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 बैंक ऑफ बड़ोदा
Bank of Baroda



नाम रंजीत कुमार

Name RANJIT-KUMAR

कर्मचारी कूट क्र. 175249
E.C. No.

राजि.क.प्रा.क्र. 175249
Issuing Authority, DGM/DRM (V.R.)



Ranjit Kumar
Signature of holder

22/01/1982

130
90

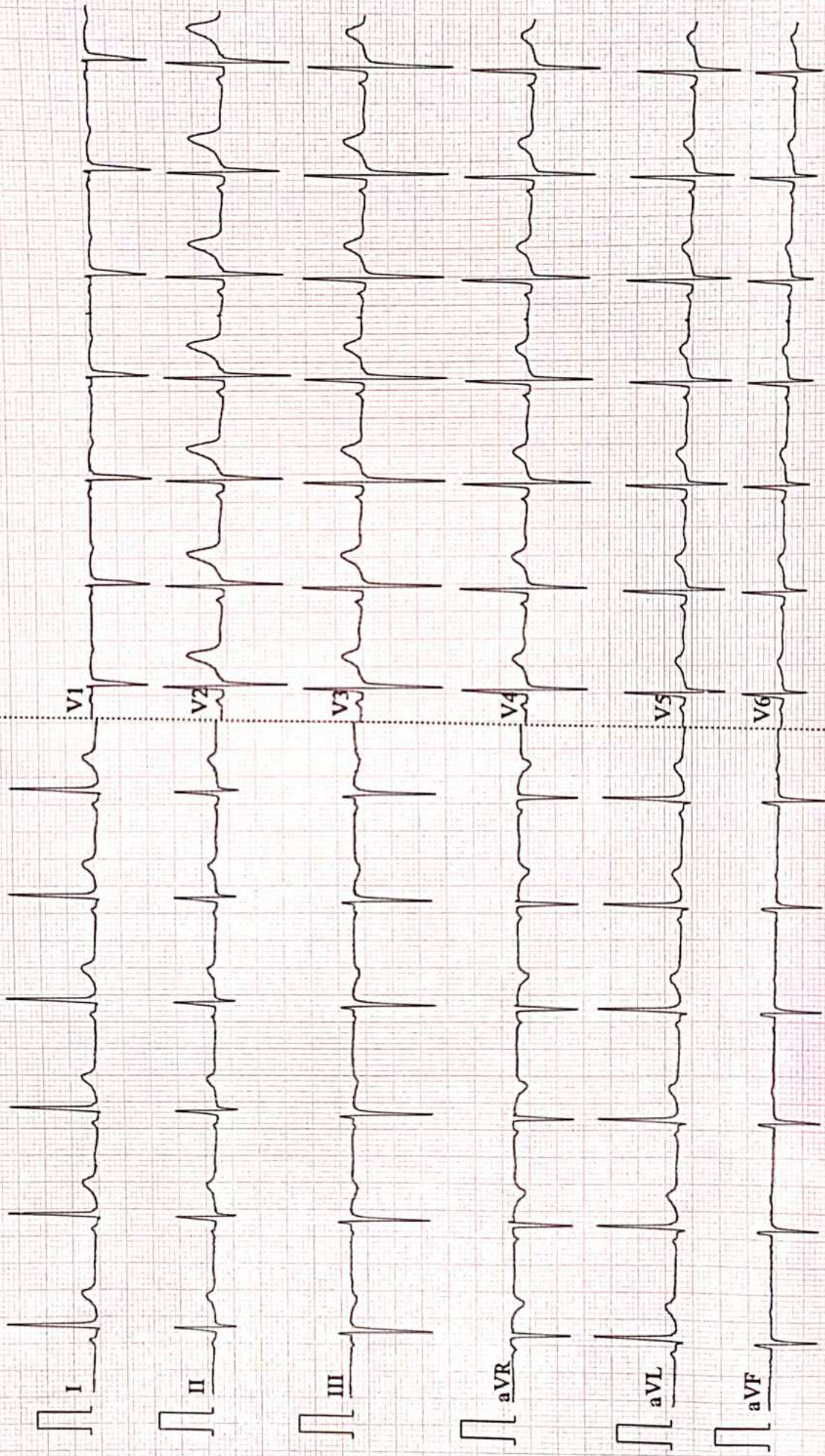
RANJIT KUMAR
Male 41Years

Diagnosis Information:

Sinus Rhythm
Short PR Interval
High Voltage(Left Ventricle)

HR : 78 bpm
P : 63 ms
PR : 108 ms
QRS : 78 ms
QT/QTc : 357/408 ms
P/QRS/T : 8/-16/11 °
RV5/SV1 : 1.117/1.060 mV

Ref-Phys. :
Report Confirmed by:





Name :- Mr. Ranjit Kumar
Refd by :- BOB.

Age/Sex:- 41Yrs/M
Date :-30/07/23

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Mild enlarged in size(14.9cm) with raised echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size(10.1cm)with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.5 cm and Left Kidney measures 10.6cm.
- U. Bladder**:- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (13 cc) & echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:-

Mild hepatomegaly with Grade-I Fatty Changes Liver.

Dr. U. Kumar
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist



ISO 9001 : 2015

AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna – 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	30/07/2023	Srl No.	5	Patient Id	2307300005
Name	Mr. RANJIT KUMAR	Age		Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.2	%	

EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	12.0	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,700	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	64	%	40 - 75
LYMPHOCYTE	32	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	03	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN' s METHOD)	13	mm/1st hr.	0 - 15
R B C COUNT	3.67	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	36	%	40 - 54
M C V	98.09	fl.	80 - 100
M C H	32.7	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.28	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"AB"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	75.2	mg/dl	70 - 110
SERUM CREATININE	0.98	mg%	0.7 - 1.4
BLOOD UREA	26.2	mg /dl	15.0 - 45.0
SERUM URIC ACID	6.5	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			



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Name	Mr. RANJIT KUMAR	Age		Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.65	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.24	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.41	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.8	gm/dl	6.6 - 8.3
ALBUMIN	3.9	gm/dl	3.4 - 5.2
GLOBULIN	2.9	gm/dl	2.3 - 3.5
A/G RATIO	1.345		
SGOT	36.3	IU/L	5 - 40
SGPT	39.3	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	90.12	U/L	40.0 - 130.0
GAMMA GT	24.1	IU/L	8.0 - 71.0

LFT INTERPRET

LIPID PROFILE

TRIGLYCERIDES	82.1	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	151.9	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	49.6	mg/dL	35.1 - 88.0
V L D L	16.42	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	85.88	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.063		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.731		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



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Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.015		
PH	6.0		
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	1-3	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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Test Name	Value	Unit	Normal Value
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.			
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.			

**** End Of Report ****

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