

Kumost daepest

11.09.2024 13:23:26  
SHEKHAR HOSPITAL PVT LTD  
INDIRA NAGAR, SECTOR-B  
LUCKNOW U.P.

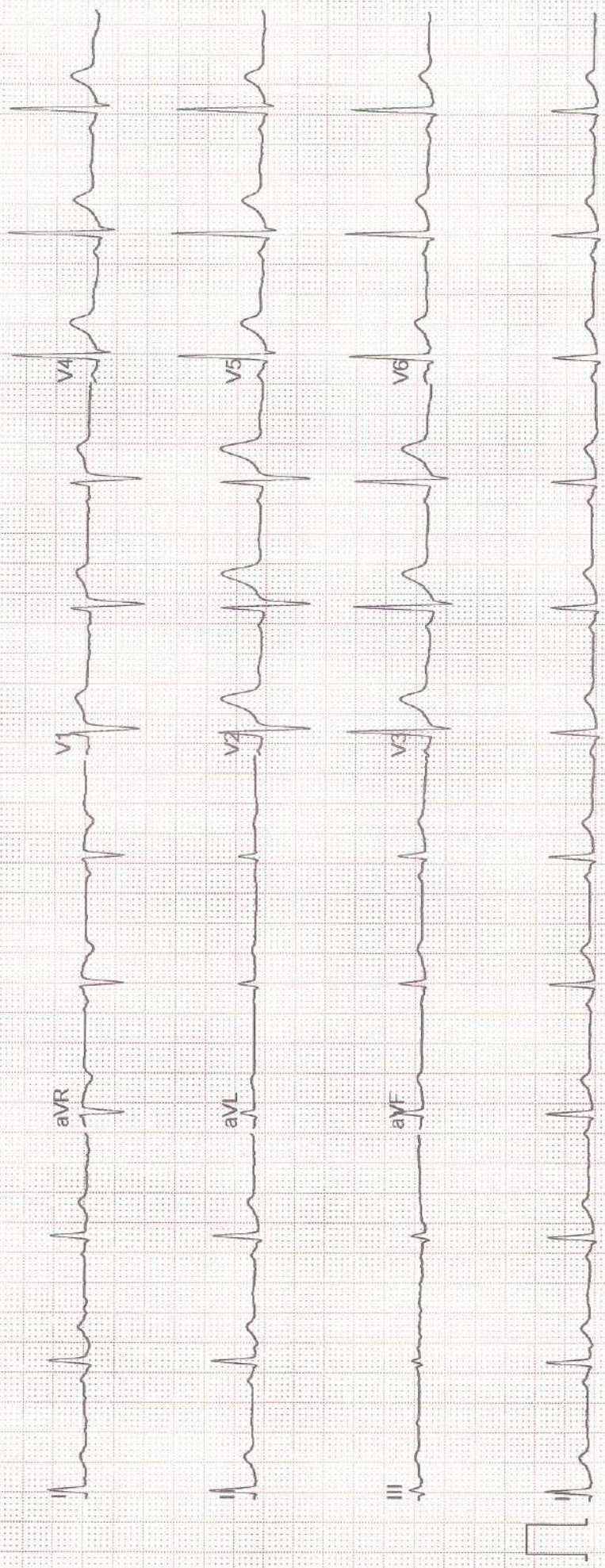
Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

71 bpm  
-- / -- mmHg

QRS 78 ms  
QT / QTcBaz 352 / 382 ms  
PR 130 ms  
P 104 ms  
RR / PP 840 / 845 ms  
P / QRS / T 44 / 35 / 35 degrees

Normal sinus rhythm  
Normal ECG

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:





PATIENT NAME	KUMAR DEEPESH	AGE/SEX	31 YRS / M
REFERRED BY	SHEKHAR HOSPITAL	REPORTING DATE	11/09/2024

**X-RAY CHEST PA VIEW**

Soft tissue shadows appears normal.

Bony cage is normal.

Diaphragmatic shadows are normal on both sides.

Costo-phrenic angles are bilaterally clear.

Trachea is central in position.

Hilar shadows are normal.

Cardiac size and contours are normal.

Vascular markings are normal on both sides in all zones.

Pulmonary parenchyma does not reveal any significant lesion.

