



724 / SIBABRATA SATAPATHY / 42 Yrs / M / 165 Cms / 85 Kg Date: 11-Nov-2023 Refd By : MEDIWHEEL Examined By:

| Stage         | Time  | Duration | Speed(mph) | Elevation | MEIs | Rate | % THR | BP     | RPP | PVC | Comments |
|---------------|-------|----------|------------|-----------|------|------|-------|--------|-----|-----|----------|
| Supine        | 00:23 | 0:23     | 00.0       | 00.0      | 01.0 | 078  | 44 %  | 110/74 | 085 | 00  |          |
| Standing      | 00:40 | 0:17     | 00.0       | 00.0      | 01.0 | 076  | 43 %  | 110/74 | 083 | 00  |          |
| HV            | 00:57 | 0:17     | 00.0       | 00.0      | 01.0 | 078  | 44 %  | 110/74 | 085 | 00  |          |
| ExStart       | 01:14 | 0:17     | 00.0       | 00.0      | 01.0 | 080  | 45 %  | 110/74 | 088 | 00  |          |
| BRUCE Stage 1 | 04:14 | 3:00     | 01.7       | 10.0      | 04.7 | 117  | 66 %  | 112/75 | 131 | 00  |          |
| BRUCE Stage 2 | 07:14 | 3:00     | 02.5       | 12.0      | 07.1 | 132  | 74 %  | 114/76 | 150 | 00  |          |
| PeakEx        | 09:57 | 2:43     | 03.4       | 14.0      | 09.9 | 160  | 90 %  | 115/77 | 184 | 00  |          |
| Recovery      | 10:27 | 0:30     | 01.1       | 00.0      | 04.2 | 152  | 85 %  | 115/77 | 174 | 00  |          |
| Recovery      | 10:57 | 1:00     | 01.1       | 00.0      | 01.2 | 138  | 78 %  | 115/76 | 158 | 00  |          |
| Recovery      | 12:57 | 3:00     | 00.0       | 00.0      | 01.0 | 108  | 61 %  | 114/75 | 123 | 00  |          |
| Recovery      | 15:08 | 5:11     | 00.0       | 00.0      | 01.0 | 106  | 60 %  | 113/74 | 119 | 00  |          |

**FINDINGS :**

Exercise Time : 08:43  
 Max HR Attained : 160 bpm 90% of Target 178  
 Max BP Attained : 115/77  
 Max WorkLoad Attained : 9.9 Good response to induced stress

Test End Reasons : Test Complete

**REPORT :**

TMT is Negative

Dr. M. HOTA  
M.B.B.S.  
REGD No. 6993



**ZENA HEALTHCARE**

SAHIDNAGAR, BHUBANESWAR

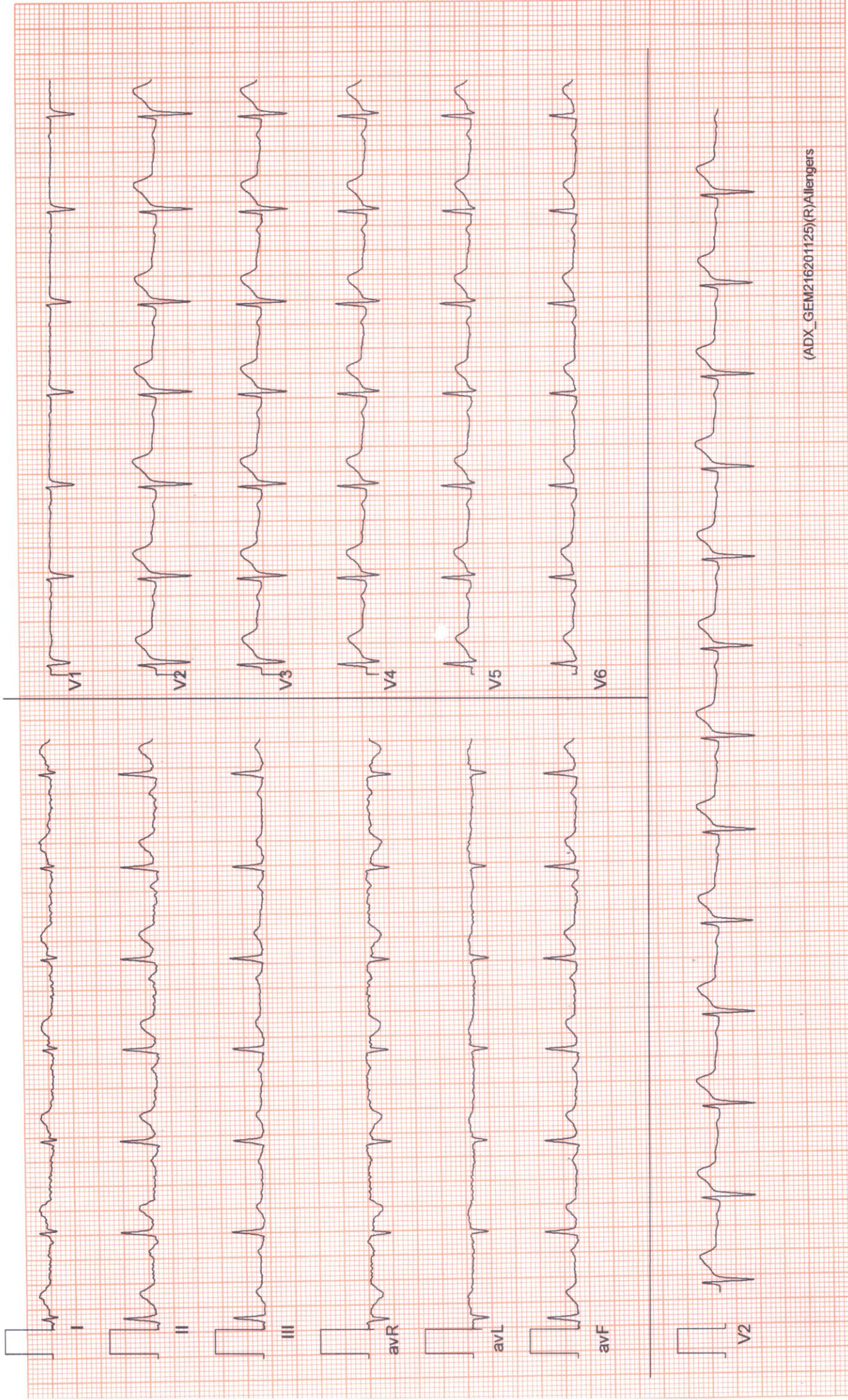
724 / SIBABRATA SATAPATHY / 42 Yrs / Male / 165 Cm / 85 Kg

**6 x 2 + Rhythm**  
BRUCE:Supine(0:23)



Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 78 Target HR : 44% of 178 BP : 110/74

ExTime : 00:00 0.0 mph/0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

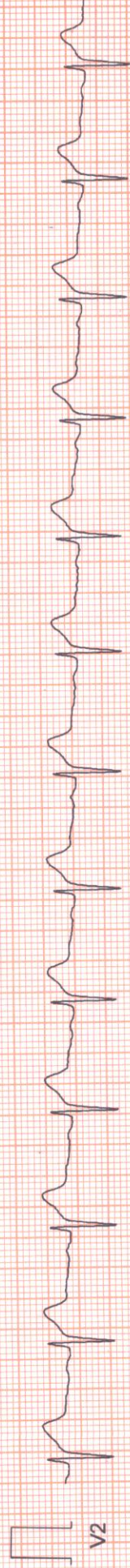
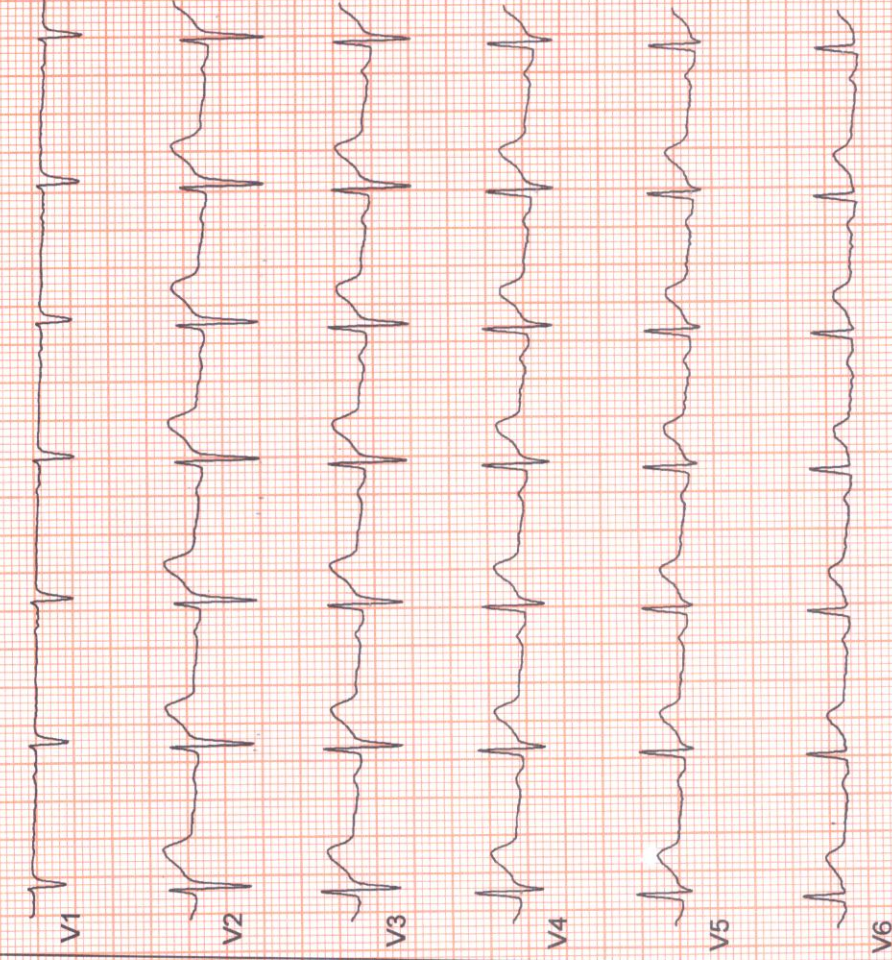
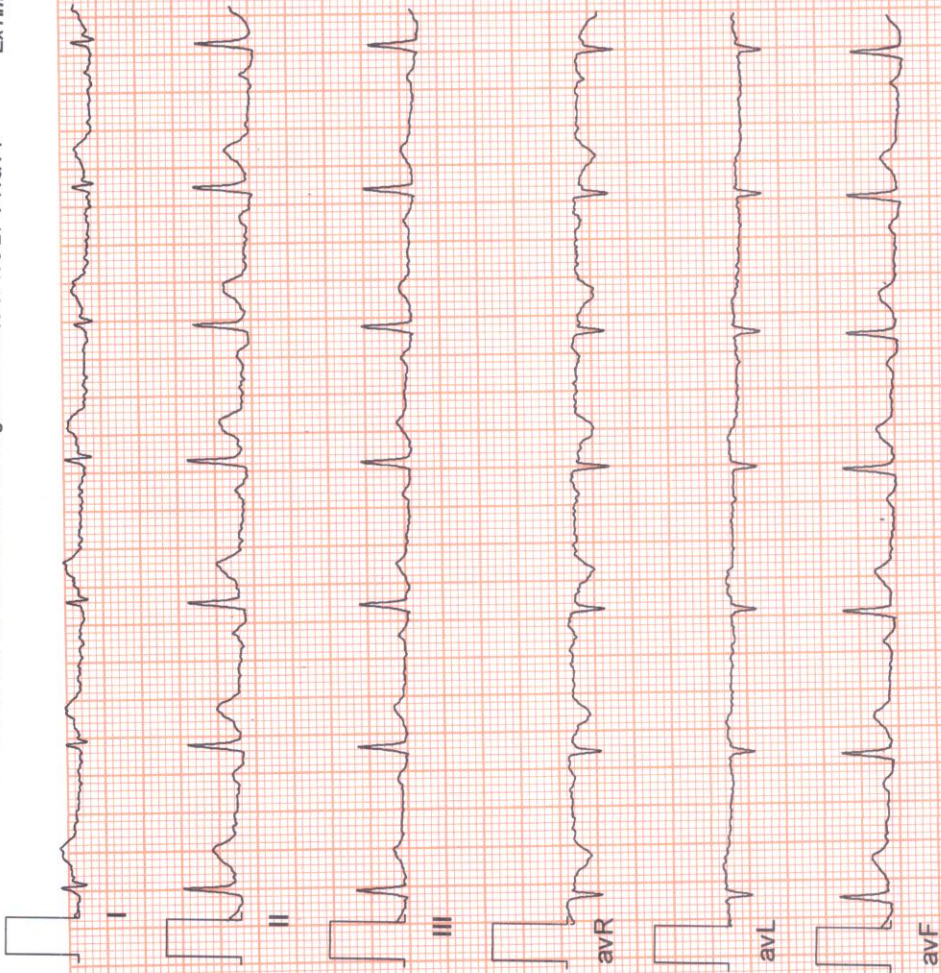






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 76 Target HR : 43% of 178 BP : 110/74

ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

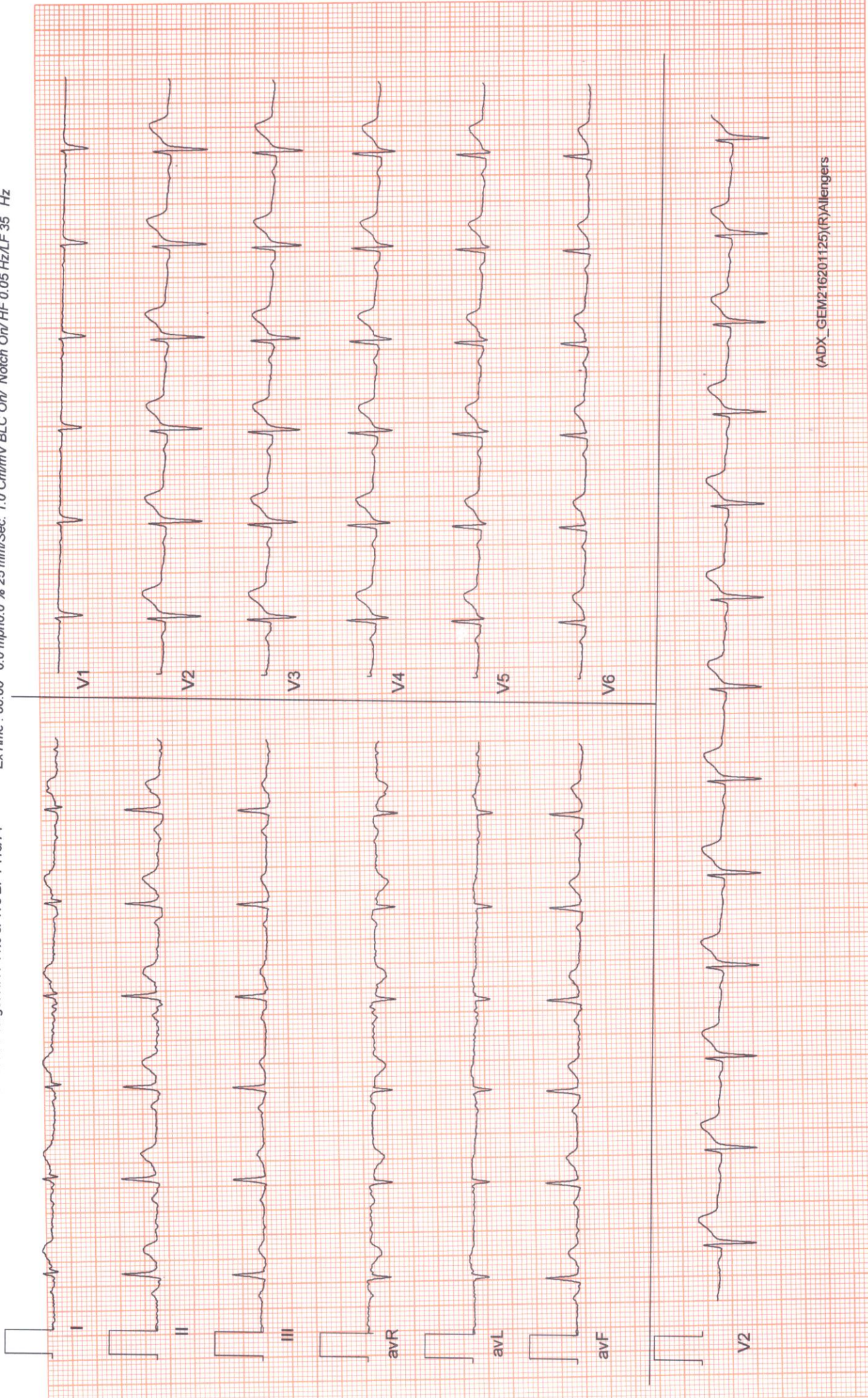






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 78 Target HR : 44% of 178 BP : 110/74

ExTime : 00:00 0.0 mph/0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ HF 0.05 Hz/LF 35 Hz

