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Name: Rakesh Kumar Upadhyay

Refd by :- BoB

Age/Sex:-

42 Yrs/M

Date:-

21/03/22

Thanks for referral.

# REPORT OF USG OF WHOLE ABDOMEN

Liver

:- Enlarged in size(15.5cm) with raised echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree

G. Bladder:- It is normal in shape, size & position. It is echofree & shows no evidence of

calculus, mass or sludge.

**CBD** 

:- It is normal in calibre & is echofree.

Pancreas :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal

calcification is seen. No definite peripancreatic collection is seen.

Spleen

:- Normal in size(10.5cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.

Kidneys

:- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.

Right Kidney measures 9.7cm and Left Kidney measures 9.1cm.

Ureters

:- Ureters are normal.

U. Bladder:- Mildly Thick and echogenic U.B wall, Wall Thickness measure 5mm.

Prostate

:- Normal in size(16cc) & echotexture.

Others

:- No ascites or abdominal adenopathy is seen.

No free subphrenic / basal pleural space collection is seen.

IMPRESSION:-

Mild Hepatomegaly with Grade I fatty Liver. Recurrent UTI (Insignificant PVR- 32cc)

> Dr. U. Kumar MBBS, MD (Radio-Diagnosis) Consultant Radiologist



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Date 21/03/2022 Srl No. 28 Patient Id 2203210028

Name Mr. RAKESH KUMAR UPADHYAY Age 42 Yrs. Sex M

Ref. By Dr.BOB

Test Name Value Unit Normal Value

# **HAEMATOLOGY**

HB A1C 5.3 %

## **EXPECTED VALUES:**

Metabolicaly healthy patients = 4.8 - 5.5 % HbAIC

Good Control = 5.5 - 6.8 % HbAlC Fair Control = 6.8-8.2 % HbAlC Poor Control = >8.2 % HbAlC

#### **REMARKS:-**

In vitro quantitative determination of HbAIC in whole blood is utilized in long term monitoring of glycemia

The **HbAIC** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbAIC** be performed at intervals of 4-6 weeksduring Diabetes

Mellitus therapy.

Results of **HbAIC** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

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

Dr.R.B.RAMAN MBBS, MD

**CONSULTANT PATHOLOGIST** 



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Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	13.5	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	5,900	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	56	%	40 - 75
LYMPHOCYTE	38	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN`s METHOD)	13	mm/lst hr.	0 - 15
R B C COUNT	4.29	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	40.5	%	40 - 54
MCV	94.41	fl.	80 - 100
MCH	31.47	Picogram	27.0 - 31.0
MCHC	33.3	gm/dl	33 - 37
PLATELET COUNT	2.04	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		

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

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Test Name	Value	Unit	Normal Value
<u>BI</u>	<u>OCHEMIST</u>	<u>'RY</u>	
BLOOD SUGAR FASTING	108.9	mg/dl	70 - 110
SERUM CREATININE	1.04	mg%	0.7 - 1.4
BLOOD UREA	21.3	mg /dl	15.0 - 45.0
SERUM URIC ACID	4.2	mg%	3.4 - 7.0
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.62	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.21	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.41	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.7	gm/dl	6.6 - 8.3
ALBUMIN	2.5	gm/dl	3.4 - 5.2
GLOBULIN	4.2	gm/dl	2.3 - 3.5
A/G RATIO	0.595		
SGOT	33.5	IU/L	5 - 40
SGPT	39.0	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	82.3	U/L	40.0 - 130.0
GAMMA GT  LFT INTERPRET	25.7	IU/L	8.0 - 71.0
LIPID PROFILE			
TRIGLYCERIDES	109.2	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	164.9	mg/dL	29.0 - 199.0



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Ref. By D	Or.BOB				

Test Name	Value	Unit	Normal Value
H D L CHOLESTEROL DIRECT	47.2	mg/dL	35.1 - 88.0
VLDL	21.84	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	95.86	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.494		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.031		0.00 - 3.55
THYROID PROFILE			
Т3	0.92	ng/ml	0.60 - 1.81
T4 Chemiluminescence	8.67	ug/dl	4.5 - 10.9
TSH Chemiluminescence	1.53	uIU/mI	
REFERENCE RANGE			
PAEDIATRIC AGE GROUP 0-3 DAYS 3-30 DAYS I MONTH -5 MONTHS 6 MONTHS- 18 YEARS	1-20 0.5 - 6.5 0.5 - 6. 0.5 - 4.		
<u>ADULTS</u>	0.39 - 6.16	ulu/ml	

**Note**: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates  $\pm$  50 %, hence time of the day has influence on the measured serum TSH concentration.



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Test Name Value Unit Normal Value

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

- 1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
- 2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
- 3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
- 4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
- 5. Although elevated TSH levels are nearly always indicative of primary hyporthyroidism, and may be seen in secondary thyrotoxicosis.

# **URINE EXAMINATION TEST**

## PHYSICAL EXAMINATION

QUANTITY 20 ml.

COLOUR PALE YELLOW

TRANSPARENCY CLEAR
SPECIFIC GRAVITY 1.030
PH 6.0

**CHEMICAL EXAMINATION** 

ALBUMIN NIL



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Test Name	Value	Unit	Normal Value
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	0-1	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

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

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