



PANCHMUKHI HOSPITAL

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT

Dr C P Dadhaniya
Dr R C Dadhaniya
MBBS, Dip.G.O, Diabetologist

Mo.9925333639,8320711901

policy number :
full name : Nishant Dave
identity proof : Aadhaar card
identity proof no : 5988
gender : male / 41 years
height : 172
weight : 74
BP : 120/80
pulse : 66/min Regular
blood sample : yes
fasting mode : yes
non fasting mode : yes

past history : NO

Dental : No smile

Romberg Test :

Colour vision : No smile

Dr. C. P. DADHANIYA
M.B.B.S. C.I.H
Regd. No. 65798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT.



NAME: Nishant Deve
AGE/GENDER: male / 41 years

DIAG. DATE: 06-01-24

PATIENT'S REFRACTION DETAILS

		SPHE	CYL	AXIS	VN
R	D	N	N	N	6/6
	N	N			6/6
L	D	N	N	N	6/6
	N	N			6/6

REMARKS:

CHECKED BY: Dr. C. P. Dadhaniya

Dr. C. P. DADHANIYA
M.B.B.S., C.I.H.
Regd. No. 9798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
RING ROAD, RAJKOT

Scanned with OKEN Scanner



भारत सरकार

Government of India



Issue Date: 31/10/2011



Nishant Dave
DOB : 12/04/1982
Male

J

आधार पहचान का प्रमाण है, नागरिकता का नहीं।
Aadhaar is a proof of identity, not of citizenship.

4170 2191 5988

मेरा आधार, मेरी पहचान



Dr. C. P. DASHMATHA
M.S., C.I.H
Regd. (C.I.H) 198
PANKAJ K. G.S.P.114

[Handwritten signature]

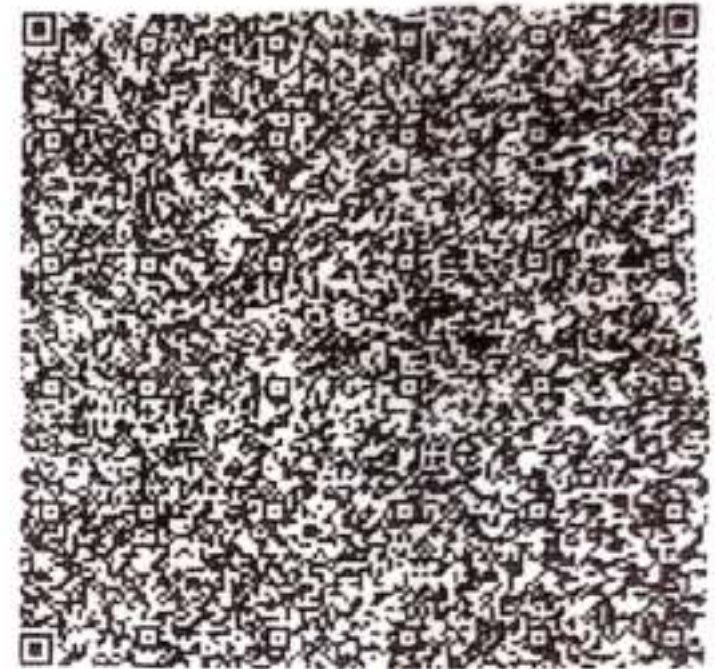


भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



Address: C/O: Nirad Kumar Dave, Tower-C
Flat No/101, Rosewood Residency, Opp
Shivanjali Society, B/H Yash Complex Off,
Gotri Road, Vadodara, Vadodara, Gujarat,
390021



Print Date: 14/10/2023

4170 2191 5988



1947



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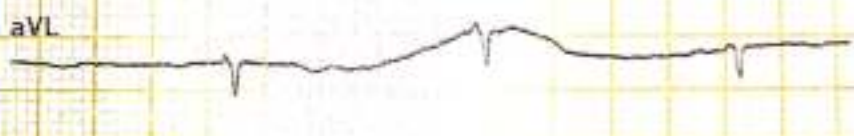
Dr. C. P. DARNANIYA
M.B.B.S., C.I.H
Regd. No. G19798
PUNCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD RAJKOT

10mm/mV AUTO

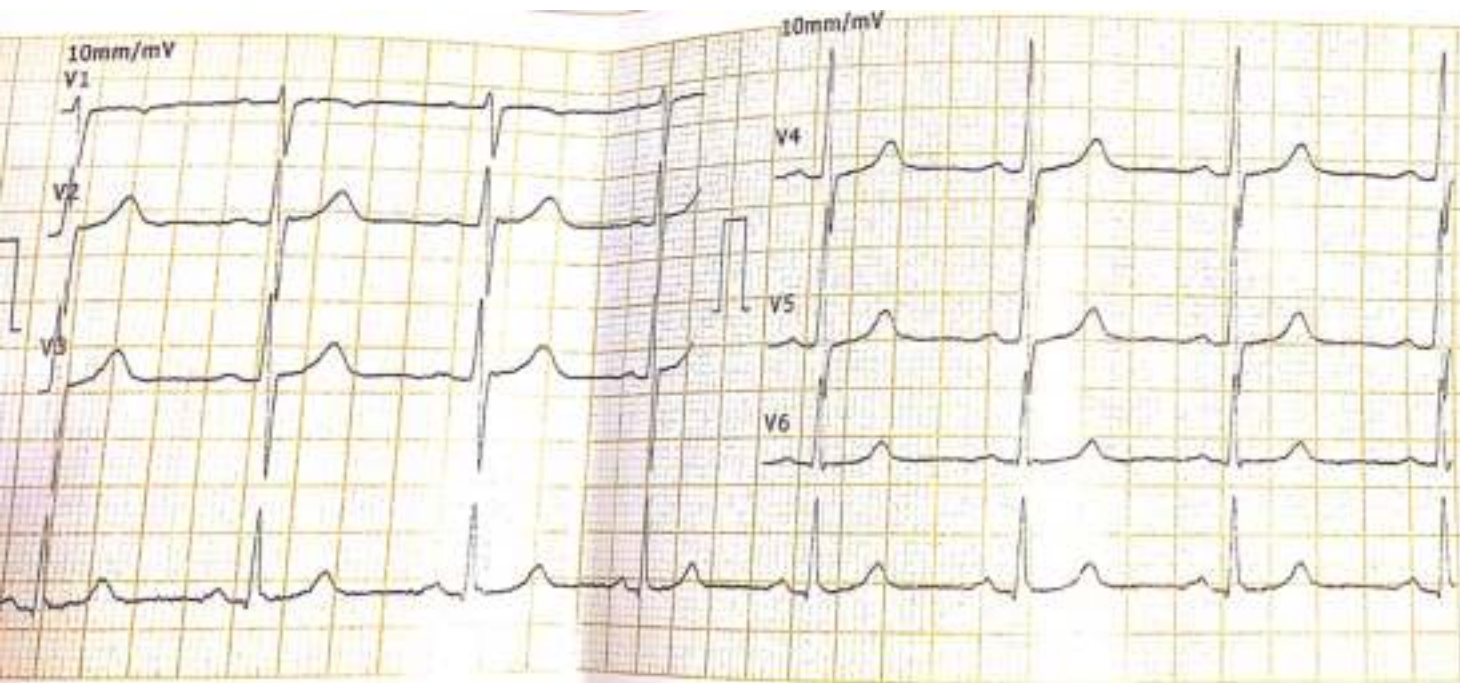


25mm/s AC:ON 0.05-35Hz

10mm/mV



10m
V1
V2
V3



2024-1-6 8:56:55 ID:00003694

ID Card:
 Name: Nishant Dave Gender: male
 Age: 41 Height(cm):
 Weight(Kg): BP(mmHg):

HR..... bpm 65
 P-R..... ms 150
 Q-R-S..... ms 83
 QT/QTc..... ms 410/426
 P/QRS/T AXES..... deg 56/70/70
 RV5/SV1..... mV 1.44/0.59
 RV5+SV1..... mV 2.03

*The result must be reviewed by doctor!
 Report Confirmed by:



भारत सरकार

GOVERNMENT OF INDIA



निशांत दावे

Nishant Dave

जन्म तिथि/ DOB: 12/04/1982

पुरुष / MALE

4170 2191 5988



आधार-आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

S/O निराद कुमार दावे,
फ-४, जीवन आवास, नार
ल.इ.क. ओफिस, सिटी
सेक्टर, एश,
मध्य पर - 474011

Address:

S/O Nirad Kumar Dave, F-4,
JEEVAN AWAS, NEAR L.I.C.
OFFICE, CITY CENTER, Gwalior,
Madhya Pradesh - 474011



1947
1800 300 1947



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WWW

www.uidai.gov.in

P.O. Box No. 1947,
Bengaluru-560 001





Mediwheel nishant
dave

GPS Map
Camera Lite

SJ Patel Notary & Advocate 1st Floor, Shaneshwar
Complex, Poonam Society, Chandreshnagar, Rajkot,
Gujarat 360004, India

Latitude

22.2654472°

Longitude

70.7844326°

Local 09:02:36 AM

GMT 03:32:36 AM

Altitude 145 meters

Saturday, 06.01.2024

Tread Mill Test

Patient Name	:	Nishant Dave	Age	:	41yrs/M
Ref. By	:	Dr. C.P.Dadhaniya	Resting BP	:	130/80
Report Date	:	06/01/2024	Max. BP	:	160/80

Patient Reaches exercise limit at 10.80 METS.

