



# UNIVERSAL DIAGNOSTIC CENTRE

S3/57, Vedant Complex, Pokharan Road No. 1, Vartak Nagar, Thane (W) 400 606.  
Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 14:57

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
T3	: 1.2	ng/dl	0.60-2.0 ng/dl
T4	: 6.90	µg/dl	5.0-13.0 µg/dl
TSH	: 2.15	µU/ml	0.4 - 6.0 µU/ml

Method:ELISA METHOD

### Interpretation

Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, subclinical hyper-thyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:57:27)



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

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**Report Released** : 26/10/2024 14:57

## FASTING AND POSTPRANDIAL PLASMA GLUCOSE

Test	Result	Unit	Biological Ref. Range
Fasting Plasma Glucose <small>Method: Hexokinase</small>	: 101.00	mg/dl	70-110 mg/dl
Fasting Urine Glucose	: Absent		Absent
Fasting Urine Ketone	: Absent		Absent
Post Prandial Plasma Glucose ( 2 Hrs.after lunch)	: 129.00	mg/dl	70 to 140 mg/dl
PP Urine Glucose	: Sample Not Received		
PP Urine Ketone	: Sample Not Received		
Method : Glucose Oxidase Peroxidase (GOD/POD)			

### AS PER AMERICAN DIABETES ASSOCIATION 2010 UPDATE

#### FASTING GLUCOSE LEVEL-

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl POSTPRANDIAL/POST GLUCOSE (75 grams)
- Normal glucose tolerance : 70-139 mg/dl - Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS - Fasting plasma glucose  $\geq 126$  mg/dl - Classical symptoms +Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$  \*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.

### BIOCHEMISRTY TEST DONE ON MERILYZER CLINIQUANT BIOCHEMISRTY ANALYZER

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 27/10/2024 00:05:00)



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## COMPLETE BLOOD COUNT

Test	Result	Unit	Reference Range
Haemoglobin	15.1	gm/dl	14.0-18.0 gm/dl

### RBC PARAMETERS

Total R.B.C. Count	5.88	mill/cumm	4.5-6.5 mill/cumm
PCV	46.6	%	40-54 %
MCV	79.3	fl	76-90 fl
MCH	25.7	Pg	27-32 Pg
MCHC	32.4	gm/dl	30-35 gm/dl
RDW	13.8	%	11-14.5 %

### WBC PARAMETERS

Total W.B.C. Count	5400	per cumm	4000-11000 per cumm
Neutrophils	61	%	40-75 %
Lymphocytes	29	%	20-40 %
Monocytes	06	%	0 - 10 %
Eosoniphils	04	%	0 - 6 %
Basophils	0	%	0-1 %
Band Forms	0	%	0 - 0 %

### PLATELET PARAMETERS

Platelet Count	187000	per cu.mm.	150000 - 450000 per cu.mm.
MPV	9.7	fL	3-12 fL

### PERIPHERIAL SMEAR FINDINGS:

WBC Morphology	Normal
RBC Morphology	Normocytic, Normochromic
Platelets on Smear	Adequate on smear.

EDTA Sample Procesed On a Fully Automated 3-Part Analyzer H-360

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:50)



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**Sample Collection :** 26/10/2024 13:45  
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**Report Released :** 26/10/2024 14:57

## GLYCOSYLATED-HAEMOGLOBIN (GHb)/ HbA1C BY HPLC

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
HbA1C	6.2	%	Normal : 4 - 6.2% Prediabetic : < 7 % Diabetes : > 8 %
Estimated average Glucose: (eAG)	131.24	mg / dl	70-140 mg / dl

**Method:** Particle enhanced immunoturbidimetric test

### NOTE:

#### CLINICAL SIGNIFICANCE

Hemoglobin A1c (HbA1c) is a glycosylated hemoglobin which is formed by the non enzymatic reaction of glucose with native hemoglobin. This process runs continuously throughout the circulatory life of the red cell (average life time 100 - 120 days).

The rate of glycation is directly proportional to the concentration of glucose in the blood. The blood level of HbA1c represents the average blood glucose level over the preceding 6 to 8 weeks (due to the kinetics of erythrocyte turnover this period is more affected by the blood glucose level than the preceding weeks).


Therefore, HbA1c is suitable for retrospective long term monitoring of blood glucose concentration in individuals with diabetes mellitus. Clinical studies have shown that lowering of HbA1c level can help to prevent or delay the incidence of late diabetic complications. As the amount of HbA1c also depends on the total quantity of hemoglobin, the reported HbA1c value is indicated as a percentage of the total hemoglobin concentration. Falsely low values (low HbA1c despite high blood glucose) may occur in people with conditions with shortened red blood cell survival (hemolytic diseases) or significant recent blood loss (higher fraction of young erythrocytes). Falsely high values (high HbA1c despite normal blood glucose) have been reported in iron deficiency anemia (high proportion of old erythrocytes). These circumstances have to be considered in clinical interpretation of HbA1c values


(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:52)

----- End Of Report -----



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Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 18:53

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## REPORT ON PROSTATE SPECIFIC ANTIGEN

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
PSA IN PATIENT'S SERUM ECLIA	: 1.20	ng/ml	0.00-4.00 ng/ml
TEST DONE WITH	: ELISA METHOD		

### NOTE :

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:59)

## PERIPHERAL SMEAR EXAMINATION

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
RBC Morphology	: Normocytic, Normochromic		
WBC morphology	: Normal		
Platelets on Smear	: Adequate on smear.		
Malariaial Parasites	: Not Seen		


Method - Microscopy


(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:56)

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Report Released : 26/10/2024 18:54

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## EXAMINATION OF URINE

Test	Result	Biological Ref. Range
<b>PHYSICAL EXAMINATION</b>		
QUANTITY (URINE) :	20 ML	
Colour :	Pale Yellow	
Appearance :	Clear	
Reaction (pH) :	6.5	4.5 - 8.0
Specific Gravity :	1.015	1.010 - 1.030
<b>CHEMICAL EXAMINATION</b>		
Protein :	Absent	Absent
Glucose :	Absent	Absent
Ketone :	Absent	Absent
Occult Blood :	Absent	Absent
Bilirubin :	Absent	Absent
Urobilinogen :	Absent	Normal
<b>MICROSCOPIC EXAMINATION</b>		
Epithelial Cells :	0 - 1 / hpf	
Pus cells :	1 - 2 / hpf	
Red Blood Cells :	Absent / hpf	
Casts :	Absent / lpf	Absent / lpf
Crystals :	Absent	Absent
<b>OTHER FINDINGS</b>		
Amorphous Deposits :	Absent	Absent
Yeast Cells :	Absent	Absent
Bacteria :	Absent	Absent
Mucus Threads :	Absent	
Spermatozoa :	Absent	

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:02)

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## BLOOD GROUP

Test	Result	Unit	Biological Ref. Range
ABO Group	: A		
RH Factor	: POSITIVE		

Slide agglutination test

Slide Agglutination Test

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:09)

## RENAL FUNCTION TESTS

Test	Result	Unit	Biological Ref. Range
Blood Urea Method: Urease UV/GLDH	: 31.40	mg/dl	10-50 mg/dl
Blood Urea Nitrogen	: 14.64	mg/dl	5-18 mg/dl
S. Creatinine Method: Modified Jaffe's	: 0.96	mg/dl	0.7-1.3 mg/dl
S. Uric Acid	: 5.2	mg/dl	3.5-7.2 mg/dl
Total Proteins	: 6.8	gm/dl	6.0-8.0 gm/dl
S. Albumin	: 3.9	gm/dl	3.5-5.0 gm/dl
S. Globulin	: 2.90	gm/dl	2.3-3.5 gm/dl
A/G Ratio	: 1.34		0.90-2.00
Calcium	: 10.20	mg/dl	8.5-11.0 mg/dl
S. Phosphorus	: 3.2	mg/dl	2.5-5.0 mg/dl
S. Sodium	: 140.20	mmol/L	135-155 mmol/L
S. Potassium	: 3.65	mmol/L	3.5-5.0 mmol/L
S. Chloride	: 98.20	mmol/L	98-110 mmol/L

