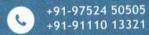




info@gdhospitals.com www.gdhospitals.com





Date : 26/01/2024

ECHO REPORT

Name: MR. UTSAV SOLANKI AGE 40 Y SEX - MALE

- -All cardiac chambers are normal in size.
- -All cardiac valves are normal.
- -Aortic root & PA are normal.
- -No RWMA.
- -Normal LV systolic function (LVEF 58%)
- -IAS & IVS are intact.
- -Pericardium is normal.
- -No clot /Thrombus / Vegetation.

DOPPLER:

- -No significant gradient across all valves .
- -Normal flow across all valves.

IMPRESSION

- -No RWMA
- -Normal LV systolic function
- -LVEF 58%

DR.BHARAT KUMRAWAT

MD MEDICINE





- gdhospital2016@gmail.com
- www.gdhospitals.com
- 80 Feet Road, Ratnapuri, Ratlam (M.P.)
- 97524-50505, 91110-13321

NAME:- UTSAV SOLNAKI

UHID: - 23-12658

AGE:-40/MALE

DATE: - 27/01/2024

BIOCHEMISTRY

GGT

34

RESULT

REFERENCE RANG

TECHNOLOGIST

DR.LEKHRAJ PATIDAR





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9 80 Feet Road, Ratnapuri, Ratlam (M.P.)

97524-50505, 91110-13321

: MR. UTSAV SOLANKI Name

: 40 Y / M Age/Sex

Consultant: DEVENDRA VAISHNAV

: 23-12658 UHID.No Accession No.: 20240127021

Bill / IPD No. : 23-39301

IPD/OPD: OPD

Category : MEDIWHEEL



Registration No

HAEMATOLOGY REPORT

	Unit	Biological Reference Range
		11.0-14.0
	particular descriptions	3.5-5.5
		36.0-51.0
		75-87
		24-30
32.10		31-37
34.43	- manufacturing a control of the con	5,000-15,000
5600		40-70
60	AND THE RESIDENCE OF THE PARTY	20-45
33		2.0-6.0
02		2.0-8.0
05		0-0.1%
00		1.5-4.5
3.22	lakhs/cmm	1,5-4.0
L/11058/AUG-2020		DESHCO 20-90 - 2960
08	- mm	PESHCO 70-91 - 2380
В		
		1 00 0 07
	nmol/L	1.23-3.07
	nmol/L	66-181
	mIU/L	0.30-4.2
3.70		
	5600 60 33 02 05 00 3.22	14.7 gm/dl 4.58 Millions/cumm 42.7 % 93.23 fl 32.10 pg 34.43 g/dl 5600 cells/cumm 60 % 33 % 02 % 05 % 00 % 3.22 lakhs/cmm 08 mm B POSITIVE 1.56 nmol/L 97.1 nmol/L

DR. LEKHNAJ PATIDAR





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97524-50505, 91110-13321

MR. UTSAV SOLANKI

: 40 Y/M

Consultant: DEVENDRA VAISHNAV

: 23-12658 UHID.No

Accession No.: 20240127021

Bill / IPD No. : 23-39301

IPD/OPD: OPD

Category: MEDIWHEEL



Registration No

Age/Sex

BIOCHEMISTRY

Sample Collected: 27-Jan-2024 2:39 I	PM		
Sample Type: SERUM.			
Test Name LIVER FUNCTION TEST (LFT)	Results	Unit	Biological Reference Range
Serum Bilirubin (Total)	0.83	mg/dl	0.1-1.0
Serum Bilirubin (Direct)	0.44	mg/dl	0.0-0.2
Serum Bilirubin (Indirect)	0.39	mg/dl	0.0-0.8
SGOT (AST)	29.88	U/L	9-40
SGPT (ALT)	31.40	U/L	9-40
Alkaline Phosphatase	167.0	U/L	100-250
Total Protein	6.81	g/dL	6.3-8.2
Albumin	3.77	g/dl	3.5-5.0
Globulin	3.04	g/dl	0-5
Albumin Globulin Ratio	1.24	Ratio	1.0-2.3
BLOOD SUGAR (FASTING)	111.0	mg/dl	70 - 110
BLOOD SUGAR (PP)	138.2	mg/dl	70-140
BLOOD UREA NITROGEN	CL/16.40 /AUG-2020	mg/dl	A 5-25
Serum Creatinine	0.77	mg/dl	PESHC 0.70-1.40 - 2960
Uric Acid	4.72	mg/dl	2.0-7.0

Remarks:

DR. LEKHRAJ PATIDAR





PESHCO 2020 - 2960

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9 80 Feet Road, Ratnapuri, Ratlam (M.P.)

97524-50505, 91110-13321

MR. UTSAV SOLANKI

: 40 Y / M

Sample Collected: 27-Jan-2024 2:30 PM

Consultant: DEVENDRA VAISHNAV

UHID.No : 23-12658

Accession No.: 20240127021

Bill / IPD No. : 23-39301

IPD/OPD: OPD

Category: MEDIWHEEL



Age/Sex

Registration No



BIOCHEMISTRY

Sample Type: SERUM			
Test Name LIPID PROFILE.	Results	Unit	Biological Reference Range
TOTAL CHOLESTROL	169.2	mg/dl	0-200
TRIGLYCERIDES.	133.2	mg/dl	0-150
CHOLESTEROL HDL	51.60	mg/dl	35-85
CHOLESTEROL LDL	90.96	mg/dl	0-130
CHOLESTEROL VLDL	26.64	mg/dl	10-30
TOTAL CHOLESTEROL HDL RATIO	3.28	%	3-4.4
CHOLESTEROL LDL CHOLESTEROL HDL RATIO	1.76	%	0.1-3.0
HbA1C (GLYCOSYLATED Hb)	5.89	%	4.0- 6.0 %
Remarks :			

DR. LEKKRAJ PATIDAR





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80 Feet Road, Ratnapuri, Ratlam (M.P.)

97524-50505, 91110-13321

: MR. UTSAV SOLANKI Name

: 40 Y / M Age/Sex

Consultant : DEVENDRA VAISHNAV

: 23-12658 UHID.No

Accession No.: 20240127021

Bill / IPD No. : 23-39301

IPD/OPD: OPD

Category: MEDIWHEEL



Registration No

CLINICAL PATHOLOGY

Sample Collected: 27-Jan-2024 2:39 PM			
Sample Type: URINE,			
Test Name	Results	Unit	Biological Reference Range
PHYSICAL EXAMINATION.			
QUANTITY	30ML		
COLOUR.	PALE YELLOW	-	
APPEARANCE	CLEAR		-
PH	ACIDIC		
SPECIFIC GRAVITY	1.015		
CHEMICAL EXAMINATION.			
Urine Sugar	NIL	<u> </u>	NIL
Urine Albumin	NIL		
BS/BP	ABSENT		ABSENT
KETONE.	ABSENT		ABSENT
MICROSCOPIC EXAMINATION.			// WAV. NA
PUS CELLS	5-7	/hpf	0-4
EPITHELIAL CELLS Reg. No. CL	2-458/AUG-2020	/HPF	PRE AC 0-2 UTED
RBC,	NIL	/HPF	PESHCO 0-2:0 - 2960
CASTS	ABSENT		
CRYSTALS	ABSENT	/HPF	-
BACTERIA	ABSENT		
YEAST	ABSENT		

Remarks:

DR. LEKHRAJ PATIDAR









report authenticity

Scan QR code to check

Passport No :	LABORATORY TEST REF	PORT
Patient Information	Sample Information	Client/Location Information
Name : Mr Utsav Solanki	Lab ld : 012412501654	Client Name : G Y Foundation@Ratlam
Sex/Age : Male / 40 Y	Registration on : 27-Jan-2024 13:45	Location :
Ref. Id : Ref. By : Dr Devendra Vaishnav	Collected at : non SAWPL Collected on : 27-Jan-2024 13:45 Sample Type : Serum	Approved on : 29-Jan-2024 15:03 Status : Final Printed On : 29-Jan-2024 15:04
Tion by The Continue Valorina	1	Process At : 1. NRL SAWPL Gujarat Ahmedabad

Immunoassay

Test	Result	Unit	Biological Ref. Interval
Prostate Specific Ag. (PSA), Total	0.309	ng/mL	0 - 4

PSA is a glycoprotein that is expresses by both normal and neoplastic prostate tissue and is prostate tissue specific and not prostate cancer specific. PSA is constantly expressed in nearly all prostate cancers, although its level of expression on a per cell basis is lower than in normal prostate epithelium. The absolute value of serum PSA is useful for determining the extent of prostate cancer and assessing the response to prostate cancer treatment; its use as a screening method to detect prostate cancer is also common.

Interpretation

Increased in

- Prostate disease (Cancer, Prostatitis, Benign prostatic hyperplasia, Acute urinary retention)
- Manipulations (Cystoscopy, Needle biopsy, Radiation therapy, Indwelling catheter, Prostatic massage)
- Transurethral resection
- Prostatic ischemia

Decreased in

- Castration
- Prostatectomy
- Radiation therapy
- Ejaculation within 24 48 hours
- 5-alpha-reductase inhibitor reduces PSA by 50% after 6 months in men without cancer

Limitations

- PSA has been recommended by the American Cancer Society for use in conjunction with a DRE for early detection of prostate cancer starting at the age of 50 years for men with at least 10-year life expectancy
- PSA levels that are measured repeatedly over time may vary because of biologic variability where the true PSA level in a given man is different on different measurements.
- A change in PSA of >30% in man with a PSA initially below 2.0 ng/mL was likely to indicate a true change beyond normal random variation.

-- End Of Report -----

DR.TEJASWINI DHOTE

M.D. Pathology

Dr. Sanjeev Shah

MD Path

Dr. Yash Shah

MD Path



This is an Electronically Authenticated Report. Sterling Accuris Pathology Laboratory

Laboratory: (Arihant Pathology Laboratory), 15, Ved Vyas Colony, Ratlam, Marelana Ratlad with # 969 referred tests











DDY Diagnostic Centre

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Facility: MRI, CT SCAN, 4D Sonography, Colour Doppler

PT NAME	MR. UTSAV SOLANKI	AGE /SEX/	40YEAR / MALE
REF BY	DR. DEVENDRA VAISHNAV GD HOSPITAL RATLAM	DATE	27/01/2024

ULTRASOUND WHOLE ABDOMEN

<u>Liver</u> is borderline enlarged in size (15.2cm) and shows raised echotexture. Hepatic venous system appear normal. No focal lesion is seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein and CBD are normal in caliber.

Gall bladder is normal in size & shape. Its lumen is echofree and nonlithiastic.

Pancreas is normal in size outline & echo pattern.

Spleen is normal in size (10.0cm) and echo pattern.

Right kidney is normal in size (11.9x4.7cm), shape and echogenicity with smooth outline. Central pelvicalyceal sinus and corticomedullary ratio are normal. No calculus seen.

Left kidney is normal in size (10.9x5.2cm), shape and echogenicity with smooth outline. Central pelvicalyceal sinus and corticomedullary ratio are normal. No calculus seen.

Urinary bladder is normal in shape & contour. Its wall is normal.

Prostate is normal in size, shape echotexture & contour.

IVC and abdominal aorta are normal in calibre. No evidence of intra-abdominal lymphadenopathy. No evidence of ascites is seen.

The visualised bowel loops appears to be normal.

IMPRESSION: Ultrasound whole abdomen study show:

- Gaseous abdomen.
- Borderline hepatomegaly with grade I fatty liver.

Advice: LFT, Clinical correlation and further evaluation.

DR ANUGRAH PATERIA

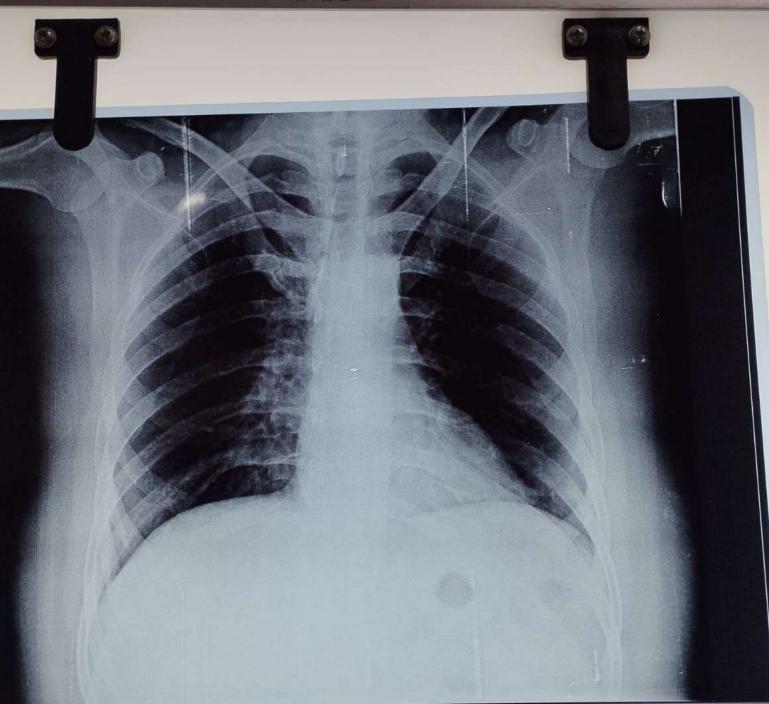
(Radiologist

It is a professional opinion, not valid for medico legal purpose.

DDY DIAGNOSTIC CENTRE, RATLAM.







HEALTH CHECKUP MR UTSAV SOLANKI 40Y 23-12658 CHEST PA 27/01/2024 GD HOSPITAL 80FEET ROAD RATNPURI, RATLAM PH:9111013321

