



# एक एहसास क्षमनेपन का Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)  
(Formerly known as Paedia Health Private Limited )  
CIN : U85110CT2005PTC017751



UHID	: 159453	VISITID	: O000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414182
		RESULT DATE	: 14/01/2023 2:04:00PM
		TPA	: MEDIWHEEL

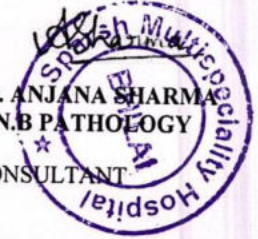
## DEPARTMENT OF PATHOLOGY

### ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	05 mm at end of 1 hr	Normal	0 - 15

TECHNICIAN

Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.



# एक एहसास श्रमनेपन का Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)  
(Formerly known as Paedia Health Private Limited )  
CIN : U85110CT2005PTC017751



UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414175
		RESULT DATE	: 14/01/2023 12:59:00PM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	4.93 mg/dL	High	0.1 - 1.2
BILIRUBIN DIRECT	0.75 mg / dl	High	0.1 - 0.6
BILIRUBIN INDIRECT	4.18 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	63 U / L	Normal	0 - 270
SGOT	26 U / L	Normal	10 - 55
SGPT	21 U / L	Normal	0 - 40
TOTAL PROTEIN	7.62 g / dl	Normal	6 - 8
ALBUMIN	4.96 g/dl	Normal	4 - 5
GLOBULIN	2.66 g / dl	Normal	2 - 3.5
A.G.RATIO	1.86:1		1 - 2.5

TECHNICIAN



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414178
		RESULT DATE	: 14/01/2023 11:13:00AM
		TPA	: MEDIWHEEL

**DEPARTMENT OF PATHOLOGY**

**URINE ROUTINE AND MICROSCOPY**

PARAMETER	VALUE	RESULT	REFERENCE RANGE
<b>PHYSICAL EXAMINATION</b>			
QUANTITY	10 ml		
COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION	Acidic		
<b>CHEMICAL EXAMINATION</b>			
ALBUMIN	Nil		
SUGAR	Nil		
<b>MICROSCOPIC EXAMINATION</b>			
EPITHELIAL CELLS	1-2 /hpf		0 - 5
PUS CELLS	Occasional /hpf		1 - 2
RBC	Nil /hpf		
CAST	Nil /lpf		
CRYSTAL	Nil		
AMORPHOUS MATERIAL DEPOSIT	Nil		
OTHERS	Nil		

TECHNICIAN

*(Signature)*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT  
Sparsh Multispecialty Hospital

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.



# Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)  
(Formerly known as Paedia Health Private Limited)  
CIN : U85110CT2005PTC017751

एक एहसास क्षमनेपन का



UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414181
		RESULT DATE	: 14/01/2023 1:00:00PM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HBA1 C (GLYCOSYLATED HEAMOGLOBIN)	5.5 %	Normal	4 - 6

#### Interpretation

As per American diabetes Association (ADA)

Reference Group	- HbA1c In%
Non diabetic $\geq 18$ years	- 4.0 - 6.0
At risk (Prediabetes)	- $\geq 6.0$ to $\leq 6.5$
Diagnosing diabetes	- $\geq 6.5$

#### Therapeutic goals for glycemic control

- Age  $> 19$  years
- Goal of therapy:  $< 7.0$
- Action suggested:  $> 8.0$
- Age  $< 19$  years
- goal of therapy:  $< 7.5$

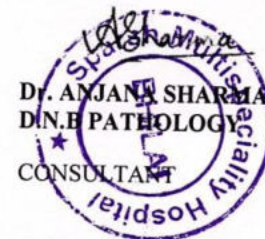
#### Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c. converse is true for a diabetic previously under good control now poorly controlled.
2. Target goals of  $< 7.0$  % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, 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 glycemic control as compared to blood and urinary glucose determination.

TECHNICIAN



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414172
		RESULT DATE	: 14/01/2023 1:42:00PM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### T3, T4 TSH

PARAMETER	VALUE	RESULT	REFERENCE RANGE
T3 (TRIIODOTHYRONINE)	1.72 ng/ml	Normal	0.69 - 2.15
T4 (THYROXINE)	104.8 ng/ml	Normal	52 - 127
TSH (THYROID STIMULATING HORMONE)	1.47 uIU/ml	Normal	0.3 - 4.5

REFERENCE GROUP REFERENCE RANGE in uIU/mL  
As per American Thyroid Association

Adult Females (> 20 years)	0.30 - 4.5
Pregnancy	
1st Trimester	0.10 - 2.50
2nd Trimester	0.20 - 3.00
3rd Trimester	0.30 - 3.00

#### Note:

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. Hence time of the day has influence on the measured serum TSH concentrations.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

TECHNICIAN

*Anjana Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414172
		RESULT DATE	: 14/01/2023 1:42:00PM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### SERUM PSA TOTAL

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PSA (TOTAL)	0.40 ng/ml	Normal	0 - 4

**Note:**

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liquifies semen in the terminal coagulum and allows sperms to swim freely. Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is an accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

**Clinical Use**

- 1) An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- 2) Followup and management of Prostate cancer patients
- 3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

**Note:**

- 1) Diagnosis of a disease should not be based on the result of a single test, but should be determined in conjunction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA) may give falsely elevated or decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3) Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

TECHNICIAN

*Dr. Anjana Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414177
		RESULT DATE	: 14/01/2023 4:13:00PM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
<b>BLOOD SUGAR - FASTING AND PP</b>			
BLOOD SUGAR FASTING	100 mg/dL	Normal	80 - 120
BLOOD SUGAR PP	214 mg/dL	High	120 - 140
<b>URINE SUGAR FASTING</b>			
URINE FOR SUGAR	Nil	-	-
<b>URINE SUGAR PP</b>			
URINE FOR SUGAR	Nil	-	-

TECHNICIAN

*Dr. Anjana Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY

CONSULTANT



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.







# Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)  
(Formerly known as Paedia Health Private Limited )  
CIN : U85110CT2005PTC017751

एक एहशास श्रुपनेपन का



UHID : 159453  
PATIENT NAME : MR. DIGVIJAY KUMAR GENDRE  
AGE/SEX : 41Y/MALE  
CONSULTANT DOCTOR : HOSPITAL CASE  
VISITID : 0000298943  
ORDER DATE : 14/01/2023 9:54:00AM  
SAMP. DATE : 14/01/2023 10:17:00AM  
SPEC. NO : 10414172  
RESULT DATE : 14/01/2023 12:59:00PM  
TPA : MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
<b>BUN (BLOOD UREA NITROGEN)</b>			
BUN (BLOOD UREA NITROGEN)	9.34 mg / dl	Normal	8 - 23
<b>GGT (GAMMA GLUTAMYL TRANSFERASE)</b>			
GGT (GAMMA GLUTAMYL TRANSFERASE)	20 U / L	Normal	8 - 52
<b>URIC ACID</b>			
URIC ACID	4.48 mg/dL	Normal	3.6 - 7.7

TECHNICIAN

*A. Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT



NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	VISITID	: 0000298943
PATIENT NAME	: MR. DIGVIJAY KUMAR GENDRE	ORDER DATE	: 14/01/2023 9:54:00AM
AGE/SEX	: 41Y/MALE	SAMP. DATE	: 14/01/2023 10:17:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10414180
		RESULT DATE	: 14/01/2023 11:57:00AM
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### CBC (COMPLETE BLOOD COUNT)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	15.9 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	4.10 Million/cumm	Low	4.5 - 5.9
HAEMATOCRIT (PCV)	43.6 %	Normal	41.5 - 50.4
RBC INDICES			
MCV	106.4 fl	High	78 - 96
MCH	38.7 pg	High	27 - 32
MCHC	36.4 %	Normal	33 - 37
RDW	15.4 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	6200 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	52 %	Normal	0 - 75
LYMPHOCYTES	32 %	Normal	22 - 48
EOSINOPHILS	02 %	Normal	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	342000 /cumm	Normal	150000 - 450000

TECHNICIAN

*Dr. Anjana Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT  
BHILAI  
Speciality Hospital

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.



# Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)

(Formerly known as Paedia Health Private Limited)

CIN : U85110CT2005PTC017751

एक एहसास अनेपेन का



UHID : 159453  
PATIENT NAME : MR. DIGVIJAY KUMAR GENDRE  
AGE/SEX : 41Y/MALE  
CONSULTANT DOCTOR : HOSPITAL CASE  
VISITID : 0000298943  
ORDER DATE : 14/01/2023 9:54:00AM  
SAMP. DATE : 14/01/2023 10:17:00AM  
SPEC. NO : 10414173  
RESULT DATE : 14/01/2023 12:59:00PM  
TPA : MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### LIPID PROFILE

PARAMETER	VALUE	RESULT	REFERENCE RANGE
CHOLESTEROL TOTAL	130 mg / dl	Low	150 - 220
TRIGLYCERIDES - SERUM	59 mg / dl	Low	60 - 165
HDL	36.48 mg / dl	Normal	35 - 80
LDL	81.72 mg/dL	Low	90 - 160
VLDL	11.80	Low	20 - 50
CHOL : HDL Ratio	3.56:1		3.5 - 5.5
LDL: HDL Ratio	2.24:1		-

TECHNICIAN

*Dr. Anjana Sharma*  
Dr. ANJANA SHARMA  
D.N.B PATHOLOGY  
CONSULTANT  
Sparsh Multispecialty Hospital  
BHILAI

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

UHID	: 159453	Visit ID	: 0000298943
Patient Name	: MR. DIGVIJAY KUMAR GENDRE	Spec No.	:
Age / Sex	: 41Y / MALE		:
Consultant	: DR. HOSPITAL CASE	Order Date	: 14/01/2023 9:54AM
Ref. By	: DR. HOSPITAL CASE	Samp.Date	:
Category	: MEDIWHEEL	Report Date	: 14/01/23 01:22PM

**X-RAY**  
**X-RAY CHEST PA. VIEW**

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

**IMPRESSION**

- No Remarkable Abnormality Detected .
- Please correlate clinically

Dr. SAMIR KATHALE  
MBBS, DNB(RADIO) MNAMS, MANBD  
Fetal Ultrasound & Fetal Medicine (FGI-BFMC)  
Reg No: CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference.

UHID	: 159453	Visit ID	: 0000298943
Patient Name	: MR. DIGVIJAY KUMAR GENDRE	Spec No.	:
Age / Sex	: 41Y / MALE		:
Consultant	: DR. HOSPITAL CASE	Order Date	: 14/01/2023 9:54AM
Ref. By	: DR. HOSPITAL CASE	Samp. Date	:
Category	: MEDIWHEEL	Report Date	: 14/01/23 01:14PM

## SONOGRAPHY USG WHOLE ABDOMEN

- \* **LIVER** : Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen.
- \* **PORTO CAVAL SYSTEM**: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- \* **COLLECTING DUCT & CBD**: Normal in size and have echo lucent lumen.
- \* **GALL BLADDER** : Seen in distended state with normal wall and lumen is echofree
- \* **SPLEEN**: Normal in size, shape & echo texture. No focal lesions seen.
- \* **PANCREAS**: Pancreatic head, body & tail visualized and have normal size, shape & echo texture.
- \* **KIDNEYS**: Both kidneys are of normal shape, size and position.  
Cortical thickness is normal. CMD is maintained. There is no evidence of hydronephrosis or calculus
- \* **URINARY BLADDER** : Seen in distended state and has normal wall architecture. Lumen is echo free.
- \* **PROSTATE**: Normal in shape, size and echotexture. No median lobe bulge is seen.
- No free fluid is seen in the peritoneal cavity.  
There is no evidence of any retroperitoneal lymphadenopathy/mass.

### FINAL IMPRESSION :

- No remarkable Abnormality detected in the current scan.

Please correlate clinically

**Dr. SAMIR KATHALE**  
MBBS, DNB(RADIO), DINAMS, MANBD  
Fetal Ultrasound & Fetal Medicine (PGI-BFMC)  
Reg No: CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference