

39



Ph.: 0621-2222211, 0621-2268042, Mob. : 9661179794, 9471013402

URMILA HEART & MULTI SPECIALITY HOSPITAL

उर्मिला हार्ट एण्ड मल्टी स्पेशियलिटी हॉस्पिटल

Naya Tola, Opp. Polytechnic, Muzaffarpur

डॉ० अनिल कुमार सिंह

एम.बी.बी.एस., डीप.कार्ड, पी.जी.डी.सी.सी., एफ.सी.आर.
(अपोलो हॉस्पिटल)

फिजिसियन एवं हृदय रोग विशेषज्ञ

सदर अस्पताल, मुजफ्फरपुर

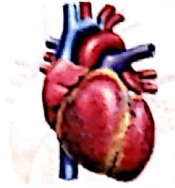
भूतपूर्व कार्डियोलोजिस्ट

फोर्टिस हॉस्पिटल, इस्काट हार्ट इन्सटिट्यूट, नई दिल्ली

सरकारी मेडिकल कॉलेज, एच.ए.एल.डी. (यू.के.)

पुष्पांजली हॉस्पिटल, आगरा

मेम्बर ऑफ आई.ए.सी.सी.



समय :-

सुबह 12 बजे से 03 बजे तक
शाम 6:30 बजे से रात्रि 8 बजे तक

Dr. Anil Kumar Singh

M.B.B.S. DIP Card, PGDCC, FCR (Apollo Hospital)

Cardiologist & Consultant Physician

Sadar Hospital, Muzaffarpur

Ex. Cardiologist

Fortis Hospital, Escorts Heart Institute, New Delhi

Govt. Medical College, HALD (UK)

Pushpanjali Hospital, Agra

Member of IACC

Reg. No. : MCI 29808

Pt. Name Mr. Sanjay Kumar Chauraiya Date

Address B.O.B Age 25 Sex M Wt. B.P.

BP - 120/80 mmHg.

O/E

Pallor - Present

Test

ECG, CBC,
PBS, BSF, BSPP.



शनिवार को केवल Emergency मरीज देखा जाएगा।

Valid for 20 Days

Not Valid for Medico Legal Purpose



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PATHOLOGY REPORT

Name:- Mr. Sanjay Kumar Chaurasiya

Age :25Y/M

Date :-02/12/2023

Ref. By :- Dr. Bank Of Barauda

(E.C.No 120128)

Serial Number :- 0230

CBC (Complete Blood Count)

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
Hb (Haemoglobin)	14.0	gm/dl	12 - 17
Total Leukocyte Count	8,700	/Cumm.	4000 - 11000
RBC Count	5.46	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	43.5	%	30 - 50
Platelet Count	1.55	Lakhs/c.mm	1.5 - 4.5
MCV	95.4	fl	80 - 100
MCH	30.3	pg	26 - 34
MCHC	32.8	gm/dl	31.5 - 35
Differential Leukocyte Count			
Neutrophil	60	%	40 - 70
Lymphocyte	25	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	13	%	01 - 06
Basophil	00	%	< 1 - 2 %
ESR	18	mm/1 st hr.	00 - 20

end of report

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Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	250.0	mg/dl	130 - 200
S. Triglycerides	180.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	36.0	mg/dl	10 - 40
S. HDL-Cholesterol	60.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	154.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	4.16		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.56		1.5 - 3.5

BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Random	80.0	mg/dl	70 - 160

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LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.85	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	33.0	U/L	05 - 40
S. SGOT (AST)	30.0	U/L	05 - 40
S. GGT	37.0	U/L	05 - 45
S. Alkaline Phosphatase	98.0	U/L	Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390
S. Total Protein	7.18	g/dl	6.0 - 8.3
S. Albumin	3.90	g/dl	3.2 - 5.0
S. Globulin	3.28	g/dl	2.8 - 4.5
S. A/G Ratio	1.18		

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TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	150.3	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	11.3	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	5.01	µIU/mL	(0.3 - 5.5)

Technology :

- T3 - Competitive Chemi Luminescent Immuno Assay
- T4 - Competitive Chemi Luminescent Immuno Assay
- TSH - Ultra Sensitive Sandwish Competitive Chemi Luminescent Immuno Assay

REMARK :

THYROID HORMONES -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism.The expected increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland.Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism.The increase in total T4 and T3 is associated with pregnancy,oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration,which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR).a
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GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	4.18	%

Mean Blood Glucose level (MBG) – 88.4 mg/dl

Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

Summary :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

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Urine Routine And Microscopy

TEST

Physical Examination

Volume

20 ml

Colour

Straw

Specific Gravity

1.025

Appearance

Clear

pH

6.5

(Acidic)

Chemical Examination

Protein

Nil

Sugar

Nil

Bile Salts

N/D

Bile Pigments

N/D

Microscopic Examination

Pus Cells

2-3 /hpf

Red Blood Cells

Nil /hpf

Epithelial Cells

Present (+)

Crystal/Cast

Nil

Other

Nil

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KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Value</u>
S. Urea	23.0	mg/dl	13 - 45
S. Creatinine	0.88	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	10.74	mg/dl	6.0 - 21
S. Sodium (Na')	144.3	mmol/ltr	135 - 150
S. Potassium(K')	4.90	mmol/ltr	3.5 - 5.5
S. Chloride(Cl')	103.5	mmol/ltr	94 - 110
S. Calcium	9.19	mg/dl	8.7 - 11.0
S. Uric Acid	6.50	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

BLOOD GROUPING

Grouping (ABO)	:	"A" Group
Rh Typing	:	Positive.

end of report

Signature

