





GTB PLAZA, Beside Airtel Office, Ring Road No.1, Telibandha, Raipur (C.G.) Ph.: 0771-4024901, Emergency No.: 09109178901 E-mail: Wecarehospitals@gmail.com

PATIENT'S NAME: SANJAY KUMAR NETAM 30YR M

REFERRED BY: DR A SIDDIQUI

MRD NO: USG ABD HEALTH CHECKUP 29145

STUDY TIME: 11-08-21 REPORT TIME: 11/08/21 4:19 PM

PRINT TIME: 11/08/21 4:30 PM

#### STUDY: USG OF THE ABDOMEN

**INDICATION:** 

Routine health check up otherwise no complaints.

COMPARISON:

None.

#### **OBSERVATIONS:**

Liver is normal in size measuring 145 mm in craniocaudal extent, and normal in parenchymal echogenecity. No obvious focal lesion is seen. Intrahepatic biliary radicles are not dilated.

Spleen is normal measuring 108 mm in size. No focal lesion is seen.

Pancreas appears normal in size and echopattern. Pancreatic duct is not dilated. No obvious pancreatic parenchymal calcifications are seen either.

Gall bladder is well distended. No calculus is seen. Wall thickness is normal. CBD is normal.

Portal vein is normal. IVC and aorta are unremarkable

Right kidney measures  $104 \times 52$  mm in size. Left kidney measures  $102 \times 58$  mm in size. Both kidneys are normal in size, shape, position and echogenecity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Urinary bladder is well distended. Wall thickness appears normal. Prostate appears normal in size, shape and echotexture.

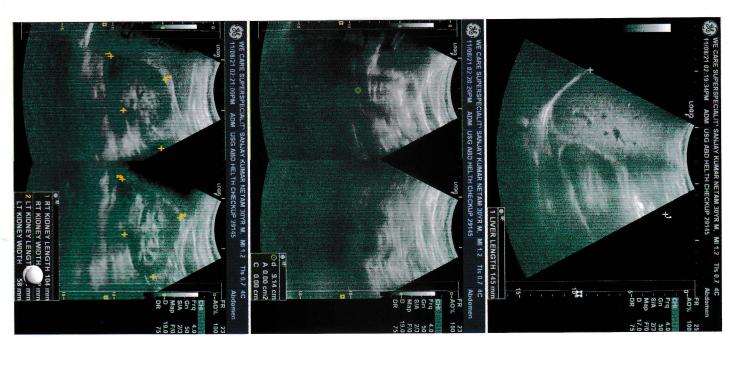
No free fluid is seen. No significant lymphadenopathy is seen.

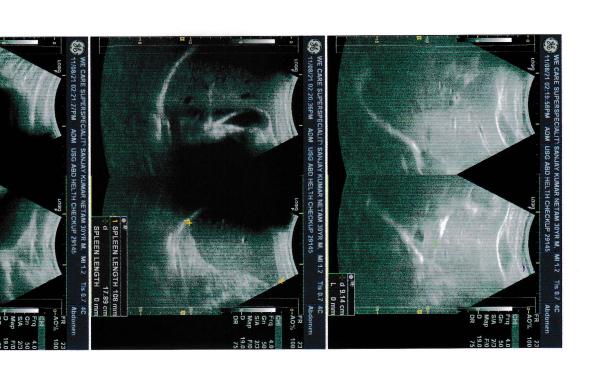
#### **CONCLUSION:**

No significant abnormality detected.

DR NEERAJ GAUTAM DNB RADIODIAGNOSIS CONSULTANT RADIOLOGIST







Od 9.14 cm A 0.00 cm2 C 0.00 cm



# SUPER SPECIALITY HOSPITAL (A UNIT OF SYNERGY HEALTH TECH) State of The Art Trauma Centre



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PATIENT'S NAME: SANJAY KUMAR NETAM 30YR M

REFERRED BY: DR A SIDDIQUI

MRD NO: XR CHEST 29145 PS 10 PACKAGE

STUDY TIME: 11-08-21

REPORT TIME: 11/08/21 1:46 PM

PRINT TIME: 11/08/21 4:32 PM

#### STUDY: XRAY OF THE CHEST PA VIEW

**INDICATION:** 

Routine health check up otherwise no complaints.

**COMPARISON:** 

None.

#### **OBSERVATIONS & CONCLUSION:**

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLASPE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

TRACHEA IS IN MIDLINE.

NO CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

DR NEERAJ GAUTAM DNB RADIODIAGNOSIS CONSULTANT RADIOLOGIST





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PATIENT NAME: MR.SANJAY KUMAR NETAM

RECEIPT NO.

: PAC/10

UHID NO.

: 29145

SAMPLE RECEIVED ON / AT

: 11/08/2021 10:43AM

AGE / SEX

: 30 Y Male

SAMPLE REPORTED ON / AT : 11/08/2021 04:36PM

CONSULTANT

: DR ANIS SIDDIQUI

COMPLETE BLOOD COUNT(CB) <u>RBC</u>	C)		
Haemoglobin (HB)	14.1	gm%	12 - 17mg/dl
Haematocrit (HCT)	44.2	%	40 - 55
RBC Count	5.96	millions/cumm	4.5 - 6
MCV	74.2	fL .	78 - 92
MCH	23.7	pg	27 - 32
MCHC	31.9	g/dl	32 - 36
RDW-CV	15.4	%	11 - 16
WBC.			
Total Leucocyte Count (TLC)	8700 /		4000 -11000
Differential Leucocyte Count (DI	LC)		
Neutrophils	72	%	40 - 75
Lymphocytes	24	%	20 - 40
Monocytes	02	%	0 - 8
Eosinophils	02 /	%	1 - 7%
Basophils	00	%	0 - 1
PLATELETS			
PLT Count	2.04	lakhs/cmm	1.0 - 4.0
MPV	8.2	fl	8 - 11
Advice			

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Test Done By MEDONIC M-SERIES Fully Automatic.

Test Done By Senior Technologist SATYANARAYAN SINGH Report Checked By Technician





UHID NO.

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	PATHOL	.OGY	
TEST	RESULT	UNIT	REF. RANGE
BSF (Fasting Sample Required)	101		<110 mg/dl





**Test Done By** Senior Technologist SATYANARAYAN SINGH

Report Checked By **Technician** 





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: 30 Y Male : DR ANIS SIDDIQUI SAMPLE REPORTED ON / AT : 11/08/2021 04:36PM

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UNIT REF. RANGE RESULT **TEST** HbA1c (Glycosalated Haemoglobin) 4 to 6% Non-diabetic HbA1C-Glycosalated Haemoglobin 6 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"

**ESR** 

05

mm at 1hr

up to 15 mm (1 hr)

Above 10% poor Control

#### **Blood Group**

**ABO Group** SLIDE METHOD. O Rh Positive

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Machine Footer

**Test Done By** Senior Technologist SATYANARAYAN SINGH Report Checked By Technician





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BIO CHEMISTRY					
TEST .	RESULT	UNIT	REF. RANGE		
BSPP	110		<140 mg/dl		
Urine SUGAR(PP)	ABSENT		ABSENT		
LFT(Liver Function Test)					
Bilirubin - Total	0.38	mg/dl	0.2 - 1.3		
Bilirubin - Direct	0.20	mg/dl	Adult : 0.0 - 0.4 Neonatal : - 0.0 - 0.6		
Bilirubin (Indirect)	0.18	mg/dl	Adult : 0.0 - 0.9 Neonatal : 0.6 - 10.5		
Total Proteins	7.08	g/dl	6.4 - 8.3 g/dl		
Albumin	4.40	g/dl	3.5 - 5.2 g/dl		
Globulin	2.68	g/dl	2.3 - 3.6		
A/G Ratio	1.64		1.10 - 2.20		
Alkaline Phosphatase	129	U/L	4 - 15 Yrs 54 - 369 20 - 59 Yrs 53-128 >60 Yrs 56 - 119		
SGOT (AST)	26	U/L	upto 35 U/L		
SGPT (ALT)	27	U/L	upto 45 U/L		