No signs of ischemia at the exercise level and during recovery.

Adequate increase of HR & BP.

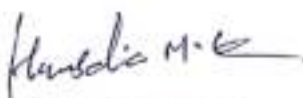
No significant Arrhythmia.

The stress test was terminated after 9:30 minutes as patient complained of Fatigue.
Patient achieved 91% THR without chest pain.

The recovery was uneventful.

Good effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.


DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

CURE CARDIOLOGY CLINIC

2nd floor, Kansagra Hospital, Astron Chowk, Sardarnagar main road, RAJKOT - 360 001. Ph. 0281-2483799, M. 93 13 12 19 87

CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273/NISHANT DAVE
 Date: 06-Jan-2024 10:17:08 AM
 Ref. By : DR. C P DADHANIYA
 Medication :
 Objective :

Protocol : BRUCE
 History :

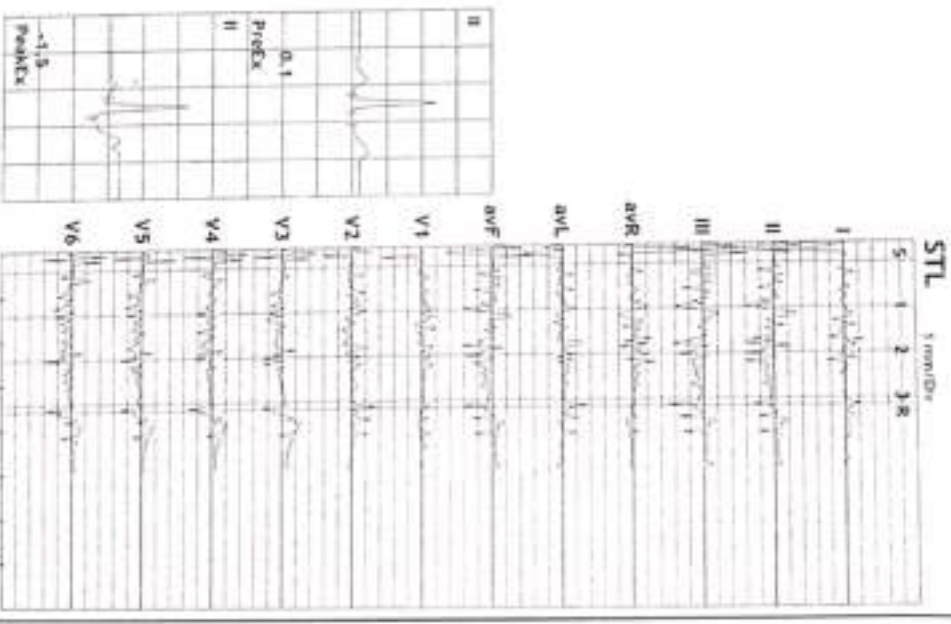


Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. (x100)	PVC	Comments
Supine	0:01	1:02	0.0	0.0	1.0	77	130/80	100	3	
Standing	0:01	1:06	0.0	0.0	1.0	76	130/80	98	-	
HV	0:01	1:14	0.0	0.0	1.0	78	130/80	101	-	
ExStart	0:01	1:17	0.0	0.0	1.0	76	130/80	98	-	
Stage 1	3:00	3:00	2.7	10.0	4.6	98	140/80	137	-	
Stage 2	3:00	6:00	4.0	12.0	7.0	119	150/80	178	-	
Stage 3	3:00	9:00	5.5	14.0	10.2	152	160/80	243	-	
Peakx	0:28	9:29	6.8	16.0	10.8	162	160/80	259	-	
Recovery	1:00	9:31	0.0	0.0	4.4	109	160/80	174	-	
Recovery	2:00	9:31	0.0	0.0	1.0	104	150/80	156	-	
Recovery	3:00	9:31	0.0	0.0	1.0	94	140/80	131	-	
Recovery	4:00	9:31	0.0	0.0	1.0	92	130/80	119	-	

Findings :

Exercise Time : 9:30 minutes
 Max HR attained : 162 bpm 91% of Max Predictable HR 179
 Max BP : 160/80(mmHg)
 Workload attained : 10.8 (Good Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 9:23

Advice/Comments:



CURE CARDIOLOGY CLINIC
ZND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 77 bpm
 METS: 1.0
 BP: 130/80

MPHR: 43% of 179
 Speed: 0.0 mmph
 Grade: 0.0%

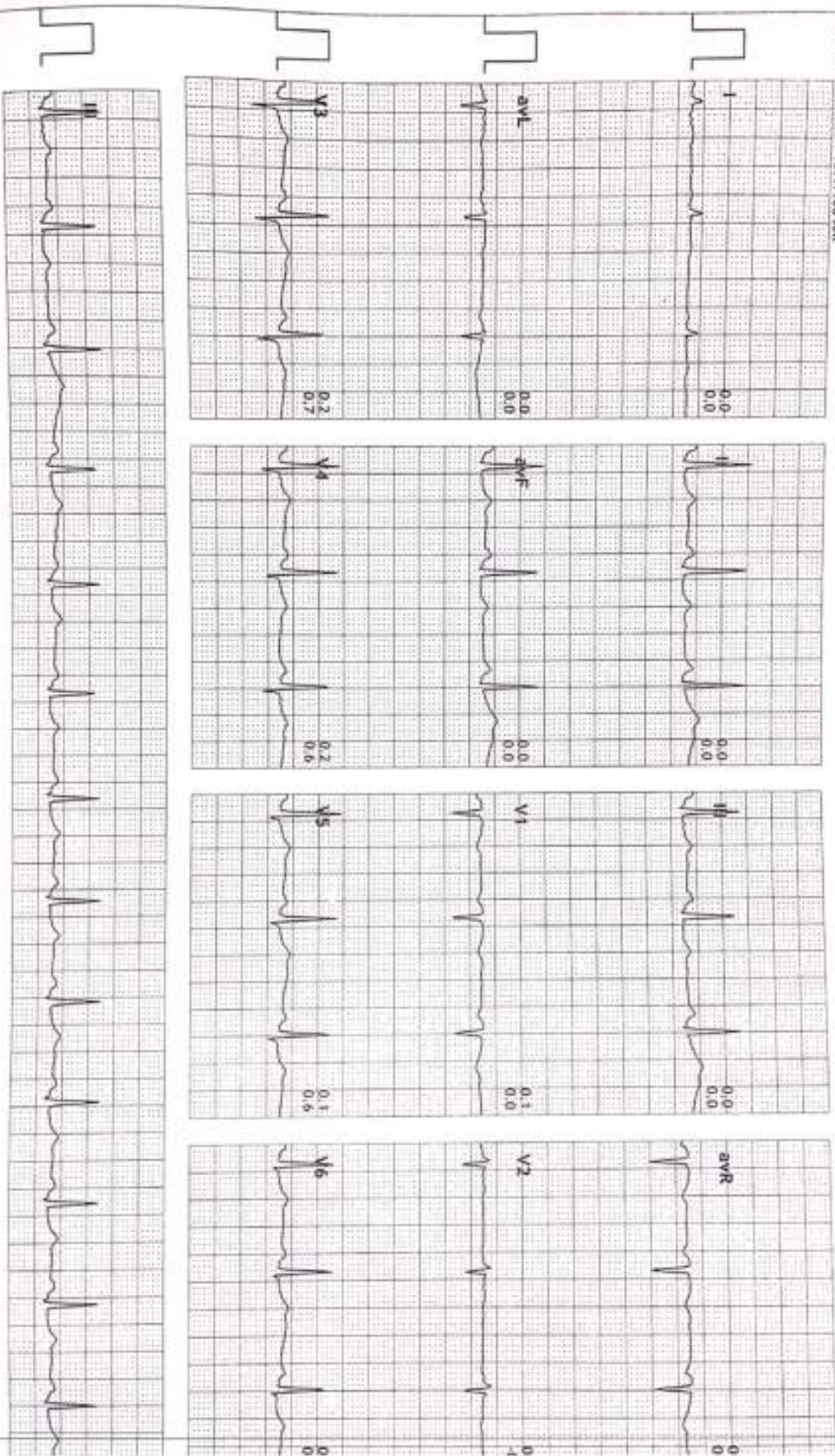
Raw ECG
 8RUCE
 10.05-100Hz

Ex Time 01:01
 RLC :On
 HATCH :On

Supine
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 76 bpm
 METS: 1.0
 BP: 130/80

MPHR: 42% of 179
 Speed: 0.0 length
 Grade: 0.0%

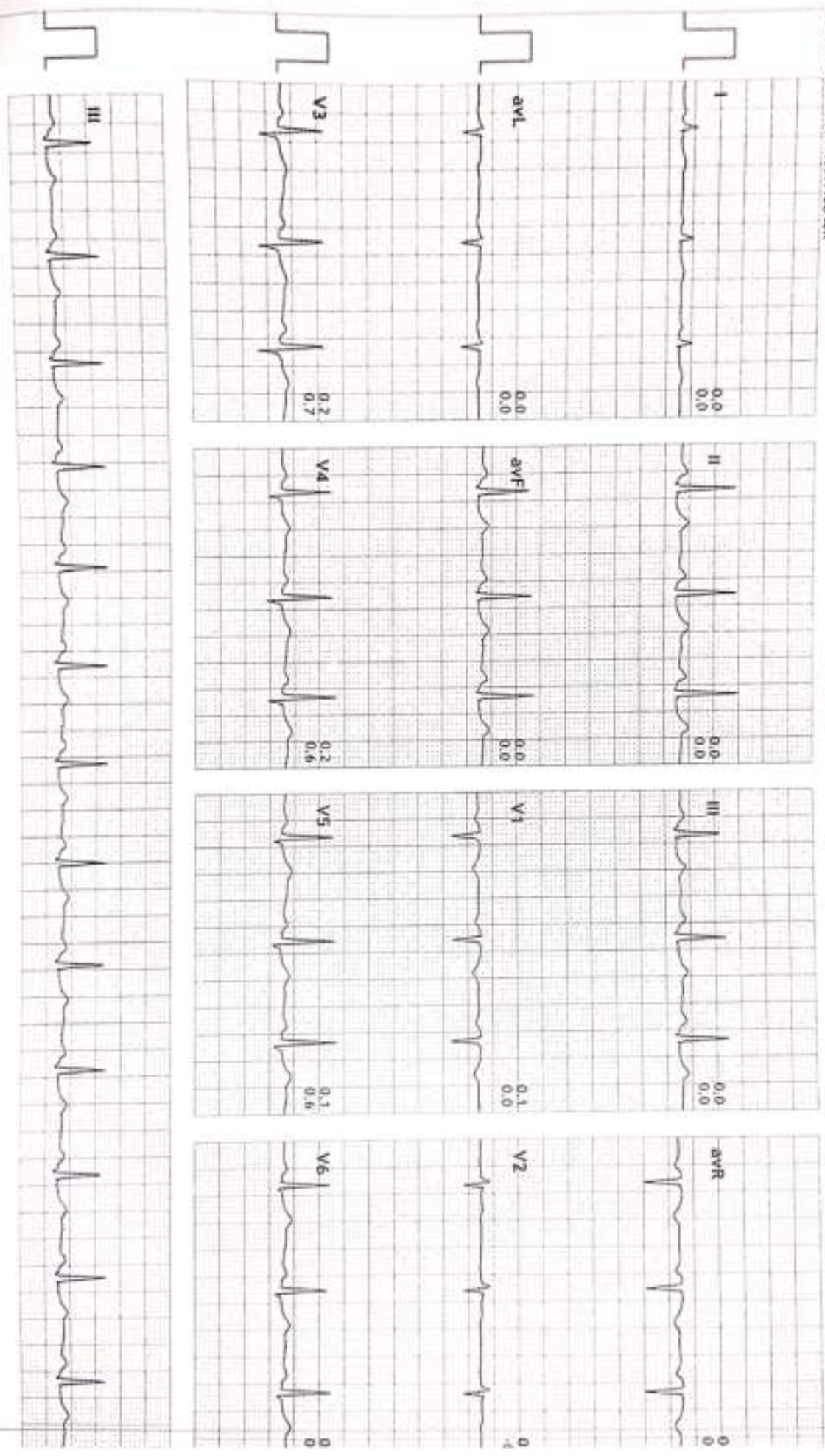
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 01:05
 BLC :On
 Motion :On

Standing
 10.0 mm/mv
 25 mm/Sec.



3x4+1 Rhythm Lead



DR MAULIK HANSALIA/DR NISHANT SIRODARIYA

CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

Hb: 78 bpm
 METS: 1.0
 BP: 130/80

MPHR: 43% of 179
 Speed: 0.0 mmph
 Grade: 0.0%

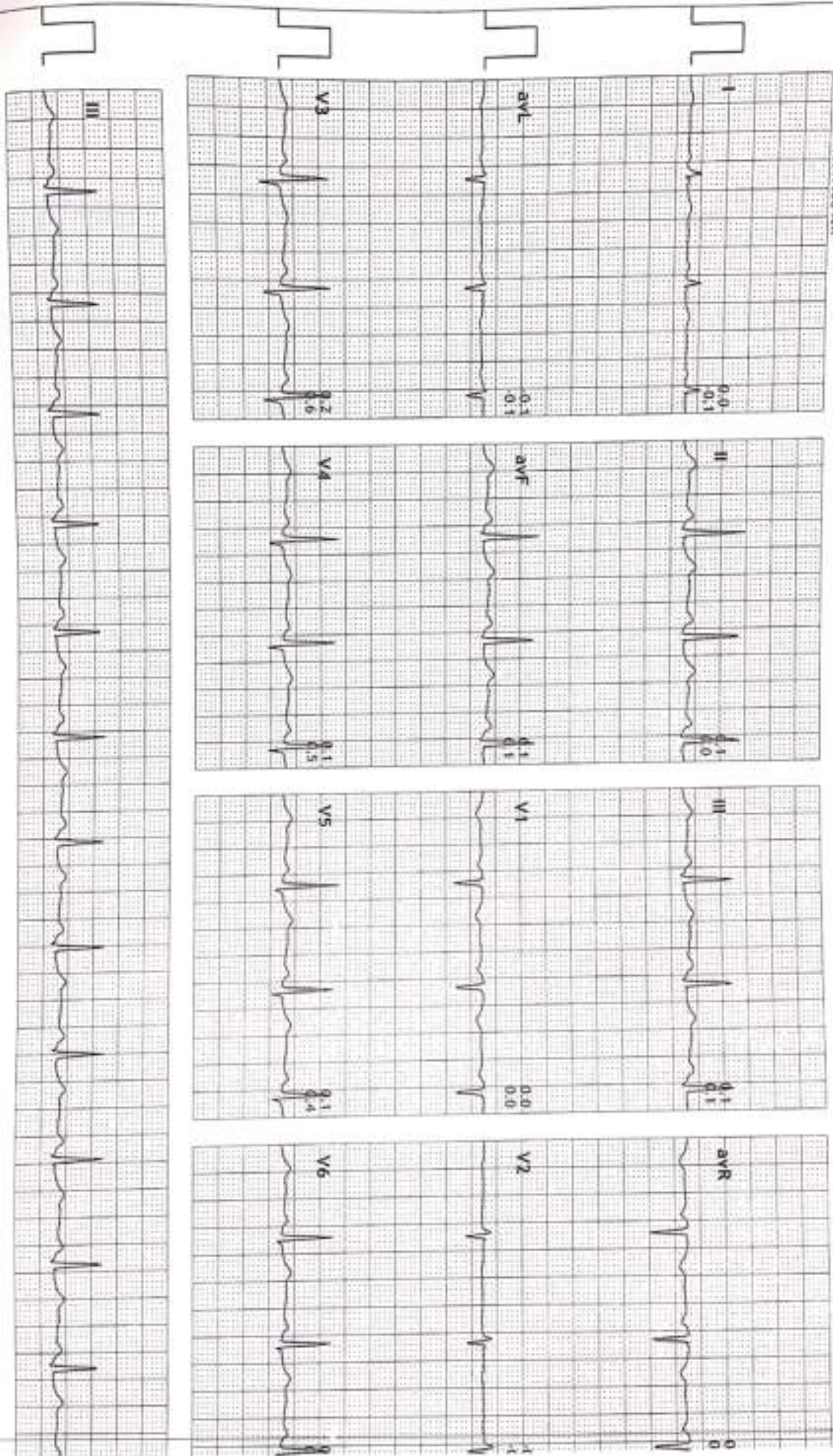
Raw ECG
 BRUCE
 @ 05-100MHz

Ex Time 01:13
 BLC : On
 Notch : On

HV
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 76 bpm
 RRTS: 1.0
 BP: 130/80

