

Name : MR. ANKIT KUMAR JAIN  
Age/Sex : 36 Y / M  
Consultant : DEVENDRA VAISHNAV

UHID.No : 23-12061  
Accession No. : 20240110027  
Bill / IPD No. : 23-37315

IPD/OPD: OPD  
Category : BOB HEALTH



Registration No



Accession No

## HAEMATOLOGY REPORT

Sample Collected: 10-Jan-2024 7:45 PM

Sample Type: EDTA BLOOD

Test Name	Results	Unit	Biological Reference Range
Haemoglobin	15.0	gm/dl	12-16
Total Red Blood Count	5.23	Millions/cumm	3.5-5.5
Haematocrite	43.8	%	36.0-51.0
MCV	83.75	fl	77-95
MCH	28.68	pg	26-32
MCHC	34.25	g/dl	30-36
Total Leukocyte Count	8700	cells/cumm	4,000-11,000
Neutrophils	64	%	40-70
Lymphocytes	30	%	20-45
Eosinophils	02	%	2.0-6.0
Monocytes	04	%	2.0-8.0
Basophils	00	%	0-0.1%
Platelet	2.88	lakhs/cmm	1.5-4.5
Erythrocyte Sedimentation Rate			
ESR	07	mm	0-9
BLOOD GROUP			
ABO	O		
Rh TYPE	POSITIVE		
T3 (Total Triiodothyronine)	1.98	nmol/L	1.23-3.07
T4 (Total Thyroxine)	155.7	nmol/L	66-181
TSH (Thyroid Stimulating Hormone)	3.69	mIU/L	0.30-4.2

Remarks :

DR. LEKHRAJ PATIDAR

• Home Collection Facility Available •

Note : Diagnostic test have technical limitation. | For technical disparity repeated examination are required.  
No legal liability is accepted. | Clinical correlation is requested. This test is not valid for medico-legal purpose.

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## BIOCHEMISTRY

Sample Collected: 10-Jan-2024 7:45 PM

Sample Type: SERUM

Test Name	Results	Unit	Biological Reference Range
<b>LIPID PROFILE.</b>			
TOTAL CHOLESTROL	165.2	mg/dl	0-200
TRIGLYCERIDES.	131.0	mg/dl	0-150
CHOLESTEROL HDL	50.16	mg/dl	35-85
CHOLESTEROL LDL	88.84	mg/dl	0-130
CHOLESTEROL VLDL	26.20	mg/dl	10-30
TOTAL CHOLESTEROL HDL RATIO	3.29	%	3-4.4
CHOLESTEROL LDL CHOLESTEROL HDL RATIO	1.77	%	0.1-3.0
<b>LIVER FUNCTION TEST (LFT)</b>			
Serum Bilirubin (Total)	0.88	mg/dl	0.1-1.0
Serum Bilirubin (Direct)	<b>0.39</b>	mg/dl	0.0-0.2
Serum Bilirubin (Indirect)	0.49	mg/dl	0.0-0.8
SGOT (AST)	32.15	U/L	9-40
SGPT (ALT)	28.19	U/L	9-40
Alkaline Phosphatase	119.0	U/L	100-250
Total Protein	6.78	g/dL	6.3-8.2
Albumin	3.69	g/dl	3.5-5.0
Globulin	3.09	g/dl	0-5
Albumin Globulin Ratio	1.19	Ratio	1.0-2.3
BLOOD SUGAR (FASTING)	86.15	mg/dl	70 - 110
BLOOD UREA NITROGEN	13.26	mg/dl	5-25
Serum Creatinine	0.78	mg/dl	0.70-1.40
Uric Acid	4.89	mg/dl	2.0-7.0

Remarks :

DR. LEKHEJ PATIDAR

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Name : MR. ANKIT KUMAR JAIN	UHID. No. : 23-12061	IPD/OPD Status : OPD
Age/Sex : 36 Y/Male	Lab No. : 20240110027	consultant : Dr.DEVENDRA VAISHNAV
Ref. Dr.	Receipt no : 23-37315	Location/Bed.No :

Collected at: 10/01/2024 19:45:00

Report Gen at:



**BIOCHEMISTRY**



Registration No

Accession No

SAMPLE TYPE : EDTA BLOOD

Investigations	Result	Unit	Biological Reference Interval
HbA1C (GLYCOSYLATED Hb )	5.88	%	4.0- 6.0 %

**HbA1C**

HbA1C

4.0-6.0%

Good control 6-7%

Fair control 7-8%

Poor control >8%

**Estimated Blood Glucose (ABG)**

97-126 mg/dl

126-154 mg/dl

154-183 mg/dl

183 mg/dl

TECHNOLOGIST

• Home Collection Facility Available •

Dr. LEKHRAJ PATIDAR

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<b>Name</b> : MR. ANKIT KUMAR JAIN	<b>UHID.No</b> : 23-12061	<b>IPD/OPD:</b> OPD
<b>Age/Sex</b> : 36 Y / M	<b>Accession No.</b> : 20240110027	<b>Category</b> : BOB HEALTH
<b>Consultant</b> : DEVENDRA VAISHNAV	<b>Bill / IPD No.</b> : 23-37315	



**Registration No**



**Accession No**

## CLINICAL PATHOLOGY

Sample Collected: 10-Jan-2024 7:45 PM

Sample Type: URINE,

Test Name	Results	Unit	Biological Reference Range
<b>PHYSICAL EXAMINATION.</b>			
QUANTITY	30ML		
COLOUR	PALE YELLOW	-	-
APPEARANCE	CLEAR	-	-
PH	ACIDIC		
SPECIFIC GRAVITY	1.010		
<b>CHEMICAL EXAMINATION.</b>			
Urine Sugar	NIL	-	NIL
Urine Albumin	NIL		ABSENT
BS/BP	ABSENT		ABSENT
KETONE	ABSENT		
<b>MICROSCOPIC EXAMINATION.</b>			
PUS CELLS	3-5	/hpf	0-4
EPITHELIAL CELLS	2-4	/HPF	0-2
RBC,	NIL	/HPF	0-2
CASTS	ABSENT	-	-
CRYSTALS	ABSENT	/HPF	-
BACTERIA	ABSENT		
YEAST	ABSENT		
<b>Remarks :</b>			

DR. LEKHRAJ PATIDAR

• Home Collection Facility Available •

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PT NAME	MR. ANKIT KUMAR JAIN	AGE /SEX/	36YEAR / MALE
REF BY	DR. DEVENDRA VAISHNAV GD HOSPITAL, RATLAM	DATE	10/01/2024

**ULTRASOUND WHOLE ABDOMEN**

**Liver** is normal in size (11.8cm) and echotexture. Hepatic venous system appear normal. No focal lesion is seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein and CBD are normal in caliber.

**Gall bladder** is normal in size & shape. Its lumen is echofree and nonlithiastic.

**Pancreas** is normal in size outline & echo pattern.

**Spleen** is normal in size (8.5cm) and echo pattern.

**Right kidney** is normal in size (9.4x4.8cm), shape and echogenicity with smooth outline. Central pelvicalyceal sinus and corticomedullary ratio are normal. No calculus seen.

**Left kidney** is normal in size (11.3x4.8cm), shape and echogenicity with smooth outline. Central pelvicalyceal sinus and corticomedullary ratio are normal. No calculus seen.

**Urinary bladder** is normal in shape & contour. Its wall is normal.

**Prostate** is normal in size, shape echotexture & contour.

IVC and abdominal aorta are normal in calibre. No evidence of intra-abdominal lymphadenopathy. No evidence of ascites is seen.

**The visualised bowel loops appears to be normal.**

**IMPRESSION: Ultrasound whole abdomen study show:**

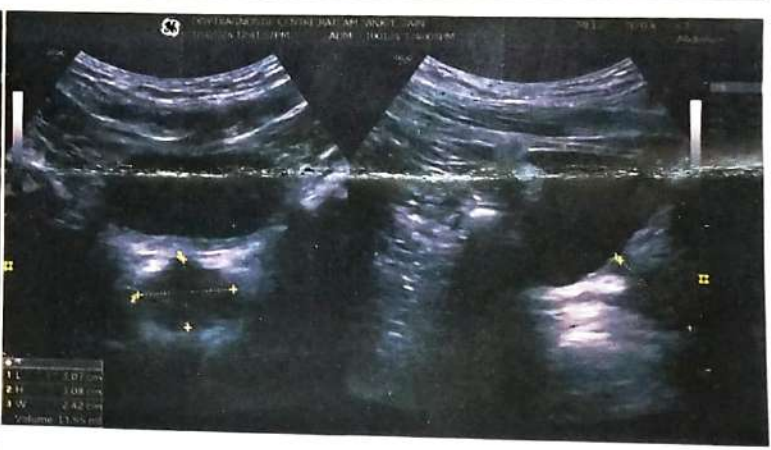
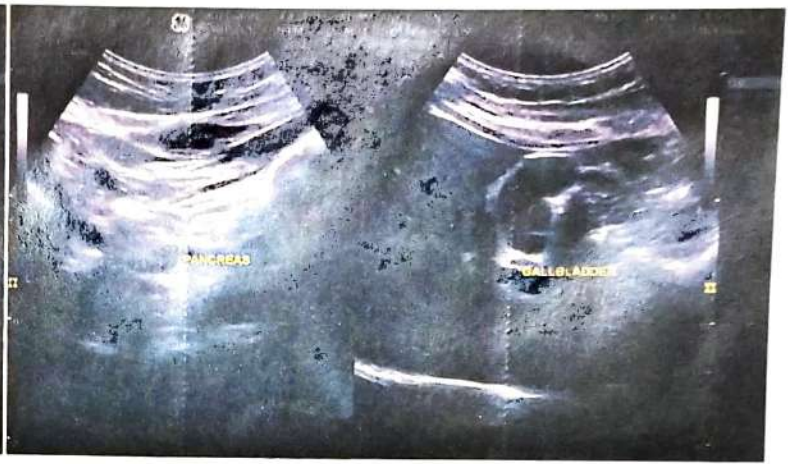
**No significant abnormality.**

**DR ANUGRAH PATERIA**  
(Radiologist)

It is a professional opinion, not valid for medico legal purpose.

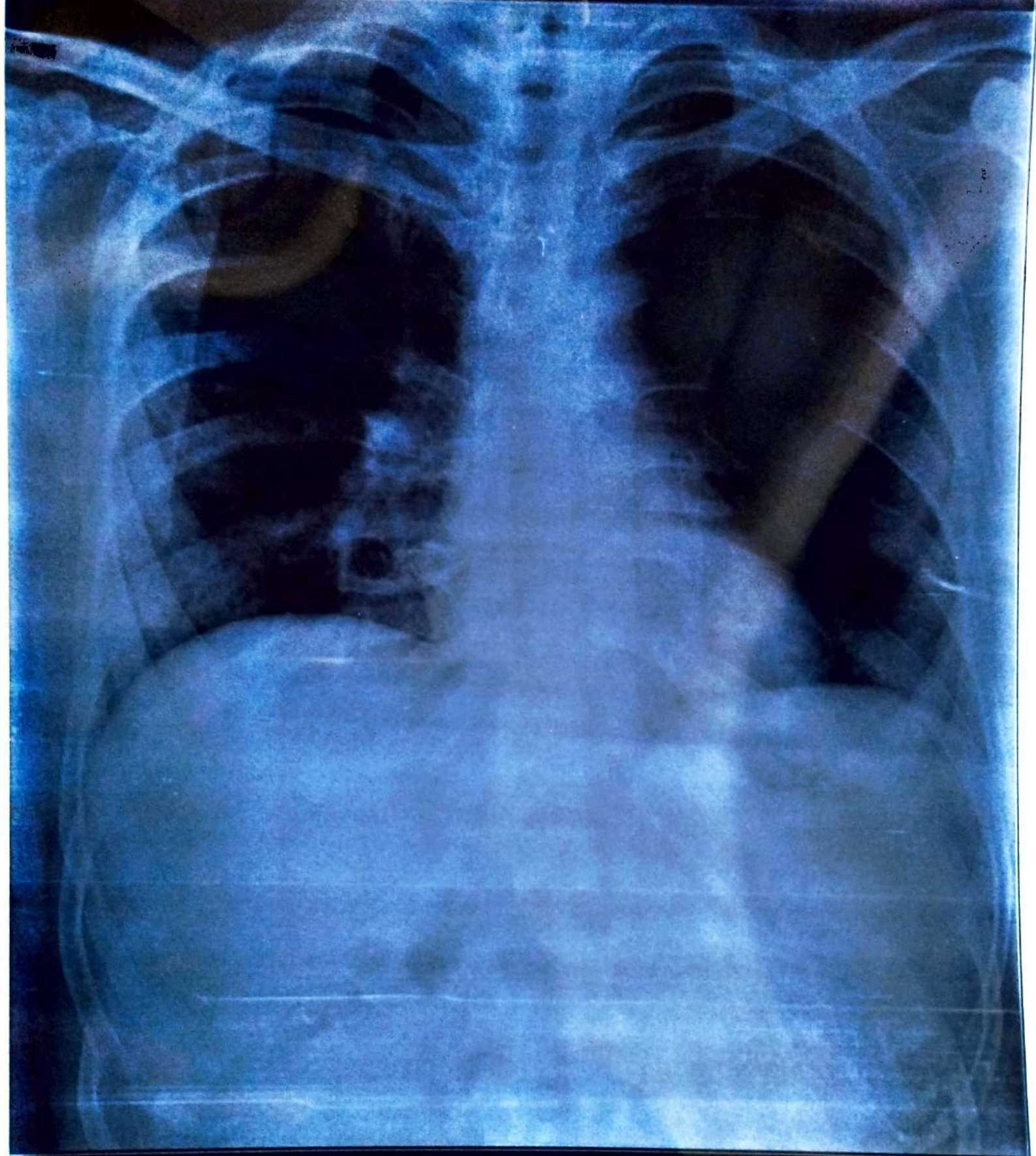


# DDY DIAGNOSTIC CENTRE, RATLAM.





R



MR ANKIT KUMAR JAIN 36Y 23-12061 CHEST PA 10/01/2024  
GD HOSPITAL 80FEET ROAD RATNPURI, RATLAM PH:9111013321



**GD Hospital**

गीतादेवी हॉस्पिटल

Hospital Reg. No. NH/1985/JUN-2016



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+91-91110 13321



80 Feet Road, Ratnapuri,  
Ratlam (M.P.) 457001

10/01/2024

**Patient Name:- ANKIT KUMAR JAIN Age 36 year male**

## X-RAY-CHEST (PA VIEW)

### FINDINGS:-

**Bilateral lung fields are normal,**

The pleural spaces are normal.

Both hila are normal in size have equweal density and bear normal relations

The heart and trachea are central in position and no mediastinal abnormal viable.

The cardiac size is normal.

The domes of diaphragm are normal in position and show smooth outline.

### IMPRESSION:-

No significant abnormality seen

DR. ANUGRAH PATERIA

MBBS, MD

Consultant Radiologist.





Scan QR code to check  
report authenticity



MC-2202

Passport No :

## LABORATORY TEST REPORT



Patient Information	Sample Information	Client/Location Information
Name : Mr Ankit Kumar	Lab Id : 012412500498	Client Name : G Y Foundation@Ratlam
Sex/Age : Male / 36 Y	Registration on : 10-Jan-2024 15:26	Location :
Ref. Id :	Collected at : non SAWPL	Approved on : 11-Jan-2024 14:20 Status : Final
Ref. By : Dr Devendra Vaishnav	Collected on : 10-Jan-2024 15:26	Printed On : 11-Jan-2024 14:58
	Sample Type : Serum	Process At : 1. NRL SAWPL Gujarat Ahmedabad Paldi

## Biochemistry

Test	Result	Unit	Biological Ref. Interval
<b>GGT</b> <i>L-glytamyl-p-nitroanilide</i>	17.0	U/L	15 - 73

*Dhote*

DR.TEJASWINI DHOTE

M.D. Pathology

Dr. Sanjeev Shah

MD Path

Dr.Yash Shah

MD Path



**Sterling Accuris Pathology Laboratory**

Laboratory: (Arihant Pathology Laboratory), 15, Ved Vyas Colony, Ratlam, Madhya Pradesh 457001  
Ph.: 07412-297458

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Pathology lab that cares

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## LABORATORY TEST REPORT



Patient Information	Sample Information	Client/Location Information
Name : Mr Ankit Kumar	Lab Id : 012412500498	Client Name : G Y Foundation@Ratlam
Sex/Age : Male / 36 Y	Registration on : 10-Jan-2024 15:26	Location :
Ref. Id :	Collected at : non SAWPL	Approved on : 11-Jan-2024 14:57 Status : Final
Ref. By : Dr Devendra Vaishnav	Collected on : 10-Jan-2024 15:26	Printed On : 11-Jan-2024 14:58
	Sample Type : Serum	Process At : 1. NRL SAWPL Gujarat Ahmedabad Paldi

### Immunoassay

Test	Result	Unit	Biological Ref. Interval
Prostate Specific Ag. (PSA), Total <small>CLIA</small>	0.188	ng/mL	0 - 4

PSA is a glycoprotein that is expressed by both normal and neoplastic prostate tissue and is prostate tissue specific and not prostate cancer specific. PSA is constantly expressed in nearly all prostate cancers, although its level of expression on a per cell basis is lower than in normal prostate epithelium. The absolute value of serum PSA is useful for determining the extent of prostate cancer and assessing the response to prostate cancer treatment; its use as a screening method to detect prostate cancer is also common.

