



SJM SUPER SPECIALITY HOSPITAL, & IVF CENTRE



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

13/03/2023

90 BOP

(IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst. & Gynae)
Dr. Neha Zutshi (Embryologist)

OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst. & Gynae)
Dr. Smritee Virmani (Endoscopy)
MBBS, DGO, DNB, ICOG (Obst. & Gynae)
Dr. Vinod Bhat
M.B.B.S, MD (General Medicine)
Dr. Vineet Gupta, MS (ENT)
Dr. Naveen Gupta, MS (EYE)
Dr. Ashutosh Singh, MS (Urology)
Dr. Rahul Kaul (Spine Surgeon)
MBBS, MS, (Orthopaedic)
Dr. Raj Ganjoo MD (Psychiatric)
Dr. Akash Mishra (Neuro Surgeon)
Dr. Sanjay Sharma (Cardiologist)
Dr. S.K. Pandita, MS (Surgeon)
Dr. B.P. Gupta, MS (Surgeon)
Dr. Jaisika Rajpal
(MDS), (Periodontist & Implantologist)
Dr. Akash Arora
(MDS), Maxillofacial Surgeon
Dr. Deepa Maheshwari
M.B.B.S., MD, FRM, (IVF Specialist)
Dr. Vivek Kumar Gupta
MBBS, MS (General Surgeon)
M.Ch. (Plastic Surgery)
Dr. Anand Kumar
MBBS, MD (Paediatrics)
Dr. Amit kumar Kothari
MBBS, MD (Medicine)
Dr. Amit Aggarwal
M.B.B.S., M.S. Ortho.

Facilities:

100 Beds. Private & Public wards
Inpatient & Outpatient - (OPD)Facilities
24-Hour ambulance and emergency
3 Operation theatres
Laparoscopic & Conventional Surgery
In vitro fertilization centre (IVF)
Intensive Care Unit. (ICU)
Neonatal ICUs (NICU)
Dental Clinic
Computerized pathology lab
Digital X-ray and ultrasound
Physiotherapy facilities
24-Hour Pharmacy
Cafeteria & Kitchen

Mr Shivam Varma

- Tab. Stanlip 145 ① — ①
SYP utilisor 00 - 00
↓ in 1 glassful of water
- Plenty oral Fluids
↑
Wash

CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

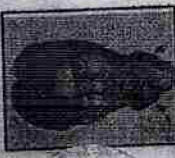
Panels: Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parakh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd.(Corporate)

wide - 79cm
 wide - 178cm
 B.P - 115/76
 PHS - 80
 Sp02 - 98.1

Jhiman
 988MM22055

TSH/0202796
 तिथि नं. : 4748
 गाँव/शहर : सराव फाँरा नरु 337गाँव/शहर
 पंचायत/संघ : नरुगाँव
 जिला : नरुगाँव
 तालुका : नरुगाँव
 जिला : नरुगाँव
 पिन - 244713
 Address I.No. : 4748
 Street/Village : Van Vikar Vanda Jhangar Asp Nagar
 Village/Town : Kashiwar
 Panchayat : Kashiwar
 Police Station : Kashiwar
 Post Office : Kashiwar
 Taluk : Kashiwar
 District : Ludhiana Singh Nagar
 Pin - 244713
 Date : 14/Sept/2013
 63-वर्गीय मतदाता सूची में नाम दर्ज
 अभ्यर्थी के नाम में अग्रणी
 Officer for P.S. Kashiwar Constituency
 71/301
 Facsimile Signature of the Electoral Registration Officer for P.S. Kashiwar Constituency

भारत निर्वाचन आयोग
 E.E. नं. 393
 ELECTION COMMISSION OF INDIA
 IDENTITY CARD
 46LE202796
 Dupl
 निवाचक का नाम : शिवम वर्मा
 Elector's Name : Shivam Verma
 पिता का नाम : विनोद कुमार वर्मा
 Father's Name : Vinod Kumar Verma
 लिंग / Sex : पुरुष / Male
 1.1.2013 को आयु : 19
 Vgc ason1.1.2013



Male

Phone Number - 8077451302

QRS : 90 ms
QT / QTcBaz : 398 / 423 ms
PR : 124 ms
P : 100 ms

Normal sinus rhythm
Early repolarization
Normal ECG

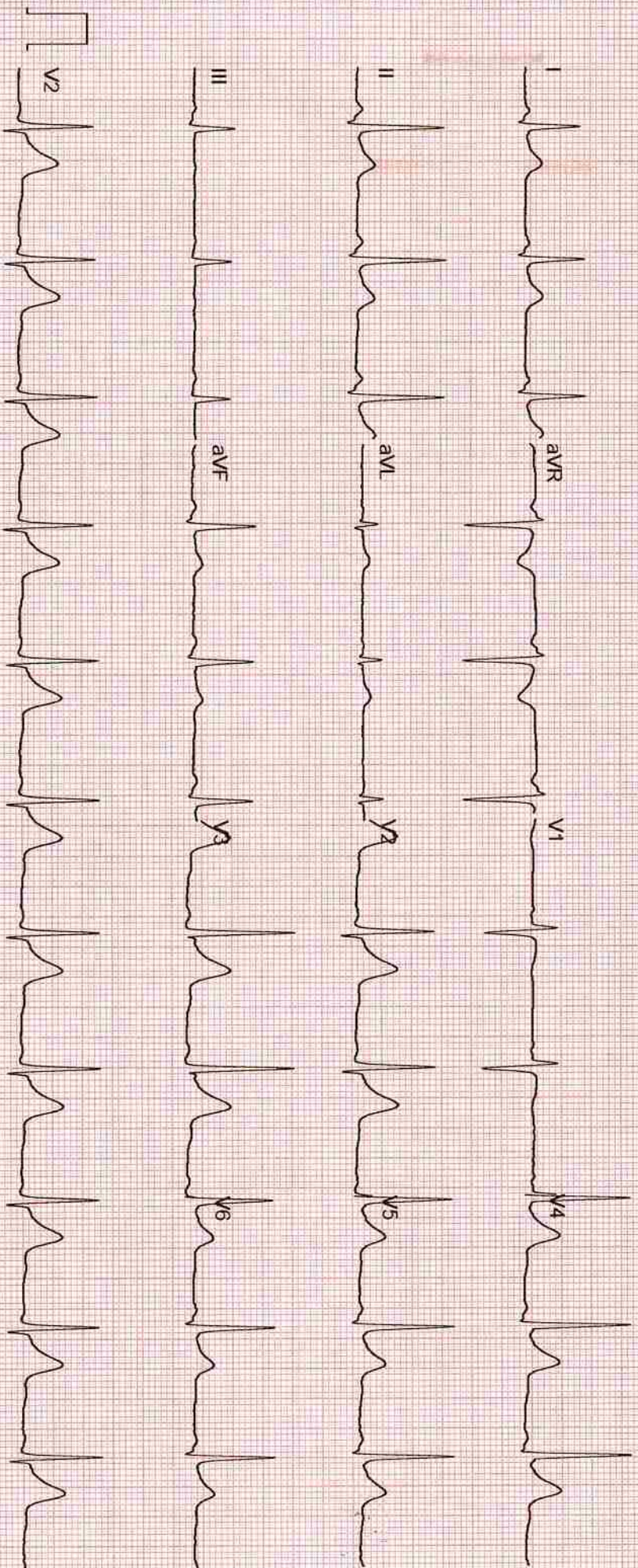
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

RR / PP : 886 / 882 ms
P / QRS / T : 54 / 54 / 36 degrees

J-M-N

886



PATIENT SUMMARY REPORT

SJM HOSPITAL AND IVF CENTRE

ID : 167
NAME : MR SHIVAM VERMA
AGE / SEX : 30 / MALE

HEIGHT (cm) : 178
WEIGHT (kg) : 79
PROTOCOL : BRUCE

REF. BY : DR. VIOND BHAT
DONE BY :
TECHNICIAN :

CASE HISTORY

MEDICATION

OBJECT OF TEST

RISK FACTOR

ACTIVITY

OTHER INVESTIGATION

REASON FOR TERMINATION

EXERCISE TOLERANCE

EXERCISE INDUCED ARRHYTHMIAS

HAEMO RESPONSE

CHRONO RESPONSE

FINAL IMPRESSION

EXTRA COMMENTS

: Routine Check Up.

: Hypertension.

: Moderate Active.

: X - Ray.

: Max HR.

: Moderate (< 10 METS).

:

: Normal.

: Negative.

: Stress Test is Negative for Inducible Ischemia.

:

Handwritten note: Negative for inducible Ischemia

Handwritten signature: (DR)

Confirmed By : _____

Signature

167 Tested On 11-03-2023, 11:05:23

BPL DYNATRAC

Page No.: 1

PATIENT ID : 167
 PATIENT NAME : MR SHIVAM VERMA
 PROTOCOL : BRUCE

DR. VIJOND BHAT
 Tested On 11-03-2023, 11:05:23
 BPL DYNATRAC

Total METS achieved 13.00
 Maximum HR achieved 184 bpm, 96 % of 190 bpm

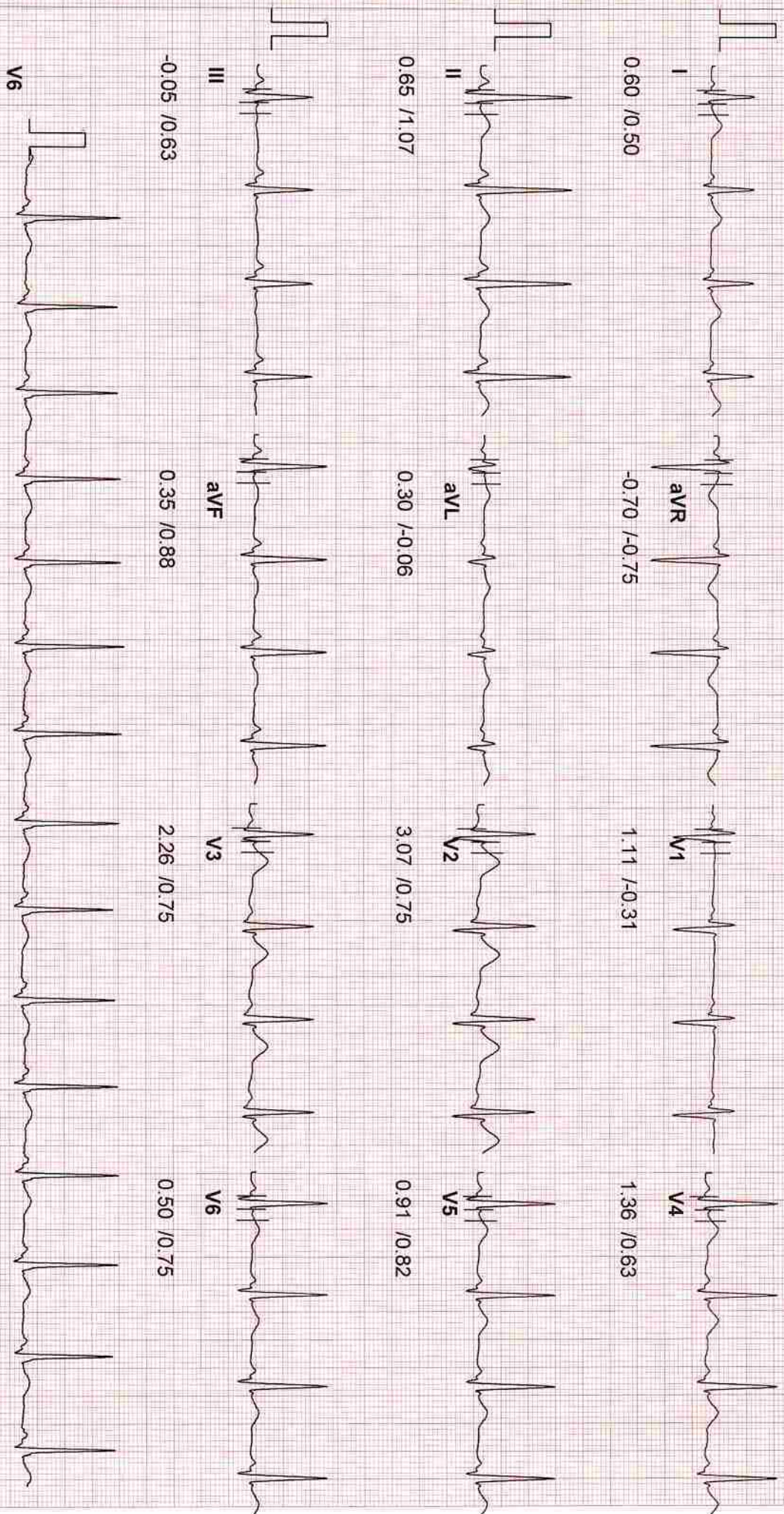
Maximum ST depression (II) -2.67 mm
 Total Exercise time 10:32 (min:sec)

| Stage Name | Time (min:sec) | Speed (Kmph) | Grade (%) | HR (bpm) | BP (mmHg) | R.P.P | METS | STLevel (II) | Stage Comments |
|-------------------|----------------|--------------|-----------|----------|-----------|-------|-------|--------------|----------------|
| Pre-Test | 00:35 | 0.00 | 0.00 | 95 | 115 / 76 | 10925 | 0.00 | 0.55 | |
| Supine | 00:26 | 0.00 | 0.00 | 90 | 115 / 76 | 10350 | 0.00 | 0.65 | |
| Hyper Ventilation | 00:04 | 0.00 | 0.00 | 90 | 115 / 76 | 10350 | 0.00 | 0.60 | |
| Wait For Exercise | 00:10 | 0.00 | 0.00 | 91 | 115 / 76 | 10465 | 0.00 | 0.55 | |
| Exercise 1 | 02:55 | 2.70 | 10.00 | 108 | 120 / 80 | 12960 | 5.10 | 0.65 | |
| Exercise 2 | 02:59 | 4.00 | 12.00 | 126 | 130 / 90 | 16380 | 7.10 | 0.40 | |
| Exercise 3 | 02:56 | 5.50 | 14.00 | 153 | 140 / 100 | 21420 | 10.00 | -0.60 | |
| Peak Exercise | 01:29 | 6.80 | 16.00 | 176 | 150 / 100 | 26400 | 13.00 | -2.67 | |
| Recovery 1 | 00:56 | 0.00 | 0.00 | 184 | 115 / 76 | 21160 | 0.00 | -1.01 | |
| Recovery 2 | 01:55 | 0.00 | 0.00 | 136 | 115 / 76 | 15640 | 0.00 | 1.16 | |
| Recovery 3 | 02:53 | 0.00 | 0.00 | 121 | 115 / 76 | 13915 | 0.00 | 0.60 | |
| Recovery 4 | 03:10 | 0.00 | 0.00 | 125 | 115 / 76 | 14375 | 0.00 | 0.86 | |

ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 115/76 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Supine
 RECORDED TIME : 01:05 (min:sec)
 STAGE DURATION : 00:30 (min:sec)
 HR : 85 bpm (44%)
 PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METs : 0.00

DR. VIJND BHAT
 Tested On : 11-03-2023, 11
 BPL DYNATRAC



167

20 Hz Filter

10mm/mV, 25mm/Sec

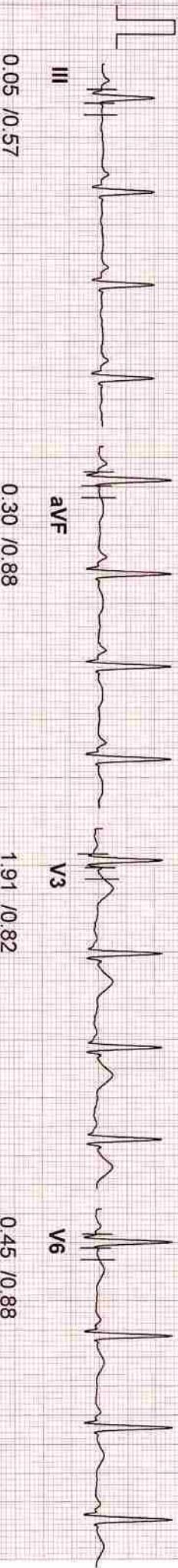
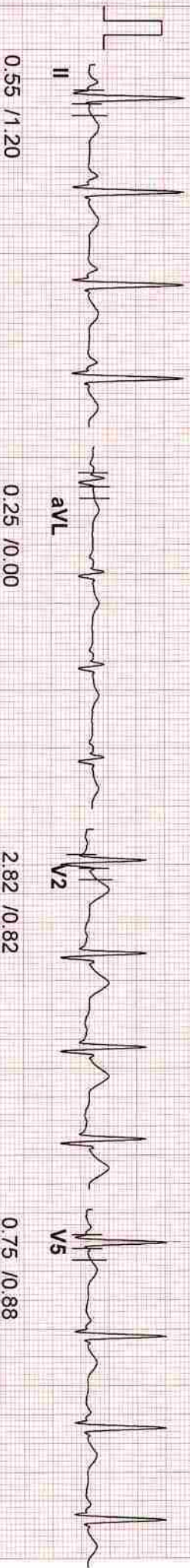
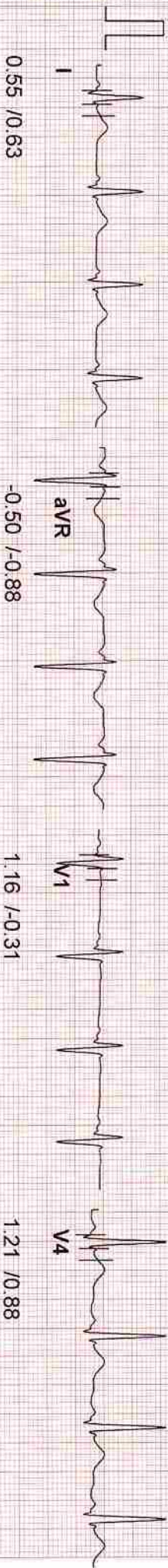
ID : 167
NAME : MR SHIVAM VERMA
AGE : 30
BP : 115/76 mmHg

STAGE : Pre-Test
RECORDED TIME : 00:35 (min:sec)
STAGE DURATION : 00:35 (min:sec)
HR : 95 bpm (50%)

PROTOCOL : BRUCE
SPEED : 0.0 kmph
GRADE : 0.00 %
METS : 0.00

DR. VIJOND BHAT
Tested On : 11-03-2023, 11
BPL DYNATRAC

ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

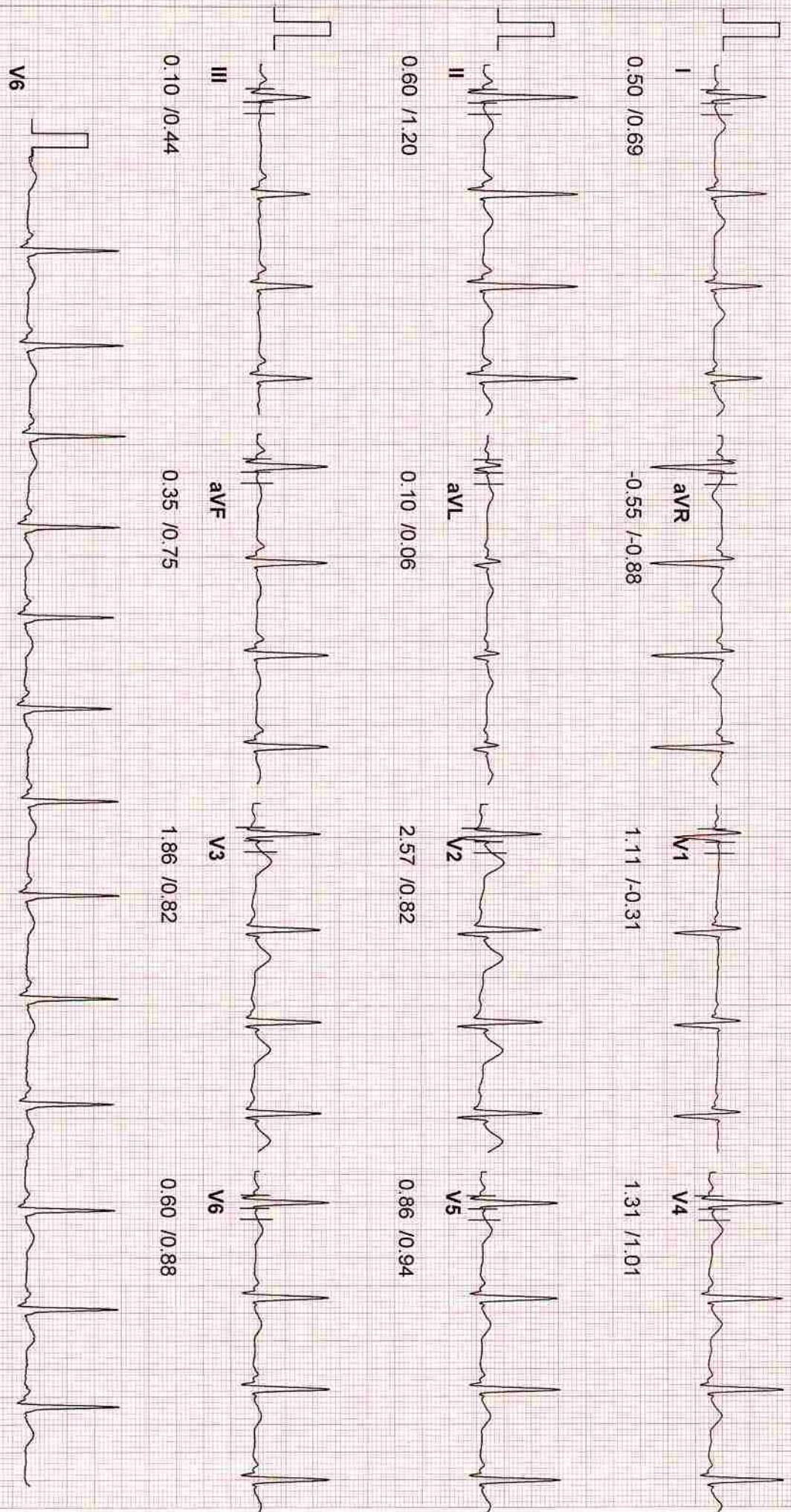


ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 115/76 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Hyper Ventilation
 RECORDED TIME : 01:16 (min:sec)
 STAGE DURATION : 00:11 (min:sec)
 HR : 90 bpm (47%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJOND BHAT
 Tested On 11-03-2023, 11
 BPL DYNATRAC



167

20 Hz Filter

10mm/mV 25mm/Sec

ID : 167
NAME : MR SHIVAM VERMA
AGE : 30
BP : 115/76 mmHg

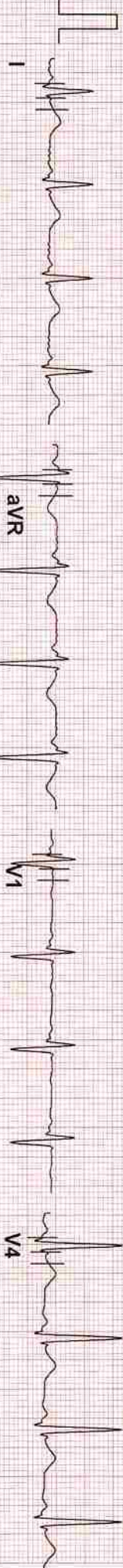
STAGE :
RECORDED TIME :
STAGE DURATION :
HR : 88 bpm (46%)

Wait For Exercise :
01:29 (min:sec)
00:13 (min:sec)
88 bpm (46%)

PROTOCOL : BRUCE
SPEED : 0.0 kmph
GRADE : 0.00 %
METS : 0.00

DR. VIJND BHAT
Tested On : 11-03-2023, 11
BPL DYNATRAC

ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J



0.65 /0.57

avR

-0.60 /-0.82

V1

0.91 /-0.31

V4

1.11 /0.69



0.55 /1.13

avL

0.35 /0.00

V2

2.47 /0.50

V5

0.75 /0.82



-0.15 /0.38

avF

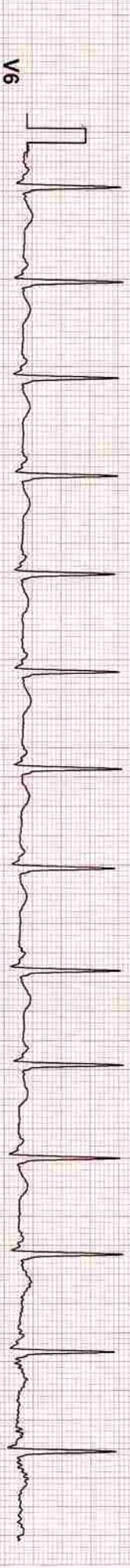
0.20 /0.69

V3

1.71 /0.57

V6

0.35 /0.63

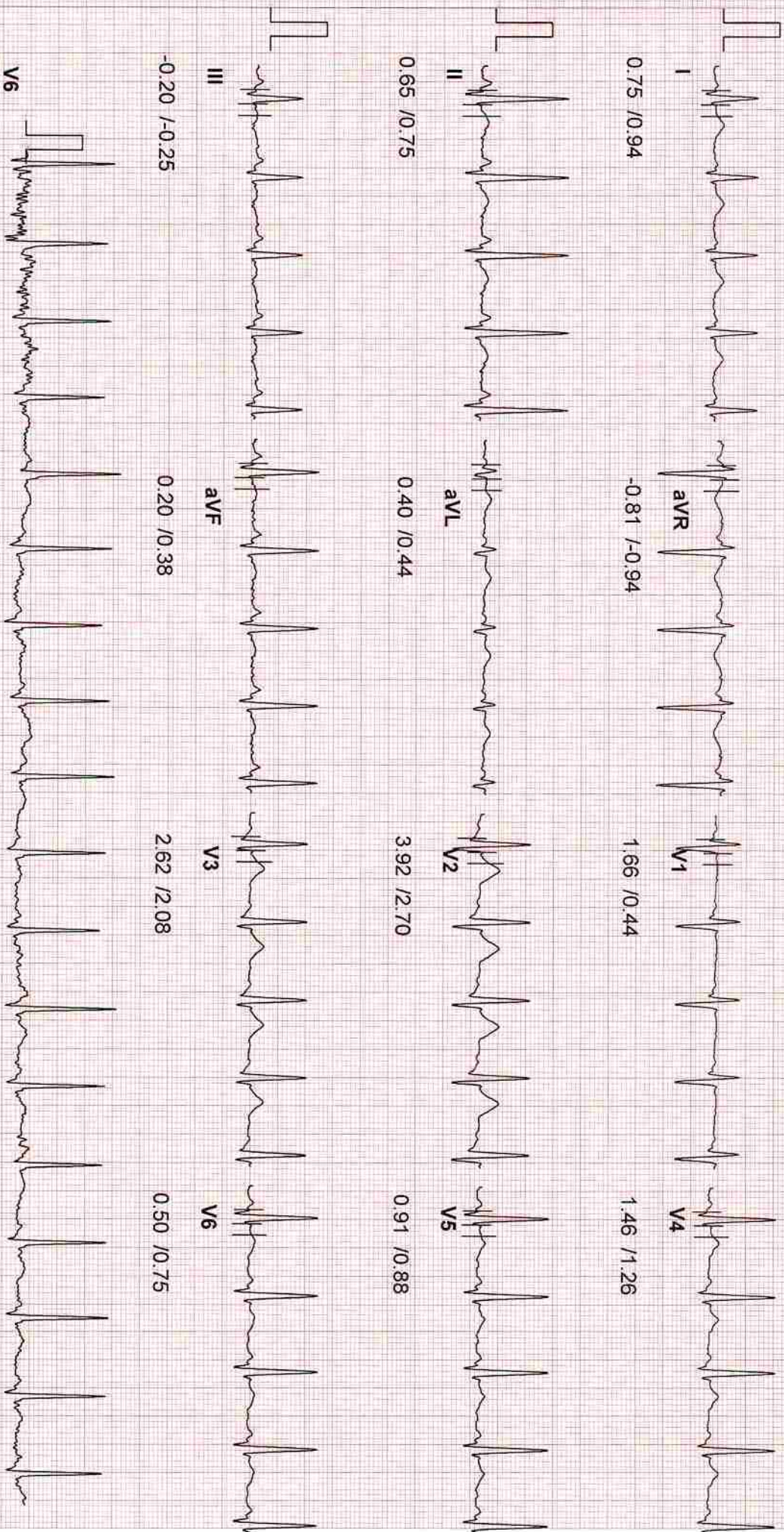


ID : 167
 NAME : MIR SHIVAM VERMA
 AGE : 30
 BP : 120/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Exercise 1
 RECORDED TIME : 03:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 108 bpm (56 %)

PROTOCOL : BRUCE
 SPEED : 2.7 kmph
 GRADE : 10.00 %
 METS : 5.10

DR. VIJND BHAT
 Tested On : 11-03-2023, 11
 BPL DYNATRAC



REAL TIME ECG REPORT

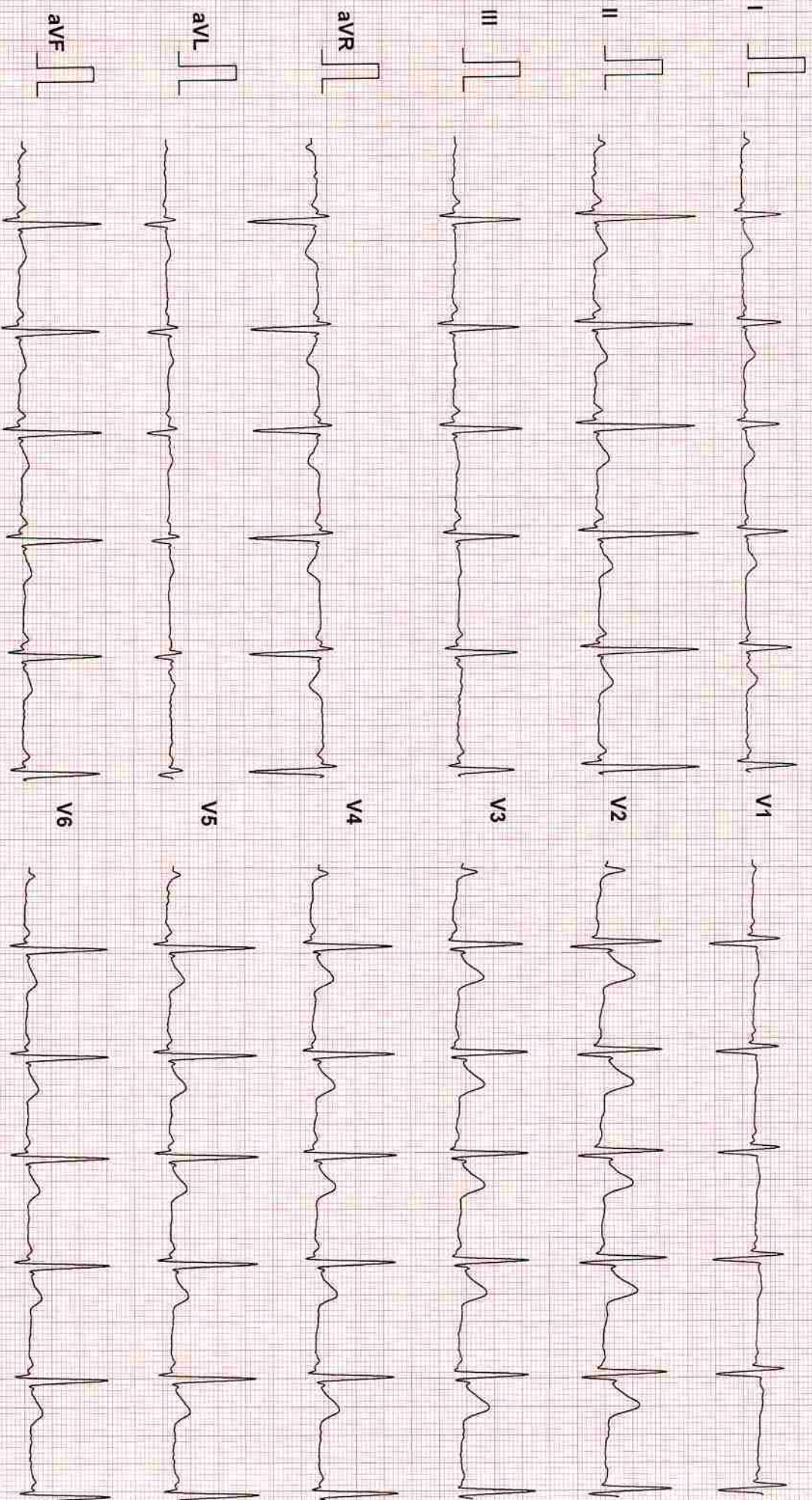
SJM HOSPITAL AND IVF CENTRE

ID : 166
NAME : SHIVAM VERMA
AGE : 30
BP : 115/76 mmHg

STAGE : Pre-Test
RECORDED TIME : 10:56 (min:sec)
STAGE DURATION : 10:56 (min:sec)
HR : 80 bpm (42%)

PROTOCOL : BRUCE
SPEED : 0.00 kmph
GRADE : 0.00 %
METS : 0.00

DR. VIJOND BHAT
Tested On 11-03-2023, 10:45:
BPL DYNATRAC



166

20 Hz Filter

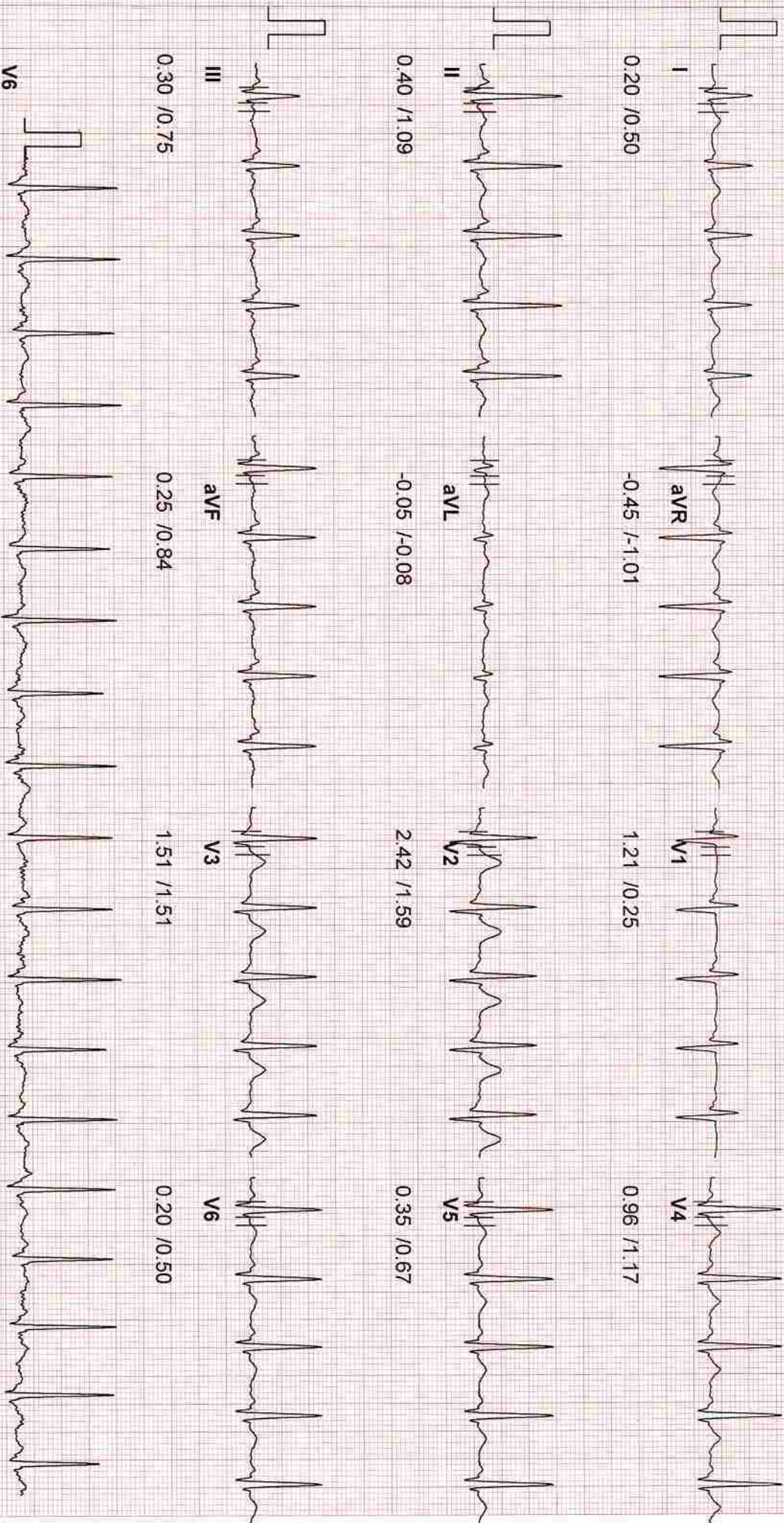
10mm/mV, 25mm/Sec

ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 130/90 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise2
 RECORDED TIME : 06:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 126 bpm (66%)

PROTOCOL : BRUCE
 SPEED : 4.0 kmph
 GRADE : 12.00 %
 METS : 7.10

DR. VIOND BHAT
 Tested On 11-03-2023, 11
 BPL DYNATRAC

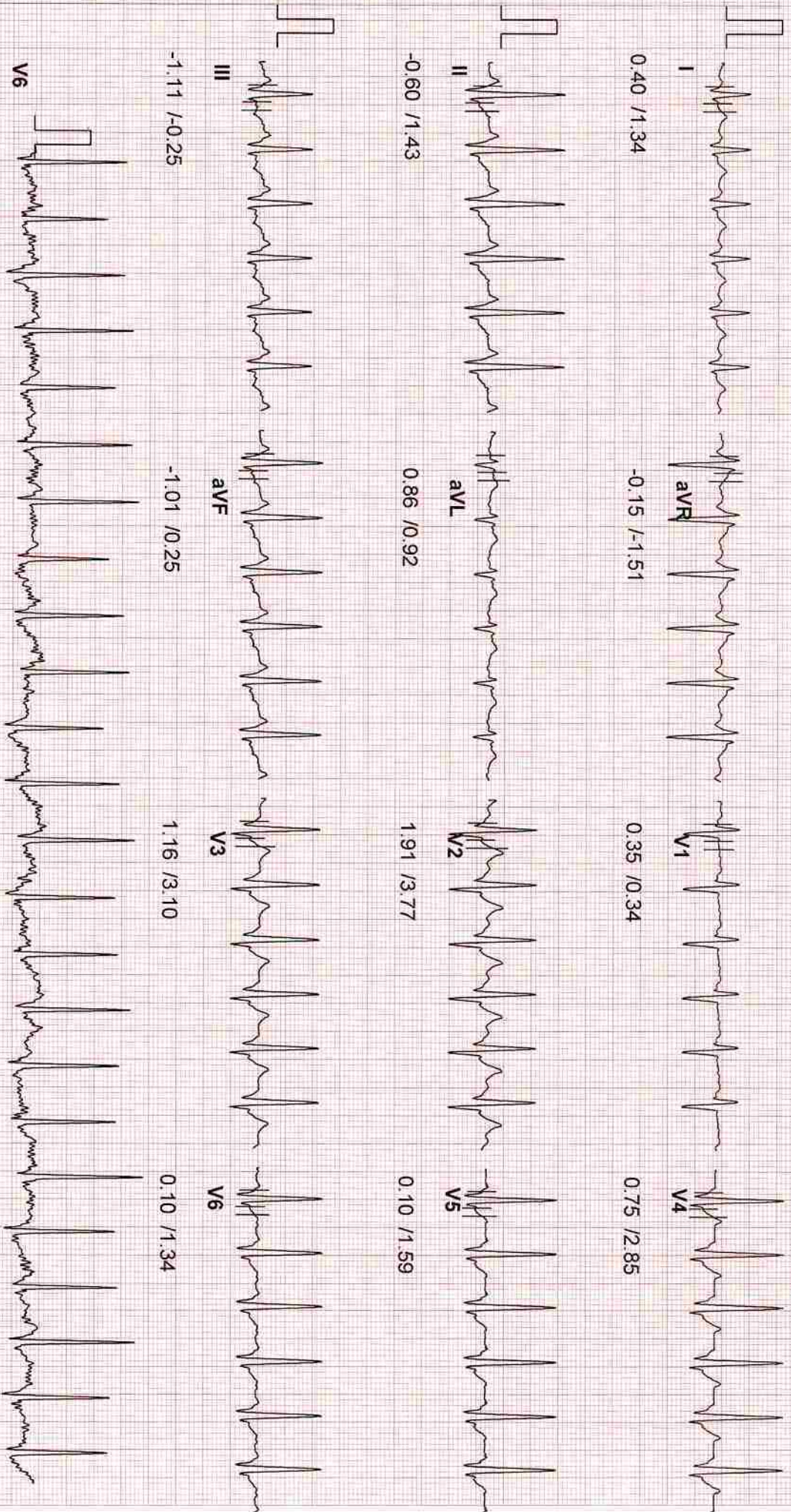


ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 140/100 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise3
 RECORDED TIME : 09:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 153 bpm (80%)

PROTOCOL : BRUCE
 SPEED : 5.5 kmph
 GRADE : 14.00 %
 METS : 10.00

DR. VIJOND BHAT
 Tested On : 11-03-2023, 11
 BPL DYNATRAC



167

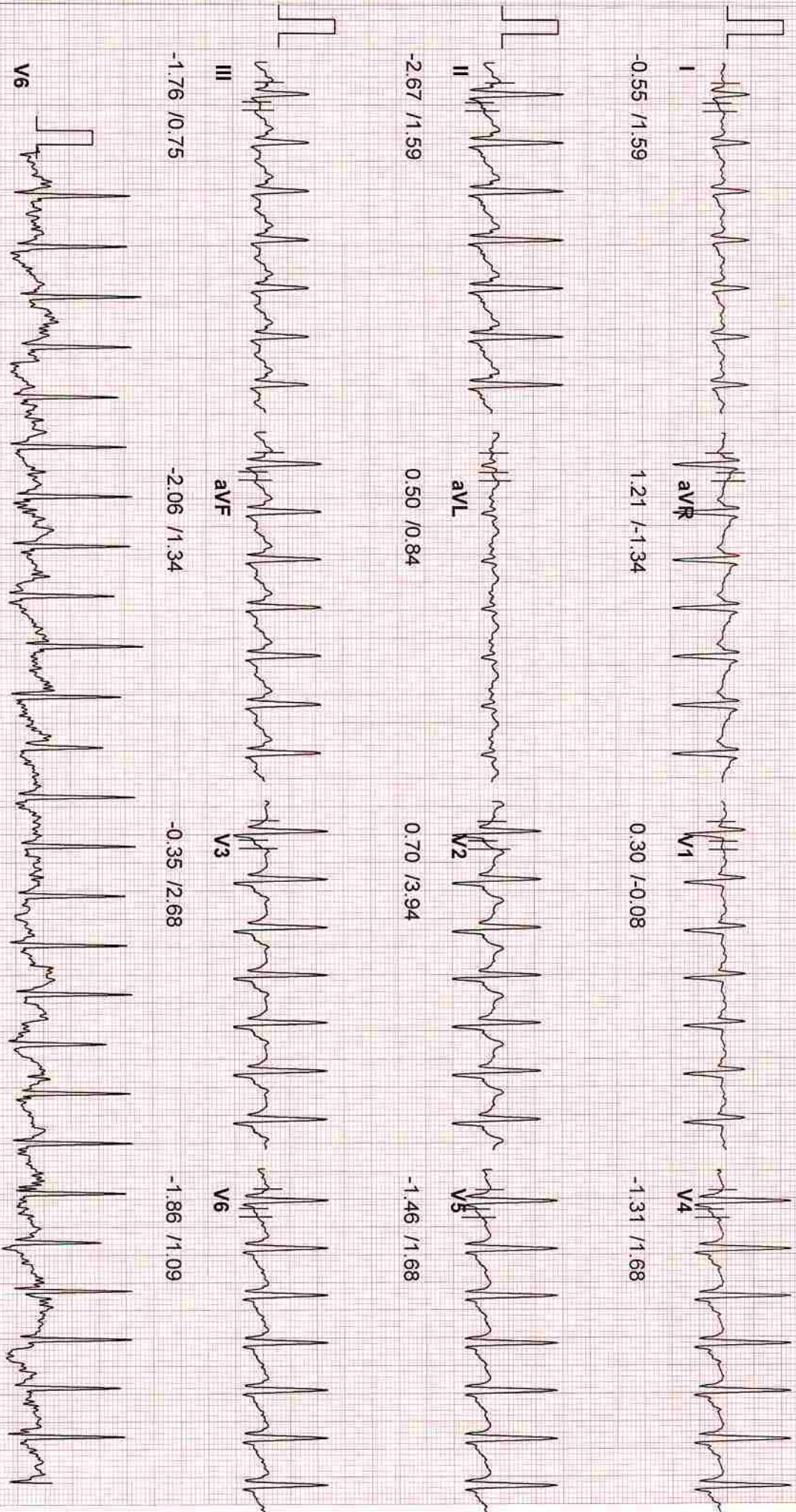
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 150/100 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise4(Peak Ex) PROTOCOL : BRUCE
 RECORDED TIME : 01:32 (min:sec) SPEED : 6.8 kmph
 STAGE DURATION : 01:32 (min:sec) GRADE : 16.00 %
 HR : 176 bpm (92 %) METS : 13.00

DR.VIOND BHAT
 Tested On 11-03-2023, 11
 BPL DYNATRAC



167

20 Hz Filter

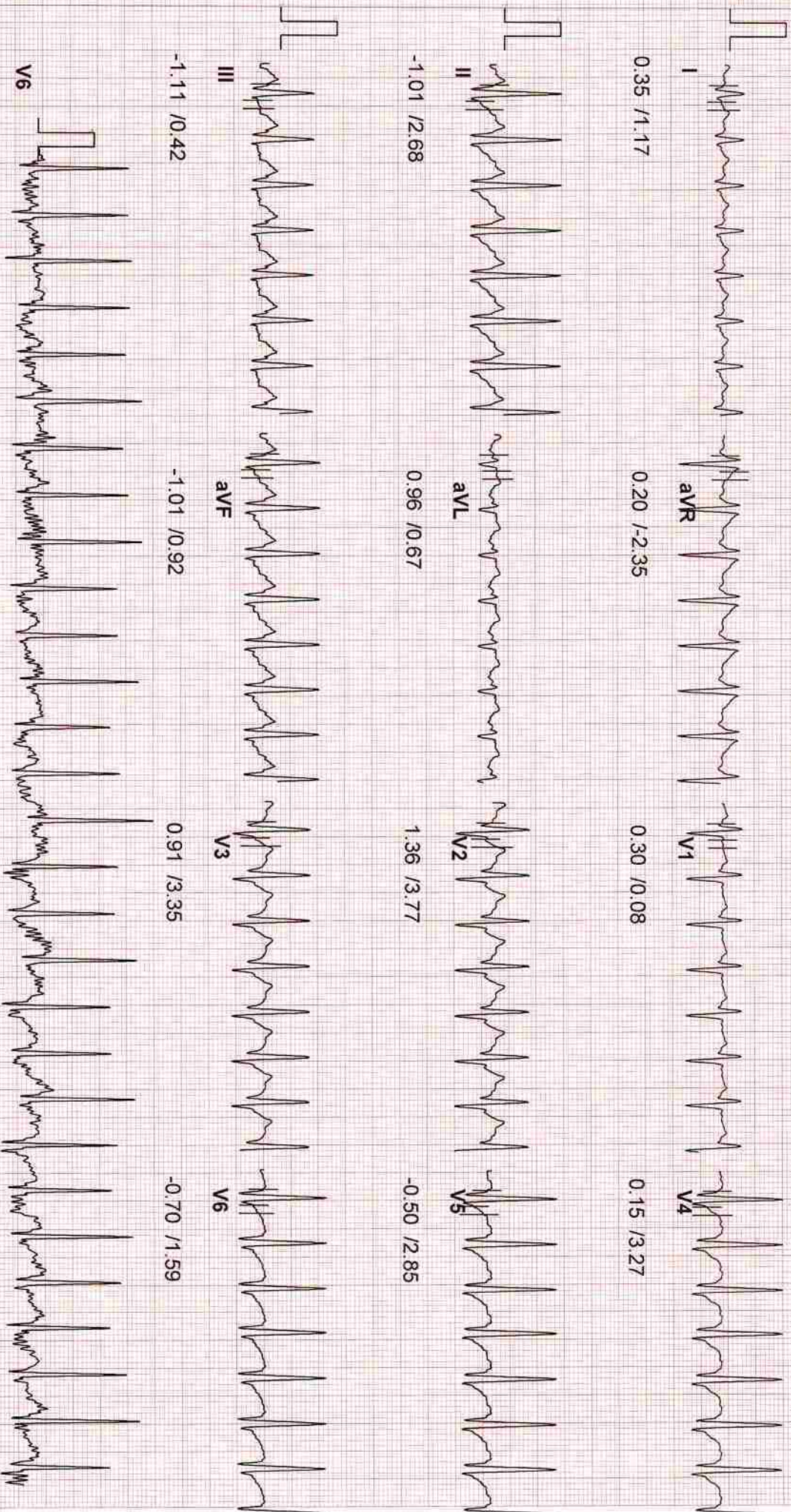
10mm/mV, 25mm/Sec

ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 115/76 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 1
 RECORDED TIME : 00:59 (min:sec)
 STAGE DURATION : 00:59 (min:sec)
 HR : 181 bpm (95%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJND BHAT
 Tested On : 11-03-2023, 11
 BPL DYNATRAC



167

20 Hz Filter

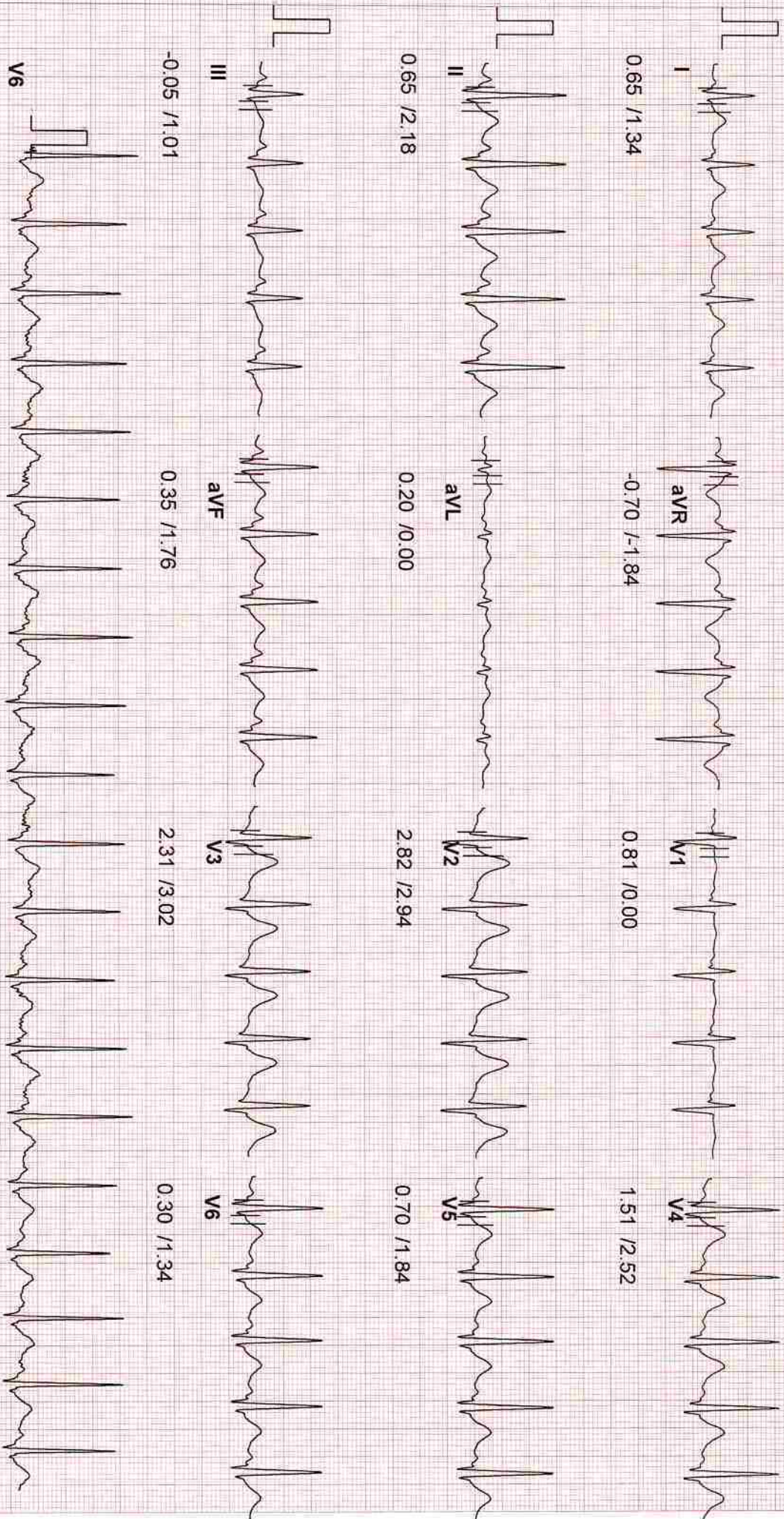
10mm/mV, 25mm/Sec

ID : 167
 NAME : MR SHIVAM VERMA
 AGE : 30
 BP : 115/76 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 3
 RECORDED TIME : 02:59 (min:sec)
 STAGE DURATION : 02:59 (min:sec)
 HR : 122 bpm (64 %)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METs : 0.00

DR. VIJND BHAT
 Tested On 11-03-2023, 11
 BPL DYNATRAC



167

20 Hz Filter

10mm/mV, 25mm/Sec

Laboratory Report

| | | | |
|----------------|--------------------|---------------------|------------------------|
| Lab Serial no. | : LSHHI243588 | Mr. No | : 99933 |
| Patient Name | : Mr. SHIVAM VERMA | Reg. Date & Time | : 11-Mar-2023 09:35 AM |
| Age / Sex | : 30 Yrs / M | Sample Receive Date | : 11-Mar-2023 09:49 AM |
| Referred by | : Dr. SELF | Result Entry Date | : 11-Mar-2023 01:48PM |
| Doctor Name | : Dr. Vinod Bhat | Reporting Time | : 11-Mar-2023 01:48 PM |
| OPD | : OPD | | |

HAEMATOLOGY

| | results | unit | reference |
|-----------------------------------|-------------|---------------|-------------|
| CBC / COMPLETE BLOOD COUNT | | | |
| HB (Haemoglobin) | 15.0 | gm/dl | 12.5 - 16.0 |
| TLC | 5.9 | Thousand/mm | 4.0 - 11.0 |
| DLC | | | |
| Neutrophil | 54 | % | 40 - 70 |
| Lymphocyte | 36 | % | 20 - 40 |
| Eosinophil | 08 | % | 01 - 06 |
| Monocyte | 02 | % | 02 - 08 |
| Basophil | 00 | % | 00 - 01 |
| R.B.C. | 5.08 | Thousand / UI | 3.8 - 5.10 |
| P.C.V | 43.1 | million/UI | 00 - 40 |
| M.C.V. | 84.8 | fL | 78 - 100 |
| M.C.H. | 29.5 | pg | 27 - 31 |
| M.C.H.C. | 34.8 | g/dl | 32 - 36 |
| Platelet Count | 2.53 | Lacs/cumm | 1.5 - 4.5 |

INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer

technician :

Typed By : Mr. BIRJESH


Dr. Rajeev Goel
M.D. (Pathologist)
36548 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., M.D.)
Pathologist & microbiologist

Laboratory Report

| | |
|---------------------------------|--|
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| Referred by : Dr. SELF | Result Entry Date : 11-Mar-2023 01:48PM |
| Doctor Name : Dr. Vinod Bhat | Reporting Time : 11-Mar-2023 01:48 PM |
| OPD : OPD | |

HAEMATOLOGY

| results | unit | reference |
|---------|------|-----------|
|---------|------|-----------|

ESR / ERYTHROCYTE SEDIMENTATION RATE

| | | | |
|--------------------------------------|----|--------|---------|
| ESR (Erythrocyte Sedimentation Rate) | 04 | mm/1hr | 00 - 22 |
|--------------------------------------|----|--------|---------|

Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

BIOCHEMISTRY

| results | unit | reference |
|---------|------|-----------|
|---------|------|-----------|

BLOOD SUGAR F, Sodium Fluoride Pla

| | | | |
|-----------------|-------|-------|----------|
| Blood Sugar (F) | 104.7 | mg/dl | 70 - 110 |
|-----------------|-------|-------|----------|

Comments:


Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

technician :

Typed By : Mr. BIRJESH


Dr. Rajeev Goel
M.D. (Pathologist)
36548 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., M.D.)
Pathologist & microbiologist

Laboratory Report

| | |
|---------------------------------|--|
| Lab Serial no. : LSHHI243588 | Mr. No : 99933 |
| Patient Name : Mr. SHIVAM VERMA | Reg. Date & Time : 11-Mar-2023 09:35 AM |
| Age / Sex : 30 Yrs / M | Sample Receive Date : 11-Mar-2023 09:49 AM |
| Referred by : Dr. SELF | Result Entry Date : 11-Mar-2023 01:48PM |
| Doctor Name : Dr. Vinod Bhat | Reporting Time : 11-Mar-2023 01:48 PM |
| OPD : OPD | |

BIOCHEMISTRY

| | results | unit | reference |
|------------------------------------|--------------|-------|-------------|
| <u>LIPID PROFILE, Serum</u> | | | |
| S. Cholesterol | 185.0 | mg/dl | < - 200 |
| HDL Cholesterol | 44.8 | mg/dl | 35.3 - 79.5 |
| LDL Cholesterol | 85.5 | mg/dl | 50 - 150 |
| VLDL Cholesterol | 54.7 | mg/dl | 00 - 40 |
| Triglyceride | 273.4 | mg/dl | 00 - 170 |
| Chloestrol/HDL RATIO | 4.1 | % | |

INTERPRETATION:

Lipid profile Of lipid panel is a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

BLOOD SUGAR (PP), Serum

| | | | |
|----------|-------|-------|----------|
| SUGAR PP | 138.7 | mg/dl | 80 - 140 |
|----------|-------|-------|----------|

Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT

technician :

Typed By : Mr. BIRJESH

Laboratory Report

| | | | |
|----------------|--------------------|---------------------|------------------------|
| Lab Serial no. | : LSHHI243588 | Mr. No | : 99933 |
| Patient Name | : Mr. SHIVAM VERMA | Reg. Date & Time | : 11-Mar-2023 09:35 AM |
| Age / Sex | : 30 Yrs / M | Sample Receive Date | : 11-Mar-2023 09:49 AM |
| Referred by | : Dr. SELF | Result Entry Date | : 11-Mar-2023 01:48PM |
| Doctor Name | : Dr. Vinod Bhat | Reporting Time | : 11-Mar-2023 01:48 PM |
| OPD | : OPD | | |

BIOCHEMISTRY

| | results | unit | reference |
|-----------------------------|---------|--------|------------|
| KFT, Serum | | | |
| Blood Urea | 28.1 | mg/dL | 18 - 55 |
| Serum Creatinine | 0.81 | mg/dl | 0.7 - 1.3 |
| Uric Acid | 5.8 | mg/dl | 3.5 - 7.2 |
| Calcium | 10.0 | mg/dL | 8.8 - 10.2 |
| Sodium (Na ⁺) | 140.3 | mEq/L | 135 - 150 |
| Potassium (K ⁺) | 3.87 | mEq/L | 3.5 - 5.0 |
| Chloride (Cl) | 101.4 | mmol/L | 94 - 110 |
| BUN/ Blood Urea Nitrogen | 13.13 | mg/dL | 7 - 18 |
| PHOSPHORUS-Serum | 2.89 | mg/dl | 2.5 - 4.5 |

Comment:-

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body.
Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

Centre For Excellent Patient Care

technician :

Typed By : Mr. BIRJESH

Page 1


Dr. Rajeev Goel
M.D. (Pathologist)
36548 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., M.D.)
Pathologist & microbiologist

Laboratory Report

| | | | |
|----------------|--------------------|---------------------|------------------------|
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BIOCHEMISTRY

| | results | unit | reference |
|--|-------------|-------|-------------|
| <u>LIVER FUNCTION TEST, Serum</u> | | | |
| Bilirubin- Total | 0.61 | mg/dL | 0.1 - 2.0 |
| Bilirubin- Direct | 0.29 | mg/dL | 0.0 - 0.20 |
| Bilirubin- Indirect | 0.32 | mg/dL | 0.2 - 1.2 |
| SGOT/AST | 27.3 | IU/L | 00 - 35 |
| SGPT/ALT | 47.4 | IU/L | 00 - 45 |
| Alkaline Phosphate | 76.0 | U/L | 53 - 128 |
| Total Protein | 6.72 | g/dL | 6.4 - 8.3 |
| Serum Albumin | 4.44 | gm% | 3.50 - 5.20 |
| Globulin | 2.28 | gm/dl | 1.8 - 3.6 |
| Albumin/Globulin Ratio | 1.95 | % | |

INTERPRETATION

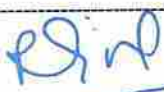
A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.

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| OPD/IPD : OPD | |

TEST NAME**VALUE**

ABO

"B"

Rh

POSITIVE

Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive and RH negative.


URINE SUGAR (FBS)**CHEMICAL EXAMINATION**

Glucose : Nil

URINE SUGAR (PPBS)**CHEMICAL EXAMINATION**

Glucose : Nil

Mr. BIRJESH



<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

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11-03-2023
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Laboratory Report

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| OPD/IPD : OPD | : |

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

Quantity: 20 ml

Color: Straw

Transparency: clear

CHEMICAL EXAMINATION

Albumin: nil

PH: Acidic

MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF

RBC's: nil

Crystals: nil

Epithelial cells: 0-1 /HPF

Others: nil

Note:-

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.

Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>


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11-03-2023

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Pathologist & microbiologist



LAB REPORT



Dr. Remedies Labs

Diagnostics Redefined...

Name : Mr. SHIVAM VERMA
Age/Gender : 30 Y 0 M 0 D /M
Ref Doctor : Dr. VINOD BHAT
Ref. Cust : SJM HOSPITAL
Client Code : DLD180

UHID No/Visit ID : DLD180.00000010/DLD180.10
Collected : 11/Mar/2023 06:51PM
Received : 11/Mar/2023 07:23PM
Reported : 11/Mar/2023 08:18PM
Barcode : 4205802

DEPARTMENT OF BIOCHEMISTRY-ROUTINE

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|--|------------|
| <u>PDF Attached</u> | | | | |
| GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C) , WHOLE BLOOD EDTA | | | | |
| Glycosylated Haemoglobin HbA1c | 5.5 | % | Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5 | HPLC |
| Approximate mean plasma glucose | 111.15 | | | Calculated |

Comment:

Ref. for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:


- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%

Printed On :11-Mar-2023 08:20 PM Sample Processed at :DRL-NEW DELHI

*** End Of Report ***


Dr. Sanjay Deb
M.D Pathology





LAB REPORT



Dr. Remedies Labs

Diagnostics Redefined...

Name : Mr. SHIVAM VERMA
Age/Gender : 30 Y 0 M 0 D /M
Ref Doctor : Dr. VINOD BHAT
Ref. Cust : SJM HOSPITAL
Client Code : DLD180

UHID No/Visit ID : DLD180.00000010/DLD180.10
Collected : 11/Mar/2023 06:51PM
Received : 11/Mar/2023 07:23PM
Reported : 11/Mar/2023 07:57PM
Barcode : 4205802

DEPARTMENT OF BIOCHEMISTRY-SPECIAL


| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------------------------------|--------|--------|-------------------------|--------|
| THYROID PROFILE-I , SERUM | | | | |
| Trilodothyronine Total (TT3) | 99.35 | ng/dL | 60-181 | CLIA |
| Thyroxine (TT4) | 9.50 | µg/dL | 4.5-10.9 | CLIA |
| Thyroid Stimulating Hormone (TSH) | 1.50 | µIU/ml | 0.35 - 5.5 | CLIA |
| | | | 0.3 - 4.5 1st Trimester | |
| | | | 0.5 - 4.6 2nd Trimester | |
| | | | 0.8 - 5.2 3rd Trimester | |

Comment:

| TSH | Total T4 | Total T3 | Disease |
|--------|----------|----------|--|
| Normal | Normal | Normal | None |
| Low | High | High | Hyperthyroidism |
| Low | Normal | Normal | Subclinical Hyperthyroidism |
| Low | Normal | High | T3 Toxicosis |
| Low | High | Normal | Thyroiditis, T4 ingestion, hyperthyroidism in the elderly or with comorbid illness |
| Low | Low | Low | Euthyroid sick syndrome; central hypothyroidism |
| High | Normal | Normal | Subclinical hypothyroidism; recovery from euthyroid sick syndrome. |

Printed On :11-Mar-2023 08:21 PM Sample Processed at :DRL-NEW DELHI

*** End Of Report ***


Dr. Sanjay Deb
M.D Pathology





Ultrasound Report

Name: Mr. Shivam Verma

Age:30/M

Date: 11/03/2023

Ultrasound - Male Abdomen

Liver: Liver appears normal in size. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER:-Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

PANCREAS: -Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN: -Spleen show normal in size, shape and homogeneous echopattern. No focal mass lesion is seen in parenchyma.

KIDNEYS:-Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi on right side. **Left kidney shows renal concretions.**

PARAAORTIC REGIONS: Any mass/ lymph nodes: -- no mass or lymph nodes seen.

URINARY BLADDER:- Adequately distended. Wall were regular and thin. Contents are Normal. No stone formation seen.

PROSTATE: - Normal in shape and position. Parenchymal echotexture is normal. No free ascetic fluid or pleural effusion seen.

IMPRESSION: - Left renal concretions.

DR. PUSHPA KAUL

For SJM Super Speciality Hospital
DR. P.K GUPTA

X-Ray Report

| | | | | | |
|--------------------|---------------------|-----------------------|-----------------|---------------------|-------|
| Patient ID. | 21634 OPD | Name | MR.SHIVAM VERMA | Sex/Age | M/30Y |
| Date | 11-03-2023 12:20 PM | Ref. Physician | | CHEST, CHEST | |

X-RAY CHEST PA VIEW

OBSERVATION:

The lung fields are clear.

Both hila are normal.

Cardiophrenic and costophrenic angles are normal.

The trachea is central.

The mediastinal and cardiac silhouette are normal.

Cardiothoracic ratio is normal.

Bones of the thoracic cage are normal.

Soft tissues of the chest wall are normal.

IMPRESSION:

- No significant abnormality seen.

Dr. DEEPAK K SOLANKI
MBBS, DNB
CONSULTANT RADIOLOGIST

R

