



Reg. No. NH/6333/DEC-2017

GREEN CITY HOSPITAL

Near V-Mart, DIG Bungalow, Berasia Road, Bhopal

AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



Pt. Name ..Mr. Sameer Tikey.....

Age 36....Sex M.....Date 17/7/23.....

All Investigations done.

- CXR → (N)
- ECG → (N)
- USG → (N)

All Haematological
Iy → (N)

Pt is fit clinically.
& can do his job normally

Bp. 100/60 mmHg
 P. 84/m
 SpO₂ 96%
 Ht. 187 cm
 Wt. 93.17 kg

CNS - conscious & oriented
 CVS - S₁ S₂ (N)
 RIS - BIL AE (N)
 P/A - Soft & INT.
 ENT - WNL.
 Vision - 6/6.
 No Dental Ab (N)

(A)
DR. ASHISH JAIN
 M.B.B.S., M.D., DTCO
 Reg. No. MP-4465
 GREEN CITY HOSPITAL BHOPAL

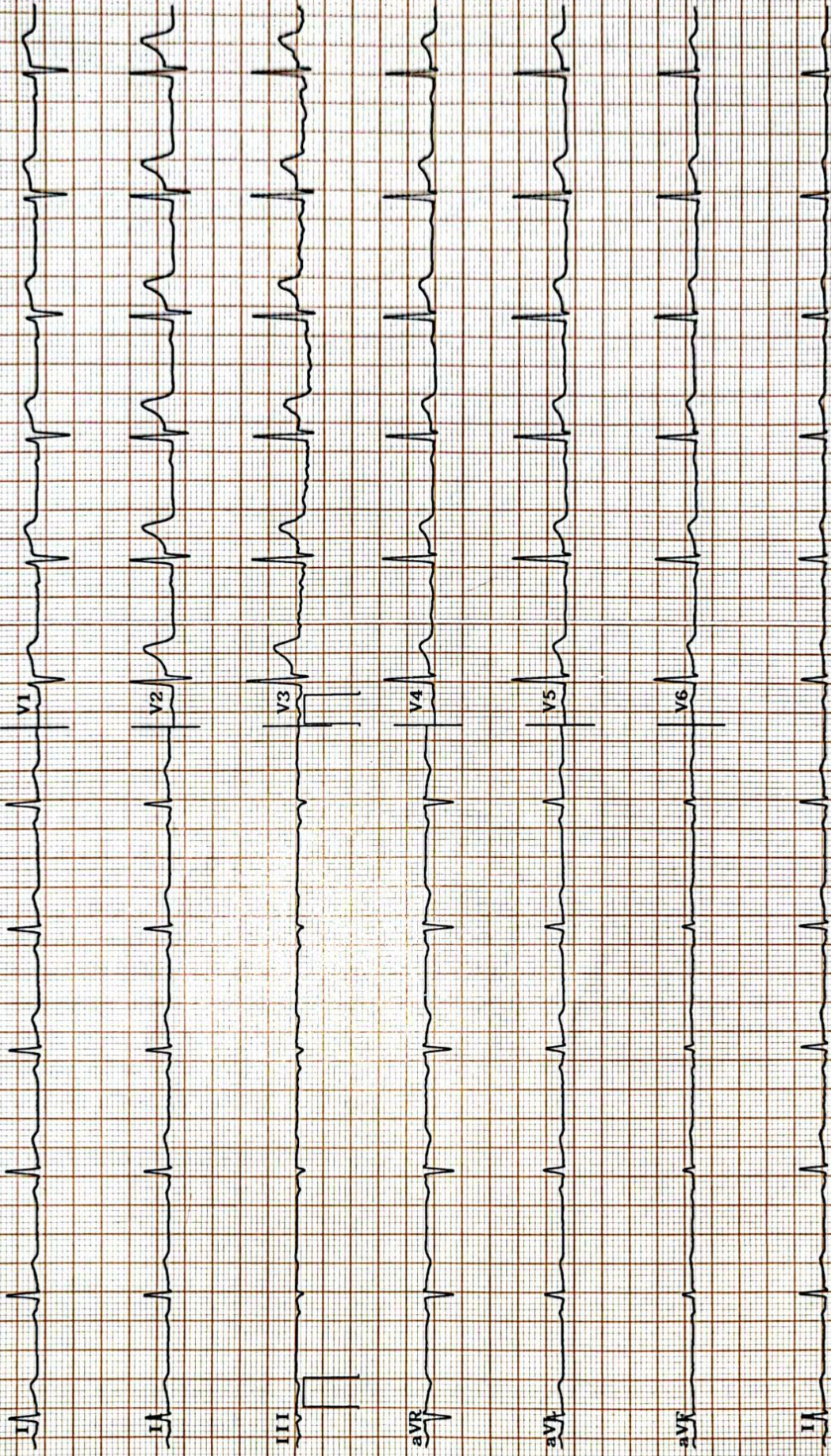


For Emergency / Ambulance Service Ph. : 0755-2733323

2023-07-17 09:41:09

6 Channel + 1 Rhythm Report Hosp:

ID :
 Name: SAMEER
 Age: 36 years
 Sex: Male
 H: 0 cm / W: 0 kg
 Heart Rate: 71 bpm
 PR/RR Int.: 156/845 ms
 QRS Dur: 96 ms
 QT/QTc: 368/398 ms
 P-R-T axes: 2 19 43
 SVI/RV5/R+S: 0.57/0.96/1.53mV
 Prescribed by:
 ** Analysis Result. ** (To be finally confirmed by physician)
 Normal Sinus Rhythm
 Normal Axis
 [Normal ECG]



Base: 0.2Hz LPF: 150Hz AC: 50Hz EMG: Off

10.0mm/mV 25.0mm/sec

EKG2000 6.00/3.24 Bionet Co., Ltd.

162120

ICRD MED 00473

Where your Health
Well being Matters

Niramaya
Diagnostic Center

Dr. RITESH R. KUMAWAT

M.B.B.S., D.M.R.D., D.N.B. (Radio Diagnosis)
Consultant Radiologist
Reg. No. MP-12614

 drriteshkumawat@gmail.com
niramayadiagnosticcenter@gmail.com

FACILITIES AVAILABLE : ROUTINE /HIGH FREQUENCY USG, 3D/4D USG, COLOUR DOPPLER, USG GUIDED PROCEDURES & DIGITAL X-RAY

Date: 17.07.2023

PATIENT'S NAME: MR. SAMEER
REF. BY: SELFG

AGE: 36Y
SEX: MALE

Ultrasonography : Whole Abdomen

