

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b>	: MR.. CHAUDHARY SANDEEP	<b>Age /Gender</b>	: 39 Y(s)/Male
<b>Bill No/ UHID No</b>	: PS003798 / P00000462093	<b>Report Date</b>	: 17-Dec-2022 12:51 pm
<b>Received Date</b>	: 17-Dec-2022 09:42 am	<b>Specimen</b>	: SERUM
<b>Lab No/Result No</b>	: 221201337 / RES317449		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<b>Investigation</b>	<b>Result</b>	<b>Reference Range</b>	<b>Method</b>
<b>BUN</b>			
UREA	: 21.2	12.8-42.8 mg/dL	Urease
UREA NITROGEN(BUN)	: 10.2	6.0 - 20.0 mg/dL	
CREATININE	: 0.6	0.6 - 1.3 mg/dL	Enzymatic
CALCIUM	: 9.3	8.6 - 10.2 mg/dL	Arsenazo
PHOSPHOROUS	: 3.3	2.7-4.5 mg/dL	Phospho Molybdate
URIC ACID	: 6.5	3.5-7.2 mg/dL	Uricase
<b>LIVER FUNCTION TEST</b>			
TOTAL BILIRUBIN	: 0.9	0.3 - 1.2 mg/dL	Diazo
DIRECT BILIRUBIN	: 0.1	0.0 - 0.4 mg/dL	Diazo
INDIRECT BILIRUBIN	: 0.8	0.0 - 0.8 mg/dL	Diazo
ALANINE TRANSAMINASE.	: 31	< 50 U/L	KINETIC
ASPARTATE TRANSAMINASE	: 33.0	10.0 - 40.0 U/L	Kinetic
ALKALINE PHOSPHATASE	: 71.0	30.0 - 115.0 U/L	4 NPP/AMP Buffer
TOTAL PROTEIN	: <b>8.2</b>	6.0 - 8.0 g/dL	Biuret
ALBUMIN	: <b>4.9</b>	3.5 - 4.8 g/dl	BCG
GLOBULIN	: 3.3	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.5	1.0-2.1	Calculated
TOTAL PROTEIN	: <b>8.2</b>	6.0 - 8.0 g/dL	Biuret
ALBUMIN	: <b>4.9</b>	3.5 - 4.8 g/dl	BCG
GLOBULIN	: 3.3	2.3-3.5 gm/dL	Calculated
A/G RATIO	: 1.5	1.0-2.1	Calculated
<b>LIPID PROFILE</b>			
CHOLESTEROL	: <b>113.0</b>	130.0 - 220.0 mg/dL	Enzymatic
TRIGLYCERIDES	: 92.0	35.0 - 180.0 mg/dL	Enzymatic
HDL CHOLESTEROL	: 44.0	35 - 65 mg/dL	Enzymatic
LDL CHOLESTEROL	: 50.0	10.0 - 130.0 mg/dL	Calculated
VLDL CHOLESTEROL	: 18.0	5.0 - 36.0 mg/dL	Calculated
CHOL/HDL RATIO	: 2.6	2.0 - 6.2	Calculated

ATP III NCEP GUIDELINES FOR INTERPRETATION OF LIPID PROFILE

PARAMETER	DESIRABLE	BORDERLINE	REQUIRES TREATMENT
Total Cholesterol	Below 200	200 - 240	Above 240
HDL Cholesterol	Above 60	40 - 59	Below 40
LDL Cholesterol\TAB	Below 130	130-160	Above 160

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<b>Lab No/Result No</b>	: 221201337 / RES317449		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>	<u>Method</u>
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Note: This test is performed on automated BIO CHEMISTRY analyzer - Vitros250

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

**Verified By**

ANAND

NOTE:

\* Clinically correlate, Kindly discuss if necessary.

\* This report relates only to the item received.

**Dr. AALIYA. S, MD PATHOLOGY**

**Sr.Registrar**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b>	: MR.. CHAUDHARY SANDEEP	<b>Age /Gender</b>	: 39 Y(s)/Male
<b>Bill No/ UHID No</b>	: PS003798 / P00000462093	<b>Report Date</b>	: 17-Dec-2022 1:23 pm
<b>Received Date</b>	: 17-Dec-2022 09:43 am	<b>Specimen</b>	:
<b>Lab No/Result No</b>	: 221201338 / RES317507		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<b>Investigation</b>	<b>Result</b>	<b>Reference Range</b>	<b>Method</b>
GLUCOSE (FASTING)	: <b>94.0</b>	Prediabetic : 100 - 125 mg/dL Diabetic : >= 126 mg/dL Normal : < 100.0 mg/dL	GOD-POD

REFERENCE : ADA 2015 GUIDELINES

GLUCOSE (POST PRANDIAL)	: 138	60 - 140 mg/dL	GOD-POD
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**ELECTROLYTES (Na & K)**

SODIUM	: 142.0	136.0 - 145.0 mmol/L	Direct ISE
POTASSIUM	: 4.1	3.5 - 5.1 mmol/L	Direct ISE

**T3-T4-TSH**

Tri-iodothyronine (T3)	: 1.22	0.87 - 1.78 ng/ml	ECLIA
THYROXINE (T4), TOTAL	: <b>12.02</b>	4.6 - 10.5 ug/dL	ECLIA
THYROID STIMULATING HORMONE (ULTRA)	: <b>6.22</b>	0.28 - 3.89 uIU/mL	ECLIA

**TSH - For pregnancy the reference range is as follows -**

1st trimester : 0.6 - 3.4 uIU/mL  
2nd trimester : 0.37 - 3.6 uIU/mL  
3rd trimester : 0.38 - 4.04 uIU/mL

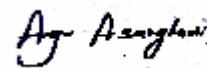
GLYCOSYLATED HAEMOGLOBIN (HBA1c)	: 5.4	Prediabetic : 5.7 - 6.4 % Diabetic : >= 6.5 % Therapeutic Target : < 7.0 %	HPLC
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REFERENCE : ADA 2015 GUIDELINES

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

**Verified By**

RUHI



**Dr. ANJANA SANGHAVI, MD PATHOLOGY**

**Consultant Pathologist**

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**DEPARTMENT OF CLINICAL PATHOLOGY**

<b>Patient Name</b>	: MR.. CHAUDHARY SANDEEP	<b>Age /Gender</b>	: 39 Y(s)/Male
<b>Bill No/ UHID No</b>	: PS003798 / P00000462093	<b>Report Date</b>	: 17-Dec-2022 7:17 pm
<b>Received Date</b>	: 17-Dec-2022 09:42 am	<b>Specimen</b>	: URINE
<b>Lab No/Result No</b>	: 221201337 / RES317697	<b>Sec/Cup/Rep</b>	: No. 0949
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<u>Investigation</u>	<u>Result</u>	<u>Reference Range</u>
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**URINE ROUTINE**

**PHYSICAL EXAMINATION**

COLOUR : Pale Yellow  
APPEARANCE : Clear

**CHEMICAL TEST**

pH	: 5.0	5.0-7.0
SPECIFIC GRAVITY	: 1.025	1.015-1.030
ALBUMIN	: Absent	Absent
SUGAR	: Absent	Absent
KETONE BODIES	: Absent	Absent
BILE PIGMENTS	: Absent	Absent
UROBILINOGEN	: Normal	Normal
NITRITES	: Absent	Absent
LEUCOCYTES ESTERASE	: Absent	Absent

**MICROSCOPIC TEST**

PUS CELLS.	: <b>1-2</b>	0-5 /hpf
RED BLOOD CELLS.	: Absent	0 - 2 /hpf
EPITHELIAL CELLS.	: <b>1-2</b>	0 - 5 /hpf
BACTERIA	: Absent	Absent
CAST	: Absent	Absent
YEAST CELLS	: Absent	Absent
CRYSTALS	: Absent	Absent
OTHERS	: Absent	Absent

**Note: This test is performed on automated CLINICAL PATHOLOGY analyzer - URI PLUS200**

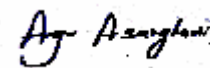
\*\*\* End Of Report \*\*\*

**Verified By**

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**Dr. ANJANA SANGHAVI, MD PATHOLOGY**

