

|                                    |                                 |
|------------------------------------|---------------------------------|
| Patient Name: <b>MAHESH GHODKE</b> | Date: <b>14/02/2024</b>         |
| Patient Id: <b>5104</b>            | Age/Sex: <b>34 Years / MALE</b> |
| Ref Phy: <b>DR. SARDA</b>          | Address :                       |

## **RADIOGRAPH OF CHEST PA VIEW**

### **Findings:**

Both the lung fields are clear.

The broncho vascular markings are appears normal.

The hilar shadows are appears normal.

Both Cardiophrenic and Costophrenic angles are clear.

The Cardiac silhoutte is within normal limits.

Aortic shadow is normal.

Both domes of diaphragms are normal.

The visualised bony thorax is normal.

### **Impression:**

**No significant abnormality noted in X-ray chest.**



**DR AMEY S. JAJU, MBBS, DNB RADIOLOGY**  
**Fellow in MSK imaging**

# ANUSHREE SONOGRAPHY & X-RAY CENTRE

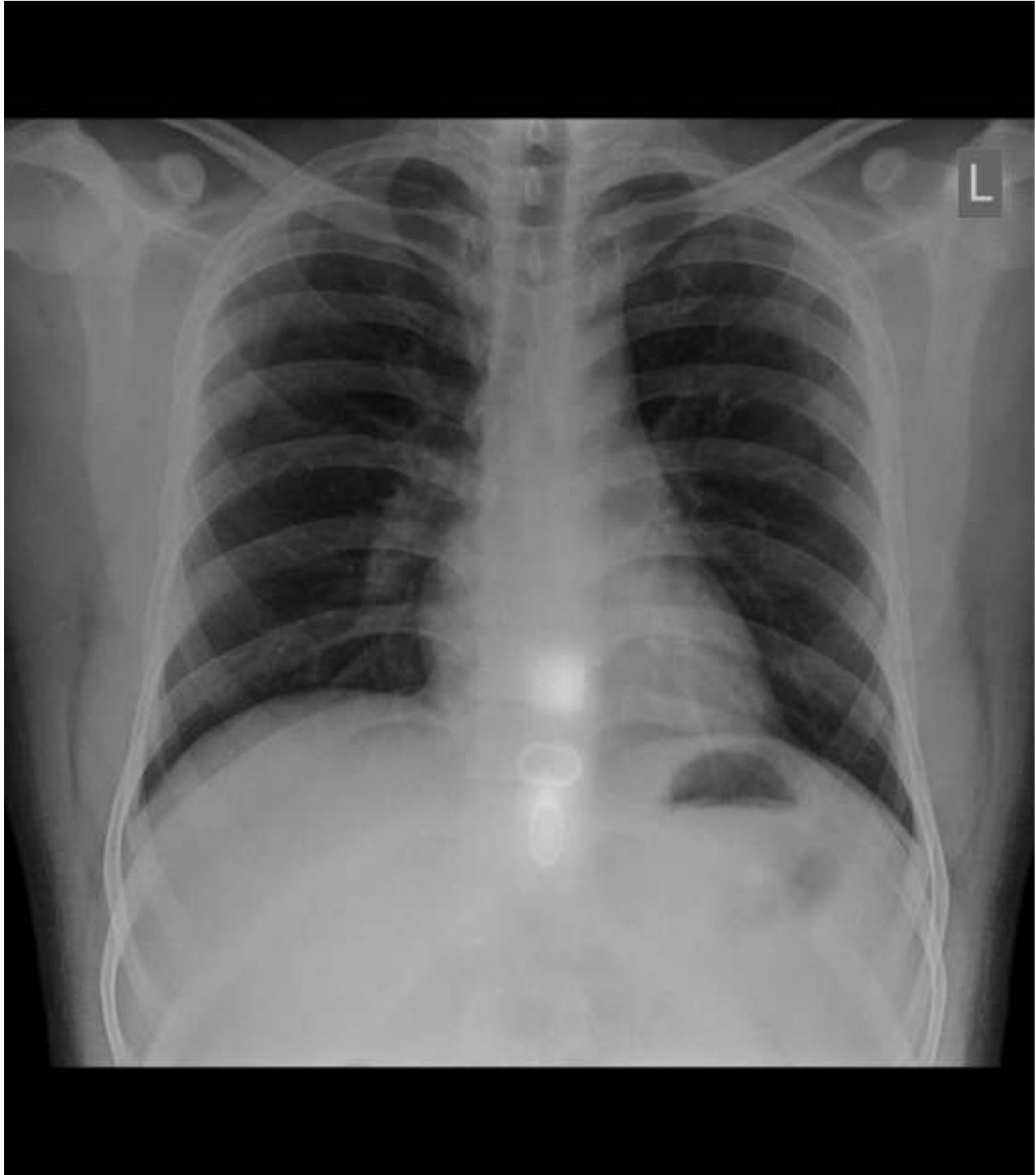
Name: Mahesh Ghodke

Age: 34 Y

Sex: Male

RefDr: Dr. Sarda

Date: 14-Feb-2024



|                                    |                                 |
|------------------------------------|---------------------------------|
| Patient Name: <b>MAHESH GHODKE</b> | Date: <b>14/02/2024</b>         |
| Patient Id: <b>5105</b>            | Age/Sex: <b>34 Years / MALE</b> |
| Ref Phy: <b>DR. SARDA</b>          | Address :                       |

## ULTRASONOGRAPHY OF ABDOMEN AND PELVIS

**LIVER:** The liver is normal in size 15.2 cm, shape, position. **Mild diffuse fatty changes are noted.** Normal respiratory movements are seen. No focal solid or cystic mass lesion is noted.

**BILIARY SYSTEM:** Gall bladder shows normal physiological distention. No mural mass or calculus is noted. There is no evidence of pericholecystic fluid. CBD and intra hepatic biliary radicles show normal caliber.

**PANCREAS:** The pancreas is normal in size, shape, and echogenicity and echo texture. No solid or cystic mass lesion is noted. Pancreatic duct is not dilated.

**SPLEEN:** The spleen is normal in size It measures 10.3 cm, shape, position, echogenicity and echotexture. No focal mass lesion is noted.

**KIDNEYS:** Right kidney measures 10.2 x 4.5 cm. Left kidney measures 10.0 x 4.9 cm. Both kidneys are normal in size, shape, position, echogenicity and echotexture. Normal corticomedullary differentiation is noted. No focal solid or cystic mass lesion or any calculus is seen. Pelvicalyceal systems on both sides are normal.

**URINARY BLADDER:** The urinary bladder shows physiological distention. It shows normal wall thickness. No calculus or mass lesion is seen.

**PROSTATE:** The prostate is normal in shape, position, echogenicity and echotexture. The prostate measure 2.4 x 2.6 x 2.8 cm (volume = 9.0 gm). There is no focal solid or cystic mass lesion in it.

**SEMINAL VESICALS:** Both seminal vesicles are normal in size, shape, echogenicity and echotexture.

**OTHERS:** There is no free or loculated fluid collection in abdomen or pelvis. No significant lymphadenopathy is noted.

### **CONCLUSION:**

**Grade I fatty changes in liver.**



**DR AMEY S. JAJU, MBBS, DNB RADIOLOGY**  
**Fellow in MSK imaging**



# ANUSHREE SONOGRAPHY & X-RAY CENTRE

Name: MAHESH GHODKE

Age: 34 Y

Sex: Male

RefDr: Sarda

Date: 14-Feb-2024





**SARDA**

**CENTRE FOR DIABETES & SELF CARE**

4, Vyankatesh Nagar, Jaisa Road, Aurangabad. Ph. : (0240) 2332851, 2334850.

Name: Mr. Mahesh Ghodke Age: 34y/m

**CLINICAL SUMMARY:**

Weight: \_\_\_\_\_ Height (Cms): \_\_\_\_\_ Blood Pressure: \_\_\_\_\_

**ECG FINDINGS:**

Rate: 64/min QRS Complex: Ⓡ

Rhythm: Ⓡ ST Segment: Ⓡ

Mechanism: Ⓡ T Wave: Ⓡ

Axis: Ⓡ QT Interval: Ⓡ

P Wave: Ⓡ PR Interval: Ⓡ

Recommendation: Wm

Dr. A. S. 

M.D. (P)

Date: 14/12/24

SARDA CENTRE FOR DIABETES & SELF CARE  
4, Vyankatesh Nagar, Jaisa Road, Aurangabad  
Phone No. 2332851, 2334850



# SARDA

## CENTRE FOR DIABETES & SELF CARE

Date: 14/02/24

Name Mr. Mahesh Ghodke. Age/Sex 34/Male.

Address Bank of Baroda.

