCE RANGE

High

80 - 120

Normal

120 - 140

**TECHNICIAN** 

Dr. ANJANA SHARMA D.N.B PATHOLOGY "Nepec/

Sharma



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SPEC. NO

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RESULT DATE

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TPA

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### **DEPARTMENT OF PATHOLOGY**

**URINE SUGAR FASTING** 

**PARAMETER** 

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

TECHNICIAN

Dr. ANJANA SHARMA
D.N.B PATHOEOGY
CONSULTANT



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SPEC. NO

: 10412389

RESULT DATE

: 05/01/2023 12:44:00PM

TPA

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#### **DEPARTMENT OF PATHOLOGY**

CREATININE

**PARAMETER** 

SERUM CREATININE

VALUE

0.85 mg/dL

RESULT

REFERENCE RANGE

Normal

0.3 - 1.5

TECHNICIAN

Dr. ANJANA SHARMA D. X. BEVATHOLOGY

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4/01/2023 @:Shriram Market, Ram Nagar, Supela, Bhilai (C.G.) @ Ph.: 0788 4252222, 4052040

wam Market, Ram Nagar, Supela, Brillai (C.G.) Pri.: 0700 4252222, 4052040



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SPEC. NO

: 10412399

RESULT DATE

: 05/01/2023 1:51:00PM

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# **DEPARTMENT OF PATHOLOGY**

PARAMETER	VALUE			
BLOOD GROUPING AND RH TYPING	VALUE	RESULT	REFERENCE RANGE	111
BLOOD GROUP RH FACTOR	"A"			
BUN (BLOOD UREA NITROGEN) BUN (BLOOD UREA NITROGEN)	Positive			
GGT (GAMMA GLUTAMYL TRANSFERASE)	10.28 mg / dl	Normal	8 - 23	
GGT (GAMMA GLUTAMYL TRANSFERASE) URIC ACID	19 U/L	Normal	8 - 52	
URIC ACID				
	4.80 mg/dL	Normal	3.6 - 7.7	Lin

**TECHNICIAN** 





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## **DEPARTMENT OF PATHOLOGY**

#### PSA (PROSTATE SPECIFIC ANTIGEN)- only for male PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.640 ng/ml

Normal

0 - 4

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely.

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen

Clinical Use

1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives. 2) Followup and management of Prostate cancer patients

3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

#### Note:

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in

**TECHNICIAN** 

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: 10412401

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: 05/01/2023 1:50:00PM

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#### **DEPARTMENT OF PATHOLOGY**

CBC (C	OMPLETE	<b>BLOOD</b>	COUNT)
-			,

PARAMETER	VALUE		
HAEMOGLOBIN (Hb)		RESULT	REFERENCE RANGE
	15.9 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT HAEMATOCRIT (PCV)	4.99 Million/cumm 44.7 %	Normal Normal	4.5 - 5.9 41.5 - 50.4
RBC INDICES MCV MCH MCHC	89.7 fl 32.0 pg	Normal Normal	78 - 96 27 - 32
RDW	35.6 % 13.7 %	Normal Normal	33 - 37 11 - 16
TOTAL WBC COUNT (TLC) DIFFERENTIAL COUNT	7700 /cumm	Normal	4000 - 11000
NEUTROPHILS LYMPHOCYTES EOSINOPHILS MONOCYTES BASOPHILS BANDS BLAST	54 % 38 % 02 % 06 % 00 % 00 %	Normal Normal Normal Normal Normal Normal	0 - 75 22 - 48 0 - 6 2 - 10 0 - 2 0 - 5
PLATELET COUNT	160000 /cumm	Normal	150000 - 450000

**TECHNICIAN** 

CONS Hospits



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## **DEPARTMENT OF PATHOLOGY**

LIPID PROFILE		HIOLOGI	
PARAMETER CHOLESTEROL TOTAL TRIGLYCERIDES - SERUM HDL LDL VLDL VLDL CHOL: HDL Ratio LDL: HDL Ratio	VALUE  136 mg / dl  76 mg / dl  43.74 mg / dl  77.06 mg/dL  15.20  3.11:1  1.76:1	RESULT Low Normal Normal Low Low	REFERENCE RANGE 150 - 220 60 - 165 35 - 80 90 - 160 20 - 50 3.5 - 5.5

**TECHNICIAN** 

Dr. ANJANA SHARM

Dr. ANJANA SHARMA

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Ref. By

एक एहशाश क्षपनेपन का **Sparsh Multispecialty Hospital** 

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UHID : 159135

Patient Name : MR. MEENA SIYARAM

: 33Y / MALE

Age / Sex Consultant

: DR. HOSPITAL CASE

: DR. HOSPITAL CASE

Category : BANK OF BARODA Visit ID : 0000298095

Spec No.

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#### X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

#### **IMPRESSION**

No Remarkable Abnormality Detected .

- Please correlate clinically

Dr. SAMIR KATHALE MBBS, DNB(RADIO), MNAME, MANBO Fetal Ultrasound & Fetal Medicine (FGi-BFMC) Reg No; CGM€-4404 2012

Please bring all your previous reports. You should preserve and bring this report for future reference



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Samp.Date Report Date

: 05/01/23 10:38AM

#### **SONOGRAPHY USG WHOLE ABDOMEN**

- \* LIVER : Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen.
- \*PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- \*COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.
- \*GALL BLADDER :Seen in distended state with normal wall and lumen is echofree
- \*SPLEEN:Normal in size, shape & echo texture. No focal lesions seen.
- \*PANCREAS:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.
- \*KIDNEYS: Both kidneys are of normal shape, size and position.

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

- \*URINARY BLADDER: Seen in distended state and has normal wall architecture.Lumen is echo free.
- \*PROSTATE:Normal in shape, size and echotexture.No median lobe bulge is seen.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

#### FINAL IMPRESSION:

No remarkable Abnormality detected in the current scan.

Please correlate clinicall

Please bring all your previous reports. You should preserve and bring this report for future reference.