*PLEASE CORRELATE CLINICALLY*



**DR. AMRITA SINGH**  
MD RADIO DIAGNOSIS

# SHEKHAR HEART LUNG CENTRE

"Centre of Excellence in Cardiac & Lung Care with a difference"

## 2D- ECHO REPORT

PAT NAME: MR. KUMAR DEEPESH

AGE: 31 YEARS

SEX: MALE

PT: OPD

BED NO: 0000

DATE: 11/06/2024

### MITRAL VALVE

Morphology AML - Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming  
PML - Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.  
Subvalvular deformity Present/Absent  
Score.....

Doppler Normal/Abnormal  
Mitral stenosis Present/Absent RR interval..... msec  
EDG..... mmHg MDG..... mmHg MVA ..... cm<sup>2</sup>  
Mitral regurgitation Absent/Trivial/Mild/Moderate/Severe

### TRICUSPID VALVE

Morphology Normal/Thickening/Calcification/Prolapse/Vegetation/Doming  
Doppler Normal/Abnormal  
Tricuspid stenosis Present/Absent RR interval..... msec  
Tricuspid regurgitation EDG..... mmHg MDG..... mmHg  
Absent/Trivial/Mild/Moderate/Severe Fragmented Signals  
Velocity 2.3 m/sec Pred. RVSP= RAP+ 21.3 mmHg  
TAPSE=

### PULMONARY VALVE

Morphology Normal/Thickening/Doming/Vegetation  
Doppler Normal/Abnormal PVmax 0.8 m/s  
Pulmonary stenosis Present/Absent Level Pulmonary annulus..... mm  
Pulmonary regurgitation PSG 3.0 mmHg Present/Absent  
Early diastolic gradient..... mmHg End diastolic gradient ..... mmHg  
Pred. PA mean P..... mmHg

### AORTIC VALVE

Morphology Normal/Thickening/Calcification/Restricted Opening/Flutter/Vegetation No. of cusps 1/2/3/4  
Doppler Normal/Abnormal AVmax 1.1 m/s  
Aortic stenosis Present/Absent Level Aortic annulus ..... mm  
PSG 5.6 mmHg  
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe

~ 2

# SHEKHAR HEART LUNG CENTRE

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## Measurements

Aorta	24	LAes	34
IVS ed.	09	IVS es.	11
LVed	45	LVes	30
PW(LV)ed	09	PW(LV)es	11
RVed	-	RV anterior wall	-
IVS Motion Normal/Flat/Paradoxical	-	IVC size	14

Aorta: SOV = mm; Normal / dilated,

STJ = mm Asc AO= mm;

Normal / dilated

Arch & Desc Ao: Normal / dilated / coarct

MPA: Normal / dilated

PA Branches: Normal / dilated

## CHAMBERS

LV

Normal/Enlarged/Clear/Thrombus/Hypertrophy

Contraction – Normal/Reduced

LV diastolic function - Normal/dysfunction grade =

Normal/ Enlarged/ Clear/ Thrombus

LA

RA

Normal/ Enlarged/ Clear/ Thrombus

RV

Normal/Enlarged/Clear/Thrombus

Pericardium

Normal/Thickened/Calcification/Effusion

## FINAL IMPRESSION:

- NORMAL LV SYSTOLIC FUNCTION
- LVEF = 62 %
- NO RWMA
- TRIVIAL MR
- MILD TR WITH MILD PAH(PAP=31mmHg)
- NO AR/PR
- NO CLOT/PERICARDIAL EFFUSION/THROMBUS



CONSULTANT

Dr. Harshit Gupta

M.D (Medicine) D.M (Cardiology)

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<b>PATIENT NAME</b>	<b>KUMAR DEEPESH</b>	<b>AGE/SEX</b>	<b>. 31 YRS / M</b>
<b>REFERRED BY</b>	<b>SHEKHAR HOSPITAL</b>	<b>REPORTING DATE</b>	<b>11/09/2024</b>

**WHOLE ABDOMEN ULTRASOUND**

**LIVER:** Liver is normal in size and has normal echogenicity with normal visualization of intrahepatic portal channel, biliary radicles and diaphragm. No focal lesion seen. The intra hepatic portal channels are normal. Porta hepatis is normal.

**GALL BLADDER:** Gall bladder is normally distended. Lumen is anechoic. Gall bladder wall is normal in thickness and regular. No calculus / mass lesion seen.  
CBD is normal.

**PANCREAS:** The head, body and tail portion of pancreas is normal in size and shape and has a normal homogenous echotexture. No focal lesion seen.

**SPLEEN:** Spleen is normal in size and has a normal homogenous echotexture. No focal lesion seen. Splenic vein is normal in caliber.

**RIGHT KIDNEY:** Is normal in size and has a normal cortical echotexture. Cortico-medullary demarcation is distinct. The cortical thickness is normal. No evidence of any calculus / mass lesion seen.

**LEFT KIDNEY:** Is normal in size and has a normal cortical echotexture. Collecting system of is normal and cortico-medullary demarcation is distinct. The cortical thickness is normal. No evidence of any calculus / mass lesion seen.

**URINARY BLADDER:** Urinary bladder is partially distended.

**PROSTATE:** grossly normal.

No free fluid is noted in abdomen

**IMPRESSION:**

- NO SIGNIFICANT ABNORMALITY SEEN



**DR. AMRITA SINGH**  
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# SHEKHAR HOSPITAL

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UHID : OP:2024/006700  
 Name : Mr. KUMAR DEEPESH Age : 31 Y , Sex - M  
 Patient Type : Normal Aadhaar No:  
 Bill Date : 11/09/2024  
 Referred By. : MEDICINE DEPT.,  
 Collection Date/Time : 11/09/2024 12:31:50 PM Lab Refno : LB:2024/014312  
 Reporting Date/Time : 11/09/2024 12:55:52 PM

## HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
<b>CBC</b>			
<b>HAEMOGLOBIN(HB)</b> Method : CALORIMETRIC /CYNAMETH HAEMOGLOBIN	16.7	gm/dl	(M:13-17) (F:12-15)
<b>RBC COUNT</b> Method : FLOW CYTOMETRY	4.96*	million/cumm	(M) 4.5 - 5.5 (F) 3.8 - 4.8 (AT BIRTH) 5 - 7 ( 1 YR) 3.9 - 5.1 (2 - 12 YR) 4.0 - 5.2
<b>HCT</b> Method : CALCULATED	<b>47.3</b>	%	M :45 - 5% F: 41 - 5%
<b>MCV</b> Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	95.3	fl	83-101 fl
<b>MCH</b> Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	<b>33.7</b>	pg	27-32 pg
<b>MCHC</b> Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL	<b>35.3</b>	gm/dl	31.5 - 34.5 gm
<b>TOTAL LEUKOCYTE COUNT (TLC) (1390)</b> Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL Sample Type : Whole Blood (K2 EDTA WB)			
<b>TOTAL LEUKOCYTE COUNT (TLC)</b>	<b>11000</b>	/cmm	Adult (4000-10000) At birth (10000-26000) 1 Year (6000-16000) 2-7 years (6000-15000) 6-12Years (5000-13500)
<b>DIFFERENTIAL LEUCOCYTE COUNT (DLC)</b> Method : MANUAL / MICROSCOPIC Sample Type : Whole Blood (K2 EDTA WB)			
<b>POLYMORPHS</b>	55	%	40-70



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## HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
LYMPHOCYTES	28	%	20-40
MONOCYTES	05	%	2-10
EOSINOPHILS	<u>12</u>	%	1-6
BASOPHILS	00	%	1-2
<b>PLATELET COUNT</b>	2,10,000	/cumm	1.5 - 4.5 Lacs
Method : AUTOMATED ELECTRICAL RESISTANCE IMPEDANCE/ MANUAL			New Born 1 - 4.50 Lacs
Sample Type : Whole Blood (K2 EDTA WB)			
<b>MEDIWHEEL FULL BODY HEALTH PLUS CHECK-UP- URIC ACID (URINE)</b>			
Method : URICASE METHOD			
URIC ACID	<u>8.1</u>	MG	(M/F) 800 - 1000

Machines Used: HAEMAT ANALYSER, Mindray BC 5150, Rayto 240, Fully Automated  
 Checked By: Shashank Srivastava



\* Indicates Critical Values. ■ Indicates Out of TAT.

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End of Report



UHID : OP: 2024/006700  
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Bill Date : 11/09/2024  
Referred By. : MEDICINE DEPT.,  
Collection Date/Time : 11/09/2024 12:31:52 PM Lab Refno : LB:2024/014313  
Reporting Date/Time : 11/09/2024 12:54:23 PM

**BIO - CHEMISTRY Report**

Test Description	Result	Unit	Biological Reference Interval
<b>LIPID (PROFILE)</b>			
<b>VLDL (SERUM)</b>			
Method : CALCULATED			
Sample Type : SERUM			
VLDL (SERUM)*	40.0	mg/dl	10-40 mg/dl
<b>TRIGLYCERIDES (SERUM)</b>			
Method : ENZYMATIC METHOD			
Sample Type : SERUM			
TRIGLYCERIDES	<b>200.0</b>	mg/dl	Upto 170

Machines Used: AUTO - ANALYSER OPTIMA - 1

Checked By: Shashank Srivastava



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UHID : OP:2024/006700  
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Bill Date : 11/09/2024  
Referred By. : MEDICINE DEPT.,  
Collection Date/Time : 11/09/2024 12:31:52 PM

Age : 31 Y , Sex - M  
Aadhaar No:  
Lab Refno : LB:2024/014313  
Reporting Date/Time : 11/09/2024 12:54:23 PM

### HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
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1418 BLOOD GROUP & RH TYPE-  
Method : METHYL RESORSINOL METHOD

BLOOD GROUPING	"B"		
RH TYPING	POSITIVE	(as per sample collection)	

Checked By: Shashank Srivastava



DR. SHRUTI SINGH  
MD, PATHOLOGY



UHID : OP: 2024/006700  
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 Patient Type : Normal Aadhaar No:  
 Bill Date : 11/09/2024  
 Referred By. : MEDICINE DEPT.,  
 Collection Date/Time : 11/09/2024 12:32:03 PM Lab Refno : LB:2024/014317  
 Reporting Date/Time : 11/09/2024 12:51:32 PM

**BIO - CHEMISTRY Report**

Test Name	Results	Units	Bio.Ref.Interval
HbA1c (Glycosylated Hemoglobin)	5.1	%	Blood @ (HPLC)
<b>Interpretation</b>			
As per American Diabetes Association (ADA)			
<b>Reference Group</b>	<b>HbA1c in %</b>		
Non diabetic adults >=18 years	4.0 - 6.0		
At risk	>=6.0 to <= 6.5		
Diagnosing Diabetes	> 6.5		
Therapeutic goals for glycemc	Age > 19 years		
Control	Goal of therapy: <7.0 Action suggested: >8.0		
	Age < 19 years Goal of therapy: <7.5		
<b>Note:</b> 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly			



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**BIO - CHEMISTRY Report**

controlled.

2.Target goals of <7.0% may be beneficial in patients with short

duration of diabetes,long life expectancy and no significant cardiovascular disease.In patients with significant

complications

of diabetes,limited life expectancyor expensive co-morbid

conditions

targeting a goal of <7.0% may not be appropriate.

**Comments**

HbA1c provides an index of average blood glucose levels over the past

8-12 weeks and is a much better indicator of long term glyceimic control

as compared to blood and uniary glucose determinations.

**ADA criteria for correlation between HbA1c & Mean plasma glucose levels**

HbA1c(%)	Mean Plasma Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

**Machines Used:**AUTO - ANALYSER OPTIMA - 1

**Checked By:** Shashank Srivastava



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UHID : OP:2024/006700  
 Name : Mr. KUMAR DEEPESH Age : 31 Y , Sex - M  
 Patient Type : Normal Aadhaar No:  
 Bill Date : 11/09/2024  
 Referred By. : MEDICINE DEPT.,  
 Collection Date/Time : 11/09/2024 12:31:59 PM Lab Refno : LB:2024/014316  
 Reporting Date/Time : 11/09/2024 12:53:52 PM

## BIO - CHEMISTRY Report

Test Description	Result	Unit	Biological Reference Interval
<b>LFT (PROFILE)</b>			
<b>BILIRUBIN (TOTAL)</b> Method : JENDRASSIK MODIFIED METHOD Sample Type : SERUM	0.85	mg/dl	Upto 1.0
<b>BILIRUBIN DIRECT</b> Method : JENDRASSIK MODIFIED METHOD Sample Type : SERUM	<u>0.43</u>	mg/dl	Upto 0.25
<b>BILIRUBIN INDIRECT</b> Method : JENDRASSIK MODIFIED METHOD BILIRUBIN INDIRECT (SERUM)	0.42	mg/dl	0.2 - 0.8
<b>SGPT (ALT)</b> Method : IFCC METHOD Sample Type : SERUM			
SGPT	<u>92.0</u>	IU/L	Upto 49
<b>SGOT (AST)</b> Method : IFCC METHOD Sample Type : SERUM			
SGOT	<u>48.0</u>	IU/L	Men - Upto 46 Women - Upto 40
<b>ALKALINE PHOSPHATASE (ALP)</b> Method : UV KINETIC Sample Type : SERUM			
ALKALINE PHOSPHATASE	164.0	U/L	ADULT(>15Years) : 110-310 U/L CHILD(<15Years) : 270-810 U/L
<b>PROTEIN(TOTAL)</b> Method : Biuret method Sample Type : SERUM			
PROTEIN(TOTAL)*	<u>8.6</u>	gm/dl	6.0 - 8.5
<b>ALBUMIN(1461)</b> Method : BROMOCRESOL METHOD Sample Type : SERUM			
ALBUMIN	4.1	gm/dl	3.2 - 5.5
<b>LIPID (PROFILE)</b>			
<b>CHOLESTROL(TOTAL) (SERUM)</b> Method : ENZYMATIC METHOD Sample Type : SERUM			
CHOLESTROL(TOTAL)	<u>220.0</u>	mg/dl	Normal < 200 Borderline high 200 - 239 High >240



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 Reporting Date/Time : 11/09/2024 12:53:52 PM

## BIO - CHEMISTRY Report

Test Description	Result	Unit	Biological Reference Interval
<b>HDL (SERUM)</b> Method : DIRECT HOMOGENOUS METHOD Sample Type : SERUM	50.0	mg/dl	Men - 35 - 55 Women - 45 - 65
<b>LDL (SERUM)</b> Method : DIRECT HOMOGENOUS METHOD Sample Type : SERUM	130.0	mg/dl	<100
<b>MEDIWHEEL FULL BODY HEALTH PLUS CHECK-UP- BLOOD SUGAR FASTING</b> Method : GOD-POD METHOD Sample Type : Flouride Plasma	93.0	mg/dl	70-110
<b>RFT (PROFILE)</b>			
<b>BUN (BLOOD UREA NITROGEN)</b> Method : UV KINETIC Sample Type : SERUM	11.6	mg/dl	6 - 21
<b>CREATININE</b> Method : JAFFE KINETIC METHOD Sample Type : SERUM	0.87	mg/dl	0.5 - 1.4
<b>SODIUM (NA+)</b> Method : I.S.E. Sample Type : SERUM	139.4	mmol/L	136 - 146
<b>POTASSIUM (K+)</b> Method : I.S.E. Sample Type : SERUM	4.2	mmol/L	3.5 - 5.5

**Machines Used:** AUTO - ANALYSER OPTIMA - 1, HDC  
 Lyte Semi Autometed, Rayto 240, Fully  
 Autometed, SEMI AUTO - ANALYZER  
 Checked By: Shashank Srivastava



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Age : 31 Y , Sex - M  
Aadhaar No:

Lab Refno : LB:2024/014316  
Reporting Date/Time : 11/09/2024 12:53:52 PM

**BIO - CHEMISTRY Report**

Test Description	Result	Unit	Biological Reference Interval
GLOBULIN	4.5	gm/dl	2.0-3.5

**Machines Used:** AUTO - ANALYSER OPTIMA - 1, Rayto 240,  
Fully Autometed, SEMI AUTO - ANALYZER  
**Checked By:** Shweta Awasthi



DR. ANKITA KATARA PANDEY  
MD, PATHOLOGY



UHID : OP:2024/006700  
 Name : Mr. KUMAR DEEPESH  
 Patient Type : Normal  
 Bill Date : 11/09/2024  
 Referred By. : MEDICINE DEPT.,  
 Collection Date/Time : 11/09/2024 12:31:59 PM

Age : 31 Y , Sex - M

Aadhaar No:

Lab Refno : LB:2024/014316

Reporting Date/Time : 11/09/2024 12:53:52 PM

## HORMONE Report

Sl.No.	Test	Result	Reference Values
THYROID PROFILE ( TOTAL T3, T4 & TSH)			
Sample Type : Serum			
1.	TOTAL T3 (TRIIODOTYRONINE)	1.0	0.92-2.33 nmol/l
2.	TOTAL T4 (TYROXINE)	92.84	60-120 nmol/l
3.	TSH (THYROID STIMULATING HORMONE)	2.84	Euthyroid 0.25-5 ulU/ml Hyperthyroid <0.15 ulU/ml Hypothyroid >7.0 ulU/m
<b>Comments: INTERPRETATION (AS PER KIT INSERT)</b>			
Serum T3, T4 & TSH measurements from three components of Thyroid screening panel, useful in diagnosing various disorders of Gland function.			
Thyroid			
1. Primary HypoThyroidism is accompanied by depressed serum T values and elevated serum TSH level 3 & T4			
.2. Primary Hyper Thyroidism is accompanied by elevated serum T levels along with depressed TSH values 3 & T4			
.3. Normal T4 levels are accompanied by increased T3 in patient T3 Thyrotoxicosis with			
4. Slightly elevated T3 levels may be found in pregnancy and estherapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranoprylthiouracilol and			
5. Although elevated TSH levels are nearly always indicative of phythyroidism, and may be seen in secon dary thyrotoxicosis.			
REMARKS: Normal/Reference ranges given are as per kit literature. Correlation is advised. Clinical			
Note:- Maximum reading in our instrument is 100. In case of reading greater than 100, instrument given result with greater than (>) sign.			

Machines Used: MINI VIDAS

Checked By: Shweta Awasthi



DR. ANKITA KATARA PANDEY  
 MD. PATHOLOGY



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 Name : Mr. KUMAR DEEPESH Age : 31 Y , Sex - M  
 Patient Type : Normal Aadhaar No:  
 Bill Date : 11/09/2024  
 Referred By : MEDICINE DEPT.,  
 Collection Date/Time : 11/09/2024 12:31:57 PM Lab Refno : LB:2024/014315  
 Reporting Date/Time : 11/09/2024 2:18:05 PM

## CLINICAL PATHOLOGY Report

Sample Type : Urine

TEST	VALUE	UNIT	NORMAL VALUE
<b>PHYSICAL EXAMINATION</b>			
APPEARANCE	CLEAR		CLEAR
COLOUR	YELLOWISH		PALE
PH	6.0 (ACIDIC)		4.8-7.4
SPECIFIC GRAVITY	1.030		1.010-1.022
<b>CHEMICAL EXAMINATION</b>			
ALBUMIN	NIL		NEGATIVE
GLUCOSE	NIL		NEGATIVE
BLOOD	NIL		NEGATIVE
LEUCOCYTE ESTERASE	TRACE		NEGATIVE
NITRITE	NIL		NEGATIVE
<b>MICROSCOPIC EXAMINATION</b>			
RBCs	NIL	/HPF	0-5
DYSMORPHIC RBCs	ABSENT		
PUS CELLS	2-3	/HPF	0-5
EPITHELIAL CELLS	7-8	/HPF	<5
CASTS	NIL		ABS
CRYSTALS	NIL		ABS
BACTERIA	NIL		ABS
OTHERS	NIL		

Checked By: SATYAM PATHAK



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Lab Refno : LB:2024/014312  
Reporting Date/Time : 11/09/2024 12:55:52 PM

### HAEMATOLOGY Report

Test Description	Result	Unit	Biological Reference Interval
<b>ESR - WINTROBE</b> Sample Type : Whole Blood (K2 EDTA WB) ESR (WHOLE BLOOD)	7 MM / FIRST HOUR		(M) 0 -10 (F) 0 - 20

**Machines Used:** HAEMAT ANALYSER, Mindray BC  
5150, Rayto 240, Fully Automated  
**Checked By:** Shashank Srivastava



DR. ANITA KATARA PANDEY  
MD. PATHOLOGY

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