

भारत सरकार  
GOVERNMENT OF INDIA

शशांक यादव  
Shashank Yadav  
जन्म तिथि / DOB: 24/05/1989  
पुरुष / MALE  
Mobile No.: 9958084867  
4880 3329 0216  
VID : 9170 5272 6436 8057

मंस आधार, मेरी पहचान

9958084867

W - 106 kg  
H - 178 cm  
B.P - 120/80  
Pulse - 83  
SpO2 - 98

भारत सरकार  
भारतीय पहचान प्राधिकरण  
INDIAN IDENTIFICATION AUTHORITY OF INDIA

प्रा.सं.  
S/O रविंद्र यादव, 276, बारी का चौक, जालेसर, एटा,  
उत्तर प्रदेश - 207302

Address:  
S/O Ravindra Yadav, 276, bari kha  
chowk, Jalesar, Etah, Uttar Pradesh -  
207302

4880 3329 0216  
VID : 9170 5272 6436 8057

1947 | help@uidai.gov.in | www.uidai.gov.in

Shashank

27/08/2023



Mir shashank yadav

Visit: self  
24.05.1989  
34 Years

Male

27/08/2023 10:08:11 AM  
SJM Hospital  
Sector 83  
Gautam Budhha Nagar, UP-201307

66 bpm

- / - mmHg

Location  
Room  
Order Number  
Indication  
Medication 1  
Medication 2  
Medication 3

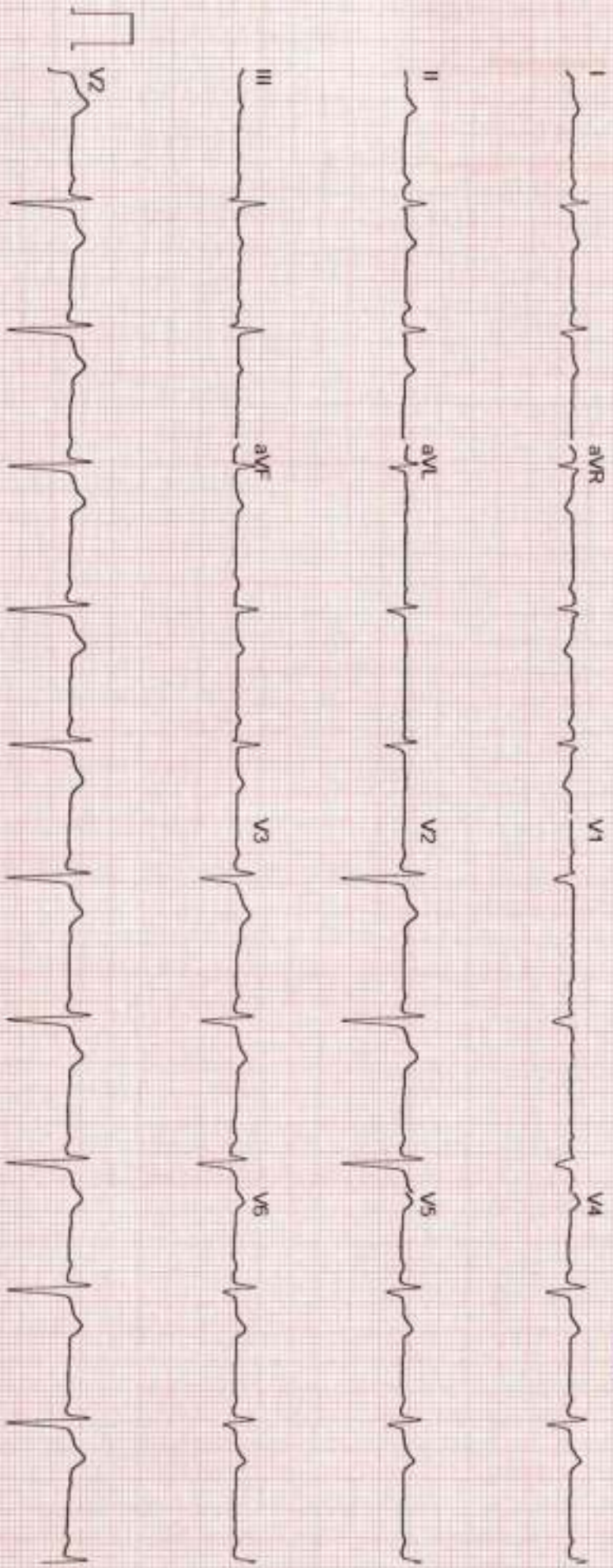
Technician  
Ordering Pn.  
Referring Pn.  
Attending Pn.

QRS  
QT / QTcBaz  
PR  
P  
RR / pp  
P / QRS / T

94 ms  
398 / 417 ms  
148 ms  
106 ms  
904 / 909 ms  
52 / 67 / 53 degrees

Normal sinus rhythm  
Normal ECG

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Sr. Sr. St.  
M.B.B.S., M.D. (Medicine)  
Sr. Consultant, Physician  
Reg. No. 309859 (DMC)



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4x2.5x3.25\_R1 1/1

Unconfirmed

ID : 187  
 NAME : MR. SHASHANK YADA  
 AGE / SEX : 34 / MALE

HEIGHT (cm) : 171  
 WEIGHT (kg) : 101  
 PROTOCOL : BRUCE

REF BY : R. VIKAS BHAT  
 DONE BY : R. BHUPENDER BHATT  
 TECHNICIAN :

## CASE HISTORY

MEDICATION

OBJECT OF TEST

RISK FACTOR

ACTIVITY

OTHER INVESTIGATION

REASON FOR TERMINATION

EXERCISE TOLERANCE

EXERCISE INDUCED ARRHYTHMIAS

HAEMO RESPONSE

CHRONO RESPONSE

FINAL IMPRESSION

EXTRA COMMENTS

Routine Check Up

None

Moderate Active

X - Ray

Max HR.

Moderate ( &lt; 10 METS )

Insignificant

Normal

Negative

Stress Test is Negative for Inducible Ischemia

**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Vikas Kumar Bhat  
 M.B.B.S., M.D. (Medicine)  
 Sr. Consultant Physician  
 Regd. No. 30969 IDMC1

Confirmed By : \_\_\_\_\_

Signature

# 187

Tested On

27-08-2023, 10:24:35

BPL DYNATRAC

Page No.: 1

PATIENT ID : 18  
 PATIENT NAME : MF SHASHANK YADAV  
 PROTOCOL : BRUCE

DR. VIJAY D BHAT  
 Tested On : 27-08-2023 10:24:35  
 BPL DVI/ATRAC

Stage Name	Time (min:sec)	Speed (kmph)	Grade (%)	HR (bpm)	BP (mmHg)	R.P.P	METS	STLevel (II)	Stage Comments
Total METS achieved		7.10		Maximum ST depression (I)		-0.20 mm			
Maximum HR achieved		171 bpm, 51 % of 166 bpm		Total Exercise time		05:43 (min:sec)			
Pre-Test	00:42	0.00	0.00	82	120 / 80	9840	0.00	0.65	
Supine	00:10	0.00	0.00	85	120 / 80	10200	0.00	0.70	
Hyper Ventilation	00:06	0.00	0.00	88	120 / 80	10560	0.00	0.70	
Wait For Exercise	00:37	0.00	0.00	109	120 / 80	13080	0.00	0.65	
Exercise 1	02:57	2.70	10.00	144	130 / 90	16720	5.10	-0.20	
Peak Exercise	02:43	4.00	12.00	171	140 / 100	23940	7.10	0.60	
Recovery 1	00:55	0.00	0.00	137	120 / 80	16440	0.00	1.35	
Recovery 2	01:58	0.00	0.00	114	120 / 80	13680	0.00	1.05	
Recovery 3	02:53	0.00	0.00	110	120 / 80	13200	0.00	0.60	
Recovery 4	03:17	0.00	0.00	106	120 / 80	12720	0.00	0.55	

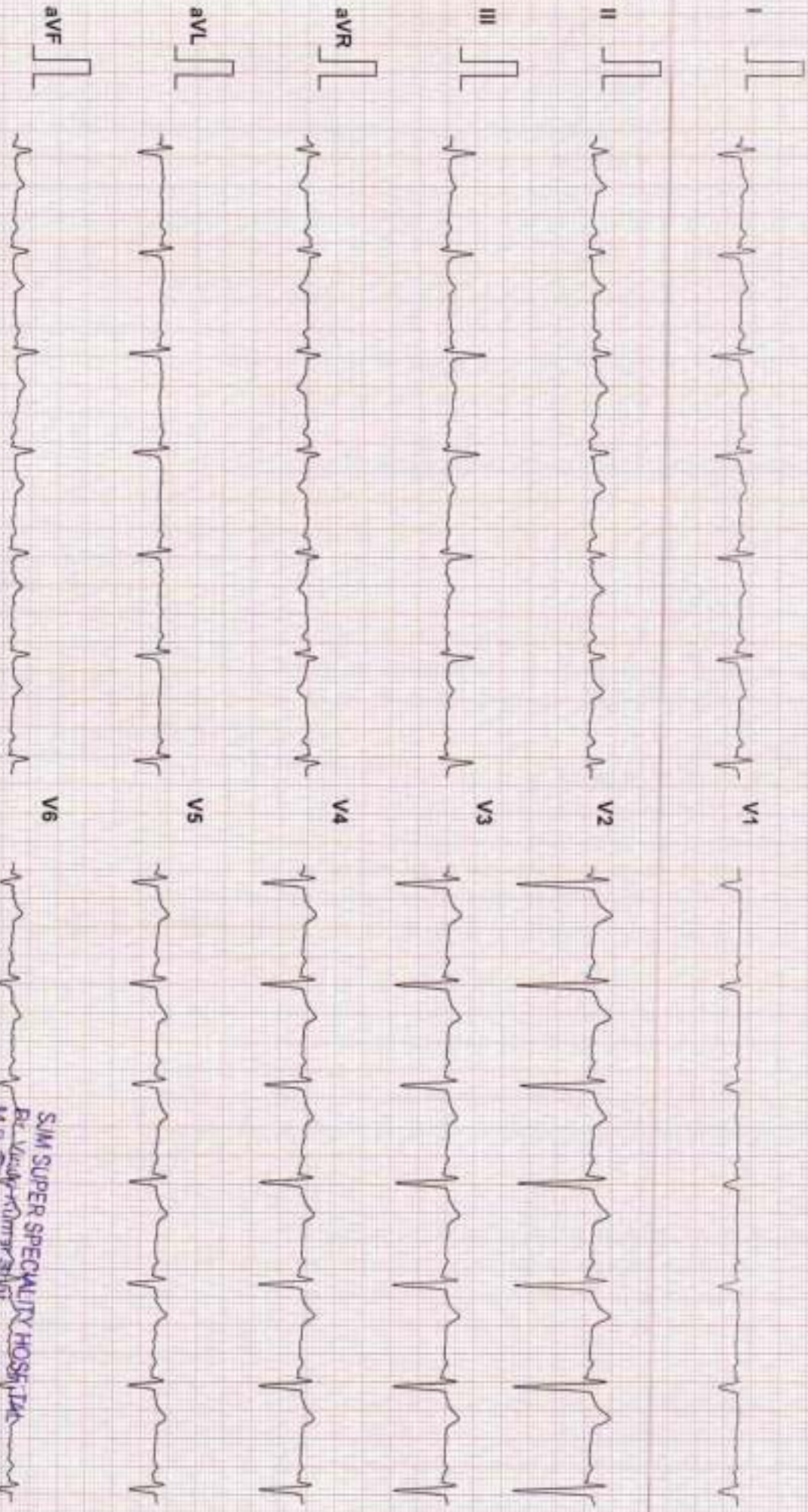
SJM SUPER SPECIALITY HOSPITAL  
 Dr. Vinod Kumar Bhat  
 M.B.B.S, M.D (Nephrology)  
 Sr. Consultant Physician  
 Reg. No. 30969 (DMCI)

ID : 187  
NAME : MR. SHASHANK YADAV  
AGE : 34  
BP : 120/80 mmHg

STAGE : Pre-Test  
RECORDED TIME : 00:26 (min:sec)  
STAGE DURATION : 00:26 (min:sec)  
HR : 86 bpm (46 %)

PROTOCOL : BRUCE  
SPEED : 0.00 kmph  
GRADE : 0.00 %  
METs : 0.00

DR. VIJND BHAT  
Tested On 27-08-2023, 10:24  
BP, DYNATRAC



# 187

20 Hz Filter

10mm/mV, 25mm/Sec

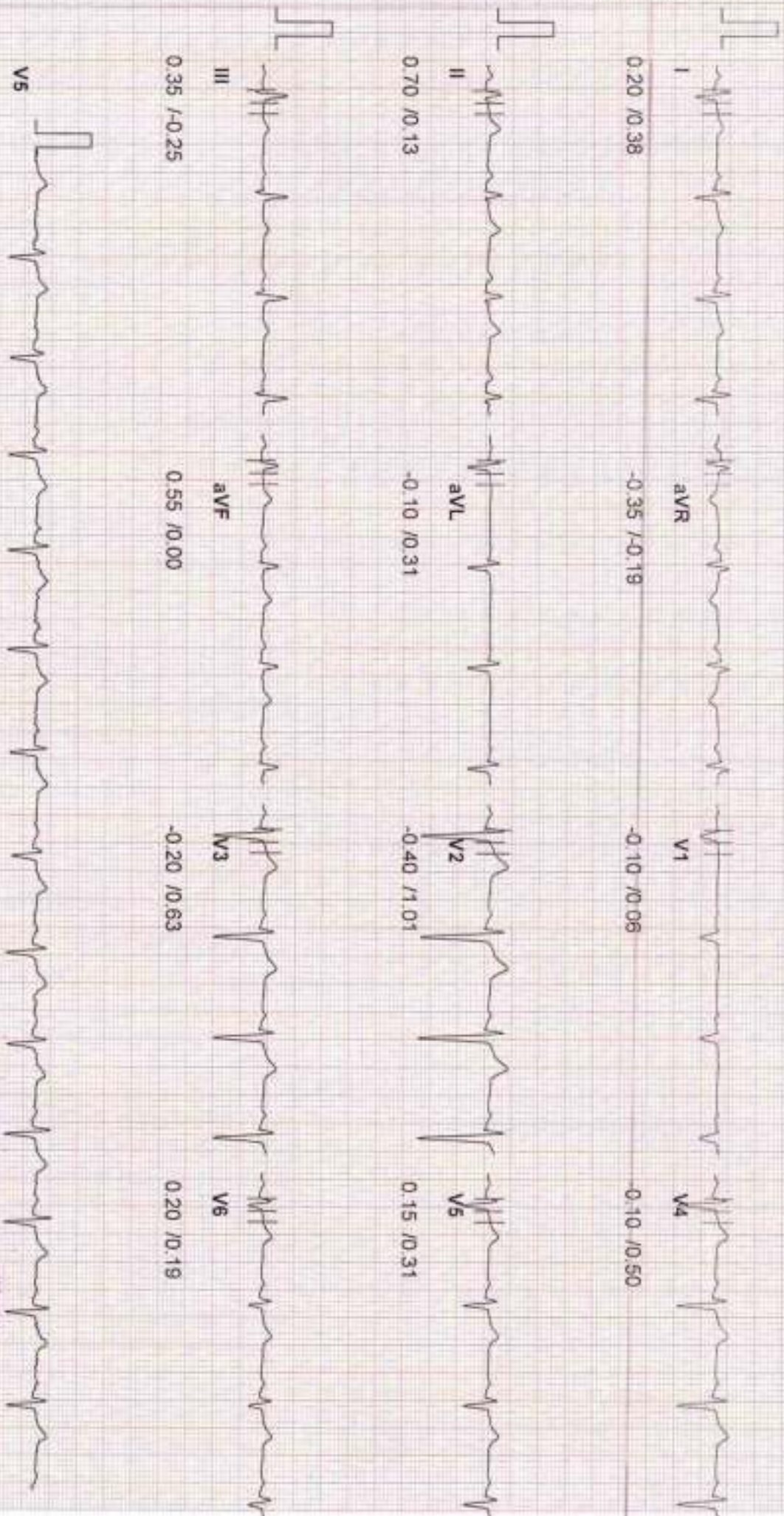
SJM SUPER SPECIALITY HOSPITAL  
 Dr. Vijnd Bhat  
 M.B.B.S. M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30965/DNMC1



ID : 161  
 NAME : MR. SHASHANK YADAV  
 AGE : 34  
 BP : 120/80 mmHg  
 HR : 88

STAGE : STAGE I  
 REC'D TIME : 00:55 (min:sec)  
 STA: E DURATION : 00:12 (min:sec)  
 SPEED : 0.0 kmph  
 GRAD: 0.00 %  
 METs : 0.00

DR. VIONU BHAT  
 Tasted On : 27-08-2023, 10  
 EPL DYNATRAC



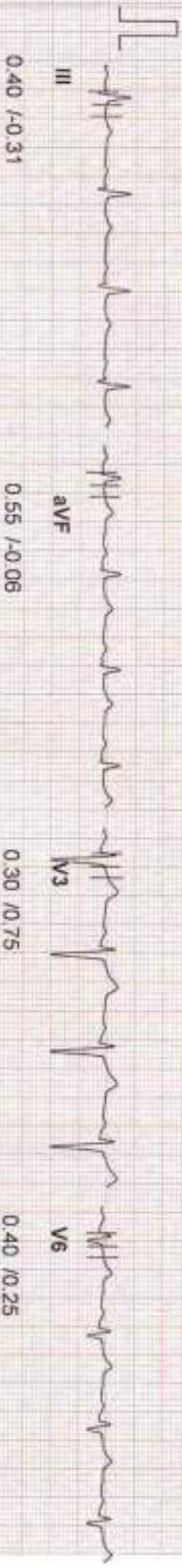
# 187

**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Vionu Bhat  
 MBBS, MD (Internal Medicine)  
 Sr. Consultant Physician  
 20 Hz Filter, 25mm/Sec

ID : 187  
NAME : MR. SHASHANK VADAV  
AGE : 34  
BP : 120/80 mmHg  
ST Levels: (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Hyge Ventilation  
RECORDED TIME : 01:01 (min:sec)  
STAGE DURATION : 00:05 (min:sec)  
HR : 84 bpm (45%)  
PROTOCOL : ERUCE  
SPEED : 0.0 kmph  
GRADE : 0.00 %  
METS : 0.00

DR. VIJND BHAT  
Tested On : 27-08-2023 10  
BPL DYNATRAC



# 187

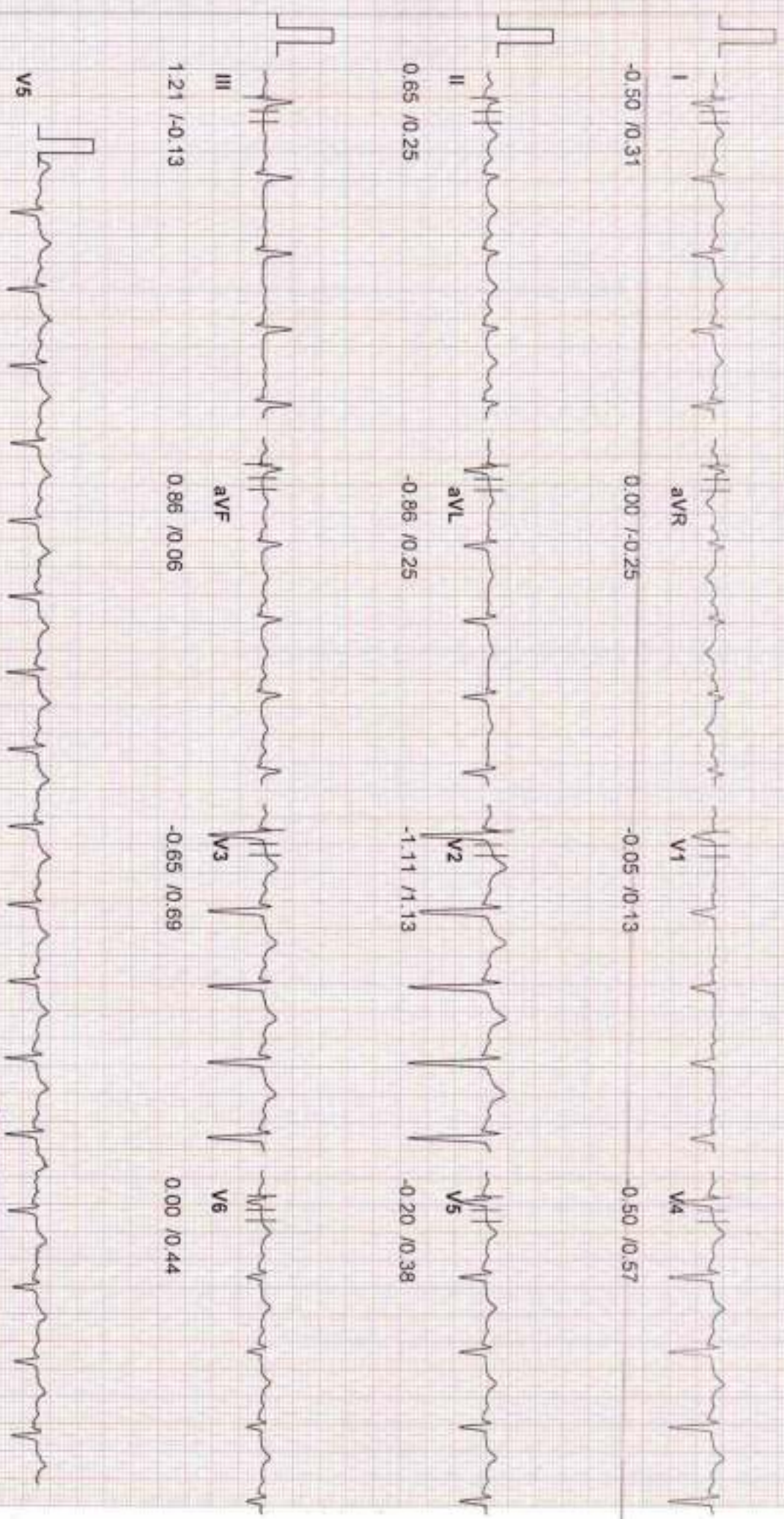
SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
M.B.B.S., M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30969 (DMCO)  
20 Hz Filter 10mm/mV, 25mm/Sec



ID: 187  
 NAME: MR SHASHANK YADAV  
 AGE: 34  
 BP: 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80-min Post J

STAGE: Wait For Exercise  
 RECOF: 01:48 (min sec)  
 STAGE DURATION: 00:41 (min sec)  
 HR: 109 bpm (58%)  
 METs: 0.00

DR. VIJOND E -IAT  
 Tested On: 27-08-2023 10  
 BPL DYNATI-4AC



# 187

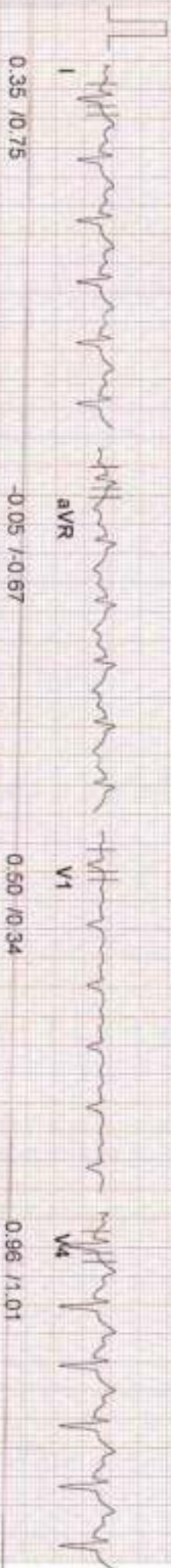
20 Hz Filter

SJM SUPER SPECIALITY HOSPITAL  
 Dr. Venod Kumar Bhal  
 M.B.B.S., M.D (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 310956/18MC/25mm/Sec

ID : 187  
NAME : MR SHASHANK VADAV  
AGE : 34  
BP : 130/90 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise  
RECORDED TIME : 03:00 (r. n. sec)  
STAGE DURATION : 03:00 (r. n. sec)  
HR : 144 bpm (77 %)  
PROTOCOL : BRUCE  
SPEED : 2.7 kmph  
GRADE : 10.00 %  
METs : 5.10

DR. VIJOND BHAT  
Tested On : 27-08-2023 10  
BPL DYNATRAC



0.35 / 0.75

-0.05 / -0.67

0.50 / 0.34

0.96 / 1.01

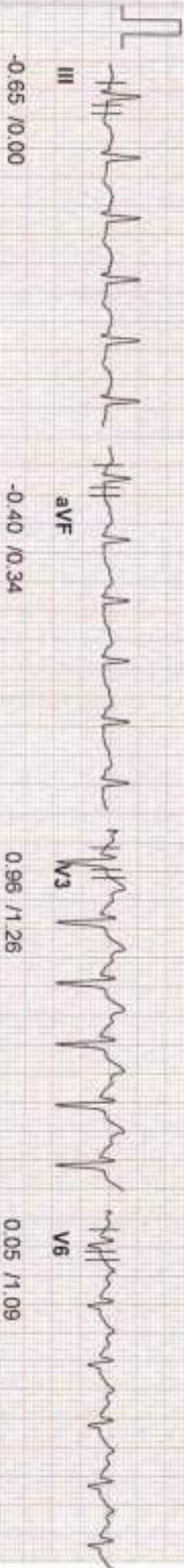


-0.20 / 0.92

0.55 / 0.50

1.31 / 1.51

0.45 / 0.84



-0.65 / 0.00

-0.40 / 0.34

0.96 / 1.26

0.05 / 1.09



# 187

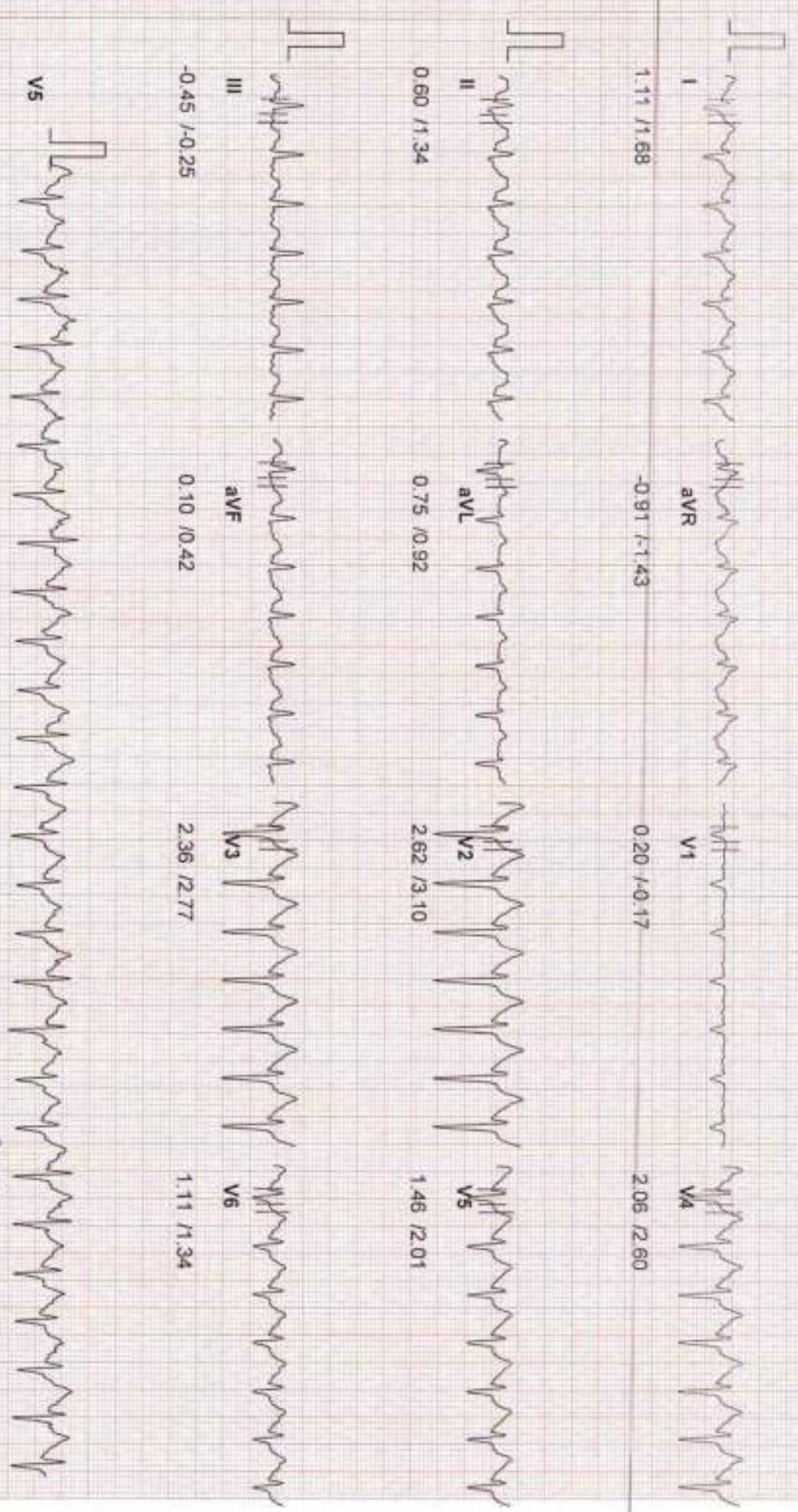
20 Hz Filter

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vijond Kumar Bhat  
M.B.B.S., M.D (Anesthesiology)  
Sr. Consultant Physician  
Reg. No. 30966 / HV / 25mm/Sec  
10mm/HV

ID 187  
 NAME MR. SHASHANK YADAV  
 AGE 34  
 BP 140/100 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 60 me Post J

STAGE Exercise 2/Feas Ex) PROTOCC  
 RECORD TIME 05:43 (min:sec)  
 STAGE UPDATION 02:43 (min:sec)  
 HR 171 bpm (91%)  
 SPEED 4.0 kmph  
 GRADE 12.00 %  
 METS 7.10

DR. VIJOND BHAI  
 Tested On 27-08-2023, 10  
 BPL DYNATRAC



# 187

20 Hz Filter

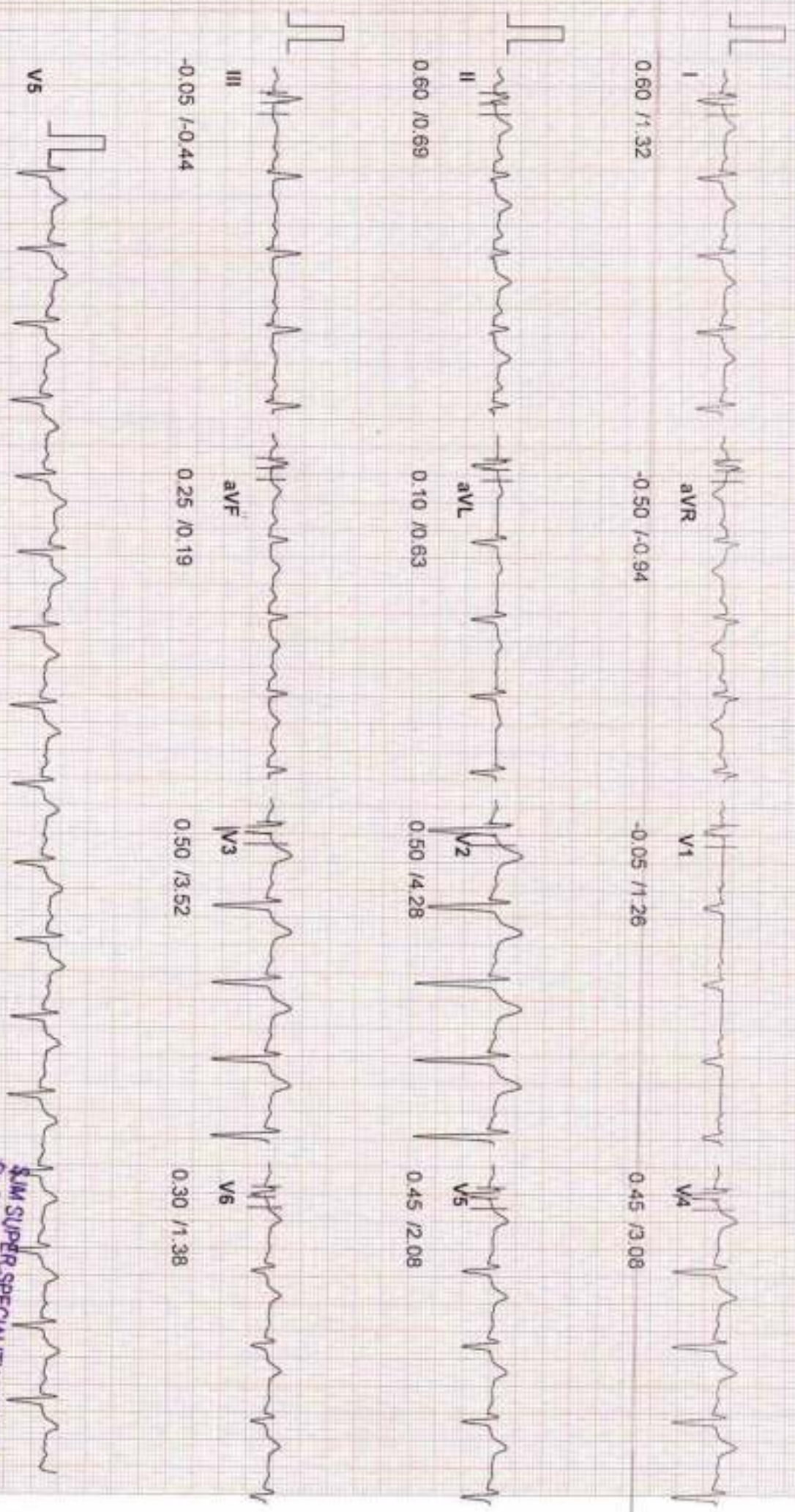
SUN SUPER SPECIALTY HOSPITAL  
 Dr. Yash Kumar Bhat  
 M.B.B.S. M.D. (Anatomy)  
 Sr. Consultant  
 Cardiology  
 302/303 DMCI



ID : 117  
 NAME : M.R. SHASHANK YADAV  
 AGE : 34  
 BP : 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Recovery 3  
 RECORDED TIME : 02:59 (min sec)  
 STAGE DURATION : 02:59 (min sec)  
 HR : 108 bpm (58 %)  
 PROTOCOL : SPEED GRADE METS  
 SPEED : 0.0 kmph  
 GRADE : 0.00 %  
 METS : 0.00

DR. VIJND BHAI  
 Tested On : 27-06-2023, 10  
 BPL DYNATRAC



# 187

20 Hz Filter

**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Vinod Kumar Bhai  
 M.B.B.S., M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 20996 / 25MAY/Sec  
 10mm/mV, 25mm/Sec

## Laboratory Report

Lab Serial no. : LSHHI258134	Mr. No : 105395
Patient Name : Mr. SHASHANK YADAV	Reg. Date & Time : 27-Aug-2023 01:07 AM
Age / Sex : 34 Yrs / M	Sample Receive Date : 27-Aug-2023 01:07 PM
Referred by : Dr. SELF	Result Entry Date : 27-Aug-2023 02:54PM
Doctor Name : Dr. Vinod Bhat	Reporting Time : 27-Aug-2023 02:54 PM
OPD : OPD	

### HAEMATOLOGY

results unit reference

#### CBC / COMPLETE BLOOD COUNT

HB (Haemoglobin)	13.3	gm/dl	12.5 - 16.0
TLC	6.2	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	52	%	40 - 70
Lymphocyte	40	%	20 - 40
Eosinophil	06	%	01 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.78	Thousand / UI	3.8 - 5.10
P.C.V	<b>42.0</b>	million/UI	00 - 40
M.C.V.	87.9	fL	78 - 100
M.C.H.	27.8	pg	27 - 31
M.C.H.C.	<b>31.7</b>	g/dl	32 - 36
Platelet Count	1.66	Lacs/cumm	1.5 - 4.5

#### INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer

technician :

Typed By : Mr. BIRJESH

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
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Sr. Consultant Physician  
Reg. No. 30989 (DMC)



**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

Page 1

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist

## Laboratory Report

Lab Serial no.	: LSHHI258134	Mr. No	: 105395
Patient Name	: Mr. SHASHANK YADAV	Reg. Date & Time	: 27-Aug-2023 01:07 AM
Age / Sex	: 34 Yrs / M	Sample Receive Date	: 27-Aug-2023 01:07 PM
Referred by	: Dr. SELF	Result Entry Date	: 27-Aug-2023 02:54PM
Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 27-Aug-2023 02:54 PM
OPD	: OPD		

### HAEMATOTOLOGY

results	unit	reference
---------	------	-----------

#### ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate)	12	mm/1hr	00 - 22
--------------------------------------	----	--------	---------

##### Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

### BIOCHEMISTRY

results	unit	reference
---------	------	-----------

#### BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	124.9	mg/dl	70 - 110
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##### Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



Technician :

Typed By : Mr. BIRJESH

## Laboratory Report

Lab Serial no. : LSHHI258134	Mr. No : 105395
Patient Name : Mr. SHASHANK YADAV	Reg. Date & Time : 27-Aug-2023 01:07 AM
Age / Sex : 34 Yrs / M	Sample Receive Date : 27-Aug-2023 01:07 PM
Referred by : Dr. SELF	Result Entry Date : 27-Aug-2023 02:54PM
Doctor Name : Dr. Vinod Bhat	Reporting Time : 27-Aug-2023 02:54 PM
OPD : OPD	

### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	254.5	mg/dl	< - 200
HDL Cholesterol	71.6	mg/dl	35.3 - 79.5
LDL Cholesterol	132.5	mg/dl	50 - 150
VLDL Cholesterol	50.3	mg/dl	00 - 40
Triglyceride	251.6	mg/dl	00 - 170
Chloestrol/HDL RATIO	3.55	%	3.30 - 4.40

#### INTERPRETATION:

Lipid profile Of lipid panel IS a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

### BLOOD SUGAR (PP), Serum

SUGAR PP	115.0	mg/dl	80 - 140
----------	-------	-------	----------

#### Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT



technician :

Typed By : Mr. BIRJESH



## Laboratory Report

Lab Serial no.	: LSHHI258134	Mr. No	: 105395
Patient Name	: Mr. SHASHANK YADAV	Reg. Date & Time	: 27-Aug-2023 01:07 AM
Age / Sex	: 34 Yrs / M	Sample Receive Date	: 27-Aug-2023 01:07 PM
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Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 27-Aug-2023 02:54 PM
OPD	: OPD		

### BIOCHEMISTRY

	results	unit	reference
<b>KFT.Serum</b>			
Blood Urea	20.7	mg/dL	18 - 55
Serum Creatinine	1.0	mg/dl	0.7 - 1.3
Uric Acid	<b>7.5</b>	mg/dl	3.5 - 7.2
Calcium	9.4	mg/dL	8.8 - 10.2
Sodium (Na <sup>+</sup> )	138.9	mEq/L	135 - 150
Potassium (K <sup>+</sup> )	4.01	mEq/L	3.5 - 5.0
Chloride (Cl)	99.8	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	9.67	mg/dL	7 - 18

**Comment:-**

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.



technician :

Typed By : Mr. BIRJESH



**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

Page 1

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist

## Laboratory Report

Lab Serial no.	: LSHH1258134	Mr. No	: 105395
Patient Name	: Mr. SHASHANK YADAV	Reg. Date & Time	: 27-Aug-2023 01:07 AM
Age / Sex	: 34 Yrs / M	Sample Receive Date	: 27-Aug-2023 01:07 PM
Referred by	: Dr. SELF	Result Entry Date	: 27-Aug-2023 02:54PM
Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 27-Aug-2023 02:54 PM
OPD	: OPD		

### BIOCHEMISTRY

	results	unit	reference
<b>LIVER FUNCTION TEST, Serum</b>			
Bilirubin- Total	0.46	mg/dL	0.1 - 2.0
Bilirubin- Direct	0.19	mg/dL	0.0 - 0.20
Bilirubin- Indirect	0.27	mg/dL	0.2 - 1.2
SGOT/AST	<b>61.8</b>	IU/L	00 - 35
SGPT/ALT	<b>129.1</b>	IU/L	00 - 45
Alkaline Phosphate	95.3	U/L	53 - 128
Total Protein	6.63	g/dL	6.4 - 8.3
Serum Albumin	3.71	gm%	3.50 - 5.20
Globulin	2.92	gm/dl	1.8 - 3.6
Albumin/Globulin Ratio	1.27	%	

#### INTERPRETATION

A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.



Technician :

Typed by : Mr. BIRJESH



**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

Page 1

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist



# SJM SUPER SPECIALITY HOSPITAL

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 E-mail: email@sjmhospital.com  
 Web.: www.sjmhospital.com



## Laboratory Report

Lab Serial No. : LSHHI258134	Reg. No. : 105395
Patient Name : MR. SHASHANK YADAV	Reg. Date & Time : 27-Aug-2023 01:07 AM
Age/Sex : 34 Yrs /M	Sample Collection Date : 27-Aug-2023 01:07 PM
Referred By : SELF	Sample Receiving Date : 27-Aug-2023 01:07 PM
Doctor Name : Dr. Vinod Bhat	ReportingTime : 27-Aug-2023 02:54 PM
OPD/IPD : OPD	:

### TEST NAME

### VALUE

ABO

"B"

Rh

POSITIVE

#### Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive an RH negative.

### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

Quantity: 20 ml

Color: Yellow

Transparency: clear

#### CHEMICAL EXAMINATION

Albumin: nil

Glucose: nil

PH: Acidic

#### MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF

RBC's: nil

Crystals: nil

Epithelial cells: 0-1 /HPF



Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

**Dr. Rajeev Goel**  
 M.D. (Pathologist)  
 36548 (MCI)

30-08-2023  
**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Microbiologist



# SJM SUPER SPECIALITY HOSPITAL

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 Tel.: 0120-6530900 / 10 Mob.: +91 9599259072  
 E-mail: email@sjmhospital.com  
 Web.: www.sjmhospital.com



## Laboratory Report

Lab Serial No. : LSHHI258134	Reg. No. : 105395
Patient Name : MR. SHASHANK YADAV	Reg. Date & Time : 27-Aug-2023 01:07 AM
Age/Sex : 34 Yrs /M	Sample Collection Date : 27-Aug-2023 01:07 PM
Referred By : SELF	Sample Receiving Date : 27-Aug-2023 01:07 PM
Doctor Name : Dr. Vinod Bhat	ReportingTime : 27-Aug-2023 02:54 PM
OPD/IPD : OPD	:

Others: nil

**Note:-**

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.

### URINE SUGAR (FBS)

### CHEMICAL EXAMINATION

Glucose : Nil

### URINE SUGAR (PPBS)

### CHEMICAL EXAMINATION

Glucose : Nil

Mr. BIRJESH



<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

**Dr. Rajeev Goel**  
 M.D. (Pathologist)  
 36548 (MCI)

30-08-2023  
**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Microbiologist



SHASHANK YADAV

PID NO: P542300422449  
Age: 34.0 Year(s) Sex: Male



Reference: Dr. SFF  
Sample Collected At:  
S J MEMORIAL HOSPITAL  
PLOT NO 2, SEC 63, OPP SHANI  
MANDIR, CHUARASI, SEC 63, NOIDA  
201301  
Sample Processed At: Metropolis  
Healthcare Ltd E-21, B1 Mohan Co-op  
Ind Estate New Delhi-110044

Medical Laboratory Report

Registered On:  
27/08/2023 07:48 PM  
Collected On:  
27/08/2023 7:47PM  
Reported On:  
27/08/2023 09:03 PM

### HbA1c Glycated Haemoglobin

(EDTA Whole Blood)

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1C- Glycated Haemoglobin (HPLC)	5.4	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5
Estimated Average Glucose (eAG) (Calculated)	108.28	mg/dL	

#### Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2022, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
  - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.



*S. Chopra*  
Dr. Geeta Chopra,  
M.D (Pathology)  
(DMC Reg. No. - 5204)



SHASHANK YADAV

PID NO: P542300422449  
Age: 34.0 Year(s) Sex: Male



Reference: Dr. S. M. S. J MEMORIAL HOSPITAL  
Sample Collected At:  
S J MEMORIAL HOSPITAL  
PLOT NO 2, SEC 63, OPP SHANI  
MANDIR, CHIJARASI, SEC 63, NOIDA  
201301  
Sample Processed At: Metropolis  
Healthcare Ltd E-21, B1 Mohan Co-op  
Ind Estate New Delhi-110044

Medical Laboratory Report

Registered On:  
27/08/2023 07:48 PM  
Collected On:  
27/08/2023 7:47PM  
Reported On:  
27/08/2023 09:03 PM

Investigation	Observed Value	Unit	Biological Reference Interval
* <b>Thyroid panel-1</b> (Serum,ECLIA)			
T3 (Total)	124	ng/dL	84.6-201.8
T4 (Total)	9.11	µg/dL	5.1-14.1
TSH(Ultrasensitive)	3.45	µIU/mL	0.54-5.3

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness*
Raised	Decreased	Decreased	•Chronic Autoimmune Thyroiditis •Post thyroidectomy,Post radioiodine •Hypothyroid phase of transient thyroiditis*
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics*
Decreased	Raised or within Range	Raised or within Range	•Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness •Subclinical Hyperthyroidism •Thyroxine ingestion*
Decreased	Decreased	Decreased	•Central Hypothyroidism •Non-Thyroidal illness •Recent treatment for Hyperthyroidism (TSH remains suppressed)*
Decreased	Raised	Raised	•Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum**
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

References: 1. Interpretation of thyroid function tests. Dayan et al. THE LANCET • Vol 357 • February 24, 2001  
2. Laboratory Evaluation of Thyroid Function, Indian Thyroid Guidelines, JAPI, January 2011,vol. 59

-- End of Report --



Tests marked with NABL symbol are accredited by NABL vide Certificate no MC-2676, Validity till 04-04-2024



*Dr. Geeta Chopra*

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M.D (Pathology)  
(DMC Reg. No. -5204)

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## Ultrasound Report

Name: Mr. Shashank Yadav      Age/Sex:33Yrs./M      Date:27/08/2023

### Ultrasound - Male Abdomen

**Liver:** - Liver appears fatty degeneration grade 1. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

**GALL BLADDER:**-Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.  
**Sludge seen in GB.**

**PANCREAS:** -Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

**SPLEEN:** -Spleen is normal in size. No focal mass lesion is seen in parenchyma.

**KIDNEYS:** - Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi on both sides.

**PARAAORTIC REGIONS:** Any mass/ lymph nodes: -- no mass or lymph nodes seen.

**URINARY BLADDER:**- Adequately distended. Wall were regular and thin. Contents are Normal. No stone formation seen.

**PROSTATE:** - Normal in shape and position. Parenchymal echotexture is normal. No free ascetic fluid or pleural effusion seen.

**IMPRESSION:** - Fatty liver grade 1,  
GB Sludge.

DR. PUSHPA PAUL



For SJM Super Speciality Hospital

DR. Rakesh Gujjar





PATIENT ID	: 23789 OPD	<b>X-Ray Report</b>	NAME	: MR SHASHANK YADAV
AGE	: 35Y		SEX	: Male
ACCN	:		MODALITY	: DX
REF. PHY.	:		STUDY	: Chest
STUDY DATE	: 27-Aug-2023		VOUCHER NO	S{voucherNo}

## RADIOLOGY REPORT

### EXAM: X RAY CHEST

#### CLINICAL HISTORY:

#### COMPARISON:

None

#### TECHNIQUE:

Frontal projections of the chest were obtained

#### FINDINGS

Both lung fields are clear.  
Both costophrenic angles appear normal.  
The tracheal lucency is centrally placed.  
The mediastinal and diaphragmatic outlines appear normal.  
The heart shadow is normal.  
The bony thoracic cage and soft tissues are normal.

#### IMPRESSION

1. The study is within normal limits.

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Dr. Amit Khosla  
FRCR (DIPLOMA), DNB (RADIOLOGY), FRCR  
Consultant Radiologist  
Reg No: 20054

Dr. Amit Khosla  
27th Aug 2023



R



MIR SHASHANK YADAV 33 Male

Chest

P.A

257/89 OPD

27/08/2023 9:10:23 AM

S. J. MEMORIAL SUPER SPECIALITY HOSPITAL, SEC 63, CHH/JARSI, NOIDA