Liver: Appears normal in size measures 13.2 cm in long axis in mid clavicular line and shows mildly raised hepatic echotexture with normal visualization of intrahepatic vessel walls. Margins are smooth and regular. Intra and extra hepatic biliary and vascular channels are normal. No evidence of any focal or diffuse mass lesion seen. Gaseous distension of bowel loops noted.

Gall Bladder: Reveals a clear anechoic non-lithiatic lumen. Its walls are of normal thickness. No pericholecystic pathology seen.

- **CBD & PV** are of normal calibre.

Right Kidney: Normal in size measures 9.7 x 4.1 cm, shape echotexture. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, scarring seen. Tiny renal concretion 3mm at interpole region.

Left Kidney: Normal in size measures 10.2 x 4.1 cm, shape echotexture. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, calculus or scarring seen.

Spleen: Normal in size, shape & echotexture measures 9.0 cm in long axis.

Pancreas: Is normal in size, shape and echotexture. Pancreatic duct is not dilated.

Urinary Bladder: Is central smooth in contour & reveal a clear lumen. Its walls are of normal thickness.

Prostate: Is normal in size, shape & echotexture measures 13 cc in volume and 14 grams in weight.

- No evidence of retroperitoneal lymphadenopathy / ascites seen.

Impression: USG Study Reveals:

- Normal sized liver with grade - I fatty infiltration and Gaseous distension of bowel loops.
- Tiny right renal concretion 3mm at interpole region.

Dr. Ritesh Kumawat
MBBS, DMRD, DNB (Radio Diagnosis)
Consultant Radiologist
Reg. No. MP - 12614

Radiological investigations have their own limitations. The above report is an opinion and not the final diagnosis This is to be co-related with clinical profile / investigations.
In case of any discrepancy a review may be asked.



Shop No. 7, 8 & 9, Naseer Complex, 169 Green Park
Colony, D.I.G. Bunglow Square, BHOPAL - 462001


8889822122, 9977784135, 0755-4234400

GREEN CITY HOSPITAL

Reg. No. NH/6333/DEC-2017

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AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL

PATHOLOGY REPORT

Patient Name : Mr. Sameer Tirkey Corp	 Perm.Pat. ID : 2209
Age : 36 Years Gender : Male	Sample Date : 17-Jul-2023 9:29 am
Mobile No. : 0 Lab ID : CORP/1	Authorise Date : 17-Jul-2023 1:13 pm
Referring Dr. : Dr.Green City Hospital	Printed Date : 17/07/2023 1:13 pm
Collected From :	Collected By :

HAEMATOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
<u>Complete Blood Count</u>				
HAEMOGLOBIN	14.0	gm/dl	13-17	
RBC Count	6.20 (H)	mil/cumm	4.5-5.5	
Total WBC Count	6800	/cumm	4000-11000	
PCV	39.1 (L)	%	40-50	
Differential Count				
Neutrophils	70	%	40-80	
Lymphocytes	25	%	20-40	
Monocytes	03	%	2-8	
Eosinophil	02	%	1-6	
Basophils	0.00	%	0-1	
RBC Indices				
MCV	63.06 (L)	fl	83-101	
MCH	22.58 (L)	picograms	27-32	
MCHC	35.81 (H)	g/dl	31.5-34.5	
Platelet Indices				
PLATELET COUNT	2.15	Lacs/cumm	1.5-4.5	
ESR	08	mm/Fhr	0-20	

Note: - (L) - Low; (H) - High

End Of Report

Checked By :



Authorised By :

Page 1 of 1

Dr. Pritha Dutta
MD (Biochemistry)
Technologist

Please Correlate clinically as well as with other investigative findings. This report is not valid for medico legal purpose.

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HAEMATOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
-------------	--------	------	-----------------------	--------

Blood Group " B " POSITIVE

Interpretation :-

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BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Glycosylated Haemoglobin (HbA 1c)				
HbA1C Result	4.1		4 . 6 Non Diabetic	Automated Immunofluorescence

Note: - (L) - Low; (H) - High

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BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Blood Sugar - Fasting	93.0	mg/dl	70-110	Rare Care
SERUM UREA	22.8	mg/dl	15-40	
Blood Sugar - PP	116.1	mg/dl	70-140	post blood
Serum Creatinine	0.90	mg/dl	0.6-1.4	Enzymatic

Interpretation :-

Serum Uric Acid

6.0 mg/dL 3.4-7.0

Interpretation :-

A uric acid blood test, also known as a serum uric acid measurement, determines how much uric acid is present in your blood. The test can help determine how well your body produces and removes uric acid. Uric acid is a chemical produced when your body breaks down foods that contain organic compounds called purines. Foods and beverages with a high purine content include: liver, anchovies, mackerel, dried beans, beer, wine. Purines are also created through the natural process of cell breakdown in the body. Most uric acid is dissolved in the blood, filtered through the kidneys, and expelled in the urine. Sometimes the body produces too much uric acid or doesn't filter out enough of it. Hyperuricemia is the name of the disorder that occurs when you have too much uric acid in your body.

GGT

38.8 U/L 5-40

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BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Liver Function Test				
Bilirubin - Total	0.36	mg/dl	0.1-1.2	Jendrassik & Grof
Bilirubin - Direct	0.12	mg/dl	0.0-0.4	Jendrassik & Grof
Bilirubin - Indirect	0.24	mg/dl	0.1-1.0	Calculated
SGOT	43.4 (H)	IU/L	05-40	Kinetic UV
SGPT	46.3 (H)	IU/L	05-40	Kinetic UV
Alkaline Phosphatase	166.4	IU/L	60-306	Enzymatic - Kinetic
Total Protein	6.7	gm/dl	6.0-8.0	Biuret Endpoint
Albumin	4.0	gm/dl	3.2-5.5	Bromocresol Green
Globulin	2.70	gm/dl	2.3-3.5	Calculated
Albumin Globulin Ratio	1.48		-	Calculated

Interpretation :-

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BIOCHEMISTRY

TestName(S)	Result	Unit	Biological Ref. Range	Method
LIPID PROFILE				
Serum Appearance	Clear		##	
S. Cholesterol	142.3	mg/dL	125-200	CHOD-PAP
S. Triglycerides	75.6	mg/dL	50-165	GPO-TOPS
HDL Cholesterol	38.9	mg/dL	35-79.5	Selective Inhibition
LDL Cholesterol	88.28	mg/dl	85-130	Calculated
VLDL Cholesterol	15.12	mg/dl	10-50	Calculated
S.Cholesterol/HDLC Ratio	3.66		3.0-6.0	Calculated
LDLC/HDLC RATIO	2.27 (L)		2.5-3.5	Calculated

Interpretation :-

Note :- Blood normally contains more than one type of fat. The typical lipid panel measures two main types of blood fat, cholesterol and triglycerides. Their functions and the effect of high levels on your health can be quite different. While both contribute to premature cardiovascular disease, high levels of triglycerides have also been found to increase your chance of having a heart attack or stroke even when the LDL-Cholesterol is not elevated (see below). Triglycerides can also cause an acute medical condition called pancreatitis when triglycerides are extremely high.

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CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
Urine Sugar (PP)	Nil			

Note: - (L) - Low; (H) - High End Of Report

Checked By :



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MD (Biochemistry)


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Referring Dr. : Dr.Green City Hospital	Printed Date : 17/07/2023 1:15 pm
Collected From :	Collected By :

CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
STOOL EXAMINATION				
Physical Examination				
Colour	LIGHT BROWN			
Consistency	Soft			
Mucus	Trace			
Blood	nil			
Chemical Examination				
Reaction	Acidic			
Occult blood	Absent			
Fat Globules	Absent			
Microscopic Examination				
RBC	Absent	/hpf	-	
Pus cells	1-2	/hpf	-	
Epithelial cells	0-1			
Veg. cells / Fibres	Absent	/hpf	-	
	LIGHT BROWN			
IMPRESSION	No Abnormality detected			

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CLINICAL PATHOLOGY

TestName(S)	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE MICROSCOPY				
PHYSICAL EXAMINATION				
Volume	20 ml			
Colour	Pale Yellow			
Appearance	Clear		-	
Specific gravity	1.015		1.005-1.035	
CHEMICAL EXAMINATION				
Reaction (pH)	Acidic		4.5-8.0	
Albumin	Negative		Negative	
Sugar	Negative		Negative	
MICROSCOPIC EXAMINATION				
PUS(WBC) Cells	3-4	/hpf	0-2	
RBC	Nil	/hpf	0-2	
Epithelial Cells	Occasional	/hpf	0-2	
Casts	Nil		Nil	
Crystals	Nil		Nil	
Bacteria	Nil		-	
Protozoa	Absent			

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Technologist

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For Emergency / Ambulance Service Contact No.: 0755-2733323

Laboratory Test Report

UHID : AM10.23000009368
 Patient Name : MR. SAMEER TIRKEY
 Age/Gender : 36 YEARS / MALE
 Ref. Doctor : GREEN CITY HOSPITAL
 Client Name : NATIONAL PATHOLOGY
 Mobile No. : 9893837193
 Client Address : SHOP,126 CITY CENTRE COMPLEX NEAR BY THANA TALLIYA BHUDHWARA ROAD BHOPAL MP. 462001

Bill No. : 007198
 Registered On : 17/07/2023,01:41 PM
 Collected On : 17/07/2023,02:42 PM
 Reported On : 17/07/2023,05:58 PM
 SampleID : 

Immunology

Test Name	Result	Unit	Biological Reference Interval
Thyroid (T3,T4,TSH)- Serum			
Total T3 Method : ECLIA	1.42	ng/mL	0.35-1.93
Total T4 Method : ECLIA	9.17	ug/dl	5.10-14.10
TSH-Ultrasensitive Method : ECLIA	0.72	uIU/ml	0.27-4.20