APHR: 42% of 179
 Speed: 0.0 kmph
 Grade: 0.0%

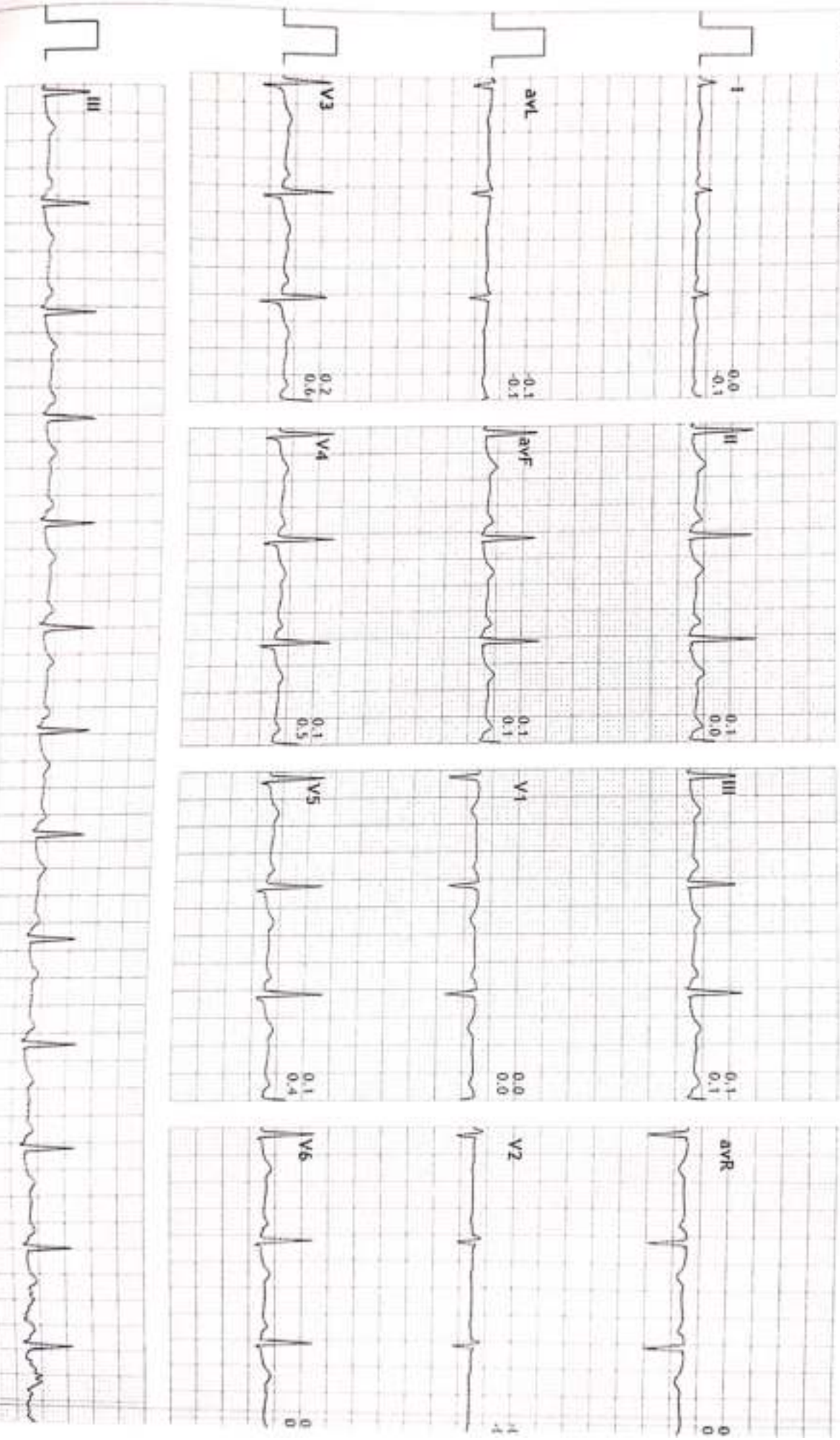
Raw ECG
 DRUCE
 (0.05-100)Hz

Ex Time 01:16
 BLC :On
 Holch :On

ExStart
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 98 bpm
 METS: 4.6
 BP: 140/80

MPHR:54% of 179
 Speed: 2.7 mmph
 Grade: 10.0%

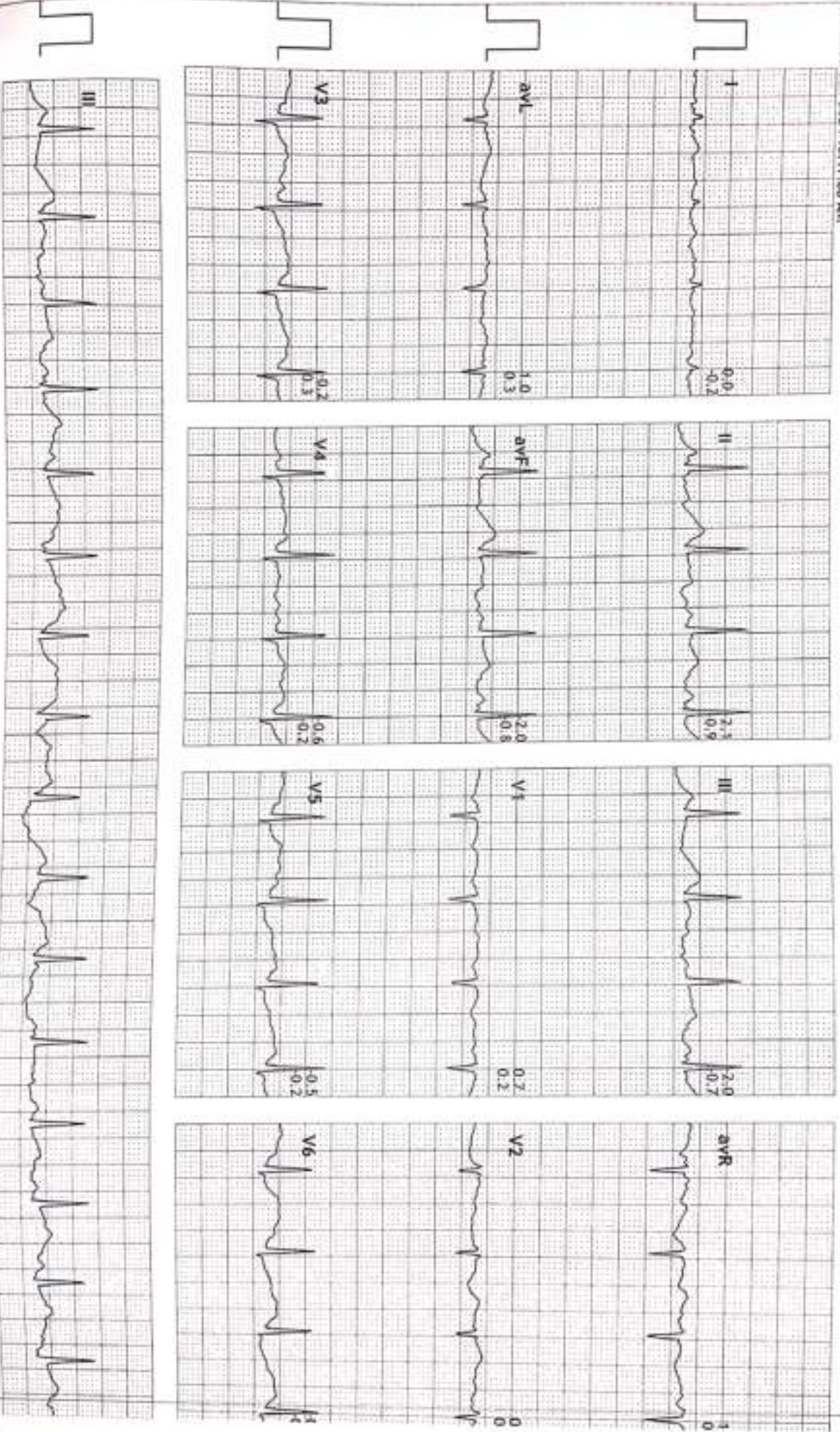
Raw ECG
 BRUCE
 10.05-100/Hz

Ex Time 02:59
 BLC :On
 Notch :On

BRUCE:Stage 1
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 119 bpm
 METS: 7.0
 BP: 150/80

MPHR: 65% of 179
 Speed: 4.0 kmph
 Grade: 12.0%

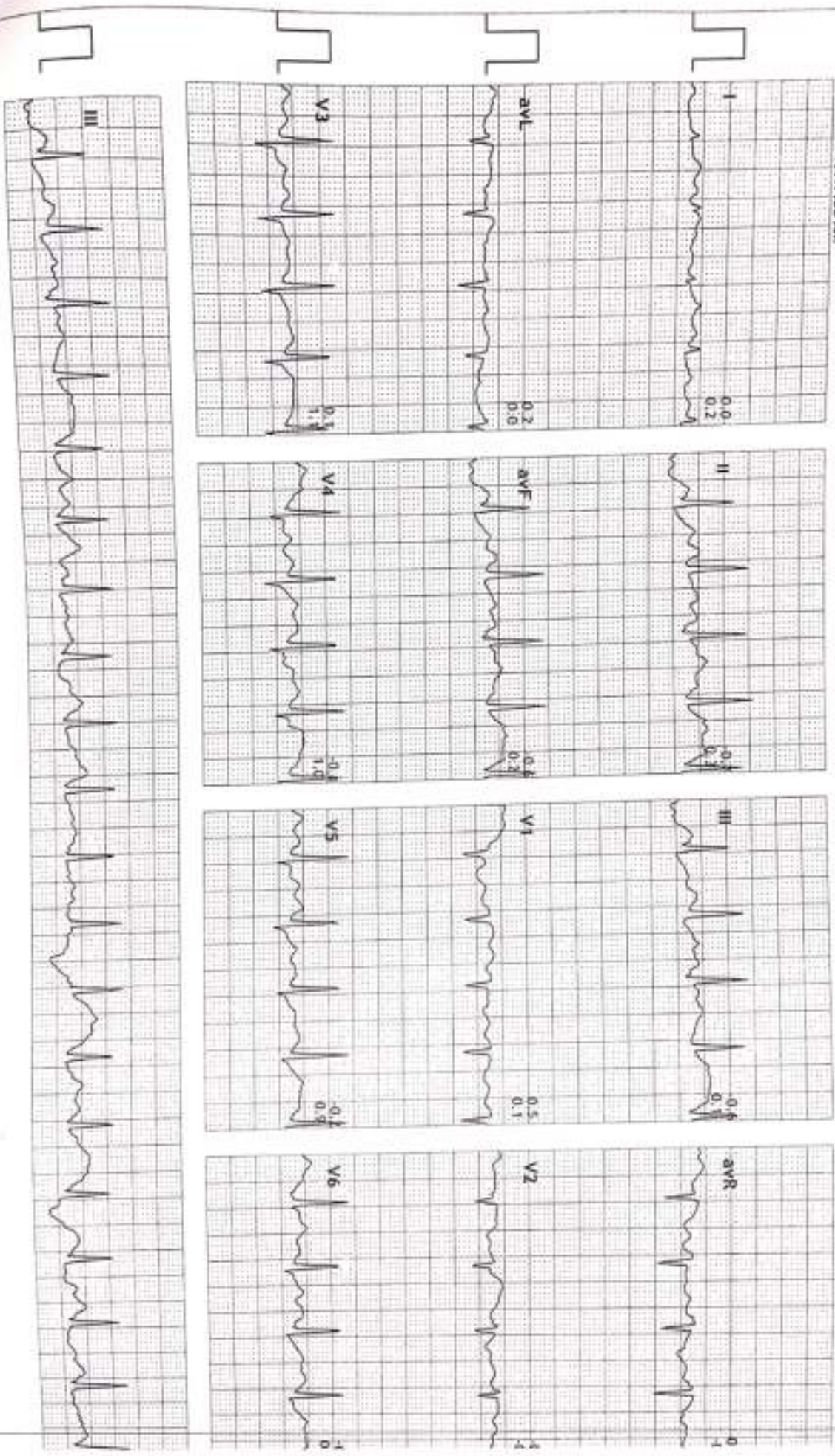
Raw ECG
 BRUCE
 10.05-1001Hz

Ex Time 05:59
 BLC : On
 Noch : On

BRUCE: Stage 2
 10.0 mm/mv
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

15273 / NISHANT DAVE

41 Yrs / Male

0 Kg / 0 Cm

Date: 06-Jan-2024 10:17:08 AM

HR: 152 bpm

METS: 10.2

BP: 160/80

3x4+1 Rhythm Lead

MPHR: 84% of 179

Speed: 5.5 kmph

Grade: 14.0%

Raw ECG

BRUCE

(0.05-100)Hz

Ex Time 08:59

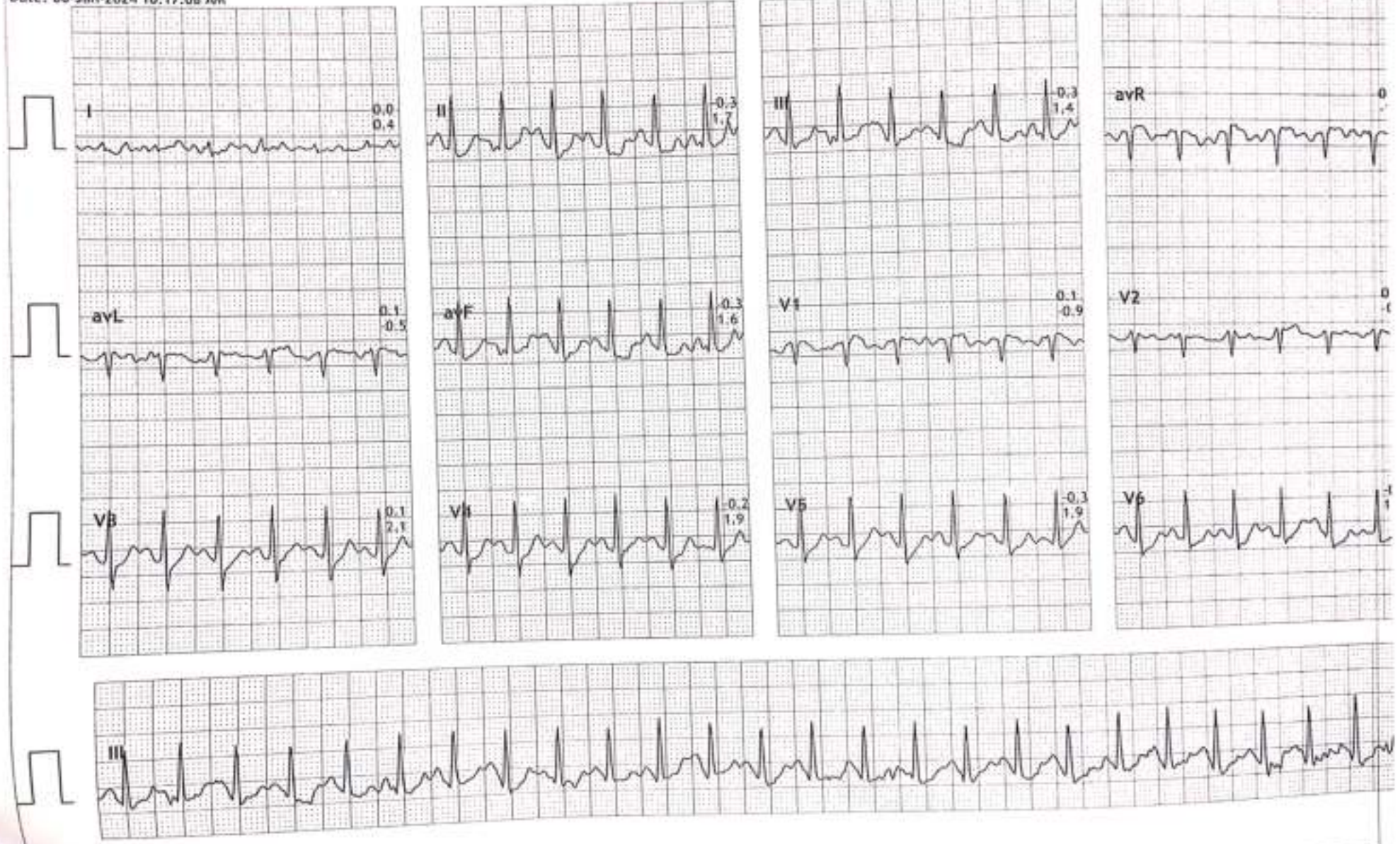
BLC :On

Notch :On

BRUCE: Stage 3

10.0 mm/mV

25 mm/Sec.



Print Date: 06-Jan-2024

DR MAULIK HANSALIA/DR NISHANT SIRODARIYA

DR NISHANT SIRODARIYA

CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

15273 / NISHANT DAVE

41 Yrs / Male

0 Kg / 0 Cm

Date: 06-Jan-2024 10:17:08 AM

HR: 162 bpm

METS: 10.8

BP: 160/80

MpHR: 90% of 179

Speed: 6.8 kmph

Grade: 16.0%

3x4+1 Rhythm Lead

Raw ECG

BRUCE

(0.05-100)Hz

Ex Time 09:28

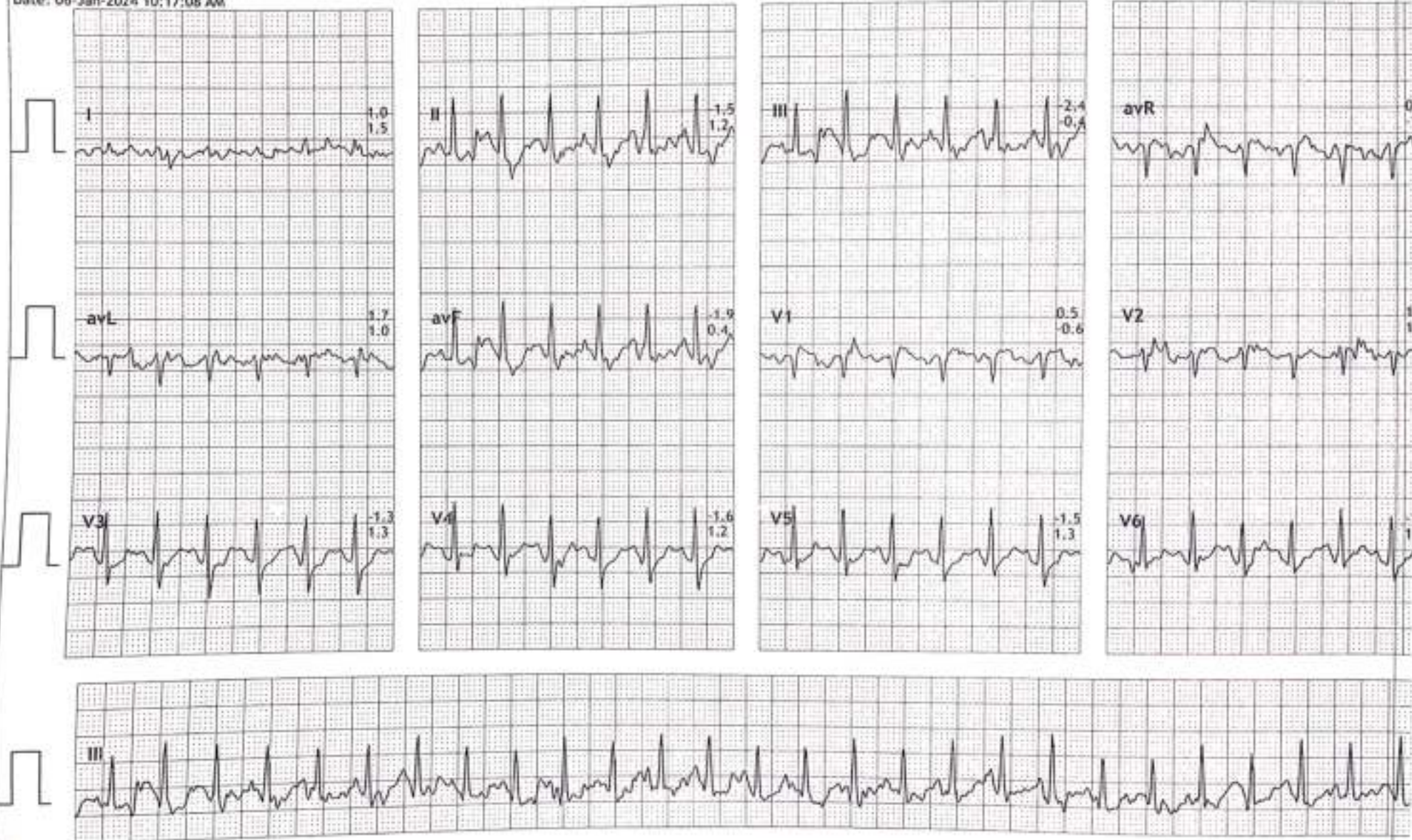
BLC :On

Notch :On

BRUCE:PeakEx

10.0 mm/mV

25 mm/Sec.



