

MR. SAHIN KUMAR JRETI

(Company)

30/4

DR. MANSI ARORA

$V_h < \begin{matrix} 6/9 \\ 6/9 \end{matrix}$   
(aided.)

• Comfortable = own  
glasses

NCT  $< \begin{matrix} 14.5 \\ 16.4 \end{matrix}$

• 20min / 20sec / 20feet

no Dizziness

- using glasses v 2010  
change glasses x 3 months

no using  
old stone.

By

• old. Remyoteam ny 4lb

(R/E)

4 weeks

Mansi

Dr. S. Mayank

Age - 31YM

Mr. Sachin Kumar Upvati

Annual Health Checkup

ECGs were  
CXR - were  
2000-2010 - were  
with ABO - for 2 fatty liver.



MR. SAHUN UPRETI

30/M

DR. P. GURURANI

no fresh complaints

o/e - Nox - ~~normal~~

O.C - WNL

Ear - BIL TM intact

No active intervention required.

3

29/03/2024

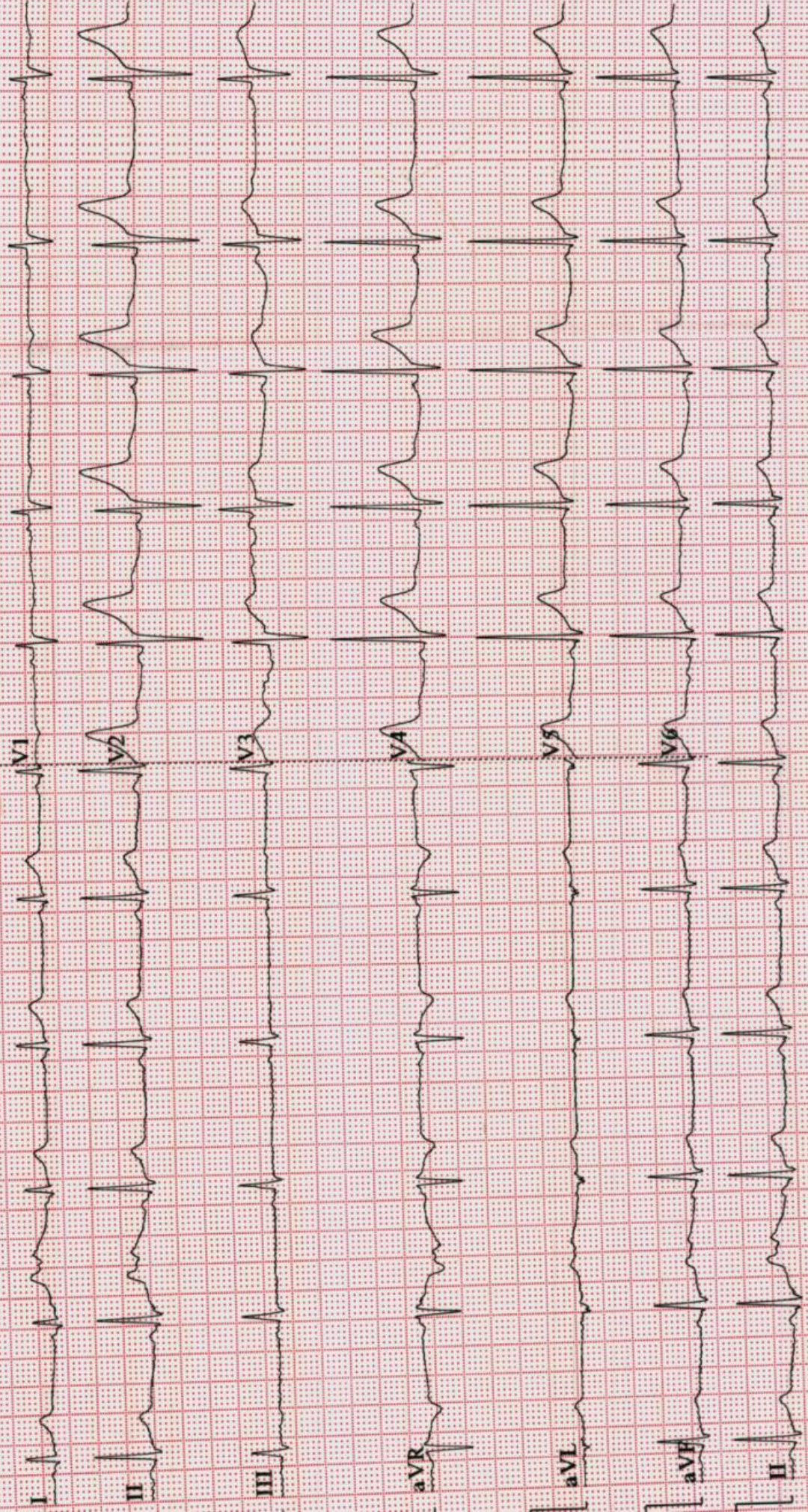
Sachin Kumar Uprati

Diagnosis Information:

Sinus Rhythm  
Short PR Interval

HR	:	64	bpm
P	:	88	ms
PR	:	119	ms
QRS	:	94	ms
QT/QTc	:	386/401	ms
P/QRST	:	45/64/33	°
RV5/SV1	:	1.692/0.395	mV

Report Confirmed by:



3-2024-00-2892 PRINT

Years

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Date	29/03/2024 01:44:19 PM	Srl No.	1047	UHID No.	OPD-
Name	Mr. SACHIN KUMAR UPRETI	Age	30 Yrs.	Printed on 01/04/2024 11:46 AM	
Ref. By	Dr. SELF	Sex	M		

Test Name	Value	Unit	Normal Value
<b><u>COMPLETE HAEMOGRAM</u></b>			
Erba Mannheim Elite 580			
HAEMOGLOBIN (Hb)	15.1	gm / dL	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	9,380	cells / cu mm	4000 - 11000
<b><u>DIFFERENTIAL LEUCOCYTE COUNT (DLC)</u></b>			
NEUTROPHIL	63	%	40 - 75
LYMPHOCYTE	31	%	20 - 40
EOSINOPHIL	01	%	01 - 06
MONOCYTE	05	%	02 - 10
BASOPHIL	00	%	0 - 0
RBC COUNT	5.18	million / cu mm	4.5 - 5.5
P.C.V / HAEMATOCRIT	45.3	%	40 - 54
M C V	87.452	fl.	80 - 100
M C H	29.151	Picogram	27.0 - 31.0
M C H C	33.33	gm / dL	32 - 36
PLATELET COUNT	2,41,000	Lakh / cu mm	150000 - 400000
ESR	05	mm / 1st hr	0 - 15
VESMATIC EASY - AUTOMATED			

### HAEMATOLOGY

BLOOD GROUP ABO	"AB"
RH TYPING	POSITIVE

### LIPID PROFILE

Roche cobas c 311

TRIGLYCERIDES	215.4	mg / dL	40.0 - 165.0
GPO-PAP			
TOTAL CHOLESTEROL	180.0	mg / dL	0.0 - 200.0
CHOD-PAP			
HDL CHOLESTEROL DIRECT	37.9	mg / dL	40.0 - 79.4

**LAB TECHNICIAN**

Contd...2



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Test Name	Value	Unit	Normal Value
VLDL	43.08	mg / dL	4.7 - 22.1
LDL CHOLESTEROL DIRECT	99.02	mg / dL	63.0 - 129.0
TOTAL CHOLESTEROL / HDL RATIO	4.749		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.613		0.00 - 3.55
<b><u>LIVER FUNCTION TEST (LFT)</u></b>			
Roche cobas c 311			
BILIRUBIN TOTAL DPD	1.26	mg / dL	0 - 1.2
CONJUGATED (D. Bilirubin) Jendrassik-Grof	0.34	mg / dL	0.00 - 0.30
UNCONJUGATED (I.D. Bilirubin)	0.92	mg / dL	0.00 - 0.70
TOTAL PROTEIN Biuret	7.4	gm / dL	6.6 - 8.3
ALBUMIN BCP	4.6	gm / dL	3.5 - 5.5
GLOBULIN	2.8	gm / dL	2.5 - 4.0
A/G RATIO	1.643	%	0.8 - 2.0
SGOT IFCC	34.4	IU / L	5.0 - 45.0
SGPT IFCC	42.5	IU / L	5.0 - 49.0
ALKALINE PHOSPHATASE IFCC	151.0	U / L	60.0 - 170.0
GAMMA GT IFCC	45.8	IU / L	8.0 - 71.0
<b><u>THYROID PROFILE</u></b>			
MINI VIDAS : BIOMERIEUX			
T3 ELFA Method	0.95	ng / mL	0.60 - 1.81
T4 ELFA Method	5.94	ug / dL	4.5 - 10.9
TSH ELFA Method	1.81	uIU / mL	0.35 - 5.50

Contd...3

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<b>Test Name</b>	<b>Value</b>	<b>Unit</b>	<b>Normal Value</b>
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### SEROLOGY

<b>TOTAL PSA</b>	<b>0.41</b>	<b>ng / mL</b>
ELFA		

#### INTERPRETATION :

#### Expected Values :

<u>PSA concentrations ( ng / mL )</u>			
<u>Age ( years )</u>	<u>:</u>	<u>Low Limit</u>	<u>:</u> <u>High Limit</u>
< 40	:	0.21	: 1.72
40 - 49	:	0.27	: 2.19
50 - 59	:	0.27	: 3.42
60 - 69	:	0.22	: 6.16
> 69	:	0.21	: 6.77

PSA is reliable tumour marker for already diagnosed prostatic carcinomas. It is uniquely associated only with prostatic tissue, and therefore is specific for it. Baseline levels measured prior to therapeutic intervention and followed later by serial periodical measurements will predict the outcome of therapy. It also helps in early discovery of recurrences, relapses and metastases.

In general, tumor marker levels are directly proportional to the tumour mass and the stage of the cancer. However, it is the rate of change of the tumor marker level which is more important, rather than its absolute value.

A 50% change may be considered clinically significant. It must be emphasised that PSA may also be elevated in benign prostatic hypertrophy and inflammatory conditions of the surrounding genitourinary tract. Therefore, this parameter should never be used as a screening test for diagnosing prostatic carcinomas but only as an aid in follow up studies.

### BIOCHEMISTRY

#### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

QUANTITY	20	mL
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Contd...5

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Test Name	Value	Unit	Normal Value
COLOUR	YELLOW		
TRANSPARENCY	SLIGHTLY TURBID		
SPECIFIC GRAVITY	Q.N.S.		Q.N.S.
PH	6.0		6.0

**CHEMICAL EXAMINATION**

ALBUMIN	NIL
SUGAR	NIL

**MICROSCOPIC EXAMINATION**

PUS CELLS	8-10	/ HPF	
RBCs	NIL	/ HPF	NIL
CASTS	NIL	/ HPF	NIL
CRYSTALS	NIL		NIL
EPITHELIAL CELLS	3-4	/ HPF	
BACTERIA	NIL		NIL
OTHERS	NIL		NIL

**BIOCHEMISTRY**

BLOOD UREA Urease / GLDH	32.4	mg / dL	15.0 - 40.0
SERUM CREATININE Jaffe	0.74	mg / dL	0.7 - 1.4
SERUM URIC ACID Enzymatic	8.0	mg / dL	3.4 - 7.0

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

**LAB TECHNICIAN**



**DR. ANAMIKA YADAV**  
**MBBS DNB PATHOLOGY**

## CARDIOLOGY

### ECHOCARDIOGRAM REPORT

**NAME:** MR. SACHIN KUMAR      **AGE/SEX:** 31/M      **DATE:** 29/03/2024

**REFERRING DIAGNOSIS:** To rule out structural heart disease

**ECHOGENECITY :** Normal

DIMENSIONS	NORMAL		NORMAL
AO (ed)	3.1cm (2.1 - 3.7cm)	IVSs	0.7cm (0.6 - 1.2 cm)
LA (es)	3.0cm (2.1 - 3.7 cm)	LVIDs	1.0cm (0.6 - 1.2 cm)
IVSd	1.1cm (1.5 - 3.0 cm)	LVPWs	1.8 CM (0.6 - 1.2 cm)
LVIDd	4.0cm (3.6 - 5.2 cm)	EF	60% (60% - 85%)
LVPWd	2.8cm (2.3 - 3.9 cm)	FS	18% (30% - 42%)