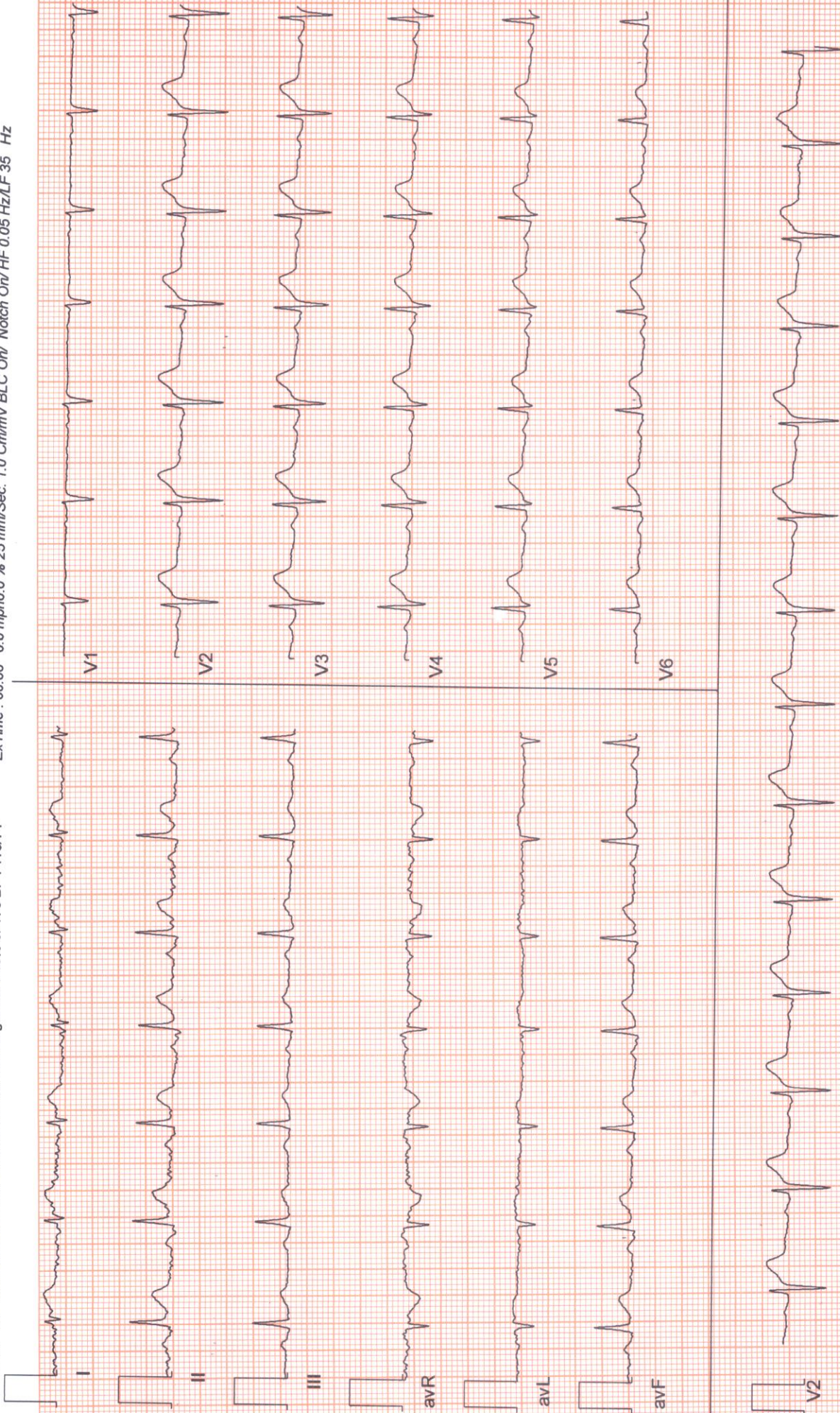






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 80 Target HR : 45% of 178 BP : 110/74

ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

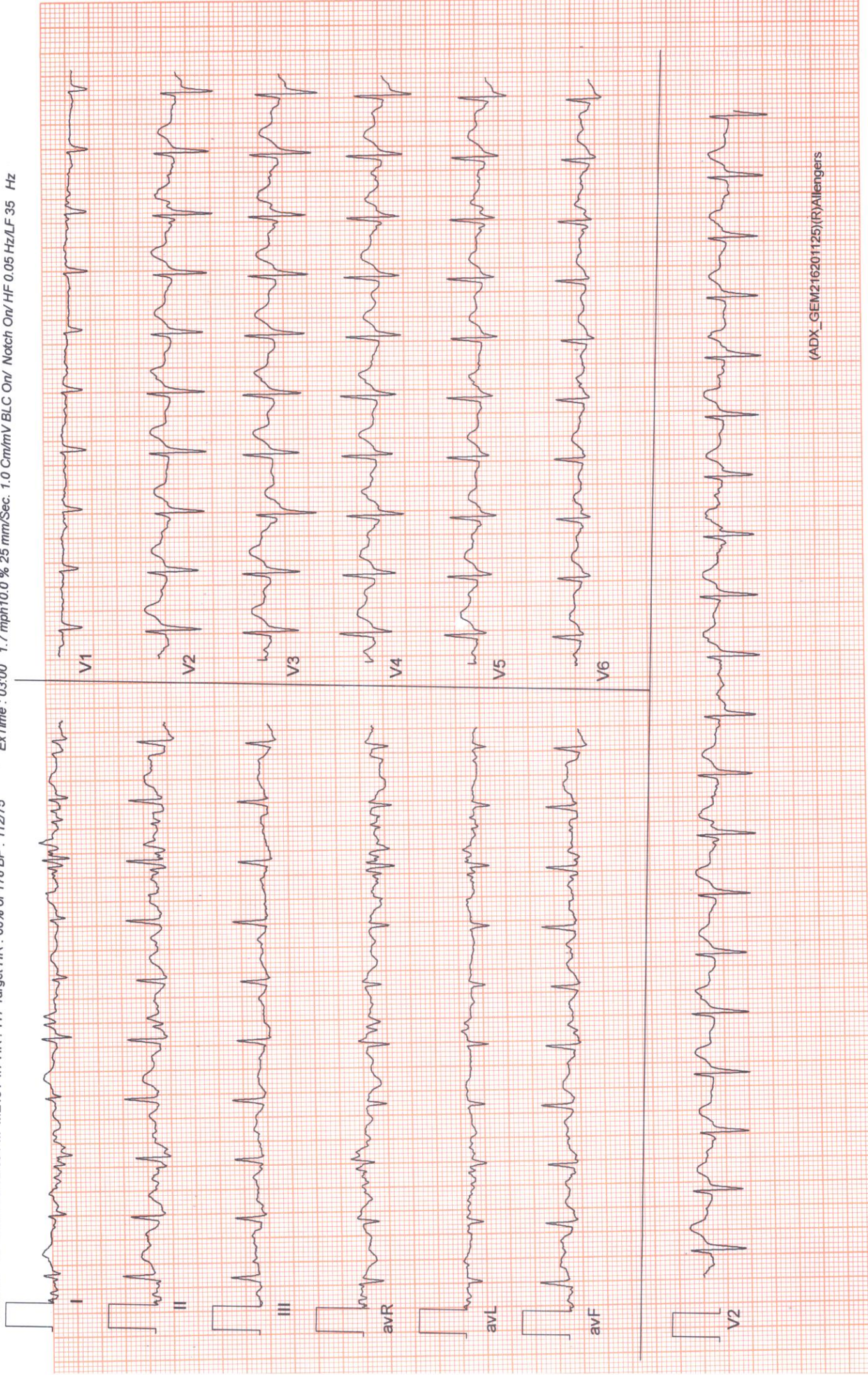






Date: 11 - 11 - 2023 12:02:59 PM METs : 4.7 HR : 117 Target HR : 66% of 178 BP : 112/75

ExTime : 03:00 1.7 mph 10.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

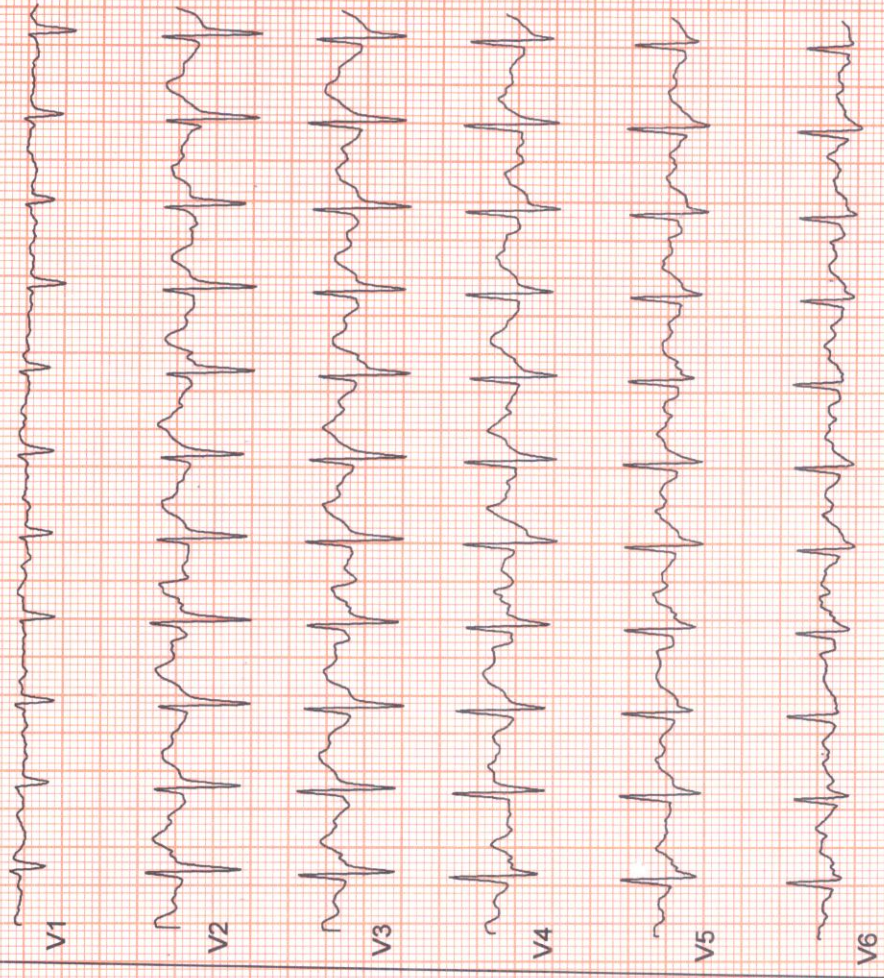
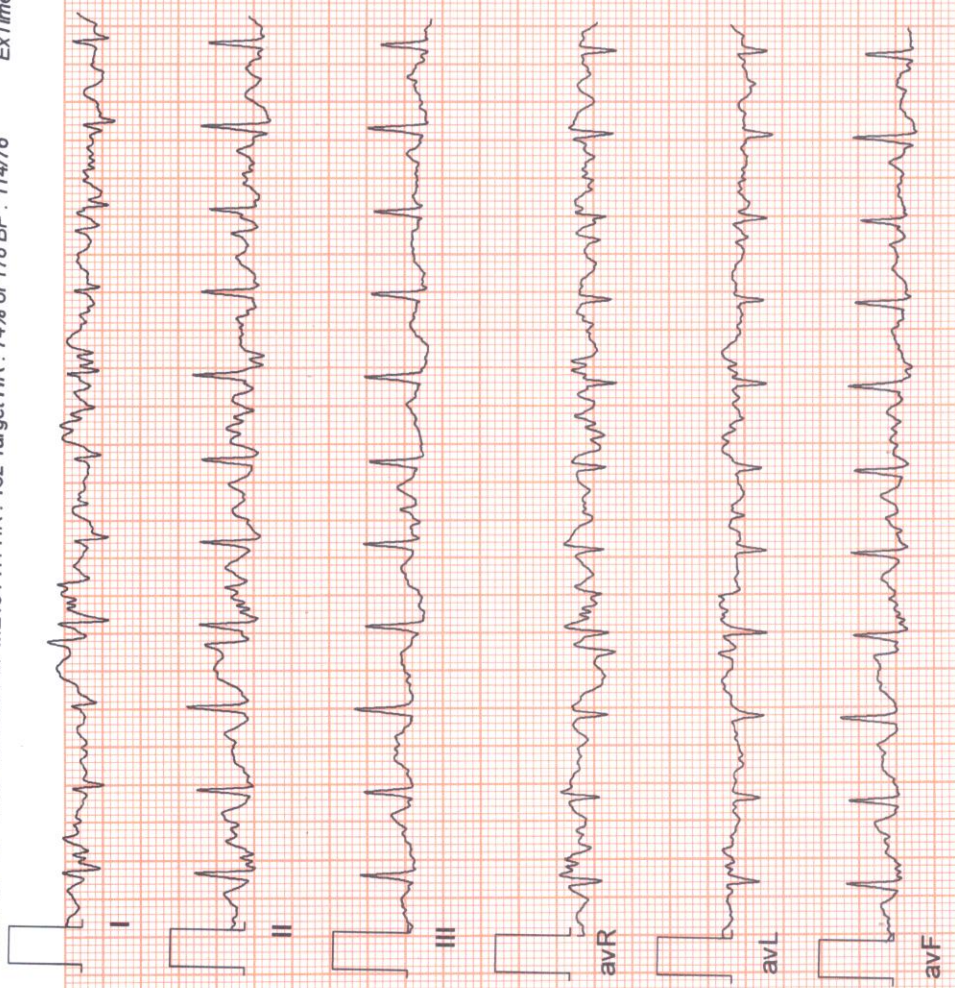






Date: 11 - 11 - 2023 12:02:59 PM METs : 7.1 HR : 132 Target HR : 74% of 178 BP : 114/76

ExTime : 06:00 2.5 mph 12.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





**ZENA HEALTHCARE**

SAHIDNAGAR, BHUBANESWAR

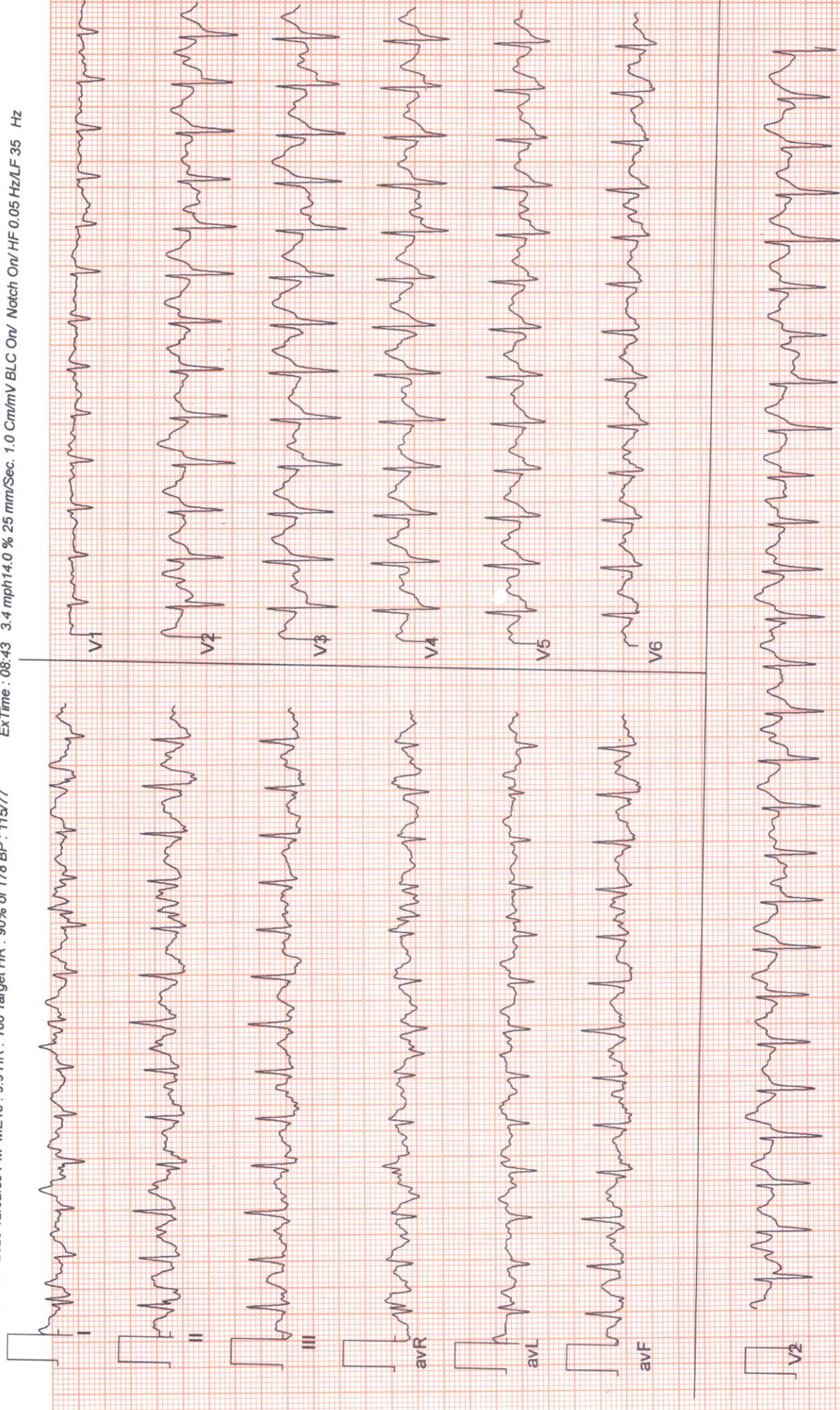
724 / SIBABRATA SATAPATHY / 42 Yrs / Male / 165 Cm / 85 Kg

**6 x 2 + Rhythm**  
PeakEX



Date: 11 - 11 - 2023 12:02:59 PM METs : 9.9 HR : 160 Target HR : 90% of 178 BP : 115/77

ExTime : 08:43 3.4 mph 14.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

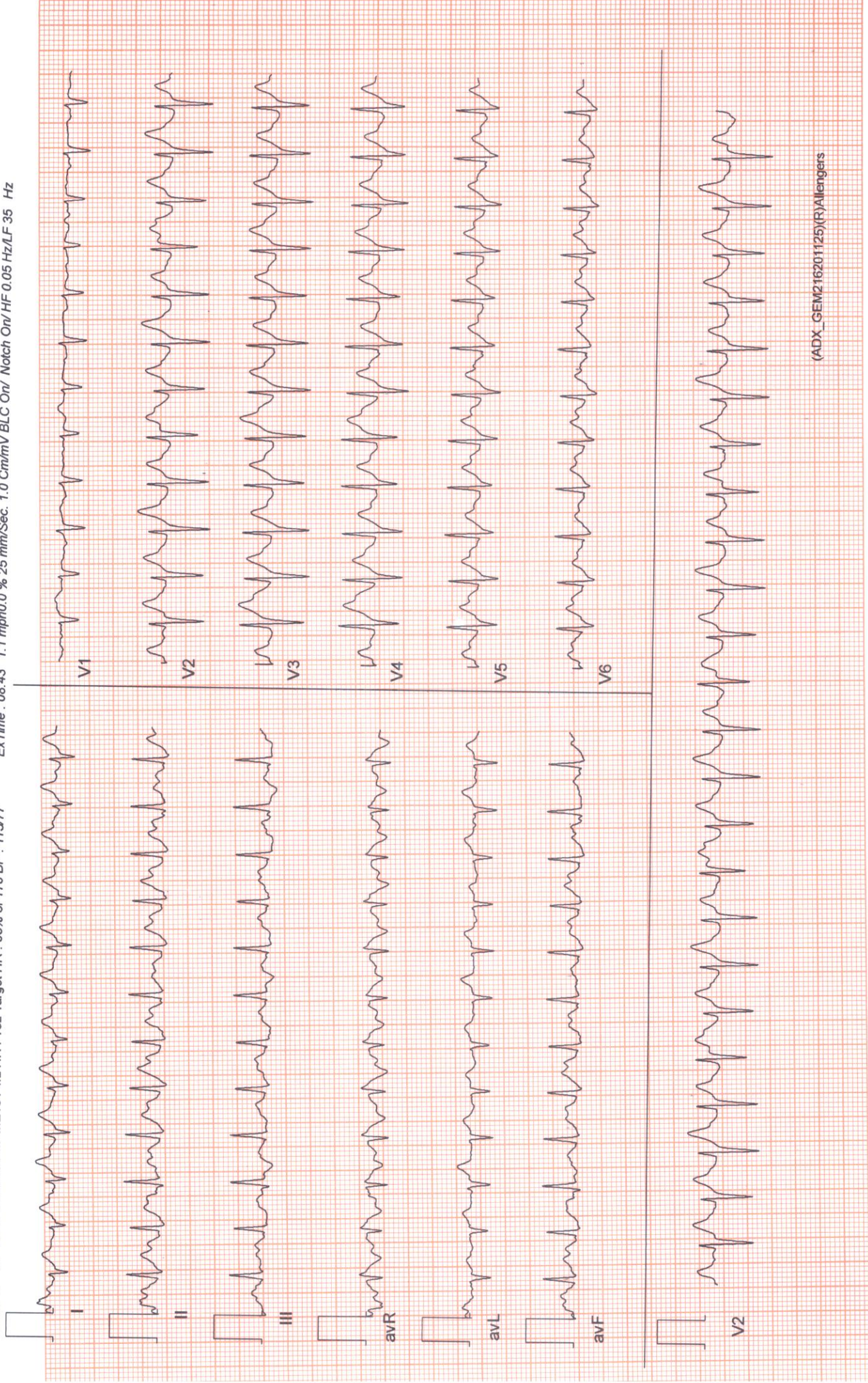






Date: 11 - 11 - 2023 12:02:59 PM METs : 4.2 HR : 152 Target HR : 85% of 178 BP : 115/77

ExTime : 08:43 1.1 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

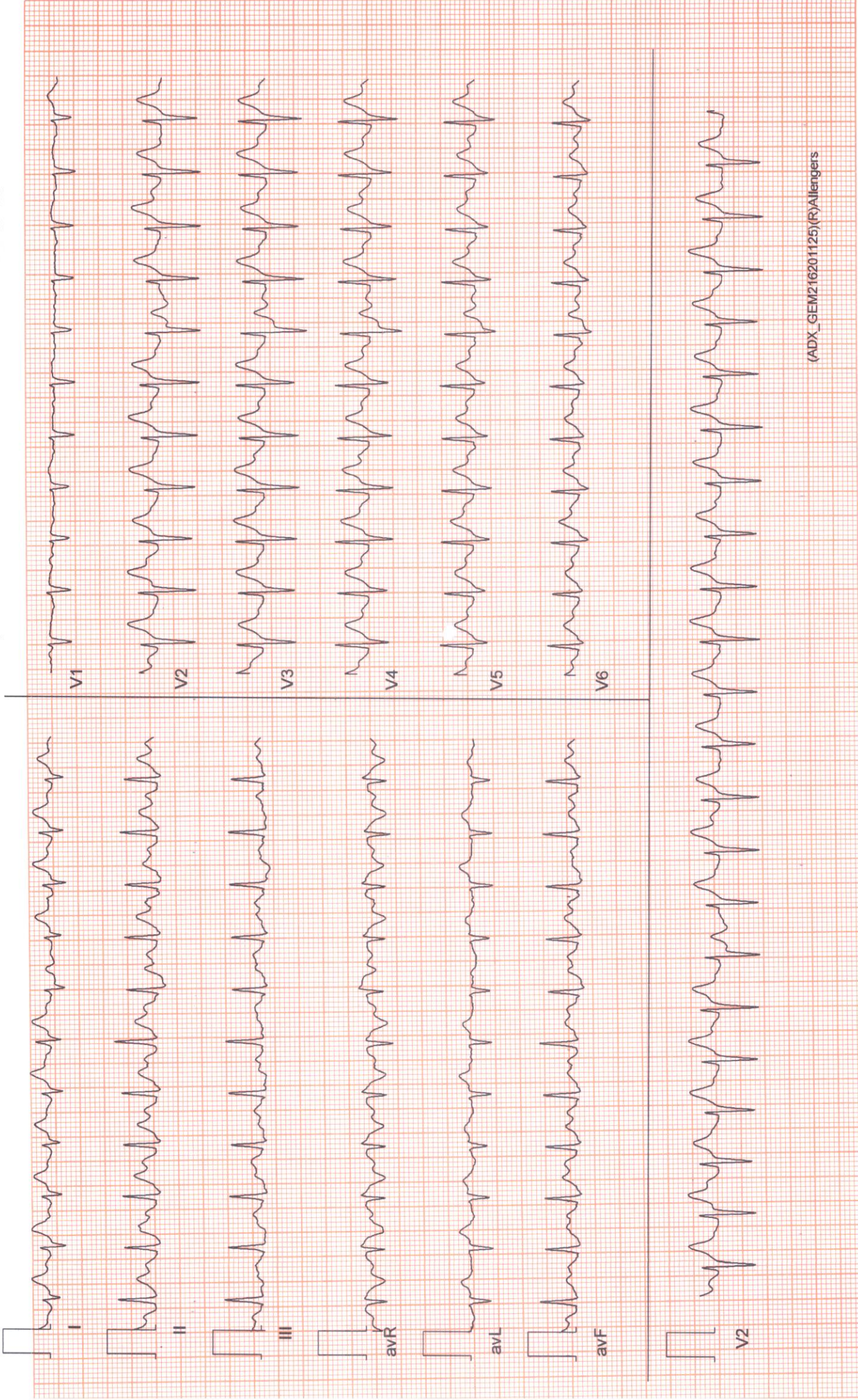






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.2 HR : 138 Target HR : 78% of 178 BP : 115/76

ExTime : 08:43 1.1 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

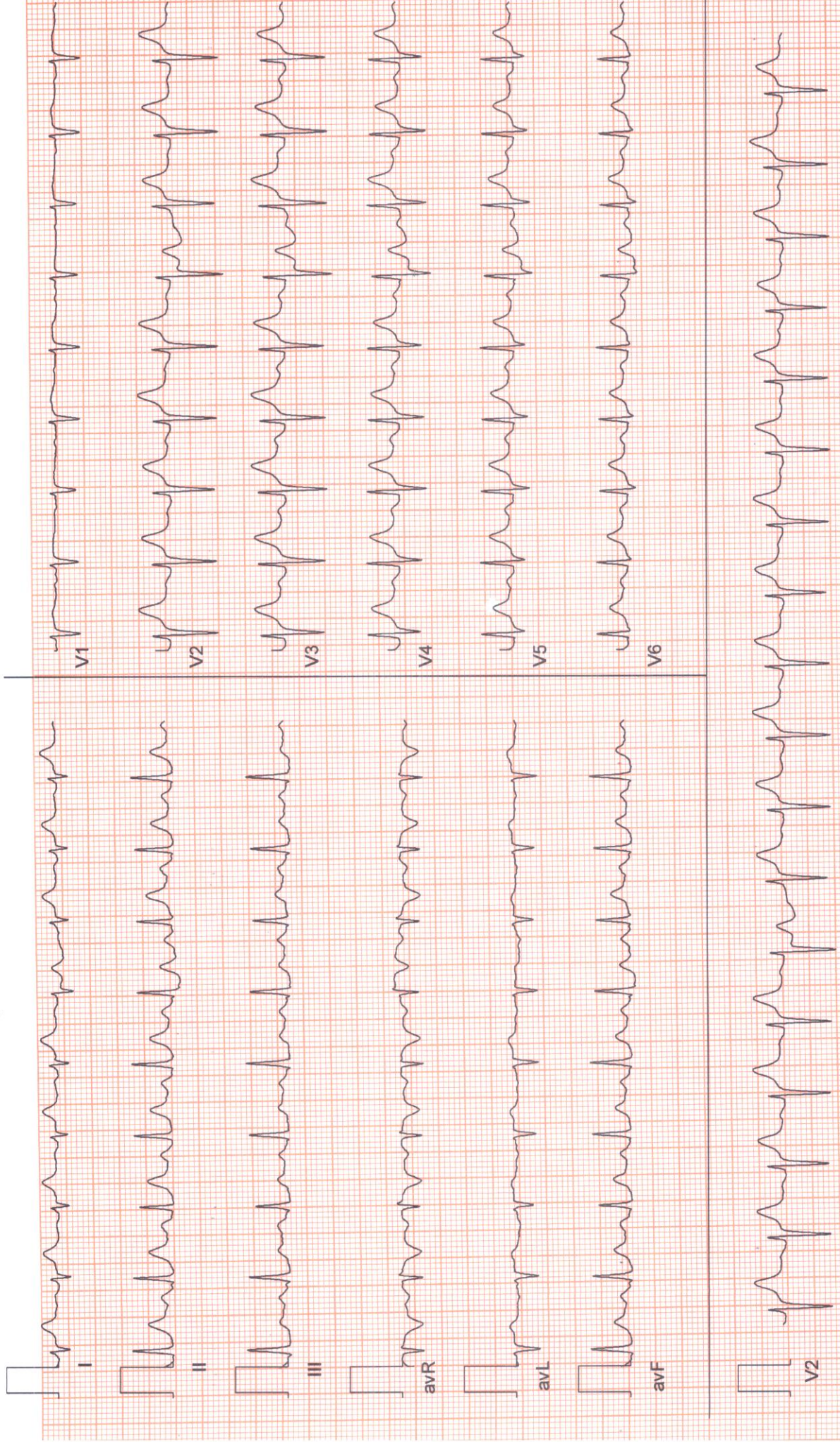






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 108 Target HR : 61% of 178 BP : 114/75

ExTime : 08:43 0.0 mph/0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ HF 0.05 Hz/LF 35 Hz

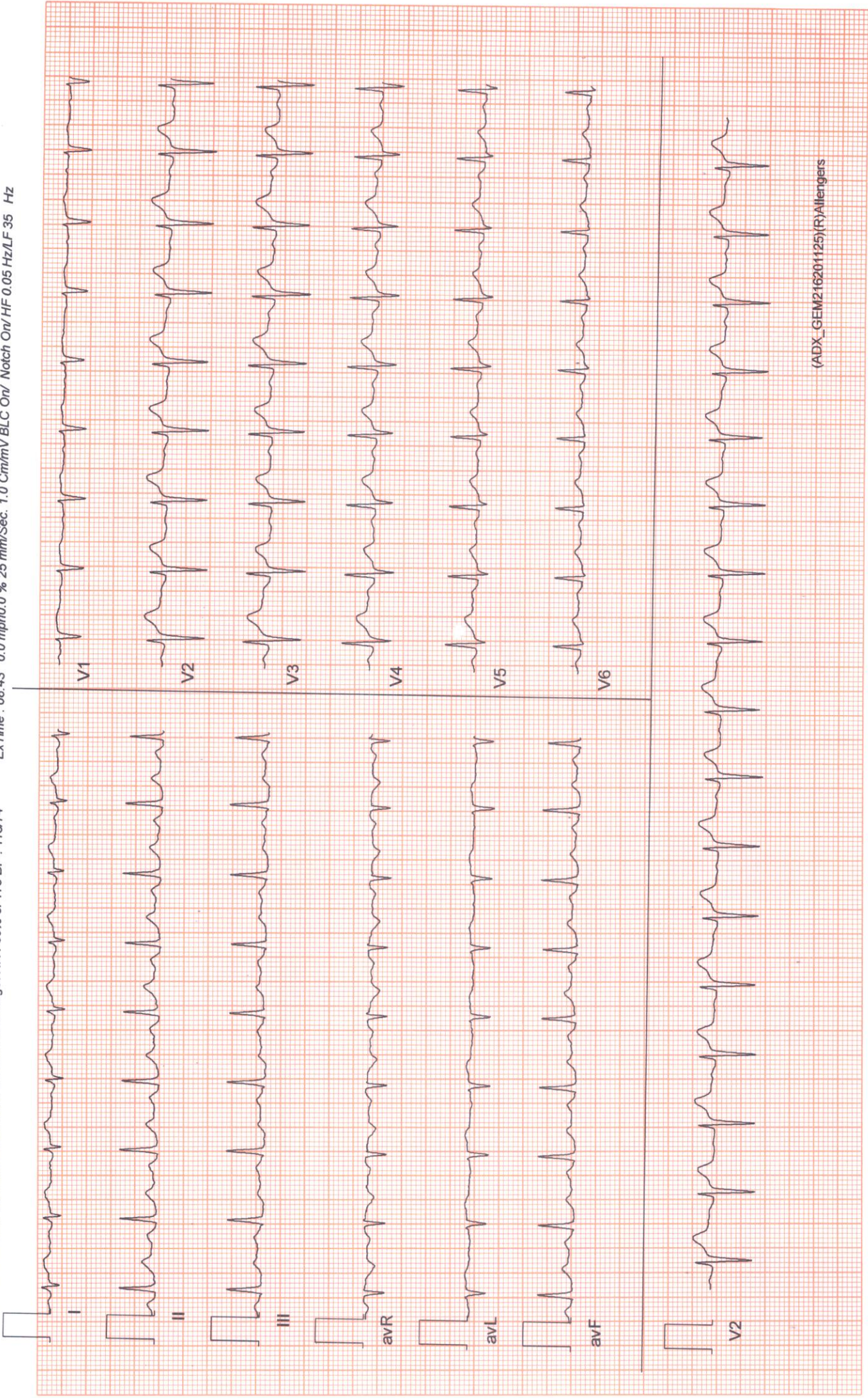






Date: 11 - 11 - 2023 12:02:59 PM METs : 1.0 HR : 106 Target HR : 60% of 178 BP : 113/74

ExTime : 08:43 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





ID 1146 CASE

AGE 42Y M D

Cms K9

SIBABRATA SATAPATHY  
MALE

11/11/2023 11 24 50  
ZENA HEAL THCARE  
PLOT -119, SAHIDNAGAR, BHUBANESWAR

RATE 72 bpm SINUS RHYTHM

R-R 827 ms

P-R 122 ms

QRS 76 ms

QT 356 ms

QTc 377 ms

P 42°

QRS 65°

T 41°

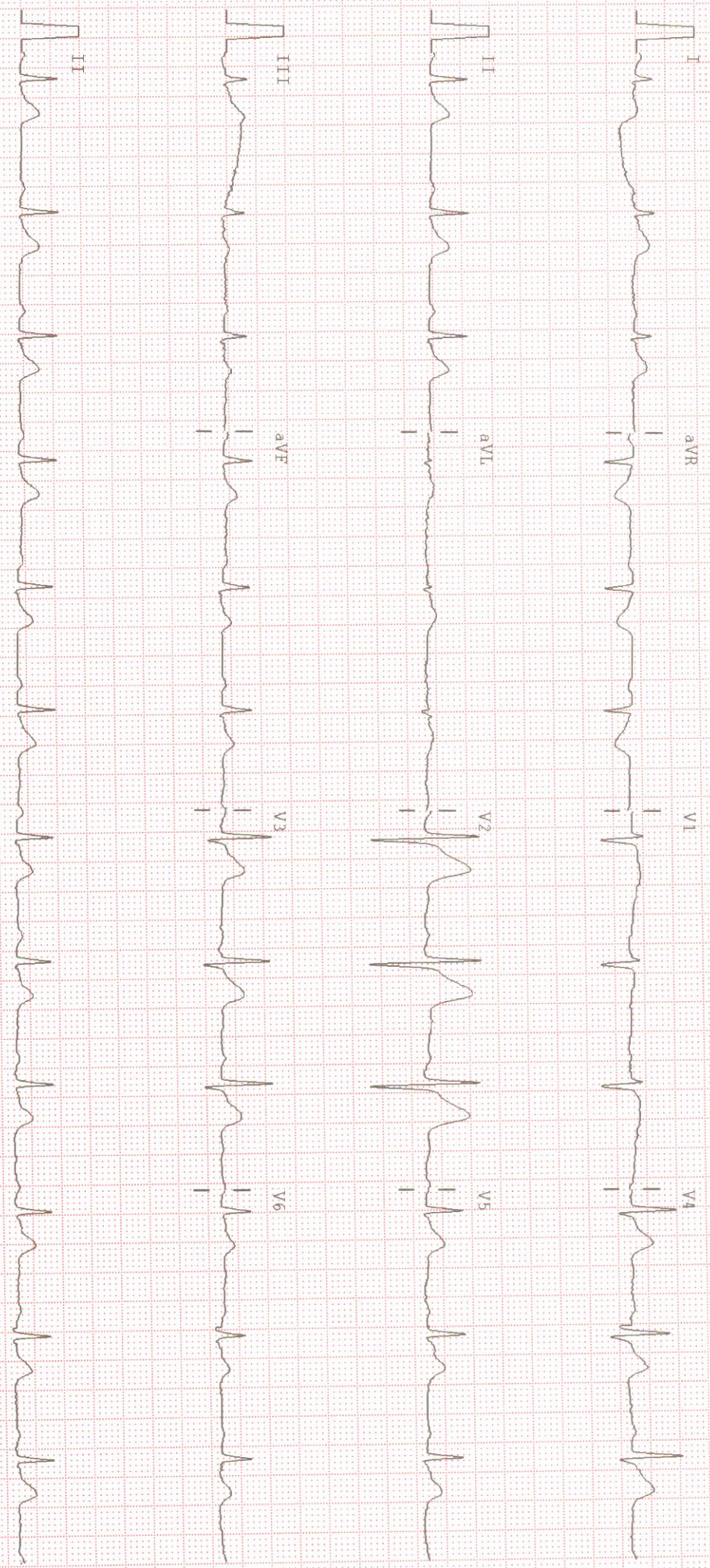
NORMAL ECG

12 SL: REPORT FORMAT: 3x4+1L SQ

REF:

DR:

DR. MAKHOTA  
M.B.S.  
REGD No. 6993







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NAME:-SIBABRATA SATAPATHY  
AGE:-42YRS

REFERRAL:-MEDI-WHEEL

Patient ID:- 05

DATE :-11.11.2023  
SEX :-MALE

CHEST X-RAY PA VEIW SHOWS.

- Both side lung fields are clear.
- Trachea within normal limit.
- Both costophrenic cardiophrenic angle are clear.
- Cardiac shadow within normal limit.
- Mediastinum in position

IMPRESSION:-NORMAL STUDY.

Dr.Bhagaban Pradhan  
M.D.(Radio diagnosis)

ConsultantRadiologist





**Patient Name :** SIBABRATA SATAPATHY

**Age / Gender :** 42 years / Male

**Patient ID :** 18823

**Referral :** MEDI WHEEL

**Collection Time :** 11/11/2023, 11:29 AM

**Reporting Time :** 11/11/2023, 07:18 PM

**Sample ID :**



21661

| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

**HbA1c, Glycosylated Hemoglobin**

|   |        |   |       |
|---|--------|---|-------|
| <b>HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD</b> | 5.67   |   | %     |
| Method : (HPLC, NGSP certified)               |        |   |       |
| Estimated Average Glucose :                   | 116.03 | - | mg/dL |

**Interpretation**

|  |  |
|--|--|
| 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 glycemic 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 |

**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 glycemic control as compared to blood and urinary glucose determinations.

**ADA criteria for correlation between HbA1c & Mean plasma glucose levels.**

| HbA1c(%) | Mean Plasma Glucose (mg/dL) |
|----------|-----------------------------|
| 6        | 126                         |
| 7        | 154                         |
| 8        | 183                         |
| 9        | 212                         |

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**Age / Gender :** 42 years / Male

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|------------------|----------|-----------------|------|
| 10               | 240      |                 |      |
| 11               | 269      |                 |      |
| 12               | 298      |                 |      |

\*\*END OF REPORT\*\*

Lab technician

**Dr. Kundan Kumar Sahoo**  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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**Collection Time :** 11/11/2023, 11:29 AM

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**Sample ID :**



21661

| Test Description   | Value(s) | Reference Range   | Unit  |
|--|----------|---|-------|
| <b>Lipid Profile</b>                                       |          |   |       |
| Cholesterol-Total<br>Method : Spectrophotometry            | 186.94   | Desirable level   < 200<br>Borderline High   200-239<br>High   >or = 240  | mg/dL |
| Triglycerides<br>Method : Serum, Enzymatic, endpoint       | 147.88   | Normal: < 150<br>Borderline High: 150-199<br>High: 200-499<br>Very High: >= 500                                 | mg/dL |
| HDL Cholesterol<br>Method : Serum, Direct measure-PEG      | 42.3     | Normal: > 40<br>Major Risk for Heart: < 40  | mg/dL |
| LDL Cholesterol<br>Method : Enzymatic selective protection | 115.06   | Optimal < 100<br>Near / Above Optimal 100-129<br>Borderline High 130-159<br>High 160-189<br>Very High >or = 190 | mg/dL |
| VLDL Cholesterol<br>Method : Serum, Enzymatic              | 29.58    | 6 - 38  | mg/dL |
| CHOL/HDL Ratio<br>Method : Serum, Enzymatic                | 4.42     | 3.5 - 5.0   |       |
| LDL/HDL Ratio<br>Method : Serum, Enzymatic                 | 2.72     | 2.5 - 3.5   |       |

**Note:**

8-10 hours fasting sample is required.

\*\*END OF REPORT\*\*

Lab/technician

**Dr.Kundan Kumar Sahoo**  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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**Age / Gender :** 42 years / Male

**Patient ID :** 18823

**Referral :** MEDI WHEEL

**Collection Time :** 11/11/2023, 11:29 AM

**Reporting Time :** 11/11/2023, 03:26 PM

**Sample ID :**



21661

| Test Description                  | Value(s)     | Reference Range | Unit                |
|-----------------------------------|--------------|-----------------|---------------------|
| <b>Complete Blood Count</b>       |              |                 |                     |
| Hemoglobin (Hb)                   | 15.6         | 13.5 - 18.0     | gm/dL               |
| Erythrocyte (RBC) Count           | 5.57         | 4.7 - 6.0       | mil/cu.mm           |
| Packed Cell Volume (PCV)          | 50.7         | 42 - 52         | %                   |
| Mean Cell Volume (MCV)            | 91.02        | 78 - 100        | fL                  |
| Mean Cell Haemoglobin (MCH)       | 28.01        | 27 - 31         | pg                  |
| Mean Corpuscular Hb Concn. (MCHC) | <b>30.77</b> | 32 - 36         | g/dL                |
| Red Cell Distribution Width (RDW) | 11.8         | 11.5 - 14.0     | %                   |
| Total Leucocytes (WBC) Count      | 8500         | 4000-10000      | cell/cu.mm          |
| Neutrophils                       | 61           | 40 - 80         | %                   |
| Lymphocytes                       | 32           | 20 - 40         | %                   |
| Monocytes                         | 02           | 2 - 10          | %                   |
| Eosinophils                       | 05           | 1 - 6           | %                   |
| Basophils                         | <b>00</b>    | 1-2             | %                   |
| Platelet Count                    | <b>149</b>   | 150 - 450       | 10 <sup>3</sup> /ul |
| Mean Platelet Volume (MPV)        | <b>12.9</b>  | 7.2 - 11.7      | fL                  |
| PCT                               | <b>0.19</b>  | 0.2 - 0.5       | %                   |
| PDW                               | <b>19.2</b>  | 9.0 - 17.0      | %                   |

### Blood Group ABO & Rh Typing, Blood

Blood Group (ABO typing)

Method : Manual-Hemagglutination

"O"

RhD Factor (Rh Typing)

Method : Manual hemagglutination

Positive

\*\*END OF REPORT\*\*

Lab technician

**Dr.Kundan Kumar Sahoo**  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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**Collection Time :** 11/11/2023, 11:29 AM

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**Sample ID :**



| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

**PSA (Prostate Specific Antigen)-Total**

|                                 |     |       |       |
|---------------------------------|-----|-------|-------|
| PSA- Prostate Specific Antigen* | 0.2 | 0 - 4 | ng/mL |
|---------------------------------|-----|-------|-------|

**INTERPRETATION :**

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

**Note:** Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

**Ref:** Arch Pathol Lab Med—Vol 141, November 2017

**ESR, Erythrocyte Sedimentation Rate**

|   |   |        |       |
|---|---|--------|-------|
| <b>ESR - Erythrocyte Sedimentation Rate</b> | 7 | 0 - 15 | mm/hr |
|---|---|--------|-------|

Method : EDTA Whole Blood, Manual Westergren

**Interpretation:**

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- 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 and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

\*\*END OF REPORT\*\*

Lab technician

*Wsk*  
**Dr.Kundan Kumar Sahoo**  
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21661

| Test Description  | Value(s) | Reference Range | Unit  |
|---|----------|-----------------|-------|
| <b><u>Glucose, Fasting (FBS)</u></b>                      |          |                 |       |
| Glucose fasting<br>Method : Fluoride Plasma-F, Hexokinase | 94.98    | 75 - 115        | mg/dL |
| <b><u>Glucose, Post Prandial (PP)</u></b>                 |          |                 |       |
| Blood Glucose-Post Prandial<br>Method : Hexokinase        | 113.6    | 70 - 140        | mg/dL |
| <b><u>Urea, Serum</u></b>                                 |          |                 |       |
| Urea<br>Method : Uricase                                  | 27.3     | 10 - 50         | mg/dL |
| <b><u>Creatinine</u></b>                                  |          |                 |       |
| Creatinine<br>Method : Serum, Jaffe                       | -        | 0.60 - 1.30     | mg/dL |
| <b><u>Uric acid, Serum</u></b>                            |          |                 |       |
| Uric Acid<br>Method : Uricase, Colorimetric               | 3.62     | 3.4 - 7.0       | mg/dL |

\*\*END OF REPORT\*\*

Lab technician

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**Sample ID :**



| Test Description   | Value(s)    | Reference Range | Unit  |
|--|-------------|-----------------|-------|
| <b>LFT, Liver Function Test</b>  |             |                 |       |
| Bilirubin - Total<br>Method : Serum, Jendrassik Grof                                 | 0.64        | 0.00 - 1.00     | mg/dL |
| Bilirubin - Direct<br>Method : Serum, Diazotization                                  | 0.19        | 0.00 - 0.20     | mg/dL |
| Bilirubin - Indirect<br>Method : Serum, Calculated                                   | 0.45        | 0.10 - 0.80     | mg/dL |
| SGOT<br>Method : Serum, UV with P5P, IFCC 37 degree                                  | 16.3        | 8 - 33          | U/L   |
| SGPT<br>Method : Serum, UV with P5P, IFCC 37 degree                                  | 29.1        | 3 - 35          | U/L   |
| GGT-Gamma Glutamyl Transpeptidase<br>Method : Serum, G-glutamyl-carboxy-nitroanilide | 8.12        | < 55            | U/L   |
| Alkaline Phosphatase<br>Method : PNPP-AMP Buffer/Kinetic                             | 118.3       | 53-128          | U/L   |
| Total Protein<br>Method : Serum, Biuret, reagent blank end point                     | 6.88        | 6.60 - 8.70     | g/dL  |
| Albumin<br>Method : Serum, Bromocresol green   | 3.57        | 3.50 - 5.30     | g/dL  |
| Globulin<br>Method : Serum, EIA  | 3.31        | 2.00-3.50       | g/dL  |
| A/G Ratio<br>Method : Serum, EIA   | <b>1.08</b> | 1.2 - 2.2       |       |

\*\*END OF REPORT\*\*

Lab technician

**Dr. Kundan Kumar Sahoo**  
CONSULTANT PATHOLOGIST /  
MICROBIOLOGIST

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**Zena Healthcare Services**

Plot No. 119, Opp. Water tank Lane, Near Police Phandi, Saheed Nagar, Bhubaneswar-07  
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Regd. No. : 1834

# ZENA HEALTHCARE SERVICES

(A Unit of Zena Enterprises)

**Patient Name :** SIBABRATA SATAPATHY

**Age / Gender :** 42 years / Male

**Patient ID :** 18823

**Referral :** MEDI WHEEL

**Collection Time :** 11/11/2023, 11:29 AM

**Reporting Time :** 11/11/2023, 07:21 PM

**Sample ID :**



| Test Description                       | Value(s) | Reference Range | Unit   |
|--|----------|-----------------|--------|
| <b>Thyroid Profile ( T3, T4, TSH )</b> |          |                 |        |
| T3-Total<br>Method : CLIA              | 0.95     | 0.87 - 2.73     | ng/dL  |
| T4-Total<br>Method : CLIA              | 7.23     | 6.09 - 12.23    | ug/dL  |
| TSH-Ultrasensitive<br>Method : CLIA    | 0.89     | 0.45 - 4.50     | uIU/mL |

**Interpretation**

| TSH                    | T3                     | T4                     | Suggested Interpretation for the Thyroid Function Tests Pattern  |
|------------------------|------------------------|------------------------|--|
| Raised                 | Within range           | Within range           | Raised Within Range Within Range .Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism. Intermittent L4 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness" |
| Raised                 | Decreased              | Decreased              | Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis"  |
| Raised or within range | Raised                 | Raised or within range | Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent L4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics.   |
| Decreased              | Raised or within range | Raised or within range | Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion'   |
| Decreased              | Decreased              | Decreased              | Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"  |
| Decreased              | Raised                 | Raised                 | Primary Hyperthyroidism (Graves' disease). Multinodular goitre, Toxic nodule •Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"  |
| Decreased Within Rang  | Raised                 | Within range           | T3 toxicosis •Non-Thyroidal illness  |
| Within range           | Decreased              | Within range           | Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%.  |

\*\*END OF REPORT\*\*

Lab technician

*K. Sahoo*  
**Dr. Kundan Kumar Sahoo**  
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Regd. No. : 1834

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**Age / Gender :** 42 years / Male

**Patient ID :** 18823

**Referral :** MEDI WHEEL

**Collection Time :** 11/11/2023, 11:29 AM

**Reporting Time :** 11/11/2023, 07:27 PM

**Sample ID :**



| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

**Urine(R/M) Routine Examination of Urine**

**General Examination**

|                           |             |               |  |
|---------------------------|-------------|---------------|--|
| Colour                    | PALE YELLOW | Pale Yellow   |  |
| Transparency (Appearance) | CLEAR       | Clear         |  |
| Reaction (pH)             | Acidic 6.0  | 4.5 - 7.0     |  |
| Specific gravity          | 1.015       | 1.005 - 1.030 |  |

**Chemical Examination**

|                         |        |        |  |
|-------------------------|--------|--------|--|
| Urine Protein (Albumin) | Absent | Absent |  |
| Urine Glucose (Sugar)   | Absent | Absent |  |

**Microscopic Examination**

|                    |            |        |      |
|--------------------|------------|--------|------|
| Red blood cells    | Absent     | 0-4    | /hpf |
| Pus cells (WBCs)   | 2 - 4 /HPF | 0-9    | /hpf |
| Epithelial cells   | 1 - 2 /HPF | 0-4    | /hpf |
| Crystals           | Absent     | Absent |      |
| Cast               | Absent     | Absent |      |
| Amorphous deposits | Absent     | Absent |      |
| Bacteria           | Absent     | Absent |      |

\*\*END OF REPORT\*\*

Lab technician

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# MATERNITY CARE HOPITAL

**NAME: SIBABRATA SATHPATHY**

**DATE : 11-11-2023**

**AGE-42Y/M**

**SONOGRAPHER : DR. MAYURI MOHAPATRA**

## USG OF WHOLE ABDOMEN

**LIVER:** Normal in size, shape and parenchymal echotexture. No. SOL seen. Intrahepatic biliary channels normal in caliber and contains no echogenic structure. Portal and hepatic vascular systems within normal limits. P. V. measures 7.2mm,

**GALL BLADDER:** normal in shape and size no sol ,no calculi seen **C.B.D.:** Common duct bile normal in calibre (3.0mms).

**SPLEEN :** Normal in size, shape and parenchymal echotexture.

**PANCREAS:** Normal in size, shape and parenchymal echotexture. Pancreatic duct not dilated.

**KIDNEYS:** Both the kidneys are normal in size, shape and position. Renal cortical echotexture is within normal limits. Cortico medullary differentiation maintained. No evidence of my calculus or hydronephrosis on both sides. Pelvi-calyceal systems appear normal. No focal lesion seen.

- Right kidney measures : 9.9 x 5.5cms.
- Left kidney measures: 8.9 x 4.3cms.

**URETERS:** Both ureters not visualized (normal).

**URINARY BLADDER:** Symmetrical and normal in outline. Lumen clear. Walls normal in thickness

**Prostrate**-normal in size shape and echosructure .

**Impression:**Normal study of abdomen

  
**DR.MAYURI MOHAPATRA**  
Regd. No : OMC 16891  
Maternity Care Hospital  
Sahid Nagar, Bhubaneswar