CURE CARDIOLOGY CLINIC
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 109 bpm
 METS: 4.4
 BP: 160/80

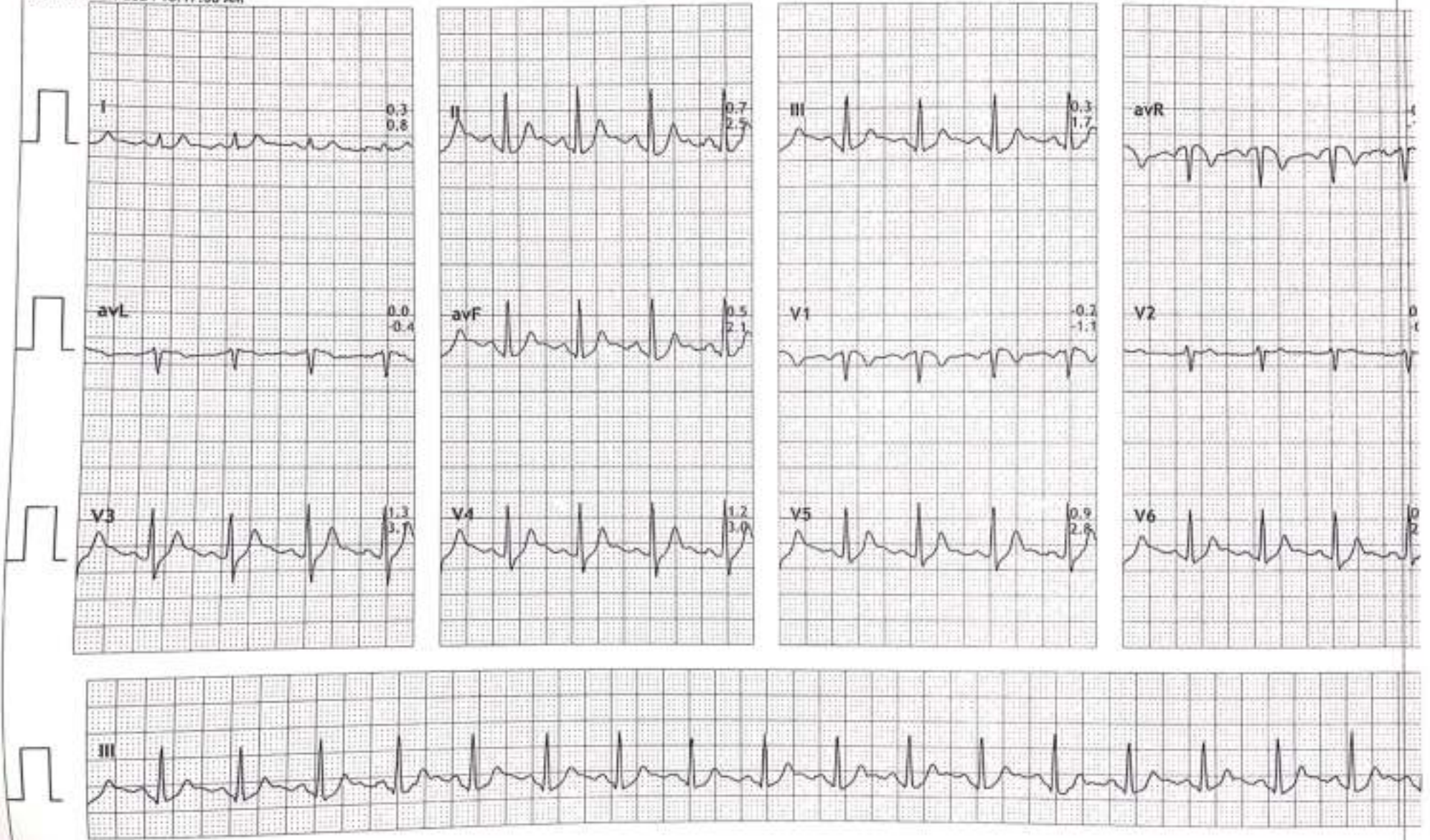
MPHR: 60% of 179
 Speed: 0.0 kmph
 Grade: 0.0%

3x4+1 Rhythm Lead

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 09:30
 BLC :On
 Notch :On

Recovery(1:00)
 10.0 mm/mV
 25 mm/Sec.



CURE CARDIOLOGY CLINIC
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.
 15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 104 bpm
 METS: 1.0
 BP: 150/80

APHR: 56% of 179
 Speed: 0.0 kmph
 Grade: 0.0%

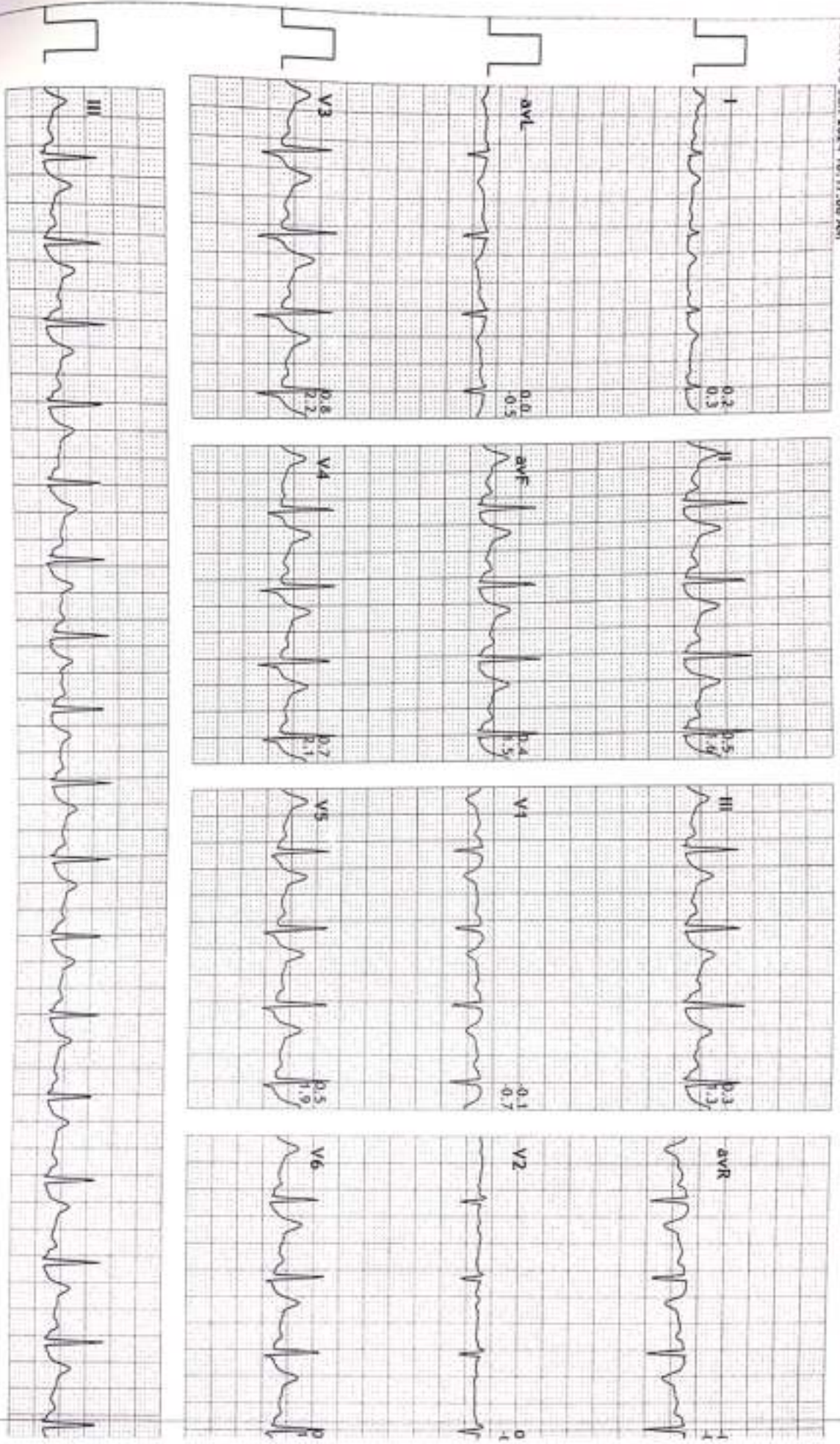
Raw ECG
 BRUCE
 10.05-100/Hz

Ex Time 09:30
 BLC :On
 Moch: :On

Recovery(2:00)
 10.0 mm/mV
 25 mm/Sec.



