



# ALEXIS

## HOSPITAL BHOPAL



### DEPARTMENT OF PATHOLOGY

Patient Name : MR. ANKUR GUPTA  
 Registration No. : AH-A-002301  
 Lab No : 7  
 Age & Sex : 31 Years / Male  
 Referring Doctor :  
 Report Status : Final

Date : .....  
 Registration Date/Time : 26/11/2022 05:30PM  
 Accession Date/Time : 26/11/2022 05:40PM  
 Report Date/Time : 26/11/2022 06:09PM  
 Print Date/Time : 26/11/2022 6:46 pm

TEST(S)	RESULT(S)	UNITS	BIOLOGICAL REFERENCE RANGE
<b>BLOOD GROUP &amp; RH FACTOR</b>			
SAMPLE TYPE : EDTA WB METHOD : Slide and Tube m			
Blood Group	: 'A' Positive		
<b>CBC/ESR</b>			
SAMPLE TYPE : WHOLE BLOOD EDTA METHOD :			
Result	: 9	mm/hour	0-9
<b>COMPLETE BLOOD COUNT (CBC)</b>			
SAMPLE TYPE : WHOLE BLOOD EDTA METHOD : 5 part fully aut			
R.B.C. Count	: 4.83	10 <sup>6</sup> /mm <sup>3</sup>	4.5-5.5
Haemoglobin	: 14.00	g/dl	14.0-17.4
PCV	: 43.4	%	42-52
MCV	: 89.8	fl	84-96
MCH	: 29.0	pg	28-34
MCHC	: 32.3	g/dL	32-36
RDW-CV	: 12.4	%	11.5-14.5
MPV	: 10.8	fl	7.4-10.4
Total WBC Count	: 5700	/cmm	4000-11000
Platelet count	: 2.46	/cmm	1.50-4.50
Neutrophils	: 68	%	50-80
Lymphocytes	: 27	%	25-45
Monocytes	: 02	%	3-7
Eosinophils	: 03	%	0-3
Basophils	: 00	%	00-01



\*\*\*\*\* End Of Report \*\*\*\*\*

Technician

Dr. NIPUN MADHAV  
 MBBS, M.D. (Pathology)  
 Reg. No. MP-18747

Subject of following conditions :- The science of pathological diagnosis is based on interpretation of immunobiochemical ELISA, RIA and other reactions which are influenced by several factors. Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods, equipment, specificity, sensitivity, drug interaction and the quality of the specimen (s) samples receiver. The most sophisticated computerized blood analyzer techniques are subject to uncountable variations. Results of test vary from laboratory to laboratory and also in some parameters from time to time for the same patients. So the final diagnosis, conclusion should not be draw from these test only hence kindly correlate clinically. Advised follow up. The laboratory investigations should always be interpreted in the light of clinical features and other related investigations. Subject to corrections of typing / printing / humanly mistakes. Should the result indicate an unexpected abnormality, reconfirmation shall be sought. This report is not valid for



# ALEXIS

## HOSPITAL BHOPAL



### DEPARTMENT OF PATHOLOGY

Patient Name : MR. ANKUR GUPTA  
 Registration No. : AH-A-002301  
 Lab No : 7  
 Age & Sex : 31 Years / Male  
 Referring Doctor :  
 Report Status : Final

Date : .....  
 Registration Date/Time : 26/11/2022 05:30PM  
 Accession Date/Time : 26/11/2022 05:40PM  
 Report Date/Time : 26/11/2022 06:16PM  
 Print Date/Time : 26/11/2022 6:18 pm

#### TEST(S)

**LIPID PROFILE**  
 SAMPLE TYPE : SERUM  
 METHOD :

TEST(S)	RESULT(S)	UNITS	BIOLOGICAL REFERENCE RANGE
S.Cholesterol	: 180.8	mg/dL	No risk < 200 mg/dl Moderate risk 200 - 239 mg/dl High risk >240 mg/dl Upto 150
S.Triglycerides	: 130.5	mg/dl	
HDL Cholesterol	: 39.3	mg/dl	
LDL Cholesterol	: 115.4	mg/dl	Major risk < 40 mg/dl Negative risk > 60 mg/dl Optimum < 100 mg/dl Near/above optimum 100 - 129 mg/dl Boderline high 130 - 159 mg/dl High 160 - 189 mg/dl Very high > 190 mg/dl Upto 30
VLDL Cholesterol	: 26.1	mg/dl	
S.Cholesterol/HDL Ratio	: 4.6005		4.4-11

