


BIOCHEMICAL ANALYSIS;

MCH	26.7
CHOLESTEROL	219.0
LDL CHOLESTEROL	159.6
TOTAL CHOLESTEROL/HDL	5.6

Advice: Regular Exercise
Low fat diet



GENERAL PHYSICIAN

DR. ANIL KUMAR
MBBS, MD (General Medicine)
Regn. No-UMC/A. 13794
Umkal Hospital Pvt. Ltd.

Review in OPD for

Urologist opinion

Hemanshi Mittal 27.7.24

30 yr - M

V T 6/60
6/60
VE gl T 2/6
6/6

NV T N-6
N-6

Order Vs T WM
WM



21/07/20

Harman Mittal / 35yr / Male

Pt. came for regular annual health check-up.

CLL :- Palpitative (on & off) x 1 month
Excessive weight

Past history :- Not significant.

Personal history :- Ugr. Diet
Ⓜ sleep.

Electrolytes

Family history :- Not significant.

Allergic history :- Not significant.

O/E :- Pt. is conscious & oriented.

PTA :- Soft & non-tender.

Resp. :- B/C equal air entry.

CXR :- Ⓜ R & L.

DR. ANUJ GOYAL
MBBS, MD
Regn. No. 10000000000
Umkal Hospital Pvt. Ltd.

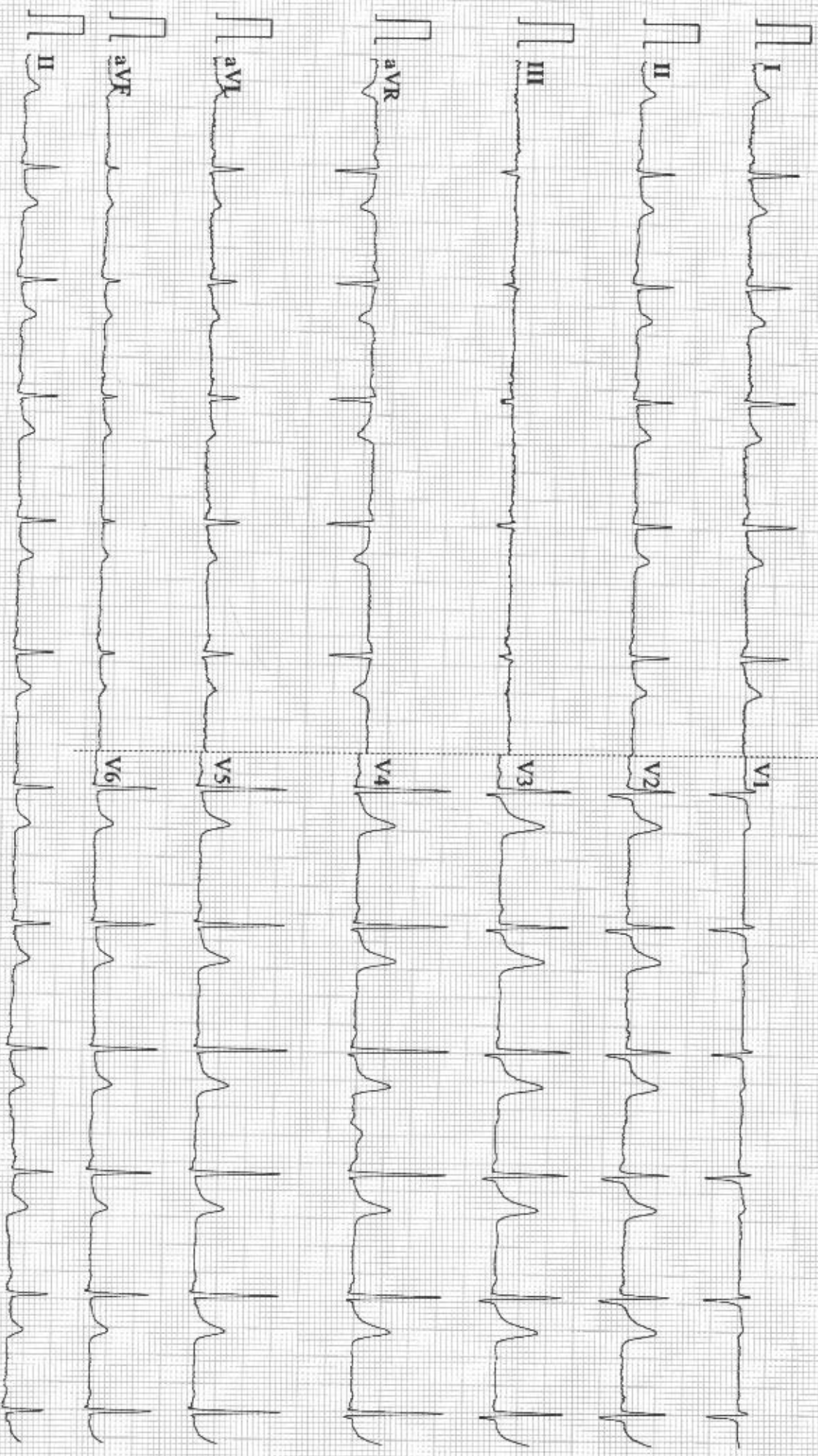
Ad.

Hiwariw Nita
Male
Years
Req. No. :

HR : 66 bpm
P : 101 ms
PR : 136 ms
QRS : 84 ms
QT/QTc/Bz : 368/386 ms
P/QRS/T : -72/22/28 °
RV5/SV1 : 1.58/0.627 mV

Diagnosis Information:
Sinus Arrhythmia

Report Confirmed by:



0.67~25Hz ACS0 25mm/s 10mm/mV 2*5.0s+1r V2.22 SEMIP V1.92 UMKAL HOSPITAL

891

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:40

Laboratory Report

Hematology

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Whole Blood			
BLOOD GROUP (ABO & RH TYPING)	"B" POSITIVE		
Sample Type: EDTA			
CBC WITH ESR			
HAEMOGLOBIN	13.8	gm/dL	13 - 18
TOTAL LEUCOCYTE COUNT	7,200	cell/cum	4000 - 11000
D.L.C = POLYMORPHS	65	%	40 - 75
LYMPHOCYTES	27	%	20 - 45
EOSINOPHILS	05	%	01 - 06
MONOCYTES	03	%	0 - 08
BASOPHILS	00	%	0 - 01
E.S.R (WINTROBE)	06	mm/1st	0 - 9
RED BLOOD CELLS	5.2	Millions	3.5 - 5.5
PLATELET COUNT	2.1	lakh/cum	1.5 - 4.5
P.C.V	41.6	%	35 - 50
M.C.V	80.5	fl	80 - 96
M.C.H	26.7 *	pg	27 - 32
M.C.H.C	33.2	%	32 - 36

End of the report

Checked By
Lab Technician

Verified By

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 12:42

Laboratory Report

Hematology

PERIPHERAL BLOOD SMEAR

SMEAR SHOWS NORMOCYTIC NORMOCHROMIC PICTURE OF RBC'S WITH MILD ANISOPOIKILOCYTOSIS.
WBC'S SERIES SHOWS NORMAL IN COUNT AND MORPHOLOGY.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.

