

w - 66.8 Kg

H - 170 cm

B.P - 120/85

S - 84% min

P - 100% min



संतोष कुमार  
Santosh Kumar  
जन्म तिथि/DOB: 01/03/1985  
पुरुष/ MALE



**3617 1763 3377**

मेरा आधार, मेरी पहचान



फता: S/O अरुण बिहारी प्रसाद, जोगिबिर, भोजपुर, बिहार - 802183

Address : S/O, Awadh Bihari Prasad, Jogibir, Bhojpur, Bihar - 802183

**3617 1763 3377**





Santosh Kumar  
9006657748

Age - 39 y M



39 Years Male

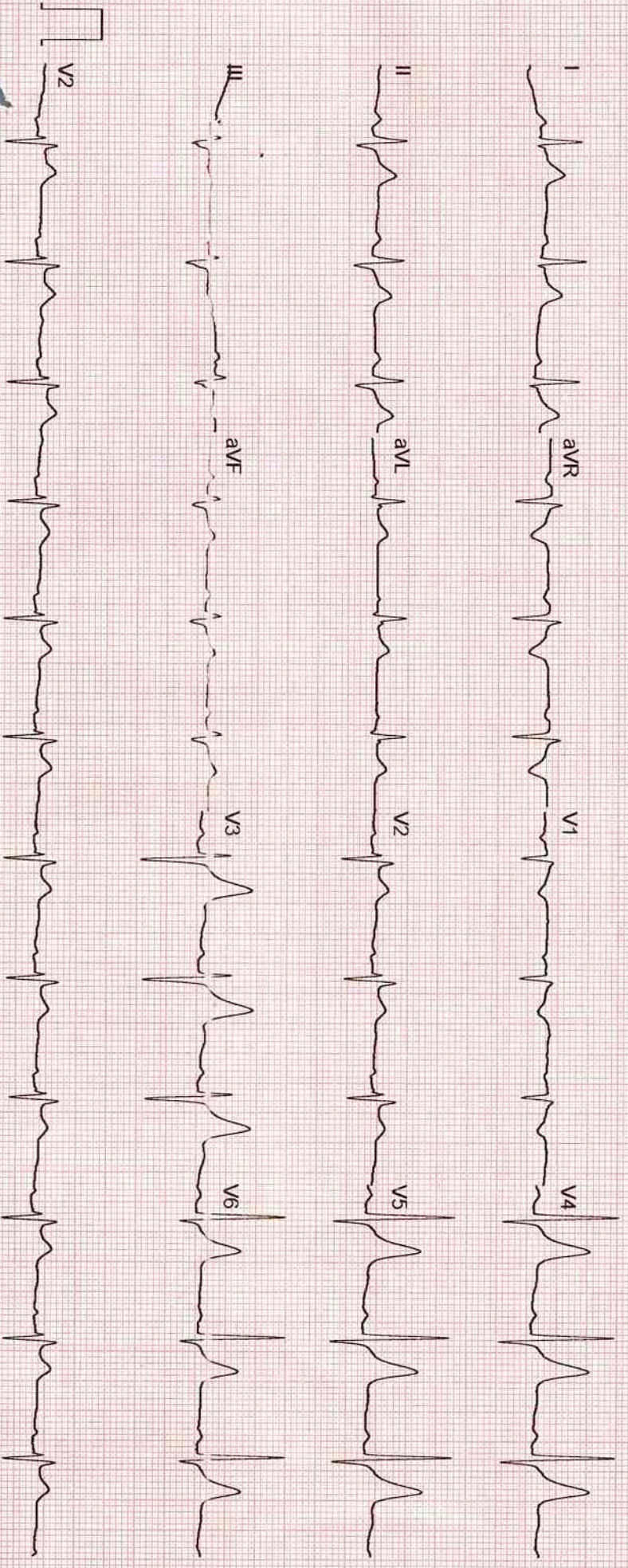
sim hospital  
sector 63  
Gautam Budhha Nagar, UP-201307

Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS	84 ms
QT / QTcBaz	354 / 395 ms
PR	160 ms
P	100 ms
RR / PP	802 / 800 ms
P / QRS / T	46 / -1 / 17 degrees

Normal sinus rhythm  
Normal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

4x2.5x3\_25\_R1

Unconfirmed

1/1





# SJM SUPER SPECIALITY HOSPITAL



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

6/6/24

### (IVF SPECIALIST)

- Dr. Pushpa Kaul (IVF)
- M.B.B.S, MD(Obst, & Gynae)
- Dr. Neha Zutshi (Embryologist)

### OTHER SPECIALIST

- Dr. Pushpa Kaul (IVF)
- M.B.B.S, MD(Obst, & Gynae)
- Dr. Smritee Virmani (Endoscopy)
- MBBS, DGO, DNB, ICOG (Obst. & Gynae)
- Dr. Vinod Bhat
- M.B.B.S, MD (General Medicine)
- Dr. Vineet Gupta, MS (ENT)
- Dr. Naveen Gupta, MS (EYE)
- Dr. Ashutosh Singh, MS (Urology)
- Dr. Rahul Kaul (Spine Surgeon)
- MBBS, MS, (Orthopaedic)
- Dr Jaideep Gambhir, M.D(Psychiatrist)
- Consultant Psychiatry, Mob.: 8006888664
- Dr Monica Gambhir, MBBS
- Family Therapist & Relationship Counsellor
- Mob.: 8006888663
- Dr. B.P. Gupta, MS (Surgeon)
- Dr. Deepa Maheshwari
- M.B.B.S., MD, FRM, (IVF Specialist)
- Dr. Vivek Kumar Gupta
- MBBS, MS (General Surgeon)
- M.Ch. (Plastic Surgery)
- Dr. Anand Kumar
- MBBS, MD (Paediatrics)
- Dr. Amit kumar Kothari
- MBBS, MD (Medicine)
- Dr. Amit Aggarwal
- M.B.B.S., M.S. Ortho.

### Facilities:

- 100 Beds. Private & Public wards
- Inpatient & Outpatient - (OPD)Facilities
- 24-Hour ambulance and emergency
- 3 Operation theatres
- Laposcopic & Conventional Surgery
- In vitro fertilization centre (IVF)
- Intensive Care Unit. (ICU)
- Neonatal ICUs (NICU)
- Dental Clinic

- Computerized pathology lab
- Digital X-ray and ultrasound
- Physiotherapy facilities
- 24-Hour Pharmacy
- Cafeteria & Kitchen

Mr. Santosh Kumar (39y/m)

- Has come for  
Medical checkup.

Vn 616  
619P,

N6

Acc < — Plano — 616  
— 0.50 Δ x 100 — 616,  
N6

Blue cut lenses for  
computer use only

(BE)

Lubrex-DS eye drops - 2TID

x 3 months



## CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

**Panels:** Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Series Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medigate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd. (Corporate), National Insurance Co. Ltd. (Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)

## Laboratory Report

Lab Serial no.	: LSHHI287579	Mr. No	: 116375
Patient Name	: Mr. SANTOSH KUMAR	Reg. Date & Time	: 06-Jun-2024 10:57 AM
Age / Sex	: 39 Yrs / M	Sample Receive Date	: 06-Jun-2024 11:39 AM
Referred by	: Dr. SELF	Result Entry Date	: 06-Jun-2024 12:13PM
Doctor Name	: Dr. AMIT KOTHARI	Reporting Time	: 06-Jun-2024 12:13 PM
OPD	: OPD		

### HAEMATOLOGY

	results	unit	reference
<b>CBC / COMPLETE BLOOD COUNT</b>			
HB (Haemoglobin)	13.5	gm/dL	12.0 - 17.0
TLC	5.4	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	68	%	40 - 70
Lymphocyte	24	%	20 - 40
Eosinophil	06	%	01 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	5.47	Thousand / UI	3.8 - 5.10
P.C.V	46.2	million/UI	00 - 40
M.C.V.	84.5	fL	78 - 100
M.C.H.	24.9	pg	27 - 31
M.C.H.C.	29.4	g/dl	32 - 36
Platelet Count	0.90	Lacs/cumm	1.5 - 4.5

**INTERPRETATION:**

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer



technician :

Typed By : Mr. BIRJESH



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### HAEMATOTOLOGY

results	unit	reference
---------	------	-----------

#### ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate)	18	mm/1hr	00 - 22
--------------------------------------	----	--------	---------

#### Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may affect the ESR.

