



APEX HOSPITALS KANDIVALI DIAGNOSTIC

CASHLESS
FACILITY

Akurla Road, Next to Lodha Woods, Lokhandwala Township,
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tele.:
022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Mr. NITISH GUPTA	LabNo	15177
UHID/IP No	150009787 / 80	Sample Date	06/04/2024 9:16AM
Age/Gender	35 Yrs/Male	Receiving Date	06/04/2024 10:48AM
Bed No/Ward	OPD	Report Date	06/04/2024 12:58PM
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final



HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	15.6	gm/dl	13.5 - 18.0	SLS- Hb Method
RBC Count (Red Blood Cell)	5.09	10 ⁶ /uL	4.70 - 6.00	
PCV (Haematocrit)	44.77	%	40.0 - 50.0	
MCV	87.96	fL	78 - 100	Calculated
MCH	30.65	pg	27 - 31	Calculated
MCHC	34.84	gm/dl	30 - 36	Calculated
RDW	14.0	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	7450	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	67	%	40 - 80	
Lymphocyte %	30	%	20 - 40	
Eosinophil %	01	%	0 - 6	
Monocytes %	02	%	1 - 12	
Basophil %	00	%	0 - 2	
Band Cells	00	%		
Absolute Neutrophil Count (ANC)	4991.5	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	2235	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	74.5	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	149 L	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	106 L	10 ³ /uL	150 - 400	DC Detection
Platelets Morphology	Reduced On Smear			
MPV	13.0 H	fL	7 - 12	

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai



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HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
ERYTHROCYTE SEDIMENTATION RATE (ESR)				
Sample: W. B. EDTA				
ESR (Erythrocyte Sed.Rate)	10	mm/hr	< 15	Westergren

--End Of Report--

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IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD GROUPING				
Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"B" Rh Positive			SLIDE METHOD

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
GLUCOSE (PP)				
Sample: Fl. Plasma				
Blood Sugar(2 Hours PP)	118.0	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide
Urine PP Sugar	Absent		Absent	
Urine PP Ketone	Absent		Absent	

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :
The glycaemic index and response to food consumed, Changes in body composition, increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

GLUCOSE (FASTING)

Sample: Fl. Plasma

Glucose (Fasting Blood Sugar / FBS)	104.0	mg/dl	70 - 110	Glucose Oxidase,Hydrogen Peroxide
Urine Fasting Sugar	Absent		Absent	
Urine Fasting Ketone	Absent		Absent	

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIPID PROFILE SERUM				
Sample: Serum				
Cholesterol-Total	145	mg/dl	< 200.00	Cholesterol Oxidase,Esterase,Peroxidase
Triglycerides	120	mg/dl	< 150	Enzymatic End point
HDL Cholesterol	49	mg/dl	40.00 - 60.00	Phosphotungstat
VLDL Cholesterol	24.00	mg/dl	6.00 - 38.00	Calculated Value
LDL Cholesterol	72.00	mg/dl	< 100.00	Calculated Value
Cholesterol Total : HDL Cholesterol Ratio	2.96 L		3.50 - 5.00	Calculated Value
LDL Cholesterol : HDL Cholesterol Ratio	1.47 L		2.50 - 3.50	Calculated Value

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIVER FUNCTION TEST (LFT) SERUM				
Sample: Serum				
Bilirubin Total (TBil)	0.52	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.38	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.14 L	mg/dl	0 - 1	
SGPT (ALT)	24.43	U/L	5 - 40	IFCC modified
SGOT (AST)	19.20	U/L	5 - 40	IFCC modified
Protein Total	6.2	gm/dl	6.00 - 8.00	Biuret
Albumin	4.1	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	2.10	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.95		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	69.65	IU/L	42 - 140	
GGTP (GAMMA GT)	22.93	IU/L	15.0 - 72.0	UV Kinetic IFCC

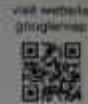
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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
RFT (RENAL FUNCTION TEST)				
Sample: Serum				
Creatinine	1.2	mg/dl	0.70 - 1.50	Jaffes
UREA	25.0	mg/dl	15 - 50	CDC Urease,Colorimetric
BUN - Blood Urea Nitrogen	11.68	mg/dl	7 - 20	
Calcium	8.9	mg/dl	8.6 - 10.5	Arsenazo III
Uric Acid	5.4	mm/hr	3.5 - 8.5	URICASE- PEROXIDASE
Phosphorus	3.0	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
Sodium	140.0	mEq/L	135 - 146	ISE Direct
Potassium	4.5	mEq/L	3.5 - 5.5	ISE Direct
Chloride	107.0	mEq/L	98 - 108	ISE Direct
Protein Total	6.2	gm/dl	6.00 - 8.00	Biuret
Albumin	4.1	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	2.10	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.95		1.00 - 2.50	Calculated Value

--End Of Report--

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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final



CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE				
Sample: Urine				
PHYSICAL EXAMINATION				
Quantity	30	ml		
Color	Pale Yellow			
Appearance	Clear		Clear	Clear
Specific Gravity	1.010		1.010 - 1.025	
CHEMICAL EXAMINATION				
pH	6.0		4.5 - 8.5	
Protein	Absent			
Glucose	Absent			
Ketone	Absent			
Occult Blood	Absent			
Bile Salt	Absent			Absent
Bile Pigment	Absent			Absent
MICROSCOPIC EXAMINATION				
Pus Cells	2-3/hpf			
RBCs	Absent			
Epithelial Cells	1-2/hpf			
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			Absent
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	Absent			

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai

Patient Id : PVD18324-25/1284
 Patient : MR NITISH GUPTA
 Age/sex : 35 Yrs/ Male
 Center : APEX HOSPITALS KANDIVALI
 Ref. By : Self

Sample ID : 24041656
 Reg. Date : 06/04/2024
 Report Date : 06/04/2024
 Case No. :



HbA1c-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.2	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	102.54	mg/dL	
Method : HPLC-Biorad D10-USA			


INTERPRETATION

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 \times A1c - 46.7$
6. Interference of Haemoglobinopathies in HbA1c estimation.
 - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - C. Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
7. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

CENTRAL PROCESSING LABORATORY

Grandeur 208/209/210, S.V. Road, Dahisar (East), Mumbai - 400 068.
 Tel: 3523 7545 + Mob: 86910 17023 / 81042 45061 + www.pathvisiondiagnostics.com


 DR. SANDEEP B. PORWAL
 MBBS MD (Path) Mumbai
 MMC Reg no 2001031640



Patient Id : PVD18324-25/1284
 Patient : MR NITISH GUPTA
 Age/sex : 35 Yrs/ Male
 Center : APEX HOSPITALS KANDIVALI
 Ref. By : Self

Sample ID : 24041656
 Reg. Date : 06/04/2024
 Report Date : 06/04/2024
 Case No. :



IMMUNOASSAY

Test Description	Result	Unit	Biological Reference Range
TOTAL T3 T4 TSH (IFT)			
T3 (Triiodothyronine)	115.12	ng/dl	83-200 For Pregnant females: First Trim : 104.8 - 229.8 2nd Trim : 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	7.13	ug/dL	5.13 - 14.10 For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 18.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	3.08	uIU/ml	0.27 - 4.20


Method : ECLIA

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	- Isolated Low T3 - often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	- Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. - Subclinical Autoimmune Hypothyroidism - Intermittent T4 therapy for hypothyroidism - Recovery phase after Non-Thyroidal illness
Raised	Decreased	Decreased	- Chronic Autoimmune Thyroiditis - Post thyroidectomy, Post radioiodine - Hypothyroid phase of transient thyroiditis
Raised or within Range	Raised	Raised or within Range	- Interfering antibodies to thyroid hormones (anti-TPO antibodies) - Intermittent T4 therapy or T4 overdose - Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics
Decreased	Raised or within Range	Raised or within Range	- Isolated Low TSH - especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness - Subclinical Hyperthyroidism - Thyroxine ingestion
Decreased	Decreased	Decreased	- Central Hypothyroidism - Non-Thyroidal illness - Recent treatment for Hyperthyroidism (TSH remains suppressed)
Decreased	Raised	Raised	- Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule - Transient thyroiditis- Postpartum, Silent (lymphocytic), Postnatal (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum
Decreased or within Range	Raised	Within Range	- T3 toxicosis - Non-Thyroidal illness

End Of Report

Term & Conditions Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-44 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redrawn. Partial reproduction of this report is not permitted. The test report is not valid for medico-legal purpose.


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Age/Gender	35 Yrs/Male	Receiving Date	06/04/2024 10:46AM
Bed No/Ward	OPD	Report Date	08/04/2024 12:55PM
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final



XRAY CHEST PA VIEW

The lung on either side shows adequate translucency and exhibit normal vasculature.

Bilateral hila are symmetrical in size, outline and density

Trachea is central in position and no mediastinal abnormality is visible.

Bilateral costophrenic angles are clear.

Cardiac shadow is unremarkable.

Bone thorax appears unremarkable.

--End Of Report--

Dr. SAUMIL PANDYA
MD, D.N.B, RADIOLOGIST



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6/04/24

MR. Nitish Gupta 35 yrs / male

Optical.

Distance.

(R) eye - 0.00.

(L) eye - clear.

Near.

(R) eye - clear.

(L) eye - MG.

Apex Hospitals Kandivali
Akurli Road, Next To Lodha Woods,
Lokhandwala Township, Near Mahindra,
Gate No. 4, Kandivali (E), Mumbai - 101.



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Mr - Nitish Gupta 35 yrs / male

6/04/24

Weight - 75.1 kg

Height - 169 cm

BP - 110 / 70.

SpO2 - 98%

Pulse - 76 bpm



ओपेक्स हॉस्पिटलस कारिबली

Name

Dr. Anil Kumar

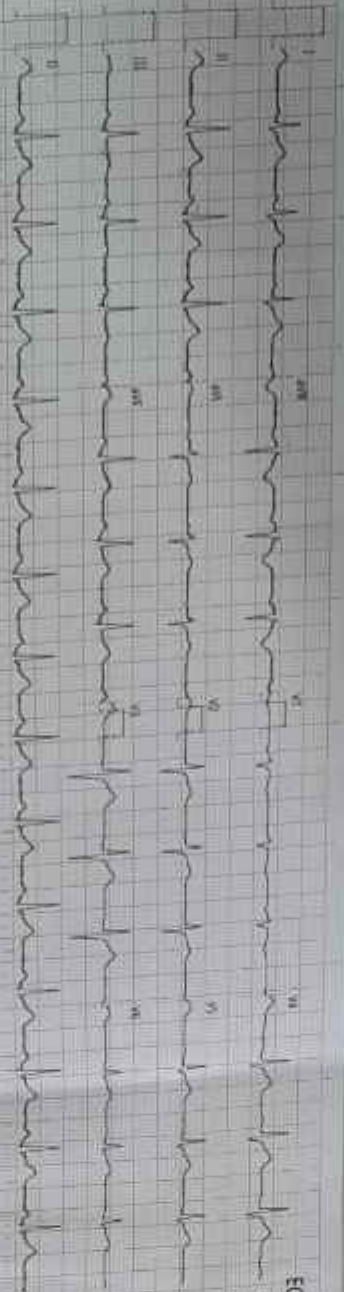
Date 20/04/24

Time 11:00 AM

Age 35 yrs

Gender Male

0.05mV, 25mm/s, AC 50Hz, 25mm/s, 10/10mm, Cardiac U-30, 10/25, Semiautomatic



ECG report

ID: 70000000000000000000
Name:
Gender:
Age:
Time:
Lead set:

HR: 95 bpm
PR: 164 ms
QT/QTc: 384/40 ms
P/QRS/T: 97/12/20
RS/ST/T: 0.23/0.02/0.14
QRS/ST/T: 1.5/0.7/0.1

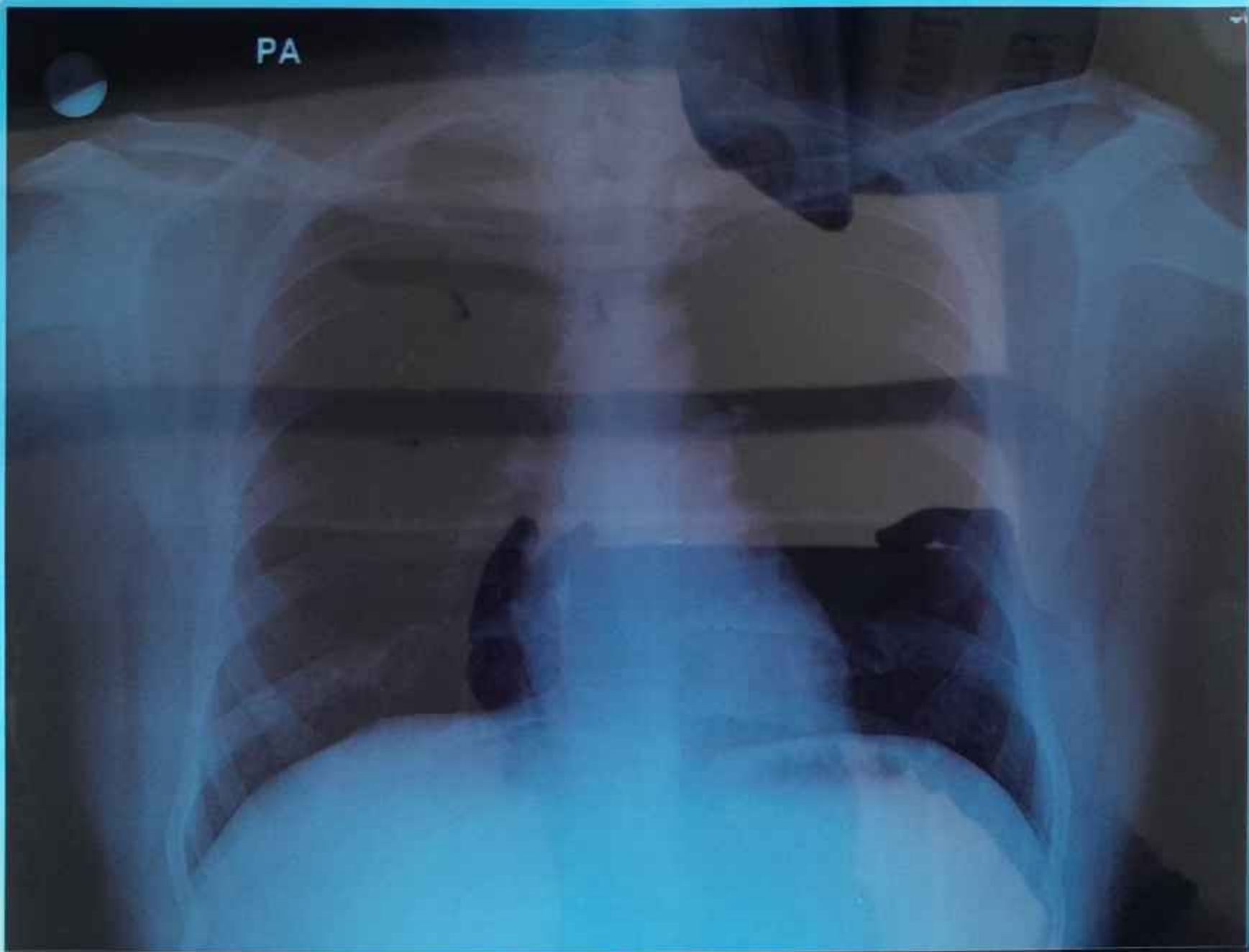
Interpretation: Normal ECG

Signature: [Signature]

Date: 20/04/24

Cardiac and eye
Sundermeier, 2018/04/20/11:00

PA



mr nitish gupta 35 150009787 M Ped. ChestPA 06-Apr-24 self
ABEY HOSPITALS KANDIVALI KANDIVALI (E)