

भारत सरकार

## Government of India

रूपेश रंजन प्रसाद सिंह Rupesh Ranjan Prasad Singh जन्म तिथि / DOB : 23/08/1982 पुरुष / Male



3961 6929 6643 मिरा आधार, मेरी पहचान



En application of the form Unique Identification Authority of India

Address: आत्मजः सुरेन्द्र प्रसाद सिंह, हीजपुरा, हौजपुर उर्फ खौअजपुरा, वैशाली, अनिरुद्धा बेल्सर, बिहार, 844111 Haujpura, Hauzpur Urf Khauazpura, Vaishali, Aniruddha Belsar, Bihar, 844111

3961 6929 6643



WWW



# STAR HOSPITAL

(A unit of Magadh Nursing Home)

An ISO 9001:2015 Certified Hospital



Between East of Alok Petrol Pump & West of Mahindra Show Room in Bypass Fourlane, Fatuha Road, Bari Pahari, Patna Ph.: 9431046838, 9334269730, 7488893768

## NABH PREACCREDITED

Rupern Ranjum boured kingle Com for annual Heaven Chem ins Mr 68/Cg To Ht- 164 Ch Pulm 75/min Pop - In mmy Stoz. 98%, Kallw ger mil. Pa Sel 200 ren | 140-Chest MAO. ECM. Normal Chastery - within Marmal Vine echo- resonal & 616 Mear ( L N-9 Eye- Par ( L 6/6 Colour Line almossaul Bonz - Within bount - New Moeific diet respoiction
154 - Normal finding
Blood invertigation - within resonal hims
Entr Sw. 12 29/18/2023 ENT- list typpanic membrane gostact



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DR. ASHISH RANJAN SINGH

BDS (Hon) MU

Consultant Oral & Dental Surgeon

Ph.: 9470585838, 9852542738

Not for Medico Legal Purpose

DR. VINAY KUMAR

BDS, MIDA

**Consultant Oral Dental Surgeon** 

Name: Rypesh, Ronjan Pahryl

Add: Hangpin washali

Date: 29 18 23

Age/Sex: 41 M

do - care for annual dental clemp

calculy +.

AT O Scaling to be do

Patria-07 \* Times



Ph.: 9431046838, 9334269730, 7488893768

## ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Patient's Name: MR.RUPESH RANJAN PRASAD

Age/Sex : 41Yr/M

Ref. by

:OPD

Date : 29-Aug-23

### **ECHOCARDIOGRAPHIC WINDOW: Good**

#### 2D & M MODE ECHOCARDIOGRAPHY

Left ventricle

EDD:

 $mm (50 - 28 mm / m^2)$ 

ESD:

31 m

mm (6-11mm)

IVS: 1 Ejection fraction:

10

mm (6-11 mm)  $66\% (67\pm 8\%)$ 

PW: FS: 10 35 mm(6-11 mm) %(34-44%)

Left atrium/ Aorta

35/30mm

Right ventricle

Normal

Right atrium

Normal

Pericardium

Normal with no pericardial effusion

2D:

Normal LA/LV size and normally contracting left ventricle.

No LVH, No RWMA

AML/ PML:

Normal

Tricuspid valve

Normal

Aortic valve

Normal

Pulmonary valve

Normal

Continuous & Pulse Wave Doppler study

Valve	Velocity (m/sec)			Gradient (mmHg)		Valve area	Regurg.	
	Peak	Mean	EDV	Peak	Mean	EDG	(PHT Method)	
Mitral	E=1.0			4.0	1.6		4.6 cm <sup>2</sup>	Nil
·	A=0.6				al record of the			i3
Tricuspid	E=0.6			1.2	0.4			Nil
	A=0.4							
Aortic	1.2			5.6	1.6			Nil
Pulmonary	0.9			3.4	1.3		1	Nil





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## **Colour Flow Imaging**

No MR/TR/PR, No AR
No flow shunt

### **COMMENTS:**

- ♦ Normal all chambers size
- ♦ Normal LV/RV filling pressure
- ♦ Normal contracting LAD, RCA & LCx regions
- ♦ Normal diastolic flow
- ♦ Normal LV systolic function
- ♦ No RWMA, LVEF = 66 %
- ♦ All cardiac valves are normal
- ♦ No MS /TS/AS/ PS /MR/TR/PR
- ♦ No clot / vegetation / pericardial effusion.

## **IMPRESSION:**

Normal chambers dimension
Normal LV & RV systolic function
All cardiac valves are normal
No RWMA, LVEF – 66 %
Normal diastolic flow.

Please correlate clinically Not valid for medicolegal purposes AND DAHAS

DR.RANJEET KUMAR (CONSULTANT CARDIOLOGY) MBBS, PGDCC, CCEBDM EX-Senior Registrar, RTIICS, KOLKATA



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No: 03.

Mr. Rupesh Ranjan Prasad Singh. 41/M. Refd. by Star Hospital.

August 29, 2023.

#### U.S.G. of Whole Abdomen

LIVER: Normal in shape, size and echotexture. Intra hepatic ducts and vessels are of normal caliber. Right lobe measures 141 mm and left lobe measures 78 mm in cranio caudal length.

GALL BLADDER: Normal in shape and size. Lumen is echofree. GB wall is of normal thickness.

C.B.D. & PORTAL VEIN: No abnormality seen. CBD measures 3.1 mm and PV 8.5 mm in caliber.

PANCREAS: Normal in shape, size and echotexture.

BOTH KIDNEYS: Right kidney measures 89 mm x 37 mm. Left kidney measures 91 mm x 38 mm. No mass, cyst or calculus. P C S Not Dilated. No Hydronephrosis. The C.M D is well maintained.

SPLEEN: Normal in shape, size and echopattern. Size measures 88 mm x 35 mm. SV - Normal.

URINARY BLADDER: Echofree and no abnormality seen. UB wall is of normal thickness. Pre void urine volume 270 ml and post void residual urine volume 10 ml. (insignificant)

PROSTATE: Normal in shape, size and echotexture. Weight = 17 Grams, approx.

OTHER: No evidence of ascites/peritoneal collection. No basal pleural effusion. No enlarged lymph nodes. No mass, lump or abscess in iliac scan.

OPINION: Normal study of Liver, Gall bladder, CBD, PV, Pancreas, Kidneys, Spleen, Urinary bladder and Prostate.



Consultant Sonologist



Ph.: 9431046838, 9334269730, 7488893768

Collection Date/Time: 29/08/2023/10:14:00 AM

Bill No

: 23245937

**Patient's Name** 

: RUPESH RANJAN PRASAD SINGH

**Referred By** 

: Dr. Self

**Reporting Date/Time**29/08/2023/ 3:10:51 PM

Uhid/Lab ID

: 2324676 /

Age / Sex

: 41 Years/Male

**Bed No** 

://

#### **HAEMATOLOGY EXAMINATION**

Investigation Name	Result	Reference Range
HGB	12.6 gm/dl	13 — 17
R.B.C	4.37 million/Cu mm	3.5 — 5.5
H.C.T	38.1 %	40 — 54
M.C.V	87.0 fl	73 — 91 💡
M.C.H	28.8 pg	27 — 32
M.C.H.C	33.1 g/dL	31.5 — 34.5
PLATELET COUNT	1.50 Lakh`s/Cu. mm	1.50 — 4.50
V.B.C	6,800 /cu mm	4000 — 11000
IFFERENTIAL COUNT		
NEUTROPHILS	65 %	<b>40</b> — 70
YPMPHOCYTES	30 %	20 — 40
EOSINOPHILS	02 %	01 — 06
MONOCYTES	03 %	02 — 10
BASOPHILS	00 %	00 — 02



Dr. T.K. Chakraverti M.B.B.S. M.D. (Microbiology) Reg. No.-35997/06



PATHOLOGIST DR. T. K. CHAKARVERTI MBBS, MD(MICRO)





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#### **BIO-CHEMISTRY EXAMINATION**

Investigation Name Result Reference Range

UREA

29.0 mg/dl

10 — 40

Urea is the major Nitrogen - containing metabolic product of protein catabolism in humans, according for more than 75% of the non-protein nitrogen eventually excreted. It is synthesized in the liver from the ammonia produced as a result of deamination of amino acids. Urea is transported by blood to the kidneys from where it is excreted Increased Urea levels are found in liver diseases, renal diseases, urinary obstruction, shock, congestive heart failure, and burns. Decreased Urea levels are found in malnutrition, hepatic failure and pregnancy.

**CREATININE** 

0.80 mg/dl

0.6 - 1.20

**URIC ACID** 

3.78 mg/dl

3.4 — 7.0 a

Uric Acid is increased in Renal failure, gout, asymptomatic hyperuricemia, increased destruction of nucleoproteins and metabolic acidosis, Uses of this test are monitor treatment of gout, monitor chemotherapeutic treatment of neoplasm to avoid renal urate deposition with possible renal failure.

BUN

13.55 mg/dl

4.5 - 23.0

Urea is the major Nitrogen - containing metabolic product of protein catabolism in humans, according for more than 75% of the non-protein nitrogen eventually excreted. It is synthesized in the liver from the ammonia produced as a result of deamination of amino acids. Urea is transported by blood to the kidneys from where it is excreted Increased Urea levels are found in liver diseases, renal diseases, urinary obstruction, shock, congestive heart failure, and burns. Decreased Urea levels are found in malnutrition, hepatic failure and pregnancy.

**HAEMATOLOGY EXAMINATION** 

**BLOOD GROUP** 

**ABO GROUP** 

"O"

**RH TYPE** 

POSITIVE

ESR

14 mm/hr

0 - 15

PSA

1.80

0 — 4



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PATHOLOGIST

PATHOLOGIST DR. T. K. CHAKARVERTI MBBS, MD(MICRO)

LAB TECHNICIAN



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Age / Sex

: 41 Years/Male

**Bed No** 

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#### **BIO-CHEMISTRY EXAMINATION**

Investigation Name	Result	Reference Range
BLOOD SUGAR FASTING	94.0 mg/dl	70 — 110
BLOOD SUGAR PP	118 mg/dl	70 — 140
GAMMA-GT	36.0 U/Lt	9 — 52 (Male:<55 (Female:<38
	LIPID PROFILE	
TOTAL CHOLESTEROL	146 mg/dl	140 — 200
TRIGLYCRIDE	127 mg/dl	30 — 160
HDL CHOLESTEROL	41 mg/dl	35 — 90
VLDL CHOLESTEROL	25.4 mg/dl	06 — 32
DL CHOLESTEROL	79.6 mg/dl	85 — 130
.DL /HDL RATIO	1.94	1.5 — 3.0 。
C / HDL	3.56	
		< 3.0 - Low Risk
		3.0 - 5.0 Avg. Risk
		> 5.0 High Risk

Quality Control: by Human Chemistry Control (BIO-RAD,U.S.A)





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#### **BIO-CHEMISTRY EXAMINATION**

Investigation Name	Result	Reference Range
	LIVER FUNCTION TEST	Г
SERUM BILIRUBIN		۵
TOTAL	0.68 mg/dl	0.3 — 1.0
DIRECT	0.27 mg/dl	0.1 — 0.3 1
INDIRECT	0.41 mg/dl	0.2 — 0.7
SGPT	26.0 Iu/LT	05 — 40
SGOT	28.0 U/Lt	05 — 40
SERUM ALKALINE PHOSPHATASE	205 U/Lt	Adult :- 39 - 137 U/L
		New born : 95 - 368 U/L
		(<14 yrs) :- 58 - 460 IU/L
SERUM PROTEIN		
PROTEIN	7.3 gm/dl	6.0 — 8.0
ALBUMIN	3.5 gm/dl	3.7 — 5.3
GLOBULIN	3.8 gm/dl	2.3 — 3.6
A : G RATIO	0.92	1.0 — 2.3
		a



Dr. T.K. Chakraverti M.B.B.S. M.D. (Microbiology) Reg. No.-35997/06



LAB TECHNICIAN



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#### **IMMUNOLOGY EXAMINATION**

Investigation Name	Result	Reference Range
	THYROID PROFILE	Ω.
3	0.97 ng/ml	0.52 –1.90 ng/ml.
4	9.10 μg/dL	M- 4.4 – 10.8 μg/dL.
		F – 4.8 – 11.6 μg/dL.
SH	1.65 µIU/ml	0.30 - 6.02 μ <u>Ι</u> U/ml.

Method: - Enhanced Pulse Chemiluminescence Assay by Lumax
Quality Control: - by appropriate lyphochek Immunoassay Plus Control(BIO-RAD, U.S.A).

The guidelines for pregnancy related reference ranges for T3,T4 & TSH:

Levels in Pregnancy	Total T3 (ng/ml)	Total T4 (µg/dL)	TSH (µIU/ml)
1 <sup>St</sup> Trimester	0.52 -1.90	6.6 - 12.4	0.1 - 2.5
2 <sup>nd</sup> Trimester	0.52 - 1.90	6.6 - 15.5	0.2 - 3.0
3 <sup>rd</sup> Trimester	0.52 - 1.90	6.6-15.5	0.3 - 3.0

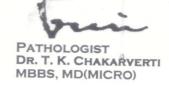
## The guidelines for age related reference ranges of T3,T4 & TSH:

AGE	TOTAL T3 (ng/ml)	TOTAL T4 (µg/dL)	TSH (μIU/ml)
Premature Infants			0.8 - 5.2
CORD BLOOD	0.4 - 1.3	6.0 - 13.1	1.0 - 17.4
1 - 2 days	0.8 - 2.6	10.7 - 25.8	1.0 - 17.4
3 - 30 days	0.7 - 2.0	7.8 - 19.7	1.7 - 9.1
1 - 12 Months	1.0 - 2.3	5.4 - 13.8	0.8 - 9.1
1 - 7 years	1.2 - 2.0	5.3 - 12.3	0.8 - 8.2
7 - 13 years	1.1 - 2.0	6.0 - 11.1	0.7 - 7.0
13 - 18 years	1.0 - 1.8	4.9 - 10.7	0.7 - 5.7

Patna-07 PAHAR

LAB TECHNICIAN

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: 2324676 /

Age / Sex

: 41 Years/Male

**Bed No** 

://

#### **HAEMATOLOGY EXAMINATION**

Investigation Name	Result	Reference Range
GLYCOCYLATED HAEMOGLOBIN	5.80 %	
(HbA1c)	3.00 /0	Normal < 8.0 %  Good Control: 8.0 – 9.0 %
		Fair Control : 9.0 – 10.0 %
		Poor Control: > 10.0 %

#### **INTERPRETATION:**

HbA1c is an indicator of glycaemic control .HbA1c has been thought to represent average glycaemia over the past 6-8 wks.A pt. in stable control will have 50 % of their HbA1c formed in the month before sampling, 25 % is in the month before that & the remaining 25 % in the month 2-4.LEVEL OF HbA1c : < 5.3 % :- may represent an acute & chronic possibility for severe hypoglycaemia events < 5.4-5.7 % :-Represents a very good level of diabetic control (caution should be used to avoid hypoglycaemia).5.8-7.2 % :- Represents a good level of diabetes control (continue to monitor frequently and strive for a reduction of HbA1c level to between 5.8 - 7.0 ) .- 8.0 % :- Represents a fair level of diabetes control (Suggest physician//patient / evalution to determine where improvement can be made. >8.0 % :- Represents a sub-optmal level of diabetic control. (This level represents a significant increase in the risk for developing possible chronic complications). Effective intervention is strongly suggested, along with specific diagnostic tests.



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PATHOLOGIST |
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#### **HAEMATOLOGY EXAMINATION**

**Investigation Name** 

Result

Reference Range

\* PERIPHERAL BLOOD PICTURE, WHOLE BLOOD Microscopy

viicroscopy

RBCs are predomiminantly normocytic normochromic. No nucleated cell is noted.

Anisocytosis +

Poikilocytosis +

Reticulocyte count is normal, indicating normal bone marrow response.

WBC: Normal in count and morphology. No immature cell is noted.

PLATELETs are adequate in count.

IMPRESSION: Normal Study

-: \$ End of Report \$:-

Patna-07

Dr. T.K. Chakravers M.B.B.S. M.D. (Microbiology) Reg. No.-35997/06

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Reporting Date/Time29/08/2023/ 3:10:52 PM

**Uhid/Lab ID** 

: 2324676 /

Age / Sex

: 41 Years/Male

**Bed No** 

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#### **CLINICAL PATHOLOGY EXAMINATION**

#### **REPORT ON THE EXAMINATION OF URINE**

#### **PHYSICAL EXAMINATION**

Volume 20 ml
Colour Straw
Appearance Clear
Sediments Nil

#### **CHEMICAL EXAMINATION**

Specific Gravity 1.025
PH 6.5
SUGAR Nil
ALBUMIN Nil

#### MICROSCOPIC EXAMINATON

Erythrocytes / RBC Nil /hpf Pus Cells 2-4 /hpf **Epithelial Cells** 1-2 /hpf Casts Nil Crystals Nil YEAST CELLS Absent MICRO-ORGANISM Absent Others Nil

-: \$ End of Report \$:-



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RUPESH RANJAN PRASAD SINGH 41/M. 2023.

Refd. by Star Hospital.

AUGUST 29,

X-Ray Chest PA View:-

The lung fields are clear.

Both C P angles are clear.

The heart is normal.



