

mr naveen kumar rohila
Male 50 Years
Req. No. :

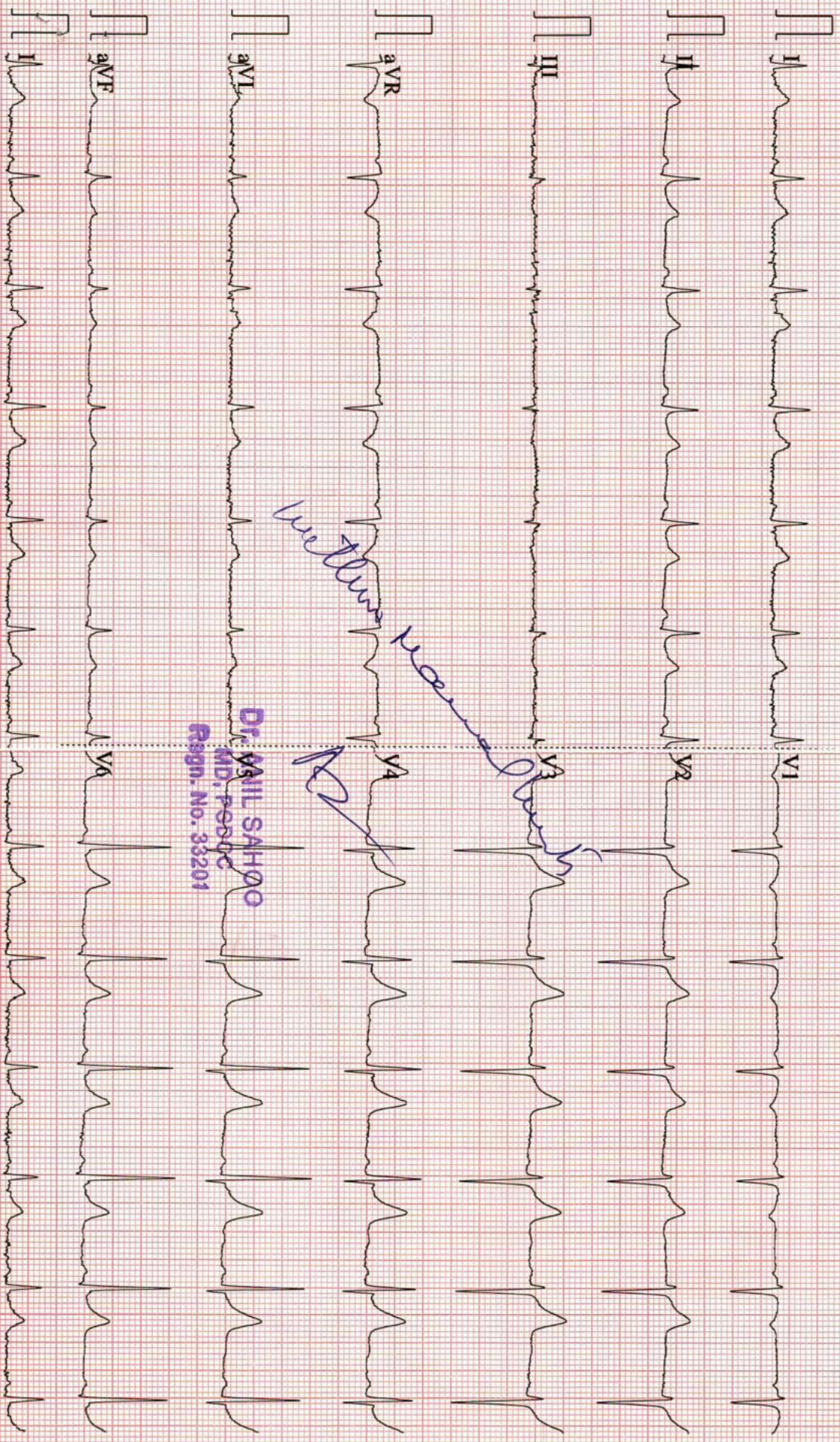
HR : 74 bpm
P : 90 ms
PR : 128 ms
QRS : 90 ms
QT/QTcBz : 382/424 ms
P/QRS/T : 55/30/27 °
RV5/SV1 : 1.476/0.780 mV


Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:

Wetllus
Normal

Dr. MAIL SAHOO
MD, PCCO
Regn. No. 33201



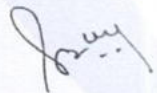
Patient Name : Mr. NAVEEN KUMAR ROHILA	Reg No. : 2633/UHID23DL	Lab ID. : 2131/OPDPB23DL
Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 10.04
Refd. By : Dr. .		Received : 16-Jul-2023 10.04
Sample Type : EDTA whole blood	Sample ID : 231994	Report : 16-Jul-2023 11.05

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMOTOLOGY

COMPLETE BLOOD COUNT				
HEMOGLOBIN	9.8	g/dl	12.5-16.5	Colorimetric
TOTAL LEUCOCYTE COUNT	6.3	10 ³ /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	59	%	40-75	Electrical impedance
Lymphocyte	32	%	20-45	Electrical impedance
Eosinophil	04	%	01-06	Microscopy
Monocyte	05	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	32	mm/1sthr	0-20	Westergren's
RBC COUNT	4.41	mili/emm	3.8-5.5	Electrical impedance
PCV	32	%	35-45	Calculated
MCV	71.80	fL	80-100	Calculated
MCH	22.2	Picogram	27.5-33.2	Calculated
MCHC	30.90	gm/dl	32-36	Calculated
PLATELET COUNT	210	10 ³ /uL	150-450	Electrical impedance

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



BOOK APPOINTMENT



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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No. :	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : EDTA whole blood	Sample ID : 231991	Report : 16-Jul-2023 15.06

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMOTOLOGY

HBA1C (GLYCOSYLATED HB)	6.8	%	4-6	PEIT
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Metabolically healthy patients 4.5 - 6.0 %
6.1 - 6.5 %

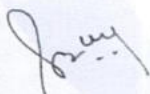
Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %

Good control :

COMMENTS: HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3 Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----




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BOOK APPOINTMENT



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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 14.22
Refd. By : Dr. .		Received : 16-Jul-2023 14.22
Sample Type : Plasma(Sodium fluoride)	Sample ID : 231992	Report : 16-Jul-2023 15.06

TEST NAME	RESULT	UNIT	RANGE	METHOD
		BIOCHEMISTRY		
Blood Sugar PP	179.5	mg/dl	70-150	GOD-POD

INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

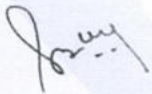
2-hr PG > 200 mg/dl during OGTT(75-G)*

Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis

-----End of Report-----




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Patient Name : Mr. NAVEEN KUMAR ROHILA	Reg No. : 2633/UHID23DL	Lab ID. : 2128/OPDPB23DL
Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.12
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : Plasma(Sodium fluoride)	Sample ID : 231992	Report : 16-Jul-2023 15.06

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BLOOD SUGAR FASTING	137.8	mg/dl	74-100	GOD-POD
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INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

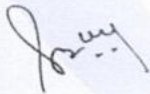
2-hr PG > 200 mg/dl during OGTT(75-G)*

Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis

-----End of Report-----




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BOOK APPOINTMENT



Patient Name : Mr. NAVEEN KUMAR ROHILA	Reg No. : 2633/UHID23DL	Lab ID. : 2127/OPDPB23DL
Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : Serum	Sample ID : 231991	Report : 16-Jul-2023 15.06

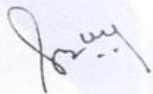
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

KIDNEY FUNCTION TEST

Blood Urea	26.0	mg/dl	15.0-45.0	urease
Serum Creatinine	1.0	mg/dl	0.7-1.3	Jaffes Kinetic
Serum Uric Acid	4.80	mg/dl	2.5-7.2	Uricase
Total Protein				
PROTEN	6.99	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Bcg
GLOBULIN	2.89	g/dl	2.3-3.5	
A/G RATIO	1.42	g/dl		
Calcium	9.6	mg/dl	8.6-10.2	Arsenazo
Sodium	143.0	mmol/L	136.0-149.0	ISE Indirect
Potassium	4.4	mmol/L	3.5-5.5	ISE Indirect
Chloride	108.0	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----




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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
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TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIPID PROFILE

Total Cholesterol	130.00	mg/dl	123-199	CHOD-PAP
Triglycerides	163.7	mg/dl	40-160	Gpo
HDL Cholesterol Direct	36.9	mg/dl	35.3-79.5	Direct
Vldl	33	mg/dl	4.7-22.1	
LDL Cholesterol Direct	60.4	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.5		0.0-4.97	
LDL/HDL Ratio	1.6		0.0-3.55	

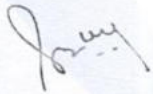
INTERPRETATION:-

Acceptable/Low Risk	: < 200 mg/dL	: <130 mg/dL	: < 4.5
Borderline High Risk	: 200-239 mg/dL	: 130-159 mg/dl	: 4.5 - 6.0
High Risk	: > 240 mg /dL	: > 160 mg/dL	: > 6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery.

COMMENTS:-

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and




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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
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Sample Type : Serum	Sample ID : 231991	Report : 16-Jul-2023 15.06

pancreatitis.

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

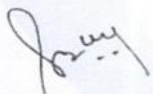
HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :-

CHOLESTEROL	LDL-CHOLESTEROL	CHO/HDL RATIO
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Artery Disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

-----End of Report-----




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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : Serum	Sample ID : 231991	Report : 16-Jul-2023 15.06

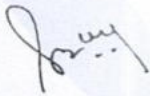
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIVER FUNCTION TEST

Serum Bilirubin				
Total Bilirubin	0.26	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.11	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.15	mg/dl	0-0.8	Calculated
Total Protein				
PROTEN	6.99	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Bcg
GLOBULIN	2.89	g/dl	2.3-3.5	
A/G RATIO	1.42	g/dl		
SGOT	18	U/L	0-35	IFCC
SGPT	21	U/L	0.0-45	IFCC
Gamma GT	31.9	U/L	0-55	Glupa-c
Alkaline Phosphatase	99	U/L	53-128	Amp

-----End of Report-----




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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : Serum	Sample ID : 231991	Report : 16-Jul-2023 15.06

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HORMONES

THYROID PROFILE

T3 1.20 ng/dl CLIA

All values

Adults (euthyroid) 0.50-2.00

Newborns 0.73-2.88

6d - 3 mth 0.80-2.75

4 - 12 mth 0.86-2.65

1 - 6 yr 0.92-2.48

7 - 11 yr 0.93-2.31

12- 20 yr 0.91-2.18

Pregnancy

First trimester 0.05 - 3.70

Second trimester 1.7 - 4.3

Third trimester 0.4 - 3.9

T4 9.65 µg/dl CLIA

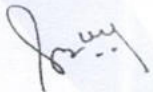
Adults - M - 4.4-10.8 µg/dl

F- 4.8 - 11.6 µg/dl

1st Trimester 7.3-15.00 µg/dl

2st Trimester 8.92-17.38

3st Trimester 7.98-17.70




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Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.13
Refd. By : Dr. .		Received : 16-Jul-2023 09.13
Sample Type : Serum	Sample ID : 231991	Report : 16-Jul-2023 15.06

TSH 0.87 μ IU/ml CLIA

Adults

21-100 yrs 0.42 - 5.45

Pediatric

0-12 Months 0.98-5.63

1-5 years 0.64-5.76

6-10 Years 0.51-4.82

11-14 Years 0.53-5.27

15-20 years 0.43-4.20

Pregnancy

First trimester 0.1 - 2.5*

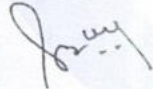
Second trimester 0.2 - 3*

Third trimester 0.3 - 3*

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

Adults 21-100 yrs 0.35 - 5.50
 Pediatric 0-12 Months 0.98-5.63
 1-5 years 0.64-5.76
 6-10 Years 0.51-4.82
 11-14 Years 0.53-5.27
 15-20 years 0.43-4.20

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy




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Patient Name : Mr. NAVEEN KUMAR ROHILA	Reg No. : 2633/UHID23DL	Lab ID. : 2127/OPDPB23DL
Age / Gender : 50Y / Male	Date : 16-Jul-2023	
Mobile No. : 7017531261	Manual No.	Collected : 16-Jul-2023 09.52
Refd. By : Dr. .		Received : 16-Jul-2023 09.52
Sample Type : URINE	Sample ID : 231991	Report : 16-Jul-2023 15.06

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY

20.00 ml 10-30

COLOUR

PALE YELLOW

TRANSPARENCY

CLEAR

SPECIFIC GRAVITY

1.020 1.015-1.025

PH

6.0 5.5 - 7

CHEMICAL EXAMINATION

ALBUMIN

NIL

SUGAR

+

MICROSCOPIC EXAMINATION

PUS CELLS

2-3 /hpf MICROSCOPIC

RBC'S

NIL NIL

CASTS

NIL

CRYSTALS

NIL

EPITHELIAL CELLS

1-2

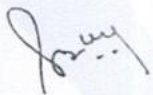
BACTERIA

NIL

OTHERS

NIL

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



BOOK APPOINTMENT





भारत सरकार
Government of India



Issue Date: 05/10/2013



नवीन कुमार रोहिला
Naveen Kumar Rohilla
जन्म तिथि/DOB: 02/06/1973
पुरुष/ MALE
7017531261

6186 6698 5128

VID : 9129 4380 9221 8806

मेरा आधार, मेरी पहचान

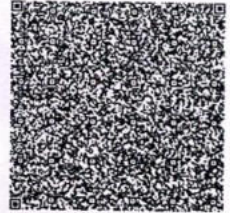


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता:
S/O रणजीत सिंह, हाउस नं-25, महादेव विहार, ओ. बी.
सी. बैंक के पीछे, निरजन्पुर, जी.एम.एस. रोड, माजरा,
देहरादून,
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6186 6698 5128

VID : 9129 4380 9221 8806

1947

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Radiology No.	: 2127/OPDPB23DL	Date	: 16-Jul-2023
Patient Name	: Mr. NAVEEN KUMAR ROHILA	Age/Sex	: 50Y
Guardian Name	:	UHID No.	: 2633/UHID23DL
Consultant	: Dr. .	Mobile No.	: 7017531261

2-DECHO-DOPPLER REPORT

- No RWMA, LVEF-60%
- Mild concentric LVH
- Normal mitral inflow pattern
- No Clot/ Veg/ PE
- IVC normal size with preserved respiratory variation

M-Mode/2-D Description

- Left Atrium: Normal
- Right Atrium: Normal
- Right Ventricle: Normal
- Aortic Valve: Normal
- Mitral Valve: Normal
- Tricuspid valve: Normal
- Pulmonary Valve: Normal
- Main Pulmonary artery & its branches: Normal
- Pericardium: Normal

Measurements (mm):

	Observed Values	Normal Values
Aortic root diameter	24	20-36 (22mm/M ²)
Aortic Valve Opening		15-26



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Guardian Name :		UHID No. :	2633/UHID23DL
Consultant :	Dr. .	Mobile No. :	7017531261

Left Atrium size	34		19-40
	End Diastole	End Systole	Normal Values
Left Ventricle size	30	22	(ED= 37-56)
Inter ventricular Septum	11	15	(ED= 6-12)
Posterior Wall Thickness	12	15	(ED= 5-10)
LV Ejection Fraction (%)	60%		55%-80%

Doppler velocities (cm/sec)

Pulmonary valve		Aortic valve	
Max velocity	62	Max velocity	133
Mitral valve		Tricuspid valve	
E	89	Max Velocity	100
A	71	Mean Velocity	
DT		Mean PG	4
E/A			

Regurgitation

MR		TR	
Severity	nil	Severity	NIL
Max Velocity		PASP	4
AR		PR	
Severity	nil	Severity	nil

DR ANIL SAHOO
(CARDIOLOGY)



BOOK APPOINTMENT



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Patient Name	: Mr. NAVEEN KUMAR ROHILA	Age/Sex	: 50Y
Guardian Name	:	UHID No.	: 2633/UHID23DL
Consultant	: Dr. .	Mobile No.	: 7017531261

X-RAY CHEST

Indication: H/O Routine check-up.

Image quality:-

No evidence of rotation.

PA view. Normal penetration.

Airway:- Trachea central.

Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- Clear.

Cardiac:- Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.

Diaphragm portion are normal.

Bony cage:- No evidence of bony lesion/fracture seen.

No evidence of cervical ribs seen.

Impression: No significant abnormality detected.



Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



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Patient Name	: Mr. NAVEEN KUMAR ROHILA	Age/Sex	: 50Y
Guardian Name	:	UHID No.	: 2633/UHID23DL
Consultant	: Dr. .	Mobile No.	: 7017531261

ULTRASOUND OF WHOLE ABDOMAN

The liver is normal in size contour and echotexture. Intrahepatic bile ducts and CBD are not dilated. Hepatic portal veins and the IVC appear normal in caliber.

Gall bladder is adequately distended with normal intraluminal fluid contents. No evidence of calculus / wall thickness noted.

Pancreas is of normal size and contour with normal echotexture.

Right kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal .

No calculus, mass or hydronephrotic changes seen.

Right kidney measures-89 x 41mm.

Renal artery pulsation appear normal.

Left kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal .

No calculus, mass or hydronephrotic changes seen.

Left kidney measures-97 x 47mm.

Renal artery pulsation appear normal.

Spleen is of normal size and shape. Echotexture is normal. No focal lesion is seen.



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BOOK APPOINTMENT





Radiology No.	: 2127/OPDPB23DL	Date	: 16-Jul-2023
Patient Name	: Mr. NAVEEN KUMAR ROHILA	Age/Sex	: 50Y
Guardian Name	:	UHID No.	: 2633/UHID23DL
Consultant	: Dr. .	Mobile No.	: 7017531261

No evidence of retro-peritoneal lymphadenopathy/ ascites/ pleural effusion noted.

Urinary bladder does not show any calculus or mass lesion. No significant wall thickening noted.

Prostate is of normal size for age with regular contours and normal echo-texture. It measures 26 x 37 x 28mm which is equal to 15gms.

Impression : Normal sonogram.

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BOOK APPOINTMENT