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120

ELECTROLYTE TEST DONE ON EL-120 ANALYZER

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:29)

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**Ref. By** : SIDDHIVINAYAK HOSPITAL (APOLLO)

**Report Released** : 26/10/2024 14:58

**Sent By** : UNIVERSAL DIAGNOSTIC CENTRE

## ERYTHROCYTE SEDIMENTATION RATE (WESTERGREN'S)

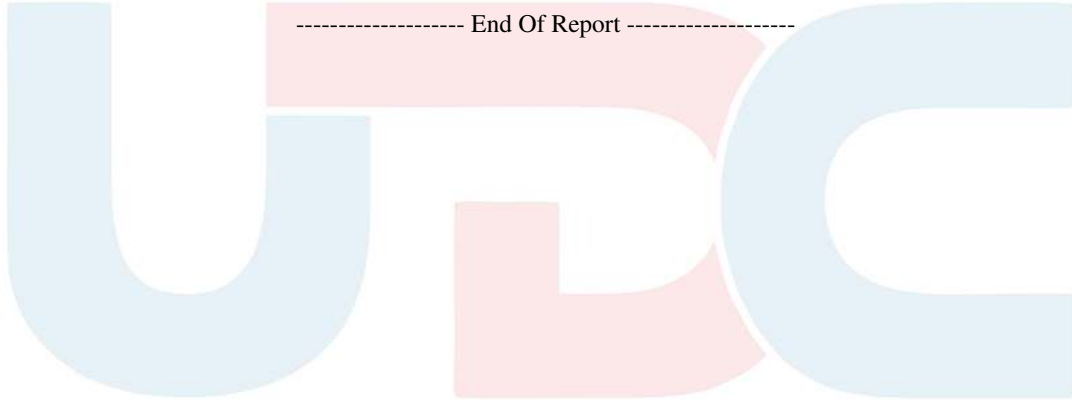
<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
E.S.R (Westergren)	: 12	mm at 1hr	0-20 mm at 1hr

**Method** : Westergren`s

**Done with**: ErySed Random Access ESR analyzer

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:32)

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**Report Released** : 26/10/2024 14:58

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## LIPID PROFILE

Test	Result	Unit	Reference Range
Total Cholesterol	: 169.8	mg/dl	Desirable <200 Borderline high 200 - 239 High >240
S. Triglyceride	: 133.50	mg/dl	Desirable <150 Borderline high 150 - 199 High 200 - 499 Very high >500
HDL Cholesterol	: 32.10	mg/dl	Desirable >80 Borderline 30 - 80
LDL Cholesterol	: 111.00	mg/dl	Low <30 Optimal <100 Near optimal 100 - 129 Borderline high 130 - 159 High 160 - 189 Very high >190
VLDL Cholesterol	: 26.7	mg/dl	5 - 30 mg/dl
TC/HDL Ratio	: 5.3		0 - 4.5
LDL/HDL Ratio	: 3.5		0-3.5

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120.

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:42)

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## REPORT OF GAMMA GT

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
SERUM GAMMA GT	: 16.3	IU/L	11-50 IU/L

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:13)

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Report Released : 26/10/2024 14:59

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## LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	: 0.47	mg/dl	0-1.2 mg/dl
S. Bilirubin (Direct)	: 0.24	mg/dl	0-0.40 mg/dl
S. Bilirubin (Indirect)	: 0.23	mg/dl	0-0.55 mg/dl
S. G. O.T	: 36.50	IU/L	0-42 IU/L
S. G. P. T	: 18.40	IU/L	0-42 IU/L
S. Alkaline Phosphatase	: 174.60	IU/L	40-306 IU/L
Total Proteins	: 6.80	gm/dl	6.-8 gm/dl
S. Albumin	: 3.9	gm/dl	3.5-5.0 gm/dl
S. Globulin	: 2.90	gm/dl	2.3-3.5 gm/dl
A/G Ratio	: 1.34		0.90-2.00

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:59:48)

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Reg. No.

Date : 26/10/24

Blood  Urine  Stool  Vaccine  ECG  2D Echo  TMT  X-Ray  PFT  Audio  USG  OPT  Dr.

Employee's Name : Sandesh More

With Glass / Without Glasses

Blood Group : A<sup>+</sup>ve

	Rt.	Lt.
NEAR	NIG	NIG
DISTANT	6/6	6/6
COLOUR VISION	(N)	(N)

Age/Sex : 42

Contact No. : 9463386417

**PHYSIOLOGIC PARAMETERS :**

Ht. (Cms.)      Wt. (Kgs.)      BMI  
174              72.7

**GENERAL EXAMINATION**

Pulse (Min) : 67/m      BP (mm Hg) : 141/100mmHg *SP2=98%*  
 R.R. (Min) : 22/m      Temp. 36.8  
 Pallor : No              Icterus : No  
 Clubbing : No

**COMPLAINTS : (Specify if any)**

No any Specific

**ENT EXAMINATION (Specify if Abnormal)**

Ear                      Nose                      Tongue  
 Teeth                      Tonsils                      Gums

**PAST HISTORY :**

No

**SYSTEMIC EXAMINATION**

LOCOMOTOR SYSTEM \_\_\_\_\_  
 RESPIRATORY SYSTEM \_\_\_\_\_  
 CARDIOVASCULAR SYSTEM \_\_\_\_\_  
 CENTRAL NERVOUS SYSTEM \_\_\_\_\_  
 ABDOMEN \_\_\_\_\_  
 GENITAL SYSTEM \_\_\_\_\_  
 MUSCULOSKELETAL SYSTEM \_\_\_\_\_

**FAMILY HISTORY :**

Father: HTN  
Mother: Nil

**SURGICAL HISTORY :**

No

**PERSONAL HISTORY (Addiction if any)**

Chronic / Frequent / Occasional : \_\_\_\_\_  
 Smoker / Tobacco Chewer / Alcoholic : No

PFT                                      MEANS                                      PRED                                      % PRED

SVC  
 FVC  
 FEV1 / FVC  
 Remark

**Audiometry**                      500                      1000                      2000                      Frequency in Hz                      4000                      6000                      8000

Right Ear  
 Left Ear  
 Remark

DOCTOR SIGNATURE



Reg. No.  
 TMC/ZONE-C/1  
 386

*At present pt is clinically fit.*

ID: 1762 Sandesh More 26-10-2024 09:17:30 AM

male 42 Years

Req. No. :

BP:

SpO<sub>2</sub>: 98.1%

PR: 67/m

HR : 74 bpm

P : 99 ms

PR : 167 ms

QRS : 75 ms

QT/QTcBz : 385/429 ms

P/QRS/T : 55/53/45 °

RV5/SV1 : 2.481/1.116 mV

Diagnosis Information:

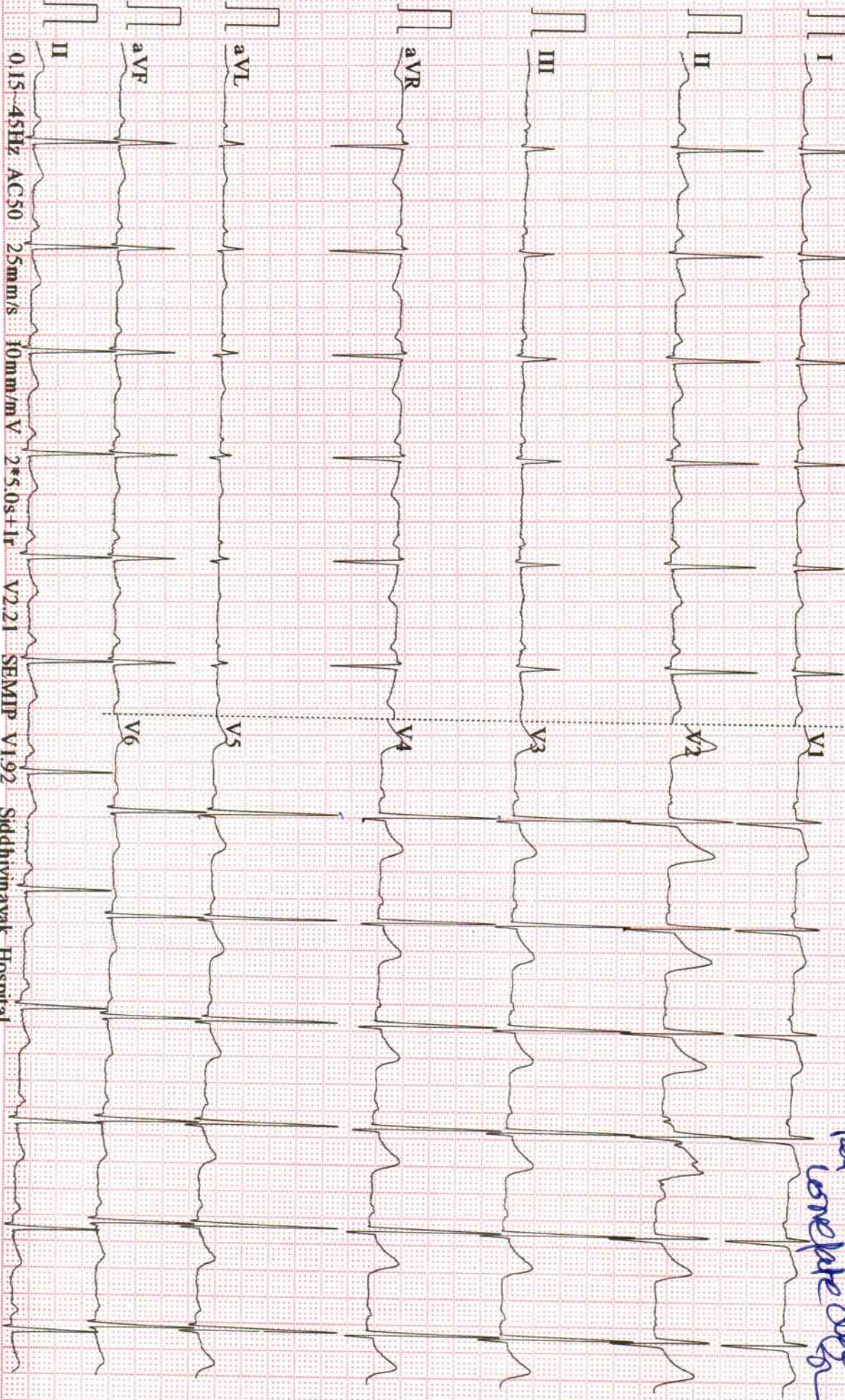
Sinus Arrhythmia

High Voltage(Left Ventricle)

Low T Wave(V6)

Report Confirmed by:

NSR  
UH  
Normal ECG  
Rate 74/min  
Complete QRS



0.15-45Hz AC50 25mm/s 10mm/mV 2\*5.0s+1r V2.21 SEMIP V1.92 Siddhiviyak Hospital



Name - Mr. Sandesh More	Age - 42 Y/M
Ref by dr.- Siddhivinayak Hospital	Date - 26/10/2024

## USG ABDOMEN & PELVIS

### Findings: -

The **liver** dimension is normal in size ( 14.8 cm ) it appears normal in morphology with **raised echogenicity**. No evidence of intrahepatic ductal dilatation.

The **gb**-gallbladder is distended normally. Wall thickness is normal.

The **cbd**- common bile duct is normal. The portal vein is normal.

The **pancreas** appears normal in morphology.

The **spleen** is normal in size ( 11.2cm )and show normal morphology.

Both **kidneys** demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 10.3 x 4.4 cm

The left kidney measures 10.4 x 4.5 cm.

**Urinary bladder:** -normally distended. Wall thickness - normal.

**Prostate** is normal in size and morphology size:24.5 grams.

No **free fluid** is seen.

### Impression:-

- Fatty liver ( Grade I )

**DR. AMOL BENDRE**  
**MBBS; DMRE**  
**CONSULTANT RADIOLOGIST**





<b>Patient ID.</b>	PAT000954	<b>StudyDate</b>	26-10-2024
<b>PatientName</b>	SANDESH MORE	<b>Age/Sex</b>	042Y/M
<b>Ref By</b>	SIDDHIVINAYAK HOSPITAL	<b>Study</b>	CHEST

**RADIOGRAPH OF CHEST PA VIEW**

**FINDINGS :-**

The lungs on either side show equal translucency.  
The peripheral pulmonary vasculature is normal.  
No focal lung lesion is seen.  
Bilateral CP angles are normal.  
Both hila are normal in size, have equal density, and bear normal relationships.  
The heart and trachea are central in position and no mediastinal abnormality is visible.  
The domes of the diaphragms are normal in position and show a smooth outline.

**IMPRESSION :-**

- No significant abnormality detected.

**ADVICE :-** Clinical correlation and follow up.

Dr. MANISH JOSHI  
MBBS, DMRE  
CONSULTANT RADIOLOGIST  
Reg.no.2018041145

**Disclaimer-**It is an online interpretation of medical imaging based on clinical data. All modern machines/procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patients identification in online reporting is not established, so in no way this report can be utilized for any medico legal purpose. In case of any discrepancy due to typing error or machinery error please get it rectified immediately.

## **SHLOKA DIAGNOSTIC CENTRE**

### **Venture of Vedant Multi-speciality Hospital and Institute**

📍 Gate No, S-2, Vedant Commercial Complex, Vartak Nagar, Thane (W), 400 606.

☎ 022-6848 4848 📠 8097370719 ✉ info@sholkahospital.com



NAME	MR. SANDESH MORE
AGE/SEX	42 YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	26/10/2024

## 2-D ECHOCARDIOGRAPHY & COLOR DOPPLER

### FINAL IMPRESSION:

- NORMAL CARDIAC STRUCTURES
- GOOD LV SYSTOLIC FUNCTION. LVEF = 60%.
- LV DIASTOLIC FUNCTION NORMAL .
- TRIVIAL TR. REST VALVES NORMAL.
- NO E/O PULMONARY ARTERIAL HYPERTENSION.

### FINDINGS:

- Chambers:

All chambers are grossly normal in size.  
No regional wall motion abnormality at rest.  
Both interatrial and interventricular septae are intact.  
Good LV/RV systolic function. LVEF = 60%. LV diastolic function normal  
No e/o of intracardiac clot or vegetation.

- Valves:

Trivial TR. Rest all valves are grossly normal in structure and function.

- Great vessels:

Aorta and Pulmonary arteries are normal in size, structure and connections.  
No e/o pulmonary arterial hypertension.  
IVC is normal in size and collapsing well with inspiration.

- Pericardium:

Pericardium is grossly normal with no e/o pericardial effusion.





**Imaging Department**

Sonography | Colour Doppler | 3D / 4D USG

**COLOUR FLOW & DOPPLER MEASUREMENTS:**

Valve	Gradient (Peak, in mmHg)	Regurgitation
Mitral	Normal	Nil
Tricuspid	Normal	Trivial
Aortic	Normal	Nil
Pulmonary	PASP by TR jet-20mmHg	Nil

*Others:* Mitral valve E vel. 74 cm/s, A vel. 60 cm/s ; E/A >1 ::  
 Mitral annulus E' vel. 12 cm/s

**M MODE MEASUREMENTS:**

	Diastole (mm)	Systole (mm)
LVID	39	29
IVS	11	15
PW	11	15

LA (mm)	33
Aorta (mm)	30

FS %	35
LVEF %	60



**Dr. ARJUN SUSAR**  
 MD (Medicine), DM (Cardiology)

**DISCLAIMER:** Echocardiography's sensitivity & specificity are high but not 100% and underestimation or overestimation of any finding is possible (although rare). Hence clinical correlation is strongly recommended in every case for all findings.