**RFT**  
 SAMPLE TYPE : SERUM  
 METHOD :

BLOOD UREA	: 21.1	mg/dL	20-45
SERUM CREATININE	: 0.81	mg/dL	0.67-1.20
SODIUM	: 136.9	mmol/L	135-149
POTASSIUM	: 4.2	mmol/L	3.5-5.5

**TOTAL PROTEIN**  
 SAMPLE TYPE : SERUM  
 METHOD : BIURET method

Total Serum Proteins	: 7.1	gm/dL	6.4-8.3
Serum Albumin	: 3.2	GM/DL	3.2-4.5
Serum Globulin	: 3.9	gm/dL	1.9-3.5
A/G Ratio	: 0.8205		1.2 - 1.5



\*\*\*\*\* End Of Report \*\*\*\*\*

Technician

Dr.NIPUN MADHAV  
 MBBS, M.D. (Pathology)  
 Reg. No. MP-18747

Subject of following conditions :- The science of pathological diagnosis is based on interpretation of immunobiochemical ELISA, RIA and other reactions which are influenced by several factors. Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods, equipment, specificity, sensitivity, drug interaction and the quality of the specimen (s) samples received. The most sophisticated computerized blood analyzer techniques are subject to uncountable variations. Results of test vary from laboratory to laboratory and also in some parameters from time to time for the same patients. So the final diagnosis, conclusion should not be draw from these test only hence kindly correlate clinically. Advised follow up. The laboratory investigations should always be interpreted in the light of clinical features and other related investigations. Subject to corrections of typing / printing / humanly mistakes. Shuold the result indicate an unexpected abnormality, reconfirmation shall be sought. This report in not valied for



# ALEXIS

## HOSPITAL BHOPAL



### DEPARTMENT OF PATHOLOGY

Patient Name : MR. ANKUR GUPTA  
 Registration No. : AH-A-002301  
 Lab No : 7  
 Age & Sex : 31 Years / Male  
 Referring Doctor :  
 Report Status : Final

Date : .....  
 Registration Date/Time : 26/11/2022 05:30PM  
 Accession Date/Time : 26/11/2022 05:40PM  
 Report Date/Time : 26/11/2022 06:13PM  
 Print Date/Time : 26/11/2022 6:22 pm

TEST(S)	RESULT(S)	UNITS	BIOLOGICAL REFERENCE RANGE
<b>FBS</b> SAMPLE TYPE: WHOLE BLOOD FLUORIDE F METHOD: Hexokinase Enzym	Result : 103.5	mg/dl	70-100
<b>HbA1C</b> SAMPLE TYPE: WHOLE BLOOD EDTA M METHOD: Immunoturbidimet	Glycosylated Haemoglobin % (Hb A1c) : 5.14	%	4.8-5.9
	Mean Plasma Glucose (MPG) : 100.818		
<b>LFT</b> SAMPLE TYPE: SERUM METHOD:	Bilirubin- Total : 0.87	mg/dL	0.15-1.1
	Bilirubin- Direct : 0.17	mg/dL	0-0.2
	Bilirubin- Indirect : 0.7		
	SGOT : 32.98	U/L	05-50
	SGPT : 42.9	U/L	07-40
	Alkaline Phosphatase : 81.9	U/L	5-128
<b>PPBS</b> SAMPLE TYPE: WHOLE BLOOD FLUORIDE PP METHOD: Hexokinase Enzym	Result : 128.9	mg/dl	70-140
<b>URIC ACID</b> SAMPLE TYPE: SERUM METHOD: Uricase POD End	Result : 4.1	mg/dL	3.4-7.0



\*\*\*\*\* End Of Report \*\*\*\*\*

Technician

Dr. NIPUN MADHAV  
 MBBS, M.D. (Pathology)  
 Reg. No. MP-18747

Subject of following conditions - The science of pathological diagnosis is based on interpretation of immunobiochemical ELISA, RIA and other reactions which are influenced by several factors. Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods, equipment, specificity, sensitivity, drug interaction and the quality of the specimen (s) samples receiver. The most sophisticated computerized blood analyzer techniques are subject to uncountable variations. Results of test vary from laboratory to laboratory and also in some parameters from time to time for the same patients. So the final diagnosis, conclusion should not be draw from these test only hence kindly correlate clinically. Adviced follow up. The laboratory investigations should always be interpreted in the light of clinical features and other related investigations. Subject to corrections of typing / printing / humanly mistakes. Should the result indicate an unexpected abnormality, reconfirmation shall be sought. This report is not valid for



# ALEXIS

## HOSPITAL BHOPAL



### DEPARTMENT OF PATHOLOGY

Patient Name : MR. ANKUR GUPTA  
Registration No. : AH-A-002301  
Lab No : 7  
Age & Sex : 31 Years / Male  
Referring Doctor :  
Report Status : Final

Date : .....  
Registration Date/Time : 26/11/2022 05:30PM  
Accession Date/Time : 26/11/2022 05:40PM  
Report Date/Time : 26/11/2022 06:21PM  
Print Date/Time : 26/11/2022 6:23 pm

TEST(S)	RESULT(S)	UNITS	BIOLOGICAL REFERENCE RANG
<b>T3 T4 TSH</b> SAMPLE TYPE : SERUM METHOD : ECL			
TRI-iodothyronine (T3)	: 1.26	ng/mL	0.83-2.00
THYROXINE (T4)	: 6.1	ug/dL	5.13-14.1
THYROID STIMULATING HORMONE TSH	: 3.98	μIU/ml	0.27-4.2
<b>PSA</b> SAMPLE TYPE : SERUM METHOD : ECL			
Result	: 3.1	ng/mL	< 4.0



\*\*\*\*\* End Of Report \*\*\*\*\*

Technician

Dr. NIPUN MADHAV  
MBBS, M.D. (Pathology)  
Req. No. MP-18747



# ALEXIS

## HOSPITAL BHOPAL



### DEPARTMENT OF PATHOLOGY

Patient Name : MR. ANKUR GUPTA  
 Registration No. : AH-A-002301  
 Lab No : 7  
 Age & Sex : 31 Years / Male  
 Referring Doctor :  
 Report Status : Final

Date : .....  
 Registration Date/Time : 26/11/2022 05:30PM  
 Accession Date/Time : 26/11/2022 05:40PM  
 Report Date/Time : 26/11/2022 06:24PM  
 Print Date/Time : 26/11/2022 6:24 pm

#### TEST(S)

#### URINE R/M

SAMPLE TYPE : URINE  
 METHOD : Multistix

#### BIOLOGICAL REFERENCE RANGE

Colour	: Pale Yellow	Clear
Quantity	: 15	
Appearance	: Clear	Clear
Specific gravity	: 1.020	1.005 - 1.030
Reaction (PH)	: 6.0	5.0 - 9.0
Albumin	: Trace	Negative
Sugar	: Negative	Negative
Ketone Bodies	: Negative	Negative
Bile Salts	: Negative	Negative
Bile Pigments	: Negative	Negative
Bilirubin	: Negative	Negative
Blood	: Negative	Negative
Nitrate	: Negative	Negative
PUS Cells	: 1-2	0 - 2 /hpf
RBC	: Not Detected	Not Detected
Epithelial Cells	: 2-3	0 - 2 /hpf
Casts	: Not Detected	Not Detected
Crystals	: Not Detected	
Bacteria	: Not Detected	Not Detected



\*\*\*\*\* End Of Report \*\*\*\*\*

Technician

Dr. NIPUN MADHAV  
 MBBS, M.D. (Pathology)  
 Reg. No. MP-18747

Subject of following conditions :- The science of pathological diagnosis is based on interpretation of immunobiochemical ELISA, RIA and other reactions which are influenced by several factors. Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods, equipment, specificity, sensitivity, drug interaction and the quality of the specimen (s) samples received. The most sophisticated computerized blood analyzer techniques are subject to unaccountable variations. Results of test vary from laboratory to laboratory and also in some parameters from time to time for the same patients. So the final diagnosis, conclusion should not be draw from these test only hence kindly correlate clinically. Advised follow up. The laboratory investigations should always be interpreted in the light of clinical features and other related investigations. Subject to corrections of typing / printing / humanly mistakes. Should the result indicate an unexpected abnormality, reconfirmation shall be sought. This report is not valid for



