



Shubham Imaging & ALC Diagnostic Center

ISO 9001:2015 Certified Center

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

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

✉ : alcdiagnostics@gmail.com

🌐 : www.pkarogayamhealthcheckup.com

☎ : 7050037694, 9153988577

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

PATIENT NAME : Mr. GAJENDRA KUMAR

PATIENT ID: 480

COL DATE : 08/06/2024 REPORTING DATE: 08/06/2024 AGE SEX : 42 YRS/M

REF.BY : DR. / MEDIWHEEL

TEST NAME	RESULT	Unit	REF.RANGE
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BLOOD SUGAR (F)	92.0 mg/dl		70 - 110 mg/dl
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BLOOD SUGAR (PP)	122.0 mg/dl		70 - 140 mg/dl
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LIPID PROFILE:-

TOTAL CHOLESTROL	123.6 mg/dl		130 -250 mg/dl
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TRIGLYCERIDE	102.4 mg/dl		50 -160 mg/dl
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HDL CHOLESTROL	32.0 mg/dl		30 - 60 mg/dl
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LDL CHOLESTROL	71.2 mg/dl		80 -130 mg/dl
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VLDL CHOLESTROL	20.4 mg/dl		15 - 40 mg/dl
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T.CH./HDL RATIO	3.8 :1		Upto 5 : 1
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LDL /HDL RATIO	2.2 : 1		2 - 4 : 1
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ESTB BY:-

Consultant Radiologist

Dr. P. K. Tiwari
MD, M.Sc (Radio Imaging)
Ph.D (AI Nuclear Medicine)
Consultant Imajionologist

Dr. S. Kumar
MD, (Pat)
Consultant Pathologist

Dr. Abhishek Kumar
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Consultant Neuropatho Physiologist

Dr. Kumari Suman
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Dr. A. K. Singh
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Consultant Radiologist & Sonologist

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TEST NAME	RESULT	Unit	REF.RANGE
LFT:-			
SGPT	24.6	IU/L	5 - 40 IU/L
S G O T	19.3	IU/L	5 - 40 IU/L
ALKALINE PHOSPHATASE	81.7	IU/L	M - 53 - 165 IU/L F - 42 - 136 IU/L.
TOTAL PROTIN	7.0	g/dl	6.0 - 8.7 g/dl
SERUM ALBUMIN	4.1	g/dl	3.5 - 5.4 g/dl
SERIUM GLUBLINE	2.9	g/dl	2.3 - 3.6 g/dl
AG RATIO	1.4: 1		1.0 - 2.3 g/dl
BILIRUBIN			
TOTAL	0.61	mg/dl	0.1 - 1.1 mg/dl
DIRECT	0.27	mg/dl	0.0 - 0.32 mg/dl
INDIRECT	0.34	mg/dl	0.0 - 0.78 mg/dl
GGTP(GGT)	29.9	iu/L	8 - 38 iu/L
KFT/RFT			
URIC ACID	5.6	mg/dl	3.2 - 7.0 mg/dl
SERUM CREATNINE	1.0	mg/dl	0.6 - 1.5 mg/dl
BLOOD URIA	28.7	mg/dl	5 - 45 mg/dl
BLOOD URIA NITROZEN(BUN).	13.4	mg/dl	5 - 23 mg/dl

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TEST NAME	RESULT	Unit	REF.RANGE
ESR	52 mm/hr		<20 mm/hr
CBC			
Total W.B.C. Count	7,000 /cumm		4,000 - 11,000 /cumm
R B C COUNT	3.45 Million/ CUmm		4 - 7 Million/ CUmm
Platelets count	1.76 Lakh/ cumm		1.5 - 5.0 Lakh/ cumm
Differential Count of W.B.C.			
Neutrophils	64 %		40 -70%
Lymphocytes	30 %		25 - 40%
Eosinophils	05 %		01 - 05%
Mnonocytes	01 %		00 - 02%
Basophiles	00 %		00 - 0%
HAEMOGLOBIN	9.3 gm/dl (63.6 %)		14.6 gm/dl = 100%
PCV	29.9 %		35 - 47 %
MCV	81.1 fl		76 - 96 fl
MCH	26.0 pg		29 - 35 pg
MCHC	32.3 %		30 - 38 %

