

DR. PRERAK TRIVEDI
M.D., IDCCM
CRITICAL CARE MEDICINE
REG.NO.G-59493


UHID:		Date: 28/10/23	Time: 4:50PM
Patient Name: Sandeep Kumar Singh		Height:	
Age / Sex: 37y / M	LMP:	Weight:	
History:			
C/C/O: No fresh complaints		History: KID DROVE - leg	
Allergy History:		Addiction:	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:			
Temperature: Normal		FBS - 231	
Pulse: 96/min		PPBS - 459, ↑↑	
BP: 130/82 mmHg		HbA1c - 9	
SPO2: 98% on RA			
Provisional Diagnosis:			

Advice:

FBS / PP2BS After. 1 month.

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
	TAB.	DAPAVEL S (10/50)	1	o	o	o (20)
	TAB.	MEFFORMIN (500)	o	-	1	1 (30)
	TAB	ATORVA (10)	o	o	1	(30)
Strict diet control.						

Insulin Scale	RBS-	hourly	Diet Advice:
< 150 -	300-350 -		Follow-up:
150-200 -	350-400 -		
200-250 -	400-450 -	Sign:	
250-300 -	> 450 -		

DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	Date: 25/10/23	Time: 12:00
Patient Name: Sandeep Kumbhkar	Age / Sex:	Height:
	Weight:	
History:	General healthy child. Pt have DM last 1 year Pt has ketone in urine last 7-8 years	
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination:	VU 26/6 E/6 R/6 Colored Vision - normal	
Diagnosis:		

Health Check up Booking Confirmed Request(bobE48343),Package Code-PKG10000240,
Beneficiary Code-7909

Mediwheel <wellness@mediwheel.in>

Tue 10/17/2023 5:27 AM

To:Sandeep Kumar Singh <Sandeep.Singh7@bankofbaroda.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>

यह मेल बैंक डोमेन के बाहर से आया है, अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक न करें।
#: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLIC

011-41195959

Email:wellness@mediwheel.in

Dear MR. SINGH SANDEEP KUMAR,

Please find the confirmation for following request.

Booking Date : 14-10-2023
Package Name : Medi-Wheel Metro Full Body Health Checkup Male Below 40
Name of Diagnostic/Hospital : Aashka Multispeciality Hospital
Address of Diagnostic/Hospital : Between Sargasan & Reliance Cross Road
Contact Details : 9879752777/7577500900
City : Gandhi Nagar
State : Gujarat
Pincode : 382315
Appointment Date : 28-10-2023
Confirmation Status : Confirmed
Preferred Time : 8:00am-8:30am
Comment : APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

AG 2023-2024, Arcoform Healthcare Limited

भारत सरकार
Government of India

प्रीती सिंह
Preeti Singh
जन्म तिथि / DOB : 15/07/1995
महिला / Female

5577 8945 4350

आधार - आम आदमी का अधिकार

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
अत्मजा: हेमन्द्र सिंह, गाँव टिकरा
बडोली पोस्ट सरेली, सरेली खाम,
बदायूँ, उसहत, उत्तर प्रदेश, 243641

Address:
DiO: Hemendra Singh, village
Ikra vachheli post sareli, Sareli
Kham, Budaun, Usehat, Uttar
Pradesh, 243641

5577 8945 4350

1947
1800 300 1947

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www.uidai.gov.in

भारत सरकार
Government of India

संदीप कुमार सिंह
Sandeep Kumar Singh
जन्म तिथि / DOB : 30/08/1988
पुरुष / Male

8923 2304 2057

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता: सुरेंद्र पाल सिंह, हाउस नं. 51 एच. एल.,
जिंगल बेल्ल पब्लिक स्कूल, पारवाना नगर
इज्जतनगर, बरेली, बरेली, उत्तर प्रदेश, 243006
Address: Surendra pal Singh, HOUSE NO.
51 H. L., NEAR JINGLE BELLS PUBLIC
SCHOOL, PARWANANAGAR
IZZATNAGAR, Bareilly, Bareilly, Uttar
Pradesh, 243006

8923 2304 2057

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नाम : संदीप कुमार सिंह
Name : MR. SANDEEP KUMAR SINGH
कर्मचारी कुट क्र. : 74528
Employee Code No. : 74528



पारिक्ता प्रधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder

मिलने पर निम्नलिखित को सौंपा
राम महाप्रबंधक,
बैंक ऑफ़ बरोडा, राष्ट्रीय साझा सेवा केंद्र,
24^{थी} मंजिल, गिफ्ट टॉवर 1, गिफ्ट सिटी,
गान्धीनगर - 382355, गुजरात, भारत।
फ़ोन : +91 079 66734085

If found, please return to
Dy. General Manager,
Bank of Baroda, National Shared Services Centre,
24th Floor, Gift Tower 1, Gift City,
Gandhinagar - 382355, Gujarat, India.
Phone : +91 079 66734085

रक्त समूह Blood Group : A+
समय रिक्रिडेंटिफिकेशन मार्क : Make an Left Hand Finger



LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref.By : HOSPITAL	Dis. At :	PL ID : 3091465
Bill Loc : Aashka hospital		PL Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type :	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23246218

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	231.01 ✓	mg/dL	70.0 - 100
Plasma Glucose - PP	459.06 ✓	mg/dL	70.0 - 140.0
Glyco Hemoglobin			
HbA1C	9.90 ✓	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Haemogram (CBC)			
RBC (Electrical Impedance)	5.86	millions/cu mm	4.50 - 5.50
Lymphocyte	42.0	%	20.00 - 40.00
Lipid Profile			
Cholesterol	219.19	mg/dL	110 - 200
HDL Cholesterol	38.0	mg/dL	48 - 77
Triglyceride	164.56	mg/dL	<150
Chol/HDL	5.77		0 - 4.1
LDL Cholesterol	148.28	mg/dL	0.00 - 100.00
Liver Function Test			
Alkaline Phosphatase	165.45	U/L	46 - 116

Abnormal Result(s) Summary End

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Hill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 09:55	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	15.9	G%	13.00 - 17.00
RBC (Electrical Impedance)	H 5.86	millions/cumm	4.50 - 5.50
PCV(Calc)	48.64	%	40.00 - 50.00
MCV (RBC histogram)	83.0	fL	83.00 - 101.00
MCH (Calc)	27.1	pg	27.00 - 32.00
MCHC (Calc)	32.7	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.30	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

		UNIT	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Total WBC Count	7030	/μL	4000.00 - 10000.00		
Neutrophil	[%] 52.0	%	40.00 - 70.00	3656	/μL 2000.00 - 7000.00
Lymphocyte	H 42.0	%	20.00 - 40.00	2953	/μL 1000.00 - 3000.00
Eosinophil	1.0	%	1.00 - 6.00	70	/μL 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00	352	/μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	230000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.24		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Lymphocytosis
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

Note (LL-Very Low, L-Low, H-High, HH-Very High A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 11:24	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR <small>Westergren Method</small>	04	mm after 1hr	3 - 15	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

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M.D. (Pathologist)

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LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 11:03	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type	A
Rh Type	POSITIVE

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : **SANDEEP KUMAR SINGH** Sex/Age : **Male / 37 Years** Case ID : **31002201464**
 Ref By : **HOSPITAL** Dis. At : PL ID : **3091465**
 Bill Loc : **Aashka hospital** Pt. Loc :

Reg Date and Time : **28-Oct-2023 09:08** Sample Type : **Spot Urine** Mobile No :
 Sample Date and Time : **28-Oct-2023 09:08** Sample Coll. By : Ref Id1 : **OSP31516**
 Report Date and Time : **28-Oct-2023 11:45** Acc. Remarks : **Normal** Ref Id2 : **O23246218**

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour : **Pale yellow**
 Transparency : **Clear**

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.030		1.003 - 1.035
pH	7.0		4.6 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note: (L-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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LABORATORY REPORT



Name : **SANDEEP KUMAR SINGH** Sex/Age : **Male / 37 Years** Case ID : **31002201464**
 Ref By : **HOSPITAL** Dis. At : Pt. ID : **3091465**
 Bill Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : **28-Oct-2023 09:08** Sample Type : **Spot Urine** Mobile No :
 Sample Date and Time : **28-Oct-2023 09:08** Sample Coll. By : Ref Id1 : **OSP31516**
 Report Date and Time : **28-Oct-2023 11:45** Acc. Remarks : **Normal** Ref Id2 : **O23246218**

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah
 MD (Pathologist)

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LABORATORY REPORT



Name : **SANDEEP KUMAR SINGH** Sex/Age : **Male / 37 Years** Case ID : **31002201464**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3091465**
 Bill Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : **28-Oct-2023 09:08** Sample Type : **Plasma Fluoride F, Plasma Fluoride PP** Mobile No :
 Sample Date and Time : **28-Oct-2023 09:08** Sample Coll. By : Ref Id1 : **OSP31516**
 Report Date and Time : **28-Oct-2023 13:15** Acc. Remarks : **Normal** Ref Id2 : **O23246218**
TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F	H	231.01	mg/dL	70.0 - 100
Plasma Glucose - PP <small>Photometric, Hexokinase</small>	H	459.06	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.
 < 100 mg/dL : Normal level
 100 - 126 mg/dL : Impaired fasting glucose per guidelines
 > 126 mg/dL : Probability of Diabetes, Confirm as per guidelines

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah

(M) : Pathologist

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LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Bill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 11:56	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <small>Enzymatic: CHOD-POD</small>	H	219.19	mg/dL	110 - 200
HDL Cholesterol	L	38.0	mg/dL	48 - 77
Triglyceride <small>Glycerol Phosphate Oxidase</small>	H	164.56	mg/dL	<150
VLDL <small>Calculated</small>		32.91	mg/dL	10 - 40
Chol/HDL <small>Calculated</small>	H	5.77		0 - 4.1
LDL Cholesterol <small>Calculated</small>	H	148.28	mg/dL	0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001). MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL levels have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note: (L-Very Low, LL-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Bill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 13:15	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <small>UV with PSP</small>	38.45	U/L	16 - 63	
S.G.O.T. <small>UV with PSP</small>	21.39	U/L	15 - 37	
Alkaline Phosphatase <small>Colorimetric, PNPP-AMP</small>	H 165.45	U/L	46 - 116	
Gamma Glutamyl Transferase <small>Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</small>	36.67	U/L	0 - 55	
Proteins (Total) <small>Colorimetric, Buret</small>	8.02	gm/dL	6.40 - 8.30	
Albumin <small>Bromocresol purple</small>	4.87	gm/dL	3.4 - 5	
Globulin <small>Calculated</small>	3.15	gm/dL	2 - 4.1	
A/G Ratio <small>Calculated</small>	1.5		1.0 - 2.1	
Bilirubin Total <small>Photometry</small>	0.49	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <small>Diazotization reaction</small>	0.20	mg/dL	0 - 0.50	
Bilirubin Unconjugated <small>Calculated</small>	0.29	mg/dL	0 - 0.8	

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M.D. (Pathologist)

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Bill Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 11:57	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>BUN</small>	11.6	mg/dL	8.90 - 20.60	
Creatinine	0.69	mg/dL	0.50 - 1.50	
Uric Acid <small>Uricase</small>	5.07	mg/dL	3.5 - 7.2	

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M.D. (Pathologist)

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Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Hill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 11:25	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	H 9.90		% of total Hb <5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated	237.43	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

- HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
- Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
- Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
- Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
- In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
- The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

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M.D. (Pathologist)

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Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Serum	Mobile No. :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 14:18	Acc. Remarks : Normal	Ref Id2 : O23246218

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	89.24	ng/dL	70 - 204	
Thyroxine (T4) <small>CMA</small>	7.58	ng/dL	4.87 - 11.72	
TSH <small>CMA</small>	1.61	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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LABORATORY REPORT



Name : SANDEEP KUMAR SINGH	Sex/Age : Male / 37 Years	Case ID : 31002201464
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3091465
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:08	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:08	Sample Coll. By :	Ref Id1 : OSP31516
Report Date and Time : 28-Oct-2023 14:18	Acc. Remarks : Normal	Ref Id2 : O23246218

Interpretation Note:

s-TSH is a sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal testing to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests: T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T4 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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PATIENT NAME:SANDEEP KUMAR SINGH

GENDER/AGE:Male / 37 Years

DATE:28/10/23

DOCTOR:DR.HASIT JOSHI

OPDNO:OSP31516

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 33mm	
LEFT ATRIUM	: 34mm	
LV Dd / Ds	: 40/28mm	EF 60%
IVS / LVPW / D	: 11/10mm	
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/0.7m/s	
AORTIC	: 1.2m/s	
PULMONARY	: 0.9m/s	
COLOUR DOPPLER	: NO MR/TR	
RVSP	:	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST

DR.HASIT JOSHI (9825012235)



PATIENT NAME: SANDEEP KUMAR SINGH

GENDER/AGE: Male / 37 Years

DATE: 28/10/23

DOCTOR:

OPDNO: OSP31516

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows increased parenchymal echoes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.2 x 4.3 cms in size.
Left kidney measures about 10.1 x 4.3 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 140 cc.

PROSTATE: Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.
Prostate volume measures about 14 cc.

COMMENT: Grade I fatty changes in liver.

Normal sonographic appearance of GB; Pancreas, spleen, kidneys, bladder and prostate.


DR. SNEHA PRAJAPATI
CONSULTANT RADIOLOGIST

PATIENT NAME:SANDEEP KUMAR SINGH

GENDER/AGE:Male / 37 Years

DATE:28/10/23

DOCTOR:

OPDNO:OSP31516

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

28.10.2023 11:40:15 AM
ASHKA HOSPITAL LTD.
SARGASAM
GANDHINAGAR

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

Room:

80 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 82 ms
QT / QTcbaz : 370 / 426 ms
PR : 140 ms
P : 112 ms
RR / PP : 748 / 750 ms
P / QRS / T : 65 / 55 / 89 degrees

Sinus rhythm with marked sinus arrhythmia
Nonspecific ST and T wave abnormality
Abnormal ECG