### OPHTHALMIC EXAMINATION REPORT

|                  | Right Eye                           | Left eye                            |
|------------------|-------------------------------------|-------------------------------------|
| Vision Distant   | $6/12 \bar{c} +7.00$ DD<br>Sph.     | $6/9 \bar{c} +7.00$ DSph            |
| Vision Near      | N6                                  | N6                                  |
| Anterior segment | <u>NAD</u>                          | <u>NAD</u>                          |
| Pupils           | NSRTL                               | <u>NSRTL</u>                        |
| Lens             | clear                               | clear                               |
| Tension          | <u>Normal</u>                       | <u>Normal</u>                       |
| Fundus:-         | Disc-Hypertrophic<br>C/D=0.3<br>FRT | Disc-Hypertrophic<br>C/D=0.3<br>FRT |
| Colour Vision    | Normal                              | Normal.                             |

Impression: BE Hypermetropia H

Rest within normal limits.

Mr. Mahesh Ghodke needs contact fitting  
in his 2-3 weeks.

Sarali  
**DR. SONALI LOHIYA**

BDS (General Surgeon)  
Reg No. A 045

Tirupati Nagar, Aurangabad, (MH)

4, Vyanktesh Nagar, Jalna Road, Aurangabad, (MH). PH.: 2333851, 2334858, Mob.: 9823040323

Polyps.

DR. RAJAY LOHIYA  
M.B.B.S. D.O. M.D. (Ophthalmology)  
REG. NO. 12345  
TIRUPATI NAGAR, AURANGABAD, (MH)  
PHONE: 2333851, 2334858, MOB.: 9823040323



Name : Mr.Mahesh Ghodke

Date :14/02/ 2024

Age/Sex :34Yrs/Male


Ref.By: Dr.Sarda Sir

### STRESS TEST REPORT

- Protocol – Bruce.
- Exercise Time- 9.00 Min.
- Baseline Heart Rate and Blood Pressure - 96bpm,BP-130/85mm of Hg.
- Mets- 10.10.
- ST-T Segment Changes – No Significant ST-T Changes.
- Angina- None.
- Arrhythmias- None.
- Other Symptoms – None.
- Maximal Heart Rate and Blood Pressure – 144 bpm, BP – 170/85 mm of Hg.
- Predicted Maximal Heart Rate Achieved - 77%.
- Reason For Termination - Target Heart rate achieved.

CONCLUSION : Stress Test Negative for Exercise Induced Ischemia.



  
DR.DEORAO THENGE  
M.D.D.N.B.(CARDIOLOGY)  
Dr. Devrao Thenge  
MD, DNB (Cardiology)  
Reg. No. 2001/02/491

ASIAN HOSPITAL  
MOTIWALA SQUARE  
AURANGABAD

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: GHODKE, MAHESH  
Patient ID: 54526  
Height: 176 cm  
Weight: 82 kg

DOB: 19.10.1989  
Age: 34yrs  
Gender: Male  
Race: Asian

Study Date: 14.02.2024  
Test Type: --  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: Dr. Devrao Thenge  
Technician: --

Medications:  
--

Medical History:  
--

Reason for Exercise Test:  
--

### Exercise Test Summary

| Phase Name | Stage Name | Time in Stage | Speed (mph) | Grade (%) | HR (bpm) | BP (mmHg) | Comment |
|------------|------------|---------------|-------------|-----------|----------|-----------|---------|
| PRETEST    | SUPINE     | 00:17         | 0.00        | 0.00      | 96       | 130/85    |         |
|            | STANDING   | 00:49         | 0.50        | 0.00      | 93       |           |         |
| EXERCISE   | STAGE 1    | 03:00         | 1.70        | 10.00     | 121      | 140/85    |         |
|            | STAGE 2    | 03:00         | 2.50        | 12.00     | 139      | 150/85    |         |
|            | STAGE 3    | 03:00         | 3.40        | 14.00     | 142      | 160/85    |         |
|            | STAGE 4    | 00:01         | 3.40        | 14.00     | 142      |           |         |
| RECOVERY   |            | 04:00         | 0.00        | 0.00      | 102      | 170/85    |         |

The patient exercised according to the BRUCE for 9:00 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 96 bpm rose to a maximal heart rate of 144 bpm. This value represents 77 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/85 mmHg, rose to a maximum blood pressure of 170/85 mmHg. The exercise test was stopped due to Target heart rate achieved.


### Interpretation

Summary: Resting ECG: normal.  
Functional Capacity: normal.  
HR Response to Exercise: appropriate.  
BP Response to Exercise: normal resting BP - appropriate response.  
Chest Pain: none.  
Arrhythmias: none.  
ST Changes: none.  
Overall impression: Normal stress test.

### Conclusions

Exercise of Bruce Protocol For 9.00 Min.  
Target Heart Rate Achieved.  
No Angina/Arrhythmias.No ST-T Changes.  
Test is Negative For Induced Ischemia.



  
Dr. Devrao Thenge  
MD, DNB (Cardiology)  
Reg. No. 2001/02/491

Physician \_\_\_\_\_ Technician \_\_\_\_\_

Tabular Summary

**GHODKE, MAHESH**  
 Patient ID 54526  
 14.02.2024  
 2:08:22pm

Male 176 cm 82 kg  
 34yrs Asian  
 Meds:

**BRUCE:** Total Exercise Time 09:00  
 Max HR: 144 bpm 77% of max predicted 186 bpm HR at rest: 96  
 Max BP: 170/85 mmHg BP at rest: 130/85 Max RPP: 22720 mmHg\*bpm

Maximum Workload: 10.10 METS  
 Max ST: -0.75 mm, 0.00 mV% in III; EXERCISE STAGE 2 - 04:30  
 ST/HR index: 0.86  $\mu$ V/bpm

**Reasons for Termination:** Target heart rate achieved

**Summary:** Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

**Conclusion:** Exercise of Bruce Protocol For 9.00 Min.

Target Heart Rate Achieved.  
 No Angina/Arrhythmias No ST-T Changes.  
 Test is Negative For Induced Ischemia.

Test Reason:  
 Medical History:

Ref. MD: Ordering MD:  
 Technician: Test Type:  
 Comment:

| Phase Name | Stage Name | Time in Stage | Speed (mph) | Grade (%) | Workload (METS) | HR (bpm) | BP (mmHg) | RPP (mmHg*bpm) | VE (l/min) | ST Level (III mm) | Comment |
|------------|------------|---------------|-------------|-----------|-----------------|----------|-----------|----------------|------------|-------------------|---------|
| PRE-TEST   | SUPINE     | 00:17         | 0.00        | 0.00      | 1.0             | 96       | 130/85    | 12480          | 0          | 0.65              |         |
| EXERCISE   | STANDING   | 00:49         | 0.50        | 0.00      | 1.2             | 93       |           |                | 0          | 0.35              |         |
|            | STAGE 1    | 03:00         | 1.70        | 10.00     | 4.6             | 121      | 140/85    | 16940          | 0          | -0.50             |         |
|            | STAGE 2    | 03:00         | 2.50        | 12.00     | 7.0             | 139      | 150/85    | 20850          | 0          | -0.15             |         |
|            | STAGE 3    | 03:00         | 3.40        | 14.00     | 10.1            | 142      | 160/85    | 22720          | 1          | -0.40             |         |
|            | STAGE 4    | 00:01         | 3.40        | 14.00     | 10.1            | 142      |           |                | 1          | -0.40             |         |
| RECOVERY   |            | 04:00         | 0.00        | 0.00      | 1.0             | 102      | 170/85    | 17340          | 0          | 0.05              |         |