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GLYCOSYLATED HEMOGLOBIN

TEST NAME	RESULT	Unit	REF.RANGE
HbA1c	4.2 %		Below 5.7 % : Normal 5.7 – 6.4 % : Prediabetic > = 6.5 % : Diabetic
AVERAGE PLASMA GLUCOSE	94.0 mg/dl		90 – 120 mg/dl : Good Control 121– 150 mg/dl : Fair Control 151- 180 mg/dl: Unsatisfactory Control >180 mg/dl : Poor Control

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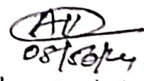
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Investigation	Result	Normal Range
Total Triiodothyronin T3	1.03 ng/mL	0.80 - 2.00 μ ng/mL
Total Thyroxin T4	8.05 ug/mL	5.10 - 14.10 ug/dL
Serum TSH	3.56 μ g/mL	0.27 - 4.20 μ g/mL

THYROID DISORDER (>: Increase: < Decrease: n Normal

1. T3(n) T4(n) TSH(n) :EUTHYROID STATE:
2. T3(>) T4(>) TSH(<): HYPERTHYROIDISM:
3. T3(<)T4(<) TSH(>): HYPOTHYROIDISM:
4. T3(n)T4(n) TSH(>) : SUB-CLINICAL HYPO-THYROIDISM:
5. T3(n)T4(n) TSH(<): SUB-CLINICAL HYPER-THYROIDISM:
6. T3(>) T4(n) TSH(<): T3 THYROTOXICOSIS:

Total T3/T4 level is dependent on Level:

So determination of free T3/T4is a better MARKER of Thyroid Function.

*FREE T3/T4 ESTIMATION FACILITY IS AVAILABALE ON REQUEST.:

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TEST NAME	RESULT	Unit	REF.RANGE
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BLOOD GROUP : 'A'

Rh Typing : POSITIVE

Note: Do always cross – matching before blood transfusion

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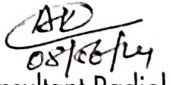
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ROUTINE EXAMINATION OF URINE

PHYSICAL EXAMINATION

Quantity	20 ml	Colour....	Pale Yellow
Appearance...	Clear	Sediment ...	Nil
Specific gravity....	1.010		

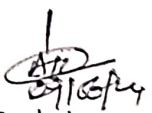
CHEMICAL EXAMINATION

Reaction	6.0	Nitrite.....	Not done
Sugar	Nil	Bile Pigment ...	Not done
Albumin	Nil	Urobilinogen....	Not done
Excess of Phosphate....	Nil	Chile.....	Not done
Bile Salt	Not Done	Acetone...	Not done

MICROSCOPIC EXAMINATION

Erythrocytes....	Nil	Casts	Nil
Leucocytes	1-4 / HPE	Crystals....	Nil
Epith. Cell	A, Few	Others	Nil

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ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Patient's Name: Mr. GAJENDRA KUMAR
Ref. by : Dr. MEDIWHEEL

Age/Sex : 42Yrs/M
Date : 9-Jun-24

ECHOCARDIOGRAPHIC WINDOW : GOOD

2D & M MODE ECHOCARDIOGRAPHY

Left ventricle

EDD:	45	mm (20 - 28 mm / m ²)	ESD:	28	mm (13 - 21 mm / m ²)
IVS:	13	mm (6 - 11 mm)	PW:	13	mm (6 - 11 mm)
Ejection fraction:	65% (67 ± 8%)		FS:	40	% (34 - 44%)
IVS:	Intact		LV clot	Absent	

Left atrium/ Aorta 35/29 mm

Right ventricle Normal

Right atrium Normal

Pericardium Normal

2D:

Normal LA and Normal LV Size, normally contracting LV, No RWMA, Mild concentric LVH

Mitral valve

AML/ PML: Normal

Tricuspid valve Normal

Aortic valve Normal

Pulmonary valve Normal

Continuous & Pulse Wave Doppler study

Valve	Velocity (m/sec)			Gradient (mmHg)			Valve area (PHT Method)	Regurg.
	Peak	Mean	EDV	Peak	Mean	EDG		
Mitral	E=0.6 A=1.0			4.0	2.0			NIL
Tricuspid	E=0.5 A=0.3			1	0.2			Trivial
Aortic	1.14			5.0	2.5			Nil
Pulmonary	0.9			3.5	1.7			Nil

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Colour Flow Imaging

No MR, Trivial TR, No PR/ AR
No shunt flow

COMMENTS :

- ◆ Normal sized all chambers
- ◆ Normal LV filling Pressure
- ◆ No RWMA,
- ◆ Trivial TR , No PAH
- ◆ Normal LV systolic function
- ◆ Global LVEF = 65%
- ◆ Grade I diastolic dysfunction
- ◆ All cardiac valves are normal
- ◆ No MS/TS/AS/ PS /PR/AR
- ◆ No clot / vegetation / pericardial effusion.

IMPRESSION

MILD CONCENTRIC LVH
Normal LA & Normal LV Cavity
Normal LV/ RV systolic function,
No RWMA, LVEF - 65%
Trivial TR , No PAH(RVSP -25mmhg)
Grade I diastolic dysfunction.

Please correlate clinically

DR. RANJEET KUMAR
MBBS, PGDCC, CCEBDM
CONSULTANT CARDIOLOGIST
EX- SENIOR REGISTRAR, RTIICS, KOLKATA.

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Ref. By :- DR./MEDIWHEEL

Date:- 8-Jun-24

Age / Sex -42 Yrs. M.

Thanks for your kind referral

X-RAY CHEST (P.A.VIEW)

The lungs on the either side show equal translucency.

The peripheral pulmonary vasculature is normal.

No focal lung lesion is seen.

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal.

The domes of the diaphragms are normal in position, and show smooth outline.

IMPRESSION

- NO EVIDENCE OF PULMONARY OR CARDIAC PATHOLOGY IS NOTED.

Handwritten signature and date: 5/6/24

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Date:- 8-Jun-24
Age / Sex -42 Yrs. M.

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 fatty change seen in liver parenchyma. 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 3.6 mm in diameter with echo free lumen. No calculi or mass seen.
P.V. :- Measures 7.7 mm in diameter. Appears normal. No thrombus seen.
PANCREAS :- Normal in shape, size and echo texture. No calcification mass seen.
SPLEEN :- Measures 10.39 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. are not dilated. No calculi, hydronephrotic or cyst seen on either side.
Right Kidney :- Measures 11.16 X 5.25 cm.
Left Kidney :- Measures 11.17 X 5.50 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 – 320 ml. Post void – is in significant
- PROSTATE :- Measures 14 gms.(approx). Appears Normal in size, shape, and echo texture.
No calcification, mass, growth seen. capsule is intact.
- 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

- **Mild Hepatomegaly with Fatty Liver G-I.**
- **Adv:- Further work up/ other investigation.**
Otherwise son graphically normal scan. of rest organs

Consultant Radiologist

ESTB BY:-

Dr. P. K. Tiwari

MD, M.Sc (Radio Imaging)
Ph.D (AI) Nuclear Medicine
Consultant Imacionologist

Dr. S. Kumar

MD, (Pat)
Consultant Pathologist

Dr. Abhishek Kumar

MBBS, MD
Consultant Neuropatho Physiologist

Dr. Kumari Suman

MBBS, DGO, MD
Consultant (TVS & HSG Specialist)

Dr. A. K. Singh

MBBS, PGDMCH
Consultant Radiologist & Sonologist

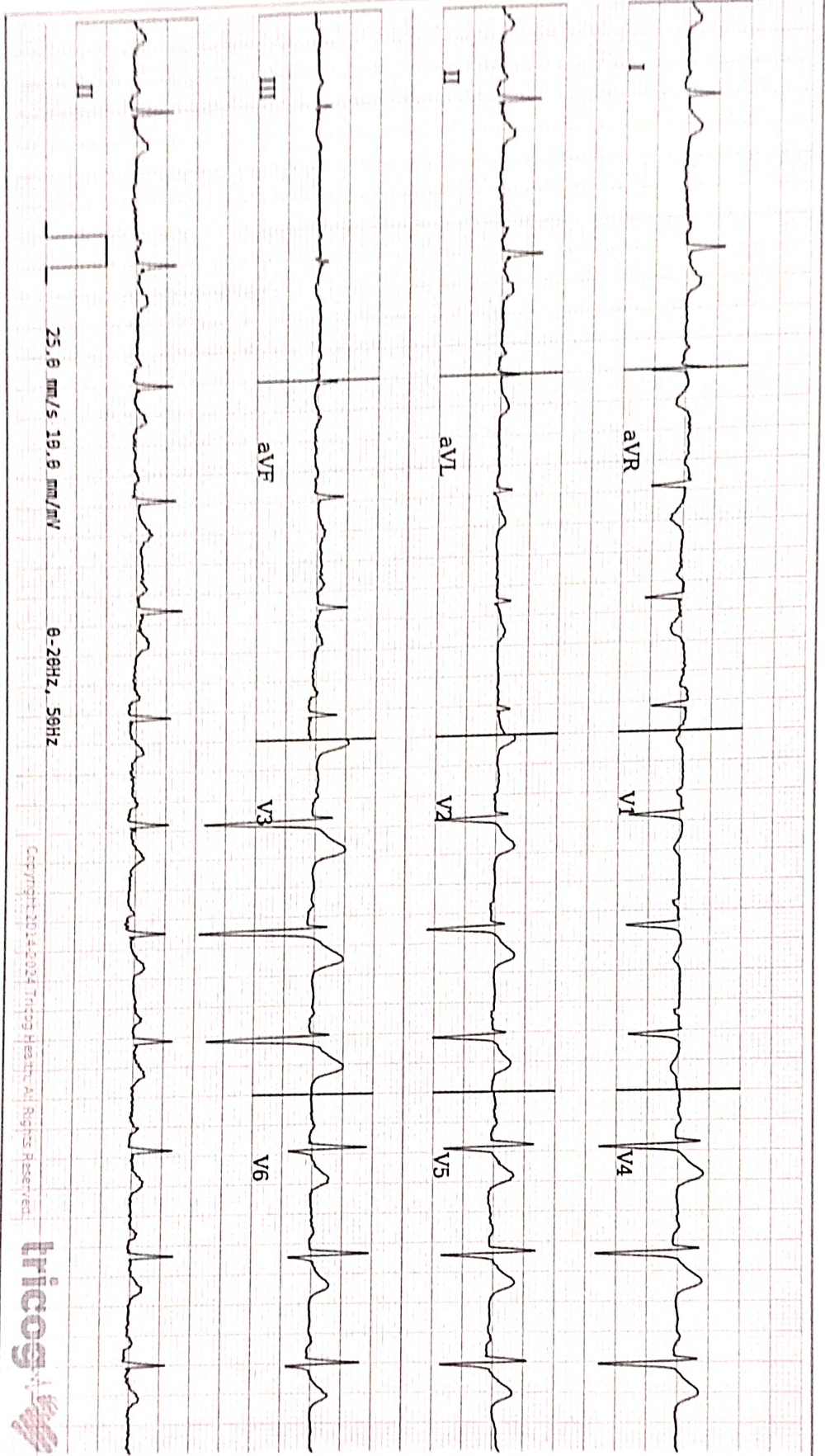
PRINTING MISTAKE SHOULD BE REPORTED BACK IMMEDIATELY / यहाँ जन्म से पहले भ्रूण का लिंग जाँच नहीं होता है।



P. K AROGYAM

Date and Time: 8th Jun 24 11:57 AM

Age / Gender: 42 / Male
Patient ID: 480
Patient Name: Gajendra kumar



ECG Within Normal Limits: Sinus Arrhythmia Seen, Sinus Rhythm. Please correlate clinically.

Disclaimer: Algorithms in this report are based on ECG wave and should be used as reference to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. Patient's vital signs are estimated by the clinician and not derived from the ECG. This report is generated by an AI algorithm primarily released over millions of ECGs. However, algorithm interpretations are intended to only aid clinical decision making and should always be reviewed by qualified professional and corrected accordingly to errors in diagnosis.

