

: MR HEMANT KUMAR THAKUR

Age/Gender

: 34 Y Male

UHID/ MR No

: 6539

OP Visit No

: OPD-UNIT-II-2

Visit Date

: 09/09/2023

Reported On

: 16/09/2023 11:50AM

Sample Collected On: 09/09/2023 01:17PM Ref. Doctor

: SELF

Sponsor Name

HAEMATOLOGY				
nvestigation HEMOGRAM	Observed Value	Unit	Biological Reference Interva	
Haemoglobin(HB) Method: CELL COUNTER	13.6	gm/dl	12 - 17	
Erythrocyte (RBC) Count Method: CELL COUNTER	4.51	mill/cu.mm.	4.20 - 6.00	
PCV (Packed Cell Volume) Method: CELL COUNTER	40.80	%	39 - 52	
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	90.5	fL	76.00 - 100	
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	30.2	pg	26 - 34	
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35	
RDW (Red Cell Distribution Width) Method: CELL COUNTER	12.6	%	11- 16	
Total Leucocytes (WBC) Count Method: CELL COUNTER	5.61	cells/cumm	3.50 - 10.00	
Neutrophils Nethod: CELL COUNTER	56	%	40.0 - 73.0	
ymphocytes lethod: CELL COUNTER	34	%	15.0 - 45.0	
Eosinophils Method: CELL COUNTER	03	%	1-6%	
Monocytes	07	%	4.0 - 12.0	
asophils lethod: CELL COUNTER	00	%	0.0 - 2.0	

End of Report

Results are to be corelated clinically

Lab Technician / Technologist path

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HAEMATOLOGY

Investigation	Observed Value	Unit I	Biological Reference Interval
Platelet Count Method: CELL COUNTER	153	lacs/cu.mm	
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	10	mm /HR	0 - 10

Blood Group (ABO Typing)

Blood Group (ABO Typing)

RhD factor (Rh Typing)

POSITIVE

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Sponsor Name

	BIO CHEMISTR	Υ	
Investigation GLUCOSE - (POST PRANDIAL)	Observed Value	Unit	Biological Reference Interval
Glucose -Post prandial Method: REAGENT GRADE WATER	118.0	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting	83.0	mg/dl	70 - 120
SUGAR REAGENT GRADE WATER		, , , , , , , , , , , , , , , , , , ,	120
KFT - RENAL PROFILE - SERUN	1		
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	15	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	1.30	mg/dl	0.6-1.4
Jric Acid Method: Spectrophotomatric	4.52	mg/dL	2.6 - 7.2

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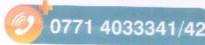
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: SELF

Sponsor Name

Investigation

Cholesterol - Total

Triglycerides level

HDL Cholesterol

LDL Cholesterol

VLDL Cholesterol

Total Cholesterol/HDL Ratio

Methode: Spectrophotometric

BIO CHEMISTRY Observed Value Unit Biological Reference Interval LIPID PROFILE TEST (PACKAGE) 115.0 mg/dl Desirable: < 200 Borderline High: 200-239 High: >= 240 95.0 mg/dl Normal : < 150 Borderline High: 150-199 Very High: >=500 Method: Spectrophotomatric 40.0 mg/dl Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60 Method: Spectrophotomatric 56.0 mg/dl Optimal:< 100 Near Optimal: 100 - 129 Borderline High: 130-159 High: 160-189 Very High :>=190 Method: Spectrophotomatric 19 mg/dl 6 - 38

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: SELF

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	BIO CHEMISTRY			
Investigation LIVER FUNCTION TEST	Observed Value	Unit	Biological Reference Interval	
Bilirubin - Total Method: Spectrophotometric	0.7	mg/dl	0.1- 1.2	
Bilirubin - Direct Method: Spectrophotometric	0.1	mg/dl	0.05-0.3	
Bilirubin (Indirect) Mathod: Calculated	0.60	mg/dl	0 - 1	
SGOT (AST) Method: Spectrophotometric	27	U/L	0 - 40	
SGPT (ALT) Method: Spectrophotometric	33	U/L	0 - 41	
ALKALINE PHOSPHATASE	61	U/L	25-147	
Fotal Proteins Method: Spectrophotometric	6.4	g/dl	6 - 8	
Albumin Method: Spectrophotometric	4.3	mg/dl	3.4 - 5.0	
Globulin Mathod: Calculated	2.1	g/dl	1.8 - 3.6	
A/G Ratio Mathod: Calculated	2.0	%	1.1 - 2.2	

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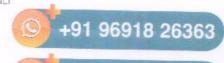
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: SELF

Sponsor Name

BIO CHEMISTRY

	-io orizimorit	1	
Investigation HbA1c (Glycosalated Ha	Observed Value	Unit	Biological Reference Interval
	5.6	%	Non- diabeticc:<=5.6, Pre-

Diabetic 5.7-6.4, Diabetic:>=6.5 1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG). 2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.

4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflam

1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG). 2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.

4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.

5. To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7*A1c-46.7

6. Interference of Haemoglobinopathies in HbA1c estimation.

A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.

B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status

C. Heterozygous state dete

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CLINICAL PATHOLOGY

Investigation URINE ROUTINE EXAMINATION	Observed Value	Unit	Biological Reference Interval
Physical Examination			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.000		1.001 - 1.030
Reaction (pH)	6.0		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	Occasional	/hpf	0 - 5
Epithelial Cell	1 - 2	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

End of Report

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PATIENT DETAILS

34

NAME: D/S/WO:

HEMANT KUMAR THAKUR

RAIPUR

Address:

Sample received on: Repeat Sample, if any:

Referred by:

APOLLO CLINIC

NA

09/09/2023 @ 18:30

Age:

Reported on: Reported on:

Contact No: 09/09/2023 @ 22:10

REFERENCE NO:

Hospital / Lab ID:

STATUS: FINAL

Gender:

RWDTFSH010614

STATUS: FINAL

MALE

APOLLO CLINIC

HORMONAL ASSAY

Test	id Daniel Williams	Specimen	Result	Units	Reference Range
ginyro	id Panel, TFT, TOTAL:				
•	Triiodothyronine, T3	Blood, Serum	1.26	ng / ml	0.87 - 1.78
	Thyroxine, T4	MH	8.70	μg/dL	6.0 - 12.2
٠	Thyroid stimulating hormone, TSH	ш	5.17	μIU / ml	0.4 – 5.0

Indicative Interpretation:				
TSH	Free T4	Free or total T3	Probable Inference	
High	Normal	Normal	Mild (subclinical) hypothyroidism	
High	Low	Low or Normal	Hypothyroidism	
Low	Normal	Normal	Mild (subclinical) hyperthyroidism	
Low	High or normal	High or normal	Hyperthyroidism	
Low	Low or normal	Low or normal	Non-thyroidal illness; pituitary (secondary) hypothyroidism	
Normal	High	High	Thyroid hormone resistance syndrome	

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MD Pathology, Consultant Pathologist

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