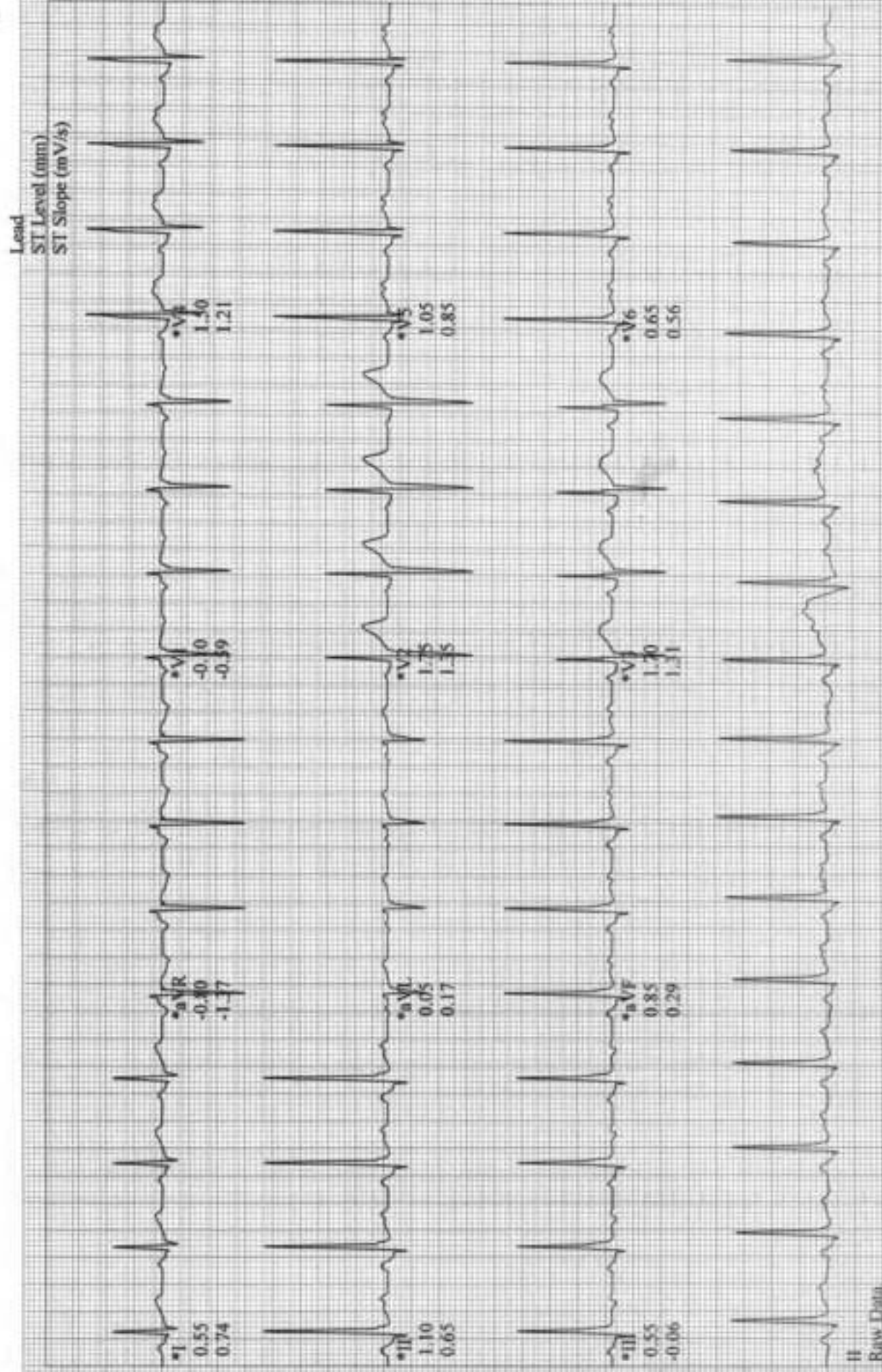
**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:08:38pm

Linked Medians  
PRETEST  
SUPINE  
00:15

96 bpm  
130/85 mmHg

BRUCE  
0.0 mph  
0.0 %

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\*Computer Synthesized Rhythms

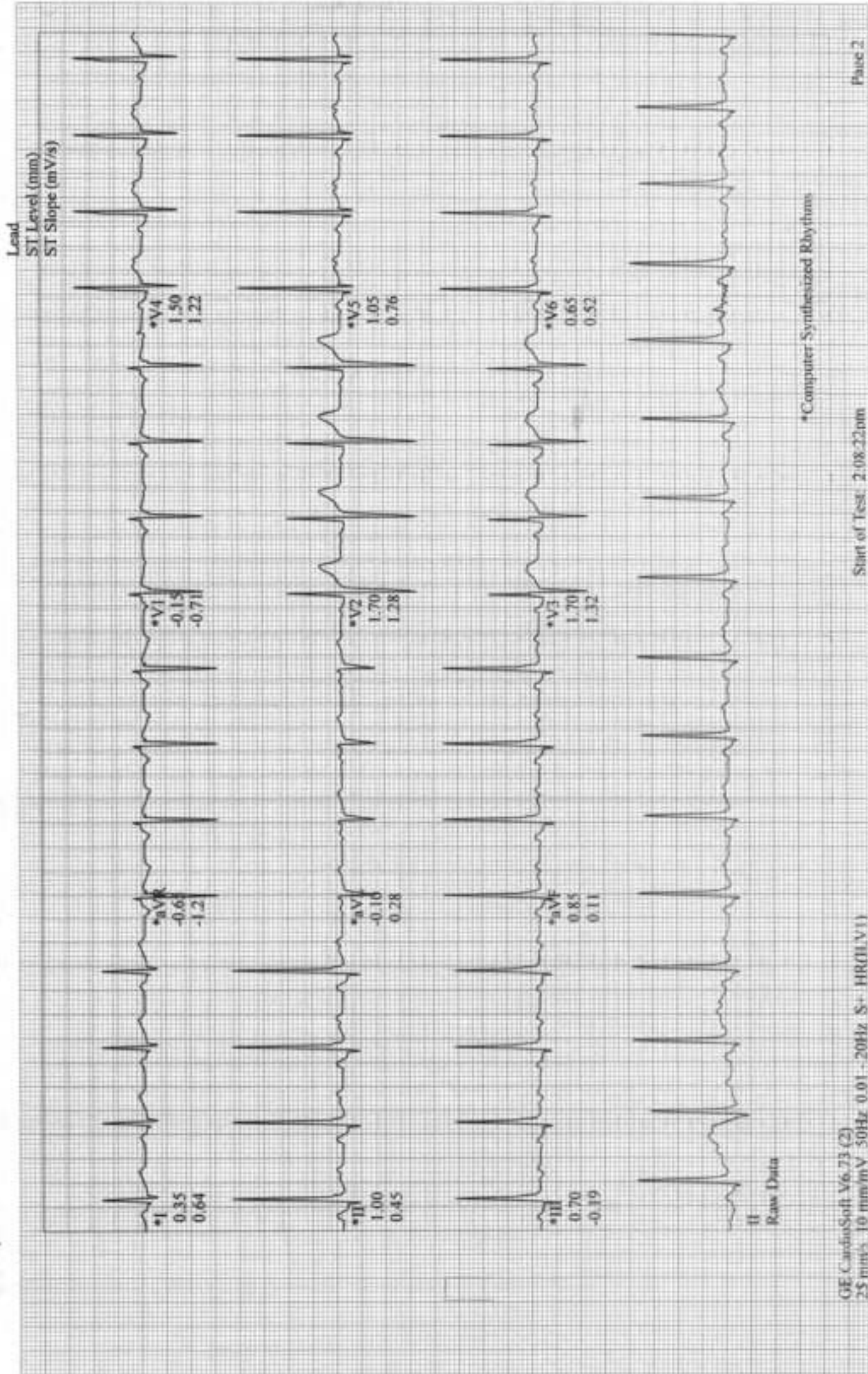
**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:08:42pm

Linked Medians  
PRETEST  
STANDING  
00:19

95 bpm  
130/85 mmHg

BRUCE  
0.0 mph  
0.0 %

ASIAN HOSPITAL



\*Computer Synthesized Rhythms



**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:12:22pm

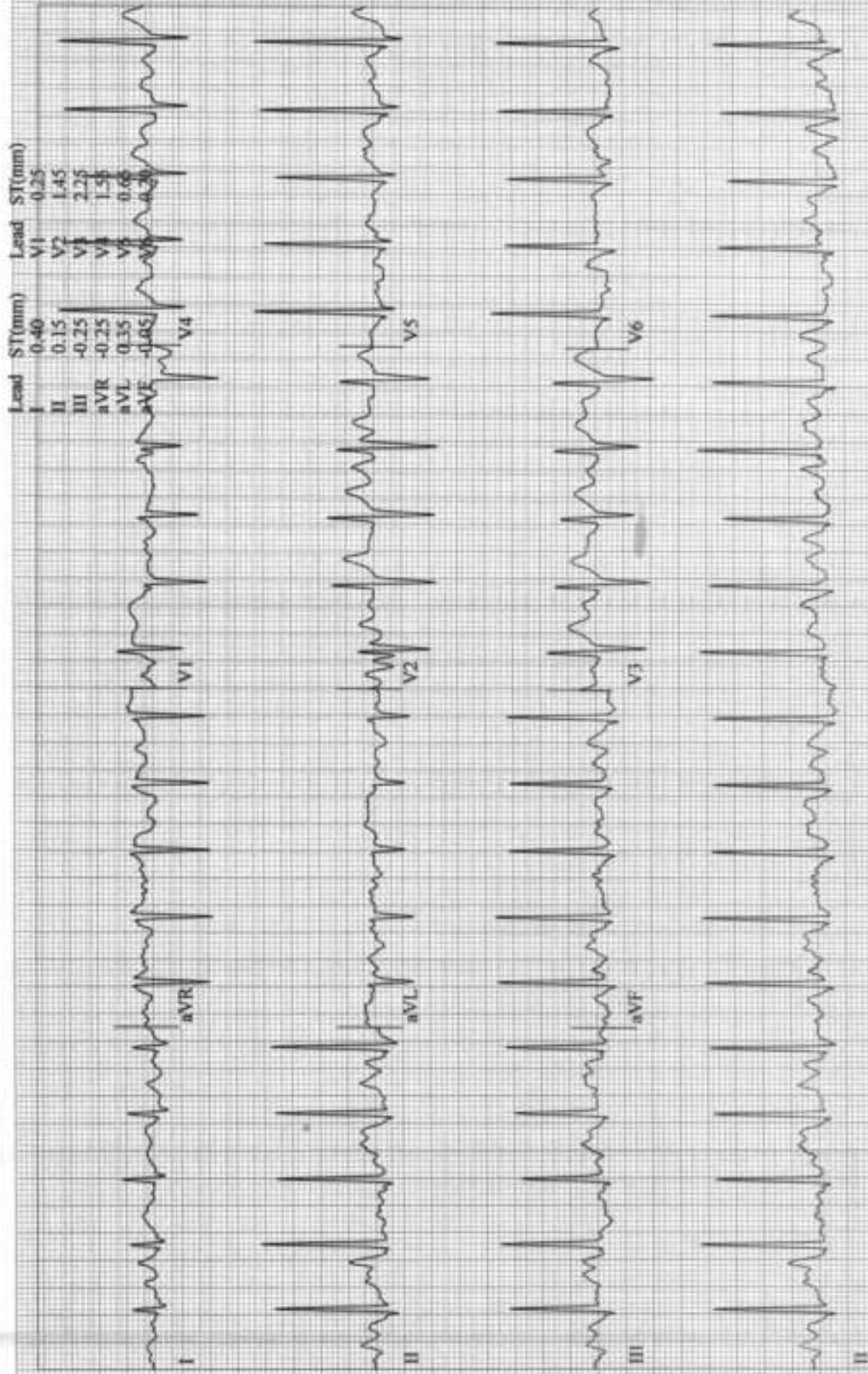
12-Lead Report  
**EXERCISE**  
STAGE 1  
02:50

125 bpm  
140/85 mmHg

**BRUCE**  
1.7 mph  
10.0 %

ASIAN HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points



**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:15:22pm

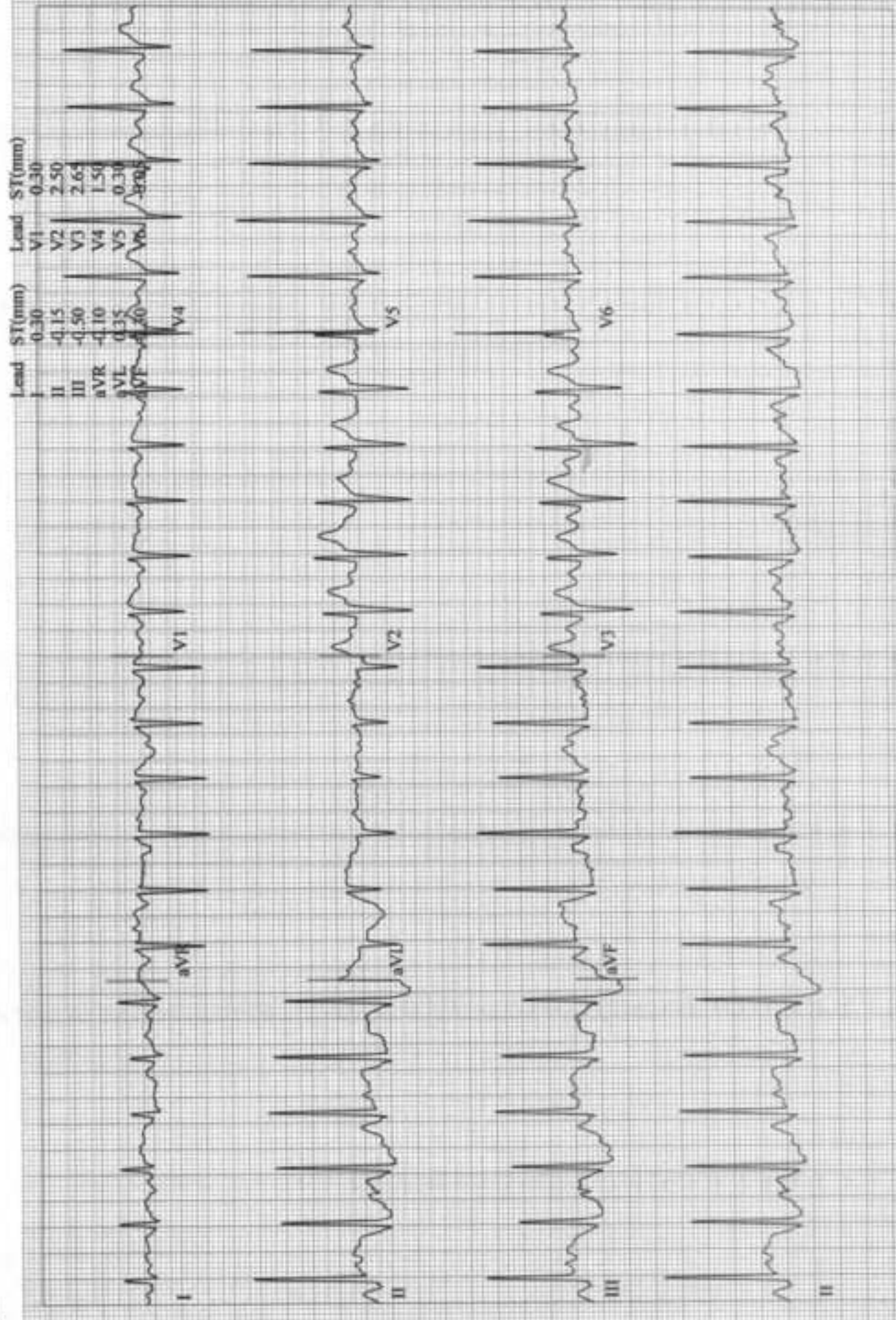
12-Lead Report  
**EXERCISE**  
STAGE 2  
05:50

141 bpm  
150/85 mmHg

**BRUCE**  
2.5 mph  
12.0 %

ASIAN HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points





**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:18:22pm

12-Lead Report

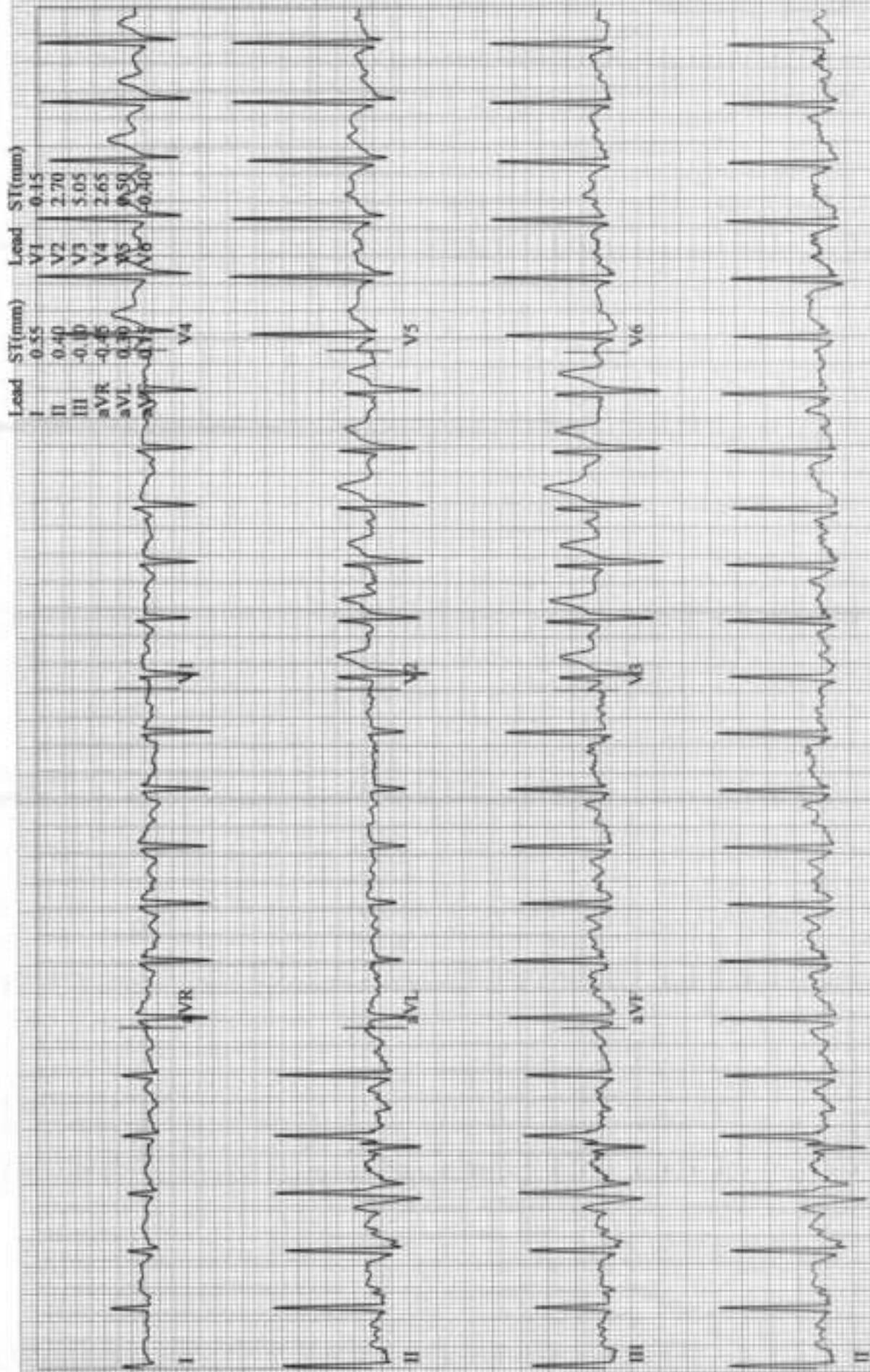
**EXERCISE**  
STAGE 3  
08:50

142 bpm  
160/85 mmHg

**BRUCE**  
3.4 mph  
14.0 %

ASIAN HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points



**GHODKE, MAHESH**

Patient ID 54526

14.02.2024

2:18:27pm

Linked Medians ( PEAK EXERCISE )

EXERCISE

STAGE 4

09:01

BRUCE

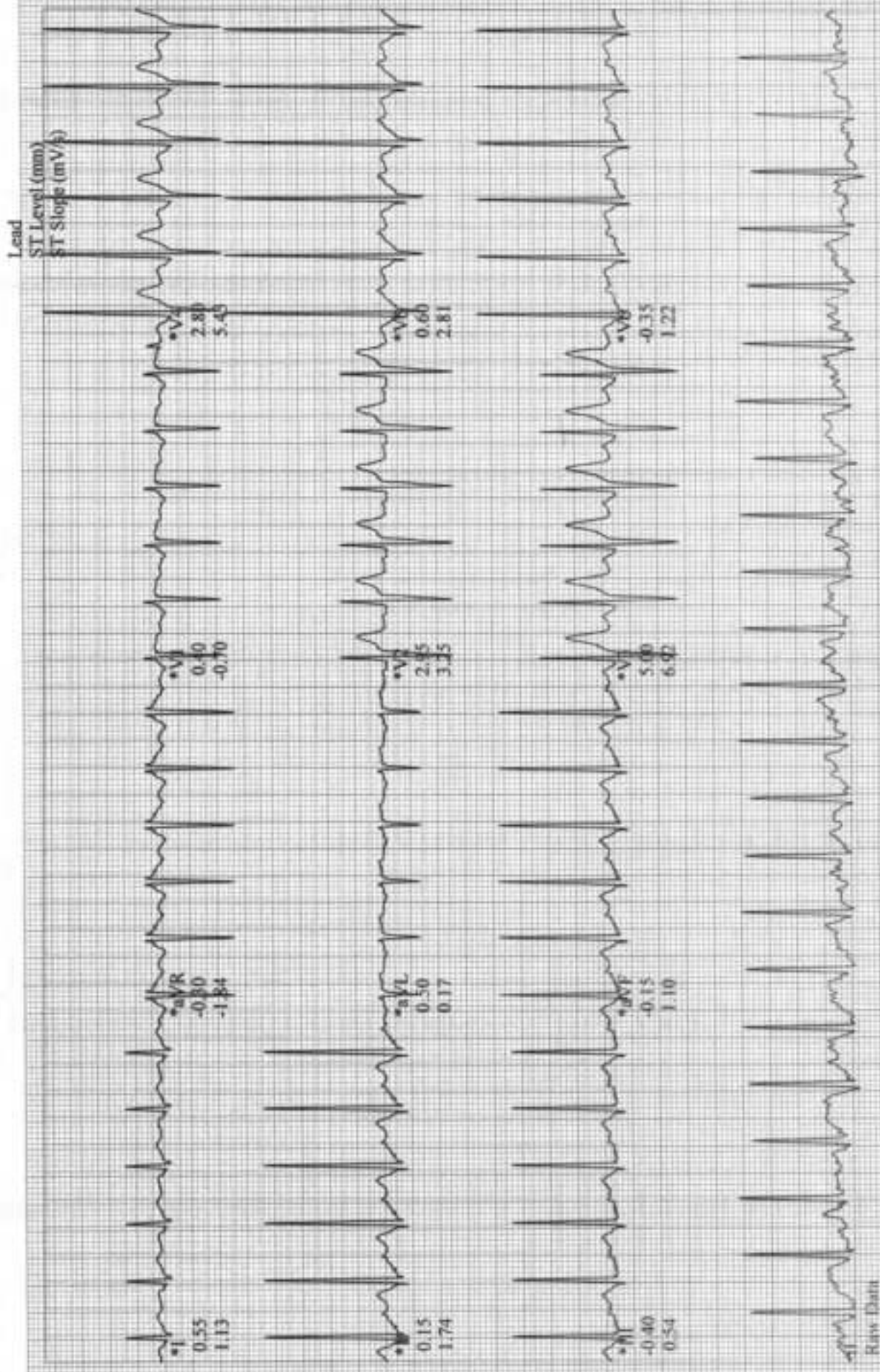
3.4 mph

14.0 %

142 bpm

160/85 mmHg

ASIAN HOSPITAL



\*Computer Synthesized Rhythms



**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:19:22pm

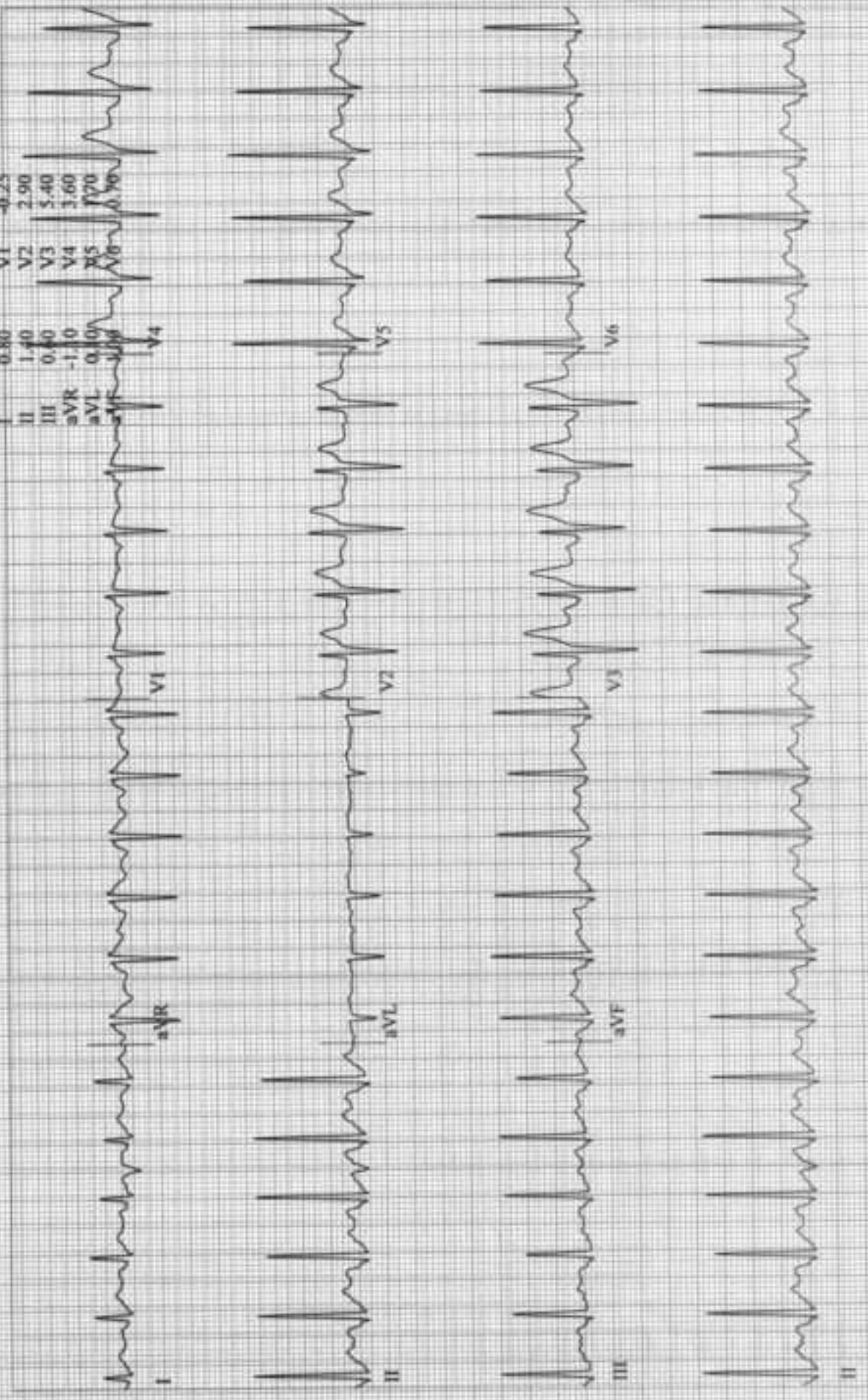
12-Lead Report  
**RECOVERY**  
#1  
00:50

**BRUCE**  
0.0 mph  
0.0 %

ASIAN HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points

| Lead | ST(mm) | Lead | ST(mm) |
|------|--------|------|--------|
| I    | 0.80   | V1   | -0.25  |
| II   | 1.40   | V2   | 2.90   |
| III  | 0.60   | V3   | 5.40   |
| aVR  | -1.10  | V4   | 3.60   |
| aVL  | 0.10   | V5   | 7.20   |
| aVF  | 0.10   | V6   | 0.50   |