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CONSULTANT : DR ANIS SIDDIQUI

Lipid Profile			
Total Cholesterol	175	mg/dl	Desirable : <200 Borderline : 200 - 239 High : >= 240
Triglycerides  Note: The National Cholestrol Education Treatment Panel III ((NCEP-ATP III) re		mg/dl	Normal:<161 High: 161- 199 Hypertriglyceridemic: 200 - 499 Very High: > 499
HDL Cholesterol	30	mg/dl	35.3 - 79.5
LDL Cholesterol Note: The National Cholestrol Education Treatment Panel III ((NCEP-ATP III) re		mg/dl	60 - 165
VLDL Cholesterol	18.60	mg/dl	20 - 50
Total Cholesterol/HDL Ratio	5.83		0 - 5.1
LDLC/HDLC Ratio	4.21	1	2.5 - 3.5

#### Correlates with Lipdi Profile:

- 1. Fasting state: Fasting should begin 12 to 14 Hrs before the sample collection. This includes all beverages, although water is permitted. No alcohol should be taken 24 before sample collection.
- 2. Drugs: Cholestrol and Triglyceride lowering agents. Please repeat with fresh sample if dinically indicated.

The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"

#### KFT(KIDNEY FUNCTION TEST)

Urea	14	mg/dL	15 - 45	
Serum Creatinine	0.88	mg/dl	0.70 - 1.40 mg/dL	
Uric Acid	6.6	mg/dL	3.5 - 7.2	

Test Done By MICRO LAB 300 Fully Automatic.



**Test Done By** Senior Technologist SATYANARAYAN SINGH Report Checked By **Technician** 





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	CLINICAL PA	THOLOGY		
TEST	RESULT	UNIT	REF. RANGE	
URINE SUGAR(F)	455 U,			
Urine Sugar (Fasting)	ABSENT		ABSENT	





Test Done By Senior Technologist SATYANARAYAN SINGH

Report Checked By Technician



Pathologist Dr. D. Prashant M.D. (Pathologist)



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CONSULTANT

: DR ANIS SIDDIQUI

#### **TUMOR MARKERS**

**TEST** 

RESULT

UNIT

**REF. RANGE** 

**PSA (Total)** 

ng/mL

> 4.00

The instrument for ichroma test calculate the test result autumatically and displays PSA concentration of the test sample in terms of ng/ml.

Test done by ichroma





**Test Done By** Senior Technologist SATYANARAYAN SINGH





**Pathologist** Dr. D. Prashant M.D. (Pathologist)



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	7	THYROID HO	RMONES		
TEST		RESULT	UNIT	REF. RANGE	
THYROID HORMON	NES		-		
T3 (Triiodothyronine) Remarks:1.Decreased va nomal) have minimal clin recommended for diagnos 2.Total T3 and T4 values conditions due to changes sites, pregnancy,Drugs(A. Phenytoin),Nephrosis etc.	ical significance and sis of hypothyroidist may also be altered s in serum proteins indrogens,Estrogens	d not n I in other or binding	ng/ml	0.5 - 2.0	
T4 (Thyroxine) Remark:1. Total T3 and T in other conditions due to binding sites, pregnency,Drugs (Androg Phenytoin),Nephrosis etc.	changes in serum p gens,Estrogens,O C	roteins or	µg/dl	4.4 - 10.8	
TSH Remarks:1. 4.51 to 15 µlL co-relation or repeat the to physiological factors can general to the second to the	est with new sample give falsely high TS nsiently altered bec evere infection,liver ailure,severe burns, TSH values e.g. uges that increases	e as H. ause of trauma	μIU/mI	0.39- 6.16 μIU/ml	

Test Done By Senior Technologist SATYANARAYAN SINGH

Report Checked By **Technician** 



**Pathologist** Dr. D. Prashant M.D. (Pathologist)



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AGE / SEX

; 30 Y Male

SAMPLE REPORTED ON / AT

: 11/08/2021 04:40PM

CONSULTANT

: DR ANIS SIDDIQUI

	BIO CHEM	MISTRY		
TEST	RESULT	UNIT	REF. RANGE	
GGT(GAMMA GT)				
GGT(GAMMA GT)	35.6	U/L	<55	



Test Done By Senior Technologist SATYANARAYAN SINGH Report Checked By Technician



Dr. D. Prashant M.D. (Pathologist)



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	ROUTINE URINE A	NALYSIS TES	ST
TEST .	RESULT	UNIT	REF. RANGE
Urine Routine ANALYSIS T	EST		
Volume	20	ml	10 - 50
Colour	Straw		Pale Yellow
Appearance	Clear		Clear
pH	5.0		5.5 - 8.0
Chemical Examination			
Urine Protein(Albumin)	Absent	g/L	Absent
Urine Glucose(Sugar)	Absent	mmol/L	Absent
Urine Ketons(Acetone)	Absent	mmol/L	Absent
Specific Gravity	1.000		
Microscopic Examination			
Pus cells	1-2/HPF	/hpf	<5
RBC (Urine)	Nil	/hpf	Nil
Epithelial cell	1-2/HPF	encenne en	0-4
Casts	Absent		Absent
Crystals	Absent		Absent

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**Test Done By** Senior Technologist SATYANARAYAN SINGH Report Checked By Technician





DR. P. NANWANI

MBBS, MS(ENT) Reg.No-CGMC-4179/2012

Ph.: 9827881201

Email-prashantnanwani@yahoo.com

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### Dr. Anis Siddiqui

MD(Internal Medicine), PGCCDM Clinical Cardiologist & Diabetologist (P.G. Diploma in Clinical Endocrinology & Diabetes UK) Reg.no. CGMC 380 / 05 Mob.: 8839104525 / 9755891450

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#### **EYE EXAMINATION**

NAME: -	Mon.	Saway	Kumor Ne	cun
ACE/CEV				

DATE: - 11108/21

AGE/SEX 3011M

1. EXAMINATION OF EYES: (BY OPHTALMOLOGIST)

EXTRENAL, EXAMINA	TION					
EXTREMAL, EXAMINAT	(TIOIV		MAD			
SQUINT		To any	MD		8	
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NAME MR. SANJAY KUMAR NETAM

AGE 30 YR/M

REF BY: DR. A SIDDIQUI

DATE: 11/08/2021

### ECHOCARDIOGRAPHY

#### **M-MODE**

MEASUREMENT	PT'S VALUE	NORMAL VALUE	
AO	34.6 mm	20-37 mm	
LA	27.3 mm	19-40 mm	
IVS (d)	7.9 mm	6-11 mm	
LVID (d)	47.7 mm	35-50 mm	
LVPW (d)	8.4 mm	6-11 mm	
LVID (S)	21.0 mm	23-39 mm	
EF	60%		
AD ECHO & CEL			

#### 2 D ECHO & CFI

**CHAMBERS** 

**NORMAL** 

VALVES

NORMAL

**SEPTAE** 

- IVS / IAS Intact

RWMA

- NO RWMA PRESENT AT REST.

EF

60%

CLOT / VEGETATION/ PERICARDIAL EFFUSSION - NILL.







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VALVE (mmHg)	REGURGI	TATION GRAD	GRADIENT	
Mitral Valve	NILL	Not Significant		
Aortic Valve	NILL	Not Significant		
Tricuspid Valve	NILL	Not Significant		
Pulmonary Valve	NILL	Not Significant		

#### PULSE WAVE DOPPLER

Mitral Valve inflow shows E Wave<AWave.

#### IMPRESSION.

- NO RWMA PRESENT AT REST.
- NORMAL BIVENTRICULAR SYSTOLIC FUNCTION.
- GLOBAL LVEF 60%.
- NO AS/MS/TR/AR/NO MR.

NO INTRACARDIAC CLOT, VEGETATION.

Dr.ANIS SIDDIQUI (MD,PGCCDM)

