



URMILA HEART & MULTI SPECIALITY HOSPITAL

Address

Naya Tola, Opp. Polytechnic
Muzaffarpur
Ph.: 0621-2222211
0621-2268042
Mob.: 9661179794
9471013402

PATHOLOGY REPORT

Name:- Mr. Rajesh Kumar

Age :52Y/M

Date :-24/02/2024

Ref. By :- Dr. Bank Of Baroda

(E.C.No 60668)

Serial Number :- 0241

CBC (Complete Blood Count)

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
Hb (Haemoglobin)	12.0	gm/dl	12 - 17
Total Leukocyte Count	6,600	/Cumm.	4000 - 11000
RBC Count	3.80	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	37.4	%	30 - 50
Platelet Count	1.64	Lakhs/c.mm	1.5 - 4.5
MCV	99.8	fl	80 - 100
MCH	31.7	pg	26 - 34
MCHC	32.8	gm/dl	31.5 - 35
Differential Leukocyte Count			
Neutrophil	55	%	40 - 70
Lymphocyte	33	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	10	%	01 - 06
Basophil	00	%	< 1 - 2 %
ESR	18	mm/1 st hr.	00 - 20

end of report

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KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	24.0	mg/dl	13 - 45
S. Creatinine	0.87	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	11.20	mg/dl	6.0 - 21
S. Sodium (Na ⁺)	144.3	mmol/ltr	135 - 150
S. Potassium(K ⁺)	3.98	mmol/ltr	3.5 - 5.5
S. Chloride(Cl ⁻)	103.8	mmol/ltr	94 - 110
S. Calcium	9.05	mg/dl	8.7 - 11.0
S. Uric Acid	6.09	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

BLOOD GROUPING

Grouping (ABO)	:	"A" Group
Rh Typing	:	Positive.

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LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.77	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	26.0	U/L	05 - 40
S. SGOT (AST)	33.0	U/L	05 - 40
S.GGT	38.0	U/L	05 - 45
S. Alkaline Phosphatase	98.3	U/L	Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390
S. Total Protein	7.10	g/dl	6.0 - 8.3
S. Albumin	3.97	g/dl	3.2 - 5.0
S. Globulin	3.13	g/dl	2.8 - 4.5
S. A/G Ratio	1.26		

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Lipid Profile – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	195.0	mg/dl	130 - 200
S. Triglycerides	140.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	28.0	mg/dl	10 - 40
S. HDL-Cholesterol	50.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	117.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.90		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.34		1.5 - 3.5

BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	94.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	120.0	mg/dl	80 - 160

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GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	4.04	%

Mean Blood Glucose level (MBG) – 99.33 mg/dl

Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

Summary :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

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TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	118.8	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	4.05	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	4.10	µIU/mL	(0.3 - 5.5)

Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwish Competitive Chemi Luminescent Immuno Assay

REMARK :

THYROID HORMONES -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism. The expected increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland. Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism. The increase in total T4 and T3 is associated with pregnancy, oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration, which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR). a
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Urine Routine And Microscopy

TEST

RESULTS

Physical Examination

Volume 20 ml
Colour Straw
Specific Gravity 1.020
Appearance Clear
pH 5.0
(Acidic)

Chemical Examination

Protein Nil
Sugar Nil
Bile Salts N/D
Bile Pigments N/D

Microscopic Examination

Pus Cells 1-2 /hpf
Red Blood Cells Nil /hpf
Epithelial Cells Present (+)
Crystal/Cast Nil
Other Nil

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NAME :- RAJESH KUMAR .
REFD.BY:- DR. /SELF.

DATE :- 25/02/2024
SEX:- M

Thanks for the kind referral.
USG of Whole Abdomen

Liver:- Liver is enlarged in size [15.52 cm] and shows fatty infiltration.
GB:- Normal distention. No evidence of calculus ,sludge ,or mass lesion seen.
C.B.D:- C.B.D. is normal in caliber.
Pancreas:- Pancreas normal in size shape and echo texture.
Spleen:- Normal in shape, size & contour . {09.93cm}.
Kidneys:- Rt. Kidney :- 10.76 x 3.69 cm Lt. Kidney :- 10.54 x 4.34 cm
Both kidneys are normal in shape, size, contour, cortical
echo texture, and sinus echoes. No evidence of calculus,
calcification, hydronephrotic changes or mass lesion seen.
UB:- Urinary bladder is smoothly outlined. There is no calculus within.
prostate:- The prostate is normal in size .Weight:- 20.9grms.
Free fluid:- No free fluid is noted in the peritoneal cavity.
Other :- Few fecal gas seen in abdominal cavity .

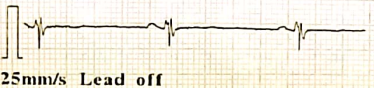
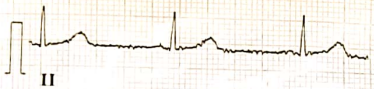
IMPRESSION :- Hepatomegaly with fatty liver.


(sonologist)

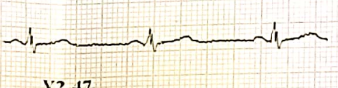
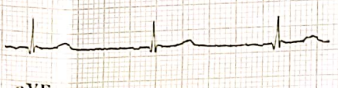
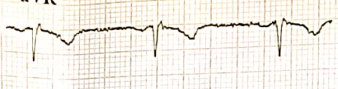
10mm/mV 0.5-75Hz AC50

BPL

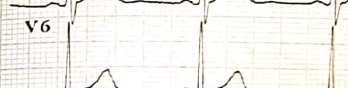
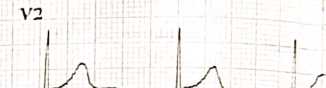
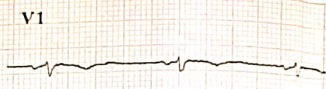
08-06-2005 07:41:18



25mm/s Lead off



V2.47



ID : 050608-0792
Name :
Age : 52 yr
Sex : Male
BP : mmHg
Height : cm
Weight : kg

Rajesh Kumar

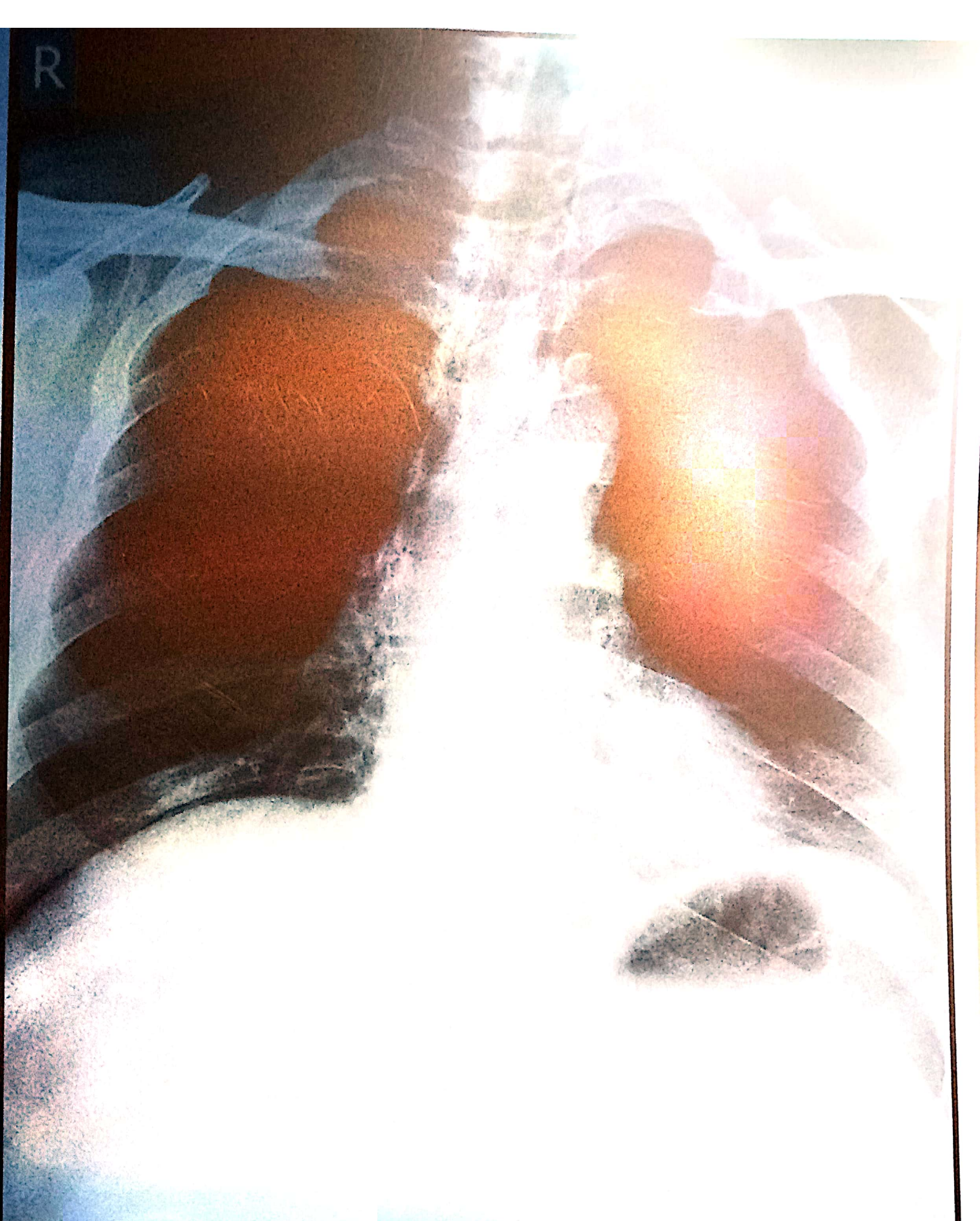
Minnesota Code: 9-8-3

HR : 63 bpm
P Dur : 94 ms
PR int : 122 ms
QRS Dur : 92 ms
QT/QTc int : 393/403 ms
P/QRS/T axis : 69/32/36 °
RV5/SV1 amp : 1.758/0.184 mV
RV5+SV1 amp : 1.942 mV
RV6/SV2 amp : 0.468/0.393 mV

Diagnosis Information:
113: Lead Off

Report Confirmed by:

R



RAJESH KUMAR
Chest PA

52 Male
24-02-24 2:30:26 PM

64.2 %
SELF

SRMILA HEART & MULTISPECIALITY HOSPITAL, NAYA TOLA MUZAFFARPUR



Scanned with OKEN Scanner