

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

> : 0000271771 Visit ID

: 147817 UHID

Patient Name : MR. KAUSHIK TIKAM SINGH

Spec No.

Age / Sex

: 54Y / MALE

Consultant

: DR. HOSPITAL CASE

Order Date

: 09/04/2022 9:16AM

Ref. By

: DR. HOSPITAL CASE

Samp.Date Report Date

: 09/04/22 12:26PM

: MEDIWHEEL Category

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 Minimally distended state in current scan.
- *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.

Dr. MEENAKSHI RAI

RADIOLÖGIST REG. NO. CGMC - 4274/2012

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



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: 09/04/2022 9:16AM

Ref. By Category : DR. HOSPITAL CASE

Samp.Date Report Date

: 09/04/22 01:10PM

X-RAY X-RAY CHEST PA. VIEW

Bilateral apical pleural thickening noted.

Right C.P. angle is blunted - Likely Pleural thickening.

Cardiothoracic ratio is within normal limits.

Bony cage and soft tissue normal.

- Please correlate clinically , Followup radiograph is recommended.

Dr. SAMIR KATHALE MBBS, DNB, MNAMS, MANBI

> RADIOLOGIST Reg No: CGMC-4404/2012

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UHID : 147817 VISITID : 0000271771

PATIENT NAME : MR. KAUSHIK TIKAM SINGH ORDER DATE : 09/04/2022 09:16:00AM

AGE/SEX : 54Y/MALE SAMP. DATE : 09/04/2022 10:18:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10363083

RESULT DATE : 09/04/2022 01:16:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LIFID PROFILE				
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
CHOLESTEROL TOTAL	192 mg / dl	Normal	150 - 220	
TRIGLYCERIDES - SERUM	73 mg / dl	Normal	60 - 165	
HDL	64.92 mg / dl	Normal	35 - 80	
LDL	112.44 mg/dL	Normal	90 - 160	
VLDL	14.60	Low	20 - 50	
CHOL: HDL Ratio	2.96:1		3.5 - 5.5	
LDL: HDL Ratio	1.73:1			

Dr. ANJANA SHARMA

CONSULTANT

TECHNICIAN

LIDID PROFILE



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: 0000271771 VISITID UHID : 147817

: 09/04/2022 09:16:00AM : MR. KAUSHIK TIKAM SINGH ORDER DATE PATIENT NAME

: 09/04/2022 10:18:00AM SAMP. DATE : 54Y/MALE AGE/SEX

: HOSPITAL CASE CONSULTANT DOCTOR : 09/04/2022 12:22:00PM RESULT DATE

: MEDIWHEEL

: 10363090

SPEC. NO

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COUN	IT)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	14.4 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	4.80 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	41.6 %	Normal	41.5 - 50.4
RBC INDICES			
MCV	86.8 fl	Normal	78 - 96
мсн	30.1 pg	Normal	27 - 32
MCHC	34.7 %	Normal	33 - 37
RDW	12.9 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	5300 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	66 %	Normal	0 - 75
LYMPHOCYTES	28 %	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	207000 /cumm	Normal	150000 - 450000

TECHNICIAN



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CONSULTANT DOCTOR : HOSPITAL CASE

VISITID : 0000271771

ORDER DATE : 09/04/2022 09:16:00AM

SAMP. DATE : 09/04/2022 10:18:00AM

SPEC. NO : 10363082

RESULT DATE : 09/04/2022 01:16:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	11.2 mg/dl	Normal	8 - 23
GGT (GAMMA GLUTAMYL TRANSFERASE)		
GGT (GAMMA GLUTAMYL TRANSFERASE)	12 U / L	Normal	8 - 52

Dr. ANJANA SHARM D.N.B PATHOLOGY

CONSULTANT

TECHNICIAN



UHID

Sparsh Multispecialty Hospital

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CONSULTANT DOCTOR : HOSPITAL CASE

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ORDER DATE : 09/04/2022 09:16:00AM

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SPEC. NO : 10363084

RESULT DATE : 09/04/2022 01:16:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URIC ACID

TECHNICIAN

PARAMETER VALUE RESULT REFERENCE RANGE

URIC ACID 3.72 mg/dL Normal 3.6 - 7.7

Dr. ANJANA SHARMA D.N.B PATHOLOGY

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Sparsh Multispecialty Hospital

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CONSULTANT DOCTOR : HOSPITAL CASE

VISITID : 0000271771

ORDER DATE : 09/04/2022 09:16:00AM

SAMP. DATE : 09/04/2022 10:18:00AM

SPEC. NO : 10363090

RESULT DATE : 09/04/2022 12:56:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

BLOOD GROUPING AND RH TYPING

PARAMETER VALUE

BLOOD GROUP

RH FACTOR Positive

RESULT REFERENCE RANGE

-

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PATIENT NAME

CONSULTANT DOCTOR

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ORDER DATE

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: 54Y/MALE

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: 10363085

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TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CREATININE

TECHNICIAN

PARAMETER CREATININE VALUE

0.74 mg / dl

RESULT

REFERENCE RANGE

Sharima

Normal

0.6 - 1.2

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PATIENT NAME

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AGE/SEX

: 54Y/MALE

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: 09/04/2022 10:18:00AM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10363082 : 09/04/2022 01:43:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

1.38 ng/ml

Normal

0 - 4

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 liqueties semen in the terminal coagulum and allows sperms to swim freely.

Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a 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 base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA) may give falsely elevated of 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



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AGE/SEX

: 54Y/MALE

SAMP. DATE

RESULT DATE

: 09/04/2022 10:18:00AM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10363087 : 09/04/2022 04:23:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

BLOOD SUGAR - FASTING AND PP

PARAMETER

VALUE

RESULT

REFERENCE RANGE

BLOOD SUGAR FASTING

.114 mg/dL

Normal

80 - 120

BLOOD SUGAR PP

157 mg/dL

High

120 - 140

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TECHNICIAN



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PATIENT NAME

CONSULTANT DOCTOR

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ORDER DATE

: 09/04/2022 09:16:00AM

AGE/SEX

: 54Y/MALE

: HOSPITAL CASE

SAMP. DATE

: 09/04/2022 10:18:00AM

SPEC. NO : 10363089

RESULT DATE

: 09/04/2022 04:23:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URINE SUGAR FASTING

PARAMETER

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

DE ANJANA SHARMA D.N.B PATHOLOGY

CONSULTANT,

TECHNICIAN



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PATIENT NAME

: 54Y/MALE

: HOSPITAL CASE

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SPEC. NO

: 10363087

RESULT DATE

: 09/04/2022 04:23:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

BLOOD SUGAR - FASTING AND PP

PARAMETER

VALUE

RESULT

REFERENCE RANGE

BLOOD SUGAR FASTING

CONSULTANT DOCTOR

114 mg/dL

Normal

80 - 120 120 - 140

BLOOD SUGAR PP

TECHNICIAN

157 mg/dL

High

Sharima

Dr. ANJANA SHARMA D.N.B.PATHOLOGY

CONSULTANT



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: 54Y/MALE

CONSULTANT DOCTOR

: HOSPITAL CASE

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SPEC. NO

: 10363089

RESULT DATE

: 09/04/2022 04:23:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URINE SUGAR PP

PARAMETER

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

TECHNICIAN



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: 09/04/2022 10:18:00AM

SPEC. NO

: 10363082

RESULT DATE

: 09/04/2022 01:42:00PM

TPA

: MEDIWHEEL

REFERENCE RANGE

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER

T4 (THYROXINE)

VALUE

1.81 ng/ml

95.04 ng/ml

5.86 uIU/ml

RESULT Normal

0.69 - 2.15

Normal

High

52 - 127 0.3 - 4.5

TSH (THYROID STIMULATING HORMONE)

REFERENCE GROUP

T3 (TRIIODOTHYRONINE)

REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

1st Trimester 2nd Trimester 0.10 - 2.500.20 - 3.00

3rd Trimester

0.30 - 3.00

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and

0.30-4.5

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

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

Dr. ANJANA SHARMA D.N.BPATHOLOGY

TECHNICIAN



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AGE/SEX

: 54Y/MALE

CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

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ORDER DATE

: 09/04/2022 09:16:00AM

SAMP. DATE

: 09/04/2022 10:18:00AM

SPEC. NO

: 10363091

RESULT DATE

: 09/04/2022 01:18:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED

HEAMOGLOBIN)

5.0 %

Normal

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0 At risk (Prediabetes)

->=6.0 to <=6.5

Diagnosing diabetes

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

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 appopriate.

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.

D.N.B PATHOLOGY

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CONSULTANT DOCTOR

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ORDER DATE

: 09/04/2022 09:16:00AM

SAMP. DATE

: 09/04/2022 10:18:00AM

SPEC. NO

: 10363088

RESULT DATE

: 09/04/2022 02:50:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

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

Dr. ANJANA SHARMA

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LFT (LIVER FUNCTION TEST)

SPEC. NO

: 10363085

CONSULTANT DOCTOR

: HOSPITAL CASE

RESULT DATE

: 09/04/2022 01:17:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.54 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.08 mg / dl	Low	0.1 - 0.6
BILIRUBIN INDIRECT	0.46 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	41 U/L	Normal	0 - 270
SGOT	27 U/L	Normal	10 - 55
SGPT	17 U/L	Normal	0 - 40
TOTAL PROTEIN	6.80 g / dl	Normal	6 - 8

TOTAL PROTEIN ALBUMIN 4.55 g/dl 2.25 g/dl **GLOBULIN** A.G.RATIO 2.02:1

Normal 4 - 5 Normal 2 - 3.5

1 - 2.5

Dr. ANJANA SHARMA D.N.B.PATHOLOGY

CONSULTANT

TECHNICIAN