**Consultant Pathologist**

**DEPARTMENT OF HAEMATOLOGY**

<b>Patient Name</b>	: MR.. CHAUDHARY SANDEEP	<b>Age /Gender</b>	: 39 Y(s)/Male
<b>Bill No/ UHID No</b>	: PS003798 / P00000462093	<b>Report Date</b>	: 17-Dec-2022 12:39 pm
<b>Received Date</b>	: 17-Dec-2022 09:42 am	<b>Specimen</b>	: EDTA WHOLE BLOOD
<b>Lab No/Result No</b>	: 221201337 / RES317441		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<b>Investigation</b>	<b>Result</b>	<b>Reference Range</b>	<b>Method</b>
<b>HAEMOGRAM REPORT</b>			
<b>W.B.C.COUNT</b>	: 5,690	4000 - 11000 /ul	Coulter Principle
<b>Differential Count</b>			
NEUTROPHILS	: 46.9	40 - 75 %	Derived from WBC Histogram
LYMPHOCYTES	: 38.4	20 - 40 %	
MONOCYTES	: 7.3	2-10 %	
EOSINOPHILS	: <b>6.1</b>	1.0 - 6.0 %	
BASOPHILS	: <b>1.3</b>	0.0 - 1.0 %	
ABSOLUTE NEUTROPHIL COUNT	: 2.66	2 - 7 x10 <sup>3</sup> cells/ul	
ABSOLUTE LYMPHOCYTE COUNT	: 2.18	1 - 3 x10 <sup>3</sup> cells/ul	
ABSOLUTE MONOCYTE COUNT	: 0.42	0.2-1.0 x10 <sup>3</sup> cells/ul	
ABSOLUTE EOSINOPHIL COUNT	: 0.35	0.02-0.5 x10 <sup>3</sup> cells/ul	
ABSOLUTE BASOPHIL COUNT	: 0.07	0.02-0.1 x10 <sup>3</sup> cells/ul	
R.B.C COUNT	: 5.19	4.5 - 6.5 million/ul	Coulter Principle
<b>HAEMOGLOBIN</b>	: 15.1	13 - 17 g/dl	Cynmethhaemoglobin, Photometry
HAEMATOCRIT	: 45.4	40-50 %	Calculated Parameter
MCV	: 87.4	83-99 fL	Coulter Principle
MCH	: 29.1	27 - 32 pg	Calculated parameter
MCHC	: 33.3	31.5 - 34.5 g/dL	Calculated Parameter
RDW	: 12.1	11.6-14.0 %	Calculated from RBC Histogram
<b>PLATELET COUNT</b>	: 226	150 - 450 x10 <sup>3</sup> /ul	Coulter principle
MPV	: <b>12.8</b>	7.8-11 fl	Coulter Principle

**Note: This test is performed on automated HAEMATOLOGY analyzer - YUMIZENH550**

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

**Verified By**

SHRIKANT

NOTE:

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**Dr. AALIYA. S, MD PATHOLOGY**

**Sr.Registrar**

**DEPARTMENT OF HAEMATOLOGY**

<b>Patient Name</b>	: MR.. CHAUDHARY SANDEEP	<b>Age /Gender</b>	: 39 Y(s)/Male
<b>Bill No/ UHID No</b>	: PS003798 / P00000462093	<b>Report Date</b>	: 17-Dec-2022 1:38 pm
<b>Received Date</b>	: 17-Dec-2022 09:42 am	<b>Specimen</b>	: WHOLE BLOOD
<b>Lab No/Result No</b>	: 221201337 / RES317536		
<b>Referred By</b>	: Dr. HOSPITAL CASE		

<b>Investigation</b>	<b>Result</b>	<b>Reference Range</b>	<b>Method</b>
ESR at 1 Hour	: 12	0 - 15 mm/hr	Modified Westergren Method

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**INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease;however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

BLOOD GROUP : B RH POSITIVE

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

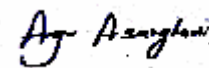
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RUHI

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**Dr. ANJANA SANGHAVI, MD PATHOLOGY**

**Consultant Pathologist**

## RUBY HALL CLINIC PIMPLE SAUDAGAR

<b>Name: SANDEEP CHAUDHARY</b>				<b>Date: 17-12-2022</b>		<b>Time: 10:42</b>	
<b>Age:</b> 39	<b>Gender:</b> M	<b>Height:</b> 169 cms	<b>Weight:</b> 88 Kg	<b>ID:</b> P0462093			
<b>Clinical History:</b> NIL							
<b>Medications:</b> NIL							

### Test Details:

<b>Protocol:</b> Bruce	<b>Predicted Max HR:</b> 181	<b>Target HR:</b> 153
<b>Exercise Time:</b> 0:08:05	<b>Achieved Max HR:</b> 163 (90% of Predicted MHR)	
<b>Max BP:</b> 200/90	<b>Max BP x HR:</b> 32600	<b>Max Mets:</b> 9.1

**Test Termination Criteria:**

### Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:36	1	0	0	99	140/100	13860	2.4 V2	-2.2 aVR
Standing	00:07	1	0	0	98	140/100	13720	1.9 V2	-1.3 aVR
HyperVentilation	00:07	1	0	0	98	140/100	13720	1.8 V4	-1.4 aVR
PreTest	00:08	1	1.6	0	104	140/100	14560	2.2 V2	-1.8 aVR
Stage: 1	03:00	4.7	2.7	10	130	180/90	23400	1.5 V3	-1.8 aVR
Stage: 2	03:00	7	4	12	149	190/90	28310	-3.7 aVR	2.6 V3
Peak Exercise	02:05	9.1	5.5	14	163	190/90	30970	3 aVR	3.5 V4
Recovery1	01:00	1	0	0	139	190/90	26410	3.4 V3	2.9 V3
Recovery2	01:00	1	0	0	121	200/90	24200	2.1 V3	2.7 V3

### Interpretation

The Patient Exercised according to Bruce Protocol for 0:08:05 achieving a work level of 9.1 METS.  
 Resting Heart Rate, initially 99 bpm rose to a max. heart rate of 163bpm (90% of Predicted Maximum Heart Rate).  
 Resting Blood Pressure of 140/100 mmHg, rose to a maximum Blood Pressure of 200/90 mmHg  
 Good Effort Tolerance  
 Normal HR & BP Response  
 No Angina or Arrhythmias  
 No Significant ST-T Changes Noted During Exercise  
 Negative Stress Test

Ref. Doctor: ---

  
**Doctor: DR.KEDAR KULKARNI**

Name:	CHAUDHARY SANDEEP.	Exam Date :	17-Dec-2022 10:06
Age :	039Y	Accession:	85105100715
Gender:	M	Exam:	ABDOMEN AND PELVIS
PID:	P00000462093	Physician:	HOSPITAL CASE <sup>AAAA</sup>
OPD :			

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver is normal in size 13.2 cm and shows increased echogenicity suggestive of grade I fatty changes. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

#### **Gall bladder is not visualized H/o cholecystectomy.**

Pancreas appears normal in size and echotexture. No focal lesion is seen.  
Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 11.8 x 4.8 cms. Left kidney measures 11.6 x 5.9 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

Visualised bowel loops are non-dilated and show normal peristalsis.  
There is no ascites or significant lymphadenopathy seen.

#### **IMPRESSION :**

**Grade I fatty liver.**

**No other significant abnormality noted.**

**Suggest : Clinical correlation.**



**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
MBBS, DMRD  
Regd. No. 090812

Date: 17-Dec-2022 14:23:02





Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

**Name:** CHAUDHARY SANDEEP .  
**Age :** 39 Years  
**Gender:** M  
**PID:** P00000462093  
**OPD :**

**Exam Date :** 17-Dec-2022 10:05  
**Accession:** 85188133903  
**Exam:** CHEST X RAY  
**Physician:** HOSPITAL CASE^^^^

Clinical Profile : Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
**MBBS, DMRD**  
**Regd. No. 090812**

Date: 17-Dec-2022 14:20:14



Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

**Name:** CHAUDHARY SANDEEP .  
**Age :** 39 Years  
**Gender:** M  
**PID:** P00000462093  
**OPD :**

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**Accession:** 85188133903  
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**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
**MBBS, DMRD**  
**Regd. No. 090812**

Date: 17-Dec-2022 14:20:14



<b>Name:</b> CHAUDHARY SANDEEP.	<b>Exam Date :</b> 17-Dec-2022 10:06
<b>Age :</b> 039Y	<b>Accession:</b> 85105100715
<b>Gender:</b> M	<b>Exam:</b> ABDOMEN AND PELVIS
<b>PID:</b> P00000462093	<b>Physician:</b> HOSPITAL CASE^^^^
<b>OPD :</b>	

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### IMPRESSION :

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**No other significant abnormality noted.**

**Suggest : Clinical correlation.**

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Date: 17-Dec-2022 14:23:02