

24X7 {Helpline - 7835 999 444 , 7835 999 555}

UMR NO / IP No : FHP241109738 / NA	Bill Date : 09-Nov-2024 11:58 AM
Name : Mr . ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 04:17 PM
Specimen Type : EDTA WB	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

BIOCHEMISTRY

BAR CD : 2411090726

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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GLYCOSYLATED HAEMOGLOBIN (HB A1C)			
HBA1C	4.80	%	Non Diabetic : 4 - 6 Good Control : 6 - 7 Fair Control : 7 - 8 Poor Control : 8 - 10 Very Poor Control : > - 10

Comments :



Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By
User : EC4570
Print Dt : 11-Nov-2024 04:50 PM

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Ref Range for HbA1c
 Non Diabetic : < 5.7 %
 Pre-Diabetic : 5.7 - 6.5 %
 Diabetic : > 6.5 %

Remark: Hemoglobin A1c criteria for diagnosing diabetes have not been established for patients who are <18 years of age.

HbA1c goals in the treatment of diabetes:

Ages 0-6 years	< 5.7%
Ages 6-12 years	< 8%
Ages 13-19 years	< 7.5%
Adults	< 7%

Comments: HbA1c is a good index of average blood glucose levels over the past 1-2 weeks and is more reliable than blood and urinary glucose determinations.

Indicator of long term glycemic control as compared to blood and urinary glucose determinations.

(Note: If a person has anemia, hemolysis, or heavy bleeding, HbA1c test results may be falsely low. If someone is iron-deficient, the HbA1c level may be increased. If a person has had a recent blood transfusion, the HbA1c may be inaccurate and may not accurately reflect glucose control for 3-6 months.)


ADA criteria for correlation between HbA1c & Mean plasma glucose levels:

HbA1c(%)	6	7	8	9	10	11	12
Mean Plasma Glucose (mg/dL)	126	154	183	212	240	269	298

Please correlate if available

***** End Of Report *****

Prepared By :
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Name : Mr. ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 04:14 PM
Specimen Type : Serum	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

IMMUNOLOGY

BAR CD : 2411090723

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
THYROID PROFILE TOTAL(T3,T4,TSH)			
T3 (CLIA)	2.17	nmol/l	1.11 - 2.29
T4 (CLIA)	210.81	nmol/l	62.00- 201.40
TSH (CLIA)	3.00	µU/ml	0.38 - 5.33

Comments :

Comments :

1. A circadian variation in serum TSH in healthy subjects is well documented. TSH level is reaching peak levels between 2-4 am and at a minimum between 4-6 pm. The variation is of the order of 50%, hence time of the day has influence on the value of TSH.
2. TSH levels between 6.3 and 15.0 may represent subclinical or compensated hypothyroidism or show considerable physiological & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
3. TSH levels may be transiently altered because of non-thyroid illness, like severe infection, renal disease, liver disease, heart disease, severe burns, trauma, surgery etc. Few drugs also altered the TSH values.
4. A high TSH result means an underactive thyroid gland caused by failure of the gland (hypothyroidism). A low TSH result can indicate an overactive thyroid gland (hyperthyroidism) or damage to the pituitary gland that prevents it from producing TSH.
5. Resistance to thyroid hormone (RTH) and central hyperthyroidism (TSH-oma) are rare conditions associated with elevated TSH, T4 and T3 levels.

Please correlate clinically.

***** End Of Report *****


Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By
User : EC4258
Print Dt : 11-Nov-2024 04:50 PM

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UMR NO / IP No : FHP241109738 / NA	Bill Date : 09-Nov-2024 11:58 AM
Name : Mr . ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 05:46 PM
Specimen Type : Whole Blood	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

HAEMATOLOGY

BAR CD : 2411090720

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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BLOOD GROUP (RH TYPE)

Blood grouping : "O"
Rh TYPING : Positive

PARAMETER	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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HAEMOGRAM (CBC & ESR)

Haemoglobin	14.20	g/dL	13 - 17
Total WBC Count	6110		4000 - 10000
Differential Count			
Neutrophils	58.80		40.00- 80.00
Lymphocytes	33.00		20.00- 40.00
Monocytes	4.70		2.00 - 10.00
Eosinophils	3.50		1.00 - 6.00
Basophils	0.00		0.00 - 1.00
Total RBC Count	4.83	mill/cmm	4.50 - 6.50
HEMATOCRIT (PCV)	44.30	%	40.00- 54.00
MCV	91.60		80.00- 100.00
MCH	29.30	Pg	27.00- 32.00
MCHC	32.00	%	31.50- 34.50
PLATELETS	1.99	X10 ⁶ /cmm	1.50 - 4.00
RDW-CV	14.50	%	11.00- 16.00
RDW-SD	48.40	fL	39 - 52
PDW	21.50	%	11 - 18
ESR	06	mm at 1 hr.	0 - 15

*** End Of Report ***

Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By
User : EC3758
Print Dt : 11-Nov-2024 04:50 PM

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Name : Mr . ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 04:14 PM
Specimen Type : Fluoride Plasma	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

BIOCHEMISTRY

BAR CD : 2411090724

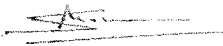
PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
BLOOD SUGAR FASTING (BSF)			
FASTING BLOOD SUGAR	91.0	mg/dl	74 - 110

Comments :

**Please correlate clinically.*

*** End Of Report ***

Prepared By
User : EC4293
Print Dt : 11-Nov-2024 04:50 PM


Dr. SUMIT MAKKAR
MBBS,MD(Pathology)

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Name : Mr. ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 04:14 PM
Specimen Type : Serum	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

BIOCHEMISTRY

BAR CD : 2411090725

PARAMETER	RESULT	UNIT	
GGTP			
GAMMA GT	29.80	U/L	0 - 55

Comments :

Comments :

An increased GGT level may be due to any one of the following:

- Alcohol use
- Diabetes
- Flow of bile from the liver is blocked (cholestasis)
- Heart failure
- Swollen and inflamed liver (hepatitis)
- Lack of blood flow to the liver
- Death of liver tissue
- Liver cancer or tumor
- Lung disease
- Pancreas disease
- Scarring of the liver (cirrhosis)
- Use of drugs that are toxic to the liver

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
LIPID PROFILE			
CHOLESTEROL	183.0	mg/dl	Normal: <200 Borderline High: 200-240 High: >240
TRIGLYCERIDES	139.0	mg/dl	Normal: <200 Borderline High: 200-400 High: >400 Very High: >650
HDL CHOLESTEROL	83.0	mg/dl	Low: <40 High: >60
LDL CHOLESTEROL	139.10	mg/dl	OPTIMAL: < 100 mg/dl NEAR OPTIMAL: 100 - 129 mg/dl BORDERLINE HIGH: 130 - 159 mg/dl HIGH: 160 - 189 mg/dl VERY HIGH: > 190 mg/dl

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Specimen Type : Serum	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

VLDL CHOLESTEROL	27.8	mg/dl	5 - 30
Cholesterol/HDL Ratio	2.20		> 4.5 High risk of Coronary Artery Disease (The lower the better)

Comments :
*Please correlate clinically

LIVER FUNCTION TEST

BILIRUBIN (TOTAL)	0.35	mg/dl	0.2 - 1.3
BILIRUBIN (DIRECT)	0.18	mg/dl	0.0 - 0.3
BILIRUBIN (INDIRECT)	0.17		0.0 - 1.10
SGOT (AST)	31.80	U/L	0 - 40
SGPT (ALT)	58.10	U/L	0 - 41
ALKALINE PHOSPHATASE	87.90	U/L	38 - 126
TOTAL PROTEINS	7.50	g/dL	6.3 - 8.2
ALBUMIN	5.10	g/dL	3.5 - 5.0
GLOBULIN	2.40	g/dL	2.8 - 3.2
A/G RATIO	2.13		1.25 - 1.56:1

Comments :
*Please correlate clinically.

KIDNEY FUNCTION TEST(KFT)

UREA	25.20	mg/dl	19 - 44
CREATININE	0.72	mg/dl	0.7 - 1.2
URIC ACID	6.90	mg/dl	3.50 - 7.20
CALCIUM	9.70	mg/dl	8.6 - 10.3
PHOSPHORUS	6.13	mg/dl	2.6 - 4.5
SODIUM	139.0	mmol/l	135 - 145
POTASSIUM	4.10	mmol/l	3.5 - 5.5
CHLORIDE	102.0	mmol/l	98 - 107

Comments :
*Please correlate clinically.

Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By
User : EC4293
Print Dt : 11-Nov-2024 04:50 PM



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Name	: Mr . ANKIT GUPTA	Collection Date	:
Age / Gender	: 29Y(s) / Male	Reporting Date	:
Specimen Type	:	Type / Bed No	: CREDIT / OPD
Doctor Name	: Dr.SONAKSHI SAXENA		

*** End Of Report ***

Prepared By

User :

Print Dt : 11-Nov-2024 04:50 PM

• 24X7 Emergency • Ambulance • Pharmacy • Lab • Blood Bank

This is not for Medico Legal purpose

24X7 {Helpline - 7835 999 444 , 7835 999 555}

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Name : Mr . ANKIT GUPTA	Collection Date : 09-Nov-2024 04:07 PM
Age / Gender : 29Y(s) / Male	Reporting Date : 09-Nov-2024 04:11 PM
Specimen Type : Urine	Type / Bed No : CREDIT / OPD
Doctor Name : Dr.SONAKSHI SAXENA	

CLINICAL PATHOLOGY

BAR CD : 2411090722

PARAMETERS	RESULT	UNIT	BIOLOGICAL REFERENCE RANGE
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URINE ROUTINE AUTOMATED

Physically Examinationj

Volume (ml)	40	ML	>10
Colour (Naked eye)	Pale yellow		PALE YELLOW
Appearance	Clear		Clear
Specific Gravity (Pre treated ion exchange resin)	1.020		1.005- 1.030
pH (Double Indicator)	6.0		5.0 - 8.5
Urine Protein (Tetra bromophenol)	NEGATIVE		NEGATIVE
Urine Glucose (GOP Chromogen)	NEGATIVE		NEGATIVE
Ketones (Na-Nitropruside reaction)	NEGATIVE		NEGATIVE
Bilirubin (Diazonium Salt)	NEGATIVE		NEGATIVE
Urobilinogen (Diazonium salt)	NEGATIVE		NEGATIVE
Blood (Tetramethylbenzidine)	NEGATIVE		NEGATIVE
Leucocytes Esterase (Diazonium method)	NEGATIVE		NEGATIVE
Nitrite (Diazonium compound coupling)	NEGATIVE		NEGATIVE

Microscopy

R.B.C	NIL	/hpf	0 - 2
Pus cells	2-4	/hpf	0 - 5
Epithelial cells	0-1	/hpf	0 - 3
Casts	ABSENT	/hpf	
Crystals	ABSENT	/hpf	
Bacteria	NEGATIVE		NEGATIVE

*** End Of Report ***

Dr. SUMIT MAKKAR

MBBS,MD(Pathology)

Prepared By
User : EC4902
Print Dt : 11-Nov-2024 04:50 PM

24X7 {Helpline - 7835 999 444 , 7835 999 555}

DEPARTMENT OF RADIOLOGY

Name	: Mr . ANKIT GUPTA	UMR NO	: FHP241109738
AGE / GENDER	: 29Y(s)/ Male	IP NO	: NA
S/o W/o D/o	: ANKIT GUPTA	BILL NO	: ROP24000211
LOCATION	: OPD	BILL DT & TIME	: 09-Nov-2024 11:58 AM
ADVISED BY	: DR.SONAKSHI SAXENA	REPORTING DT & TIME	: 09-Nov-2024 02:43 PM

ULTRASOUND WHOLE ABDOMEN MALE

***FINDINGS**

Liver is normal in size (141 mm) and shows **homogeneously raised echopattern**. No focal lesion is seen. Intrahepatic biliary radicles and venous channels appear normal.

Gall bladder is distended and shows an intraluminal calculus of size ~ 9.1 mm admixed with sludge. Wall thickness is normal. CBD measures ~ 7.7 mm.

Pancreas is normal in size, shape and echotexture.

Spleen is normal in size (88 mm) and echotexture.

Both kidneys are normal in size, shape and echopattern. Cortico-medullary differentiation and parenchymal thickness is well maintained. No evidence of any pelvicalyceal separation is seen.

No evidence of any significant retroperitoneal lymphadenopathy is seen.

No evidence of fluid in peritoneal cavity.

Urinary bladder is normal in distensibility and wall thickness. The lumen is echofree.

Prostate is normal in size (volume ~ 18.0 cc), shape and echotexture.

IMPRESSION:

- Grade I fatty liver.
- Cholelithiasis with GB sludge.

Advice: Clinical Correlation.

End Of Report

Dr. PULKIT SONI
MBBS, DMRD, DNB
Consultant Radiologist

24 X 7 { Helpline - +91-7835999444, 7835999555 }

Patient Name	ANKIT GUPTA 29/M		
Patient ID	109738	Age	0Yr
Referral Dr	Dr.	Sex	Male
Study Date Time	9 Nov 2024 9:40am	Report Date Time	9 Nov 2024 12:00pm

RADIOGRAPH OF THE CHEST PA VIEW

FINDINGS:

Both the lung fields are clear.

Both the costophrenic angles are clear.

Hilar shadows appear normal.

Cardiothoracic ratio is within normal limits.

Hemidiaphragms are normal in position and contour.

Trachea is in the midline.

Bony thorax under view is unremarkable.

IMPRESSION:

Radiograph chest does not reveal any significant abnormality.



Dr. Barkha Keswani
Consultant Radiologist

ID: 2024110909263276
Name: Ankit
Age: 29/M
Gender: -

09-11-2024 09:26:22 AM

Vent Rate	61 bpm
PR Interval	122 ms
QRS Duration	90 ms
QT/QTc Interval	386/388 ms
P/ORS/ST Axes	8/12/39 deg
QTc:Hodges	

Sinus arrhythmia
--- Interpretation made without knowing patient's gender/age ---
Normal ECG

Unconfirmed Diagnosis.