### BIOCHEMISTRY

results	unit	reference
---------	------	-----------

#### HbA1C / GLYCATED HEMOGLOBIN / GHb

Hb A1C	5.23	%	4.0 - 5.6
ESTIMATED AVERAGE GLUCOSE	112.6	mg/dl	

eAG[Calculated]

#### INTERPRETATION-

	HbA1C
NON DIABETIC	4-6 %
GOOD DIABETIC CONTROL	6-8 %
FAIR CONTROL	8-10 %
POOR CONTROL	>-10 %


The Glycosylated haemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a 3 months period. AMERICAN DIABETES ASSOCIATION recommends the testing twice an year in patients with stable blood glucose, and quarterly if treatment changes or blood glucose is abnormal



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Page 1

  
**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist

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### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	170.0	mg/dl	< - 200
HDL Cholesterol	<b>30.7</b>	mg/dl	35.3 - 79.5
LDL Cholesterol	102.3	mg/dl	50 - 150
VLDL Cholesterol	37.0	mg/dl	00 - 40
Triglyceride	<b>184.8</b>	mg/dl	00 - 170
Chloestrol/HDL RATIO	<b>5.5</b>	%	3.30 - 4.40

#### INTERPRETATION:

Lipid profile or lipid panel is a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

### BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	91.1	mg/dl	70 - 110
-----------------	------	-------	----------

#### Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



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### BIOCHEMISTRY

	results	unit	reference
<b>KFT, Serum</b>			
Blood Urea	20.6	mg/dL	18 - 55
Serum Creatinine	0.90	mg/dl	0.7 - 1.3
Uric Acid	5.1	mg/dl	3.5 - 7.2
Calcium	9.4	mg/dL	8.8 - 10.2
Sodium (Na+)	136.8	mEq/L	135 - 150
Potassium (K+)	4.37	mEq/L	3.5 - 5.0
Chloride (Cl)	108.8	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	9.63	mg/dL	7 - 18
PHOSPHORUS-Serum	2.51	mg/dl	2.5 - 4.5

**Comment:-**

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

Centre for Excellent Patient Care



technician :

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Page 1

  
**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist

## Laboratory Report

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OPD	: OPD		

### BIOCHEMISTRY

	results	unit	reference
<b>LIVER FUNCTION TEST,Serum</b>			
Bilirubin- Total	0.32	mg/dL	0.1 - 2.0
Bilirubin- Direct	0.11	mg/dL	0.0 - 0.20
Bilirubin- Indirect	0.21	mg/dL	0.2 - 1.2
SGOT/AST	<b>47.4</b>	IU/L	00 - 35
SGPT/ALT	<b>152.8</b>	IU/L	00 - 45
Alkaline Phosphate	<b>160.0</b>	U/L	53 - 128
Total Protein	7.12	g/dL	6.4 - 8.3
Serum Albumin	4.49	gm%	3.50 - 5.20
Globulin	2.73	gm/dl	1.8 - 3.6
Albumin/Globulin Ratio	1.64	%	

#### INTERPRETATION

A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.



technician :

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Page 1

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## Laboratory Report

Lab Serial No.	: LSHHI287579	Reg. No.	: 116375
Patient Name	: MR. SANTOSH KUMAR	Reg. Date & Time	: 06-Jun-2024 10:57 AM
Age/Sex	: 39 Yrs /M	Sample Collection Date	: 06-Jun-2024 11:38 AM
Referred By	: SELF	Sample Receiving Date	: 06-Jun-2024 11:38 AM
Doctor Name	: Dr. AMIT KOTHARI	ReportingTime	: 06-Jun-2024 12:13 PM
OPD/IPD	: OPD		

### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

Quantity: 20 ml  
 Color: Straw  
 Transparency: clear

#### CHEMICAL EXAMINATION

Albumin: nil  
 Glucose: nil  
 PH: Acidic

#### MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF  
 RBC's: nil  
 Crystals: nil  
 Epithelial cells: 0-1 /HPF  
 Others: nil

#### Note:-

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.



