

DR. HARIN VADODARIA MD

M.D. (Internal Medicine)

Consultant Physician

Reg No: G 3394,

Mo: 9898053714

Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Mayer B Halalwar

Date: 26/10/24

Age / Sex :-

33 / M

Weight:- 84.1kg

Brief Complaints:-

Height:- 181cm

- as a refer Myocardial Guard
- 20/9
- 20/9
- Depressive
- Hypertension
- Gastritis

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Pulse:- 84/min

BP:- 120/80

SpO2:- 97%

Drug / Food Allergy:-

Past History:-

Family History:-

Systemic Examination:-

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an

Provisional Diagnosis:-

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CIN: L85110GJ2004PLC044667

Wine A 75-100

USAC 6.2

TR 232

CH 164

May	Av
5.9	5.7

and

$U < \frac{R}{M}$ - Report on 28/10

Wsh. Report on 28/10

DR. RUJUTA SHELAT

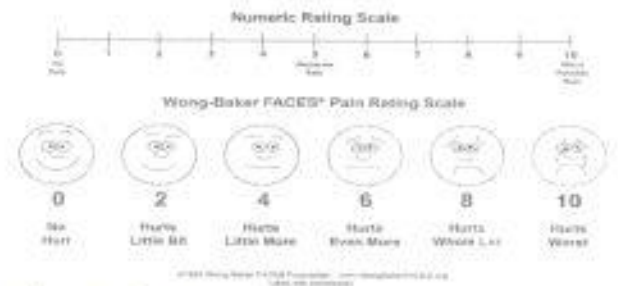
Consultant Ophthalmologists
Reg. No.: - G-48712

Name:- Mayura

Date:- 26-10-24

Chief Complaints:-

- N/A to recent eye complaints
- Came for regular checkup.



Pain Assessment:- H/o having Myofascial Cramps since 1 year.

Past History:- H/o taking coxycocaine, Pan 40mg & Casavitor 60mg.

Family History:-

Allergy:- Not

Personal History:- Habits:- Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP:- Pulse:- Temp:-

Visual Acuity:-

C_{out} P_{out}

6/6
6/6
NB

NCT < 13
12.

ON Examination

Ant. Segment

Both Eye

C/NL

PACD=ICT

C/NL

Systemic Examination:-

HT:- WT:-

IH: since 3 yrs ↓ Rx

PH Vision:-

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CIN: L85110GJ2004PLC044667

Cornea

Clear.

Clear. Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc: -

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

- Mythamoc. Cravis.

CVM

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

1 year.

Signature of the Consultant

DR. Rajiv S. Selt



Pre - op

Post - op

Health Check-up

Date : 20/10/24

Patient Reg. No. : _____

Patient Name : MAYUR HALLANKAR Age / Sex : 33 / m

Address : _____

Complaints :

Pain : _____

Bleeding gums : _____

Sensitivity : _____

Swelling : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication :

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentur es : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : _____

Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

ID:
 Name:
 Sex: M
 cm
 kg
 Birth date:
 am/kg
 years

1100 Sinus rhythm
 9110 ** normal ECG **

33 male

Mayer khui Adankur

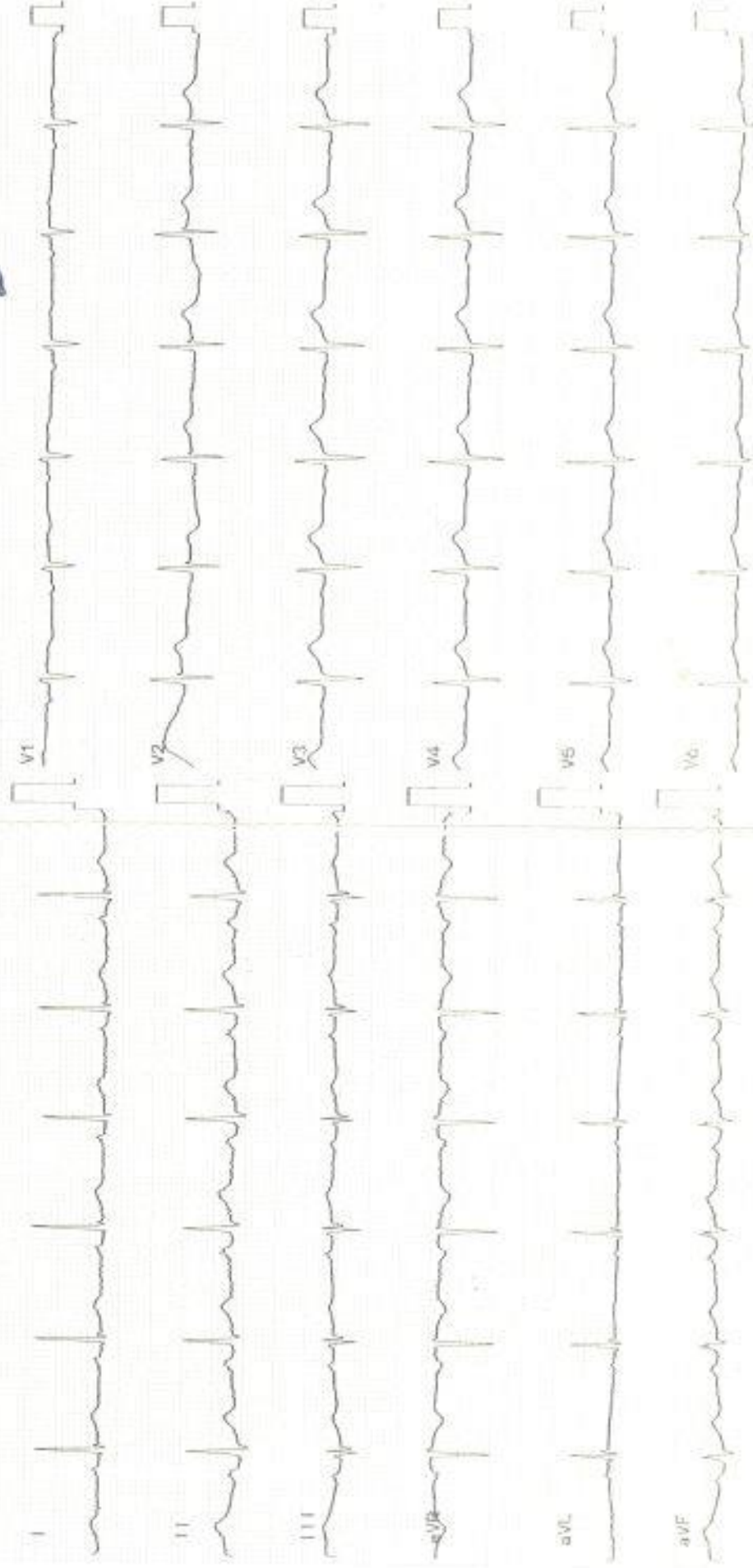
Indication:
 Symptoms:
 History:
 Vent. rate 84 bpm
 PR int 162 ms
 PRS dur 82 ms
 P/QRS/T axis 344/ 385 ms
 RV5/SV1 amp 51/ -12/ 53
 RV5+SV1 amp 1.52/ 0.81 mV
 2.33 mV

Unconfirmed Report
 Reviewed by:

Ⓞ
 26/10/24

5 mm/mV

10 mm/mV 25 mm/s Filter: H50 d 100 Hz



SHALBY HOSPITAL
NR. NAVYUG COLLAGE, RANER ROAD
SURAT

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: MAYUR HALANKAR,
Patient ID: 0348575
Height:
Weight:

DOB: 12.08.1991
Age: 33yrs
Gender: Male
Race: Asian

Study Date: 26.10.2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:23	0.80	0.00	98	120/80	
EXERCISE	STAGE 1	03:00	2.70	10.00	137	120/80	
	STAGE 2	03:00	4.00	12.00	164	130/80	
	STAGE 3	02:04	5.40	14.00	184	150/80	
RECOVERY		03:17	0.00	0.00	112	120/80	

The patient exercised according to the BRUCE for 8:04 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 82 bpm rose to a maximal heart rate of 184 bpm. This value represents 98 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

Conclusions

TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Physician



Technician

Patient ID: 0348375

26.10.2024

10:10:33

Male

Eyes: Asian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:

BRUCE: Total Exercise Time: 08:04
 Max HR: 184 bpm 98% of max predicted 187 bpm HR at rest: 82
 Max BP: 150/80 mmHg BP at rest: 120/80 Max RPP: 27600 mmHg*bpm
 Maximum Workload: 1000 METS
 Max ST: -0.55 mm, 0.00 mV/s m.L. RECOVERY 00:50
 Arrhythmia: A:7
 ST/HR Index: 0.58 μ V/bpm
Reasons for Termination: Target heart rate achieved
Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall Impression: Normal stress test.
Conclusion: TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA
 Location Number: 204

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METs)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (l/min)	ST Level (mm)	Comment
PRETEST	SUPINE	00:23	0.80	0.00	1.1	98	120/80	11760	0	-0.20	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	137	120/80	16440	0	-0.10	
	STAGE 2	03:00	4.00	12.00	7.0	164	130/80	21320	0	0.00	
	STAGE 3	02:04	5.40	14.00	10.0	184	150/80	27600	0	0.45	
RECOVERY		03:17	0.00	0.00	1.0	112	120/80	13440	0	-0.30	

MAYUR HALANKAR,

Patient ID: 0348575

26/10/2024

10:10:45

12-lead Report

PRETEST

SUPINE

00:06

SHALBY HOSPITAL

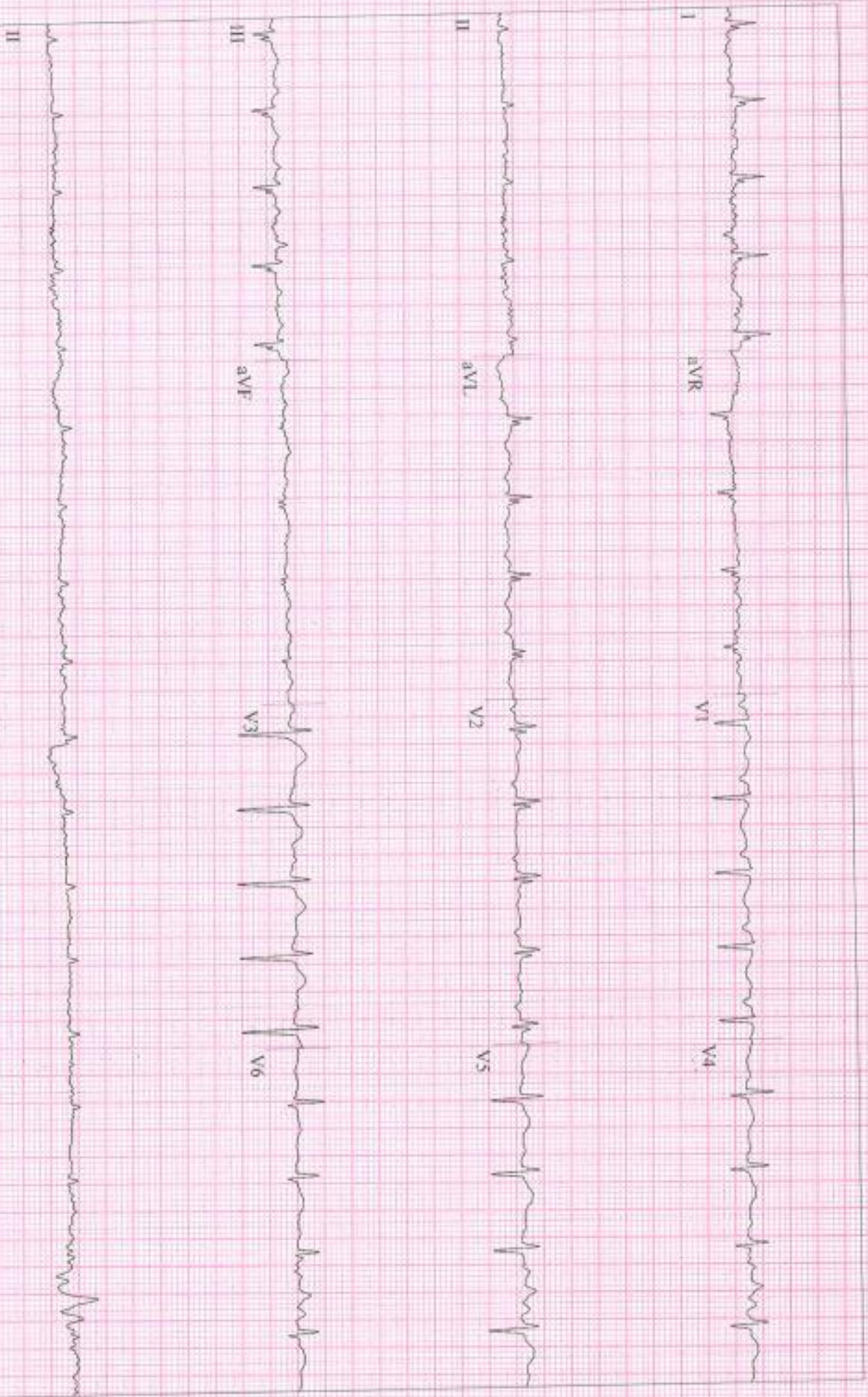
113 bpm

120/80 mmHg

HR/UCLE

0.0 km/h

0.0 %



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,V5)

