Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PATIENT SAFETY & QUALITY OF CARE — NABH (ENTRY LEVEL) — PRE ACCREDITED

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 10:10 AM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:31 PM

HAEMATOLOGY

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
HAEMOGRAM			
HAEMOGLOBIN (Hb)	: 13.5	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 40.9	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.26	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 96.0	cu micron	76 - 96
M.C.H.	: 31.7	pg	27 - 32
M.C.H.C	: 33.0	picograms	32 - 36
RDW-CV	: 15.7	%	11 - 16
WBC TOTAL COUNT	: 5110	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000
PLATELET COUNT	: 318000	cumm	150000 - 450000
WBC DIFFERENTIAL COUNT			
NEUTROPHILS	: **62**	%	ADULT : 40 - 70 CHILD : : 20 - 40
ABSOLUTE NEUTROPHILS	: 3168.20	µL	2000 - 7000
LYMPHOCYTES	: **28**	%	ADULT : 20 - 40 CHILD : : 40 - 70
ABSOLUTE LYMPHOCYTES	: 1430.80	µL	1000 - 3000
EOSINOPHILS	: 03	%	01 - 04
ABSOLUTE EOSINOPHILS	: 153.30	µL	20 - 500
MONOCYTES	: 07	%	02 - 08
ABSOLUTE MONOCYTES	: 357.70	µL	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	µL	0 - 100

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology & Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PATIENT SAFETY & QUALITY OF CARE
NABH (ENTRY LEVEL)
PRE ACCREDITED

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 10:10 AM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:31 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
RBC Morphology	: Normocytic Normochromic		
WBC Abnormality	: Within Normal Limits		
PLATELETS	: Adequate		
PARASITES	: Not Detected		

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

ESR

ESR MM(At The End Of 1 Hr.) By Wintrobes Method	: 10	mm/hr	Male : 0 - 9 Female : 0 - 20

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:31 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

HAEMATOLOGY

BLOOD GROUP

BLOOD GROUP	:	"O"
RH FACTOR	:	POSITIVE

NOTE : This is for your information.No transfusion / therapeutic intervention is done without confirmation of blood group by concerned authorities.In case of infants less than 6 months,suggested to repeat Blood Group after 6 months of age for confirmation. Kindly confirm the Negative Blood Group by reverse blood grouping (Tube method).

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology & Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 01:27 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 01:27 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
BIOCHEMISTRY			
BSL-F & PP			
Blood Sugar Level Fasting	: 98	MG/DL	60 - 110
Blood Sugar Level PP	: 119	MG/DL	70 - 140

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PATIENT SAFETY & QUALITY OF CARE NABH (ENTRY LEVEL) PRE ACCREDITED

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:32 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
ENDOCRINOLOGY			
THYROID FUNCTION TEST			
T3-Total (Tri iodothyronine)	: 1.21	ng/mL	0.970 - 1.69
T4 - Total (Thyroxin)	: 7.76	µg/dL	5.53 - 11.0
Thyroid Stimulating Hormones (Ultra TSH)	: 2.28	µIU/mL	0.465 - 4.68

NOTE:-

Three common ways in which there may be inadequate amounts of the thyroid harmone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid land, possibly due to autoantibody disease, possibly due to toxic stress or possib due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition thre is inadequte thyroid stimulating harmone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The third type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are yaking T3 as part of their thyroid supplement need t have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4 , Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	6.60 - 12.4	0.30 - 4.50
2 nd Trimester	1.0 - 2.60	6.60 - 15.5	0.50 - 4.60
3 rd Trimester	1.0 - 2.60	6.60 - 15.5	0.80 - 5.20

The guidelines for age related reference ranges for T3,T4,& Ultra TSH

Total T3	Total T4	Ultra TSH
Cord Blood 0.30 - 0.70	1-3 day 8.2-19.9	Birth- 4 day: 1.0-38.9
New Born 0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years 1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years 0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years 0.80 - 2.10	3-10 Years 5.5-12.8	

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology
(For Report Purpose Only)

AiMS® Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:32 PM

BIOCHEMISTRY

RFT (RENAL FUNCTION TEST)

BIOCHEMICAL EXAMINATION

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
UREA (serum)	: 16	MG/DL	0 - 45
UREA NITROGEN (serum)	: 7.47	MG/DL	7 - 21
CREATININE (serum)	: 0.9	MG/DL	0.5 - 1.5
URIC ACID (serum)	: 6.3	MG/DL	Male : 3.4 - 7.0 Female : 2.4 - 5.7

SERUM ELECTROLYTES

SERUM SODIUM	: 142	mEq/L	136 - 149
SERUM POTASSIUM	: 4.7	mEq/L	3.8 - 5.2
SERUM CHLORIDE	: 102	mEq/L	98 - 107

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 11:17 AM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:32 PM

BIOCHEMISTRY

LIPID PROFILE

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
CHOLESTEROL (serum)	: 172	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 109	MG/DL	0 - 150
HDL (serum)	: **39**	MG/DL	Male: : 42 - 79.5 Female: : 42 - 79.5
LDL (serum)	: 124	MG/DL	0 - 130
VLDL (serum)	: 21.80	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 4.41		Male : 1.0 - 5.0 Female: : 1.0 - 4.5
LDL/HDL RATIO	: **3.18**		Male : <= 3.6 Female : <=3.2

NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.
Cholesterol & Triglycerides reprocessed , & confirmed.

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology & Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PATIENT SAFETY & QUALITY OF CARE
NABH (ENTRY LEVEL)
PRE ACCREDITED

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:33 PM

BIOCHEMISTRY

LFT (Liver function Test)

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
BILIRUBIN TOTAL (serum)	: 0.8	MG/DL	INFANTS : 1.2 - 12.0 ADULT : : 0.1 - 1.2
BILIRUBIN DIRECT (serum)	: 0.3	MG/DL	ADULT & INFANTS : 0.0 - 0.4
BILIRUBIN INDIRECT (serum)	: 0.50	MG/DL	0.0 - 1.0
S.G.O.T (serum)	: 26	IU/L	5 - 40
S.G.P.T (serum)	: 20	IU/L	5 - 40
ALKALINE PHOSPHATASE (serum)	: 103	IU/L	CHILD BELOW 6 YRS : 60 - 321 CHILD : : 67 - 382 ADULT : : 36 - 113
PROTEINS TOTAL (serum)	: 6.9	GM/DL	6.4 - 8.3
ALBUMIN (serum)	: 4.2	GM/DL	3.5 - 5.7
GLOBULIN (serum)	: 2.70	GM/DL	1.8 - 3.6
A/G RATIO	: 1.56		1:2 - 2:1

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology
(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:33 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

BIOCHEMISTRY

HbA1C- GLYCOSYLATED -HB

HBA1C	: **5.64**	%	Normal Control : : 4.2 - 6.2 Good Control : : 5.5 - 6.7 Fair Control : : 6.8 - 7.6 Poor Control : : >7.6

Instrument: COBAS C 111

NOTE :

1. The HbA1C test shows your average blood sugar for last 3 months.
2. The HbA1C test does not replace your day-to-day monitoring of blood glucose.
   Use this test result along with your daily test results to measure yoir overall diabetes control.

How does HbA1C works ?
The HbA1C test measures the amount of **sugar that attaches to protein** in your red blood cells.
RBCs live for about 3 months, so this test shows your average blood sugar levels during that time.
Greater the level of sugar & longer it is high, the more sugar that will attach to RBCs.
Why is this test so important ?
Research studies demonstrated that **the closer to normal your HbA1C level was, the less likely your risk of developing the long- term complications of diabetes.** Such problems include eye disease and kidney problems.
Who should have the HbA1c test done ?
Everyone with diabetes can benefit from taking this test. Knowing your HbA1C level helps you and your doctor decide if you need to change your diabetes management plan.
How often should you have a HbA1C test ?
You should have this test done when you are first diagnosed with diabetes.
Then at least twice a year if your treatment goals are being met & blood glucose control is stable.
More frequent HbA1C testing (4 times / year) is recommended if your blood glucose management goals.

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology & Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology

(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 11:37 AM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:34 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
BIOCHEMISTRY			
CALCIUM			
CALCIUM (serum)	: 9.65	MG/DL	8.4 - 10.4

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

Dept. of Pathology
(For Report Purpose Only)

AiMS Hospital & Research Center
Caring Redefined

PRN	: 106225	**Lab No**	: 9221
Patient Name	: Mr. RAMANE MACHINDRA SWAMI	**Req.No**	: 9221
Age/Sex	: 50Yr(s)/Male		
		Collection Date & Time	: 05/03/2022 10:13 AM
Company Name	: BANK OF BARODA	**Reporting Date & Time**	: 05/03/2022 12:18 PM
Referred By	: Dr.HOSPITAL PATIENT	**Print Date & Time**	: 05/03/2022 12:31 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

CLINICAL PATHOLOGY

URINE ROUTINE

PHYSICAL EXAMINATION

QUANTITY	:	30	ML
COLOUR	:	PALE YELLOW	
APPEARANCE	:	SLIGHTLY HAZY	
REACTION	:	ACIDIC	
SPECIFIC GRAVITY	:	1.025	

CHEMICAL EXAMINATION

PROTEIN	:	ABSENT	
SUGAR	:	ABSENT	
KETONES	:	ABSENT	
BILE SALTS	:	ABSENT	
BILE PIGMENTS	:	ABSENT	
UROBILINOGEN	:	NORMAL	

MICROSCOPIC EXAMINATION

PUS CELLS	:	0-1	/hpf
RBC CELLS	:	ABSENT	/ hpf
EPITHELIAL CELLS	:	0-1	/hpf
CASTS	:	ABSENT	/hpf
CRYSTALS	:	ABSENT	
OTHER FINDINGS	:	ABSENT	
BACTERIA	:	ABSENT	

END OF REPORT

Technician

Report Type By :- KAJAL SADIGALE

Dr. POONAM KADAM
MD (Microbiology), Dip.Pathology &
Bacteriology (MMC-2012/03/0668)
Pathologist

RAMANE MACHINDRA

Ref.:Dr.--
Sample Collected At:
Lorea Healthcare Private Limited
Survey No 154, AIMS Road
Near AiMS Square or Parihar Chowk,
Aundh, Pune 411007 Zone SHIVA

SID: 121343378
Collection Date:
05-03-2022 01:05 PM
Registration Date:
05-03-2022 01:05 pm
Report Date:
05-03-2022 02:59 PM

REPORT Age:50.00 Years Sex:MALE

Test Description **TEST NAME**	Observed Value	Biological Reference Interval
PSA- Prostate Specific Antigen,serum by CMIA	**0.390**	Age < 40 yrs : </= 2.00 ng/mL Age 40 - 49 yrs : </= 2.50 ng/mL Age 50 - 59 yrs : </= 3.5 ng/mL Age 60 - 69 yrs : </= 4.5 ng/mL Age 70 - 79 yrs : </= 6.5 ng/mL Age >/= 80 yrs : </= 7.2 ng/mL Mayo Medical Laboratories

Interpretation

PSA is a glycoprotein produced by prostate gland and is used for

1. Predicting risk of prostate cancer.
2. To detect recurrence and to response to therapy.

Higher total PSA levels and lower percentages of free PSA are associated with higher risks of prostate cancer.

The total PSA range of 4 to 10 ng/ml has been described as a diagnostic gray zone.

The total PSA : Free PSA ratio helps to determine the relative risk of prostate cancer in this zone

Please note : 1. Normal PSA values do not rule out possibility of prostate cancer.
2. Patients on treatment for cancer may exhibit markedly decreased levels.
3. PSA levels may be raised in benign conditions such as
   i. After prostatic manipulation, biopsy or TURS
   ii. Benign prostatic hyperplasia (BPH)
   iii. Prostatitis

End of Report

MC-3143

Dr. Venkatesh Keralapurkar
M.B.B.S.,D.C.P., D.N.B.(Path)
Reg.No.: 076020
A.G Diagnostics Pvt. Ltd.