



rainbow

LABORATORIES

152-R, Model Town, Panipat
Your Own Trusted Lab



Name: Mr. Vijender singh	Age: 54 Years	Sex: Male
Date of sample collection: 09-03-2024	Date of Reporting : 10-03-2024	

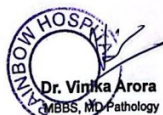
Test Name	Results	Units	Bio.Ref.Interval
PSA (PROSTATE SPECIFIC ANTIGEN), TOTAL,SERUM *	0.919	ng/ml	Conventional for all ages: <= 4.00 50-59 Years: 0-3.5

Note :

- False low/ high results may be observed in patients receiving mouse monoclonal antibodies for diagnosis/therapy or due to interference by heterophilic. Antibodies & nonspecific protein binding or on high dose biotin therapy.
- Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels. Elevated levels of PSA can also be seen in Benign Prostatic disease, Prostatitis and/or Urinary tract infection.

Dr. Abhishek Khara
MBBS, MD Pathology

Dr. Suniana Garg
MBBS, MD Microbiology



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For Home Collection (M) : 93060-38690



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NAME: Mr. Vijender singh

Sex: Male

Age : 54 Years

DATE OF REPORTING: 09-03-2024

SEROLOGY

TEST	RESULT	UNIT	NORMAL RANGE
Gamma Glutamyl TransPeptidase (Gamma GTP)	34.00	U/L	08-48.0

REFERENCE RANGE:

Age Group	Range
14-15Yrs	09-26.0
16-17 Yrs	09-27.0
18-35 Yrs	09-31.0
36-40Yrs	08-48.0
41-45 Yrs	09-49.0
46-50Yrs	10-39.0
51-54 Yrs	10-42.0
>55 Yrs	12-48.0

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Pathology Report

Lab. No.	: 25013	Date	: 09/Mar/2024
Patient Name	: Mr. VIJENDER SINGH	UHID	: 139539
Age/Gender	: 54 Years/M	Sample Date & Time	: 09/Mar/2024 09:10 OPD No. : 272
Referred By	: scf	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

HEMATOLOGY

ESR (WESTERGRENS)
mmhg

06

02-20

***** End of Report *****



Vinika

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Lab. No.	: 25013	Date	: 09/Mar/2024
Patient Name	: Mr. VIJENDER SINGH	UHID	: 139539
Age/Gender	: 54 Years/M	Sample Date & Time	: 09/Mar/2024 09:10 OPD No.: 272
Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

HEMATOLOGY

CBC (Complete Blood Count)

HAEMOGLOBIN	16.2	12.0 - 18.0 %
TLC	7990.0	4000.0 - 11000.0 /cumm
DIFFERENTIAL LEUCOCYTE COUNT (DLC)		
POLYMORPHS	66.4	40.0 - 70.0 %
LYMPHOCYTES	28.1	20.0 - 40.0 %
MONOCYTES	4.0	2.0 - 10.0 %
EOSINOPHILS	1.5	1.0 - 6.0 %
BASOPHIL	0.0	0.0 - 1.0 %
PCV	45.9	40.0 - 54.0 %
MCV	90.0	76.0 - 96.0 femtoliter
MCH	31.9	27.0 - 32.0 picogram
MCHC	35.4	30.0 - 35.0 gm/dl
RBC COUNT	5.1	4.5 - 6.5 mill/cumm
PLATELET COUNT	1.90	1.50 - 4.00 lacs/cumm

***** End of Report *****

R/S
9/03/24
RAINBOW
LABORATORIES

Vinika

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Age/Gender	: 54 Years/M	Sample Date & Time	: 09/Mar/2024 09:10 OPD No. : 272
Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

BIOCHEMISTRY

KFT

BUN	16.08	6-20 mg/dl
BLOOD UREA	38.60	15-45
CREATININE	1.14	0.7 - 1.4
URIC ACID	3.70	3.4 - 7.4
SODIUM	138.1	135 - 155
POTASSIUM	3.94	3.5 - 5.5

NOTE: KFT includes a group of blood teststo determine the functioning ofkidneys. It is advised in symptoms such as puffiness around eyes, bloody urine etc and also as a part of routine health check up

***** End of Report *****

[Handwritten Signature]
9/3/24



[Handwritten Signature]

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Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

BIOCHEMISTRY

LFT

ALBUMIN gm/dl	3.90	3.4-5.4
SERUM GLOBULIN	2.90	2.0-3.5
Total Bilirubin	0.97	0.1-1.2
Direct Bilirubin	0.32	0.0-0.3
Indirect Bilirubin	0.65	0.1-1.0
SGPT	38.60	5-40
SGOT	27.90	8-37
ALP	204.60	60-170
Total Proteins	6.80	6.0-8.3

***** End of Report *****



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Age/Gender	: 54 Years/M	Sample Date & Time	: 09/Mar/2024 09:10 OPD No. : 272:
Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

BIOCHEMISTRY

LIPID PROFILE

CHOLESTROL TOTAL	195.70	60.00 - 230.00 mg /dl
TRIGLYCERIDE	107.1	25.0 - 160.0 mg /dl
HDL CHOLESTROL	50.20	35.00 - 70.00 mg /dl
VLDL CHOLESTROL	21.42	14.00 - 34.00 mg /dl
LDL CHOLESTROL	124.08	60.00 - 160.00 mg /dl
TOTAL /HDL RATIO	3.89	4.00 - 5.00 -----
LDL/HDL RATIO	2.47	

B Sugar (F)

76.10 70.00 - 110.00 mg/dl

***** End of Report *****



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Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name	Observed Values	Biological Ref. Range	

CLINICAL

URINE Routine & Microscopy

VOLUME	30MI	
COLOUR	P.YELLOW	P.YELLOW
SPECIFIC GRAVITY	1.020	1.003-1.035
APPEARANCE	Clear	
PH	Acidic	4.7-7.5
URINE GLUCOSE	Nil	
URINE PROTEIN	Nil	
EPITHELIAL CELLS	Nil	2-3
PUS CELLS	0-1	2-3
RBCS	NIL	NIL
CAST	NIL	NIL
CRYSTAL	NIL	NIL
OTHER	NIL	NIL

***** End of Report *****



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Name: Mr. Vijender Singh

Age: 54 Years

Sex: Male

Date of Collection : 09/03/2024

Date of Reporting: 09/03/2024

Test Name	Observed Value	Normal Range
BUN	16.08	7-20mg/dl
Bun: Creatinine ratio	14.10	

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Name: Mr. Vijender Singh

Age: 54 Years

Sex: Male

Date of Collection : 09/03/2024

Date of Reporting: 09/03/2024

BIOCHEMISTRY

TEST	Value	Normal Range
Serum Albumin	3.90	3.5-5.5 g/dl
Serum Globulin	2.90	2.0-3.5 g/dl
A:G Ratio	1.34	

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Patient Name	: Mr. VIJENDER SINGH	UHID	: 139539
Age/Gender	: 54 Years/M	Sample Date & Time	: 09/Mar/2024 16:30 OPD No. : 272
Referred By	: self	Reporting Date & Time	: 09/03/24

Test Name	Observed Values	Biological Ref. Range
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BIOCHEMISTRY

B Sugar (PP)	97.30	70.00 - 140.00 mg/dl
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Urine Examination

urine for suger pp

Nil

***** End of Report *****



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Name : Mr. Vijender singh

Sex / Age : 54 Years/Male

Referred By : Self

Collection Date : 09/03/2024

Reporting Date : 09/03/2024

SEROLOGY

Test Name	Result	Unit	Reference Range
-----------	--------	------	-----------------

HbA1C

HbA1C (By Hplc Method – D10 Bio-Rad)	5.2	%	Normal 4.5 – 6.0 Good Control 6.0 – 7.0 Moderate Control 7.0 - 8.0 Poor Control 8.0 and Above.
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Instrument Used

D10 Bio-Rad (U.S.A)



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THYROID PROFILE

Name: Mr. Vijender singh	Age: 54 Years	Sex: Male
Date of sample collection: 09-03-2024	Date of Reporting : 09-03-2024	

TEST	VALUE OBSERVED	NORMAL RANGE
T3,TOTAL	1.60	0.69-2.15 ng/ml
T4,TOTAL	9.24	5.20-12.70 ug/dl
TSH	1.22	0.30 - 4.50 nIU/ml

Note:-

- In primary hypothyroidism, TSH levels are significantly raised, but in secondary & tertiary hypothyroidism TSH levels may be low.
- In primary hypothyroidism, TSH levels are increased.
- Low T3,T4 with elevated TSH indicate hypothyroidism.
- High T3,T4 with low TSH indicate hyperthyroidism.
- Kindly correlate clinically.



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Referred By	: self	Reporting Date & Time	: 09/03/24
Test Name		Observed Values	Biological Ref. Range

HEMATOLOGY

BLOOD GROUP & RH

Blood Group	B
RH Typing	NEGATIVE

Urine Examination

urine for suger fasting

Nil

***** End of Report *****



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[Redacted]

[Redacted]



ಜಿಲ್ಲಾಧಿಕಾರಿ ಕಛೇರಿ
Vijender Singh
ವಯಸ್ಸು, ದಿನಾಂಕ DOB: 18/01/1970
ಲಿಂಗ / GENDER: MALE





5493 8826 6738

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[Signature]

[Redacted]

[Redacted]



ಆಧಾರ್

Address:

S/O: Amar Singh, #4, sneha complex, bhharathi nagar, Hunasamaranahalli, Hosahalli, Bangalore, Karnataka - 562157





1800 300 1947



help@uidai.gov.in



www.uidai.gov.in



P.O. Box No.1947, Bangalore-560 001

DENTAL STUDIO

194-L, Model Town, Panipat 132 103 (Haryana)

Ph. : 0180 - 4017707
89302-27707



Here Smile is Customized

Dr. Mansi Chawla
BDS. MIDA
Smile Designer
Ex. Deen Dayal Upadhyay (Delhi)

Timing : Morning : 10:00 AM to 2:00 PM
Evening : 4:00 PM to 7:30 PM

Dedicated Dental Team

Dr. Apoorva Bowry

BDS. MDS, MIDA
Conservative Dentistry & Endodontics

Dr. S.K. Yadav

BDS. MDS
Consultant Orthodontist
Wires & Braces Specialist

Dr. Babita Ahlawat

BDS. MDS
Pedodontics & Preventive Dentistry

Dr. Sakshi Goel

BDS. MDS
Consultant Periodontist
Gums & Pyorrhea Specialist

Facilities Available

- Root Canal Treatment
रूट कॅनल ट्रीटमेंट
- Dental Implants
डेंटल इम्प्लांट
- Tooth Whitening
दांतों की चाइटनिंग
- Fixed & Removable Denture
फिक्सड और हटाने योग्य डेन्चर
- Crown & Bridges
क्राउन और ब्रिज
- Wires & Braces
टेढ़े-मेढ़े दांतों का इलाज
- Gums Treatment
मसूड़ों की समस्या
- Ultrasonic Scaling
दांतों की स्केलिंग
- Tooth Colored Filling
दांतों की कलर फिलिंग
- Painless Dentistry for Children
बच्चों के लिए दर्द रहित दंत
चिकित्सा

Patient's Name Vijendra Singh Age/Sex 54/M Date 9/3/24
H/o Allergy/ Disease

Cyc Patient has come for a routine dental checkup.

O/E
① Caries $\frac{7}{7}$
② Stains +.

Adv.
① Restoration of $\frac{7}{7}$
② Oral prophylaxis.

Apoorva

Not for Medical Legal use
Please take prior appointment on Phone

GUPTA EYE HOSPITAL LLP

LASIK LASER CENTRE

DR. ISHA'S APEX PATH LAB

AN ISO 9001:2015 CERTIFIED HOSPITAL & LAB

332-R, MODEL TOWN, NEAR LAL TANKI MARKET, PANIPAT-132 103 (HARYANA)



Dr. B. K. Gupta

M.B.B.S., M.S. (Ophthalm), F.I.A.M.S.
Ex. Resl. P.G.I. Chandigarh
Phaco, Glaucoma & Squint Surgeon
97281-00332

Dr. Kanav Gupta

M.B.B.S., M.S. (Ophthalm), F.V.R.
Fellow Vitreo Retina (Rajiv Gandhi Univ.)
Ex. VR Surgeon, Centre for Sight, Delhi
Phaco, Retina & LASIK Surgeon
97285-00332

Prof. (Dr.) Jaha Gupta

M.B.B.S., M.D. (Pathology)
M.U.H.S., Hashik
Consultation: 5-8 pm
0180-4011150

EYE SERVICES

Cataract :

- Phaco by Centurion Vision System
- सर्वेष्ट कर्णिके का अस्त्रण

LASIK Laser (Zeiss Germany) :

- चक्षु अस्त्रण का सर्वेष्ट

Retina Clinic :

- FFA/OCT
- OCT Angio - Dyeless, Painless, Injectionless
- Angiography of Eye
- ROP Screening
- Green Laser / रंज का अस्त्रण

Cornea Clinic :

- OCT/Pentacam/Topography - For High Resolution Imaging of Complete Cornea
- C3R - Corneal Collagen Crosslinking for Keratoconus

Dry Eye Clinic :

- IDRA - For Dry Eye Diagnosis & Evaluation
- IRPL - Pulse Laser Therapy for Dry Eye

Glaucoma Clinic :

- Perimetry, OCT-RNFL
- HCT, GAT

PATH LAB SERVICES

- Fully Computerised
- Hematology
- Clinical Pathology
- Biopsy
- Cytology
- Biochemistry

Preventive Care : Save Eyes from Dust

Diet Advised : Normal / Diabetic

Pain Score :

HOSPITAL TIMINGS

9.30 am to 1.00 pm, 5.00 pm to 7.00 pm
Sunday : 10.00 am to 12.00 noon

For Appointment : 97285-00332 Find us on Google : Gupta Eye Hospital & Apex Path Lab www.guptaeyehospital.com

This is Professional Opinion only Not valid for Medico Legal Purpose On Panel of Govt. & Private Corporates, Major TPAs & Insurance Companies

Name	VIJENDER SINGH	UID	9341181157	OPD Regn. No.	191423
Age/Sex	54 M	Ref. By		Dated	09-Mar-24 at 11:48
Category	General			Amount Recd	0.00

C/o & Initial Assessment Diagnosis :
ROUTINE CHECK UP RE :

VA RE : 6/6 WITH PDG

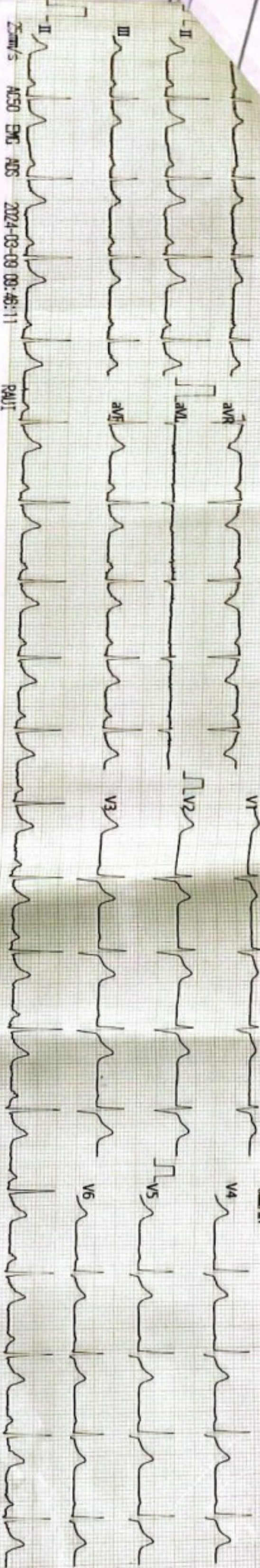
VA LE : 6/6 WITH PDG

5/5

1 E/D O SURF Sol. Hydrochlorate 3 times a day X 5 Days

Revisit after 5 days on 14-Mar-2024 or before, if any problem.

...Dr. Kanav Gupta
(Regn. No. HN 10875)



25mm/s ACS0 ENG A06 2024-03-09 09:46:11 PAUT

Vent. Rate(BPM) : 77

PR Int.(ms) : 144

P/QRS/T Int.(ms) : 98 85 111

QT/QTc Int.(ms) : 360 413

P/QRS/T Axis(Deg.) : 71 74 68

RV1/SV5 Amp.(mV) : 0.50 0.48

RV5/SV1 Amp.(mV) : 1.79 0.63

V2.21 Technician :

<ECG Analysis Result>

800 Normal Sinus Rhythm

*** Normal ECG ***



Note: Unconfirmed Report Need to Review.

<VIJENDERSINGH > 929900000012 M 54Y 168/64 cm/Kg 125/70 mmHg

CARDIAC

9/3/24

- HR - 77/min
- normal sinus rhythm



FACILITIES AVAILABLE

- General Medicine
- Gynecology
- Laparoscopic Surgery
- New Born ICU
- Diagnostics
- General Surgery
- Obstetrics
- General Pediatrics
- Pediatric Surgery
- Infertility

DR. SAHIL GARG
MD RADIOLOGIST
PG DIP MSK ULTRASOUND (SPAIN)

DR. POOJA GARG
MD RADIOLOGIST
FELLOWSHIP IN WOMEN'S IMAGING

DR. VENUS GARG
MD RADIOLOGIST
PG DIP IN MSK ULTRASOUND (SPAIN)

NAME: VIJENDER

AGE/SEX: 54 Y/M

DATE: 09.03.2024

EXAM: X-RAY CHEST PA

Results:

The trachea is central.

Visualised lungs fields are clear. They are not hyperinflated.

Pulmonary vascularity is normal.

Pleural spaces are clear. Bilateral costophrenic angles are clear.

Cardiothoracic ratio is within normal limits.

Heart borders are clear. The aorta appears normal.

Mediastinum is central and not widened.

Bilateral hila are normal in size, shape and position.

Both the hemidiaphragms are normal in appearance and position.

No evidence of any pneumoperitoneum.

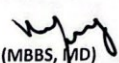
Imaged skeleton is intact with no fractures or destructive bony lesions visible.

Visible soft tissues are unremarkable.

IMPRESSION:

- No significant abnormality detected.

Advised: Clinical correlation


Dr. Venus Garg (MBBS, MD)
PG DIP MSK Ultrasound UCAM (SPAIN)
Consultant Radiologist
HMC No. HN22264

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CT | ULTRASOUND | DOPPLER | X RAY | MAMMOGRAPHY | OPG | CLINICAL PATHOLOGY

Scanned with CamScanner

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PG DIP MSK ULTRASOUND (SPAIN)**DR. POOJA GARG**
MD RADIOLOGIST
FELLOWSHIP IN WOMEN'S IMAGING**DR. VENUS GARG**
MD RADIOLOGIST
PG DIP IN MSK ULTRASOUND (SPAIN)**NAME: VIJENDER****AGE/SEX: 54 Y/M****DATE: 09.03.2024****EXAM: ULTRASOUND WHOLE ABDOMEN**

LIVER: There is a slight and diffuse increase of parenchymal echogenicity with normal visualization of the diaphragm and of the portal vein wall- suggestive of grade-I fatty infiltration.

Normal in size (10.6 cm) and outline.

Margins are smooth and regular.

No focal intra-hepatic space occupying lesion detected.

Intra-hepatic biliary radicals are not dilated.

Intrahepatic vascular patterns are within normal limits.

Portal vein is normal in calibre.

GALL BLADDER: Well distended. Wall thickness is within normal limits.

No luminal debris, calculus and mass seen.

Pericholecystic fat planes are normal with no sign of pericholecystic fluid.

Common bile duct is normal in calibre.

PANCREAS: The head and body of the pancreas are normal in size, outline and echopattern. No focal space occupying lesion seen. No definitive peripancreatic collection noted. Main pancreatic duct not dilated.

SPLEEN: Normal in size (11.5 cm), outline and echotexture. No space occupying lesion is noted. Splenic hilum appears normal.

KIDNEYS: Both the kidneys are normal in size, shape, outline and location.

Cortico- medullary differentiation is maintained. It shows normal cortical echogenicity.

Parenchymal thickness is normal.

Central echogenic complexes have a normal appearance with no evidence of any hydronephrosis.

No calculus seen.

Right kidney- 9.5 x 3.4 cm PT = 15 mm.

Left kidney- 10.7 x 4.5 cm. PT = 18 mm. An anechoic cortical cystic lesion of size 15 x 10 mm is noted at the junction of upper and interpolar region of the left kidney.

URETERS: No evidence of any obvious dilatation.

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URINARY BLADDER: Well distended.

Wall thickness is normal.

No evidence of any trabeculation, sacculation or diverticulation seen.

No intravesical debris, calculus or mass noted.

PROSTATE: Normal in size (23 cc in volume), outline and parenchymal echogenicity. No focal space occupying lesion seen.

RIGHT ILIAC FOSSA: No focal fluid collection or mass lesion in RIF. No obvious inflamed mesentery or bowel wall thickening seen. No probe tenderness noted. Appendix could not be visualized at the time of scan. No evidence of any significant free fluid or lymphadenopathy seen.

IMPRESSION:

- Grade-I fatty liver
- Left renal simple cortical cyst

Advised clinical correlation.

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