

MEERUT HISTO-PATHOLOGY CENTRE MEERUT

Dr. Medha Jain

M.D (Path)

PATHOLOGIST

302 Western Kutcheri

(Opp Tyagi Hostel)

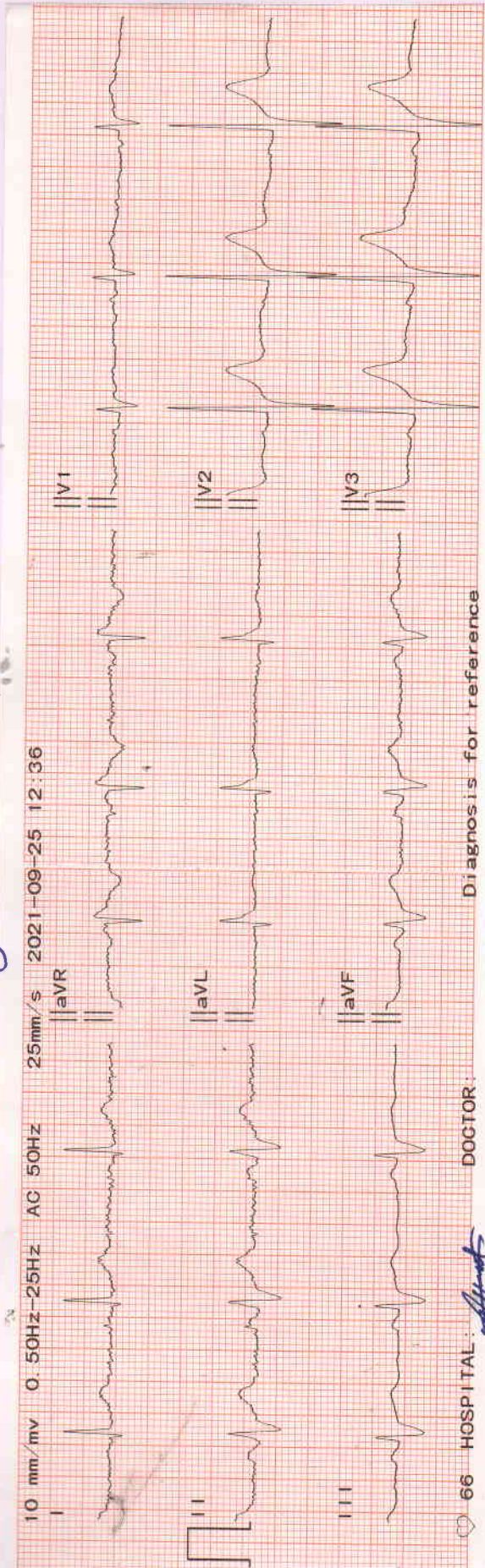
Ph-0121-4009679,9927286318

PHYSICAL ASSESSMENT FORMAT			
Date of Examination	25/09/21		
NAME	Sagay.		
DOB	01/10/1995	Gender	Male.
HEIGHT (cm)	169	WEIGHT (Kg)	78.
CHEST (cm)	97	ABDOMEN (cm)	91
B.P	128/80		
Present Ailments (if any)	nil		
Details of Past ailments any surgery or hospitalization or Blood transfusion	nil		
Details On Medications (if any)	nil		
HABITS (Tobacco /Alcohol ect.)	nil		
BMI	27.3		

Insured's Sign

Dr. Vishwa Deepak
Doctors Sign
M.B.B.S., M.S.
Consulting Physician & Surgeon
Reg. No. : 13296

Sagay 25/09/21



66 HOSPITAL: *affinity* DOCTOR:

V4	V5	V6	mmHg	kg
ID	NAME	AGE	yr	cm
2109250005				
HR	P Dur	PR int	QRS Dur	QT/QTc int
66 bpm	92 ms	140 ms	114 ms	365/384 ms
P/QRS/T axis	RV5/SV1 amp	RV5+SV1 amp	RV6/SV2 amp	
61/-45/48 °	1.605/0.306 mV	1.911 mV	1.398/1.176 mV	

Dr. Vigneshwara Deepak
M.B.B.S., M.S.
Consulting Physician & Surgeon
Reg. No.: 13256

ECGwNL



Quality Management Services
ISO-9001:2015 Certified Lab

MEERUT HISTOPATHOLOGY CENTRE

Laboratory Test-Report

NAME : Mr. Sagar
REFERRED BY : Dr. BOB
SAMPLE : Blood, Urine

DATE : 25/09/2021
AGE :
SEX : Male

TEST NAME	RESULTS	UNITS	REF.-RANGE
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HAEMATOLOGY

Complete Blood Counts	-		
HAEMOGLOBIN	13.0	GM%	13.5 - 17.5
TOTAL LEUCOCYTE COUNT :	5,700 cells	/Cu mm	4,500-11,000
DIFFERENTIAL LEUCOCYTE COUNT :			
Neutrophils :	55	%.	50-70
Lymphocytes :	40	%.	25-40
Eosinophils :	02	%.	1-4
Monocytes :	03	%.	3-8
Basophils :	00	%.	0-1
TOTAL R.B.C. COUNT	4.6	million/cu mm	4.5 - 6.5
PLATELET COUNT :	170	thousand/cum	150-450
P.C.V.	39.2	%.	35 - 54
MCV	85.2	fL	76-98
M C H	28.2	pg	27 - 32
M C H C	33.1	g/dl	31-35
E.S.R. (Westergren Method) :	14	mm in 1st Hr	0-15

BLOOD GROUP :

Major Blood Group :
Rh Blood Group :

AB
Positive
(Comment)

Forward grouping by SLIDE METHOD.

All NEGATIVE blood groups to be confirmed at an authorized blood - bank.

BIOCHEMISTRY

BLOOD SUGAR (FASTING)	80.1	mg/dL	70 - 100
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--{End of Report}--



Dr. Medha Jain

M.B.B.S., (M.D. Path)

Consultant Pathologist

Formerly Lecturer Medical College Meerut

DR. KUMKUM DEEPAK MEMORIAL CENTRE, 302, W.K. ROAD, MEERUT

CALL : 0121-4009679, 09927286318, 7906584952, 9639251854

24 Hour Service, Home Visit

All Investigations have their limitation which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the specimen received by the laboratory. Isolated laboratory investigation never confirm the final diagnosis of the disease. They only help in arriving at a diagnosis in conjunction with clinical presentation and other related investigation.

NOT FOR MEDICO LEGAL PURPOSE

Dr. Medha Jain
Reg. No.-G-35296 Gajrat
CMO. Reg. No.-MRT 869, Meerut



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BIOCHEMISTRY			
SERUM CREATININE :	0.9	mg/dL.	0.8 - 1.5
BLOOD UREA NITROGEN :	15.6	mg/dL.	5 - 25
LIPID PROFILE :			
SERUM TRIGLYCERIDE:	139.4	mg/dl	50-160
SERUM CHOLESTEROL :	212.8	mg/dL.	130 - 200
HDL CHOLESTEROL :	53.1	mg/dL.	30 - 70
VLDL CHOLESTEROL :	27.8	mg/dL.	25 - 40
LDL CHOLESTEROL :	131.9	mg/dL.	85 - 150
CHOL/HDL CHOLESTROL RATIO	4.0	Low Risk Mod.Risk High Risk	0.0 - 3.5 3.5 - 5.0 > 5.0
LDL/HDL RATIO	2.5	Normal Range High Risk	2.5 - 3.0 > 3.0
LIVER FUNCTION TEST			
SERUM BILIRUBIN :			
TOTAL:	0.70	mg/dL.	0.2 - 1.0
DIRECT:	0.27	mg/dL.	0.1 - 0.3
INDIRECT:	0.43	mg/dL.	0.2 - 0.7
S.G.P.T. :	33.1	U/L	5 - 45
S.G.O.T. :	36.9	U/L	5 - 45
G.G.T.P. :	15.4	U/L	5.0-35.0 (37 C)
SERUM ALK. PHOSPHATASE :	89.6	IU/L.	25-100
SERUM PROTEINS :			
TOTAL PROTEINS:	7.2	Gm/dL.	5.5 - 8.5
ALBUMIN:	4.8	Gm/dL.	3.5 - 5.5
GLOBULIN:	2.4	Gm/dL.	2.3 - 3.5
A : G RATIO:	2.0		
SERUM URIC ACID :	4.1	mg/dL.	2.5 - 7.0

--{End of Report}--

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HORMONE

THYROID PROFILE :			
Triiodothyronine (T3) :	1.69	nmol/litre.	0.95-2.5
Thyroxine (T4) :	102.3	nmol/litre.	60-120
THYROID STIMULATING HORMONE(TSH)	2.77	micro Iu/ml.	0.20-5.0
	Low Levels of T3 & T4 are seen in Non-Thyroidal illness		- Primary, Secondary & Tertiary Hypothyroidism and some
	High Levels of T3 & T4 are found in and T3 Thyrotoxicosis		- Grave's Disease, Hyperthyroidism, Thyroid hormone re
	TSH Levels are raised in		- Primary Hypothyroidism
	TSH Levels are Low in		- Hyperthyroidism, Secondary Hypothyroidism.

CLINICAL PATHOLOGY

URINE EXAMINATION REPORT :

PHYSICAL EXAMINATION :

Volume :	25	ml
Colour :	Pale Yellow	
Appearance :	Clear	
Odour:	Aromatic	
Sediments :	Nil	
Sp. Gravity:	1030	

BIOCHEMICAL EXAMINATION :

Sugar :	Nil
Albumin :	Nil
Reaction :	Acidic

MICROSCOPIC EXAMINATION :

Red Blood Cells :	Nil	/H.P.F.
Pus Cells :	2-3	/H.P.F.
Epithelial Cells :	4-6	/H.P.F.

GLYCOSYLATED HAEMOGLOBIN A1c	5.5	%	4.3 - 6.4
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Clinical significance :- The HbA1c concentration in blood is directly proportional to the mean concentration of glucose prevailing in the previous 6-8 wks, equivalent to the life time of erythrocytes.

Normal Range :-
Non-Diabetics - 4.3 - 6.4%
Goal 6.5 - 7.5%
Good control 7.5 - 8.5%
Poor control > 8.5%

--{End of Report}--

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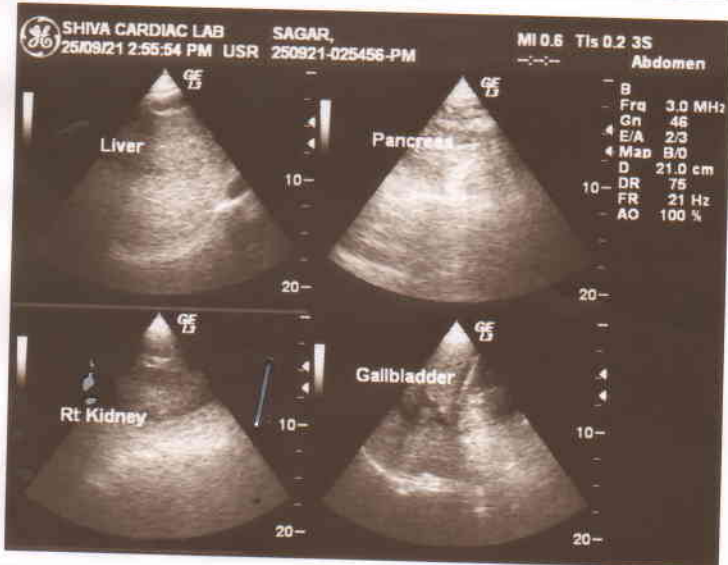
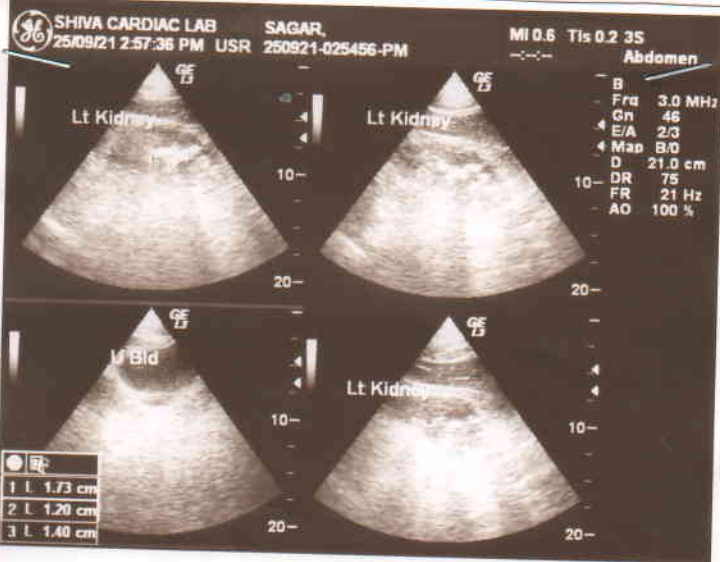
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Shiva Cardiac Lab. & Diagnostic Research Centre Pvt. Ltd.



Near Chaurasia Nursing Home
Chhipi Tank, Meerut

Ph.: 2664558, 9412578957
7669508292, 8449796280

Name : SAGAR
Age/sex : 25 YRS / MALE
Doctor :
Date : 25.09.2021
Clinically : pain abdomen

ULTRASOGRAPHY WHOLE ABDOMEN

LIVER is normal in size & position. Echotexture also normal
No focal abnormal echogenic lesion seen.
CBD is normal. (6mm) Portal vein also normal.
I.H. Biliary channels are not dilated. Dome movements are not restricted.

GALL BLADDER -
Is normal in size shape and echotexture.
Wall thickness normal. No stone or mass seen.

KIDNEYS -
Both kidneys are normal in size shape & echo texture
Cortico-medullary distinction normal on Both side.
MULTIPLE LARGE VARIOUS SIZE OF CALCULUS DENSITY
APPX 9-17 mm SEEN IN LEFT KIDNEY
No stone seen RT side.
No hydronephrosis seen both side

PANCREAS is normal in size & shape and echo texture.
Head body and tail normal.

SPLEEN is normal in size.. No evidence of focal lesion.

PROSTATE is normal.
Echotexture is normal
Capsule is intact.

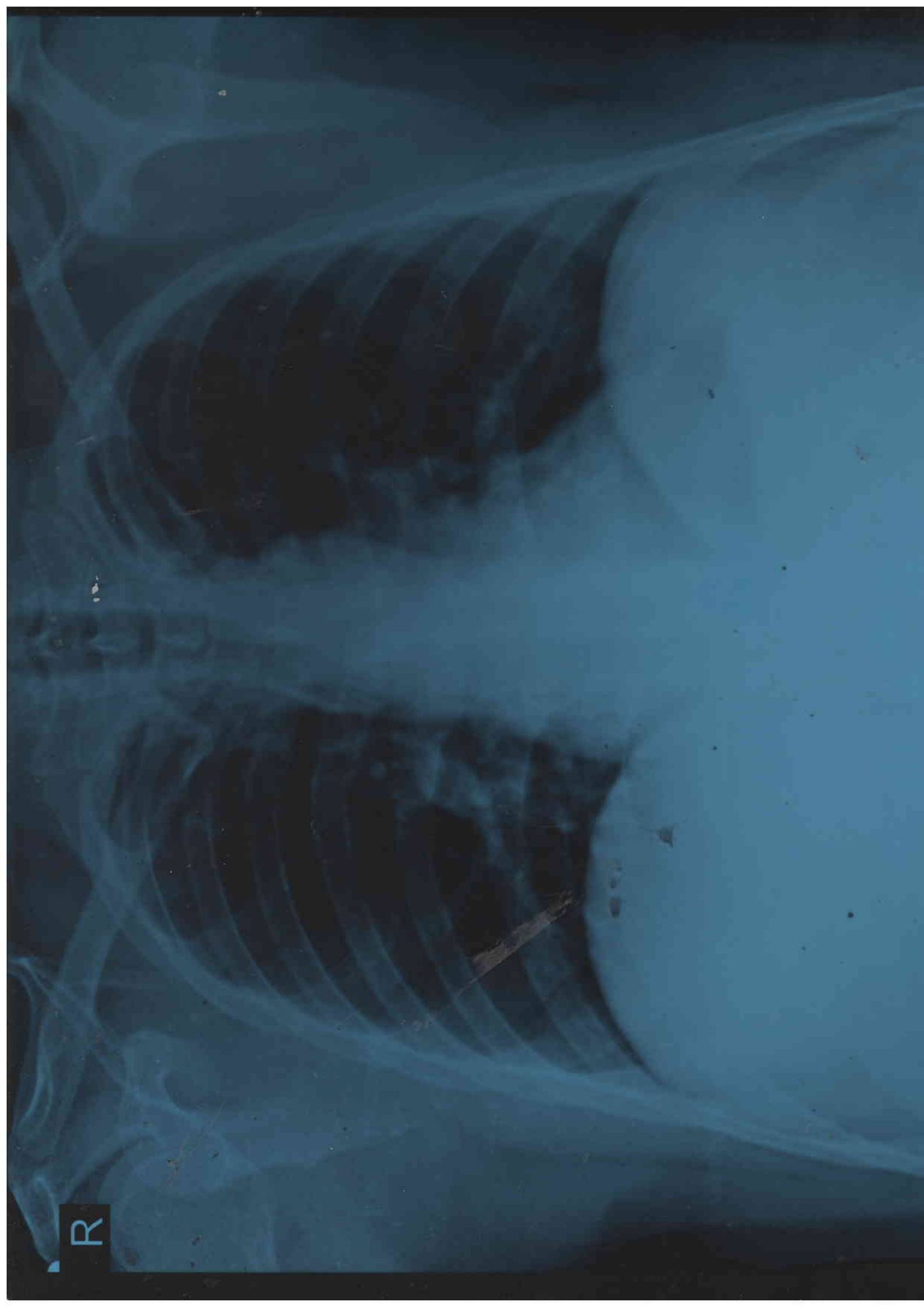
URINARY BLADDER
Is well distended with normal wall thickness and contour.
No calculus / growth seen
No lymph nodes , pleural effusion , or ascites is seen.

IMP- MULTIPLE LEFT RENAL CALCULUS

CONSULTANT:
DR S.CHARAN
MD.(SONOLOGIST)

NOTE : All modern Machines/Procedures have their limitation, if there is a variance clinically, this examination may be repeated or re-evaluated by other investigations.

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R



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MR SAGAR
25 YRS/ FEMALE
DR.
SEP. 25 . 2021

RADIOGRAPH CHEST PA VIEW (IN DEEP INSPIRATION)

- * Bony cage and soft tissues are normal.
- * Trachea is central.
- * **Both hila are prominent**
- * Both CP angle are clear.
- * Cardiac size is normal.
- * Both domes of diaphragm are normal.
- * Both lungs fields are normal.

CONSULTANT
DR. TANUJ GARG
MD. (RAD.)

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