

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : ROHIT SAINI

Age / Gender : 41 years / Male

Endo ID : 166430

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : Jan 13, 2024, 11:55 a.m.

Reported Date & Time : Jan 13, 2024, 12:24 p.m.

Sample ID :



240130036

Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	14.0	gm/dl	13.5 - 18.0
Erythrocyte (RBC) Count	4.90	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	44.1	%	42 - 52
Mean Cell Volume (MCV)	90.0	fL	78 - 100
Mean Cell Haemoglobin (MCH)	28.7	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	31.9	g/dl	32 - 36
Red Cell Distribution Width (RDW)	12.2	%	11.5 - 14.0
Total Leucocytes Count (WBC)	7950	Cell/cu.mm	4000 - 10000
Neutrophils	50	%	40 - 80
Lymphocytes	42	%	20 - 40
Monocytes	04	%	2 - 10
Eosinophils	04	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	9.3	fL	7.2 - 11.7
PCT	0.22	%	0.2 - 0.5
Platelet Count	242	10 ³ /ul	150 - 450

END OF REPORT

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)

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HAEMATOLOGY

ESR	25	mm	0 - 20
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Collected Date & Time : Jan 13, 2024, 11:55 a.m.

Reported Date & Time : Jan 13, 2024, 12:44 p.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
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CLINICAL PATHOLOGY

General Examination

Colour	Yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.025		1.005-1.030

Chemical Examination

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

Microscopic Examination

Pus cells (WBCs)	1-2	/hpf	0-4
Epithelial cells	2-3	/hpf	0-5
Red blood cells	NIL	/hpf	NIL
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Absent		Absent
Other	Absent		Absent

****END OF REPORT****

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Collected Date & Time : Jan 13, 2024, 11:55 a.m.

Reported Date & Time : Jan 13, 2024, 12:58 p.m.

Sample ID :



240130036

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

Method : Gel Technique & Tube Agglutination

Medical Remark :

'O' POSITIVE

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

****END OF REPORT****

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Sample ID :



240130036

Test Description	Value(s)	Unit(s)	Reference Range
BIOCHEMISTRY			
LIPID PROFILE			
Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	147.0	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	212.2	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	45.8	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	42.44	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	58.76	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	3.21		2.6-4.9
LDL/HDL Ratio Method : Calculated	1.28		0.5-3.4

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BIOCHEMISTRY

LIVER FUNCTION TEST

Bilirubin - Total	2.26	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.88	mg/dL	0.00 - 0.30
Bilirubin - Indirect	1.38	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	34.9	U/L	5.0-40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	48.6	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	94.6	U/L	MALE & FEMALE
Method : IFCC with Serum			
4-19 YEAR: 54-369 U/L			
20-59 YEAR: 42-98 U/L			
>60 YEAR: 53-141 U/L			
Total Protein	7.00	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.50	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.50	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.80		1.5 - 2.5
Method : Calculated			

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HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)

5.3

%

> 8% Action Suggested

7 - 8 % Good Control

6 - 7 % Near Normal Glycemia

< 6% Normal level

BLOOD

Method : Nephelometry Methodology

Instrument: Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE

105.41

90 - 120 Very Good Control

121 - 150 Adequate Control

151 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

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Test Description	Value(s)	Unit(s)	Reference Range
IMMUNOLOGY			
T3-Triiodothyronine Method : CHEMILUMINESCENCE	0.69	ng/dL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINESCENCE	4.8	ug/dL	4.5 - 10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINESCENCE	1.17	uIU/mL	0.35 - 5.50

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

****END OF REPORT****

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BIOCHEMISTRY

Urea

25.1

mg/dL

10.0 - 40.0

Method : Uricase

CREATININE

1.19

mg/dL

0.60 - 1.40

Method : Serum, Jaffe

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BIOCHEMISTRY

Uric Acid

4.2

mg/dL

3.5-7.0

Method : Uricase, Colorimetric

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BIOCHEMISTRY

Calcium

9.5

mg/dL

8.50 - 10.20

Method : Arsenazo III

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BIOCHEMISTRY

Glucose fasting

96.7

mg/dL

70.0-110.0

Method : Fluoride Plasma-F, Hexokinase

****END OF REPORT****

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M.D.(Patho.)

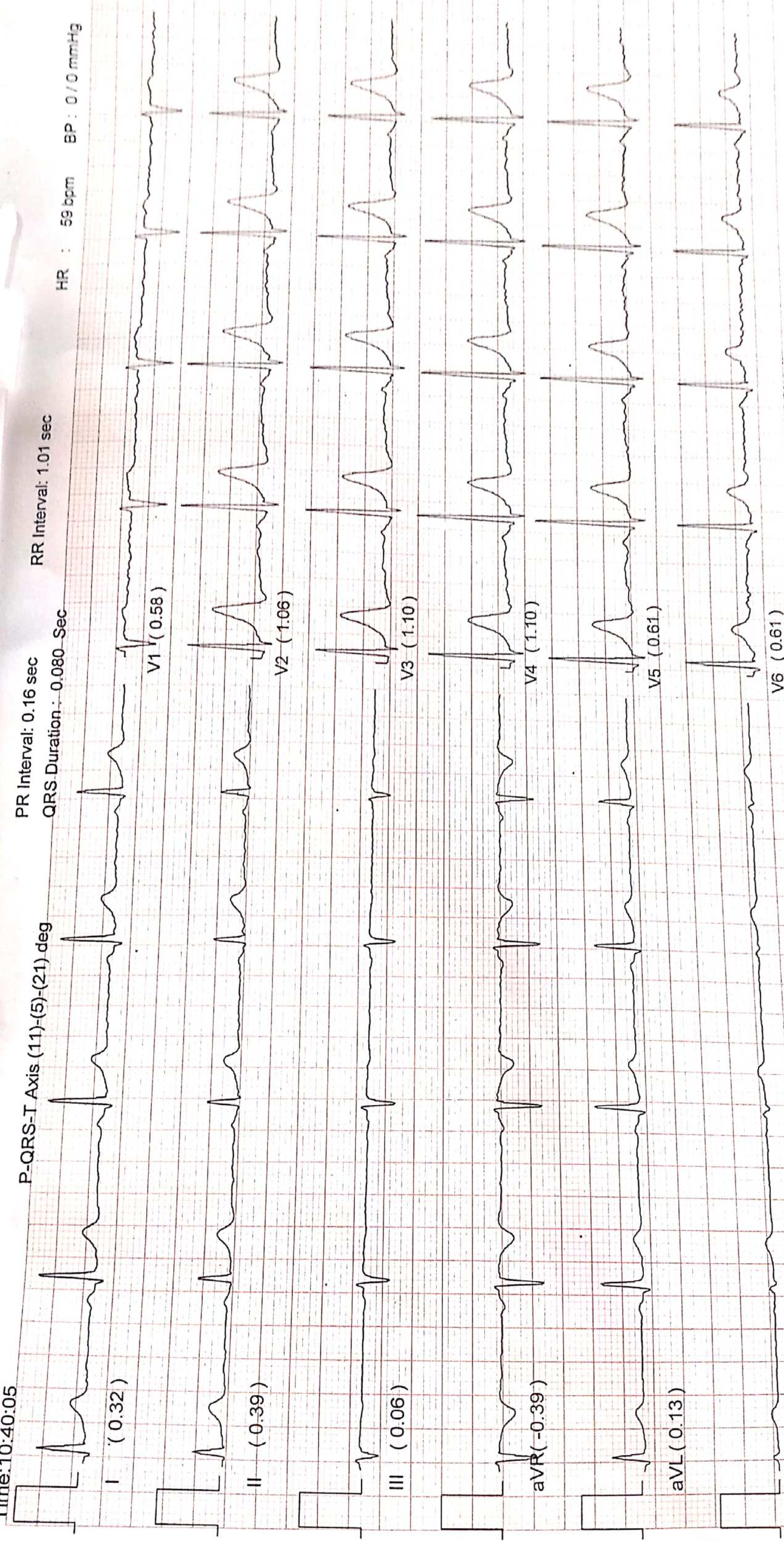
P-QRS-T Axis (11)-(5)-(21) deg

PR Interval: 0.16 sec

QRS Duration: 0.080 Sec

RR Interval: 1.01 sec

HR : 59 bpm BP : 0/0 mmHg



INTERPRETATION

Sinus Bradycardia, PR is normal, Normal QRS Width, Normal QT interval, QRS Axis is normal,
 T wave inversion in Lead III, V1,
 Otherwise Normal ECG

DR MD

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
 Consultant Radiologist & Sonologist
 RMC No - 004507/15600

NAME : ROHIT SAINI
AGE : 41 YRS
SEX : MALE
DATE : 13-01-24
REF BY : MEDIWHEEL

INTERPRETATION SUMMARY

- NORMAL CHAMBER DIMENSIONS
- DIASTOLIC DYSFUNCTION GRADE 1
- INTACT IAS/ IVS
- ALL VALVES ARE NORMAL.
- MILD TR , TRACE MR
- RVSP 25 MM HG
- NO RWMA : LVEF 55 %
- NO CLOT, VEGITATION.
- NO PERICARDIAL EFFUSION
- NORMAL PERICARDIUM .
- SIZE OF MAIN PULMONARY ARTERY 22 MM

M. MODE/2D MEASUREMENTS (MM) & CALCULATIONS (ML)

LVID d	39.7	LVEDV	
LVID s	28.5	LVESV	
RVID(d)	---	SV	
IVS d	9.9	F.S	-
IVS S	13.0	EF	28 %
LVPW d	10.5	C.O	55 %
LVPWS	14.0	MITRAL VALVE	-
AORTIC ROOT	28.8	EF SLOPE	-
LEFT ATRIUM	31.0	OPENING AMPLITUDE	-
AORTIC CUSP OPENING	-	E.P.S.S	-

DOPPLER MEASUREMENTS & CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY(cm/sec.)	GRADIENT P/M	REGURGITATION
MITRAL VALVE	NORMAL	E- 63 A- 86	-	TRACE
TRICUSPID VALVE	NORMAL	198	-	MILD
PUL VALVE	NORMAL	112	-	NIL
AORTIC VALVE	NORMAL	120	-	NIL

PULMONARY ARTERY	MITRAL VALVE AREA (BY P 1/2 T)
PEAK ACCELERATION TIME	PRESSURE HALF TIME
SYSTOLIC PRESSURE 25 MM HG	MVA

Dr. ROOPA GOYAL (M.B.B.S., M.D)
Consultant Radiologist & Sonologist
RMC No. - 004507/15600
RMC No. - 004250/15000
Consultant Radiologist
And Sonologist

भ्रूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सके

HOLTER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SME
THE DIAGNOSIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IN NOT MEANT FOR MEDICO-LE

USG ABDOMEN-PELVIS

NAME -- Rohit saini	AGE- 41 yrs	Date -- 13-01-24
REF BY -- Mediwheel		

LIVER : is enlarged and bright 15.5 cm and shows homogeneous echotexture. No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion. The portal vein and common bile duct show normal caliber.

GALL BLADDER : distended and shows smooth walls. No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: normal in size and shows normal echopattern.

PANCREAS: Normal in size , shape and position. Parenchyma is homogeneous.

RT.KIDNEY- Normal in size, shape and position . Measures :-- 9.6 x 4.2 cm
Cortex is homogeneous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.

A Calculus Of Size 4.5 mm is Seen in middle calyx .

LT. KIDNEY- Normal in size, shape and position. Measures :-- 9.8 x 4.4 cm
Cortex is homogeneous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.

A Calculus Of Size 4.6 mm is Seen in middle calyx .

URINARY BLADDER : is distended with Smooth walls. No evidence of diverticulum or calculus is Seen .

PROSTATE: is Enlarged in size 27.3 gms and shows normal homogeneous echotexture

IMPRESSION:-

- Enlarged fatty Liver .
- Bilateral renal Calculi Seen in middle calyx
- Prostatic Enlargement
- Excessive Gas Filled Gut Loops are Seen .

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Dr. DEVENDRA GOYAL (S.O. Radiologist)
RRMO No. 0024507/15600
Consultant Radiologist
And Sonologist

(Adv- clinical correlation , further evaluation)

Please note :- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no us finding is path genomic . All findings are only S/O , hence advice These findings are observations at the time of study. Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .

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GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

NAME - Rohit Saini

AGE- 41 Yrs

DATE - 13-01-24

REF BY- Mediwheel

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS .

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist

RMG No: 004507A15600.

RMG No: 004200

Consultant Radiologist

And Sonologist

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EKG TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SMEAR
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भारत सरकार

GOVERNMENT OF INDIA



रोहित सैनी

Rohit Saini

जन्म तिथि/DOB: 30/08/1982

पुरुष/ MALE

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Specialist in PH & Dermatology
BMC No. 1507/15600

8970 1695 7010

VID : 9118 1165 7863 1968

जैरा

आवासीय, जैरा

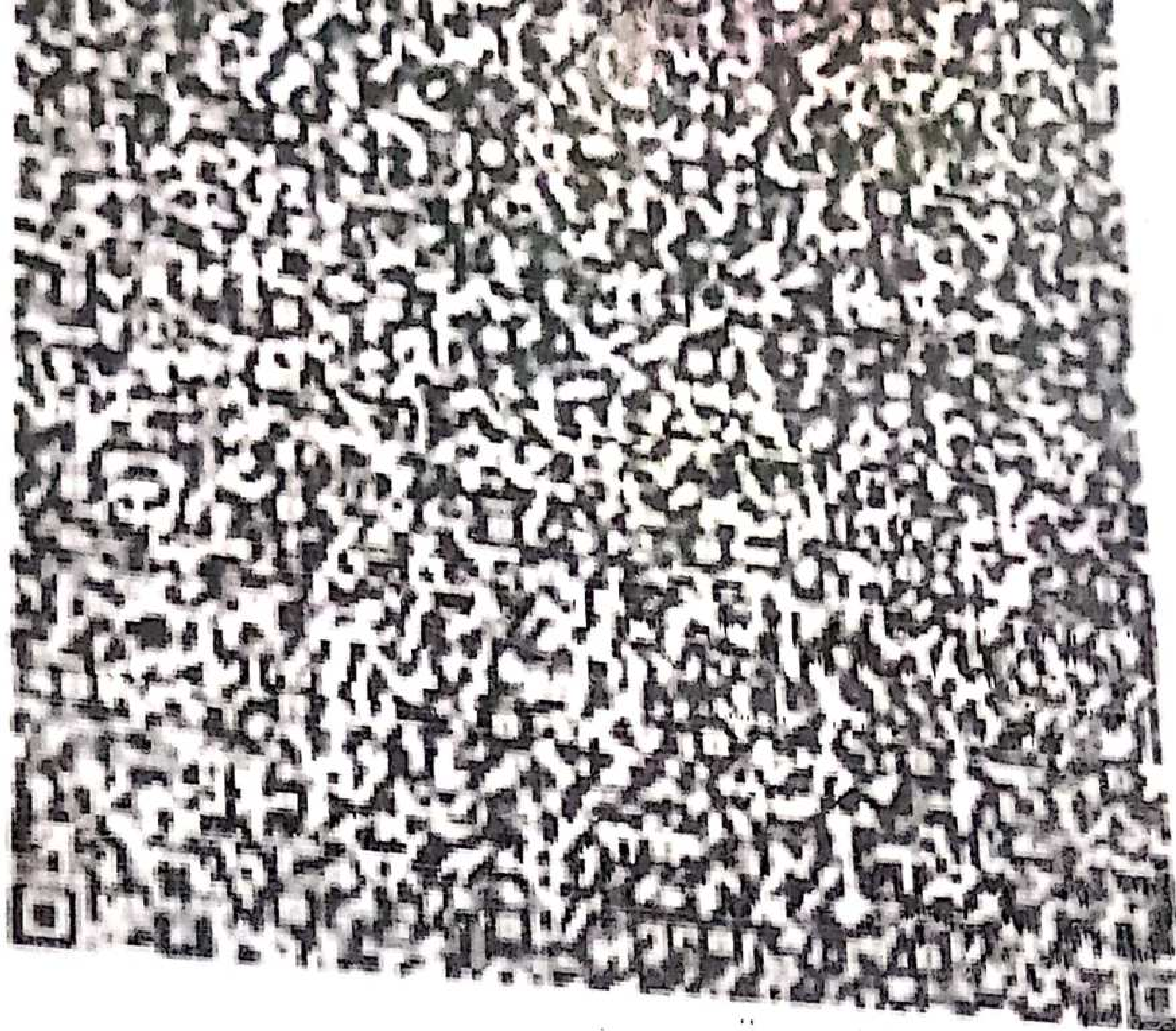
परवाण

भारतीय विशिष्ट पहचान प्राधिकरण

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श्री. अशोक कुमार, १६, सिविल लाइन्स, राजीव गांधी नगर, अजमेर,
राजस्थान - ३०५००१

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Nagar, Ajmer, Rajasthan,
Rajasthan - 305001



8970 1695 7010

UID : 9118 1165 7863 1968

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 **GPS Map Camera**



Ajmer, Rajasthan, India

FJ9M+WJW, opp. JLN Hospital, Kala Bagh, Ajmer,
Rajasthan 305001, India

Lat 26.469908°

Long 74.634011°

13/01/24 10:48 AM GMT +05:30

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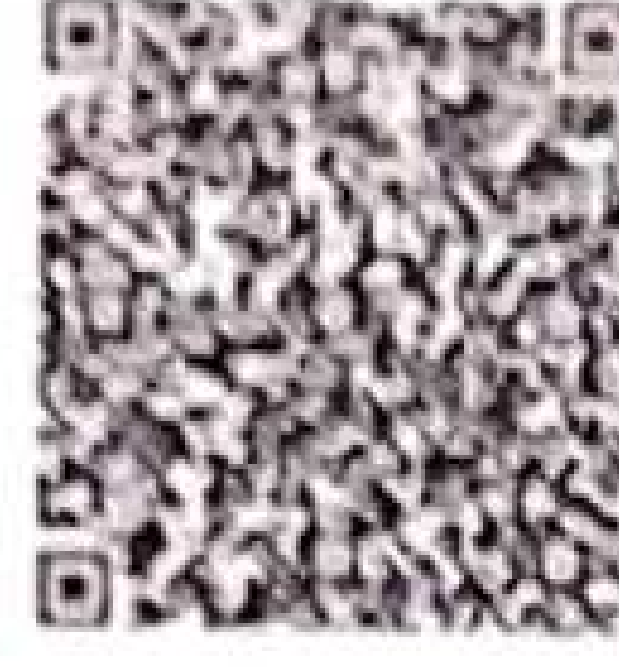
Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Jan 13, 2024, 03:41 p.m.

Reported Date & Time : Jan 13, 2024, 04:26 p.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

Blood Glucose-Post Prandial
Method : Hexokinase

113.1

mg/dL

70 - 140

****END OF REPORT****

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