3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

15273 / NISHANT DAVE

41 Yrs / Male

0 Kg / 0 Cm

Date: 06-Jan-2024 10:17:08 AM

3x4+1 Rhythm Lead

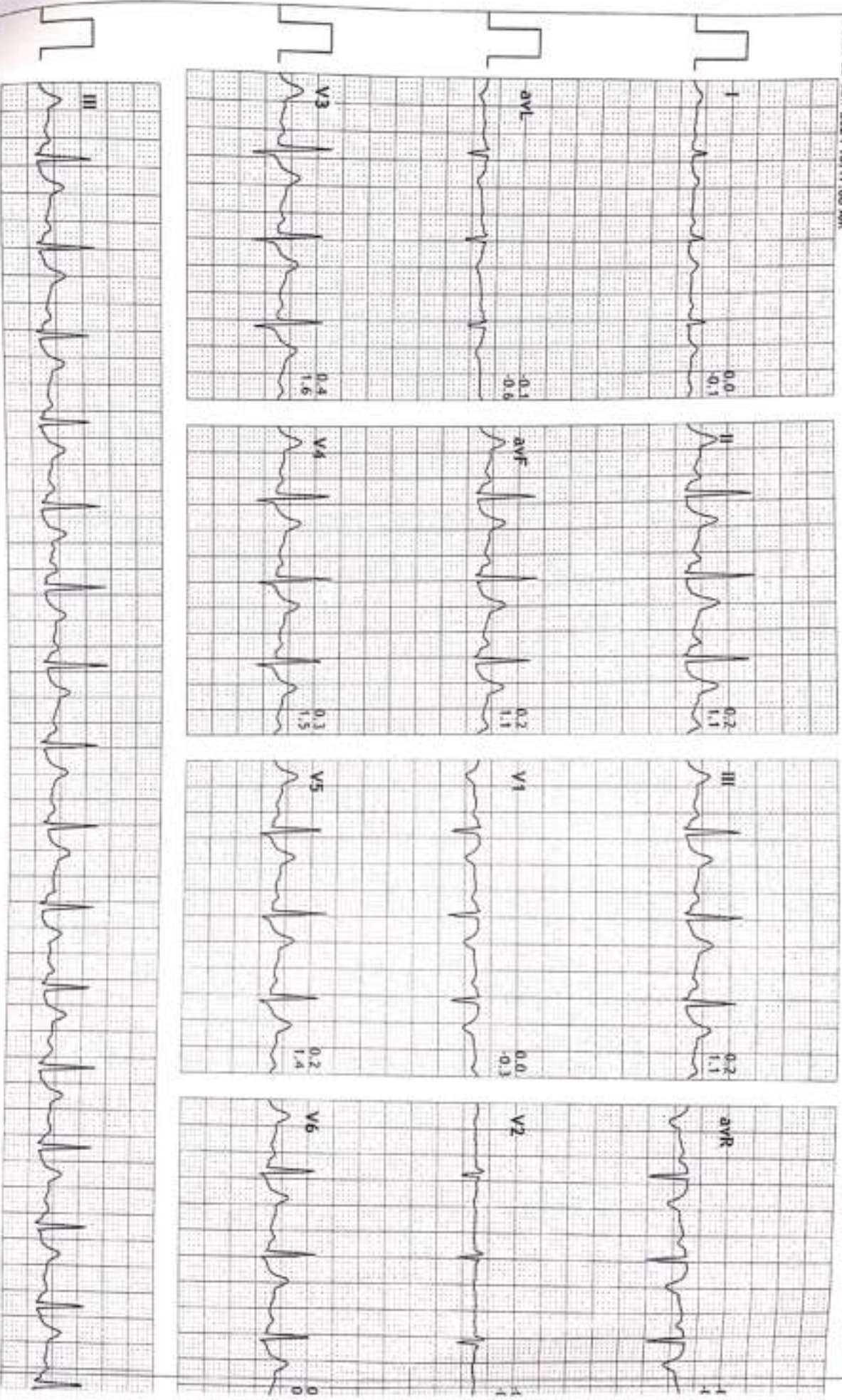
HR: 94 bpm
METs: 1.0
BP: 140/80

MPHR: 52% of 179
Speed: 0.0 kmph
Grade: 0.0%

Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 09:30
BLC : On
Notch : On

Recovery(3:00)
10.0 mm/1v
25 mm/Sec



15273 / NISHANT DAVE
 41 Yrs / Male
 0 Kg / 0 Cm
 Date: 06-Jan-2024 10:17:08 AM

HR: 92 bpm
 METS: 1.0
 BP: 130/80

MpHR: 51% of 179
 Speed: 0.0 kmph
 Grade: 0.0%

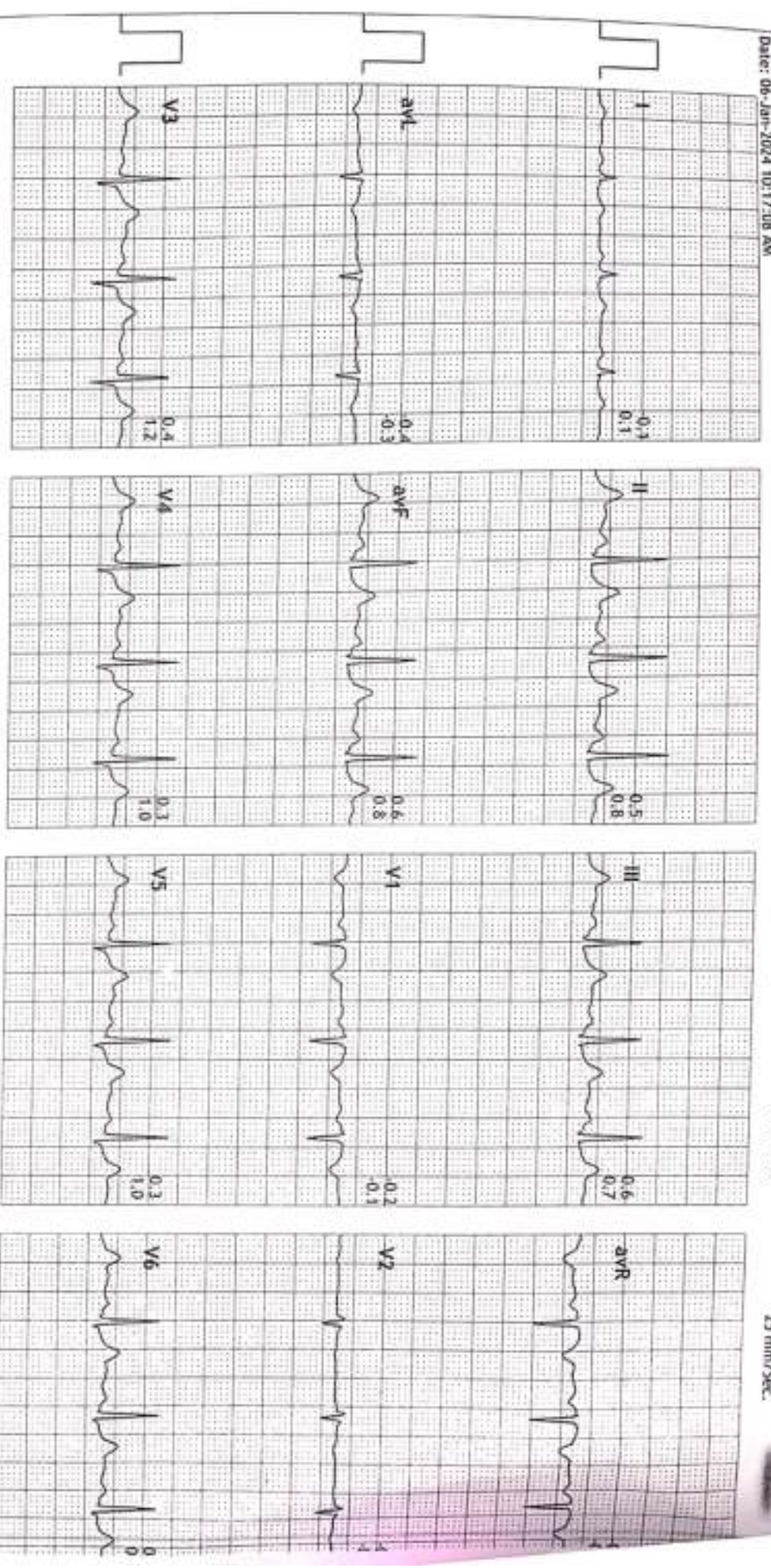
Raw ECG
 BRUCE
 10.05-100.0Hz

Ex Time 09:30
 RLC :On
 Hecch :On

Recovery(4:00)
 10.0 mm/mv
 25 mm/Sec.



3x4+1 Rhythm Lead



Pat.s' Name: NISHANT DAVE

DATE: 6 January 2024


U.S.G. OF ABDOMEN AND PELVIS

- **LIVER:** is normal size and shows bright parenchymal echotexture. No focal lesion noted. Intrahepatic biliary radicals appear normal. C.B.D and portal vein appears normal in calibre.
- **GALL BLADDER:** Well distended and appears normal. No evidence of gallstone or changes of cholecystitis.
- **PANCREAS:** appears normal in size, shape, echogenicity and echotexture. No focal lesion noted. No e/o peripancreatic fluid collection.
- **SPLEEN:** normal in size, shape, echogenicity and echotexture. No focal lesion noted.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No e/o hydronephrosis on either side. Concretion is seen at mid pole calyx of right kidney.
- **URINARY BLADDER:** Well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **PROSTATE:** is normal in size, shape and echogenicity. No focal lesion.
- Visualised bowel loops show no evident abnormality. No e/o lymphadenopathy. RIF/ LIF CLEAR. Bilateral C-P angels clear.

CONCLUSION:

- Grade I fatty changes in liver.

Thanks for reference.


DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS

Pt.'s Name: NISHANT DAVE

Date: 6 January, 2024

Radiograph of chest (PA view)

- Both the lung fields are clear.
- No e/o consolidation, cavitations or collapse.
- Both the hila appears normal
- Both costophrenic angles appear clear.
- Both domes of diaphragm appear normal.
- Cardiac size is within normal limit.
- Bones underview reveals no evident abnormality.

Thanks for reference.



DR PRATIK KAGATHARA
MD



NISHANT DAVE 41 Y/M CHEST PA 06-Jan-24
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)



TEST REPORT

Name : Nishant Dave	Reg. No : 401100335
Age/Sex : 41 Years / Male	Reg. Date : 06-Jan-2024 03:34 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 06-Jan-2024 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 06-Jan-2024 06:03 PM

COMPLETE BLOOD COUNT (CBC)
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval	
RBC Parameters				
Hemoglobin (SLS method)	15.7	g/dL	13.0 - 18.0	
Hematocrit (Electrical Impedance)	44.70	%	47 - 52	
RBC Count (Electrical Impedance)	5.56	million/cmm	4.7 - 6.0	
MCV (Calculated)	80.4	fL	78 - 110	
MCH (Calculated)	28.2	Pg	27 - 31	
MCHC (Calculated)	35.1	%	30 - 35	
RDW (Calculated)	12.5	%	11.5 - 14.0	
WBC Parameters				
WBC Count (Flowcytometry)	4570	/cmm	4000 - 10500	
DIFFERENTIAL WBC COUNT				
Neutrophils (%)	47 %	% Range 42.0 - 75.2	Abs. Value 2148 /cmm	Abs. Range 1800 - 7700
Lymphocytes (%)	42 %	20 - 45	1919 /cmm	1000 - 3900
Eosinophils (%)	04 %	1 - 4	183 /cmm	0 - 450
Monocytes (%)	07 %	2 - 8	320 /cmm	200 - 1000
Basophils (%)	00 %	0 - 1	0 /cmm	20 - 100
Platelete Parameter				
Platelet Count	272000	/cmm	150000 - 450000	
MPV	9.7	fL	7.4 - 10.4	
P-LCR	22.70	%	11.9 - 66.9	
PDW	10.8	%	8.3 - 56.6	
PCT (Platelet Haematocrit)	0.26	%	0.2 - 0.5	

towards the healthiness...

D.R.J.

Dr. Viral Jethava

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Page 1 of 13

Dr. Viral R. Jethava
M.D. (Path. PDCC)




TEST REPORT

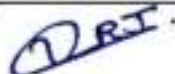
Name	: Nishant Dave	Reg. No	: 401100335
Age/Sex	: 41 Years / Male	Reg. Date	: 06-Jan-2024 03:34 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 06-Jan-2024 03:34 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 06-Jan-2024 06:03 PM

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	*A*		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

towards the healthiness...

Dr. Viral Jethava

This is an Electronically Authenticated Report.

Page 2 of 13

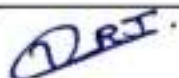
Dr. Viral R. Jethava
 M.D. (Path. PDCC)



TEST REPORT

Name : Nishant Dave	Reg. No : 401100335
Age/Sex : 41 Years / Male	Reg. Date : 06-Jan-2024 03:34 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 06-Jan-2024 03:34 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 06-Jan-2024 06:03 PM

Test	Result	Unit	Biological Ref. Interval
Erythrocyte sedimentation rate			
Sample, EDTA whole blood			
ESR (After 1 hour)	6	mm/hr	1 - 7

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Client Name : PANCHMUKHI HOSPITAL	Report Date : 06-Jan-2024 04:52 PM

FASTING PLASMA GLUCOSE

Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <small>HEXONWASE</small>	99.00	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34: S11.

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Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 06-Jan-2024 04:36 PM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 06-Jan-2024 06:03 PM

POST PRANDIAL PLASMA GLUCOSE

Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) HEXONWASE	124.00	mg/dL	70 - 140

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
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LIPID PROFILE
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <small>Cholesterol Oxidase</small>	173.00	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <small>Enzymatic Reaction With Glycerol Kinase</small>	142.00	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <small>Siemens AHDL</small>	46.00	mg/dL	High Risk : < 40 Low Risk : >= 60
LDL Cholesterol <small>Siemens ALDL</small>	98.60	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol <small>Calculated</small>	28.40	mg/dL	15 - 35
LDL / HDL RATIO <small>Calculated</small>	2.14		0 - 3.5
Cholesterol /HDL Ratio <small>Calculated</small>	3.76		0 - 5.0

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RENAL FUNCTION TEST

Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Creatinine <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small>	0.86	mg/dL	0.7 - 1.3
eGFR	88.21	ml/min/1.73 sq m	Normal or High: ≥ 90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: < 15
Urea <small>Calculated</small>	36.00	mg/dL	17 - 43
Blood Urea Nitrogen (BUN) <small>UREASE/GLDH</small>	16.81	mg/dL	7.0 - 18.0
Uric Acid <small>Uricase</small>	6.20	mg/dL	3.5 - 7.2
Sodium <small>Direct ion selective electrode</small>	139.2	mmol/L	137 - 145
Potassium <small>Direct ion selective electrode</small>	4.20	mmol/L	3.5 - 5.1
Chloride <small>Direct ion selective electrode</small>	102.3	mmol/L	98 - 107
Calcium <small>Cresolphthalein Complexone</small>	9.6	mg/dL	8.5 - 10.1

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Client Name : PANCHMUKHI HOSPITAL	Report Date : 06-Jan-2024 06:03 PM

HEMOGLOBIN A1 C (HBA1C)

Specimen: Blood EDTA


Parameter	Result	Unit	Biological Ref. Interval
HbA1C <small>Siemens Dimension</small>	5.6	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <small>Calculated</small>	114.02	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

Explanation :

- Total hemoglobin A1c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

HbA1c assay Interferences :

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1c result does not correlate with the patient's blood glucose levels.


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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
Thyroid Stimulating Hormone (TSH) CLIA	4.280	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics, 5th Edition. Philadelphia: WB Saunders, 2012:2170

Triiodothyronine (T3) CLIA	1.24	ng/mL	0.6 - 1.81
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Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

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Thyroxine (T4) 6.30 µg/dL 4.5 - 12.6
CLM

Clinical Significance:

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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STOOL EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Colour	Brown		
Consistency	Liquid		
CHEMICAL EXAMINATION			
Occult Blood <small>Peroxidase Reaction with o-Diamidine</small>	Negative		
Reaction <small>pH Strip Method</small>	Neutral		
Reducing Substance	Absent		
MICROSCOPIC EXAMINATION			
Mucus	Absent		
Pus Cells	Absent		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.
False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.
False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

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URINE ROUTINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
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PHYSICAL EXAMINATION

Quantity	20 cc		
Colour	Pale Yellow		
Clarity	Clear		

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	6.0		4.6 - 8.0
Sp. Gravity	1.010		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	Absent
Erythrocytes (Red Cells)	Absent
Epithelial Cells	2 - 3/hpf
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

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LIVER FUNCTION TEST

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <small>BIURET</small>	7.40	g/dL	6.4 - 8.2
Albumin <small>Dye Binding - Bromocresol Purple (BCP)</small>	4.30	g/dL	3.40 - 5.00
Globulin <small>Calculated</small>	3.10	g/dL	2.3 - 3.5
A/G Ratio <small>Calculated</small>	1.39		0.8 - 3.1
SGOT (AST) <small>Siemens/37C</small>	26.00	U/L	15 - 37
SGPT (ALT) <small>Siemens/37C</small>	46.00	U/L	16 - 63
Alakaline Phosphatase <small>Siemens/37C</small>	102.00	U/L	46 - 116
Total Bilirubin <small>Diaz-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</small>	0.31	mg/dL	0.2 - 1
Conjugated Bilirubin <small>Diaz-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</small>	0.12	mg/dL	0 - 0.20
Unconjugated Bilirubin <small>Suph acid ip/calf-benz</small>	0.19	mg/dL	0.0 - 1.1

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