

**24X7 {Helpline - 7835 999 444 , 7835 999 555}**


<b>UMR NO / IP No</b> : FHP25089504112022 / NA	<b>Bill Date</b> : 09-Nov-2024 10:00 AM
<b>Name</b> : Mr . RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 12:10 PM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 03:59 PM
<b>Specimen Type</b> : Urine	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

### CLINICAL PATHOLOGY

BAR CD : 2411090521

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
<b>URINE ROUTINE AUTOMATED</b>			
<b>Physically Examinationj</b>			
Volume (ml)	40	ML	>10
Colour (Naked eye)	Pale yellow		PALE YELLOW
Appearance	Clear		Clear
Specific Gravity (Pre treated ion exchange resin)	1.020		1.005- 1.030
pH (Double Indicator)	6.0		5.0 - 8.5
Urine Protein (Tetra bromophenol)	NEGATIVE		NEGATIVE
Urine Glucose (GOP Chromogen)	NEGATIVE		NEGATIVE
Ketones (Na-Nitropruside reaction)	NEGATIVE		NEGATIVE
Bilirubin (Diazonium Salt)	NEGATIVE		NEGATIVE
Urobilinogen (Diazonium salt)	NEGATIVE		NEGATIVE
Blood (Tetramethyl benzadine)	NEGATIVE		NEGATIVE
Leucocytes Esterase (Diazonium method)	NEGATIVE		NEGATIVE
Nitrite (Diazonium compound coupling)	NEGATIVE		NEGATIVE
<b>Microscopy</b>			
R.B.C	NIL	/hpf	0 - 2
Pus cells	2-3	/hpf	0 - 5
Epithelial cells	0-1	/hpf	0 - 3
Casts	ABSENT	/hpf	
Crystals	ABSENT	/hpf	
Bacteria	NEGATIVE		NEGATIVE

\*\*\* End Of Report \*\*\*



Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By : User : EC4902  
Print Date : 11-Nov-2024 04:41 PM

## 24X7 {Helpline - 7835 999 444 , 7835 999 555}

<b>UMR NO / IP No</b> : FHP25089504112022 / NA	<b>Bill Date</b> : 09-Nov-2024 10:00 AM
<b>Name</b> : Mr . RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 10:19 AM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 02:45 PM
<b>Specimen Type</b> : Serum	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

### IMMUNOLOGY

BAR CD : 2411090364

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
<b>THYROID PROFILE TOTAL(T3,T4,TSH)</b>			
T3 (CLIA)	1.74	nmol/l	1.11-2.29
T4 (CLIA)	150.08	nmol/l	62.00-201.40
TSH (CLIA)	2.40	µIU/ml	0.38-5.33

Comments :

**Comments:**

1. A circadian variation in serum TSH in healthy subjects is well documented. TSH level is reaching peak levels between 2-4 am 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 value of TSH.
2. TSH levels between 6.3 and 15.0 may represent subclinical or compensated hypothyroidism or show considerable physiological & seasonal variation, require clinical correlation or repeat testing with fresh sample.
3. TSH levels may be transiently altered because of non-thyroid illness, like severe infection, renal disease, liver disease, heart disease, severe burns, trauma, surgery etc. Few drugs also altered the TSH values.
4. A high TSH result often means an underactive thyroid gland caused by failure of the gland (hypothyroidism). A low TSH result can indicate an overactive thyroid gland (hyperthyroidism) or damage to the pituitary gland that prevents it from producing TSH.
5. Resistance to thyroid hormone (RTH) and central hyperthyroidism (CHH) are rare conditions associated with elevated TSH, T4 and T3 levels.

Please correlate clinically.

**\*\*\* End Of Report \*\*\***



**Dr. SUMIT MAKKAR**

MBBS,MD(Pathology)

Prepared By  
User : EC4758

Print Date : 11 Nov-2024 04:41 PM

**24X7 {Helpline - 7835 999 444 , 7835 999 555}**

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<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 11:45 AM
<b>Specimen Type</b> : Whole Blood	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

### HAEMATATOLOGY

BAR CD : 2411090363

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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#### BLOOD GROUP (RH TYPE)

Blood grouping	"O"		
Rh TYPING	Positive		

PARAMETER	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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#### HAEMOGRAM (CBC & ESR)

Haemoglobin ( Spectrophotometry )	14.30	g/dL	13- 17
Total WBC Count ( Flowcytometry and peripheral smear )	5,350		4000-10000
<b>Differential Count</b>			
Neutrophils ( Flowcytometry and peripheral smear )	47.2		40.00-80.00
Lymphocytes ( Flowcytometry and peripheral smear )	45.9		20.00-40.00
Monocytes ( Flowcytometry and peripheral smear )	4.7		2.00-10.00
Eosinophils ( Flowcytometry and peripheral smear )	2.2		1.00-6.00
Basophils ( Flowcytometry and peripheral smear )	0.0		0.00-1.00
Total RBC Count ( Electrical Impedence )	5.25	mil/cmm	4.50-6.50
HEMATOCRIT (PCV)	46.4	%	40.00-54.00
MCV ( Calculated )	88.2		80.00-100.00
MCH ( Calculated )	27.3	pg	27.00-32.00
MCHC ( Calculated )	30.9	%	31.50-34.50
PLATELETS ( Electrical Impedence )	1.72	x10 <sup>6</sup> /cmm	1.50-4.00
RDW-CV ( Calculated )	17.6	%	11.00-16.00
RDW-SD	57.7	f	39 - 52
PDW ( Calculated )	22.1	%	11 - 18
ESR ( WESTERGREN with Trisodium citrate whole blood )	06	mm at 1 hr.	0 - 15

\*\*\* End Of Report \*\*\*

Prepared By  
User : EC3758  
Print Dt : 11-Nov-2024 04:41 PM

*Dr. SUMIT MAKKAR*

MBBS,MD(Pathology)

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<b>Name</b> : Mr. RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 10:19 AM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 11:10 AM
<b>Specimen Type</b> : Fluoride Plasma	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr. PRIYANKA SINGH	

## BIOCHEMISTRY

BAR CD : 2411090365

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
<b>BLOOD SUGAR FASTING (BSF)</b>			
FASTING BLOOD SUGAR ( Glucose oxidase-peroxidase )	89.00	mg/dl	74 - 110

Comments :

*\*Please correlate clinically.*

**\*\*\* End Of Report \*\*\***

Dr. SUMIT MAKKAR

MBBS, MD (Pathology)

mg/dl

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User : EC3814  
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Dr. SUMIT MAKKAR

MBBS, MD (Pathology)

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<b>Name</b> : Mr . RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 02:13 PM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 03:42 PM
<b>Specimen Type</b> : Fluoride Plasma	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

**BIOCHEMISTRY**

BAR CD : 2411090636

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
<b>BLOOD SUGAR POST PRONDIAL (BSPP)</b>			
PPBS	126.0	mg/dl	80 - 140

Comments :

*\*Please correlate clinically.*

**\*\*\* End Of Report \*\*\***

Prepared By  
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Print Dt : 11-Nov-2024 04:41 PM

  
Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

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<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 11:56 AM
<b>Specimen Type</b> : Serum	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

### BIOCHEMISTRY

BAR CD : 2411090366

PARAMETER	RESULT	UNIT	
<b>GGTP</b>			
GAMMA GT ( Kinetic )	26.9	U/L	0 - 55

Comments :

Comments:

An increased GGT level may be due to any of the following:

- Alcohol use
- Diabetes
- Flow of bile from the liver is blocked (cholestasis)
- Heart failure
- Swollen and inflamed liver (hepatitis)
- Lack of blood flow to the liver
- Death of liver tissue
- Liver cancer or tumor
- Lung disease
- Pancreas disease
- Scarring of the liver (cirrhosis)
- Use of drugs that are toxic to the liver

### LIPID PROFILE

CHOLESTEROL ( CHOD-PAP )	190.9	U/L mg/dl	Normal: <200 Borderline High: 200-240 High: >240
TRIGLYCERIDES ( GPO-POD )	166.3	mg/dl	Normal: <200 Borderline High: 200-400 High: >400 Very High: >650
HDL CHOLESTEROL ( Enzymatic, colorimetric )	35.8	mg/dl	Low: <40 High: >60
LDL CHOLESTEROL ( Calculated )	121.84	mg/dl	OPTIMAL: < 100 mg/dl NEAR OPTIMAL: 100 - 129 mg/dl BORDERLINE HIGH: 130 - 159 mg/dl HIGH: 160 - 189 mg/dl VERY HIGH: > 190 mg/dl
VLDL CHOLESTEROL ( Calculated )	33.26	mg/dl	5 - 30
Cholesterol/HDL Ratio ( Calculated )	5.33		> 4.5 High risk of Coronary Artery Disease (The lower the better)

Comments :



Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

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<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 11:56 AM
<b>Specimen Type</b> : Serum	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

Comments :

*\*Please correlate clinically*

### LIVER FUNCTION TEST

BILIRUBIN (TOTAL) ( Sulphanilic acid, DMSO )	0.48	mg/dl	0.2-1.3
BILIRUBIN (DIRECT) ( Sulphanilic acid, DMSO )	0.22	mg/dl	0.0-0.3
BILIRUBIN (INDIRECT) ( Calculated )	0.26		0.0 - 1.10
SGOT (AST) ( IFCC without pyridoxal phosphate activation )	26.0	U/L	0 - 40
SGPT (ALT) ( IFCC without pyridoxal phosphate activation )	32.5	U/L	0 - 41
ALKALINE PHOSPHATASE ( PNPP )	81.1	U/L	38- 126
TOTAL PROTEINS ( Biuret )	7.50	g/dL	6.3-8.2
ALBUMIN ( Bromcresol Green (BCG) )	4.98	g/dL	3.5-5.0
GLOBULIN ( Calculated )	2.52	g/dL	2.8-3.2
A/G RATIO ( Calculated )	1.98		1.25-1.56:1

Comments :

*\*Please correlate clinically*

### KIDNEY FUNCTION TEST (KFT)

UREA	20.4	mg/dl	19 - 44
CREATININE ( Enzymatic )	0.60		0.7 - 1.2
URIC ACID ( Uricase, colorimetric )	6.20	mg/dl	3.50-7.20
CALCIUM ( Arsenazo III )	9.70	U/L	8.6 - 10.3
PHOSPHORUS ( Molybdate-UV )	5.60	mg/dl	2.6-4.5
SODIUM ( ISE )	138.0	mmol/l	135 - 145
POTASSIUM ( ISE )	4.15	mmol/l	3.5 - 5.5
CHLORIDE ( ISE )	101.0	mmol/l	98- 107

Comments :

*\*Please correlate clinically*

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MBBS,MD(Pathology)

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<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b>
<b>Specimen Type</b> :	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	

\*\*\* End Of Report \*\*\*

Prepared By  
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<b>Name</b> : Mr . RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 10:19 AM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 02:35 PM
<b>Specimen Type</b> : EDTA WB	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr.PRIYANKA SINGH	


## BIOCHEMISTRY

BAR CD : 2411090367

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
GLYCOSYLATED HAEMOGLOBIN (HB A1C)			
HBA1C	5.30	%	Non Diabetic : 4 - 6 Good Control : 6 - 7 Fair Control : 7 - 8 Poor Control : 8 - 10 Very Poor Control : > - 10

Comments :

Prepared By  
User : EC4758  
Print Dt : 11-Nov-2024 04:41 PM

  
Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

**24X7 {Helpline - 7835 999 444 , 7835 999 555}**

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<b>Name</b> : Mr. RAVI SHEKHAR	<b>Collection Date</b> : 09-Nov-2024 10:19 AM
<b>Age / Gender</b> : 36Y(s) / Male	<b>Reporting Date</b> : 09-Nov-2024 02:35 PM
<b>Specimen Type</b> :	<b>Type / Bed No</b> : CREDIT / OPD
<b>Doctor Name</b> : Dr. PRIYANKA SINGH	

Ref Range for HbA1c

Non Diabetic : < 5.7 %  
Pre-Diabetic : 5.7 - 6.5 %  
Diabetic : > 6.5 %

**Remark:** Hemoglobin A1c criteria for diagnosing diabetes have not been established for patients who are <18 years of age.

HbA1c goals in the treatment of diabetes:

Ages 0-6 years : 7.6% - 8.4%

Ages 6-12 years : 7.0% - 8.0%

Ages 13-19 years : <7.5%

Adults : <7%

**Comments:** HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better

Indicator of long term glycemic control as compared to blood and urine glucose determinations.

**(Note:** If a person has anemia, hemolysis, or heavy bleeding, HbA1c test results may be falsely low. If someone is iron-deficient, the HbA1c level may be increased. If a person has had a recent blood transfusion, the HbA1c may be inaccurate and may not accurately reflect glucose control for 1-2 months.)

ADA criteria for correlation between HbA1c & Mean plasma glucose levels:

HbA1c (%) :	6	7	8	9	10	11	12
Mean Plasma Glucose: (mg/dL)	126	154	183	212	240	269	298

\*Please correlate clinically.

\*\*\* End Of Report \*\*\*

Prepared By :  
User : EC4758  
Print Dt : 11 Nov-2024 04:41 PM

Dr. SUMIT MAKKAR  
MBBS,MD(Pathology)

**24X7 {Helpline - 7835 999 444 , 7835 999 555}**

## DEPARTMENT OF RADIOLOGY

Name	: Mr . RAVI SHEKHAR	UMR NO	: FHP25089504112022
AGE / GENDER	: 36Y(s)/ Male	IP NO	: NA
S/o W/o D/o	: RAVI SHEKHAR	BILL NO	: ROP24000207
LOCATION	: OPD	BILL DT & TIME	: 09-Nov-2024 10:00 AM
ADVISED BY	: DR.PRIYANKA SINGH	REPORTING DT & TIME	: 09-Nov-2024 12:08 PM

### ULTRASOUND WHOLE ABDOMEN MALE

**\*FINDINGS**

**Liver** is normal in size (134 mm) and shows **homogeneously raised echopattern**. No focal lesion is seen. Intrahepatic biliary radicles and venous channels appear normal.

**Gall bladder** is distended and shows smooth walls and the lumen is echofree. CBD is not dilated.

**Pancreas** is normal in size, shape and echotexture.

**Spleen** is normal in size (111 mm) and echotexture.

**Both kidneys** are normal in size, shape and echopattern. Cortico-medullary differentiation and parenchymal thickness is well maintained. No evidence of any pelvicalyceal separation is seen.

No evidence of any significant retroperitoneal lymphadenopathy is seen.

No evidence of fluid in peritoneal cavity.

**Urinary bladder** is normal in distensibility and wall thickness. The lumen is echofree.

**Prostate** is normal in size, shape and echotexture.

**IMPRESSION: Grade I fatty liver.**

**Advice: Clinical Correlation.**

End Of Report

Dr. PULKIT SONI  
MBBS, DMRD, DNB  
Consultant Radiologist

**24X7 {Helpline - 7835 999 444 , 7835 999 555}**

## DEPARTMENT OF CARDIOLOGY

Name	: Mr. RAVI SHEKHAR	UMR NO	: FHP25089504112022
AGE / GENDER	: 36Y(s)/ Male	IP NO	: NA
S/o/W/o/D/o	: RAVI SHEKHAR	BILL NO	: ROP24000207
LOCATION	: OPD	BILL DT & TIME	: 09-Nov-2024 10:00 AM
ADVISED BY	: DR.PRIYANKA SINGH	REPORTING DT & TIME	: 09-Nov-2024 01:14 PM

### TMT OR ECHO SCREENING

**\*FINDINGS**

INDICATIONS	SOB		
IMAGE QUALITY	GOOD	VIEWS	PLAX,PSAX,AP4CH,AP2CH

**REPORT :-**

MEASUREMENTS	ABSOLUTE VALUE	NORMAL VALUE	DOPPLER	ABSOLUTE VALUE	NORMAL VALUE
Aortic Root Diameter (mm)	29	23-34	Mitral E velocity (m/s)	0.68m/sec	0.6-1.3 m/s
Aortic valve excursion (mm)	18	>16	Mitral A velocity (m/s)	0.52m/sec	0.2-0.7 m/s
Left Atrial Dimension (mm)	32	25-40	Mitral E/A ratio	1.30	1-2
Left Ventricular ED Dimension (mm)	51	39-53	Mitral DT (msec)	182msec	160-240 msec
Left Ventricular ES Dimension (mm)	33	23-36	TAPSE (mm)	19mm	≥16 mm
Interventricular Septal Thickness (mm)	ED 08 ES 14	6-11	Peak Aortic velocity (m/s)	1.03 m/sec	1.0-1.7 m/s
Left Ventricular PW Thickness (mm)	ED 08 ES 12	6-11	Peak LVOT velocity (m/s)	-	0.7-1.1 m/s
EPSS (mm)	5 mm	<5	MV P 1/2 Time (msec)	-	msec
FS% (mm)	30 %	27-45%	Aortic P 1/2 Time (msec)	-	>500 msec
LV Ejection Fraction (mm)	60% ± 3%	>55%	Peak Pulmonary Velocity (m/s)	0.61m/sec	0.5-1.3 m/s

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## DEPARTMENT OF CARDIOLOGY

Name	: Mr. RAVI SHEKHAR	UMR NO	: FHP25089504112022
AGE / GENDER	: 36Y(s)/ Male	IP NO	: NA
S/o W/o D/o	: RAVI SHEKHAR	BILL NO	: ROP24000207
LOCATION	: OPD	BILL DT & TIME	: 09-Nov-2024 10:00 AM
ADVISED BY	: DR.PRIYANKA SINGH	REPORTING DT & TIME	: 09-Nov-2024 01:14 PM

### CONCLUSION :

- No RWMA with **LVEF : 60%**.
- Normal cardiac chambers dimensions.
- Normal RV Size and systolic function.
- Trace MR & Trace TR (PASP - Normal).
- No LVDD.
- IVC is not dilated and greater than 50% collapsible.
- No Clot/vegetation/pericardial effusion is noted.

### IMPRESSION :

- **NORMAL ECHO STUDY.**

**Dr. VIRENDRA SINGH**  
MD (Physician) , PGDCC  
(CONSULTANT CARDIOLOGY)

\*\*\*End Of Report\*\*\*

**24 X 7 { Helpline - +91-7835999444, 7835999555 }**

Patient Name	RAVI SHEKHAR 36Y/M		
Patient ID	12022		
Referral Dr	Dr.	Age	0Yr
Study Date	9 Nov 2024	Sex	Male
Time	12:49pm	Report Date	9 Nov 2024
		Time	5:22pm

## X-RAY CHEST PA

### FINDINGS

Lung fields are clear.

Both hilar shadows are normal.

Both domes of diaphragm are normal.

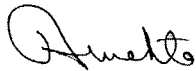
Both costophrenic angles are clear.

Cardiac silhouette is normal.

Soft tissues and bony thoracic cage are normal.

### IMPRESSION-NORMAL CHEST X-RAY.

Please correlate clinically.



Dr. Ashma Mehta  
Senior Consultant Radiology, MBBS, DMRD Gold Medalist  
Reg.No.013215 HMC

Name:  
Age:  
Gender:

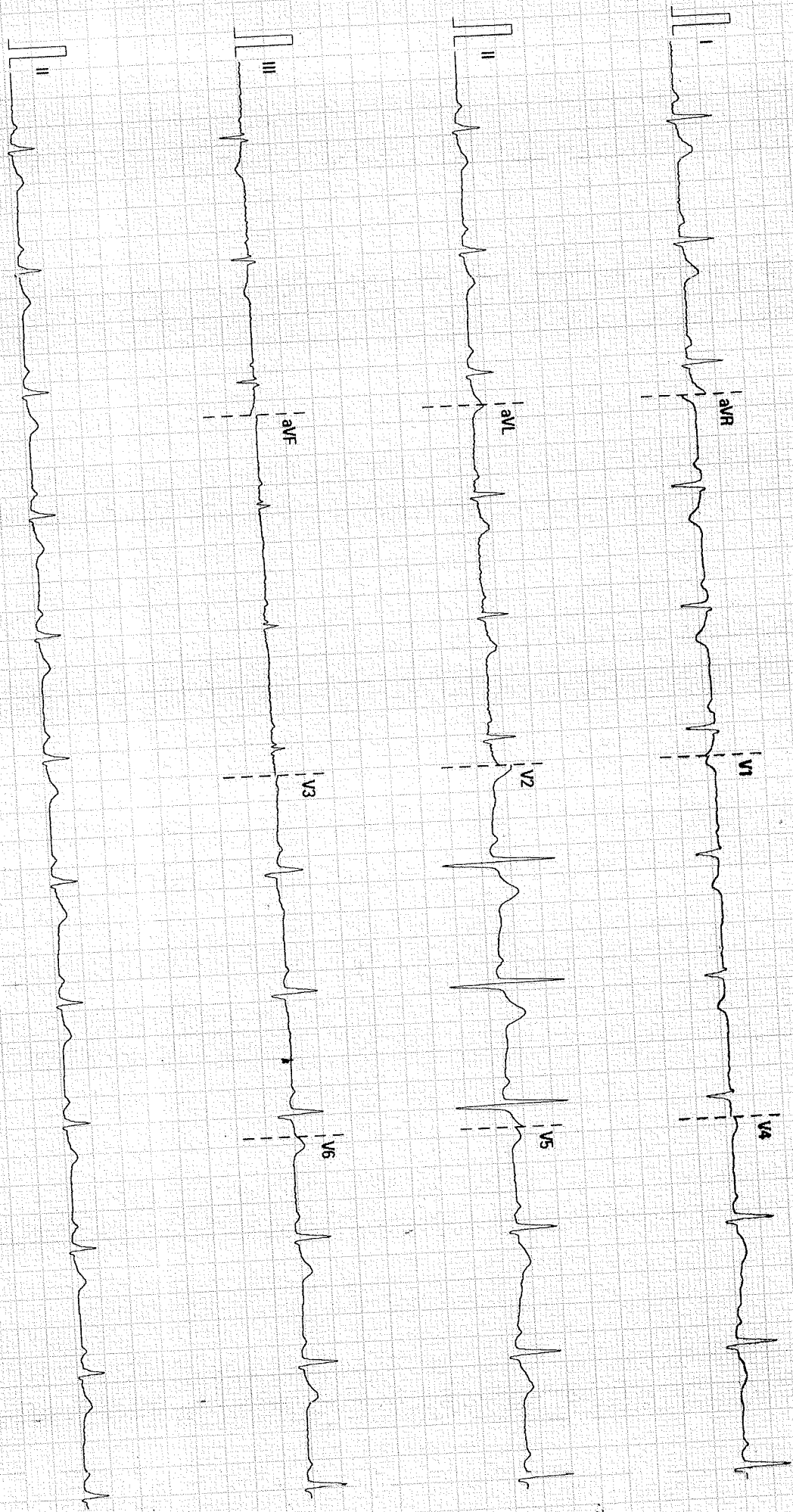
m Ravi Shekhar  
36 yr

Vent. Rate  
PR Interval  
QRS Duration  
QT/QTc Interval  
P/QRS/T Axes  
QTc/Hodges

70 bpm  
154 ms  
84 ms  
360/378 ms  
21/13/7 deg

Sinus bradycardia  
— Interpretation made without knowing patient's gender/age —  
Normal ECG

Unconfirmed Diagnosis.



25 mm/s  
10 mm/mV  
50 Hz  
BDR 35 Hz

Felix Hospital

02.10.00.V28.4.1

SN:FN-45049580