**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:20:22pm

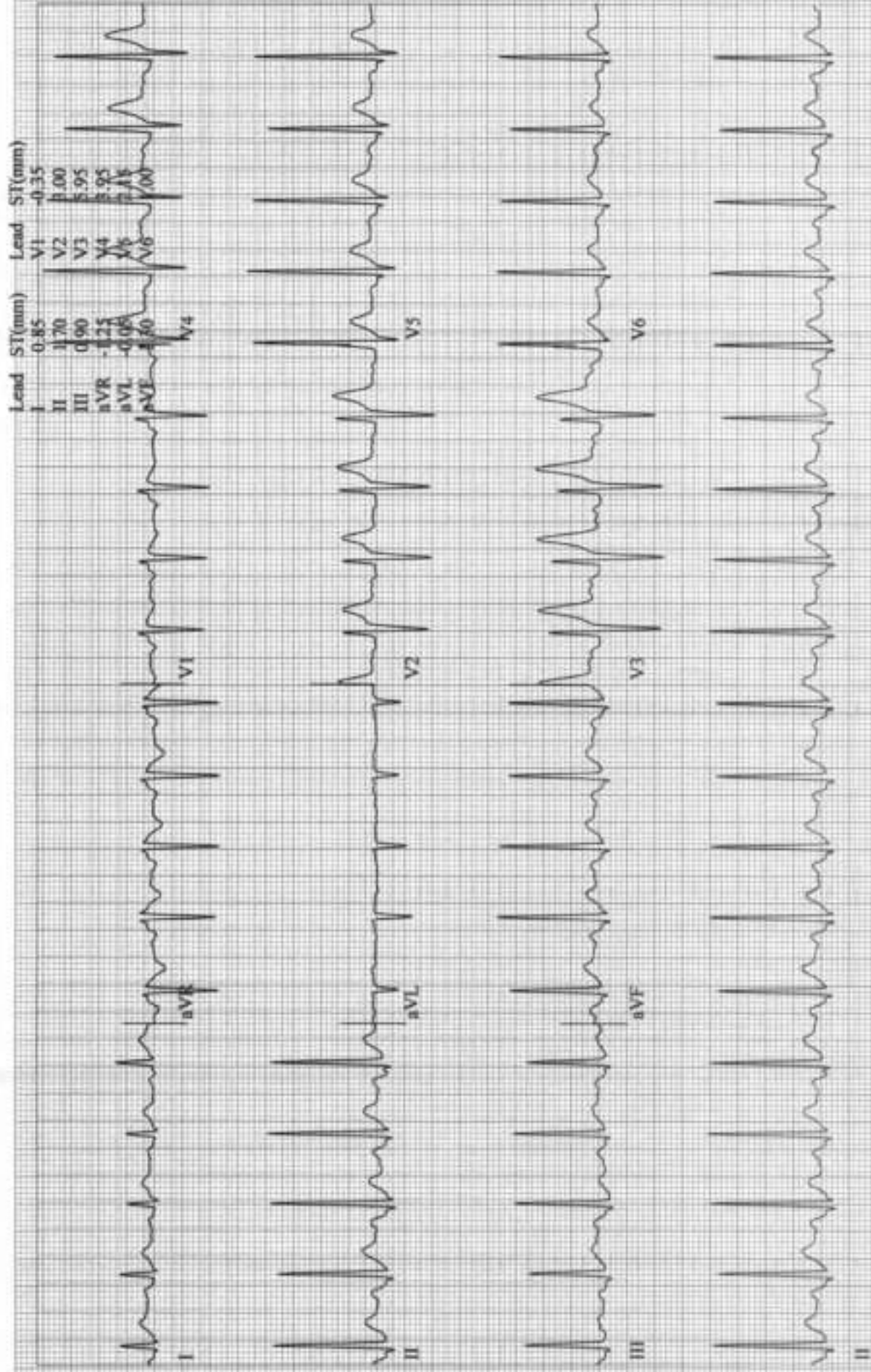
12-Lead Report  
RECOVERY  
#1  
01:50

115 bpm

BRUCE  
0.0 mph  
0.0 %

ASIAN HOSPITAL

Measured at 60ms Post J (10mm/mV)  
Auto Points





**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:21:22pm

12-Lead Report

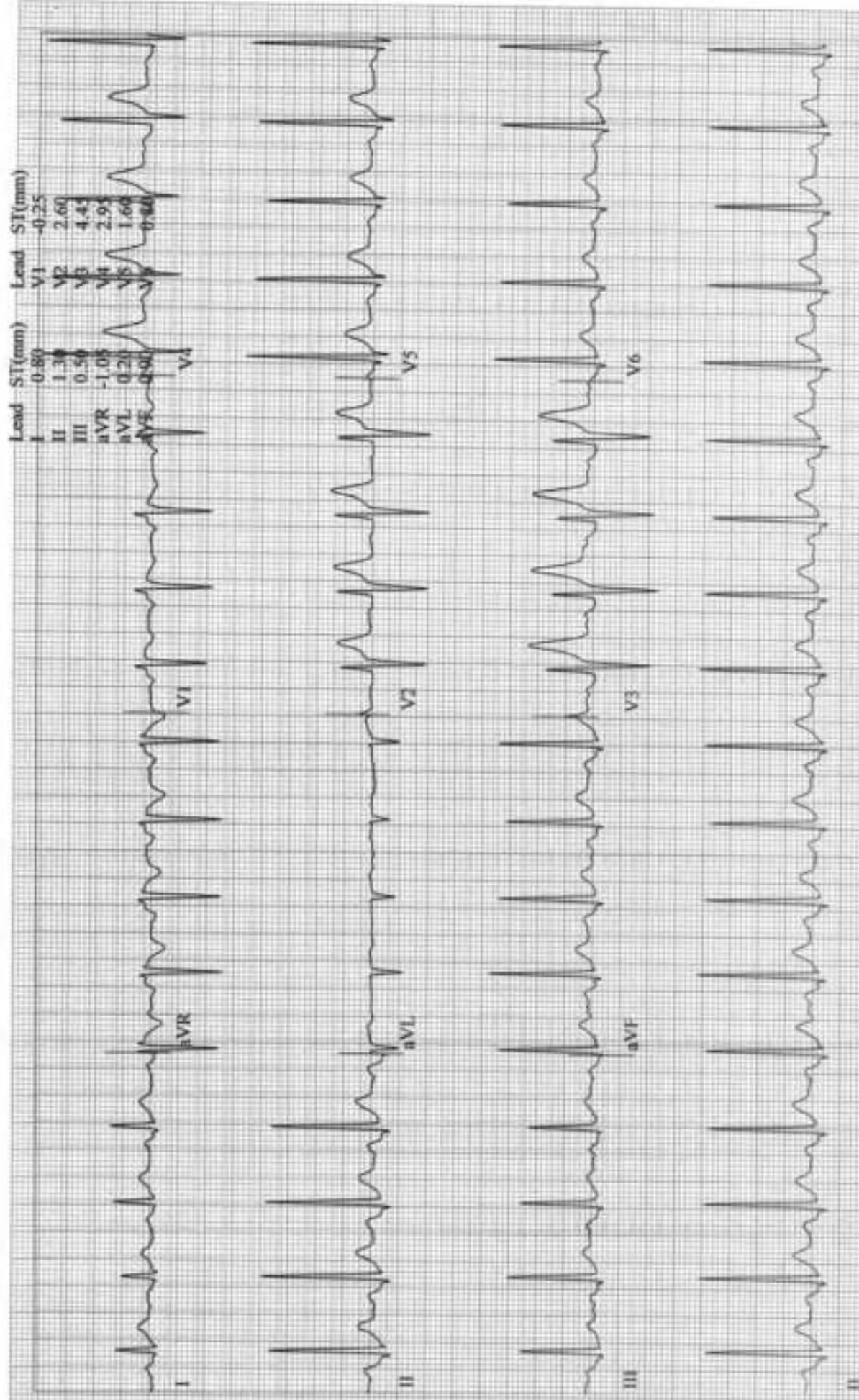
RECOVERY  
#1  
02:50

108 bpm  
170/85 mmHg

ASIAN HOSPITAL

BRUCE  
0.0 mph  
0.0 %

Measured at 60ms Post J (10mm/mV)  
Auto Points



12-Lead Report

BRUCE  
0.0 mph  
0.0 %

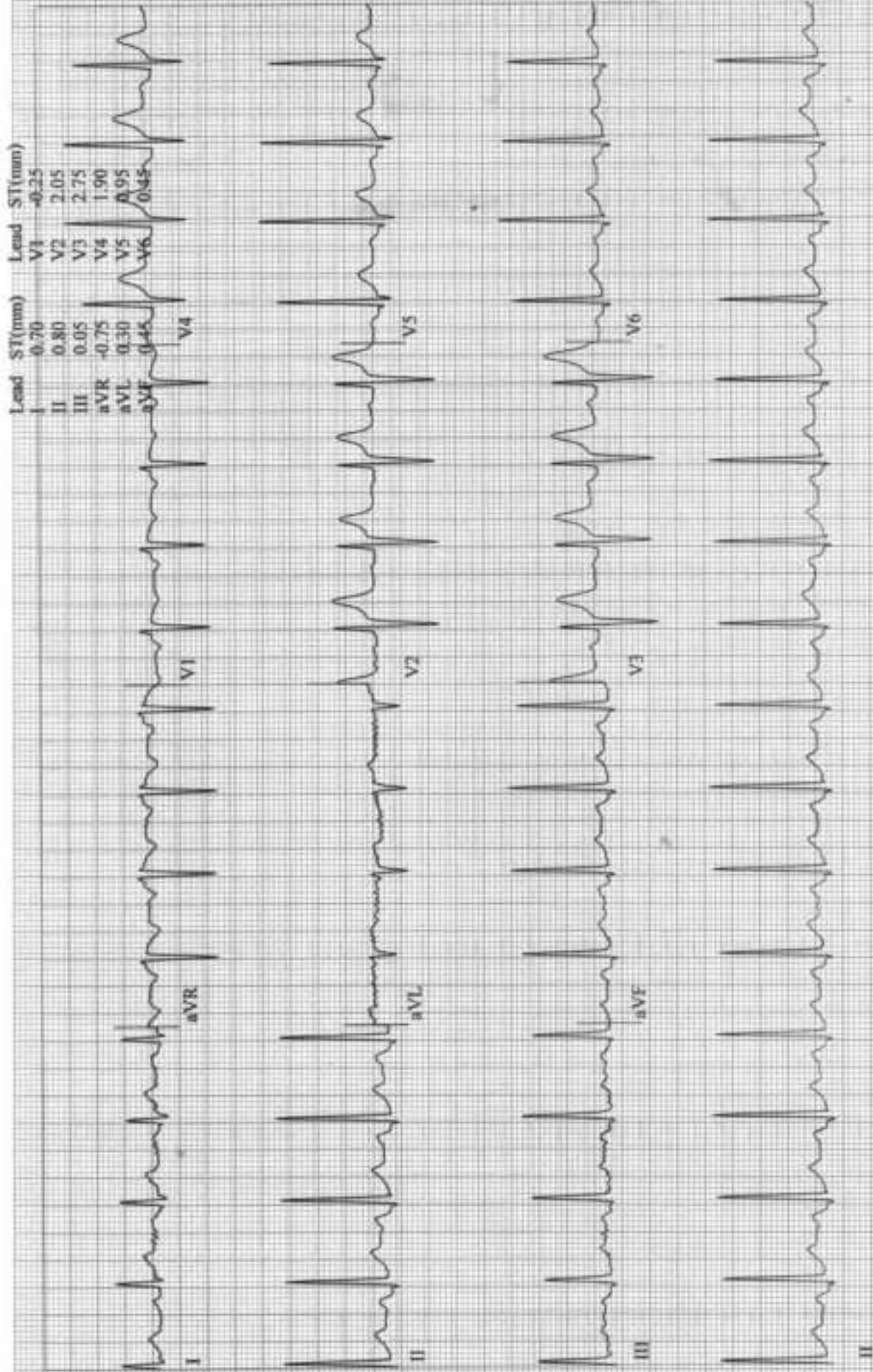
RECOVERY

#1  
03:50

Measured at 60ms Post J (10mm/mV)  
Auto Points

101 bpm

**GHODKE, MAHESH**  
Patient ID 54526  
14.02.2024  
2:22:22pm



Patient Name : MR MAHESH GHODKE



SCD24/1389



Age/Gender : 34 Yrs/Male

Report Date

: 14/02/2024

Ref. Dr. : MEDIWHEEL

### HAEMATOLOGY REPORT

| Test Description                 | Result        | Unit | Biological Reference Range |
|----------------------------------|---------------|------|----------------------------|
| <b>BLOOD GROUP AND RH FACTOR</b> |               |      |                            |
| Blood Group                      | 'B'           |      |                            |
| Rh Factor                        | POSITIVE(+VE) |      |                            |

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M.D. Reg. No.#5498  
SARDA CENTER FOR DIABETES & SELF CARE  
4, Vyankateshnagar, Jalna Road, Aurangabad  
Phone No: 2333851, 2334858



**Patient Name : MR MAHESH GHODKE**

Age/Gender : 34 Yrs/Male

Ref. Dr. : MEDIWHEEL

**SCD24/1389**

Report Date

: 14/02/2024

**HBA1C/GLYCOCYLATED**

HbA1c Glycosilated Haemoglobin 6.5 %

Method: HPLC, NGSP certified

Estimated Average Glucose : 140 mg/dL

**As per American Diabetes Association (ADA)**

| Reference Group                       | HbA1c in %   |
|---------------------------------------|--|
| Non diabetic adults >=18 years        | <5.7   |
| At risk (Prediabetes)                 | 5.7 - 6.4  |
| Diagnosing Diabetes                   | >= 6.5   |
| Therapeutic goals for glycemc control | Age > 19 years<br>Goal of therapy: < 7.0<br>Action suggested: > 8.0<br>Age < 19 years<br>Goal of therapy: <7.5 |

**ADA criteria for correlation**

| HbA1c(%) | Mean Plasma Glucose (mg/dL) |
|----------|-----------------------------|
| 6        | 126                         |
| 7        | 154                         |
| 8        | 183                         |
| 9        | 212                         |
| 10       | 240                         |
| 11       | 269                         |
| 12       | 298                         |

**Note:**1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .  
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

**Comments:**HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemc control as compared to blood and urinary glucose determinations.

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**Patient Name : MR MAHESH GHODKE****SCD24/1389**

Age/Gender : 34 Yrs/Male

Report Date

: 14/02/2024

Ref. Dr. : MEDIWHEEL

**BIOCHEMISTRY REPORT**

| Test Description  | Result | Unit  | Biological Reference Range   |
|---|--------|-------|--|
| <b>LIPID PROFILE</b>  |        |       |  |
| Cholesterol-Total<br><i>Method: CHOD/PAP</i>                            | 156    | mg/dL | < 200 : Desirable<br>200-239 : Borderline risk<br>> 240 : High risk  |
| Triglycerides level<br><i>Method: Lipase / Glycerol Kinase)</i>         | 90     | mg/dL | < 150 : Normal<br>150-199 : Borderline-High<br>200-499 : High<br>> 500 : Very High                           |
| HDL Cholesterol<br><i>Method: CHOD/PAP</i>                              | 48     | mg/dL | < 40 : Low<br>40 - 60 : Optimal<br>> 60 : Desirable  |
| LDL Cholesterol<br><i>Method: Homogeneous enzymatic end point assay</i> | 90.00  | mg/dL | < 100 : Normal<br>100 - 129 : Desirable<br>130 - 159 : Borderline-High 160 - 189 : High<br>> 190 : Very High |
| VLDL Cholesterol<br><i>Method: Calculation</i>                          | 18.00  | mg/dL | 7 - 40   |
| CHOL/HDL RATIO<br><i>Method: Calculation</i>                            | 3.25   | Ratio | 3.5 - 5.0  |
| LDL/HDL RATIO<br><i>Method: Calculation</i>                             | 1.88   | Ratio | 0 - 3.5  |

**Interpretation**

Lipid profile can measure the amount of Total cholesterol's and triglycerides in blood:

| Test  | Comment   |
|---|---|
| Total cholesterol:                            | measures all the cholesterol in all the lipoprotein particles   |
| High-density lipoprotein cholesterol (HDL-C): | measures the cholesterol in HDL particles; often called "good cholesterol" because HDL-C takes up excess cholesterol and carries it to the liver for removal.                       |
| Low-density lipoprotein cholesterol (LDL-C):  | measures the cholesterol in LDL particles; often called "bad cholesterol" because it deposits excess cholesterol in walls of blood vessels, which can contribute to atherosclerosis |
| Triglycerides:                                | measures all the triglycerides in all the lipoprotein particles; most is in the very low-density lipoproteins (VLDL).   |

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Phone No: 2333851, 2334858

Patient Name : MR MAHESH GHODKE



SCD24/1389



Age/Gender : 34 Yrs/Male

Report Date

: 14/02/2024

Ref. Dr. : MEDIWHEEL

### BIOCHEMISTRY REPORT

| Test Description | Result | Unit | Biological Reference Range |
|------------------|--------|------|----------------------------|
|------------------|--------|------|----------------------------|

#### BLOOD SUGAR FASTING & PP (BSF & PP)- INS

|                     |    |       |          |
|---------------------|----|-------|----------|
| BLOOD SUGAR FASTING | 72 | mg/dl | 70 - 110 |
|---------------------|----|-------|----------|

Method: Hexokinase

|                           |     |       |          |
|---------------------------|-----|-------|----------|
| BLOOD SUGAR POST PRANDIAL | 113 | mg/dl | 70 - 140 |
|---------------------------|-----|-------|----------|

Method: Hexokinase

#### **ADA 2019 Guidelines for diagnosis of Diabetes Mellitus**

Fasting Plasma Glucose > 126 mg/dl

Postprandial Blood Glucose > 200 mg/dl

Random Blood Glucose > 200 mg/dl

HbA1c Level > 6.5%

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Patient Name : MR MAHESH GHODKE



SCD24/1389

Age/Gender : 34 Yrs/Male

Report Date

: 14/02/2024

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**BIOCHEMISTRY REPORT**

| Test Description   | Result | Unit  | Biological Reference Range |
|--|--------|-------|----------------------------|
| UREA<br><i>Method: UV</i>                                  | 31     | mg/dl | 10 - 45                    |
| <b>Serum Creatinine</b><br><i>Method: Modified Jaffe's</i> | 1.2    | mg/dL | 0.70 - 1.40                |
| URIC ACID<br><i>Interpretation</i>                         | 6.8    | mg/dl | 2.5 - 7.2                  |

Uric Acid - Serum uric acid measurements are useful in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and in patients receiving cytotoxic drugs.