The Biological reference interval provided is for Adults.
 For age specific reference interval ,please refer to the table given below.
Interpretation:

TSH	T3/FT3	T4/FT4	Interpretation
High	Normal	Normal	Subclinical Hypothyroidism
Low	Normal	Normal	Subclinical Hyperthyroidism
High	High	High	Secondary Hyperthyroidism
Low	High/Normal	High/Normal	Hyperthyroidism
Low	Low	Low	Non Thyroidal illness/ Secondary Hypothyroidism

TSH (uIU/mL)		
Cord Blood (> 37 Week) 2.3 -13.2		
Children	Birth - 4 d	1.0 -39.0
	2-20 Wk	1.7- 9.1
	21 Wk- 20 Y	0.7-6.4
Pregnancy	First Trimester	0.3-2.5
	Second Trimester	0.3-3.0
	Third Trimester	0.8-3.5

TSH Levels are subjected to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm and 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH levels is approx 50% +/-, hence time of the day can influence the measured serum concentration.

----- End of Report -----
Results are to be correlated clinically

Scan to Valldate




Page 1 of 1

Entered By

Verified By




 Dr. Prince Lokwani
 MD Pathology

Corporate Office : 1st floor, Tirmizi Height, P&T Colony, Shah E Alam talnaka, Ahmedabad, Gujarat - 380028
 ☎ : +91 9313 200 834 🌐 : www.moresteppathlabs.com

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भारत सरकार
 Unique Identification Authority of India
 Government of India

नामांकन क्रम / Enrollment No 1221/22600/00107

To,
 समीर तिरकी
 Sameer Tirkey
 S/O: Pankhra Sius Tirkey
 mahadevdad
 main road mahadevdad
 bagicha jashpur
 Kurrog
 Kurrog Bagicha Jashpur
 Chhattisgarh 496224
 7509072777

Ref: 3350 / 14T / 288350 / 288350 / P



SE197141797FT



आपका आधार क्रमांक / Your Aadhaar No. :

8554 3883 8277

आधार - आम आदमी का अधिकार

भारत सरकार
 Government of India

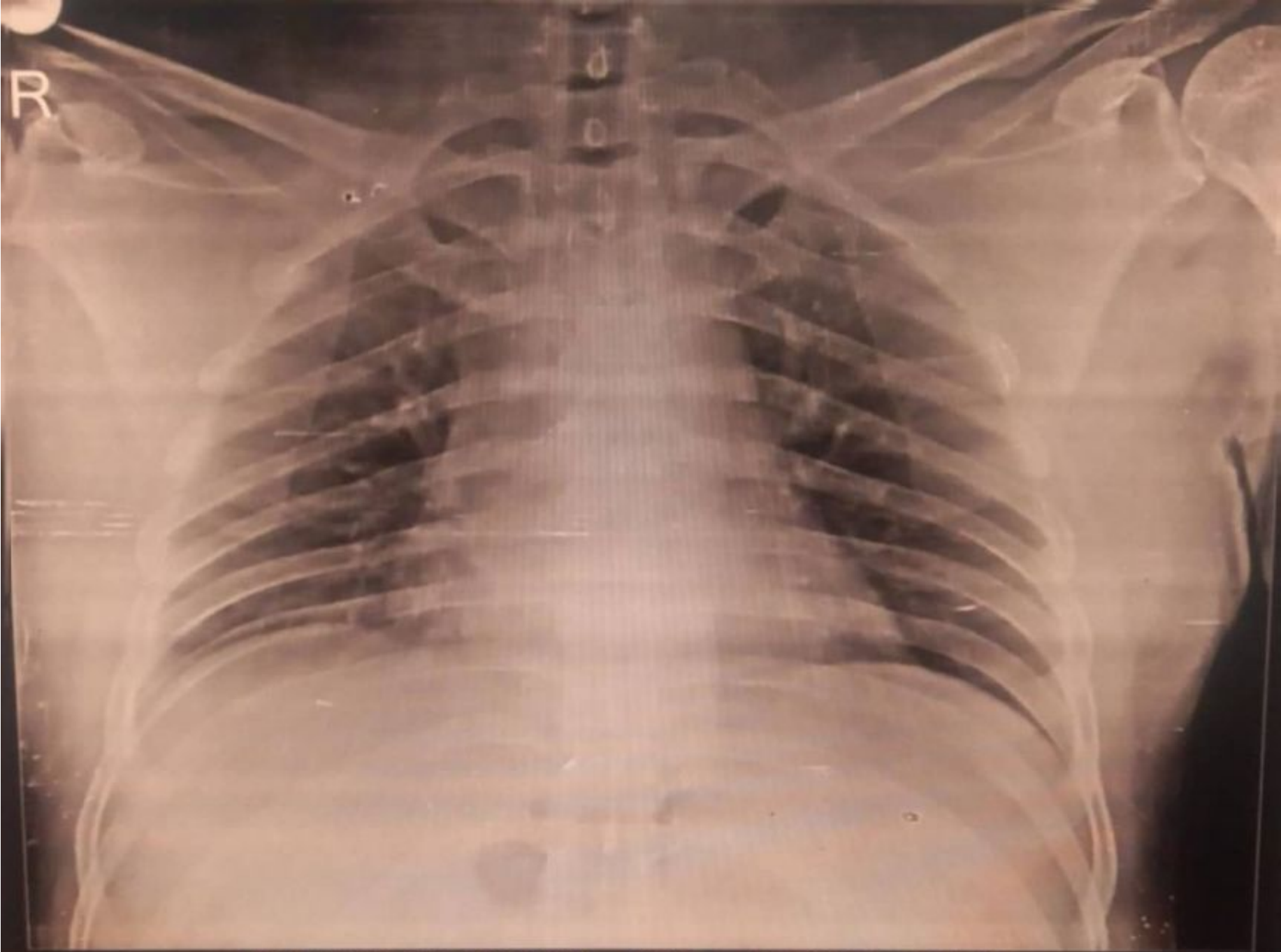
समीर तिरकी
 Sameer Tirkey
 जन्म तिथि / DOB : 09/07/1986
 पुरुष / Male

8554 3883 8277

आधार - आम आदमी का अधिकार

Sangita - 7999187501

Reshuma 9340516618



MR SAMEER TIRKEY 36 YRS... 34877 CHEST AP 17-Jul-23
GREEN CITY HOSPITAL, D.I.G. BUNGLOW, BHOPAL



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Ph.: 0755-2733323

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CLIENT NAME: MR. SAMEER TIRKEY	Age/Sex: 36Y/M	Procedure Date : 18-07-2023
Ref. By:		Reporting Date : 18-07-2023

X-RAY CHEST

- Bilateral lung parenchyma is clear.
- Bilateral hilar shadow is normal.
- Trachea midline is normal.
- Bilateral CP angle are clear.
- Cardio thoracic ratio is normal.

Impression: No remarkable abnormality seen in present study.



DR. NITIN KHANTAL
CONSULTANT RADIOLOGIST

SCIENCE OF RADIOLOGICAL DAIGNOSIS IS BASED ON INTERPRETATION OF VARIOUS SHADOW PRODUCED BY BOTH NORMAL AND ABNORMAL TISSUES, DISSIMILAR DIVERSE DISEASES PRODUCE SIMILAR SHADOWS, HENCE THIS REPORT REPRESENT VARIOUS POSSIBILITIES AND NOT MEANT FOR MEDICO-LEGAL PURPOSES

क्यालिदा डिपार्टमेंट

Services Not Available in Hospital /

अस्पताल में अनुपलब्ध सेवायें

लब्ध सुविधाएं

- एम्बुलेंस
- आर्किमिडिकल कंसल्टिंग
- फार्मैसी
- आई.सी.यू. देखभाल
- नैदानिक सेवाएं

and Gynecology

- शिशु रोग चिकित्सा
- स्त्री एवं प्रसूति रोग विज्ञान
- कैंसर विज्ञान
- अंग प्रत्यारोपण

सोपाल फोन : 3323

Jul 17, 2023, 09:43