



ISO 9001 : 2015

**AAROGYAM DIAGNOSTICS**

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,  
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

<b>Date</b>	<b>28/08/2021</b>	<b>Srl No.</b>	<b>31</b>	<b>Patient Id</b>	<b>2108280031</b>
<b>Name</b>	<b>Mrs. VIDYA BHARTI</b>	<b>Age</b>	<b>25 Yrs.</b>	<b>Sex</b>	<b>F</b>
<b>Ref. By</b>	<b>Dr.BOB</b>				

Test Name	Value	Unit	Normal Value
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### HAEMATOLOGY

HB A1C	5.1	%	
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#### EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

#### REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

\*\*\*\* End Of Report \*\*\*\*

**Dr.R.B.RAMAN**  
**MBBS, MD**  
**CONSULTANT PATHOLOGIST**



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<b>Ref. By Dr.BOB</b>			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	11.8	gm/dl	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	7,800	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	71	%	40 - 75
LYMPHOCYTE	23	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	12	mm/1st hr.	0 - 20
R B C COUNT	3.96	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	35.4	%	35 - 45
M C V	89.39	fl.	80 - 100
M C H	29.8	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.65	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"B"		
RH TYPING	POSITIVE		

\*\*\*\* End Of Report \*\*\*\*

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<b>Ref. By</b> Dr.BOB		

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## BIOCHEMISTRY

BLOOD SUGAR FASTING	91.2	mg/dl	70 - 110
BLOOD SUGAR PP	97.4	mg/dl	80 - 160
SERUM CREATININE	0.68	mg%	0.5 - 1.3
BLOOD UREA	23.4	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.2	mg%	2.5 - 6.0

### LIVER FUNCTION TEST (LFT)

BILIRUBIN TOTAL	0.56	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.17	mg/dl	0.00 - 0.25
UNCONJUGATED (I.D.Bilirubin)	0.39	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.9	gm/dl	6.6 - 8.3
ALBUMIN	4.2	gm/dl	3.4 - 4.8
GLOBULIN	2.7	gm/dl	2.3 - 3.5
A/G RATIO	<b>1.556</b>		
SGOT	25.6	IU/L	5 - 35
SGPT	27.3	IU/L	5.0 - 45.0
ALKALINE PHOSPHATASE IFCC Method	70.0	U/L	35.0 - 104.0
GAMMA GT	26.4	IU/L	6.0 - 42.0

### LFT INTERPRET

### LIPID PROFILE

TRIGLYCERIDES	83.7	mg/dL	40.0 - 165.0
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<b>Ref. By Dr.BOB</b>			

Test Name	Value	Unit	Normal Value
TOTAL CHOLESTEROL	<b>104.6</b>	mg/dL	123.0 - 199.0
H D L CHOLESTEROL DIRECT	41.5	mg/dL	40.0 - 79.4
V L D L	16.74	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	<b>46.36</b>	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	2.52		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.117		0.00 - 3.55
<b>THYROID PROFILE</b>			
T3	0.99	ng/ml	0.60 - 1.81
T4	10.24	ug/dl	4.5 - 10.9
Chemiluminescence			
TSH	2.09	uIU/ml	
Chemiluminescence			
<b>REFERENCE RANGE</b>			
<u>PAEDIATRIC AGE GROUP</u>			
0-3 DAYS	1-20	ulu/ ml	
3-30 DAYS	0.5 - 6.5	ulu/ml	
1 MONTH -5 MONTHS	0.5 - 6.0	ulu/ml	
6 MONTHS- 18 YEARS	0.5 - 4.5	ulu/ml	
<u>ADULTS</u>	0.39 - 6.16	ulu/ml	

**Note:** TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates  $\pm 50\%$ , hence time of the day has influence on the measured serum TSH concentration.



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Assay performed on enhanced chemi luminescence system ( Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

QUANTITY	20	ml.
COLOUR	PALE YELLOW	
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.030	
PH	6.0	



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Test Name	Value	Unit	Normal Value
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### CHEMICAL EXAMINATION

ALBUMIN	NIL		
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SUGAR	NIL		
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### MICROSCOPIC EXAMINATION

PUS CELLS	0-1	/HPF	
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RBC'S	NIL	/HPF	
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CASTS	NIL		
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CRYSTALS	NIL		
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EPITHELIAL CELLS	0-1	/HPF	
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BACTERIA	NIL		
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OTHERS	NIL		
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\*\*\*\* End Of Report \*\*\*\*

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ID: 62

28-08-2021 10:39:52 AM

Female Years

HR : 74 bpm

P : 89 ms

PR : 157 ms

QRS : 70 ms

QT/QTc : 355/395 ms

P/QRS/T : 66/81/48 °

RV5/SVI : 0.997/0.491 mV

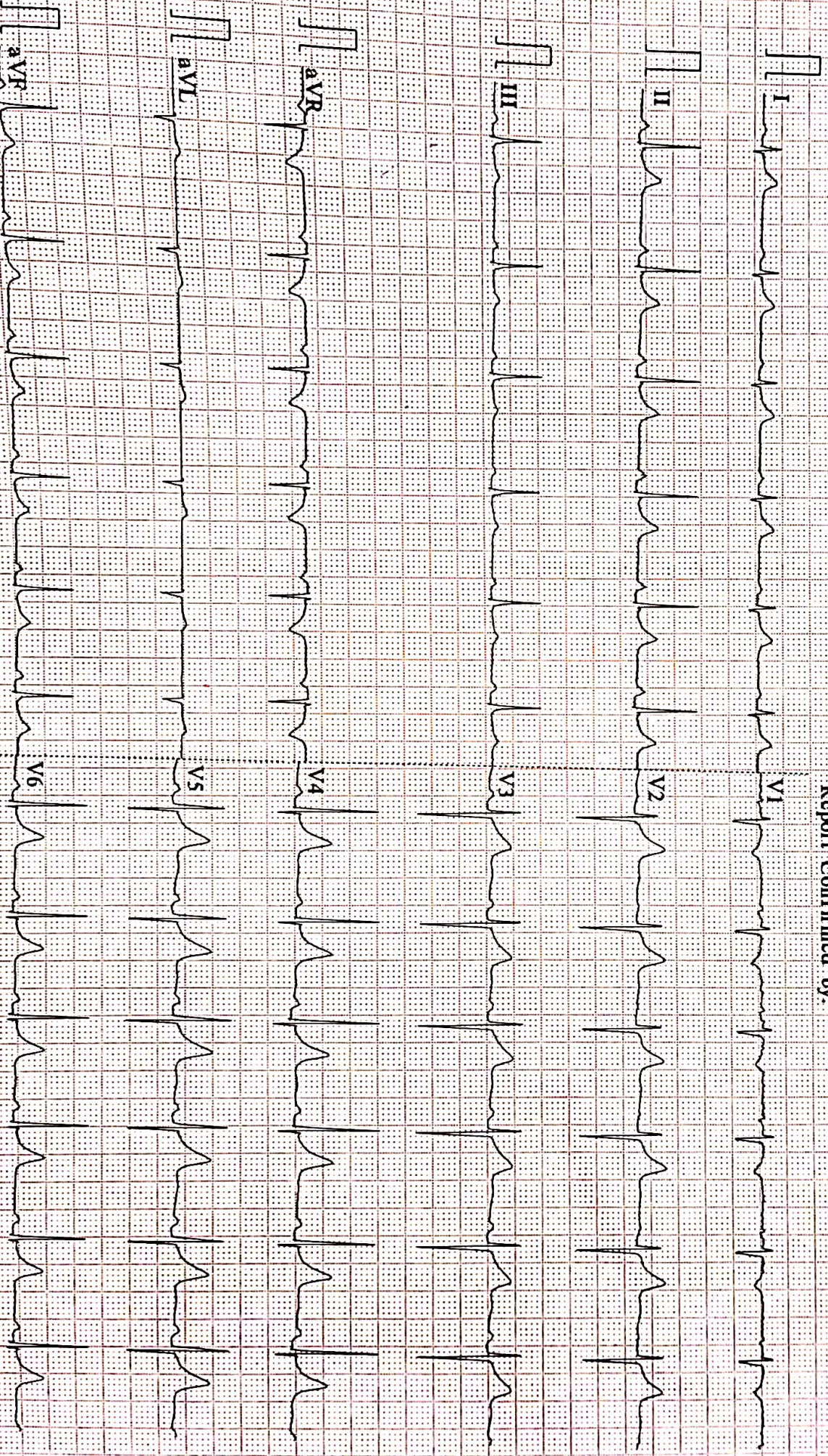
Diagnosis Information:

Sinus Rhythm

\*\*\*Normal ECG\*\*\*

Vidya B. Balli

Report Confirmed by:



0.67-100Hz AC50 25mm/s 10mm/mV 25.0s V74 V2.2 SEMIP Vi.8i DAIGNOSTIC





# SHUBHAM ULTRASOUND & A.L.C. ADVANCE IMAGING DIAGNOSTICS

P.K. Arogyam

(A Unit of P.K. Arogyam Health & Wellness Center)

E-95, P.C. Colony, Near Sai Netryalaya Transformer, Kankarbagh, Patna - 20

B.O. : Ajay Market, Bank of Baroda, East Ashok Nagar, Kankarbagh, Patna - 20.

2. Khanpura Road (Below Gyan Sharowar School), Palliganj, Patna. 3. Arwal Patna Aurangabad main road, Near Police Thana, Arwal.

e-mail : shubham.pat.usg@gmail.com

website : www.alhealthcheckup.in

OPINION MUST BE CORRELATES WITH CLINICALLY & OTHER INVESTIGATION FOR FINAL DIAGNOSIS. NOT FOR MEDICO LEGAL PURPOSE

Pt. Name :- VIDYA BHARTI  
Ref. By :- DR. / AAROGYAM

Date:- 28-Aug-21  
Age / Sex - Yrs. F.

## REAL TIME U.S.G. OF WHOLE ABDOMEN Thanks for your kind referral

( Report.)

- LIVER** :- Measures 14.85 cm. Mild Enlarged in shape, size and echo texture. I.H.B.R. are not dilated. Hepatic veins are normal. No SOL seen.
- G.BL.** :- Lumen is echo free. Wall thickness appears normal.
- C.B.D.** :- Measures 3.3 mm in diameter with echo free lumen. No calculi or mass seen.
- P.V.** :- Measures 7.2 mm in diameter. Appears normal. No thrombus seen.
- PANCREAS** :- Normal in shape, size and echo texture. No calcification mass seen.
- SPLEEN** :- Measures 11.37 cm. Normal in shape, size and echo texture.  
No SOL seen.
- KIDNEY** :- Both kidney shows normal shape, size & echotexture. C.M.D.intact.  
P.C.S.is not dilated. No calculi, cyst or hydronephrosis seen on either side.  
**Right Kidney :- Measures 9.90 X 4.1 cm.**  
**Left Kidney :- Measures 9.10 X 4.2 cm.**
- URETER** :- Not dilated. No apparent calculi seen.
- U.BLADDER** :- Shows normal in outline with echo free lumen. No calculi or mass seen.  
**Pre void - 310 ml. Post void - is in significant**
- UTERUS** :- Is normal in size, shape & position measuring 7.40 X 4.60 cm. Endometrial And Myometeriam appears normal in limits No focal mass lesion seen
- ADNEXA** :- Both ovary appears Slightly Enlarged in size Small Multiple sub capsular cyst Seen at both ovary Each Cyst Measures 9 to 8 mm suggested B/L PCOD.  
**Rt Ovary Measures - 3.52 cm Lt Ovary Measures 3.75 cm**
- P.O.D** :- Mild collection seen in P.O.D.
- R.I.F.** :- Son graphically no appendicular mass or collection seen.
- OTHERS** :- No Ascites No Lymph Adenopathy. No pleural Effusion seen on either side.

## IMPRESSION

- **B/L Slightly enlarged ovary contents multiple sub capsular cyst**  
**-? PCOD ( Poly cystic Ovarian Disease )**

**Adv :- Further Work Up / Other Investigation**  
**Otherwise son graphically normal scan. of rest organs**

28/8/21

ESTB BY:-

Dr. P. K. Tiwari  
MD, BRIT (Radio Imaging)  
Consultant Imagiologist

Dr. S. Kumar  
MD (Pat)  
Consultant Pathologist

Dr. Abhishek Kumar  
MBBS, MD  
Consultant Neuropatho Physiologist

Dr. Anjali  
MBBS, MD  
Consultant (TMT, EEG Specialist)

Dr. Kumari Suman  
MBBS, DGO, MD  
Consultant (TVS & HSG Specialist)

Consultant Radiologist