### MORPHOLOGICAL DATA

**Mitral Valve:** Normal

AML : Normal

Interatrial septum

: Intact

PML : Normal

Interventricular Septum

: Intact

Aortic Valve : Normal

Pulmonary Artery :

Normal

Tricuspid Valve : Normal

Aorta

: Normal

Pulmonary Valve : Normal

Right Atrium

: Normal

Right Ventricle : Normal

Left Atrium

: Normal

Left Ventricle : Normal

----P.T.O

**2-D ECHOCARDIOGRAPHY FINDINGS :**


LV normal in size with Normal contractions. No LV regional wall motion abnormality in basal state. RV normal in size with adequate contractions. LA and RA normal. Pericardium normal. No intracardiac mass seen on transthoracic echocardiography. Estimated LV ejection fraction is 60%.

**COLOR FLOW MAPPING :**

No MR. No TR

**IMPRESSION :**

1. LV Normal in size with Normal LV systolic function. (LVEF = 60%).
2. No LV regional wall motion abnormality in basal state.
3. Normal color flow.
4. Normal Cardiac Chamber Dimension.
5. RV normal in size with adequate systolic function.
6. Normal mitral inflow pattern.
7. No I/C Clot/Veg/PE.

  
**DR. YOGESH NAGENDRA**  
MBBS, MD, DM (CARDIOLOGY)

**NOTE :** Echocardiography report given is that of the procedure done on that day and needs to be assessed in conjunction with the clinical findings. This is not for medicolegal purposes. No record of this report is kept in the hospital.

## DEPARTMENT OF RADIOLOGY & IMAGING

PT.NAME: MR. SACHIN KUMAR UPRTI

AGE/SEX-31Y/M

UHID NO- --

DATE: 29/MAR/2024

REF.BY- DR. (MAJ) SAURABH MAYANK

### USG WHOLE ABDOMEN

**LIVER:** is normal in size, measures approx 14.0 cms with increased echotexture.

**PORTAL VEIN:** is not dilated. Intrahepatic biliary radicals are not dilated.

**GALL BLADDER:** is partially distended with normal wall thickness.

**CBD:** is not dilated with clear lumen. No calculus is seen.

**PANCREAS:** Visualized part of pancreas is normal in size, shape with normal homogeneous echotexture. **MPD:** is not dilated.


**SPLEEN:** is normal in size (~9.6 cms) with normal homogeneous echotexture.

**RIGHT KIDNEY:** is normal in size and echotexture.

- Cortical echogenicity is normal.
- Cortico-medullary demarcation is maintained.
- Parenchymal thickness appears normal.
- Pelvicalyceal system is not dilated.

**LEFT KIDNEY:** is normal in size and echotexture.

- Cortical echogenicity is normal.
- Cortico-medullary demarcation is maintained.
- Parenchymal thickness appears normal.
- Pelvicalyceal system is not dilated.

  
-----PTO

**URINARY BLADDER:** is minimally distended.

**PROSTATE:** is normal in size and roughly measures volume approx 13.0 cc.

No free fluid is seen in the Morrison's pouch, perihepatic space, perisplenic space, para colic gutter and pelvic cavity.

**IMPRESSION: USG appearances are suggestive of -**

➤ ***Grade I fatty liver.***

*(Adv-Clinico-pathological correlation).*



**DR. (MAJ) RAVINDER SINGH**  
**MBBS, MD.**  
**Consultant Radiologist**

Number of images-05

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**Note-This is a professional report based on imaging findings only and should always be correlated clinically and with other relevant investigations. This report is not for medico-legal purpose. In case of any discrepancy due to machine error or typing error kindly get it rectified immediately.**

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SACHIN KUMAR UPRETI 24526 CHEST PA Mar/29/2024 01:07 PM  
UJALA CYGNUS CENTRAL HOSPITAL HALDWANI