# ALEXIS HOSPITAL BHOPAL



### INITIAL ASSESSMENT OPD / EMERGENCY

UHID No. : AH-A-002301      OPD No. : 1860      Date :  
 Patient Name : MR. ANKUR GUPTA      Age/Sex : 35 Years / Male      NEW / FOLLOW UP :  
 Address : Abhinav Homes Ayodhya Bypass Bhopal      Mobile No. : 9826408981      Date : 26-Nov-2022 10:29 am  
 Department : MEDICINE      Consultant : Dr. Zeeshan Ahmed MD Reg. No. MP-6256

Presenting Complaints : *no such complaint  
 sometimes stressed due to work load.*

Habits / Allergy : *Occasionally Alcoholic.*

Past Medical and Surgical History :

#### Systemic Examination :

CNS *Conscious Oriented*  
 CVS *S1S2+*  
 RS *B/L Equal*  
 PA *Soft*

Wt.:	HT:
Temp: <i>Afebrile</i>	Pulse: <i>88/m</i>
BP: <i>110/80</i>	Resp: <i>21/m</i>
SPO2: <i>99%</i>	

Provisional Diagnosis :

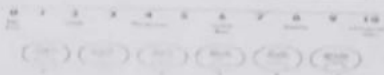
#### Investigation Advised :

- CBC & ESR
- BLOOD SUGAR-R/F/PP
- LFT
- RFT
- LIPID PROFILE
- HBA1C
- TROPONIN-I
- T3 T4 TSH
- WIDAL
- MALARIA
- URINE R/M
- URIC ACID
- RA FACTOR
- VITAMIN-D3
- VITAMIN-B12
- S. CALCIUM
- 2D ECHO
- TMT
- USG
- ECG

#### Prescription

Rx  
*Aelw → low fat diet.  
 • maintain healthy & hygienic diet*  
 O/E → *Both eye sight → WNL*  
*CVS → S1S2+* / *R/S → B/L clear & Equal.*  
*CNS → Conscious oriented.*  
*9M9B ECG → WNL*  
*Bld Reports Awaited.*

Pain Scale (Wong Baker Faces)



Follow up Advise & Date:

Doctor's Sign.