Mr. BIRJESH

**Dr. Rajeev Goel**  
 M.D. (Pathologist)  
 36548 (MCI)

<http://rgeipac3/SJM/Design/Finanace/LabTextReport.aspx>

6/6/2024

**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Microbiologist



Visit ID	: IQD113111	Registration	: 06/Jun/2024 04:34PM
UHID/MR No	: IQD.0000110881	Collected	: 06/Jun/2024 04:47PM
Patient Name	: Mr.SANTOSH KUMAR	Received	: 06/Jun/2024 05:13PM
Age/Gender	: 39 Y 0 M 0 D /M	Reported	: 06/Jun/2024 07:34PM
Ref Doctor	: Dr.SELF	Status	: Final Report
Client Name	: SJM SUPER SPECIALIST HOSPITAL	Client Code	: iqd2151
Employee Code	:	Barcode No	: 240601731



### DEPARTMENT OF HORMONE ASSAYS

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE (FT3,FT4,TSH)</b>				
<b>Sample Type : SERUM</b>				
FT3	2.69	pg/ml	1.4 - 4.40	CLIA
FT4	1.43	ng/dL	0.70 - 1.70	CLIA
TSH	1.29	uIU/mL	0.35-5.50	CLIA

### INTERPRETATION:

- Measurement of Free T3 is often employed to help confirm a diagnosis of hypothyroidism where an elevated free or total T4 has been encountered.
- Free thyroxine (FT4) is a better indicator of thyroid hormone action as it is not affected by changes in thyroxine binding globulin. In mild to moderate systemic illness, FT4 is generally normal or slightly raised and TSH is normal in patients without thyroid disease.
- Low levels of thyroid hormones (FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in nonthyroidal illness also.
- Increased levels are found in Graves's disease, hyperthyroidism and thyroid hormone resistance.
- TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

**In Pregnancy, reference range for FT3 in pg/mL:**  
 First trimester- 2.11-3.83  
 Second and third trimester- 1.96-3.38

**In Pregnancy, reference range for FT4 in ng/dL:**  
 First trimester- 0.7-2.0  
 Second and third trimester- 0.5-1.6  
 (Pregnancy reference values as per American Thyroid Association)

**NOTE:**  
 -TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and is at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

**Note**  
 Ultra-TSH-Reference range is 0.550 to 4.780 uIU/ml  
 TSH (total) - Reference range is 0.35 to 5.50 uIU/ml  
 These values may be compared accordingly

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



Dr. Ankita Singhal  
 MBBS, MD(Microbiology)

Dr. Anil Rathore  
 MBBS, MD(Pathology)

Dr. Prashant Singh  
 MBBS, MD (Pathology)

Authenticity of report can be checked by Scanning QR Code  
 Test Performed at IQ Diagnostics BLK-003/004, Sector 121, Noida - 201301





# SJM SUPER SPECIALITY HOSPITAL

(125 Bedded Fully Equipped with Modern Facilities)

Sector-63, Noida, NH-09, Near Hindon Bridge  
Tel.: 0120-6530900 / 10 Mob.: +91 9599259072



PATIENT ID	: 28166 OPD	<b>X-Ray Report</b>	PATIENT NAME	: MR. SANTOSH KUMAR
AGE	: 039Y		SEX	: Male
REF. PHY.	:		STUDY DATE	: 06-Jun-2024

## RADIOLOGY REPORT

EXAM: X RAY CHEST

### CLINICAL HISTORY:

### COMPARISON:

None

### TECHNIQUE:

Frontal projections of the chest were obtained

### FINDINGS:

- Both lung fields are clear.
- Both costophrenic angles appear normal.
- The tracheal lucency is centrally placed.
- The mediastinal and diaphragmatic outlines appear normal.
- The heart shadow is normal.
- The bony thoracic cage and soft tissues are normal.

### IMPRESSION:

- The study is within normal limits.

Centre for Excellent Patient Care

Dr. AMIT KHARAT  
(MBBS, DMRD, DNB, MNAMS, PhD), FICR  
Consultant Radiologist  
Reg. No: 98050

Dr. Amit Kharat  
06th Jun 2024





R  
PA

