

Patient Name : **MR. PATIL SACHIN TATOBA**

Patient ID : 48406

Age / Sex : 30 years / Male

Referred by : MEDIWHEEL

Bill ID : 78726

Collected : Mar 30, 2023, 08:59 a.m.

Reported : Mar 30, 2023, 09:57 a.m.

Sample ID :



219583

Test Description	Results	Units	Biological Reference Range
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**ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)**

Sample Type : Serum

<b>Ultrasensitive Thyroid Stimulative Hormone (TSH)</b> [ CLIA ]	0.50	μIU/mL	0.3 - 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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**Clinical Significance :-**

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

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\*\*END OF REPORT\*\*



**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<b><u>FASTING BLOOD SUGAR</u></b>			
Sample Type : Flouride R			
Fasting Blood Sugar [ GOD - POD ]	<b>107.3</b>	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

\*\*\*END OF REPORT\*\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**POST PRANDIAL BLOOD SUGAR**

Sample Type : Flouride PP

Post Prandial Blood Sugar [ GOD - POD ]	143.8	mg/dl	110-180
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Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**BLOOD GROUP**

Sample Type : EDTA / Whole Blood

ABO Grouping

"B"

Rh Grouping

POSITIVE

**Note:**

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**LIPID PROFILE**

Sample Type : Serum

TOTAL CHOLESTEROL [ CHOD-PAP ]	193.5	mg/dL	Desirable : <200 mg/dl Borderline : 200 - 239mg/dl High : >240 mg/dl
TRIGLYCERIDES [ Glycerol Phosphate Oxidase ]	124.3	mg/dL	Desirable : <150 mg/dl Borderline : 150 - 199mg/dl High : >200mg/dl
HDL CHOLESTEROL [ Direct ]	44.8	mg/dL	Desirable : >40 mg/dl Borderline Risk : 35 mg/dl High Risk : <30 mg/dl
LDL CHOLESTEROL [ Calculated ]	<b>123.84</b>	mg/dL	Desirable : <100 mg/dl Borderline : 130 - 160mg/dl High : >160mg/dl
VLDL Cholesterol [ Calculated ]	24.86	mg/dL	Desirable : <26 mg/dl Borderline : >30 mg/dl
Total Chol / HDL Chol Ratio [ Calculated ]	4.32	mg/dL	Desirable : <5 %
LDL / HDL Ratio [ Calculated ]	2.76		1.00 - 3.55
NON-HDL CHOLESTEROL [ Calculated ]	<b>148.70</b>	mg/dL	Desirable : <130 mg/dl Borderline : 160 - 189 mg/dl High : >220 mg/dl

**Technique:** Fully Automated Biochemistry Analyser ERBA EM-200.

**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**URINE ANALYSE REPORT**

Sample Type : Urine

**PHYSICAL EXAMINATION**

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	6.0		4.8 - 7.6
SPECIFIC GRAVITY	1.020		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

**MICROSCOPY**

PUS CELLS/hpf	1-2		
RBCs/hpf	Absent		
EPI.CELLS/hpf	1-2		
CASTS	Absent		
CRYSTALS	Absent		
BACTERIA	Absent		
Other	Absent		

\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**LIVER FUNCTION TEST**

Sample Type : Serum

TOTAL BILIRUBIN 0.56 mg/dl 0.3-1.3 mg/dl

[ DIAZO ]

BILIRUBIN-DIRECT 0.22 mg/dl 0.1-0.4 mg/dl

[ DIAZO ]

BILLIRUBIN-INDIRECT 0.34 mg/dl 0.1-0.9 mg/dl

[ CALCULATED ]

S.G.O.T. (AST) 14.7 IU/L 5-40 IU/L

[ IFCC without Pyridoxal Phosphate ]

S.G.P.T.(ALT) 17.3 IU/L 5-40 IU/L

[ IFCC without Pyridoxal Phosphate ]

ALKALINE PHOSPHATASE 82 IU/L 44-147 IU/L

[ Amino Methyl Propanol (AMP) ]

TOTAL PROTEINS 7.08 IU/L 6.0 - 8.5g/dL

[ BIURET ]

ALBUMIN 4.12 g/dl 3.5-5.0 g/dl

[ BROMO CRESOL GREEN (BCG) ]

GLOBULIN 2.96 gm% 2.3-3.5 gm%

[ CALCULATED ]

ALBUMIN/GLOBULIN RATIO 1.39

[ CALCULATED ]

GAMMA GT 23.00 U/L 0 - 45

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

Patient Name : **MR. PATIL SACHIN TATOBA**

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Test Description	Results	Units	Biological Reference Range
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**SR. URIC ACID**

Sample Type : Serum

**Uric Acid**

5

mg/dl

3.6 - 7.7

[ Uricase - POD ]

Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200.

