

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited)

GSTIN/UIN: 22AADCP8009N2Z9

CIN: U85110CT2005PTC017751



UHID

: 170996

Visit ID

: 0000325097

Patient Name : MR. DEEPAK SINGH RAJPUT

Spec No.

Age / Sex Consultant : 41Y / MALE

Order Date

: 14/10/2023 10:22AM

: 14/10/23 11:46AM

Ref. By

: DR. HOSPITAL CASE

: DR. HOSPITAL CASE

Samp.Date Report Date

Category

: MEDIWHEEL

X-RAY

X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

No Remarkable Abnormality Detected .

Please correlate clinically

R SONI

Please bring all your previous reports. You should preserve and bring this report for future referen



UHID

Age / Sex

: 170989

एक एहशाश अपनेपन का **Sparsh Multispecialty Hospital**

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CIN: U85110CT2005PTC017751 GSTIN/UIN: 22AADCP8009N2Z9

Visit ID

Patient Name : MR. DEEPAK KUMAR Spec No.

: 30Y / MALE

: 14/10/2023 9:07AM Order Date : DR. HOSPITAL CASE Consultant

Samp.Date : DR. SINHA DURGESH Ref. By

: 14/10/23 11:04AM Report Date Category : CGHS

SONOGRAPHY USG Abdomen and Pelvis

(Second copy)

- * LIVER : Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen.
- *PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- *COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.
- *GALL BLADDER : Seen in distended state with normal wall and lumen is echofree
- *SPLEEN:Normal in size, shape & echo texture. No focal lesions seen.
- *PANCREAS:Pancreatic head, body & tail visualized and have ,normal size, shape & echo texture.
- *RIGHT KIDNEY: Right kidney is normal shape, size and position. Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus
- *LEFT KIDNEY: Left kidney is normal shape, size and position. Cortical thickness is normal .CMD is maintained. There is no evidence of calculus
- Left sided Mild dilated Pelvicalyceal system and upper ureter.
- *URINARY BLADDER: Seen in distended state and has normal wall architecture.Lumen is echo free.
- *PROSTATE:Normal in shape, size and echotexture.No median lobe bulge is seen.

No free fluid is seen in the peritoneal cavty.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION:

- Left sided Mild dilated Pelvicalyceal system and upper ureter.
 - Please correlate clinically, followup USG is recommended.

: 0000325078

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ORDER DATE

: 14/10/2023 10:22:00AM

AGE/SEX

: 41Y/MALE

SAMP. DATE

: 14/10/2023 12:13:00PM

SPEC. NO

: 10473899

CONSULTANT DOCTOR

: HOSPITAL CASE

RESULT DATE

: 14/10/2023 3:39:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

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10			,,,,			

PARAMETER	VALUE	RESULT	REFERENCE RANGE
CHOLESTEROL TOTAL	260 mg / dl	High	150 - 220
TRIGLYCERIDES - SERUM	118 mg / dl	Normal	60 - 165
HDL	57.12 mg / dl	Normal	35 - 80
LDL	179.23 mg/dL	High	90 - 160
VLDL	23.60	Normal	20 - 50
CHOL: HDL Ratio	4.55:1		3.5 - 5.5
LDL: HDL Ratio	3.14:1		-

Dr. ANJANA SHARMA D.N.B PATHOLOGY

TECHNICIAN

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medica-leg correlated clinically.

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SAMP. DATE

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: 14/10/2023 12:13:00PM

: 10473906

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 14/10/2023 3:45:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE	BLOOD	COUNT)
DARAMETER		V

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	16.9 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	5.40 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	45.2 %	Normal.	41.5 - 50.4
RBC INDICES			
MCV	83.7 fl	Normal	78 - 96
MCH	31.4 pg	Normal	27 - 32
MCHC	37.5 %	High	33 - 37
RDW	13.9 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	6500 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	60 %	Normal	0 - 75
LYMPHOCYTES	28 %	Normal	22 - 48
EOSINOPHILS	08 %	High	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	184000 /cumm	Normal	150000 - 450000

TECHNICIAN



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: 14/10/2023 12:13:00PM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473906

RESULT DATE : 14/10/2023 4:24:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUPING AND RH TYPIN	G .		
BLOOD GROUP	"B"		-
RH FACTOR	Positive		
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	13.55 mg / dl	Normal	8 - 23
CREATININE			
SERUM CREATININE	0.94 mg/dL	Normal	0.3 - 1.5
GGT (GAMMA GLUTAMYL TRANSFI	ERASE)		
GGT (GAMMA GLUTAMYL TRANSFERASE)	23 U / L	Normal	8 - 52
URIC ACID			
URIC ACID	7.50 mg/dL	Normal	3.6 - 7.7

TECHNICIAN





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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473898

: 14/10/2023 5:38:00PM RESULT DATE

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.30 ng/ml

Normal

0 - 4

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely.

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

Clinical Use

- 1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- 2) Followup and management of Prostate cancer patients
- 3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

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SAMP. DATE

: 14/10/2023 12:14:00PM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473908

: 14/10/2023 3:48:00PM RESULT DATE

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER

VALUE

RESULT

REFERENCE RANGE

URINE SUGAR FASTING

URINE FOR SUGAR

Nil

URINE SUGAR PP

URINE FOR SUGAR

Nil

Dr. ANJANA SHARMA D.N.B PATHOLOGY

TECHNICIAN



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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473896 : 14/10/2023 5:38:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER

VALUE

RESULT

REFERENCE RANGE

T3 (TRIIODOTHYRONINE)

1.60 ng/ml

Normal Normal 0.69 - 2.15 52 - 127

T4 (THYROXINE)

REFERENCE GROUP

91.20 ng/ml 0.63 uIU/ml

Normal

0.3 - 4.5

HORMONE)

REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

TSH (THYROID STIMULATING

Pregnancy

0.30- 4.5

1st Trimester

0.10- 2.50

2nd Trimester

0.20 - 3.00

3rd Trimester

0.30 - 3.00

Note:

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.

- 1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

D. APPANA HARMA D. S. B PATHOLOGY CONSENTANT

TECHNICIAN



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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473905

RESULT DATE

: 14/10/2023 3:40:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED HEAMOGLOBIN)

5.8 %

Normal

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0 At risk (Prediabetes)

->=6.0 to <=6.5

Diagnosing diabetes

- >=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

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appopriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10473903

RESULT DATE

: 14/10/2023 3:48:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICRO	OSCOPY	***************************************		
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
PARAMETER	VALUE	KLOOL!		
PHYSICAL EXAMINATION				
QUANTITY	10ml ml			
COLOUR	Yellow		-	
APPEARANCE	Clear		* h	
REACTION	Acidic		-	
CHEMICAL EXAMINATION				
ALBUMIN	Nil		₩	
SUGAR	Nil		-	
MICROSCOPIC EXAMINATION				
EPITHELIAL CELLS	Occasional /hpf		0 - 5	
PUS CELLS	1-2 /hpf		1 - 2	
RBC	Nil /hpf		-	
CAST	Nil /lpf		-	
CRYSTAL	Nil		-	
AMORPHOUS MATERIAL DEPOSIT	Nil			
OTHERS	Nil		=	

TECHNICIAN

DI ANJANA SHARMA



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: 10473897

CONSULTANT DOCTOR

: HOSPITAL CASE

RESULT DATE

: 14/10/2023 3:39:00PM

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

VALUE	RESULT	REFERENCE RANGE
2.57 mg/dL	High	0.1 - 1.2
0.55 mg / dl	Normal	0.1 - 0.6
2.02 mg / dl	High	0.1 - 0.4
61 U/L	Normal	0 - 270
7 U/L	Low	10 - 55
25 U/L	Normal	0 - 40
7.26 g / dl	Normal	6 - 8
4.90 g/dl	Normal	4 - 5
2.36 g/dl	Normal	2 - 3.5
2.07:1		1 - 2.5
	2.57 mg/dL 0.55 mg / dl 2.02 mg / dl 61 U / L 7 U / L 25 U / L 7.26 g / dl 4.90 g/dl 2.36 g / dl	2.57 mg/dL High 0.55 mg / dl Normal 2.02 mg / dl High 61 U / L Normal 7 U / L Low 25 U / L Normal 7.26 g / dl Normal 4.90 g/dl Normal 2.36 g / dl Normal

Sharma

Dr. ANJANA SHARMA D.N.B PATHOLOGY

CONSU

TECHNICIAN



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AGE/SEX

: 41Y/MALE

SAMP. DATE : 14/10/2023 12:13:00PM

CONSULTANT DOCTOR : HOSPITAL CASE

SPEC. NO

: 10473907

RESULT DATE : 14/10/2023 4:32:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
ESR	08 mm at end of 1 hr	Normal	0 - 15	

D.N.B PATHONOGA

TECHNICIAN

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Page 1 of 1