 GPS Map Camera



Jhansi, Uttar Pradesh, India

FJ58+8WJ, Karguan Road, Bundelkhand University, Jhansi, Uttar Pradesh 284128, India

Lat 25.458337°

Long 78.616941°

19/10/24 09:59 AM GMT +05:30



भारत सरकार

Government of India



Aadhaar no. issued: 04/12/2013



मुकेश राय

Mukesh Rai

जन्म तिथि/DOB: 21/01/1986

पुरुष/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

**Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).**

8569 0585 9241

मेरा आधार, मेरी पहचान

MUKESH, RAI

Exercise Test / 12-Lead Report

PARAKH DIAGNOSTICS

Patient ID: 102416741

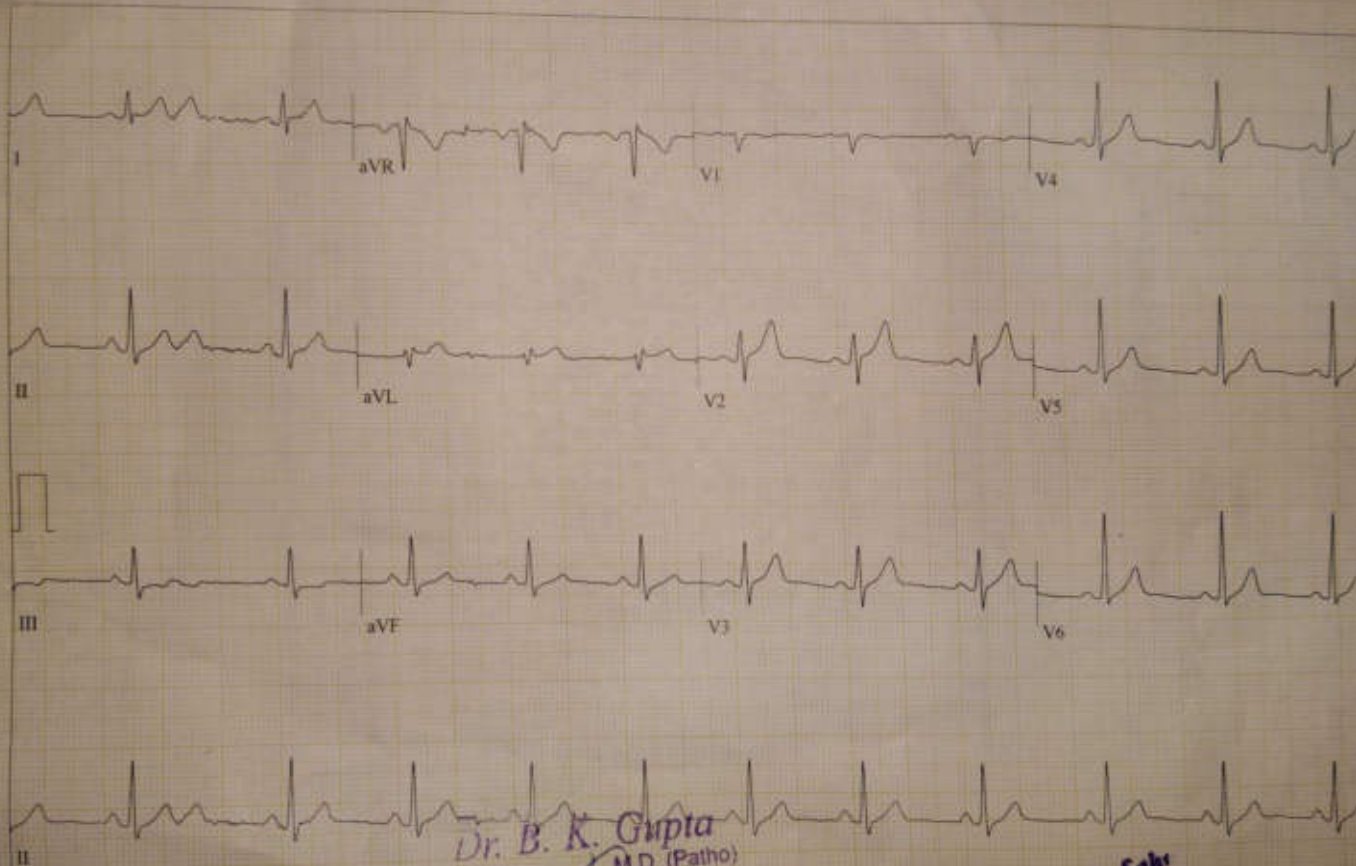
10/19/2024

Male 167 cm, 71 kg

70 bpm

11:14:06am

38 yrs Indian



Dr. B. K. Gupta
 M.D. (Patho)
 Reg. 49734
 Voluntary Pathology
 Parakh Pathology Lab
 Opp. Medical College, Jhansi

WON C/L
 Dr. Binod Kumar Sahu
 M.B.B.S. M.D. (MED.)
 Reg. No. -42918

GE CardioSoft V7.0 (2)

25 mm/s, 10 mm/mV, 50 Hz, 0.05 - 20 Hz, A⁺ HR(V6)

PARAKH DIAGNOSTICS
Karguwan Ji Road Opp MLB Gate No.2
JHANSI UP INDIA

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: MUKESH, RAI
Patient ID: 102416741
Height: 167 cm
Weight: 71 kg

DOB: 01/21/1986
Age: 38 yrs
Gender: Male
Race: Indian

Study Date: 10/19/2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: Dr. Vinod Kumar Sahu
Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed [km/h]	Grade [%]	HR [bpm]	BP [mmHg]	Comment
PRE TEST	SUPINE	00:24	0.00	0.00	79	120/80	
	STANDING	00:24	0.00	0.00	72	122/82	
	HYPERV.	00:23	0.00	0.00	76	124/84	
	WARM-UP	01:01	1.60	0.00	90	126/86	
EXERCISE	STAGE 1	03:00	2.70	10.00	114	128/88	
	STAGE 2	03:00	4.00	12.00	127	130/90	
	STAGE 3	03:00	5.40	14.00	137	132/92	
	STAGE 4	01:45	6.70	16.00	160	134/94	
RECOVERY		05:10	0.00	0.00	88	130/90	

The patient exercised according to the BRUCE for 10:44 min:s, achieving a work level of Max. METS: 13.30. The resting heart rate of 74 bpm rose to a maximal heart rate of 160 bpm. This value represents 87 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 134/94 mmHg. The exercise test was stopped due to Target heart rate achieved.

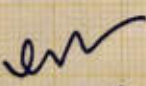
Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

--

Dr. B. K. Gupta
M.D. (Patho)
Reg. 49734
Voluntary Pathology
Parakh Pathology Lab
Opp. Medical College, Jhansi


Dr. Vinod Kumar Sahu
M.B.B.S. M.D. (MED.)
Reg. No. -42508

MUKESH RAI

Patient ID: 162416741

10/19/2024 Male 167 cm 71 kg

11:14:50am 38 yrs Indian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE: Exercise Time: 10:44

Max HR: 160 bpm 87 % of max predicted 102 bpm HR at rest: 74

Max BP: 134/94 mmHg BP at rest: 120/80 Max RPP: 21440 mmHg*bpm

Maximum Workload: 13.30 METS

Max ST: -1.90 mm, 0.23 mV/s in V6; EXERCISE STAGE 4: 10:29

ST/HR index: 1.50 μ V/bpmST/HR slope: 2.91 μ V/bpm (V6)

HR reserve used: 78 %

HR recovery: 24 bpm

VE recovery: 0 VE/min

ST/HR hysteresis: 0.050 mV (V2)

QRS duration: BASELINE: 90 ms, PEAK EX: 94 ms, REC: 90 ms

Reasons for Termination: Target heart rate achieved

Summary:**Resting ECG:** normal. **Functional Capacity:** normal. **HR Response to Exercise:**appropriate. **BP Response to Exercise:** normal resting BP - appropriate response.**Chest Pain:** none. **Arrhythmias:** none. **ST Changes:** none. **Overall impression:**

Normal stress test.

Room:

Location: * 0 *

Phase Name	Stage Name	Time in Stage	Speed [km/h]	Grade [%]	Workload [METS]	HR [bpm]	BP [mmHg]	RPP [mmHg*bpm]	VE [/min]	ST Level V6 [mm]	Comment
PRETEST	SUPINE	00:24	0.00	0.00	1.0	79	120/80	9480	0	1.05	
	STANDING	00:24	0.00	0.00	1.0	72	122/82	8784	0	0.95	
	HYPERV.	00:23	0.00	0.00	1.0	76	124/84	9424	0	0.95	
	WARM-UP	01:01	1.60	0.00	1.7	90	126/86	11340	0	1.10	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	114	128/88	14592	0	0.95	
	STAGE 2	03:00	4.00	12.00	7.0	127	130/90	16510	0	0.45	
	STAGE 3	03:00	5.40	14.00	10.0	137	132/92	18084	1	-0.40	
	STAGE 4	03:45	6.70	16.00	13.3	160	134/94	21440	0	-0.95	
RECOVERY		05:10	0.00	0.00	1.0	88	130/90	11440	0	-0.10	

MUKESH RAI

Patient ID: 102416741

10/19/2024 Male 167 cm 71 kg

11:15:13am 38 yrs Indian

Exercise Test / ECG Strips

80 bpm

120/80 mmHg

PRETEST

SUPINE

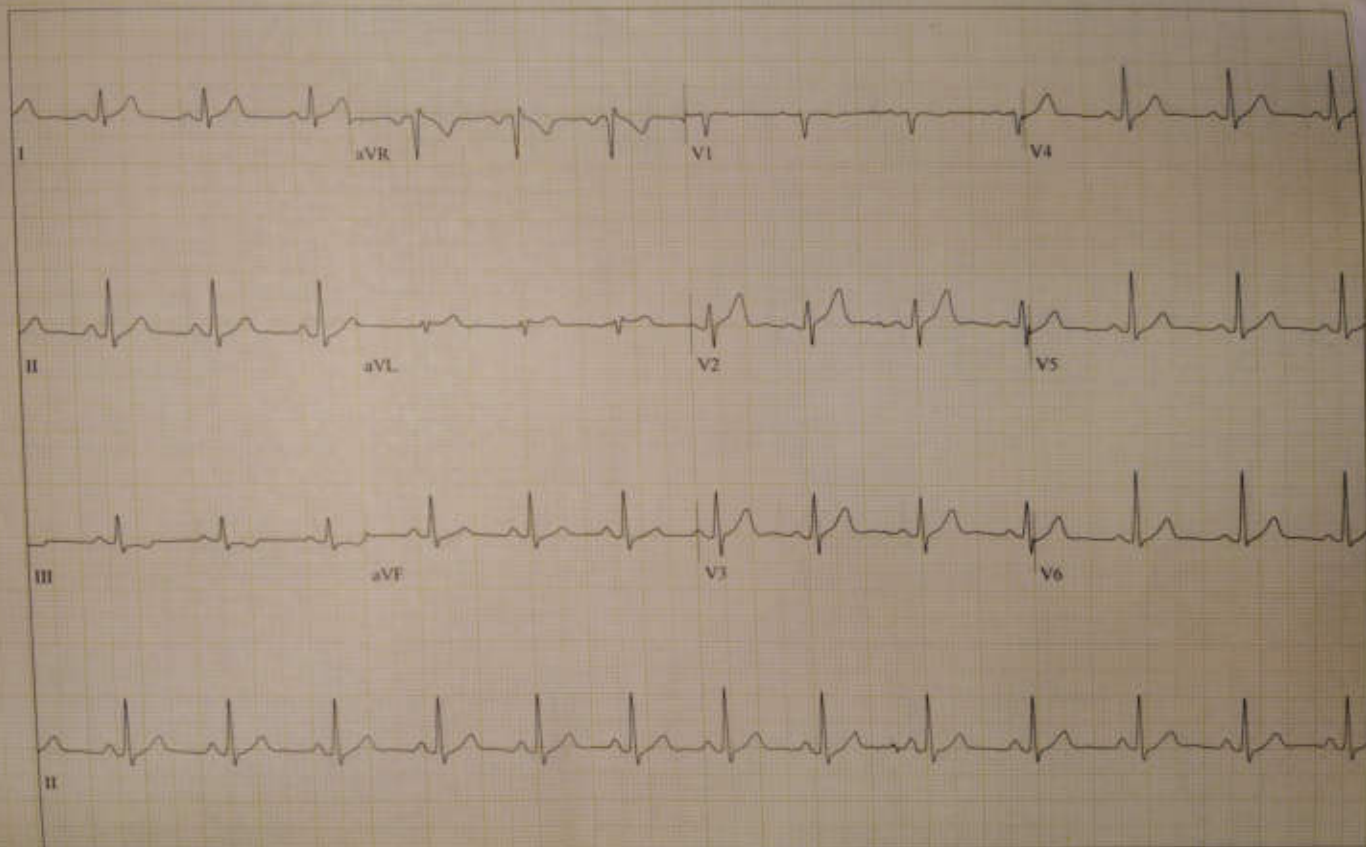
0:23

BRUCE

0.0 km/h

0.0 %

PARAKH DR.



GE CardioSoft V7.0 (Z)

25 mm/s 10 mm/mV 50 Hz 0.56-20 Hz ADS HEART V5.41.1 HR(V6,II)

Unconfirmed

Attending MD: Dr. Vinod Kumar Sahu

Page 2

MUKESH RAI

Patient ID: 102416741

10/19/2024

11:15:36am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

73 bpm

122/82 mmHg

PRETEST

STANDING

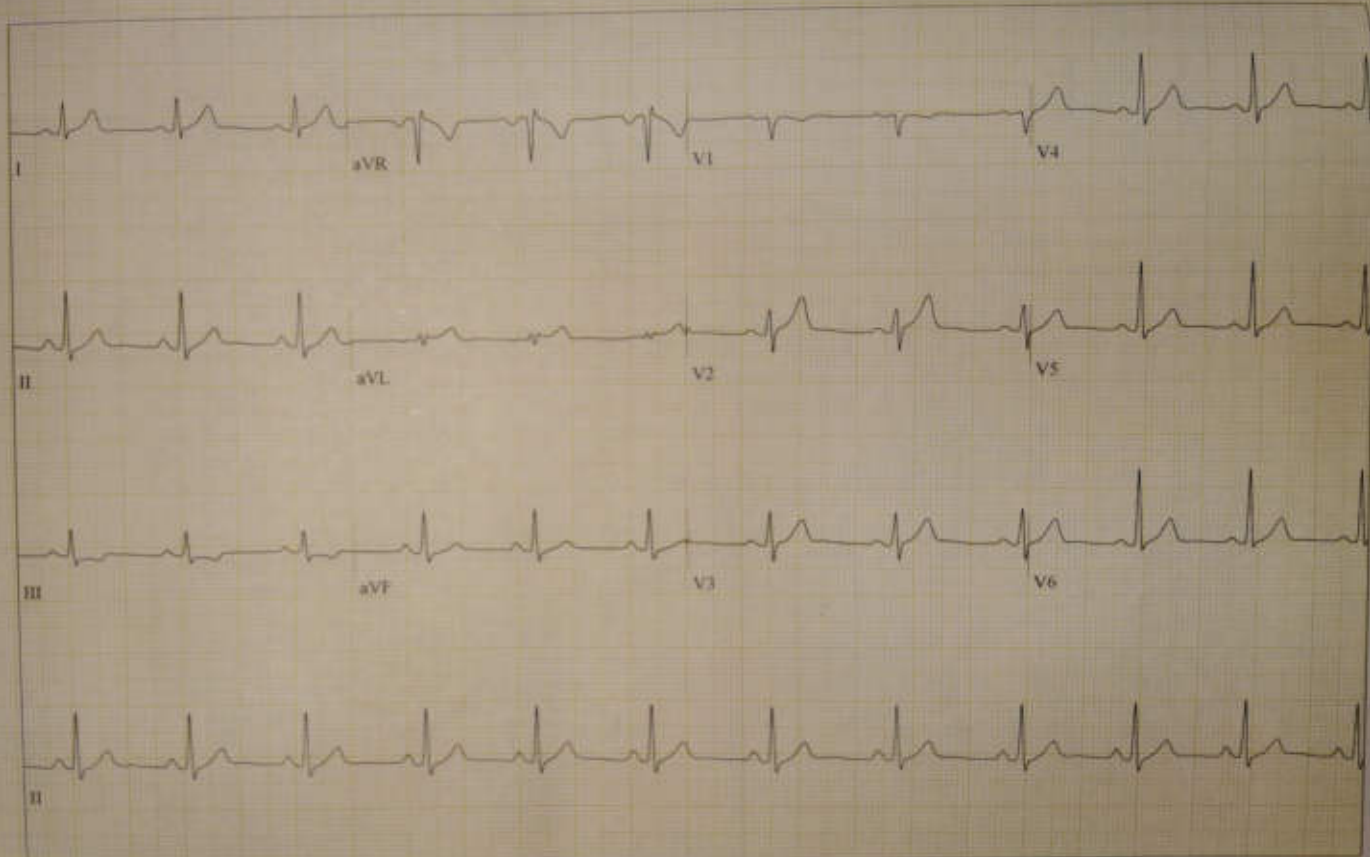
0.46

BRUCE

0.0 km/h

0.0 %

PARAGH DL



MUKESH, RAI

Patient ID: 102410741

10/19/2024

11:15:58am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

76 bpm

124/84 mmHg

PRETEST

HYPERV

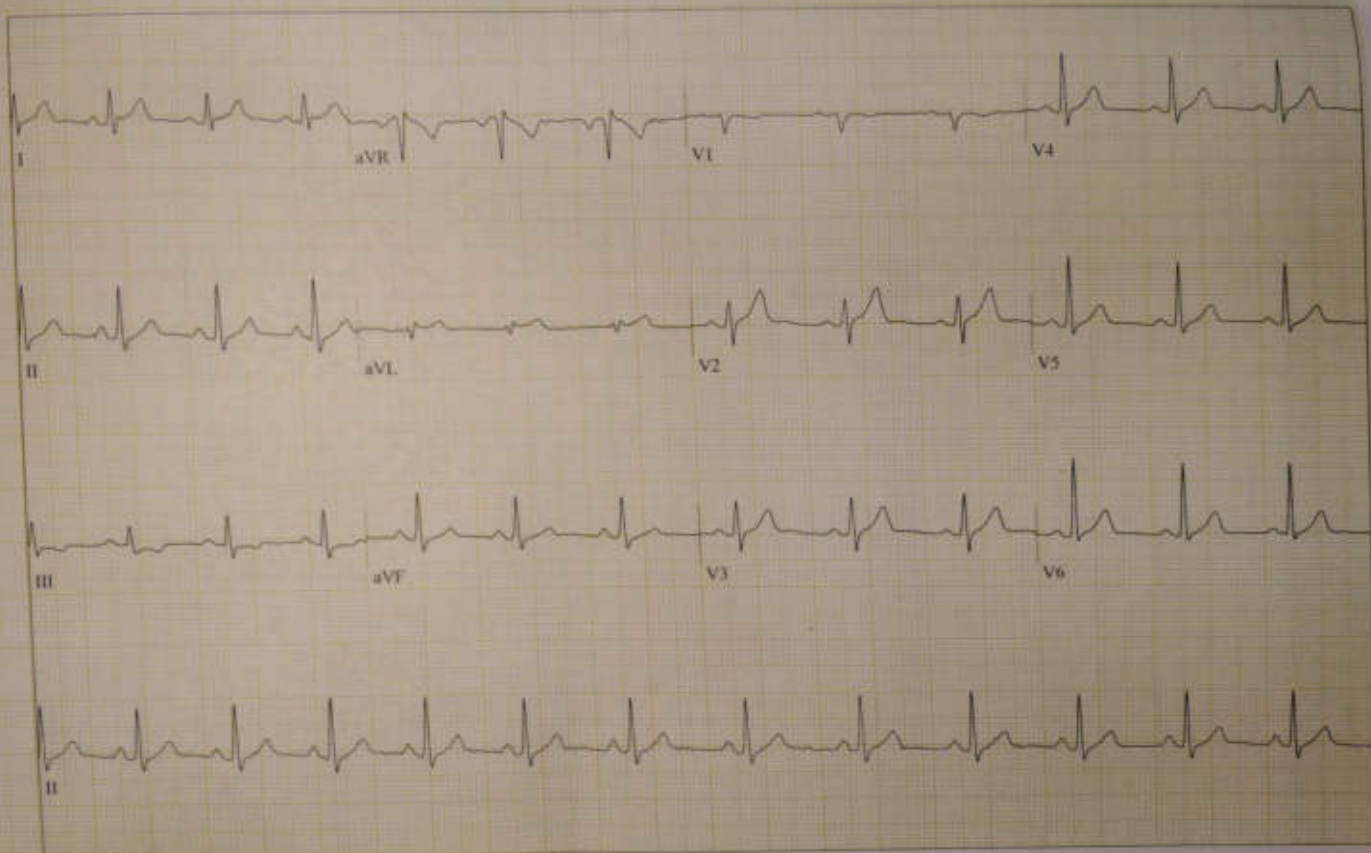
1.08

BRUCE

6.0 km/h

0.0 %

PARAG D.



GE CardioSoft V7.0 (2)

25 mm/s 10 mm/mV 50 Hz 0.56-20 Hz ADS HEART V5.41.1 (HR/V6,II)

Unconfirmed

Attending MD: Dr. Vinod Kumar Sahu

Page 4

MUKESH, RAI

Patient ID: 102416741

10/19/2024 Male 167 cm 71 kg

11:17:00am 58 yrs Indian

90 bpm

126/86 mmHg

PRETEST

WARM-UP

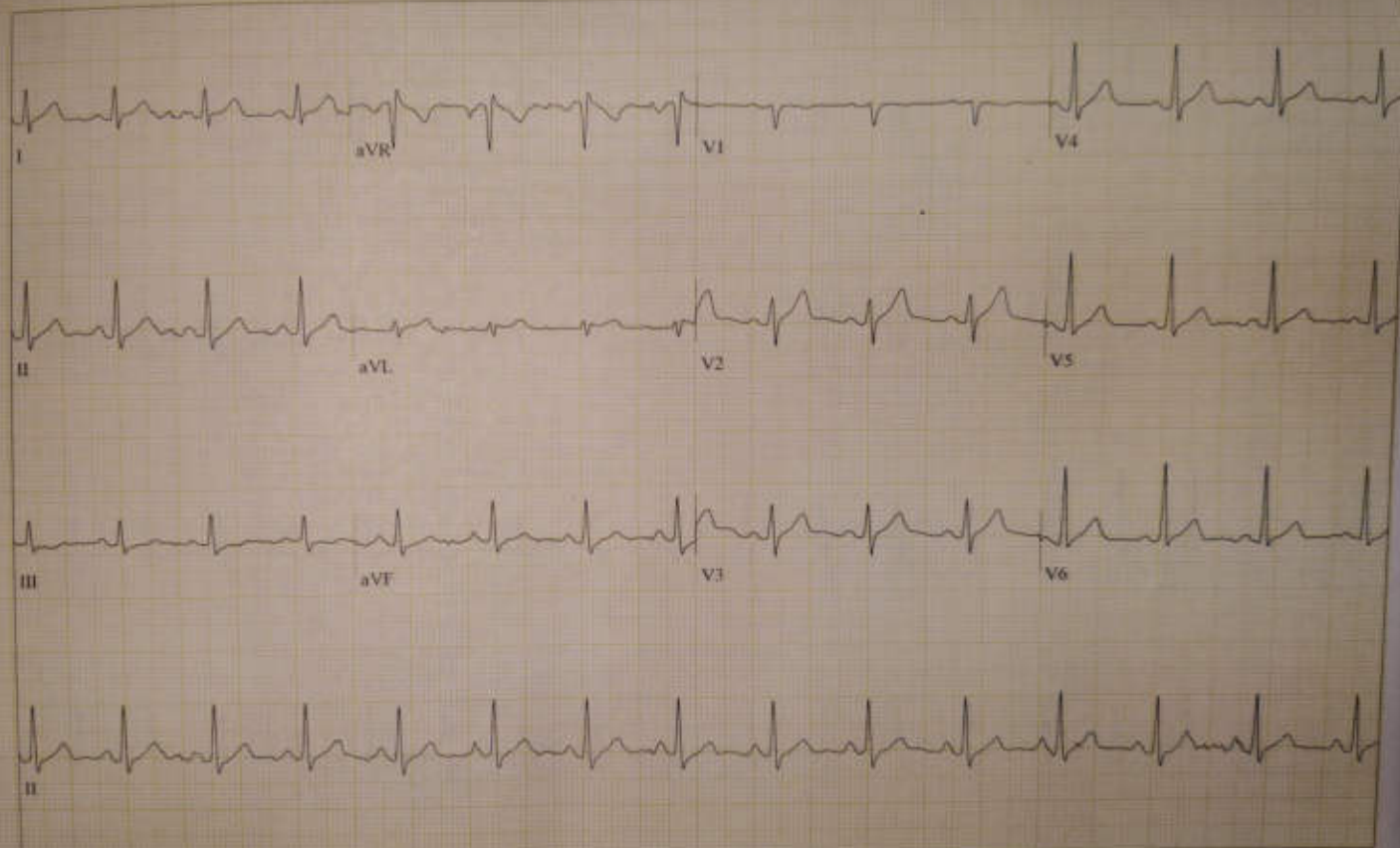
2:10

BRUCE

1.6 km/h

0.0%

PARADOX



MUKESH RAI

Patient ID: 102416741

10/19/2024

11:19:50am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

112 bpm

128/88 mmHg

EXERCISE

STAGE 1

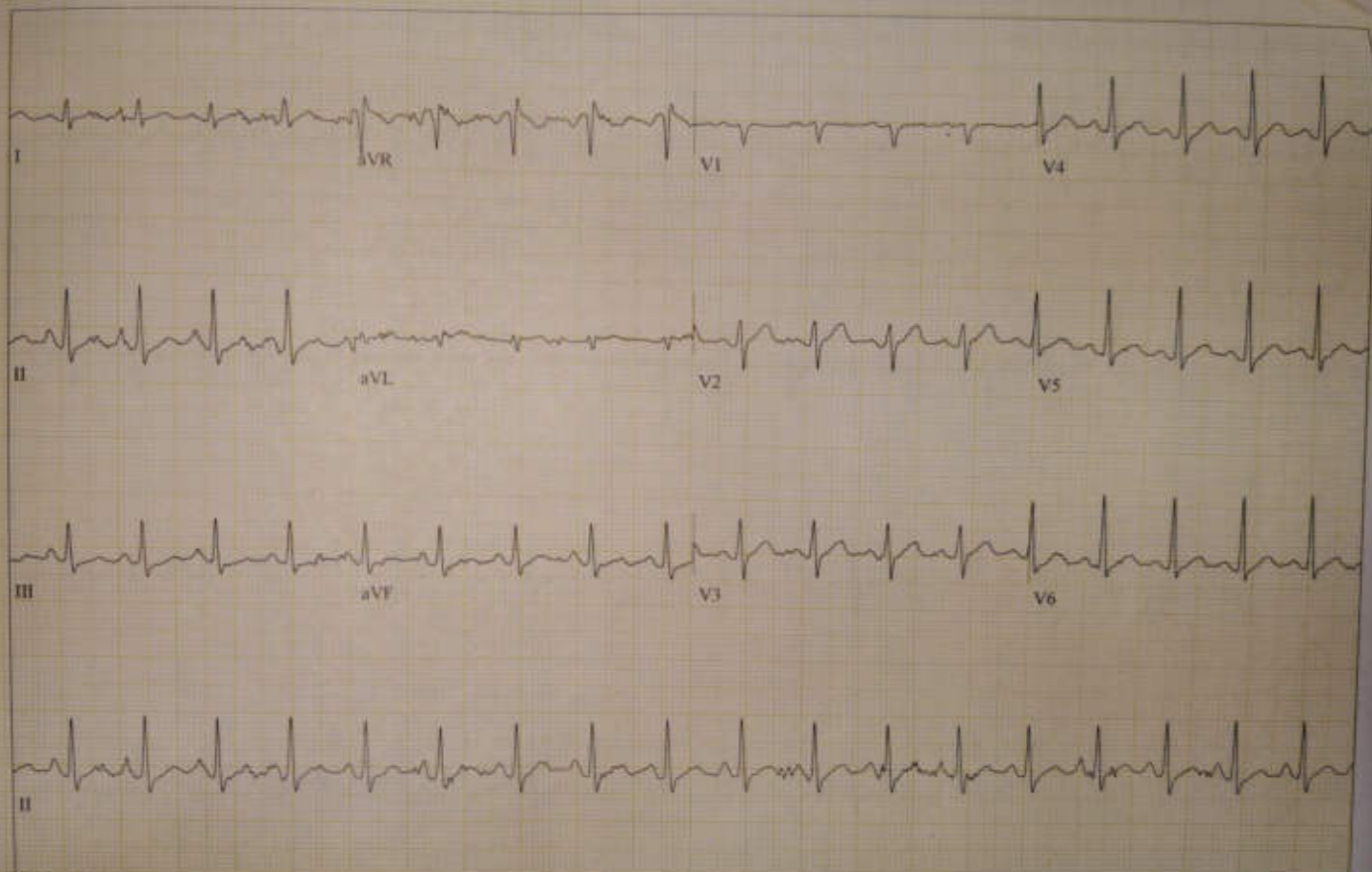
2:50

BRUCE

2.7 km/h

10.0 %

PARAGWIPRA



GE CardioSoft V7.0 (2)

25 mm/s 10 mm/mV 50 Hz 0.56-20 Hz ADS HEART V5.41.1 HR(V6,II)

Unconfirmed

Attending MD: Dr. Vinod Kumar Sahu

Page 6

MUKESH RAI

Patient ID: 102416741

10/19/2024

11:22:50am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

125 bpm

130/90 mmHg

EXERCISE

STAGE 2

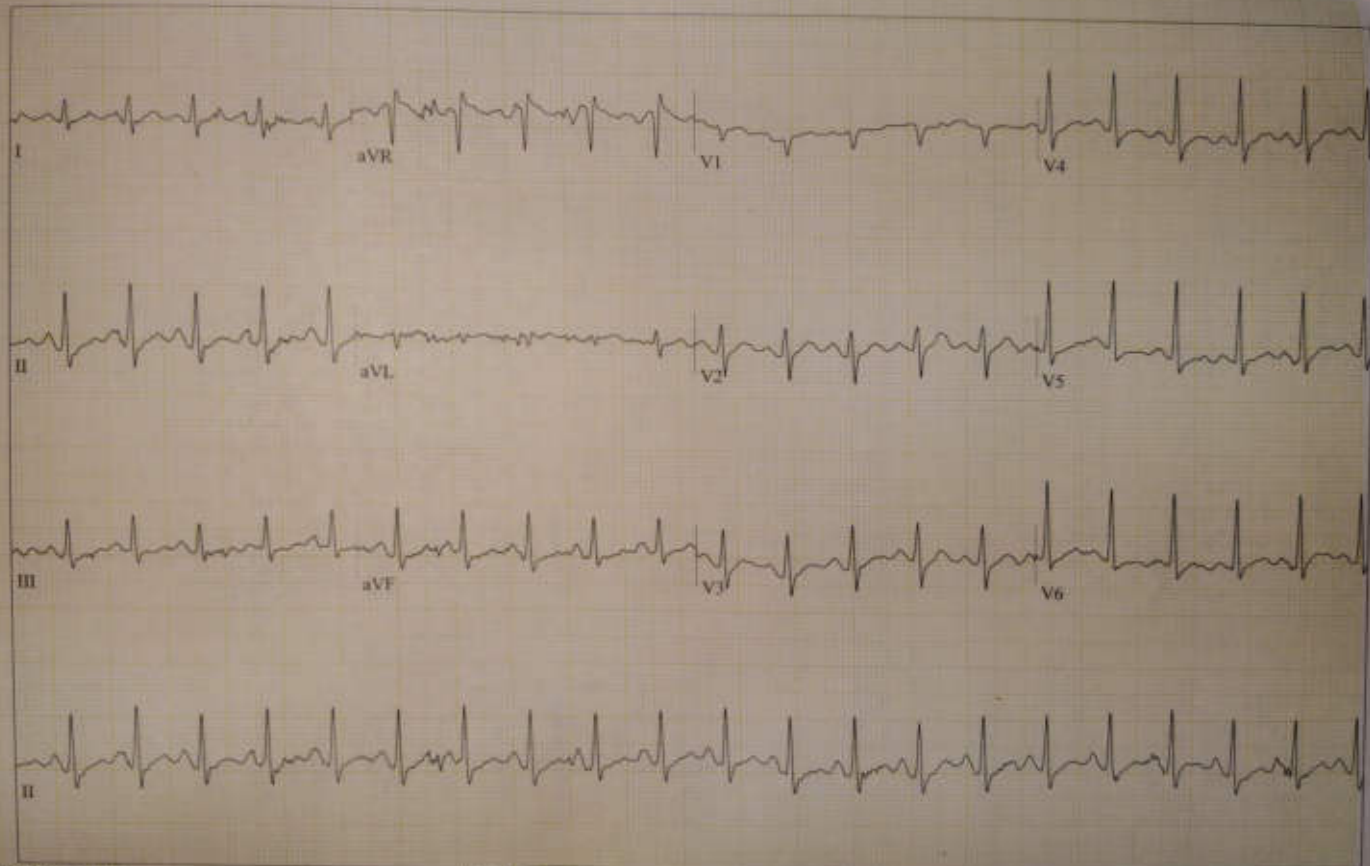
5:50

BRUCE

4.0 km/h

12.0 %

PARAKH



GE CardioSoft V7.0 (2)

25 mm/s 10 mm/mV

50 Hz 0.56-20 Hz

ADS HEART V5.4.1

HR(V6,II)

Unconfirmed

Attending MD: Dr. Vinod Kumar Sahu

MUKESH, RAI

Patient ID: 102416741

10/19/2024

11:25:50am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

139 bpm

132/92 mmHg

EXERCISE

STAGE 3

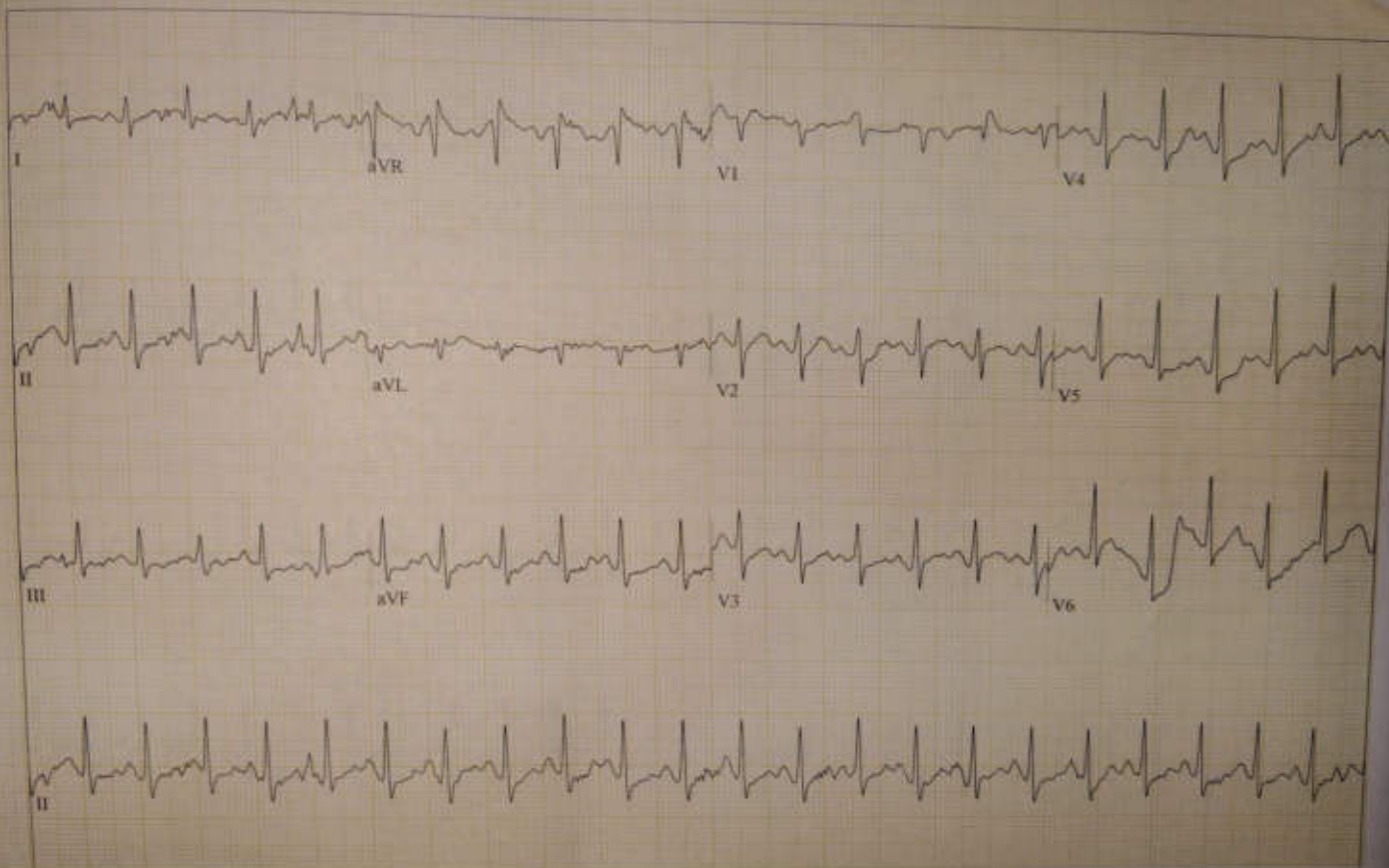
8:50

BRUCE

5.4 km/h

14.0%

PARAKW...



Exercise Test / ECG Strips

MUKESH, RAI

Patient ID: 102416741

10/19/2024

11:27:45am

Male 167 cm 71 kg

38 yrs Indian

160 bpm

134/94 mmHg

EXERCISE

STAGE 4

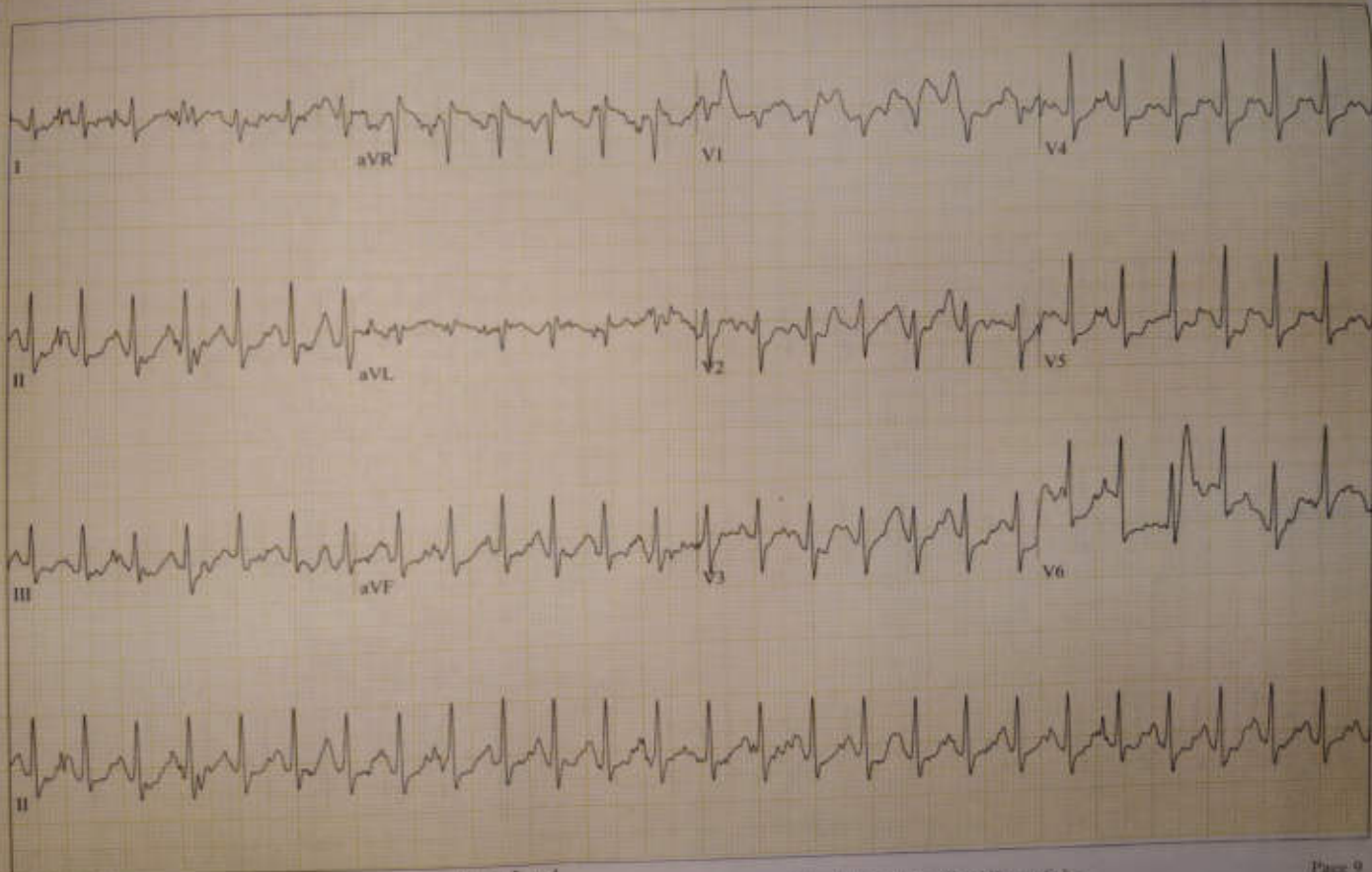
10:45

BRUCE

6.7 km/h

16.0%

PARAKH



MUKESH, RAI

Patient ID: 102416741

10/19/2024

11:28:34am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

142 bpm

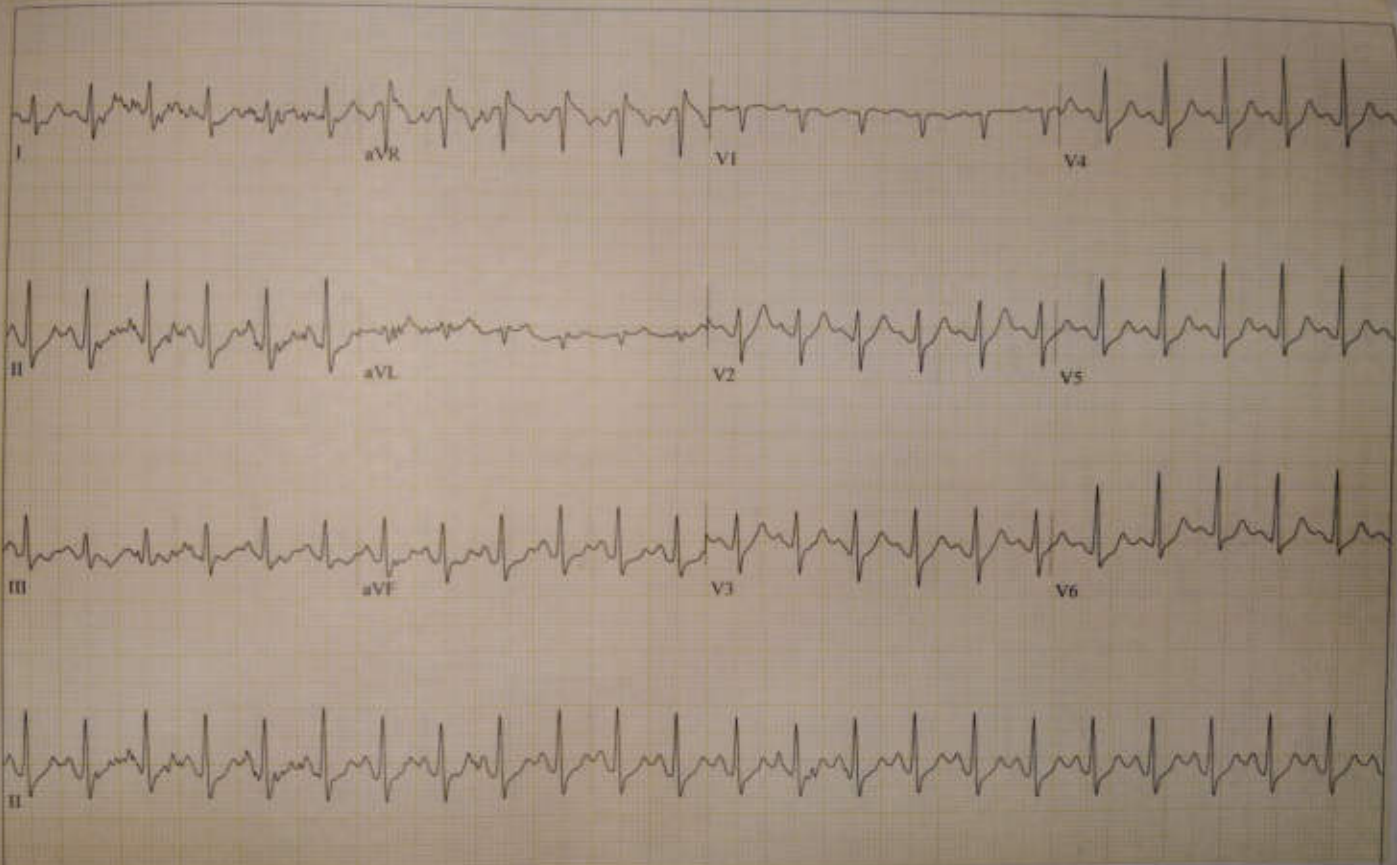
134/94 mmHg

RECOVERY

BRUCE

PARADOX

0:50



MUKESH, RAI

Patient ID: 102416741

10/19/2024

Male 167 cm 71 kg

11:29:34am

38 yrs Indian

Exercise Test / ECG Strips

102 bpm

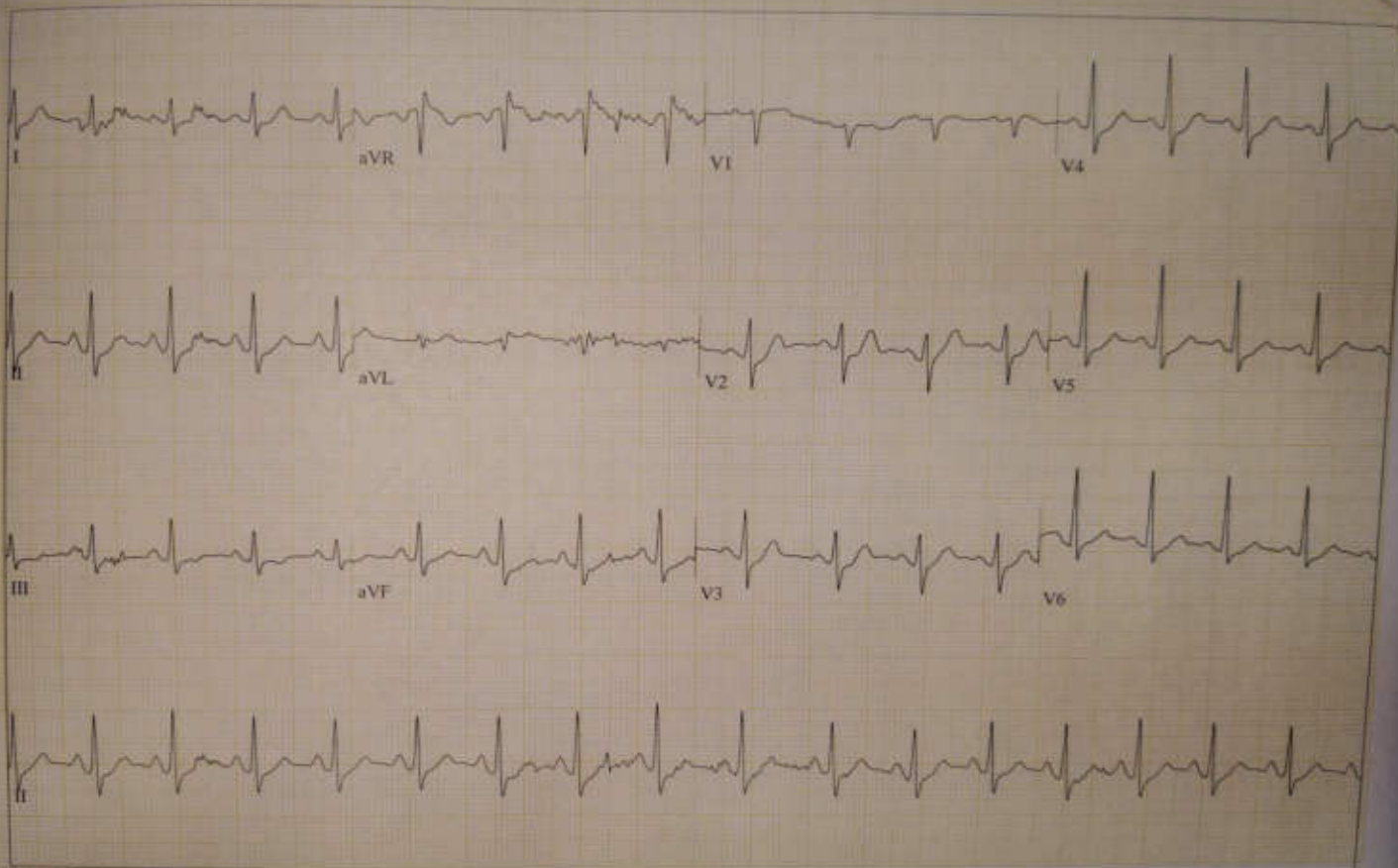
RECOVERY

BRUCE

0.0 km/h

0.0 %

PARAKH



MUKESH RAI

Strips ID: 102416741

10/18/2024

14:30:34am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test / ECG Strips

100 bpm

132/92 mmHg

RECOVERY

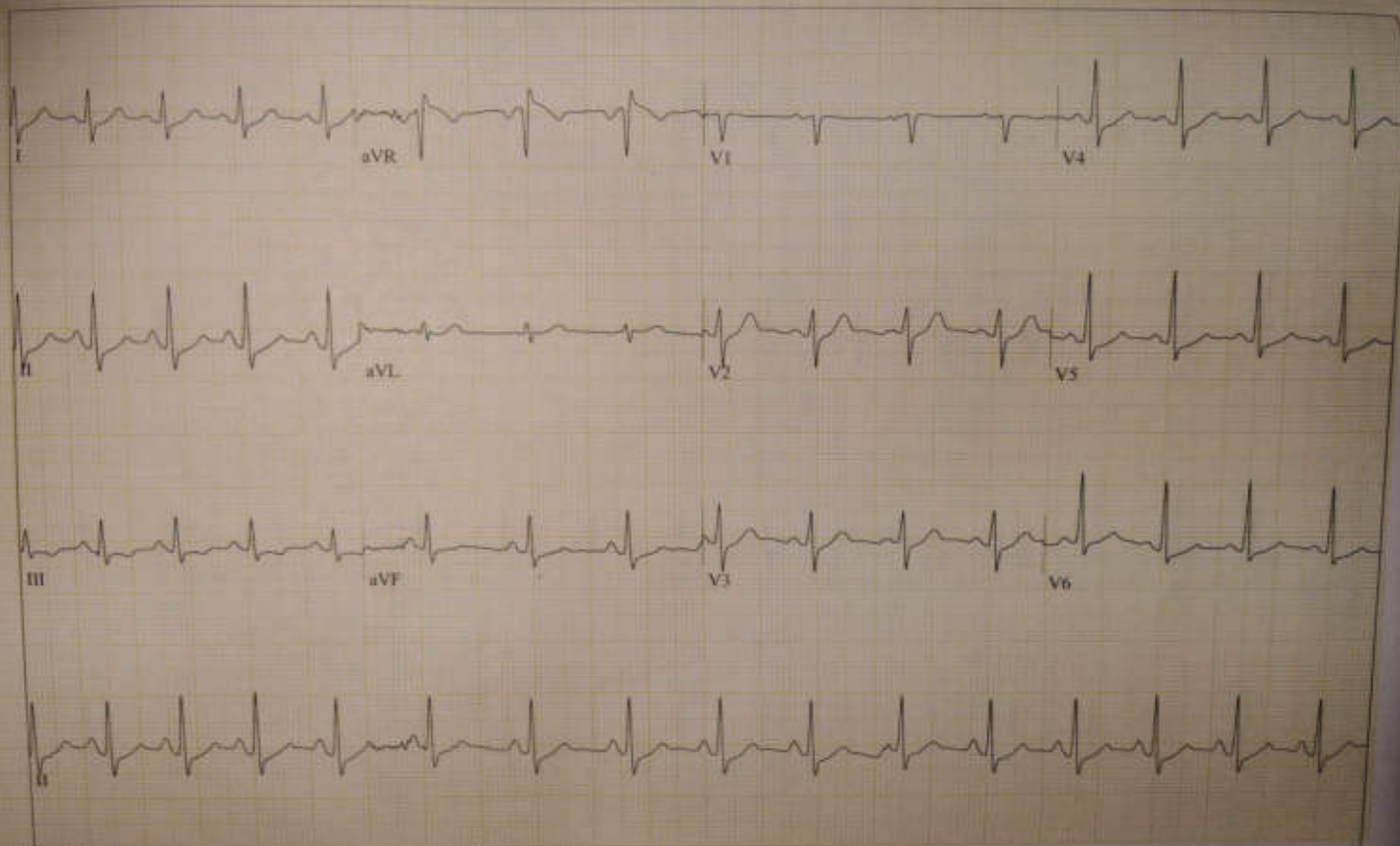
2:50

BRUCE

0.0 km/h

0.0 %

PARAKH



GE CardioSoft V7.0 (2)

25 mm/s 10 mm/mV 50 Hz 0.56-20 Hz ADS HEART V5:41 HR(V5,V6)

Unconfirmed

Attending MD: Dr. Vinod Kumar Sahu

Page 12

MUKESH, RAI

Patient ID: 102416741

10/19/2024

11:31:34am

Male 167 cm 71 kg

38 yrs Indian

Exercise Test ECG Strips

93 bpm

RECOVERY

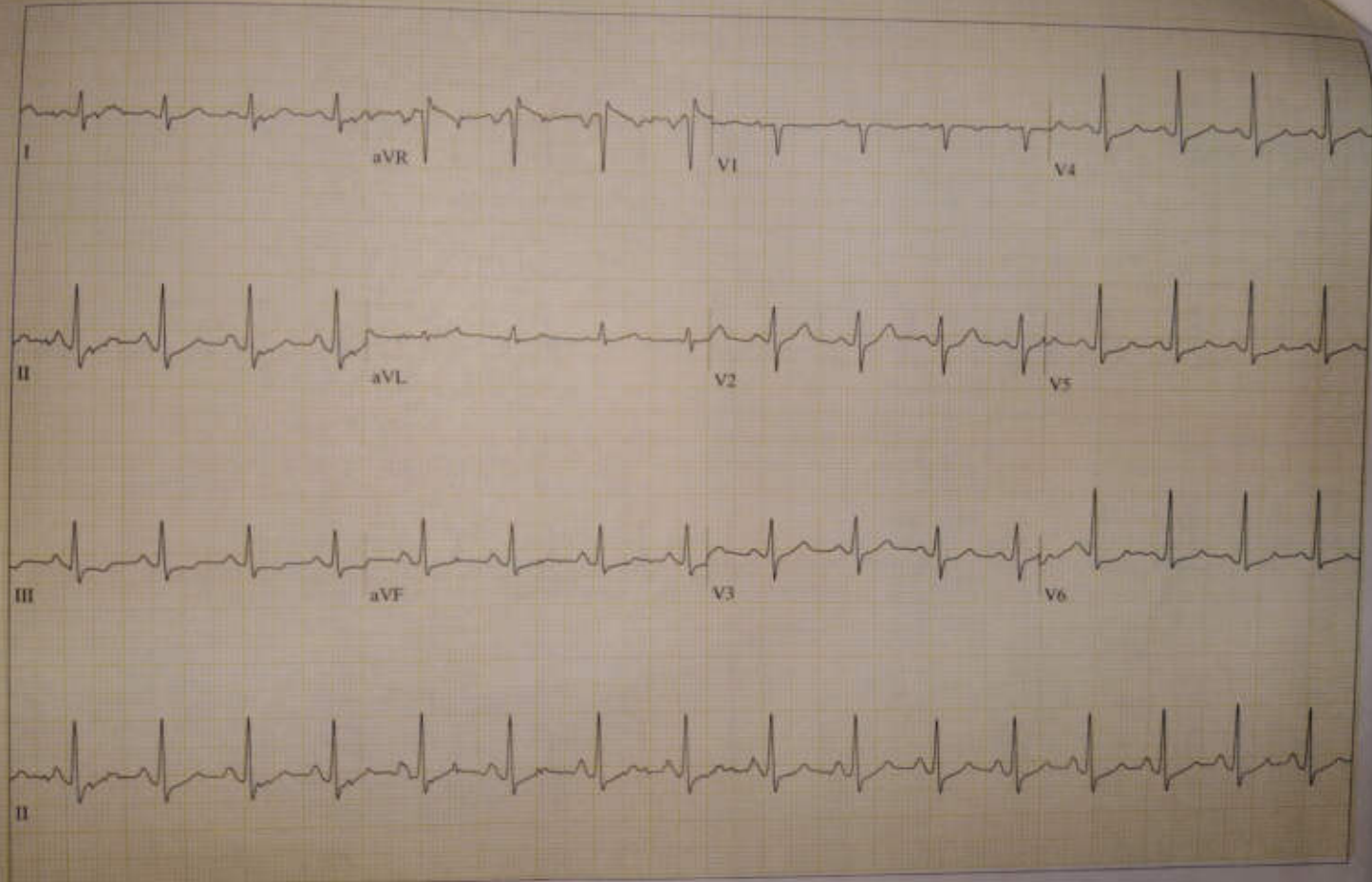
3:50

BRUCE

0.6 km/h

0.0 %

PALAN...



MUKESH, RAI

Patient ID: 102416741

10/19/2024

11:32:34am

Male 167 cm 71 kg

38 yrs Indian

88 bpm

RECOVERY

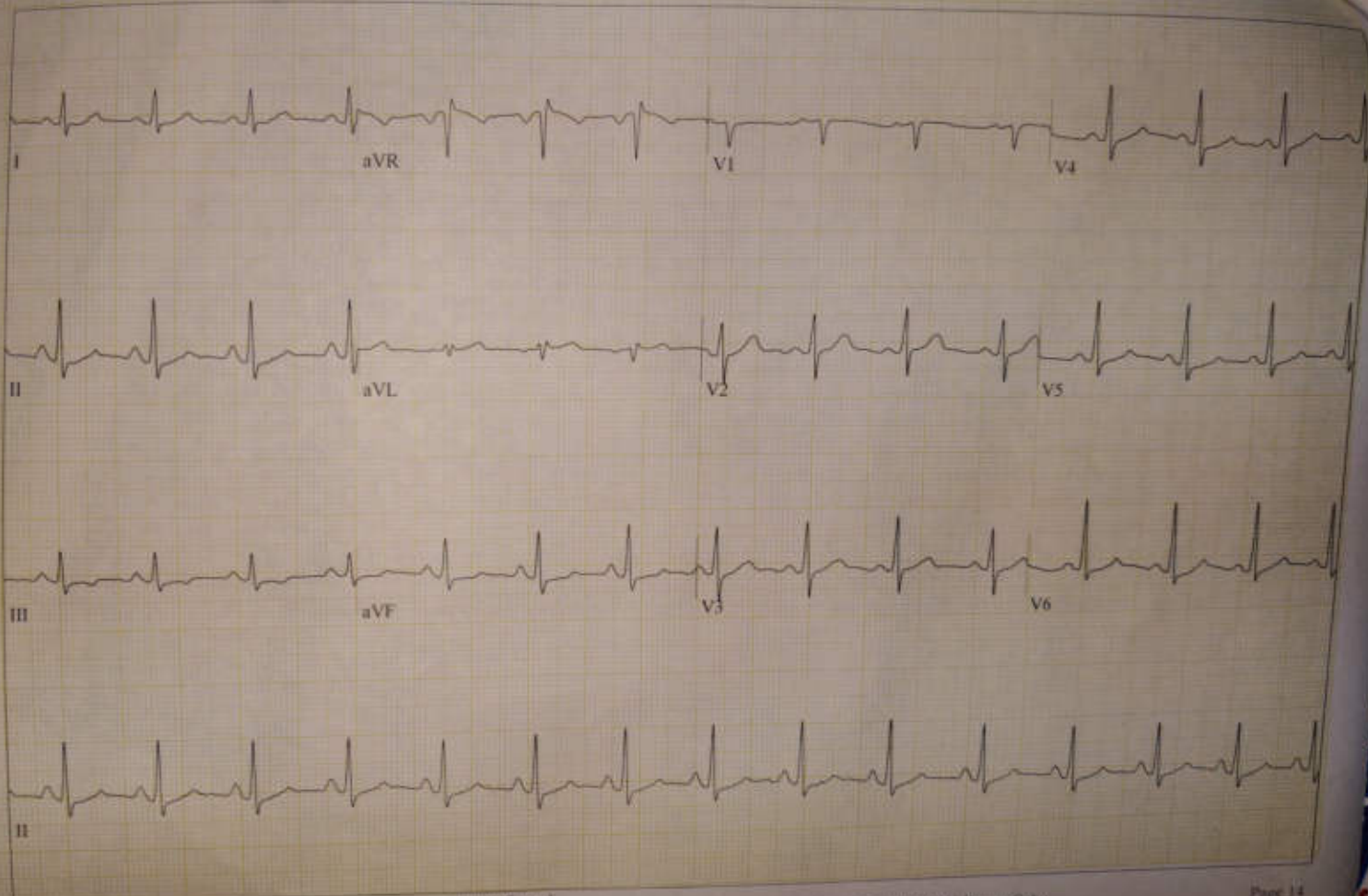
4:50

BRUCE

0.0 km/h

0.0 %

PARR...



SH MUKESH RAI,
VS8202611-24-10-19-29

UXA ULTRASOUND CENTRE

T1s 0.1
T1b 0.1
MI 1.1
19.10.2024
4:02:28 PM
C1-5-RS
2611z/19.5cm
64/1.5
Abdomen/ABD
HFI 7.10 - 3.06
ACF 98%
Gr 1
C6/MB
FF2/F3
SRFB 7/C.R1.2

Video
58

Video
58

LIVER SUB OPTIMALLY DISTEND UB

Video
58

Video
58

RT KIDNEY LT KIDNEY

1D 104.48mm
2D 116.32mm

उकशा अल्ट्रासाउण्ड सेन्टर

हरे कृष्णा टॉवर, करगुवाँ जी रोड, गेट नं० 02 के सामने, म०ल०बा० मेडीकल कॉलेज, झाँसी (उ०प्र०) 284 128
ULTRASOUND REPORT

NAME: MR MUKESH RAI AGE/SEX: 38 YRS/M DATE: 19/10/2024 Date.....

REF. BY: PARAKH PATHOLOGY.

INVESTIGATION DONE: U.S. ABDOMEN.

LIVER: It is normal in size with homogeneous echotexture. Parenchymal echogenicity is normal. Contours are smooth & regular. No focal mass lesion is seen. IHBR are not dilated. Portal vein is normal in caliber. Hepatic veins are normal in caliber. Sub diaphragmatic space is normal.

GALL BLADDER: It is contracted. Its wall is normal in thickness. No stone or mass is seen in its lumen. Bile is anechoic. CBD is non visualized.

PANCREAS: are normal in size, shape & echotexture. MPD is not dilated.

KIDNEYS: Both are normal in size, shape and position. Contours are smooth and regular. Cortical thickness is normal in both sides. Cortical echogenicities are normal. Corticomedullary differentiation is normal in both sides. PCS and ureter are not dilated in both sides. No stone is seen in either kidney or ureter. Renal movements with respiration are normal in either side.

SPLEEN: It is normal in size with homogenous echopattern. S. V. is normal in caliber. No focal mass lesion is seen. Aorta and IVC are normal in caliber. No enlarged mesentric or retroperitoneal lymph nodes are seen. No free fluid is seen in the abdomen cavity.

URINARY BLADDER: It is sub optimally distended. Its wall is normal in thickness. No stone or mass is seen in its lumen.

PROSTATE: It is normal in size. Its shape and echopattern are normal. Its capsule is intact.

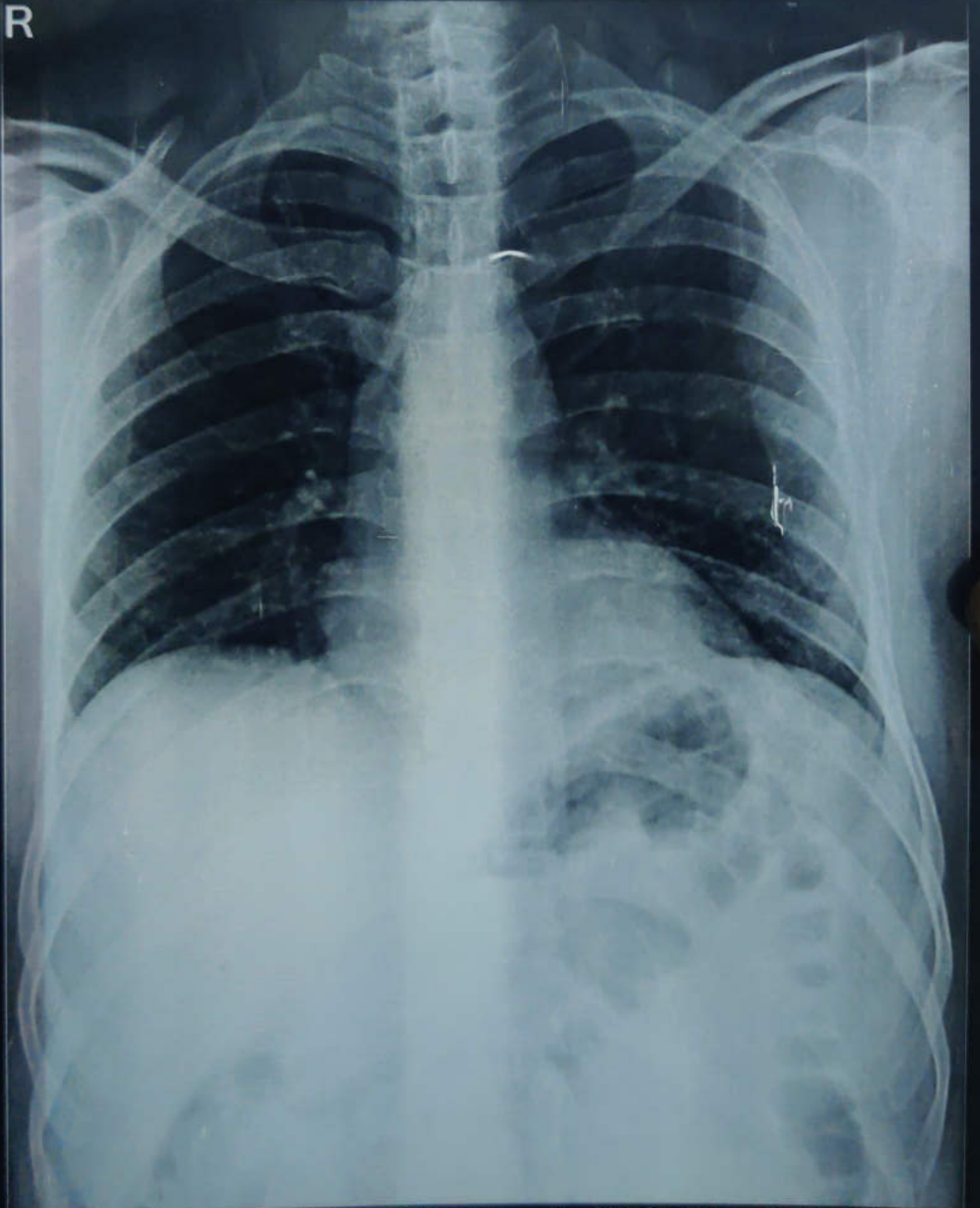
IMPRESSION: NO SONOGRAPHICALLY DETECTIBLE ABNORMALITY SEEN IN PRESENT SCAN.

✓
Dr. ASHISH UXA

M.B.B.S, D.M.R.E.
Radiologist

- THIS REPORT IS NOT VALID FOR MEDICO-LEGAL PURPOSES.
- ALL REPORTS SHOULD BE CORELATED CLINICALLY AND FINDINGS REPEATED IF DISPARITY IS OBSERVED.
- ULTRASOUND INTER-PRETATION REPRESENTS ONLY SOME OF THE VARIOUS POSSIBILITIES AND NOT THE EXACT PATHOLOGICAL DIAGNOSIS
- IT IS NOT POSSIBLE TO DETECT ALL FETAL ANOMALIES IN ONE SCAN DUE TO CONSTANT FETAL MOVEMENTS & CHANGING POSITION.

R



MR. MUKESH RAI 38YR 19/10/2024 M CHEST, PA 11:37 AM
NAMAN X-RAY GLOBAL HOSPITAL JHANSI

Parakh Diagnostics

Karguwan Ji Road, Opp Medical College Gate No. 2, Jhansi
Ph : 0510-2321192, 9415068274, e-mail : parakhdiagnostics2000@gmail.com

Booking Time: 09:52:44
Sample Drawn: 19/10/2024 10:18:50
Sample Received: 19/10/2024 10:18:52
Reported On: 19/10/2024 16:32:50
Print Date & Time: 19/10/2024 21:37:12



Balance:2000

TEST REPORT

Date: 19/10/2024 Patient ID:102416741 Refd by Lab: MEDIWHEEL TPA Mob:9454014300
Name: Mr. MUKESH RAI Age: 38 Yrs 8 Mon 29 Days Gender: Male
Refd by: Slide No:
Pt. E-mail ID : Hospital

Test	Value	Biological Ref Interval	Unit
MEDIWHEEL FULL BODY ANNUAL PLUS			
Complete Blood Count			
Total Leucocyte Count (TLC)	8950	4000 - 11000	µL
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
Neutrophils	61.0	40.0 - 75.0	%
Lymphocytes	30.0	20.0 - 45.0	%
Monocytes	03.0	02.0 - 10.0	%
Eosinophils	06.0	01.0 - 06.0	%
Basophils	00.0	00.0 - 01.0	%
Immature Cells	00		%
Method : Flowcytometry/Microscopy			
R B C	4.83	4.50 - 5.50	millions/cmm
Haemoglobin (Hb)	16.0	13.0 - 17.0	gm/dl
Method: Photometric, Sample Type: EDTA Whole Blood			
P.C.V / Haematocrit	46.6	40.0 - 54.0	%
M C V	96.5 H	76.0 - 96.0	fl.
M C H	33.1 H	27.0 - 32.0	picogram
M C H C	34.3	30.0 - 35.0	gm/dl
RDW	12.9	12.8 ± 1.2 %	%
Platelet Count	0159	0150 - 0450	x10 ³ /µL
ABSOLUTE LEUCOCYTE COUNT			
Absolute Neutrophil Count	5460	2000 - 7000	/µL
Absolute Lymphocyte Count	2685	1000 - 3000	/µL
Absolute Monocyte Count	269	200 - 1000	/µL
Absolute Eosinophil Count	537	20 - 500	/µL
IMMATURE PLATELET FRACTION (IPF)	5.4	0.9 - 7.0	%

Comments

1. Increased IPF values indicate increased peripheral destruction & low IPF values indicate decreased Bone Marrow production.
2. The clinical utility of IPF is in the Laboratory diagnosis of Thrombocytopenia due to increased peripheral Platelet destruction, particularly Autoimmune Thrombocytopenia Purpura (AITP) and Thrombotic Thrombocytopenic Purpura (TTP) Following patients during treatment the Platelet counts recovered the IPF% FELL.

MRS. HIRDESH GUPTA
Test Requester MICROBIOLOGIST BODY
MSC (Medical Micro Biology)

DR POORVI GUPTA
BIOCHEMIST
MSc(Phd) Med. BIOCHEM

DR. B.K. GUPTA
M.D. (PATHO)

Dr. B. K. Gupta
B.D. (PATHO)
CONSULTANT PATHOLOGIST
PARAKH PATHOLOGY LAB
Opp Medical College, JHANSI

Thanks for Refrence

Sample Brought / Collected

Not Valid for Medico Legal Purpose

Dr. Signature

Note : The above mentioned report is professional opinion only, not diagnosis and should be interpreted in clinical correlation, if any discrepancy arises then test will be repeated free of charge on consultant advice.

Parakh Diagnostics

Karguwan Ji Road, Opp Medical College Gate No. 2, Jhansi
Ph : 0510-2321192, 9415068274, e-mail : parakhdiagnostics2000@gmail.com



Balance:2000

TEST REPORT

Booking Time: 09:52:44
Sample Drawn: 19/10/2024 10:18:50
Sample Received: 19/10/2024 10:18:52
Reported On: 19/10/2024 16:32:50
Print Date & Time: 19/10/2024 21:37:12

Date: 19/10/2024 Patient ID:102416741 Refd by Lab: MEDIWHEEL TPA Mob:9454014300
Name: Mr. MUKESH RAI Age: 38 Yrs 8 Mon 29 Days Gender: Male
Refd by: Slide No:
Pt. E-mail ID : Hospital

Test	Value	Biological Ref Interval	Unit
------	-------	-------------------------	------

3. IPF has a strong correlation with the recovery in Platelets counts in patients with Dengue. After a peak fall in IPF

Advised:

Urgent recheck of platelet count with a fresh E.D.T.A sample in case the platelet count is not correlating clinically.,
Followup and clinical correlation

ERYTHROCYTE SED.RATE (WIN) *	04	00 - 10	mm/1st hr.
-------------------------------------	----	---------	------------

BLOOD GROUP, ABO & Rh TYPING

BLOOD GROUP	"B"
Rh TYPING	NEGATIVE

Method:Agglutination,Sample:EDTA whole blood,Serum

The upper agglutination test for grouping has some limitations.
For further confirmation Reverse typing card (Dia clon ABO / D) Method is suggested.

HBA1C	5.00		%
--------------	------	--	---

Method: HPLC, Sample: EDTA

AS PER ADA GUIDELINES

DIAGNOSIS	HbA1c LEVEL
Normal	: Below 5.7 %
Prediabetes	: 5.7 % - 6.4%
Diabetes	: > 6.5 %

FOR KNOWN DIABETIC	HbA1c LEVEL
Target Value is	: 6.5% - 7.5%

ESTIMATED AVERAGE GLUCOSE (eAG)	96.80	65.00 - 135.00	mg/dL
--	-------	----------------	-------

Method : Calculated

MRS. HIRDESH GUPTA
MICROBIOLOGIST BODY
MSC (Medical Micro Biology)

DR POORVI GUPTA
BIOCHEMIST
MSc(Phd) Med. BIOCHEM



DR. B.K. GUPTA
M.D. (PATHO)

Thanks for Refrence

Sample Brought / Collected

Not Valid for Medico Legal Purpose

Dr. Signature

Note : The above mentioned report is professional opinion only, not diagnosis and should be interpreted in clinical correlation, if any discrepency arises then test will be repeated free of charge on consultant advice.

Parakh Diagnostics

Karguwan Ji Road, Opp Medical College Gate No. 2, Jhansi
Ph : 0510-2321192, 9415068274, e-mail : parakhdiagnostics2000@gmail.com



Balance:2000

TEST REPORT

Booking Time: 09:52:44
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Date: 19/10/2024 **Patient ID:**102416741 **Refd by Lab:** MEDIWHEEL TPA **Mob:**9454014300
Name: Mr. MUKESH RAI **Age:** 38 Yrs 8 Mon 29 Days **Gender:** Male
Refd by: **Slide No:**
Pt. E-mail ID : **Hospital**

Test	Value	Biological Ref Interval	Unit
------	-------	-------------------------	------

REMARKS:-

In vitro quantitative determination of **HbA1c** in whole blood is utilized in long term monitoring of glycemia .The **HbA1c** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 8 -12 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1c** be performed at intervals of 3-6 months during diabetes mellitus therapy. Results of **HbA1c** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Estimated average glucose (eAG) - There is a predictable relationship between HbA1c and eAG. It helps people with diabetes to correlate their A1c to daily glucose monitoring levels. It reflects the average glucose levels in the past 2-3 months. The eAG calculation converts the A1c percentage to the same units used by glucometers- mg/dl.

GLUCOSE FASTING	97.9	70.0 - 99.0	mg/dl
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Method: Hexokinase, Sample:Sodium Fluoride Plasma

Normal: 70.0 - 99.0
Impaired Fasting Glucose : 100 - 125
Diabetes Mellitus : >126

TARGET FOR KNOWN DIABETIC
As per ADA Guidelines
Fasting : 80 - 120 mg/dl

GLUCOSE PP	108.6 L	110.0 - 140.0	mg/dl
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Method: Hexokinase, Sample:Fluoride Plasma

Normal : < 140
Impaired Glucose Tolerance : 140 - 199
Diabetes Mellitus : >200

TARGET FOR KNOWN DIABETIC
As per ADA Guidelines
PP : <180 mg/dl

LIPID PROFILE (BASIC)

CHOLESTEROL	277.2 H	Optimal : < 200 Border Line : 200 -239 High Risk : > 240	mg/dl
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Method: Oxidase, esterase peroxidase.Sample:Serum

TRIGLYCERIDES	119.4	Optimal : <150 Border Line : 150 - 199 High Risk : 200 - 499 Very High Risk : >500	mg/dL
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Method: Enzymatic End-point, Sample: Serum

H D L CHOLESTEROL	46.9		mg/dL
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Method Direct Measure - PEG Sample Serum



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TEST REPORT

Booking Time: 09:52:44
Sample Drawn: 19/10/2024 10:18:50
Sample Received: 19/10/2024 10:18:52
Reported On: 19/10/2024 16:32:50
Print Date & Time: 19/10/2024 21:37:12

Date: 19/10/2024 Patient ID:102416741 Refd by Lab: **MEDIWHEEL TPA** Mob:9454014300
Name: **Mr. MUKESH RAI** Age: 38 Yrs 8 Mon 29 Days Gender: Male
Refd by: Slide No:
Pt. E-mail ID : Hospital

Test	Value	Biological Ref Interval	Unit
V L D L Cholesterol	23.9	MALE Optimal : >55.0 Border Line : 35 - 55 High Risk : < 35.0 FEMALE Optimal : > 65.0 Border Line : 45 - 65 High Risk : < 45.0 < 30.0	mg/dl
Method: Calculated. Sample: Serum			
SERUM CHOLESTEROL/HDL RATIO	5.91	Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.1 Moderate Risk : 7.2 - 11.0	
Method: Calculated			
L D L CHOLESTEROL	86.9	Optimal : <100 Near or Above- Optimal : 100 - 129 Border Line : 130 - 159 High Risk : 160 - 189 Very High Risk : >190	mg/dl
Method: Direct Measure. Sample: Serum			
LIVER FUNCTION TEST (I)			
TOTAL BILIRUBIN	0.71	0.00 - 1.10	mg/dl
Spectrophotometry			
CONJUGATED (D. Bilirubin)	0.33	NEW BORN AGE OF NEW BORN PREMATURE 24 Hours 1.0 - 6.0 48 Hours 6.0 - 8.0 3 - 5 Days 10.0 - 15.0 AGE OF NEW BORN FULL TERM 24 Hours 2.0 - 6.0 48 Hours 6.0 - 7.0 3 - 5 Days 4.0 - 12.0 Reference range according to THOMAS Total bilirubin: upto 1.10 0.00 - 0.40	mg/dl
Spectrophotometry			
UNCONJUGATED (I.D. Bilirubin)	0.38	0.20 - 0.70	mg/dl
TOTAL PROTEIN	7.30	6.40 - 8.30	gm/dl
Spectrophotometry			

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Pt. E-mail ID : Hospital

Test	Value	Biological Ref Interval	Unit
ALBUMIN <small>Spectrophotometry</small>	4.10	2.80 - 4.60	gm/dl
GLOBULIN	3.20	2.30 - 3.50	gm/dl
A/G RATIO	1.28	0.80 - 2.00	
S.G.O.T (AST) <small>Method: UV without P5P, Sample: Serum</small>	49.6 H	0.0 - 40.0	U/L
S.G.P.T (ALT) <small>Method: UV without P5P, Sample: Serum</small>	58.2 H	0.0 - 40.0	U/L
ALKALINE PHOSPHATASE OPTIMIZED <small>Method: PNPP, AMP Buffer, Sample: Serum</small>	82.0	40.0 - 129.0	U/L
G G T P (Gamma GT) <small>Method: Glutamyl Carboxy-nitro, Sample: Serum</small>	21.3	8.0 - 61.0	U/L
KFT-KIDNEY FUNCTION TEST			
UREA <small>Method: Urease, UV, Sample: Serum</small>	27.6	15.0 - 45.0	mg /dl
S.CREATININE <small>Method: Alkaline Picrate Kinetic, IFCC-IDMS Stand.</small>	0.92	0.70 - 1.20	mg/dl
URIC ACID <small>Method: Uricase Colorimetric, Sample: Serum</small>	6.80	3.40 - 7.00	mg/dl
TOTAL PROTEIN <small>Spectrophotometry</small>	7.30	6.40 - 8.30	gm/dl

Adult (Male) : 40 - 129 U/L
Adult (Female) : 35 - 104 U/L
1 Day : < 250 U/L
2 - 5 Days : < 231 U/L
6 Days - 6 Month : < 449 U/L
7 Months - 1 Year : < 426 U/L

Adult (Male) : 0.70 - 1.20
Adult (Female) : 0.50 - 0.90
Neonates (premature) : 0.29 - 1.04
Neonates (Full term) : 0.24 - 0.85

Male : 3.4 - 7.0
Female : 2.4 - 5.7

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Refd by: Slide No:
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Test	Value	Biological Ref Interval	Unit
ALBUMIN <small>Spectrophotometry</small>	4.10	2.80 - 4.60	gm/dl
GLOBULIN	3.20	2.30 - 3.50	gm/dl
A/G RATIO	1.28	0.80 - 2.00	
S.SODIUM <small>Method: Ion selective electrode, Sample: Serum</small>	140.3	135.0 - 150.0	mmol/L
S.POTASSIUM <small>Method: Ion selective electrode, Sample: Serum</small>	4.20	3.50 - 5.30	mmol/L
S.CALCIUM <small>Method: BAPTA, Sample: Serum</small>	10.00	Adult: 8.6 - 10.2 Children(0-10 days): 7.6 - 10.4 Children(10 days-2 yrs): 9.0 - 11.0 Children(2-12 yrs): 8.8 - 10.8	mg/dl
BLOOD UREA NITROGEN (BUN) * <small>Method: Urease, UV, Sample: Serum</small>	12.9	6.0 - 20.0	mg/dl
TOTAL T3 <small>Method: CLIA, Sample: Serum</small>	1.02	0.87 - 1.78 Adults (>15 yrs): 0.87 - 1.78 New born: 0.75 - 2.60 1 - 5 Yrs: 1.00 - 2.60 5 - 10 Yrs: 0.90 - 2.40 10 - 15 Yrs: 0.80 - 2.10	ng/ml
TOTAL T4 <small>Method: CLIA, Sample: Serum</small>	10.30	6.09 - 12.23 Adults: 6.09 - 12.23 1 - 3 days: 8.20 - 19.9 1 week: 6.00 - 15.9 1 - 12 month: 6.1 - 14.9 1 - 3 yrs: 6.80 - 13.5 3 - 10 yrs: 5.50 - 12.8 >10 Yrs: 6.09 - 12.23	µg/dl
TSH <small>Method: CLIA, Sample: Serum</small>	0.86	0.40 - 5.50	µIU/ml

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Name: Mr. MUKESH RAI Age: 38 Yrs 8 Mon 29 Days Gender: Male
Refd by: Slide No:
Pt. E-mail ID : Hospital

Test	Value	Biological Ref Interval	Unit
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Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4 am and at a minimum 6- 10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured TSH concentrations.

Children

Premature (28-36 Weeks) : 0.7 - 27.0 uIU/mL
Birth 4 Days : 1.0 - 39.0 uIU/mL
5 Days - 20 Weeks : 1.7 - 9.1 uIU/mL
21 Weeks - 20 Years : 0.7 - 6.4 uIU/mL

Adults

21 - 54 Years : 0.4 - 4.5 uIU/mL
55 - 87 Years : 0.5 - 8.9 uIU/mL

Pregnancy

First Trimester : 0.1 - 2.5 uIU/mL
Second Trimester : 0.2 - 3.0 uIU/mL
Third Trimester : 0.3 - 3.0 uIU/mL

URINE EXAMINATION - R/M

URINE ALBUMIN	NIL		
URINE FOR REDUCING SUBSTANCES	ABSENT	ABSENT	
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	NIL	/HPF
EPITHELIAL CELLS	0-1	NIL	/HPF
RBC's	NIL	NIL	/HPF
CRYSTALS	NOT DETECTED		
CASTS	NOT DETECTED		
BACTERIA	NOT DETECTED		
OTHERS	NOT DETECTED		
CRENATED R.B.C.	NOT DETECTED		
URINE GLUCOSE FASTING	NIL	NIL	
URINE GLUCOSE PP	NIL	NIL	NIL
TMT	.		

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Test	Value	Biological Ref Interval	Unit
ECG	.		
2D Echo	.		
USG whole Abdomen	.		
CHEST PA	.		

X-RAY CHEST PA VIEW

Soft tissues and bony cage under view are normal.
Lung fields are normal.
Bilateral hilar shadows are normal.
Mediastinum and domes are normal.
Costophrenic angles are clear.
Cardiac size and shape is normal.

IMPRESSION :- Normal Skiagram.
ENT CONSULTATION .
DENTAL CONSULTATION .
EYE CONSULTATION .
DIET CONSULTATION .
*** End of Report ***

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