End of the report

Checked By
Lab Technician

Verified By



UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:14

Laboratory Report

Biochemistry

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
-------------------------	---------------	--------------	------------------

Sample Type: Serum

SERUM LIPID PROFILE 1514

CHOLESTEROL	219.0 *	mg/dl	150 - 200
SERUM TRIGLYCERIDES	104.0	mg/dl	70 - 170
HDL CHOLESTEROL	38.6	mg/dl	30 - 88
LDL CHOLESTEROL	159.6 *	mg/dl	upto - 150
VLDL CHOLESTEROL	20.8	mg/dl	20 - 45
TOTAL CHOLESTEROL/HDL	5.6 *	ref.cut	upto - 4.96
LDL/HDL RATIO	4.1	ref.cut.	upto - 4.96

Sample Type: Serum

KFT

BLOOD UREA	27.0	mg/dl	10 - 50
SERUM CREATININE	0.86	mg/dl	0.6 - 1.2
SERUM URIC ACID	6.8	mg/dl	3.5 - 7.0
SERUM SODIUM	143.0	mEq/l	135 - 155
SERUM POTASSIUM	4.2	mEq/l	3.5 - 5.5
SERUM CALCIUM	9.0	mg/dl	8.6 - 10.6

Sample Type: Serum

G.G.T.P. 1533

G.G.T.P.	20.0	U/ML	upto - 47
----------	------	------	-----------

Sample Type: Serum

Checked By
Lab Technician

Verified By

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:14

LFT 1513

S.G.O.T	28.2	U/L	upto - 40
S.G.P.T	39.4	U/L	upto - 45
S. BILIRUBIN (TOTAL)	0.94	mg/dl	0.1 - 1.2
S. BILIRUBIN (DIRECT)	0.30	mg/dl	upto - 0.30
ALKALINE PHOSPHATASE	109.0	U/L	60 - 170
TOTAL PROTEINS	6.8	g/dl	6.5 - 8.0
ALBUMIN	4.2	g/dl	3.5 - 5.5
GLOBUMIN	2.6	g/dl	2.3 - 3.5
A:G RATIO	1.6:1		1.5 - 2.5

End of the report

Checked By
Lab Technician

Verified By



DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:17

Laboratory Report

Biochemistry

T3, T4, TSH

Tests	Results	Biological Reference Range	Units
Triiodothyronine, Total (T3) (Serum,CMIA)	1.30	1.30 - 3.10	nmol/mL
Thyroxine, Total (T4) (Serum,CMIA)	90.2	59 - 154	nmol/mL
TSH Ultra Sensitive (Serum,CMIA)	4.72	0.27 - 4.8	μIU/mL

Comment

T3 or 3,5,3-triiodothyronine is a hormone synthesized and secreted from the thyroid gland, and formed by peripheral deiodination of thyroxine (T4). The determination of it in serum is essential in assessing thyroid functions. T3 is secreted by thyroid glands and circulates in the blood stream; mostly bound to the plasma protein, thyroxin binding globulin (TBG) and prealbumin and albumin.

T4 or Thyroxine or 3,5,3,5-tetraiodothyronine is a hormone synthesized and secreted by the thyroid gland and plays an important role in regulating metabolism. In the peripheral tissues it act as a prohormone which is further metabolized to another most active thyroid hormone, tri-iodothyronine (T3) and other inactive metabolites such as reverse T3.

TSH or Thyroid-stimulating hormone is a hormone synthesized and secreted by Pituitary gland. TSH is glycoprotein with two non-covalently bound alpha and beta subunits. The beta subunit of TSH is unique, which results in the specific biochemical and immunological properties of this hormone. The ability to quantitate circulating levels of TSH is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.

HBAIC 1510

Test Name	Value	Unit	Bio Ref.Interval
-----------	-------	------	------------------

Checked By
Lab Technician

Verified By



Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:17

HbA1c (Glycated Haemoglobin) 5.0 % 4.0 - 6.2

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 - 6-8 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 4-6 weeks during Diabetes Mellitus therapy. Results of HbA1c should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

The American Diabetes Association(ADA) recommendations are summarized as below:

Ref Range for HBA1c (In %):

Non diabetic Adults (Age \geq 18 years) < 5.7

At risk (Pre-Diabetic) : 5.7- 6.4

Diagnosing Diabetes: \geq 6.5

HbA1c goals in treatment of diabetes:

Ages 0-6 years: 7.6% - 8.4%

Ages 6-12 years: <8%

Ages 13-19 years: <7.5%

Adults: <7%

End of the report

Checked By
Lab Technician

Verified By



UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist



Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:15

Laboratory Report

Biochemistry

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Urine			
URINE SUGAR PP			
Urine Sugar PP	NIL		
Sample Type: Urine			
URINE SUGAR FASTING			
	NIL		

CLINICAL PATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Urine			
URINE ROUTINE & MICROSCOPIC 1383			
COLOUR	P. YELLOW		
APPEARANCE	CLEAR		
SPEC. GRAVITY	1.015		
REACTION	6.0		
ALBUMINE	NIL		
SUGAR	NIL		
KETONE BODIES	NIL		
BLOOD	NIL		
LEUKOCYTES	NIL		
NITRITE	NIL		
UROBILINOGEN	NIL		
MICROSCOPIC EXAM	.		

Checked By
Lab Technician

Verified By



UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 13:15

PUS CELLS	1-2	/HPF	0 - 05
RBC CELLS	NIL	/HPF	0 - 02
EP CELLS	1-2	/HPF	0 - 05
CASTS	NIL		
CRYSTALS	NIL		
BACTERIA	NIL		
OTHER	NIL		

End of the report

Checked By
Lab Technician

Verified By



UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist



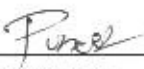
Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Sample Collected on	: 27-07-2024 10:15
Lab ID No	: LAB068035	Sample Received on	:
		Report Released on	: 27-07-2024 14:00

Laboratory Report

Biochemistry

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Serum			
BLOOD SUGAR - FASTING			
BLOOD SUGAR FASTING	91.8	mg/dl	70 - 110
Sample Type: Serum			
BLOOD SUGAR - PP 1465			
BLOOD SUGAR PP 1465	117.4	mg/dl	70 - 140

End of the report


Checked By
Lab Technician

Verified By



DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000



Name : Mr. HIMANSHU MITTAL
Age/Gender : 30 Y/M
Admitting Doctor :

MR No : UH038707
Visit ID : OP050921
Order Date : 27-07-2024 10:11
Report Date : 27-07-2024 11:49

Radiology Report

Ultrasound

ULTRASOUND WHOLE ABDOMEN

- Liver :** Liver is normal in size, shape and echotexture. No focal lesion seen.
No intrahepatic biliary radicle dilatation seen.
- Gall Bladder:** The Gall Bladder is well distended. No echoreflexive calculi seen.
Gall Bladder wall thickness normal. CBD and Portal vein are normal.
- Pancreas :-** The pancreas is normal in size, shape and echotexture.
No Peripancreatic collection seen.
- Kidneys :** **Right kidney:-** is normal in size, shape & position.
Echotexture of sinus & cortex normal. No calyceal dilatation seen.
No calculus/mass lesion seen. Corticomedullary differentiation maintained.
Left kidney:- is normal in size, shape & position.
Echotexture of sinus & cortex normal. **Mild Hydroureteronephrosis seen.**
No calculus/mass lesion seen. Corticomedullary differentiation maintained.
- Spleen :** The Spleen is normal in size, shape and echotexture.
- U Bladder :** Urinary bladder is well distended and shows normal wall thickness. No
calculus/mass lesion seen.
- PROSTATE :** Is normal in size and echotexture. **Foci of calcification seen.**
No free fluid seen. No collection seen.
- IMPRESSION :** Mild left Hydroureteronephrosis seen.
ADV:NCCT KUB, if clinically indicated.

Please correlate clinically.

DR ARUSHI BHARTIYA
CONSULTANT RADIOLOGIST

Verified By

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002
Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000



HIMANSHU 30/M OPD MED

27/Jul/2024 10:59:08

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD



HIMANSHU 30/M OPD MED

27/Jul/2024 10:59:59

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD



HIMANSHU 30/M OPD MED

27/Jul/2024 11:00:32

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD

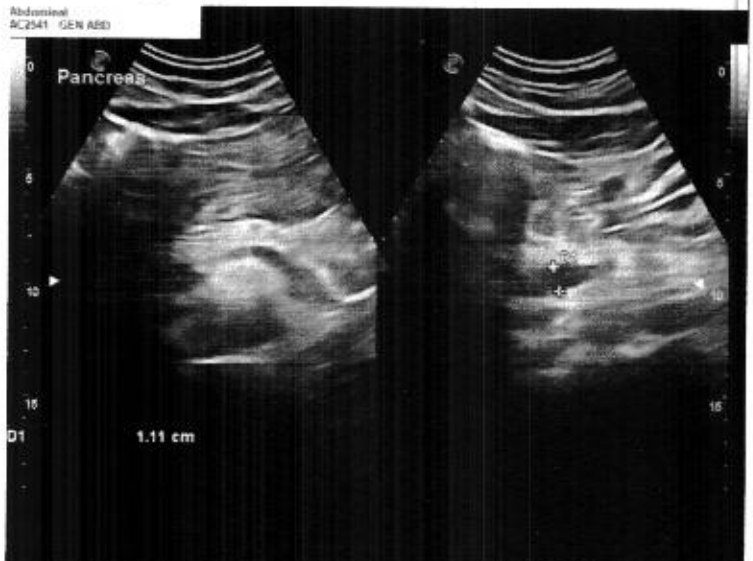


HIMANSHU 30/M OPD MED

27/Jul/2024 11:01:05

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD

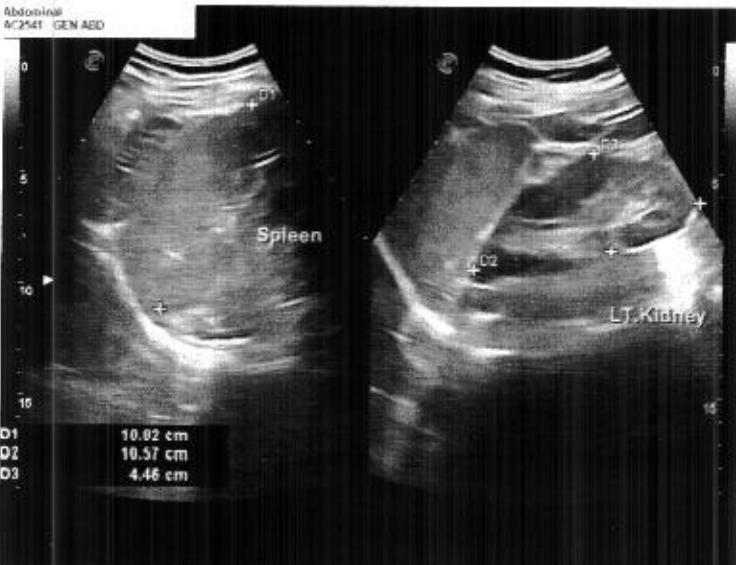


HIMANSHU 30/M OPD MED

27/Jul/2024 11:01:50

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD



HIMANSHU 30/M OPD MED

27/Jul/2024 11:03:15

B: Res-L G 51%
TEI D 157 mm X/M C5/T
PRC 11/2/20 PRS 3

Abdominal
AC2541 GEN ABD



Name	: Mr. HIMANSHU MITTAL	MR No	: UH038707
Age/Gender	: 30 Y/M	Visit ID	: OP050921
Admitting Doctor	:	Order Date	: 27-07-2024 10:11
		Report Date	: 29-07-2024 10:33

Radiology Report

X-Ray

CHEST X-RAY PA VIEW

Finding -

Haziness is noted in right lower zone.

Trachea appears in the midline.

Right hilum appear prominent.

Cardiac size appears normal.

Both CP angle and cardiophrenic angle appears normal.

Diaphragm appears normal on both sides.

Visualized rib cage appears normal.

Please correlate clinically

DR ARUSHI BHARTIYA
CONSULTANT RADIOLOGIST