Start of Test: 10:10:32

Page 1

MEYER HALANKAR,

Patient ID: 0348575

26.10.2024

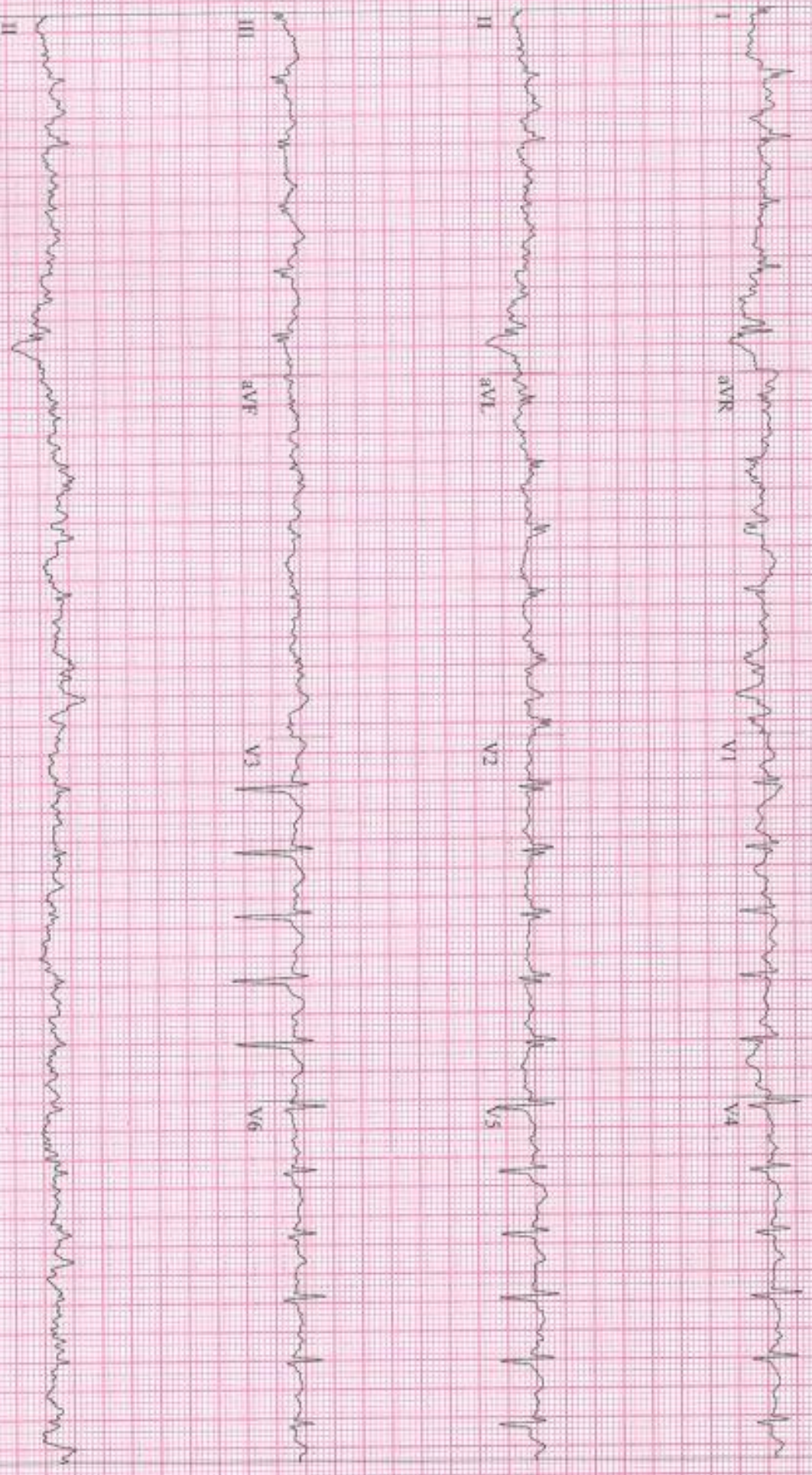
10:13:51

134 bpm
120/80 mmHg

12.1 and Report
EXERCISE
STAGE 1
02:50

BURGE
2.7 km/h
10.0%

SHREEBY HOSPITAL



160 bpm
130 R0 mmHg



184 bpm
150/80 mmHg

12-lead Report (PEAK EXERCISE)
EXERCISE STAGE: 3
08:04

HR: 140%
S: 4 kmph



146 bpm
150.80 mmHg

12-lead Report
RECOVERY
#1
00:50

BRUCE
0.0 km/h
0.0%



123 bpm

12-lead Report

RECOVERY

41

01:50

SHALBY HOSPITAL

HR/CT

0.0 km/h

0.0%



112 bpm
150/80 mmHg

12-lead Report
RECOVERY
#1
02:50

IBR/CI
0.0 km/h
0.0%



Patient Name: MAYUR BHAGWAN HALANKAR		UHID: SUR0000348575	
Age / Sex: 33 Yrs. / Male		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby Hospital	Date: 26.10.2024	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver is normal in size and appearance. It shows normal parenchymal reflectivity. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. Portal vein appears normal.

Gall bladder is well distended and appears normal. No evidence of calculi seen. Wall appears normal. No pericholecystic fluid seen. CBD appears normal.

Pancreas appears normal in size and echotexture.

Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney It shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney It shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Prostate is normal in size. It has smooth outlines and normal reflectivity.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- No any significant abnormality is seen.

Thanks for referral.

DR. NITIN DESAI
CONSULTANT RADIOLOGIST

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Certificate No.: MC-109


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PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar /	Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998	Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:40 AM
	Sample Type : Fluoride F, Urine (PP), Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	83	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric.

Urine Sugar (F)	ABSENT	mg/dL	Absent
------------------------	--------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	129	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	ABSENT	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

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

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Approved On : 26-Oct-2024 01:02 PM

Dr Pankaj AgrawalM.B., D.C.P.
Consulting Pathologist

Patient ID:	SUR0000348575	Patient Name:	MAYUR B HALANKAR
Age:	33 Years	Sex:	M
Accession Number:	10653 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	26-Oct-2024		

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

- No significant abnormality seen.

Thanks for referral.

 DR. NITIN DESAI
CONSULTANT RADIOLOGIST

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Certificate No.: MC-008


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PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar /	Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998	Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Received On : 26-Oct-2024 09:36 AM	Sample Type : EDTA Whole Blood
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	16.2	g/dL	13.0 - 17.0
RBC COUNT <i>Electrical Impedance</i>	5.90	mill/cmm	4.5 - 5.5
HCT <i>Calculated</i>	50.6	%	40 - 50
MCV <i>Calculated based on the RBC histogram</i>	85.8	fL	83 - 101
MCH <i>Calculated</i>	27.5	pg	27 - 32
MCHC <i>Calculated</i>	32.0	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	13.0	%	13.3 - 18.3

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	11280	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	50	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	45	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	1	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	4	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	251000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	8.5	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Normochromic and Normocytic.
PLATELETs	Adequate in number and normal in morphology.
MALARIAL PARASITE	Malarial parasites are not seen on smear examination.

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference Interval: Dacie and Lewis practical haematology 11th edition.

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Approved On : 26-Oct-2024 10:37 AM

Dr Pankaj Agrawal
Dr Pankaj Agrawal
 M.B., D.C.P.
 Consulting Pathologist



Certificate No.: MC-028

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PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar /	Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998	Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:36 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"A"

RH Type

POSITIVE

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Dr Pankaj AgrawalM.B., D.C.P.
Consulting Pathologist


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PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar /	Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998	Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:36 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <i>Modified Westergren Method</i>	2	mm in 1 hour	0 - 15
HBA1C HbA1c - Glycated Haemoglobin <i>Boronate Affinity Assay</i>	6.2	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5
Estimated Average Glucose (eAG) (mg/dL) <i>Calculated</i>	131	mg/dL	

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Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist

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PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar / Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998 Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years DOB : 12-Aug-1991 Received On : 26-Oct-2024 09:39 AM
Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	164	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	232	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/MgCl₂ - Enzymatic</i>	45	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	119	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	73	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	46	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	1.6		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	3.6	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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Dr Pankaj Agrawal

M.B., D.C.P.
Consulting Pathologist



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Lab ID : 410901998 Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years DOB : 12-Aug-1991 Received On : 26-Oct-2024 09:39 AM
Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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THYROID PROFILE (TFT)

Total T3 <i>Chemiluminescence immunoassay (CLIA)</i>	98	ng/dL	87 - 178
Total T4 <i>Chemiluminescence immunoassay (CLIA)</i>	10.29	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <i>Chemiluminescence immunoassay (CLIA)</i>	4.577	µIU/mL	0.38 - 5.33

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%.hence

time of the day has influence on the measured serum TSH concentrations.

TSH levels During Pregnancy :

First Trimester :0.1 to 2.5 µIU/mL Second Trimester : 0.2 to 3.0 µIU/mL Third trimester : 0.3 to 3.0 µIU/mL

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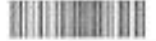
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Dr Pankaj Agrawal
Dr Pankaj Agrawal
M.B., D.C.P.
Consulting Pathologist


 Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India.
 Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email: pathology.surat@shalby.in | Web: www.shalby.org

PID : SUR0000348575 OP-004

REPORT STATUS : Interim



Patient Name : Mr Mayur Bhagwan Halankar /	Registered On : 26-Oct-2024 09:09 AM
Lab ID : 410901998	Collected On : 26-Oct-2024 08:30 AM
Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:39 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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RENAL FUNCTION TEST**NABL Accredited Parameters**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	16	mg/dL	9 - 20
UREA <i>Calculated</i>	34	mg/dL	19 - 43
Creatinine <i>Enzymatic - Creatinine aminohydrolase</i>	1.12	mg/dL	0.66 - 1.25
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	7.5	mg/dL	3.5 - 8.5
Calcium <i>Arsenazo III dye</i>	10.0	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	140	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	3.9	mmol/L	3.5 - 5.1
Chloride	104	mmol/L	98 - 107

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BIOCHEMISTRY**Phosphorus (Not in NABL Scope)**

4.1

mg/dL

2.5 - 4.5

Phosphomolybdate reduction (PMA Phenol)

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Dr Pankaj AgrawalM.B., D.C.P
Consulting PathologistRegd. Office: Shalby Limited, Opp. Karnavati Club, S.G. Road, Ahmedabad, Gujarat, India.
Tel.: 079 40203000 | Fax: 079 40203109 | Email: info.sg@shalby.org | Web: www.shalby.org

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Gender/Age : Male / 33 Years	DOB : 12-Aug-1991
Received On : 26-Oct-2024 09:47 AM	Sample Type : Urine
Ref. By : Health Check Up Shalby	

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour	Pale yellow		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Glucose	Glucose-oxidase/oxidase reaction	Negative	Negative
Bilirubin	Azo coupling Reaction with diazonium	Negative	Negative
Ketone	Sodium Nitroprusside reaction	Negative	Negative
Specific Gravity	Refractometric Method - Bromthymol blue	1.025	S.G. value 1.001 - 1.035
Blood	Peroxidase like activity of hemoglobin	Trace (+/-)	Negative
pH	Double Indicator principle	6.0	PH value 4.6 - 8.0
Protein	Protein Error of Indicator Principle	Negative	Negative
Urobilinogen	Modified Ehrlich reaction	0.2	EU/dL Upto 1.0 mg/dL (EU/dL)
Nitrite	Diazotization reaction of nitrite with an aromatic amine	Negative	Negative
Leucocyte	Leucocyte Esterase Test	Present (+++)	Negative
Microscopic Examination			
Pus cells	75-100/hpf	/hpf	0-5/hpf
Red blood cells	4-5/hpf	/hpf	NIL/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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 Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALT) <i>Multi Point Rate with P-S-P</i>	33	U/L	21 - 72
SGOT (AST) <i>Multi Point Rate with P-S-P</i>	26	U/L	17 - 59
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	64	U/L	20-50 yrs : 53 - 128 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT <i>L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic</i>	22	U/L	15 - 73
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.6	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	3.8	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.8	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.0	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphyline/Diazonium Salt</i>	0.7	mg/dL	0-1 day (premature) 1.0 - 8.0 0-1 day (full term) : 2.0 - 6.0 1-2 day (premature) : 6.0 - 12.0 1-2 day (full term) : 6.0 - 10.0 3-5 day (premature) : 10.0 - 14.0 3-5 day (full term) : 4.0 - 8.0
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometry)</i>	0.4	mg/dL	Adult : 0.2 - 1.3 Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.3	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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