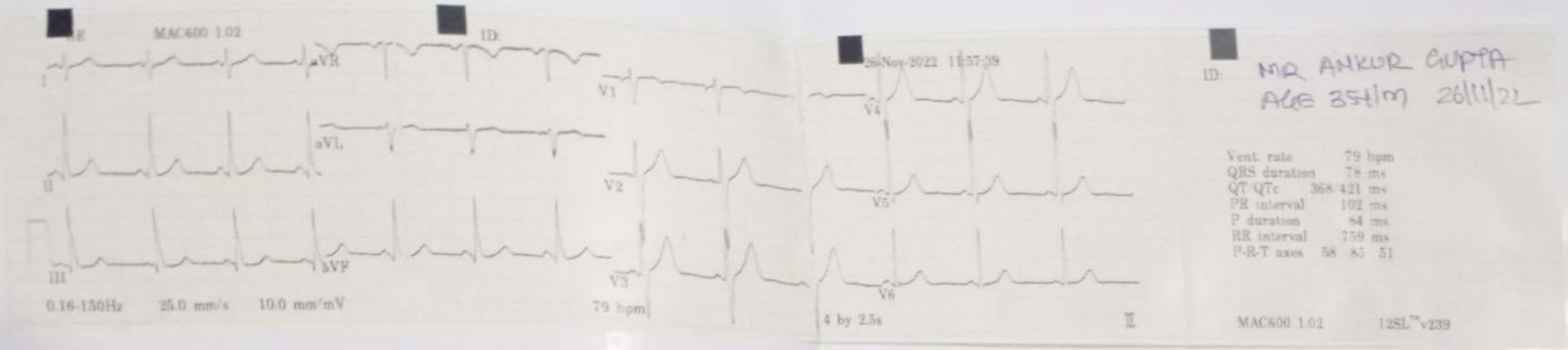
For Pharmacy Use

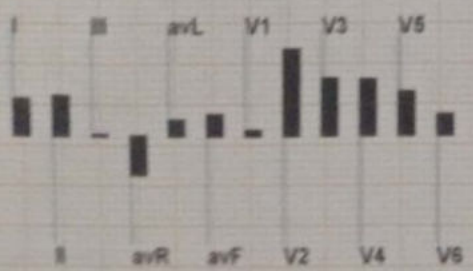
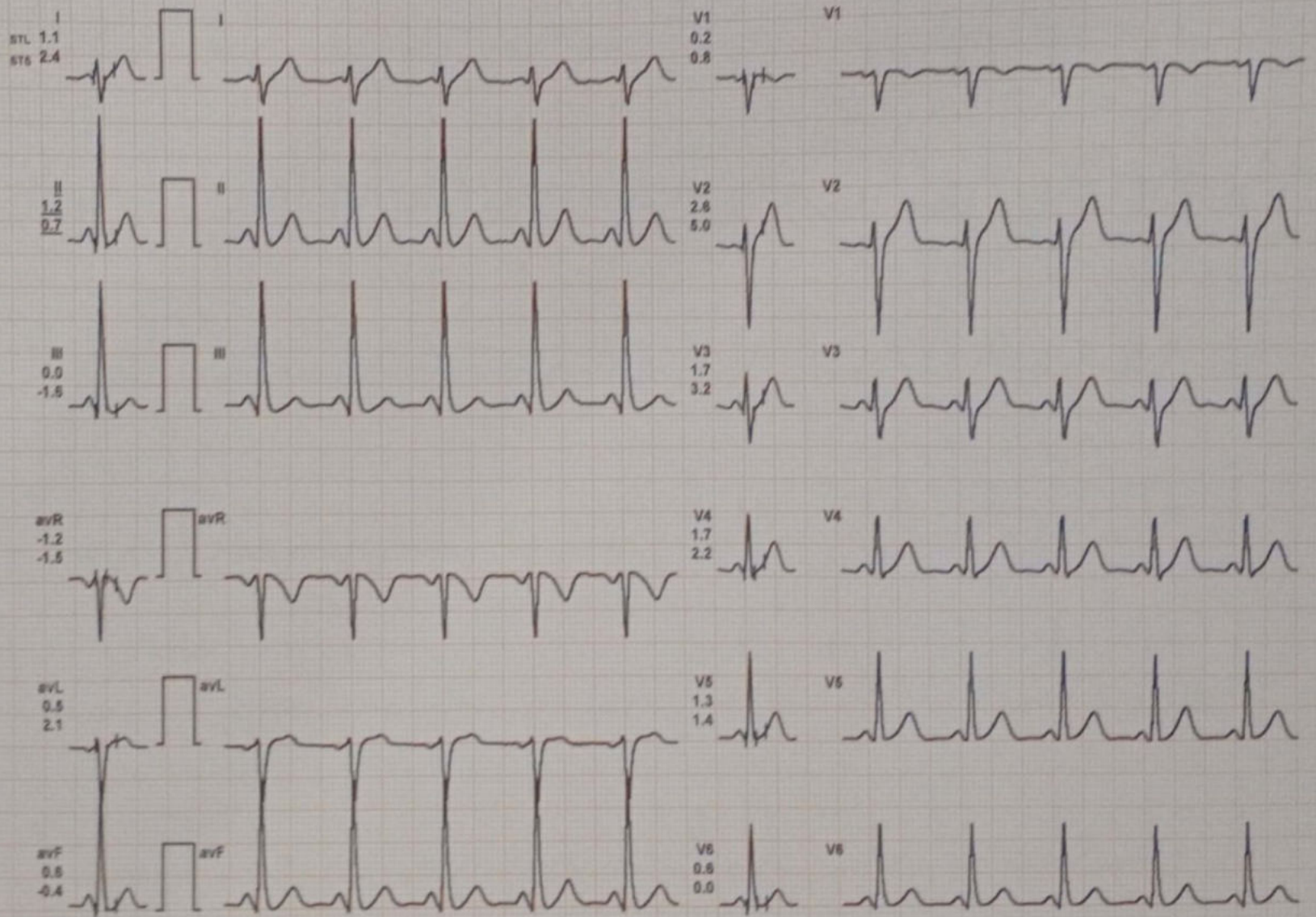
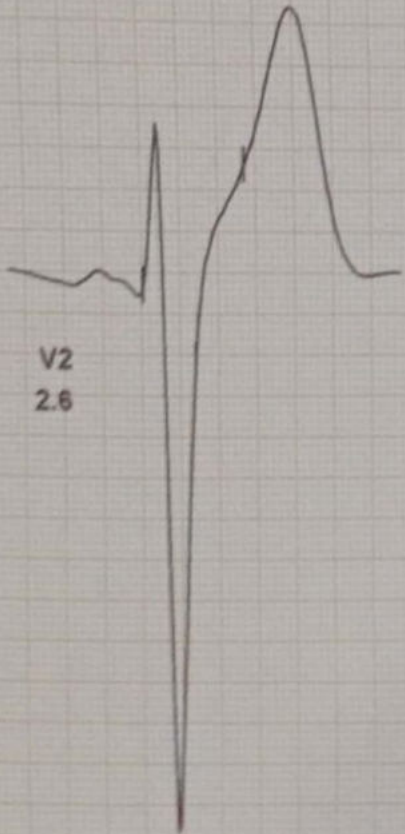
Dispensed	Yes	No	Date
	<input type="checkbox"/>	<input type="checkbox"/>	

Name & Sign. of Pharmacist

Note- In case of emergency please contact on emergency number 0755-4944777, 8827535356

Add.: Minal Gate No. 01, Chanakyapuri, J.K. Road, Bhopal, M.P. 462023  
 ☎ : 0755-4944777, ✉ : alexishospitalbhopal@gmail.com





REMARKS:





MR. ANKUR GUPTA / 35 Yrs / M / 176 Cms / 57 Kg Date: 26-Nov-2022

Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:18	0:18	00.0	00.0	01.0	094	51 %	---/---	000	00	
Standing	00:36	0:18	00.0	00.0	01.0	093	50 %	---/---	000	00	
ExStart	00:59	0:23	00.0	00.0	01.0	106	57 %	---/---	000	00	
BRUCE Stage 1	03:59	3:00	01.7	10.0	04.7	127	69 %	130/80	165	00	
BRUCE Stage 2	06:59	3:00	02.5	12.0	07.1	157	85 %	140/80	219	00	
PeakEx	08:16	1:17	03.4	14.0	08.4	185	100 %	160/90	296	00	
Recovery	09:16	1:00	00.0	00.0	01.1	165	89 %	160/90	264	00	
Recovery	10:16	2:00	00.0	00.0	01.0	160	86 %	---/---	000	00	
Recovery	11:16	3:00	00.0	00.0	01.0	138	75 %	150/90	207	00	
Recovery	11:49				00.0	000	0 %	---/---	000	00	

**Findings :**

- Exercise Time : 07:17
- Max HR Attained : 185 bpm 100% of Target 185
- Max BP Attained : (Sys) 160/90
- Max WorkLoad Attained : 8.4 Fair response to induced stress
- Test End Reasons : Heart Rate Acheived, Fatigue



356 / MR. ANKUR GUPTA / 35 Yrs / M / 176 Cms / 57 Kg Date: 26-Nov-2022

Report :

TEST OBJECTIVE	: SCREENING FOR CAD
RISK FACTOR	: NONE
MEDICATION	: NONE
BRIEF HISTORY	: NONE
OTHER INVESTIGATION	: X-RAY CHEST
REASON FOR TERMINATION	: HEART RATE ACHIEVED/FATIGUE
EXERCISE TOLERANCE	: GOOD
EXERCISE INDUCED ARRHYTHMIAS	: NO
HAEMODYNAMIC RESPONSE	: NORMAL
CHRONOTROPIC RESPONSE	: NORMAL
FINAL IMPRESSION	: STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE