

Mr. Lehit Kumar Sahay 51M 27/11/20

Review medical history

Plm: 400M ↓ OAD

Sugar 10150
 OGTT 0.42 = 131

BP: 110/70

PR: 28/6

Plm: 400M

no fresh complaints

Cns: 95 @ 170

MS: Bilateral ex

no MS

PlA: 80/170

WHD

Cns: HF @

CBL - Comp

HRBC - 6.91

PPAD - 280

FBS - 130

Wne - Sugar @

PSA - 0.42 - Gcr = Wne

Wt - Wne

RF - Wne

WAD - (N)

73/170 / 75h - @

GNT: Wne

Leukof 64 - Wne

Ccr:

20 Cul

CpR (PlA) - MD

Wne



Mr. Lokesh K. Sahy 21/9 27/11/2021

Mem. GNY Reply

nose

Nasal cavity - good

Turbinate - NAD

DRS - (N)

Discharge - abscess

Insidat: PPW - good

Tonsil - (N)

Levz: TM: Intact

CR - well

neary - @

Imp: no abnormality detected
chuckles
Dr. P. Nanwani



EYE EXAMINATION

NAME: - Mrs. Lohit Kumar Sahu
AGE/SEX 31Y/M

DATE:- 27/11/21

1. EXAMINATION OF EYES : (BY OPHTHALMOLOGIST)

EXTRENAL, EXAMINATION	NAD			
SQUINT	NAD			
NYSTAGMUS	NAD			
COLOUR VISION	NORMAL			
FUDUS	NIL			
INDIVIDUAL COLOUR IDENTIFICATION	NORMAL			
DISTANT VISION	6/6 6/6			
NEAR VISION	NIL			
NIGHT BLINDNESS	NAD			
	SPH	CYL	AXIS	ADD
RIGHT				
LEFT				

REMARK :-

Dr. Vikash Mishra
MBBS, MS (Oph.)
Consultant-Ophthalmology
We Care Super Speciality Hospital
(SIGN.)

NAME MR. LOHIT KUMAR SAHU

AGE 31Y/M

REF BY: DR. A SIDDIQUI

DATE: 27/11/2021

ECHOCARDIOGRAPHY

M-MODE

<u>MEASUREMENT</u>	<u>PT'S VALUE</u>	<u>NORMAL VALUE</u>
AO	31.5 mm	20-37 mm
LA	36.2 mm	19-40 mm
IVS (d)	8.9 mm	6-11 mm
LVID (d)	45.1 mm	35-50 mm
LVPW (d)	10 mm	6-11 mm
LVID (S)	26.2 mm	23-39 mm
EF	60%	

2 D ECHO & CFI

CHAMBERS	-	NORMAL
VALVES	-	NORMAL.
SEPTAE	-	IVS / IAS Intact
RWMA	-	NO RWMA PRESENT AT REST.
EF	-	60%

CLOT / VEGETATION/ PERICARDIAL EFFUSSION – NIL.

<u>VALVE</u> <u>(mmHg)</u>	<u>REGURGITATION</u>	<u>GRADIENT</u>
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Mitral Valve	NILL	Not Significant
Aortic Valve	NILL	Not Significant
Tricuspid Valve	NILL	Not Significant
Pulmonary Valve	NILL	Not Significant

PULSE WAVE DOPPLER

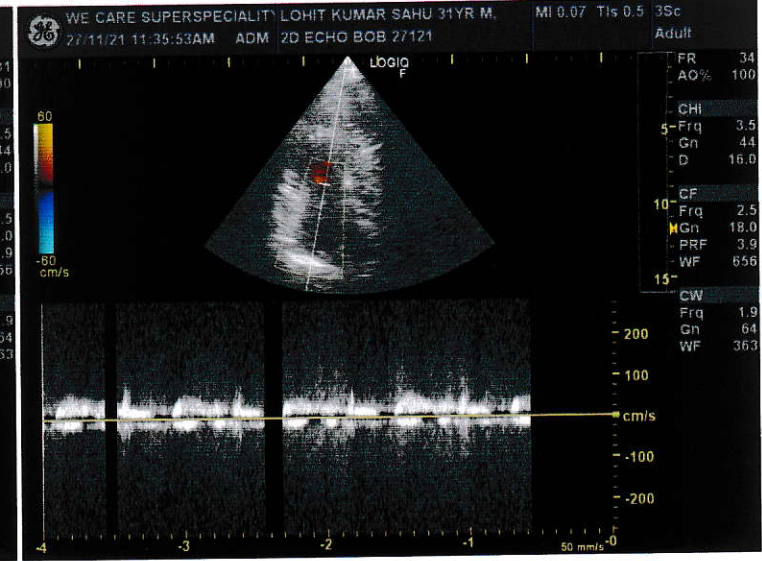
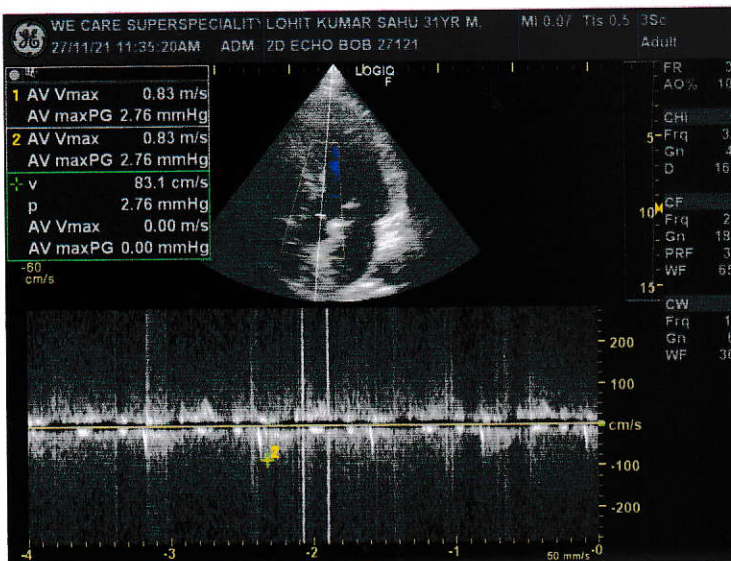
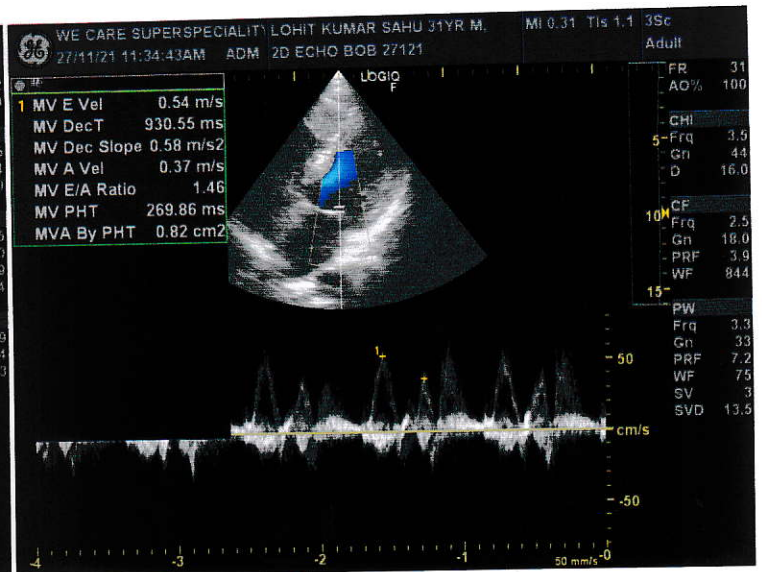
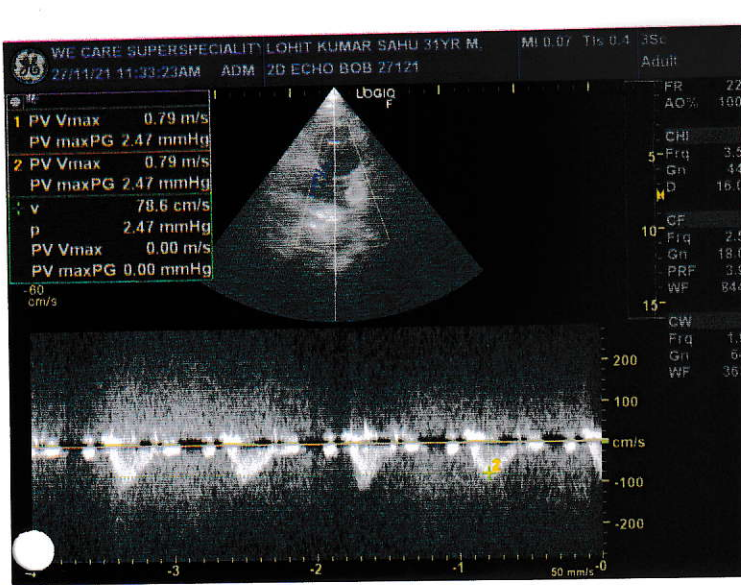
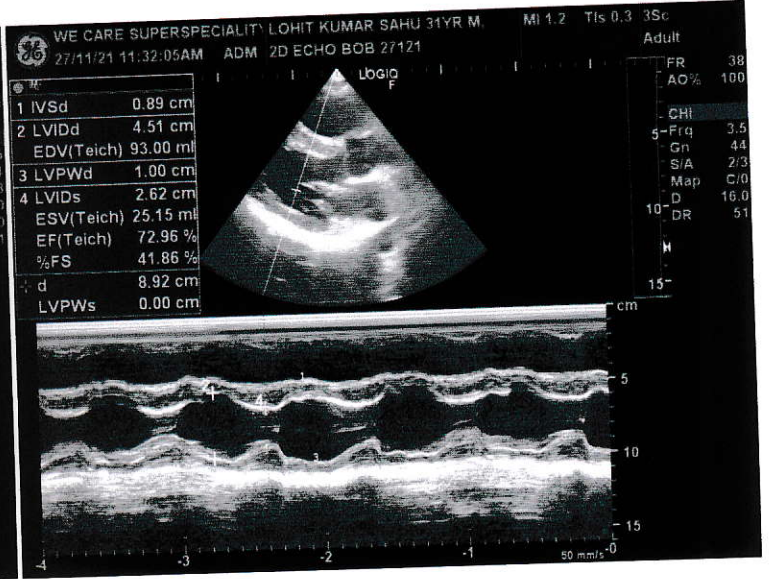
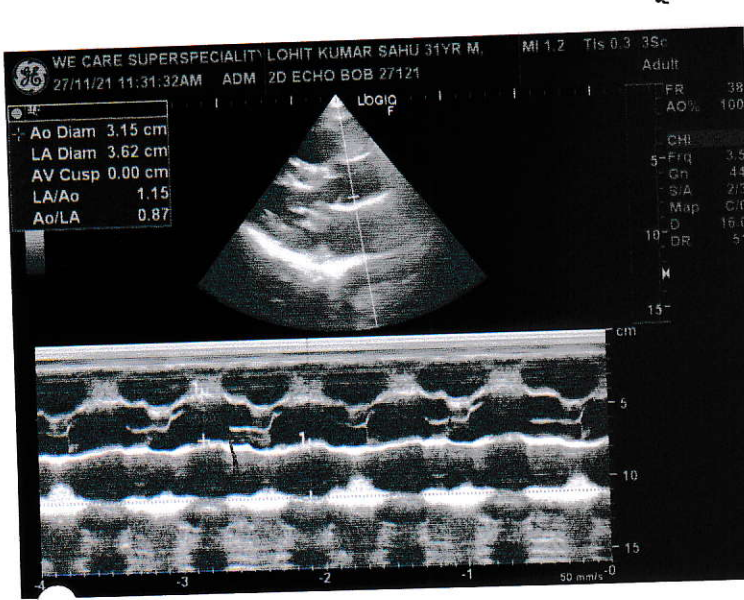
- Mitral Valve inflow shows E Wave < A Wave.

IMPRESSION.

- NO RWMA PRESENT AT REST.
 - NORMAL BIVENTRICULAR SYSTOLIC FUNCTION.
 - GLOBAL LVEF 60%.
 - NO AS/MS/TR/NO AR/NO MR.
- NO INTRACARDIAC CLOT, VEGETATION.


Dr. ANIS SIDDIQUI (MD, PGCCDM)

DR. ANIS SIDDIQUI
MBBS MD (Internal Medicine)
Reg. No.-CGMC380/05
DEPT. OF GENERAL MEDICINE
WE CARE HOSPITAL, RAIPUR (C.G.)



PATIENT NAME : MR. LOHIT KUMAR SAHU	RECEIPT NO. : PAC/27
UHID NO. : 30824	SAMPLE RECEIVED ON / AT : 27/11/2021 09:32AM
AGE / SEX : 31 Y Male	SAMPLE REPORTED ON / AT : 27/11/2021 03:09PM
CONSULTANT : DR ANIS SIDDIQUI	

COMPLETE BLOOD COUNT(CBC)

RBC

Haemoglobin (HB)	14.6	gm%	12 - 17mg/dl
Haematocrit (HCT)	43.2	%	40 - 55
RBC Count	5.85	millions/cumm	4.5 - 6
MCV	73.8	fL	78 - 92
MCH	25.0	pg	27 - 32
MCHC	33.8	g/dl	32 - 36
RDW-CV	14.2	%	11 - 16

WBC

Total Leucocyte Count (TLC)	6400		4000 - 11000
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Differential Leucocyte Count (DLC)

Neutrophils	67	%	40 - 75
Lymphocytes	26	%	20 - 40
Monocytes	05	%	0 - 8
Eosinophils	02	%	1 - 7%
Basophils	00	%	0 - 1


PLATELETS

PLT Count	2.36	lakhs/cmm	1.0 - 4.0
MPV	10.7	fl	8 - 11

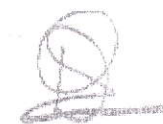
Advice

The test results are to be used for help in diagnosing/treating medical diseases & not for forensic applications. These result cannot be used fo medico-legal purposes. These reported results are for the information of referring clinical only.

Test Done By MEDONIC M-SERIES Fully Automatic.


Test Done By
Senior Technologist
SATYANARAYAN SINGH


Report Checked By
Technician


Pathologist
Dr. D. Prashant
M.D. (Pathologist)

PATIENT NAME : MR. LOHIT KUMAR SAHU
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HAEMATOLOGY

TEST	RESULT	UNIT	REF. RANGE
HbA1c (Glycosalated Haemoglobin)			
HbA1C-Glycosalated Haemoglobin	6.91	%	4 to 6% Non-diabetic 6 to 7% Excellent control 7 to 8% fair to good control 8 to 10% Unsatisfactory control Above 10% poor Control

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The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"


ESR	05	mm at 1hr	up to 15 mm (1 hr)
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Blood Group


ABO Group : O Rh Positive
SLIDE METHOD.

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Machine Footer


Test Done By
Senior Technologist
SATYANARAYAN SINGH


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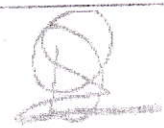
BIO CHEMISTRY

TEST	RESULT	UNIT	REF. RANGE
BSPP	260		<140 mg/dl
Urine SUGAR(PP)	Present (1.%)		ABSENT
GGT(GAMMA GT)			
GGT(GAMMA GT)	52	U/L	<55
LFT(Liver Function Test)			
Bilirubin - Total	0.65	mg/dl	0.2 - 1.3
Bilirubin - Direct	0.30	mg/dl	Adult : 0.0 - 0.4 Neonatal : - 0.0 - 0.6
Bilirubin (Indirect)	0.35	mg/dl	Adult : 0.0 - 0.9 Neonatal : 0.6 - 10.5
Total Proteins	6.54	g/dl	6.4 - 8.3 g/dl
Albumin	4.60	g/dl	3.5 - 5.2 g/dl
Globulin	1.94	g/dl	2.3 - 3.6
A/G Ratio	2.37		1.10 - 2.20
Alkaline Phosphatase	79	U/L	4 - 15 Yrs 54 - 369 20 - 59 Yrs 53-128 >60 Yrs 56 - 119
SGOT (AST)	33	U/L	upto 35 U/L
SGPT (ALT)	48	U/L	upto 45 U/L

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Lipid Profile			
Total Cholesterol	135	mg/dl	Desirable : <200 Borderline : 200 - 239 High : >= 240
Triglycerides	210	mg/dl	Normal: <161 High : 161 - 199 Hypertriglyceridemic : 200 - 499 Very High : > 499
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
HDL Cholesterol	33.3	mg/dl	35.3 - 79.5
LDL Cholesterol	59.70	mg/dl	60 - 165
<i>Note: The National Cholesterol Education Program Adult Treatment Panel III ((NCEP-ATP III) report.</i>			
VLDL Cholesterol	42	mg/dl	20 - 50
Total Cholesterol/HDL Ratio	4.05		0 - 5.1
LDLC/HDLC Ratio	1.79		2.5 - 3.5
Correlates with Lipid Profile:			
1. Fasting state: Fasting should begin 12 to 14 Hrs before the sample collection. This includes all beverages, although water is permitted. No alcohol should be taken 24 before sample collection.			
2. Drugs: Cholesterol and Triglyceride lowering agents. Please repeat with fresh sample if clinically indicated.			
<i>The test has been performed on fully-Automated Biochemistry Analyser "ERBA EM 200"</i>			
KFT(KIDNEY FUNCTION TEST)			
Urea	24	mg/dL	15 - 45
Serum Creatinine	0.81	mg/dl	0.70 - 1.40 mg/dL
Uric Acid	5.2	mg/dL	3.5 - 7.2
<i>Test Done By MICRO LAB 300 Fully Automatic.</i>			


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PATHOLOGY			
TEST	RESULT	UNIT	REF. RANGE
BSF (Fasting Sample Required)	130		<110 mg/dl




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CLINICAL PATHOLOGY			
TEST	RESULT	UNIT	REF. RANGE
URINE SUGAR(F)			
Urine Sugar (Fasting)	Present (2.0%)		ABSENT




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ROUTINE URINE ANALYSIS TEST

TEST	RESULT	UNIT	REF. RANGE
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Urine Routine ANALYSIS TEST

General Examination

Volume	20	ml	10 - 50
Colour	Straw		Pale Yellow
Appearance	Clear		Clear
pH	5.0		5.5 - 8.0


Chemical Examination

Urine Protein(Albumin)	Absent	g/L	Absent
Urine Glucose(Sugar)	Present 3 +	mmol/L	Absent
Urine Ketons(Acetone)	Absent	mmol/L	Absent
Specific Gravity	1.000		


Microscopic Examination

Pus cells	1-2	/hpf	<5
RBC (Urine)	Nil	/hpf	Nil
Epithelial cell	1-2		0-4
Casts	Absent		Absent
Crystals	Absent		Absent

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THYROID HORMONES			
TEST	RESULT	UNIT	REF. RANGE
THYROID HORMONES			
T3 (Triiodothyronine)	1.37	ng/ml	0.5 - 2.0
Remarks: 1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc.			
T4 (Thyroxine)	7.8	µg/dl	4.4 - 10.8
Remark: 1. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites, pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc.			
TSH	2.20	µIU/ml	0.39- 6.16 µIU/ml
Remarks: 1. 4.51 to 15 µIU/ml - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH. 2. TSH values may be transiently altered because of non thyroidal illness like severe infection, liver disease, renal and heart failure, severe burns, trauma and surgery etc. 3. Drugs that decreases TSH values e.g. L-dopa, Glucocorticoids Drugs that increases TSH values e.g. Iodine, Lithium, Amiodarone.			
METHOD - ELISA ACCUBIND			



Test Done By
Senior Technologist
SATYANARAYAN SINGH



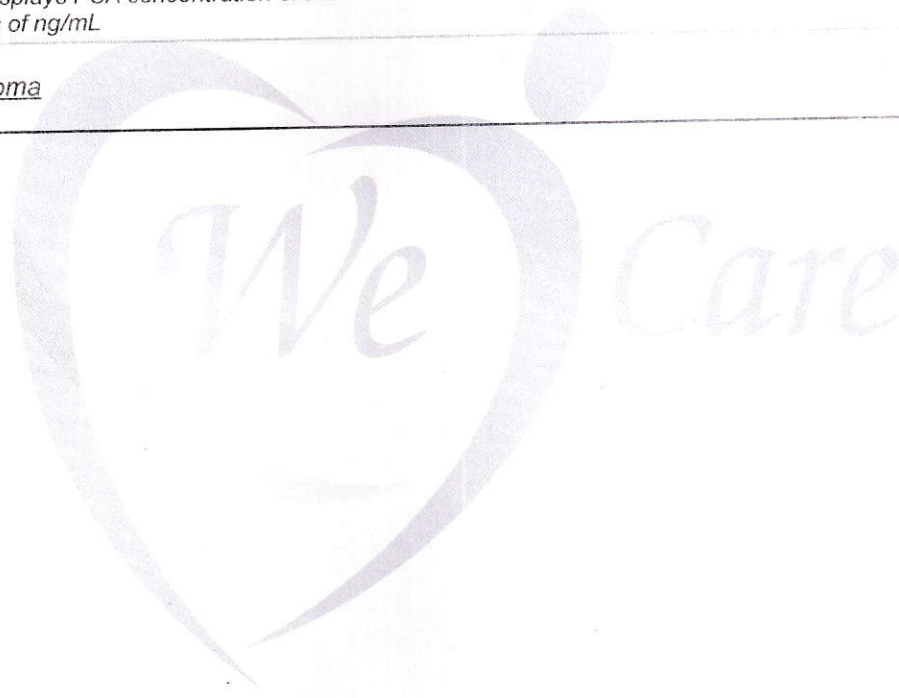
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TUMOR MARKERS			
TEST	RESULT	UNIT	REF. RANGE
PSA (Total)	0.42	ng/mL	> 4.00
<i>The instrument for ichroma test calculate the test result automatically and displays PSA concentration of the test sample in terms of ng/mL</i>			
<i>Test done by ichroma</i>			




Test Done By
Senior Technologist
SATYANARAYAN SINGH

Report Checked By
Technician


Pathologist
Dr. D. Prashant
M.D. (Pathologist)

PATIENT'S NAME: LOHIT KUMAR SAHU 31YR M
REFERRED BY: DR A SIDDIQUI
MRD NO: XR CHEST 30824 PS 27

STUDY TIME: 27-11-21
REPORT TIME: 27/11/21 1:15 PM
PRINT TIME: 27/11/21 3:24 PM

STUDY: XRAY OF THE CHEST PA VIEW

INDICATION: Routine Health check up. No complaints otherwise.

COMPARISON: None.

OBSERVATIONS & CONCLUSION:

NO ACUTE BONY PATHOLOGY IS SEEN.

NO PULMONARY INFILTRATE, COLLAPSE OR CONSOLIDATION, EFFUSION, OR PNEUMOTHORAX IS SEEN.

TRACHEA IS IN MIDLINE.

NO CARDIOMEGALY IS SEEN.

THE SOFT TISSUES DEMONSTRATE NO ACUTE PATHOLOGY.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST



PATIENT'S NAME: LOHIT KUMAR SAHU 31YR M
REFERRED BY: DR A SIDDIQUI
MRD NO: USG ABD271121

STUDY TIME: 27-11-21
REPORT TIME: 27/11/21 3:07 PM
PRINT TIME: 27/11/21 3:24 PM

STUDY: USG OF THE ABDOMEN

INDICATION: Routine health check up.

COMPARISON: None.

OBSERVATIONS:

Liver is enlarged measuring 164 mm in craniocaudal extent. Moderate diffuse increase in parenchymal echogenicity is noted. No obvious focal lesion is seen. Intrahepatic biliary radicles are not dilated.

Spleen is enlarged measuring 143 mm in size. No focal lesion is seen within splenic parenchyma.

Pancreas appears normal in size and echopattern. Pancreatic duct is not dilated. No obvious pancreatic parenchymal calcifications are seen either.

Gall bladder is well distended. No calculus is seen. Wall thickness is normal. CBD is normal.

Portal vein is normal. IVC and aorta are unremarkable.

Right kidney measures 119 x 54 mm in size. Left kidney measures 110 x 60 mm in size. Both kidneys are normal in size, shape, position and echogenicity. Corticomedullary differentiation is maintained. No focal lesion is noted. No evidence of calculus or hydronephrosis is noted.

Urinary bladder is well distended. Wall thickness appears normal.

Prostate is normal in size measuring 38 x 26 x 44 mm in size, 23 mL in volume, and normal in shape and echotexture.

No free fluid is seen. No significant lymphadenopathy is seen.

CONCLUSION:

Mild Hepatosplenomegaly with Grade 2 Fatty Liver Changes.

DR NEERAJ GAUTAM
DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST