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461



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Test Description	Results	Units	Biological Reference Range
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**CREATININE**

Sample Type : Serum

**Creatinine**

0.77

mg/dl

0.40 - 1.40

[ Enzymatic ]

Formula

Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**BLOOD UREA LEVEL ( BUL )**

Sample Type : Serum

<b>Urea</b>	33.6	mg/dl	10 - 40
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[ Urease - GLDH ]

<b>Bun</b>	15.69	mg/dl	6 - 21
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[ Calculated ]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

\*\*END OF REPORT\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**COMPLETE BLOOD COUNT**

Sample Type : EDTA / Whole Blood

Hemoglobin	<b>10.4</b>	g/dl	13.0 - 17.0
RBC COUNT	<b>6.22</b>	Millions/c	4.5 - 5.5
PCV(Hematocrit)	<b>37.3</b>	%	40.0 - 50.0
Mean Cell Volume(MCV)	<b>60</b>	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	<b>16.8</b>	pg	27.0 - 33.0
Mean Cell Hb Conc(MCHC)	<b>28</b>	g/dl	32 - 36
RDW	<b>18.6</b>	%	11.50 - 14.50
Total Leucocytes (WBC) Count	7870	/cumm	4000-11000

**DIFFERENTIAL COUNT**

Neutrophils	54.9	%	40 - 70
Lymphocytes	37.2	%	20 - 50
Eosionphils	2	%	01 - 06
Monocytes	5.7	%	00 - 08
Basophils	0.2	%	00-01

**SMEAR STUDY**

RBC Morphology	<b>Hypochromia(++),Microcytosis(++), Anisopoikilocytosis(+).</b>		
WBC Morphology	No E/o Toxic granules seen		
Platelets On Smear	Adequate on Smear		
Platelet Count	358000	/cumm	150000 - 450000
MPV	9.7	fL	6.5 - 10.0

**Comments :-****Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

**Technique :-**

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**ESR**

Sample Type : EDTA / Whole Blood

ESR 10 Mm/hr 0 - 15

Method Westergren

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**TOTAL THYROXINE ( T4 )**

Sample Type : Serum

Total Thyroxine ( T4 ) [ CLIA ]	100.8	ng/ml	52 - 127
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**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**TOTAL TRIIODOTHYRONINE (T3)**

Sample Type : Serum

TotalTriiodothyronine (T3) [ CLIA ]	1.65	ng/dL	0.69 - 2.15
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**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

Patient Name : **MR. PATIL SACHIN TATOBA**

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Sample ID :



Test Description	Results	Units	Biological Reference Range
<b><u>GLYCOCYLATED HAEMOGLOBIN</u></b>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [ Tosoh HPLC ]	<b>6.3</b>	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	134.11	mg/dL	116.89 - 154.2

**\*\*END OF REPORT\*\*****Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

30/03/2023

Sachin Patil

opium

(P)

(C)

VA Indef G/G

Indef G/G

N/G

N/G

Calocun

(N)

(N)

MS

(N)

(N)

(P)

(N)

(N)

(B)

cont

→



आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

SACHIN TATOBA PATIL  
TATOBA BABU PATIL  
05/06/1990

Permanent Account Number  
BKDPP7744Q

  
Signature



*Cash*  
Dr. Mahesh V. Padsalge  
MD. (Medicine)  
Consultant Physician  
Reg. No. 91424 (MMC)

Sachin, Patil  
ID 32

30.03.2023 9:42:19  
DIABECARE-DIABETES & ENDOCRINE  
OPP GRAND CENTRAL MALL  
SEAWOOD

69 bpm  
-- / -- mmHg

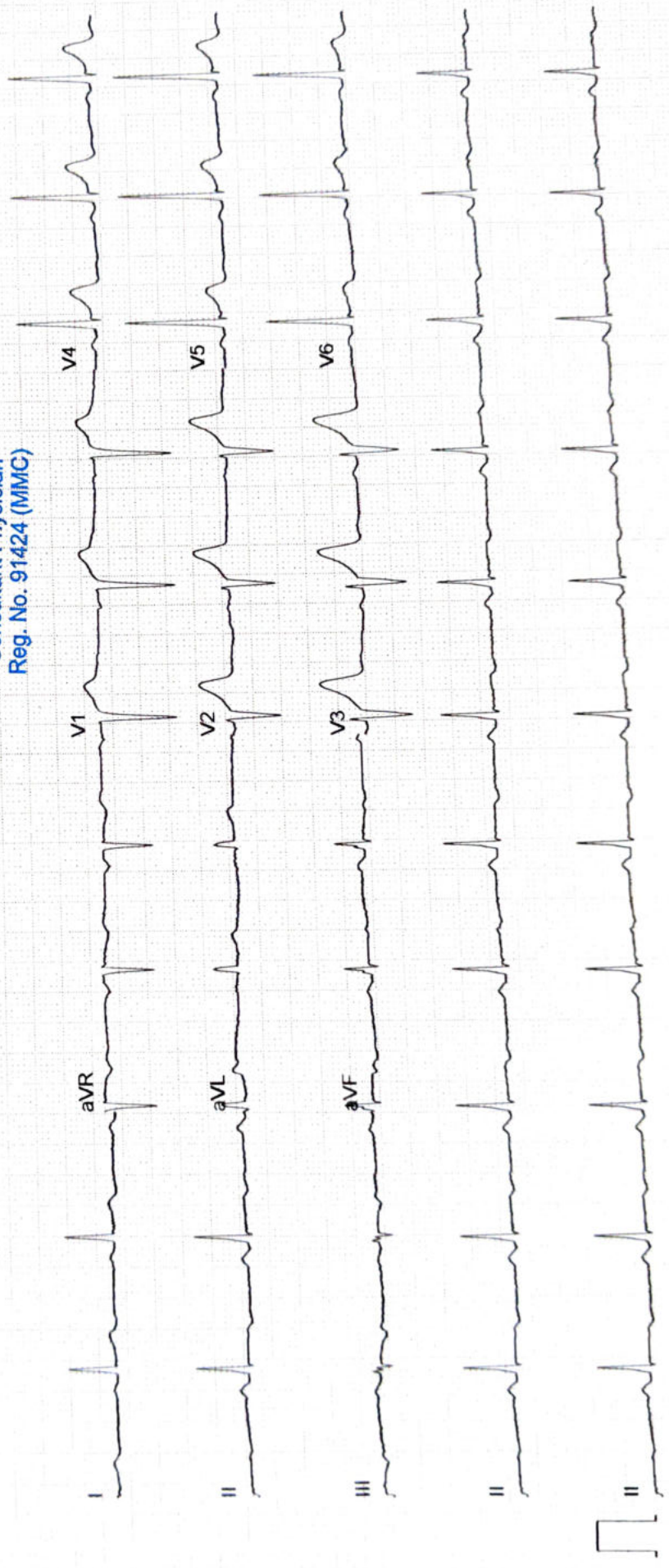
*Handwritten notes:*  
T wave low  
No pleat in fine but leads  
No normal R wave

Male

Normal sinus rhythm  
Normal ECG

QRS : 78 ms  
QT / QTcBaz : 346 / 370 ms  
PR : 150 ms  
P : 102 ms  
RR / PP : 872 / 869 ms  
P / QRS / T : 61 / 27 / 7 degrees

*Signature:*  
**Dr. Mahesh V. Padsalge**  
MD. (Medicine)  
Consultant Physician  
Reg. No. 91424 (MMC)



Unconfirmed  
4x2.5x3\_25\_R2

1/1

25 mm/s 10 mm/mV

ADS 0.56-40 Hz 50 Hz

GE MAC2000 1.1 12SL™ V241

Date: 30/03/2023

**ECHO Report**

**Patient Details**

Patient ID –  
Name- SACHIN PATIL  
Age- 32 YEARS  
Gender- MALE  
Referral BY - MEDIWHEEL

Doctor In charge DR. MAHESH PADSALGE

Clinical Status of Patient -

**Finding description -**

1. Normal cardiac chambers dimensions.
2. Normal LV systolic function.
3. No RWMA.
4. All cardiac valves are structurally normal.
5. Trivial MR, Trivial PR, NO AR.
6. No PAH.
7. Normal RV systolic function.
8. No clot/vegetation/pericardial effusion.
9. No coarctation of aorta.

**Chamber Dimensions-M mode Findings**

LVID (Diastole) 35-56(mm)	- 41.00	LVID (Systole) 24-42(mm)	- 27.00
IVS (Diastole) 8-12(mm)	- 10.00	IVS (Systole) 14-42(mm)	- 13.00
LVPWT (Diastole) 6-11(mm)	- 10.00	EPSS	- 4.00
LVEF (%)	- 67%	LVFS (%)	- 33.00

LV Volume (Diastolic)(mm<sup>3</sup>)  
Meridional Wall Stress in System

LV Volume (Systolic)(mm<sup>3</sup>)  
Cubed LV Volume in Diastole (mm<sup>3</sup>)

Cubed LV+ myocardial volume (mm<sup>3</sup>)

Velocity of circumferential  
Shortening (mm)

Aortic root 22-37(mm)	- 28.00
Left Atrium Length (mm)	- 28.00
Left Atrium Volume (mm <sup>3</sup> )	
RV size	Normal
Normal	
RV volume (mm <sup>3</sup> )	
Normal	
Pericardium	Normal
Effusion	None
Resp Variation	Present
Predicted RV Systolic Pressure	

Left Atrium Width (mm)  
Left Atrium Area (mm<sup>2</sup>)  
RV Function

RA Size

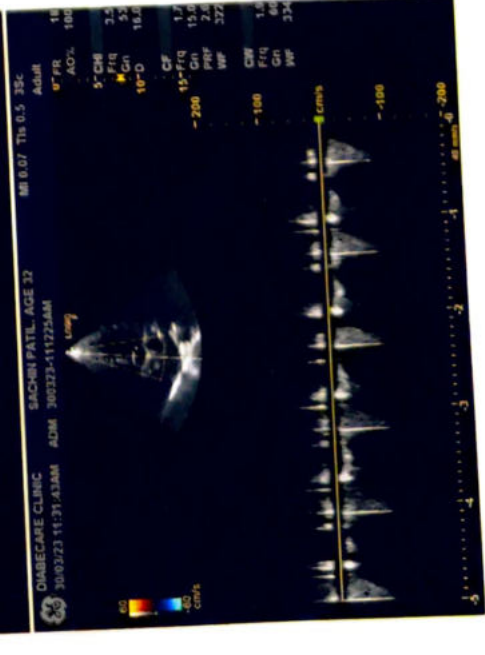
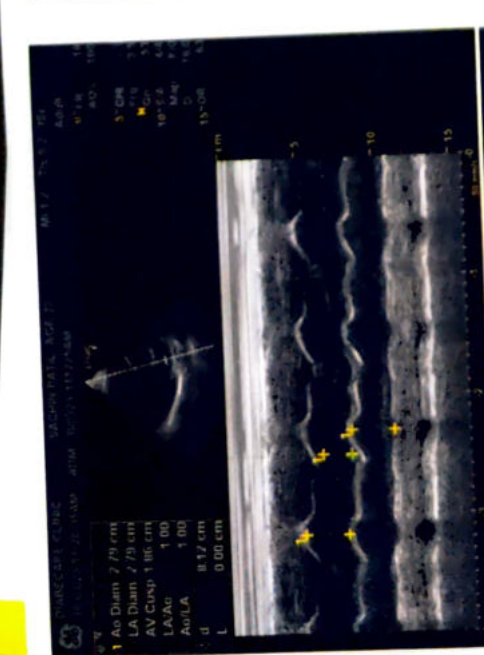
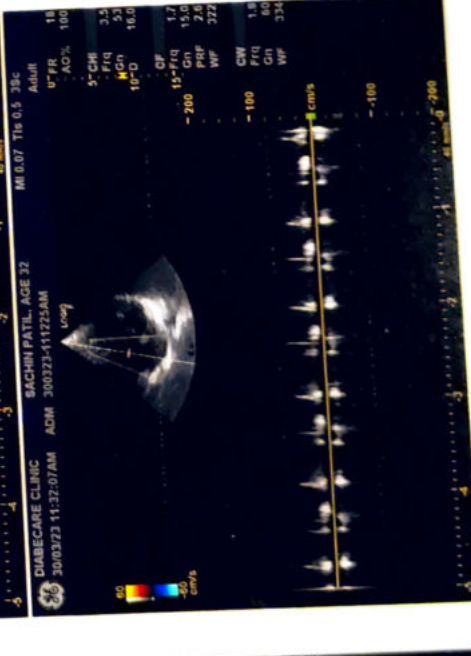
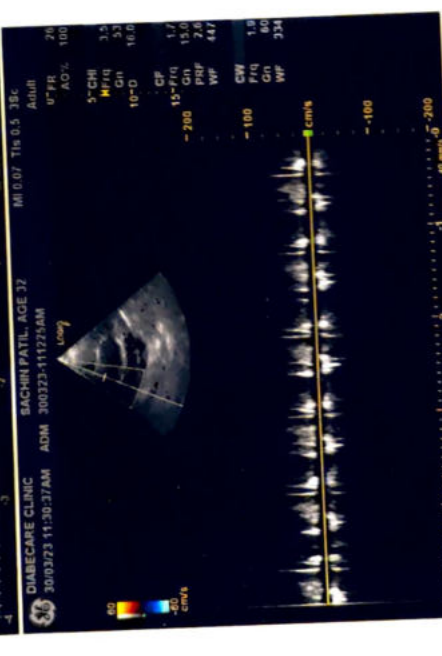
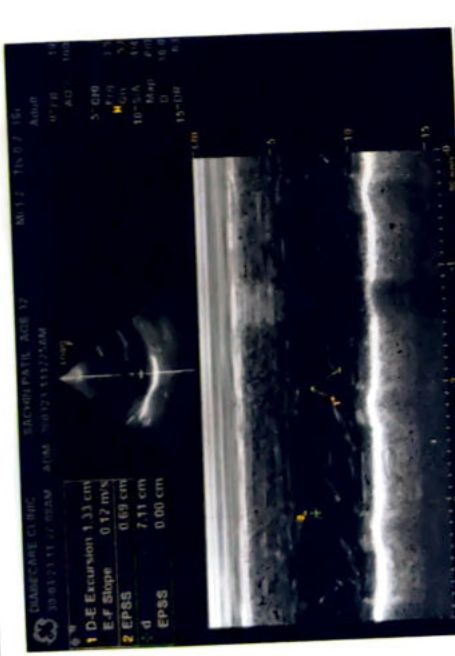
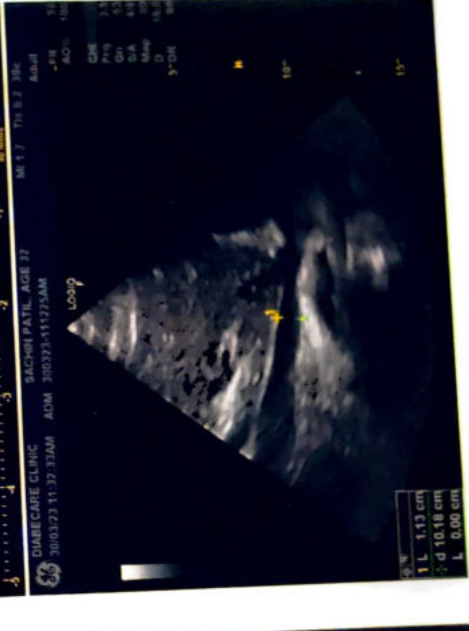
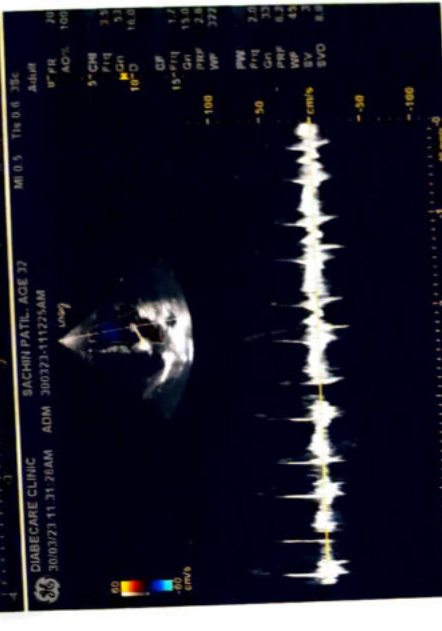
IVC Size (mm) – 11 mm Collapsible

**Doppler Findings- I**



**Dr. Mahesh Padsalge**

*Dr. Mahesh V. Padsalge*  
MD. (Medicine)  
Consultant Physician



NAME- SACHIN PATIL

DATE-30/3/2023

AGE- 32/M

**X-RAY CHEST PA**

The Soft Tissues And Bony Thorax Are Normal.

Both The Costophrenic And Cardiophrenic Angles Are Clear.

Cardiac Shape And Size Appears Normal.

The Lung Field Appears Normal.

Both The Hila Are Normal In Density And Position.

Both The Domes Of Diaphragm And Mediastinum Are Normal.

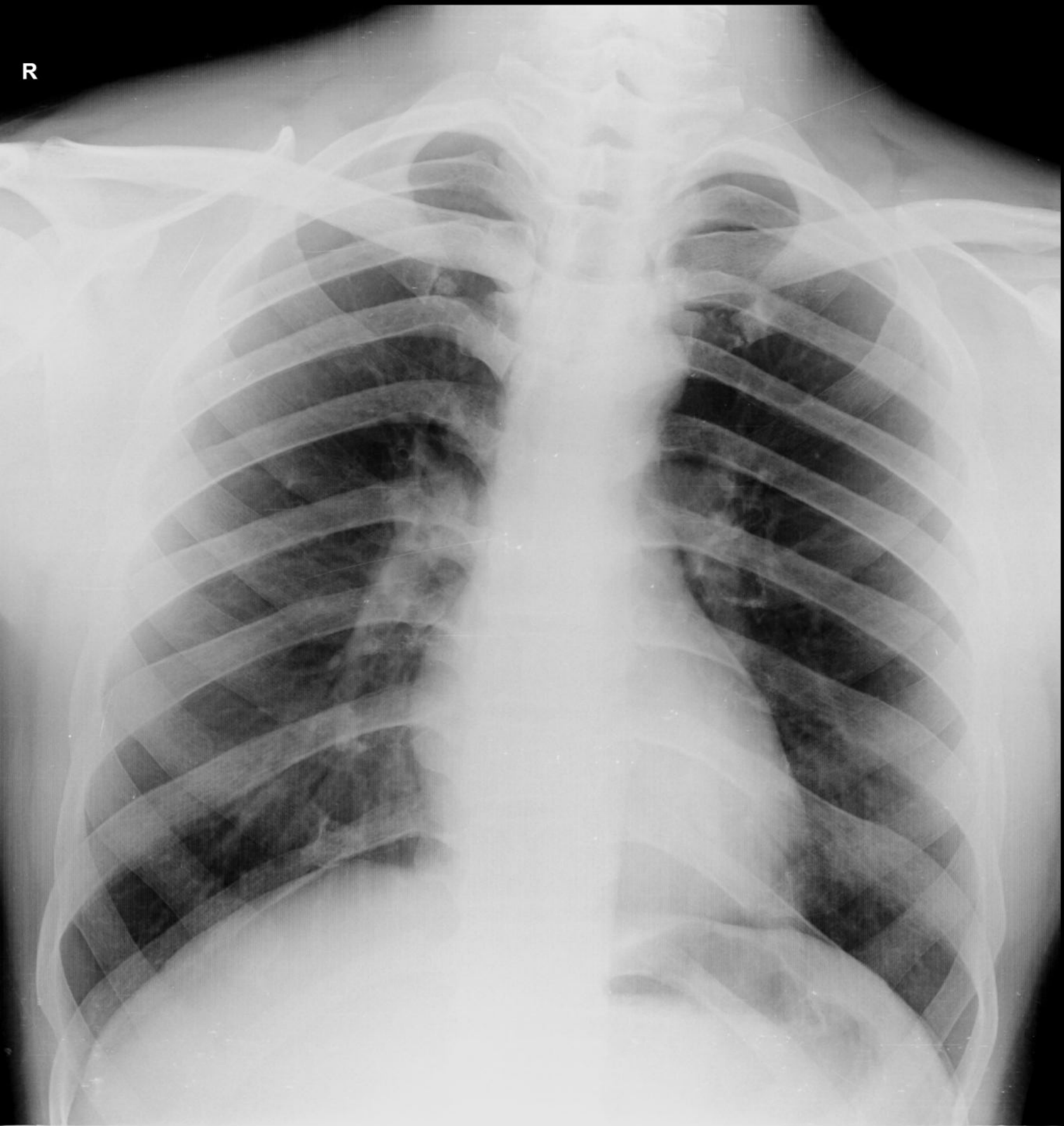
**Impression: - Normal Chest X-Ray.**

For, 

**DR.MRUDULA BABAR**  
**CONSULTANT RADIOLOGIST**

**DR.MRUDULA BABAR**  
MBBS, MD, DMRE (RADIOLOGY)  
CPS MUMBAI 2009  
REG. NO. 2005/03/2139

R



**SACHIN PATIL 32YRS      M      3/30/2023 10:51 AM**  
**OLIVE DIAGNOSTIC, SEAWOOD SEC 40**