#### Interpretation

Increased in

- Prostate disease (Cancer, Prostatitis, Benign prostatic hyperplasia, Acute urinary retention)
- Manipulations (Cystoscopy, Needle biopsy, Radiation therapy, Indwelling catheter, Prostatic massage)
- Transurethral resection
- Prostatic ischemia

Decreased in

- Castration
- Prostatectomy
- Radiation therapy
- Ejaculation within 24 - 48 hours
- 5-alpha-reductase inhibitor reduces PSA by 50% after 6 months in men without cancer

Limitations

- PSA has been recommended by the American Cancer Society for use in conjunction with a DRE for early detection of prostate cancer starting at the age of 50 years for men with at least 10-year life expectancy
- PSA levels that are measured repeatedly over time may vary because of biologic variability where the true PSA level in a given man is different on different measurements.
- A change in PSA of >30% in man with a PSA initially below 2.0 ng/mL was likely to indicate a true change beyond normal random variation.

----- End Of Report -----

*Photo*

**DR. TEJASWINI DHOTE**

M.D. Pathology

**Dr. Sanjeev Shah**

MD Path

**Dr. Yash Shah**

MD Path

This is an Electronically Authenticated Report.

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Mr. Ankit Kumar 10/1/24 11:30 AM

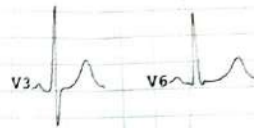
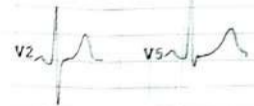
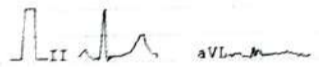
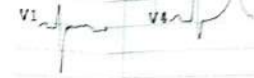
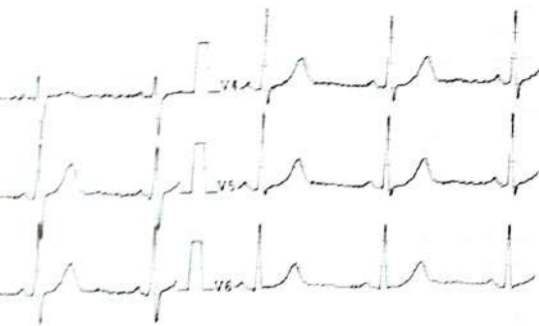
PATIENT INFORMATION:-

ID:- 23 CASE:-  
NAME - Ankit Kumar  
AGE:- GENDER:- SMOKER:-  
HEIGHT:- cms WEIGHT:- K9  
DOCTOR:- Dr. D. Vaishnav  
REF:-  
DATE/TIME:- 10/01/2024 11:07:11

ECG SETTINGS:-

PRINTING MODE:- AUTO 3+1  
GAIN (mm/mV) :- 10  
SPEED (mm/Sec) :- 25  
FILTER (Hz) :- 0.05 - 35  
NOTCH/BLC :- ON/ON  
RHYTHM LEAD:- II





**OBSERVATIONS**

HEART RATE	68 bpm
P-R	877 ms
P-Q	132 ms
P-DUR	102 ms
QPS	90 ms
T-DUR	210ms
ST-DUR	98 ms
QT	398 ms
QTc	412 ms
P AXIS	38 °
R AXIS	48 °
T AXIS	55 °
ST AXIS	

**INTERPRETATION**  
SINUS RHYTHM

**REMARKS**  
GD HOSPITAL  
30, FEET ROAD, RATNAPUR  
RATLAM (M.P.)  
P. No. NH/1985/JUN/2016

AIW CE

CORRELATE





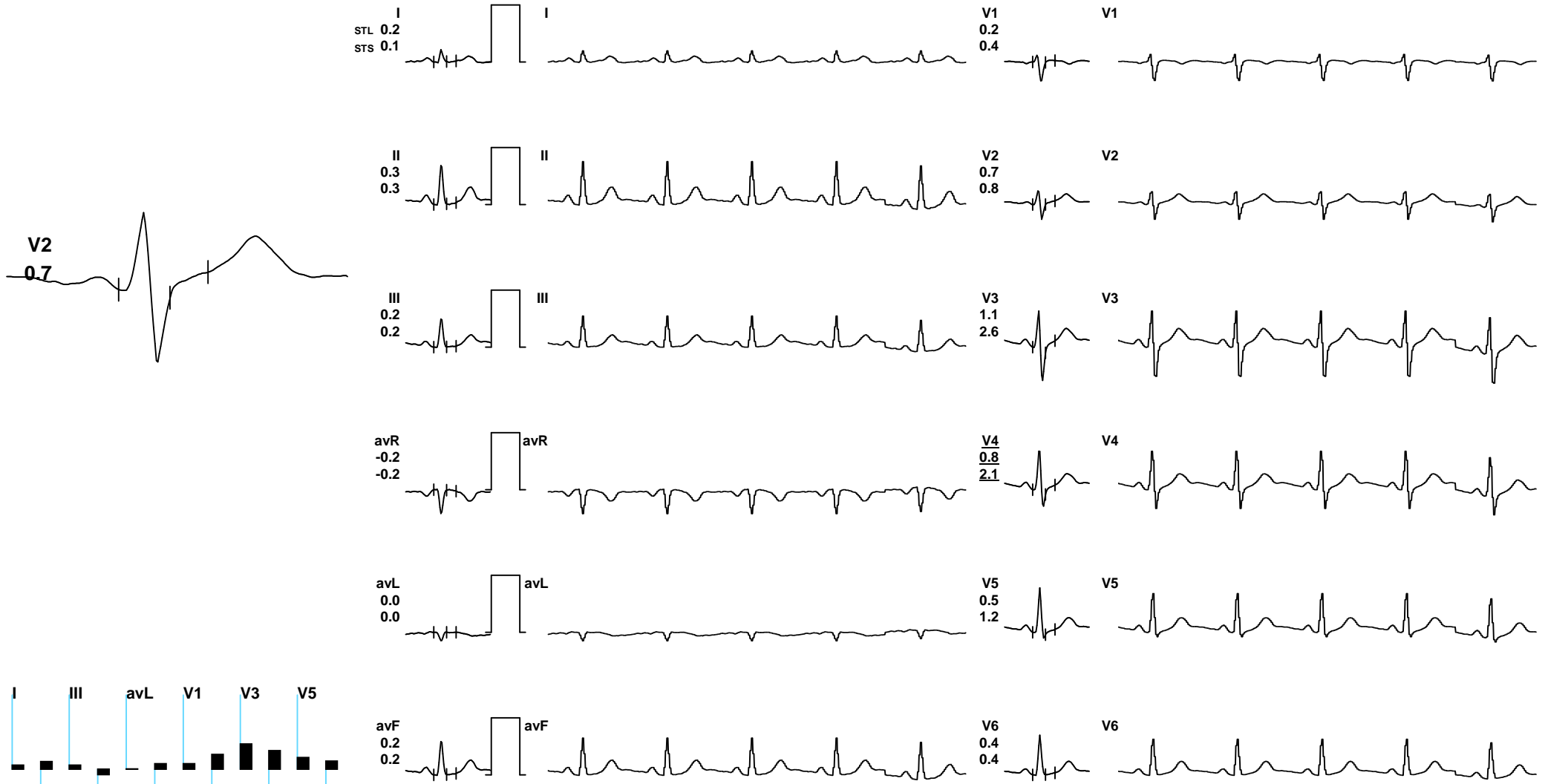
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 85

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 85 bpm 46% of THR BP: ---/--- mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

The diagram shows the standard placement of 12 ECG leads. Limb leads (I, II, III, avR, avL, avF) are positioned on the arms and legs. Chest leads (V1-V6) are positioned in a specific sequence across the chest wall, from the 4th intercostal space (V1) to the midaxillary line (V6).



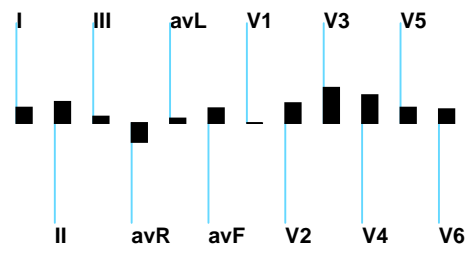
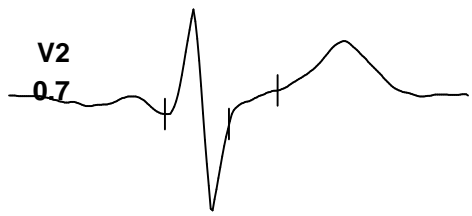
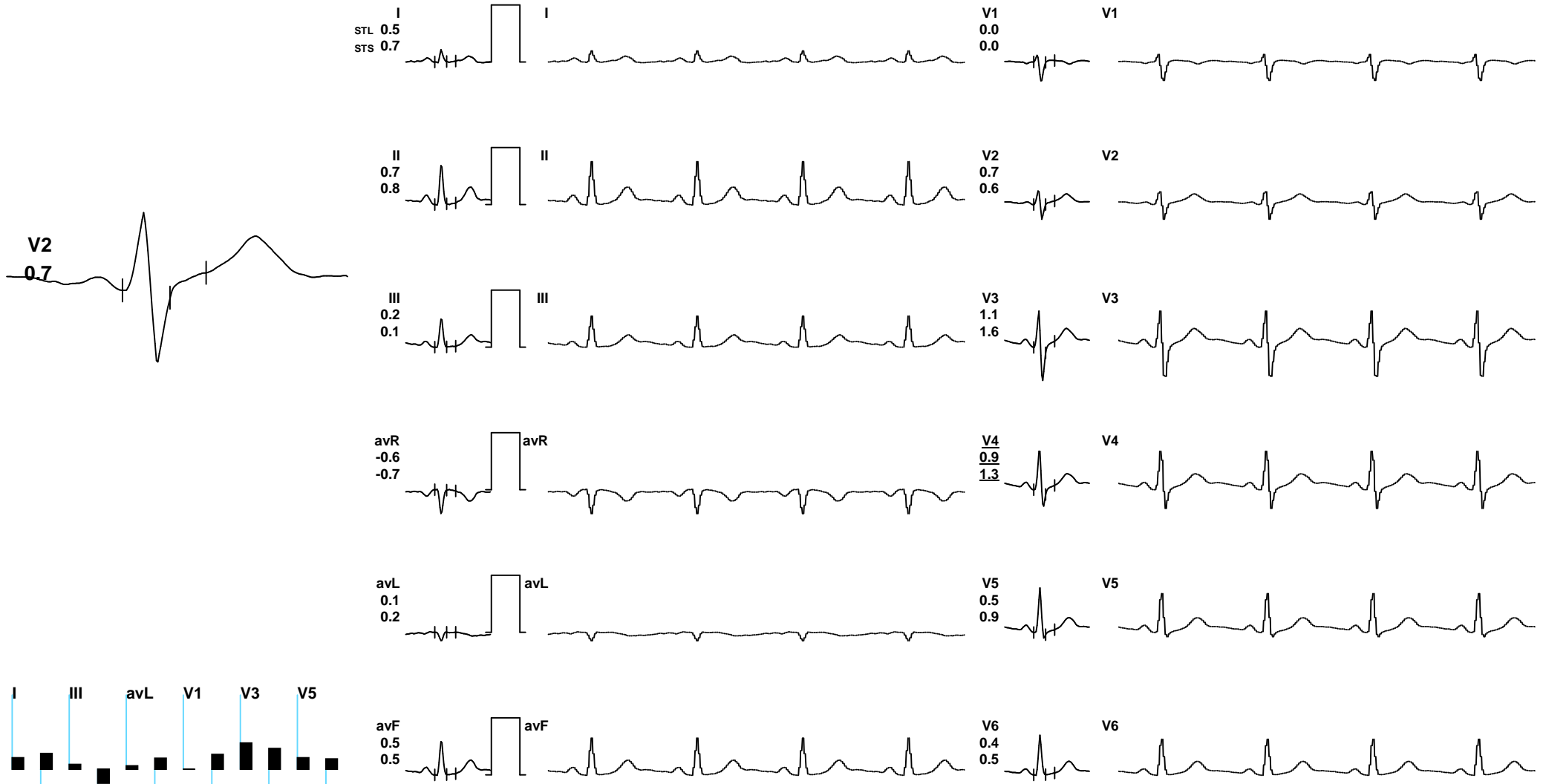
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 81

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 81 bpm 44% of THR BP: ---/--- mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:





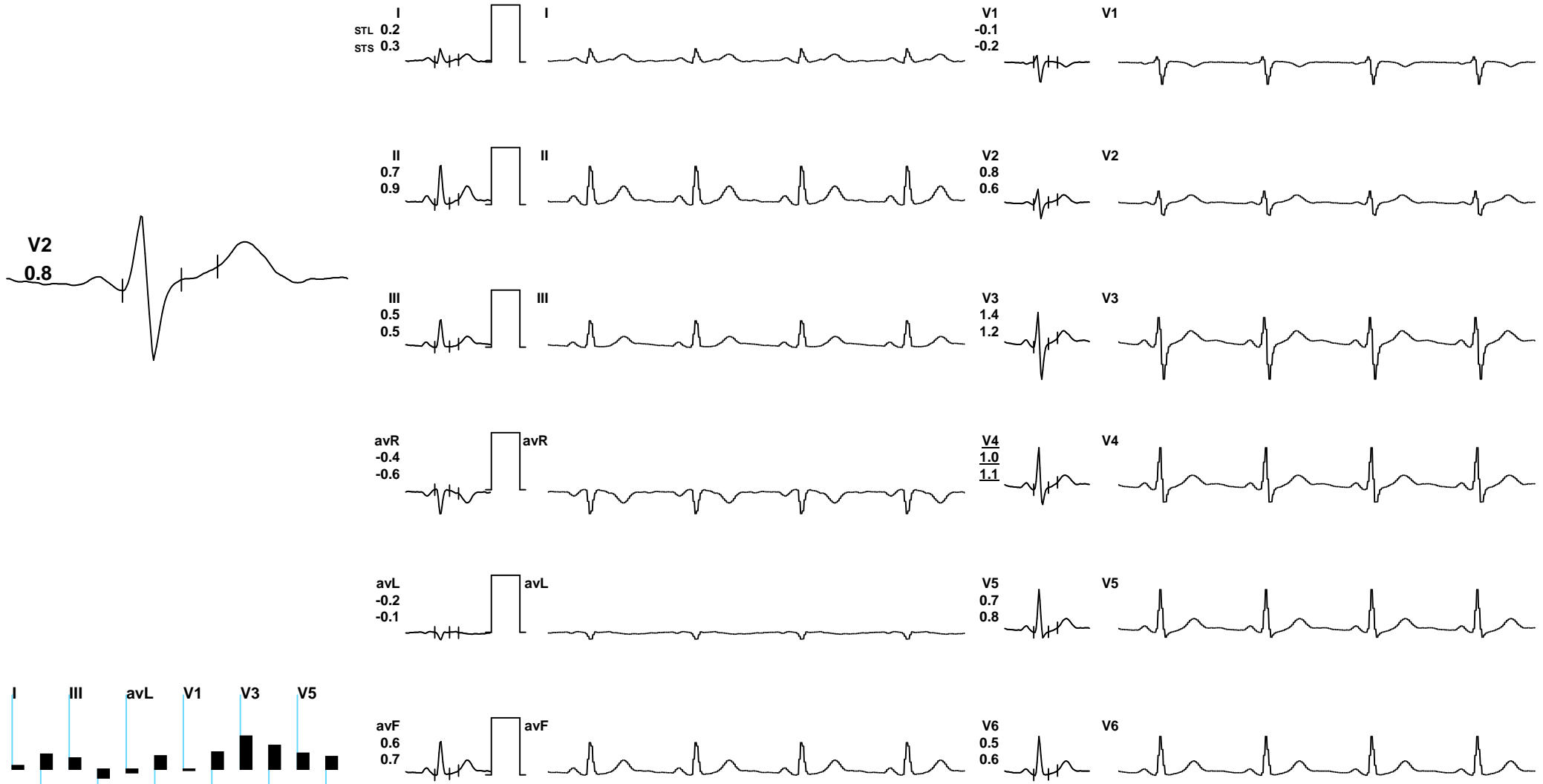
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 80

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 80 bpm 43% of THR BP: ---/--- mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

I II III avL V1 V3 V5  
II avR avF V2 V4 V6



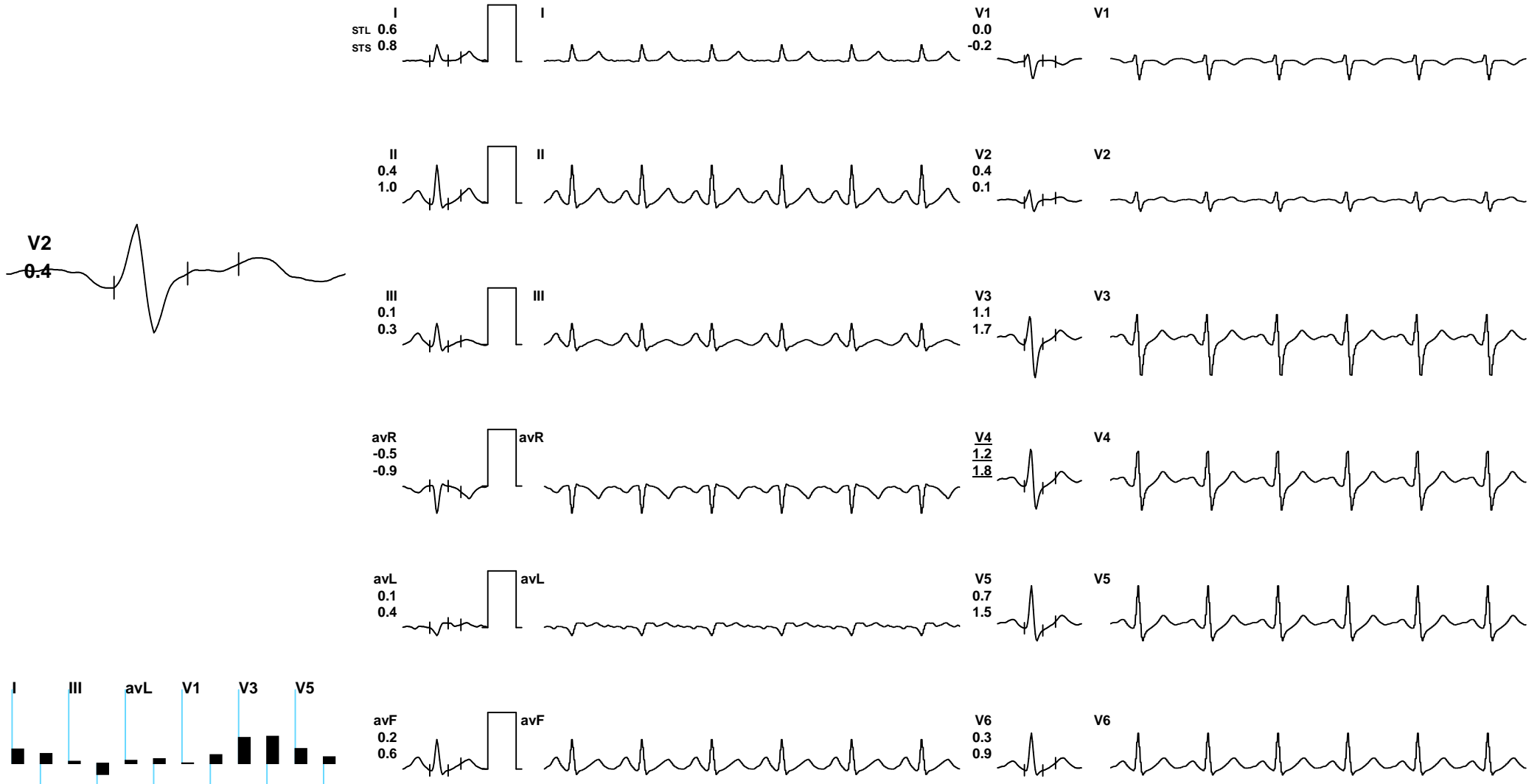
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 120

Date: 10 / 01 / 2024 04:04:44 PM METS: 4.7/ 120 bpm 65% of THR BP: 120/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 03:00 1.7 mph, 10.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



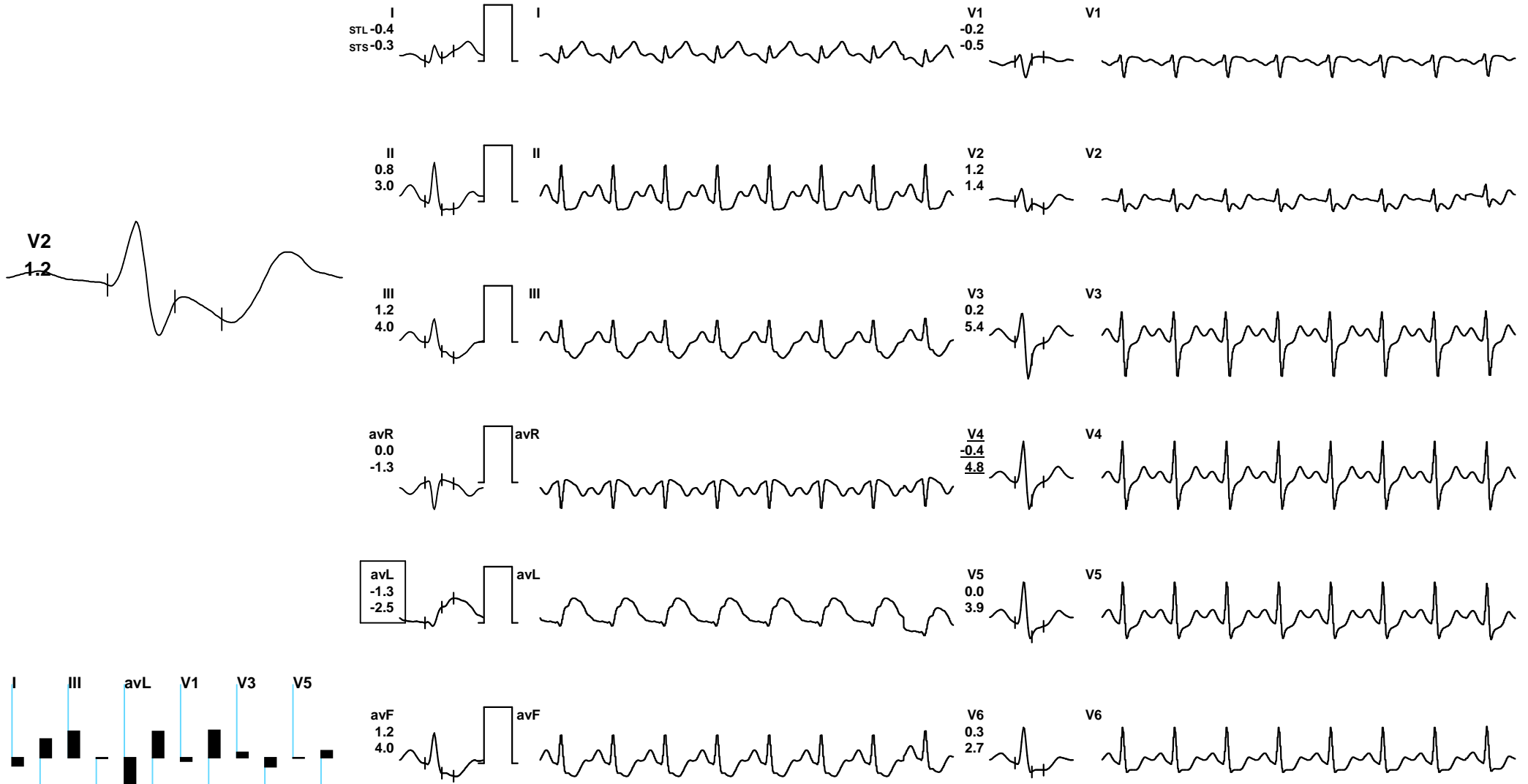
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 143

Date: 10 / 01 / 2024 04:04:44 PM METS: 6.8/ 143 bpm 78% of THR BP: 140/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 2.5 mph, 12.0%

4X 60 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:





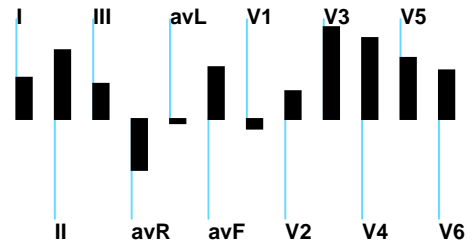
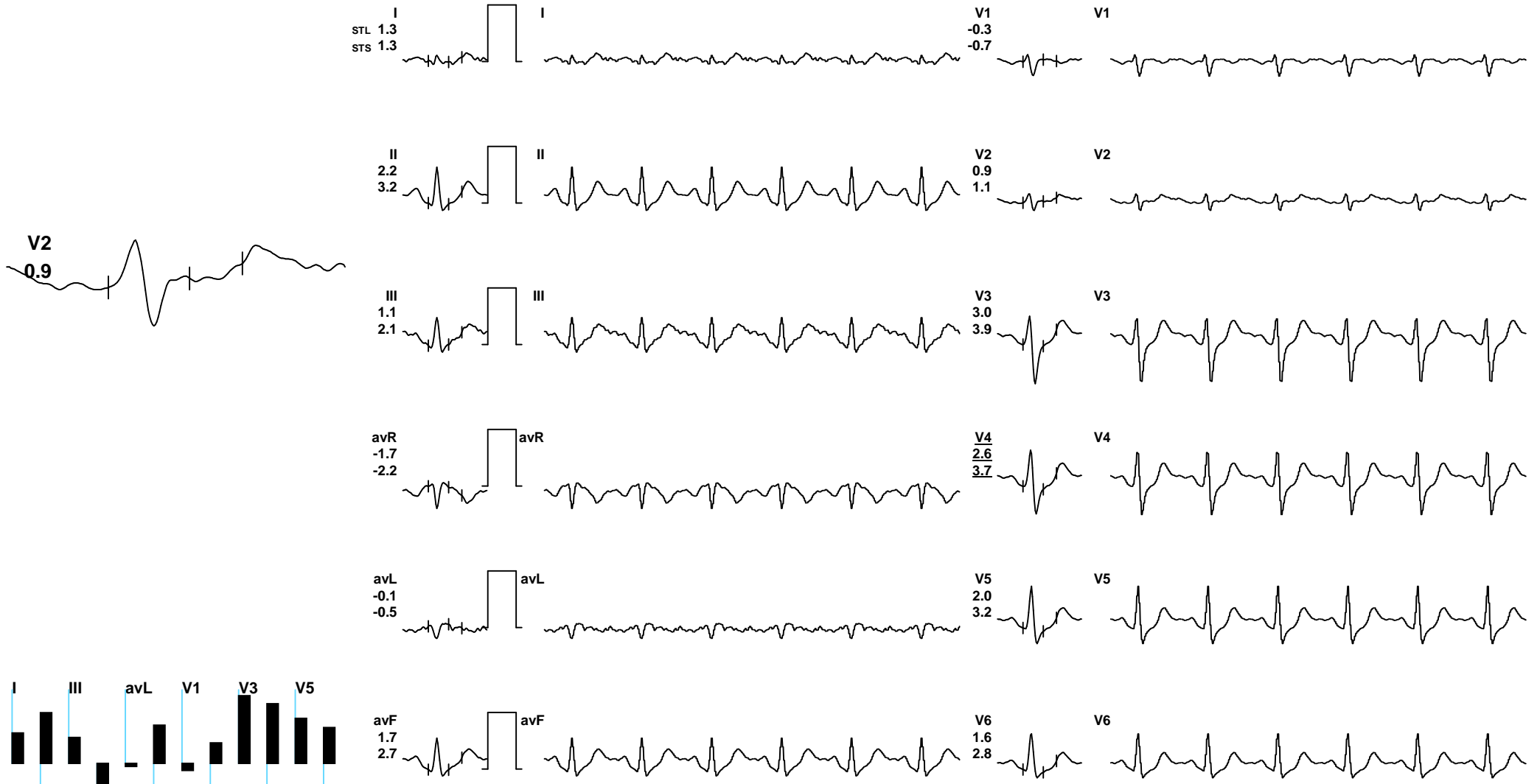
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 118

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 118 bpm 64% of THR BP: 140/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 1.1 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



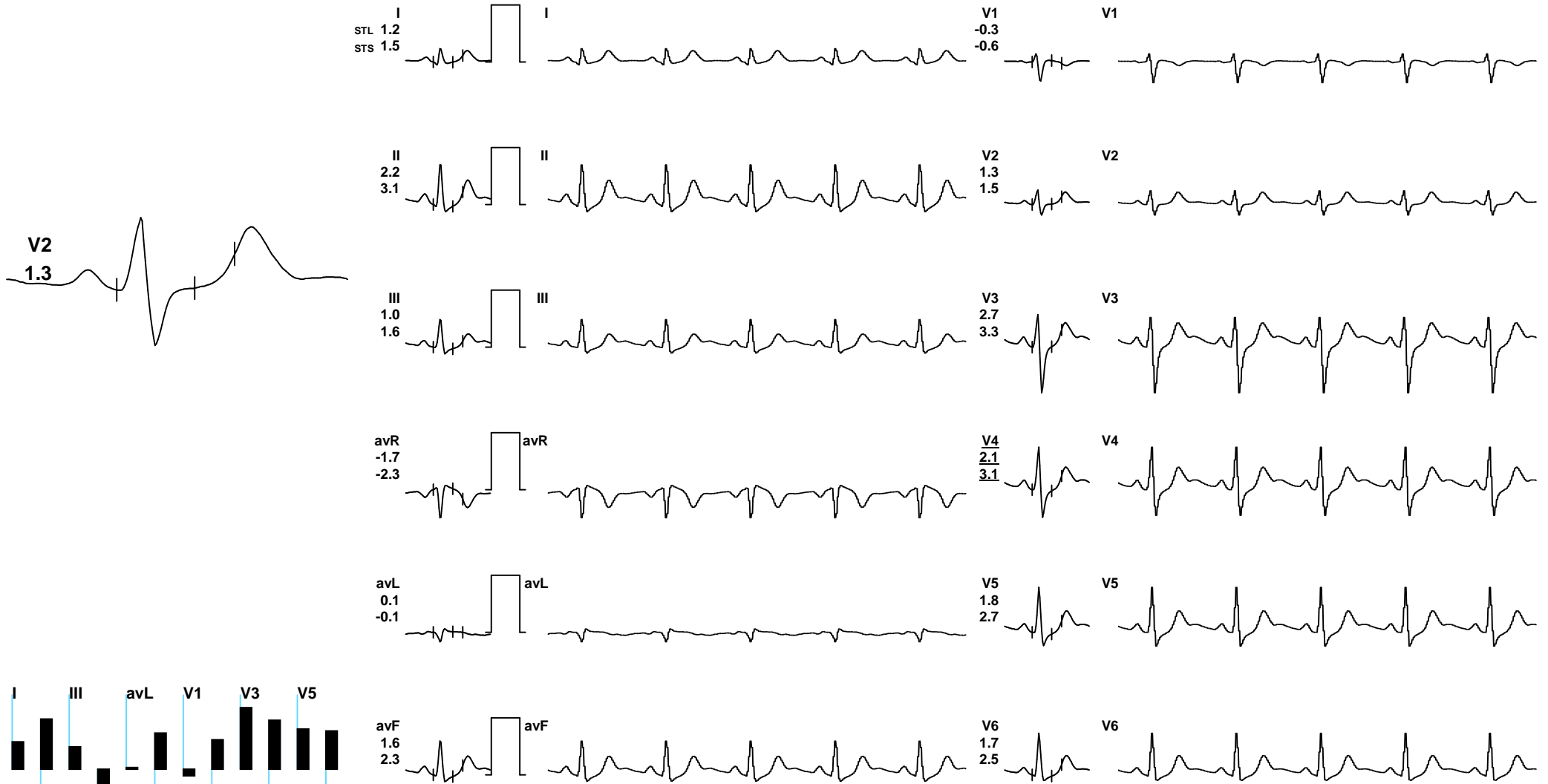
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 89

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 89 bpm 48% of THR BP: 140/90 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



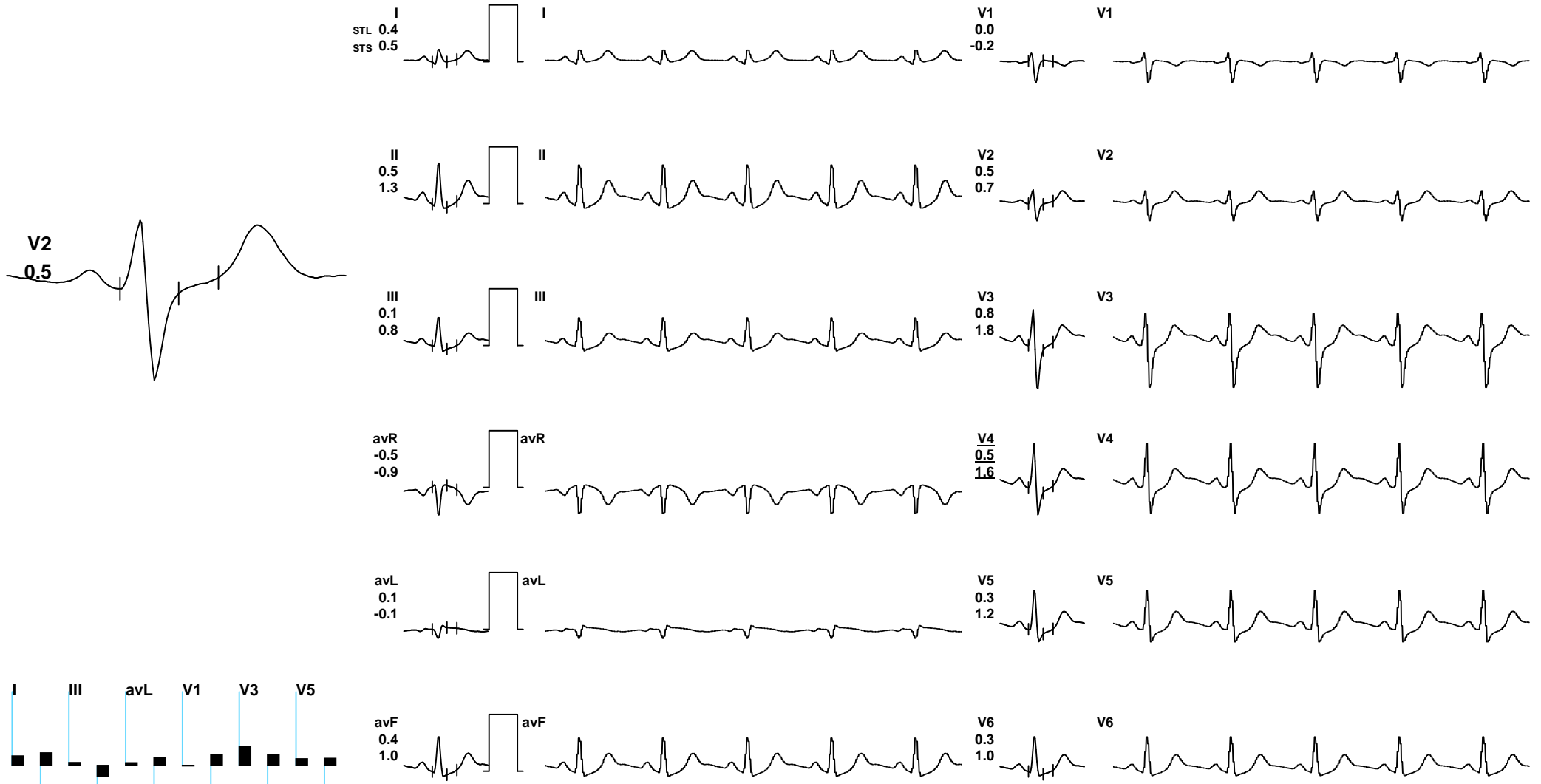
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 88

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 88 bpm 48% of THR BP: 130/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:





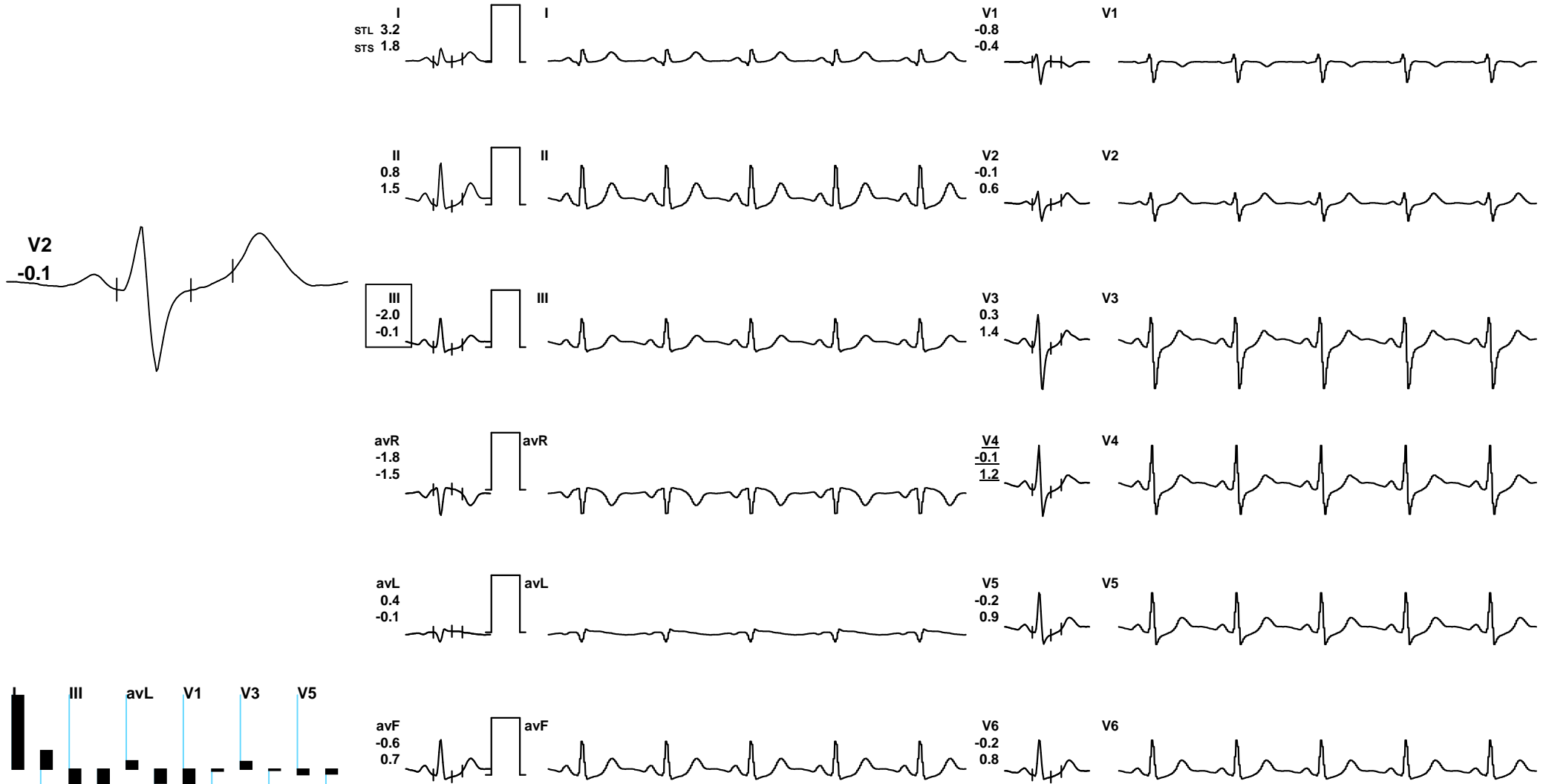
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 90

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 90 bpm 49% of THR BP: 120/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

ECG shows ST segment depression in leads I, II, III, aVL, and V2, which is consistent with myocardial ischemia. The ST segment depression is most pronounced in lead III (-0.1 mV) and lead aVL (-0.1 mV). The ST segment depression in lead V2 (-0.1 mV) is also significant. The ST segment depression in lead I (-0.8 mV) and lead aVF (-0.2 mV) is also present. The ST segment depression in lead V1 (-0.4 mV) is also present. The ST segment depression in lead V3 (0.3 mV) is also present. The ST segment depression in lead V4 (0.1 mV) is also present. The ST segment depression in lead V5 (0.9 mV) is also present. The ST segment depression in lead V6 (0.8 mV) is also present.



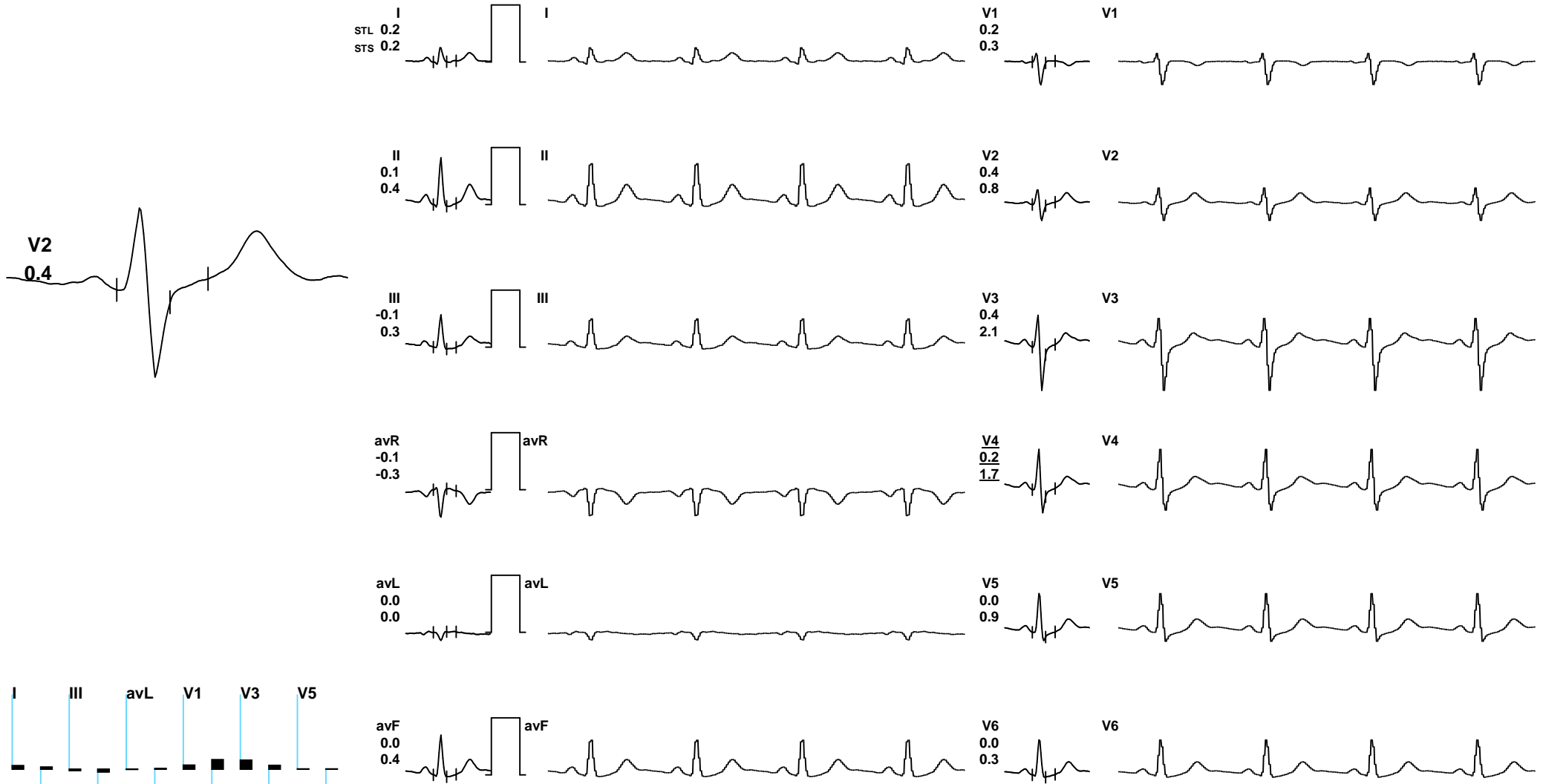
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 83

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 83 bpm 45% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



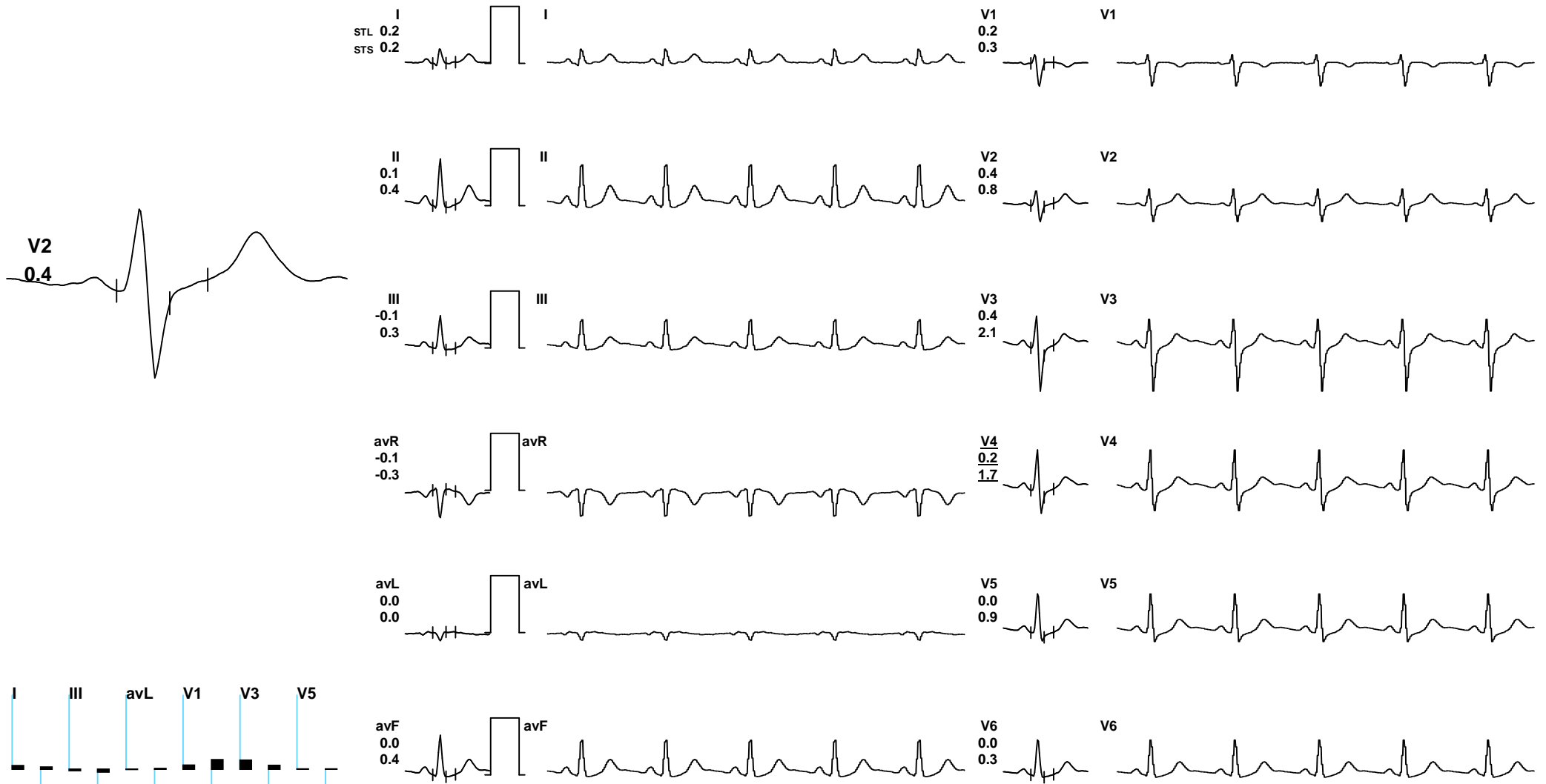
ankit kumar jain / 36 Yrs / M / 173 Cms / 74 Kg / HR : 89

Date: 10 / 01 / 2024 04:04:44 PM METS: 1.0/ 89 bpm 48% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

ExTime: 05:37 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:13	0:13	00.0	00.0	01.0	085	46 %	---/---	000	00	
Standing	00:26	0:13	00.0	00.0	01.0	081	44 %	---/---	000	00	
ExStart	00:39	0:13	00.0	00.0	01.0	080	43 %	---/---	000	00	
BRUCE Stage 1	03:39	3:00	01.7	10.0	04.7	120	65 %	120/80	144	00	
PeakEx	06:16	2:37	02.5	12.0	06.8	143	78 %	140/90	200	00	
Recovery	07:16	1:00	01.1	00.0	01.0	118	64 %	140/90	165	00	
Recovery	08:16	2:00	00.0	00.0	01.0	089	48 %	140/90	124	00	
Recovery	09:16	3:00	00.0	00.0	01.0	088	48 %	130/80	114	00	
Recovery	10:16	4:00	00.0	00.0	01.0	090	49 %	120/80	108	00	
Recovery	11:16	5:00	00.0	00.0	01.0	083	45 %	110/80	091	00	
Recovery	11:19	5:03	00.0	00.0	01.0	089	48 %	110/80	097	00	

**FINDINGS :**

**Exercise Time** : 05:37

**Initial HR (ExStrt)** : 80 bpm 43% of Target 184

**Initial BP (ExStrt)** : 0/0 (mm/Hg)

**Max WorkLoad Attained** : 6.8 Fair response to induced stress

**Max ST Dep Lead & Avg ST Value** : III & -2.0 mm in Recovery

**Duke Treadmill Score** : 04.8

**Test End Reasons** : Test Complete

**Max HR Attained** 143 bpm 78% of Target 184

**Max BP Attained** 140/90 (mm/Hg)

**VO2Max** : 23.8 ml/Kg/min (Very Poor)

**REPORT :**