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**Patient Name : MR MAHESH GHODKE**

Age/Gender : 34 Yrs/Male

Ref. Dr. : MEDIWHEEL

**SCD24/1389**

Report Date

: 14/02/2024

**LIVER FUNCTION TEST (LFT)**

|   |           |       |           |
|---|-----------|-------|-----------|
| TOTAL BILIRUBIN                                       | 0.60      | mg/dl | 0.2 - 1.0 |
| <i>Method: Serum, Jendrassik Grof</i>                 |           |       |           |
| DIRECT BILIRUBIN                                      | 0.10      | mg/dL | 0.0 - 0.3 |
| <i>Method: Serum, Diazotization</i>                   |           |       |           |
| INDIRECT BILIRUBIN                                    | 0.50      | mg/dl | 0.3 - 0.7 |
| <i>Method: Serum, Calculated</i>                      |           |       |           |
| SGPT (ALT)  | <b>54</b> | U/L   | 15 - 40   |
| <i>Method: Serum, UV with P5P, IFCC 37 degree</i>     |           |       |           |
| SGOT (AST)  | <b>41</b> | U/L   | 15 - 40   |
| <i>Method: Serum, UV with P5P, IFCC 37 degree</i>     |           |       |           |
| ALKALINE PHOSPHATASE                                  | 81        | U/L   | 30 - 120  |
| <i>Method: DGKC</i>                                   |           |       |           |
| TOTAL PROTEIN   | 7.3       | g/dl  | 6.0 - 8.3 |
| <i>Method: Serum, Biuret, reagent blank end point</i> |           |       |           |
| SERUM ALBUMIN   | 4.2       | g/dl  | 3.5 - 5.2 |
| <i>Method: Serum, Bromocresol green</i>               |           |       |           |
| SERUM GLOBULIN  | 3.10      | g/dl  | 1.8 - 3.6 |
| <i>Method: Serum, Calculated</i>                      |           |       |           |
| A/G RATIO   | 1.35      |       | 1.2 - 2.2 |
| <i>Method: Serum, Calculated</i>                      |           |       |           |
| Gamma Glutamyl Transferase-Serum                      | <b>79</b> | IU/L  | 15 - 73   |
| <i>Method: Kinetic</i>                                |           |       |           |

**NOTE :**

In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or Non alcoholic fatty liver disease, Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis.

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Phone No. 2333851, 2334858

Patient Name : MR MAHESH GHODKE



SCD24/1389



Age/Gender : 34 Yrs/Male

Report Date

: 14/02/2024

Ref. Dr. : MEDIWHEEL

**IMMUNOASSAY REPORT**

| Test Description                   | Result       | Unit  | Biological Reference Range   |
|------------------------------------|--------------|-------|--|
| <b>Thyroid Function Test (TFT)</b> |              |       |  |
| T3                                 | 119.87       | ng/dl | 80-253 : 1 Yr-10 Yr,<br>76-199 : 11 Yr-15 Yr,<br>69-201 :16 Yr-18 Yr,<br>87-173 : > 18 years,  |
| T4                                 | 6.20         | ng/dl | 5.9-21.5 :10-31 Days,<br>5.9-21.5 :0-1 Month,<br>6.4-13.9 :2-12 Months,<br>6.09-12.23 :>1 Yr   |
| TSH(Serum)                         | <b>11.64</b> | ng/dl | 0.52-16.0 :1 Day - 30 Days<br>0.55-7.10 :1 Mon-5 Years<br>0.37-6.00 :6 Yrs-18 Years<br>0.38-5.33 :18 Yrs-88 Years<br>0.50-8.90 :88 Years |

Method : ECLIA

**Comment:** ADV: CLINICAL CORRELATION & FOLLOW UP REPEAT, SOS.

| Clinical features of thyroid disease |                                     |                             |
|--------------------------------------|-------------------------------------|-----------------------------|
| Hypothyroidism                       | Hyperthyroidism                     | Grave's disease             |
| Lethargy                             | Tachycardia                         | Exophthalmos/proptosis      |
| Weight gain                          | Palpitations (atrial fibrillation)  | Chemosis                    |
| Cold intolerance                     | Hyperactivity                       | Diffuse symmetrical goitre  |
| Constipation                         | Weight loss with increased appetite | Pretibial myxoedema (rare)  |
| Hair loss                            | Heat intolerance                    | Other autoimmune conditions |
| Dry skin                             | Sweating                            |                             |
| Depression                           | Diarrhoea                           |                             |
| Bradycardia                          | Fine tremor                         |                             |
| Memory impairment                    | Hyper-reflexia                      |                             |
| Menorrhagia                          | Goitre                              |                             |
|                                      | Palmar erythema                     |                             |
|                                      | Onycholysis                         |                             |
|                                      | Muscle weakness and wasting         |                             |
|                                      | Oligomenorrhoea/amenorrhoea         |                             |

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**URINE EXAMINATION REPORT**

| Test Description               | Result      | Unit | Biological Reference Range |
|--------------------------------|-------------|------|----------------------------|
| <b>URINE ROUTINE</b>           |             |      |                            |
| <b>Physical Examination</b>    |             |      |                            |
| Colour                         | Pale Yellow |      | Pale Yellow                |
| Apperance                      | Clear       |      | Clear                      |
| Reaction                       | Acidic      |      |                            |
| Deposit                        | Absent      |      |                            |
| <b>Chemical Examination</b>    |             |      |                            |
| Specific Gravity               | 1.015       |      |                            |
| Albumin                        | Absent      |      |                            |
| Sugar                          | NIL         |      | Absent                     |
| Acetone                        | Absent      |      |                            |
| Bile Salt                      | Absent      |      | Absent                     |
| Bile Pigment                   | Absent      |      | Absent                     |
| <b>Microscopic Examination</b> |             |      |                            |
| RBC's                          | Not seen    | /hpf | Nil                        |
| Pus cells                      | Occasional  | /hpf | 2-3/hpf                    |
| Epithelial Cells               | NIL         | /hpf | 1-2/hpf                    |
| Crystals                       | Absent      |      | Absent                     |
| Amorphous Deposit              | Absent      |      | Absent                     |

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| Test Description | Result | Unit | Biological Reference Range |
|------------------|--------|------|----------------------------|
|------------------|--------|------|----------------------------|

**COMPLETE BLOOD COUNT**

|                       |             |            |                 |
|-----------------------|-------------|------------|-----------------|
| Total WBC Count       | 6500        | cell/cu.mm | 4000 - 11000    |
| <b>Haemoglobin</b>    | <b>11.7</b> | g%         | 13 - 18         |
| <b>Platelet Count</b> | 209000      | /cumm      | 150000 - 450000 |
| RBC Count             | 4.5         | /Mill/ul   | 4.20 - 6.00     |

**RBC INDICES**

|                        |             |       |             |
|------------------------|-------------|-------|-------------|
| Mean Corp Volume MCV   | <b>78.2</b> | fL    | 80 - 97     |
| Mean Corp Hb MCH       | 26.0        | pg    | 26 - 32     |
| Mean Corp Hb Conc MCHC | 33.2        | gm/dL | 31.0 - 36.0 |
| Hematocrit HCT         | <b>35.2</b> | %     | 37.0 - 51.0 |

**DIFFERENTIAL LEUCOCYTE COUNT**

|             |           |   |         |
|-------------|-----------|---|---------|
| Neutrophils | 45        | % | 40 - 75 |
| Lymphocytes | <b>47</b> | % | 20 - 45 |
| Monocytes   | 05        | % | 02 - 10 |
| Eosinophils | 03        | % | 01 - 06 |
| Basophils   | 00        | % | 00 - 01 |

**NOTE:**

1. As per the recommendation of International council for Standardization in Hematology, the differential leukocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood.
2. Test conducted on EDTA whole blood.

|     |           |       |   |
|-----|-----------|-------|---|
| ESR | <b>23</b> | mm/hr | Male: 0-8 mm at 1 Hr.<br>Female: 0-20 mm at 1 Hr. |
|-----|-----------|-------|---|

**INTERPRETATION :**

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

\*\*\*\* End of the report. \*\*\*\*

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