# UNIVERSAL DIAGNOSTIC CENTRE

S3/57, Vedant Complex, Pokharan Road No. 1, Vartak Nagar, Thane (W) 400 606.  
Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 14:57

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
T3	: 1.2	ng/dl	0.60-2.0 ng/dl
T4	: 6.90	µg/dl	5.0-13.0 µg/dl
TSH	: 2.15	µU/ml	0.4 - 6.0 µU/ml

Method:ELISA METHOD

### Interpretation

Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, subclinical hyper-thyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:57:27)



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

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**Name** : MR. SANDESH GANPAT MORE

**LABID** : 13333

**Sample Collection** : 26/10/2024 13:45

**Age** : 42 Yrs. **Sex** : M

**Sample Received** : 26/10/2024 13:45

**Ref. By** : SIDDHIVINAYAK HOSPITAL (APOLLO)

**Report Released** : 26/10/2024 14:57

**Sent By** : UNIVERSAL DIAGNOSTIC CENTRE

## FASTING AND POSTPRANDIAL PLASMA GLUCOSE

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
Fasting Plasma Glucose <small>Method: Hexokinase</small>	: 101.00	mg/dl	70-110 mg/dl
Fasting Urine Glucose	: Absent		Absent
Fasting Urine Ketone	: Absent		Absent
Post Prandial Plasma Glucose ( 2 Hrs.after lunch)	: 129.00	mg/dl	70 to 140 mg/dl
PP Urine Glucose	: Sample Not Received		
PP Urine Ketone	: Sample Not Received		
Method : Glucose Oxidase Peroxidase (GOD/POD)			

### AS PER AMERICAN DIABETES ASSOCIATION 2010 UPDATE

#### FASTING GLUCOSE LEVEL-

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl POSTPRANDIAL/POST GLUCOSE (75 grams)
- Normal glucose tolerance : 70-139 mg/dl - Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS - Fasting plasma glucose  $\geq 126$  mg/dl - Classical symptoms +Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$  \*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.

### BIOCHEMISRTY TEST DONE ON MERILYZER CLINIQUANT BIOCHEMISRTY ANALYZER

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 27/10/2024 00:05:00)



Checked By -

**Preeti Jaiswar**  
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**Dr. Dhiraj Hivare**  
M.D. (PATH.)

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 14:57

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## COMPLETE BLOOD COUNT

Test	Result	Unit	Reference Range
Haemoglobin	15.1	gm/dl	14.0-18.0 gm/dl

### RBC PARAMETERS

Total R.B.C. Count	5.88	mill/cumm	4.5-6.5 mill/cumm
PCV	46.6	%	40-54 %
MCV	79.3	fl	76-90 fl
MCH	25.7	Pg	27-32 Pg
MCHC	32.4	gm/dl	30-35 gm/dl
RDW	13.8	%	11-14.5 %

### WBC PARAMETERS

Total W.B.C. Count	5400	per cumm	4000-11000 per cumm
Neutrophils	61	%	40-75 %
Lymphocytes	29	%	20-40 %
Monocytes	06	%	0 - 10 %
Eosoniphils	04	%	0 - 6 %
Basophils	0	%	0-1 %
Band Forms	0	%	0 - 0 %

### PLATELET PARAMETERS

Platelet Count	187000	per cu.mm.	150000 - 450000 per cu.mm.
MPV	9.7	fL	3-12 fL

### PERIPHERIAL SMEAR FINDINGS:

WBC Morphology	Normal
RBC Morphology	Normocytic, Normochromic
Platelets on Smear	Adequate on smear.

EDTA Sample Procesed On a Fully Automated 3-Part Analyzer H-360

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:50)



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



**Name :** MR. SANDESH GANPAT MORE  
**Ref. By :** SIDDHIVINAYAK HOSPITAL (APOLLO)  
**Sent By :** UNIVERSAL DIAGNOSTIC CENTRE

**LABID :** 13333  
**Age :** 42 Yrs. **Sex :** M

**Sample Collection :** 26/10/2024 13:45  
**Sample Received :** 26/10/2024 13:45  
**Report Released :** 26/10/2024 14:57

## GLYCOSYLATED-HAEMOGLOBIN (GHb)/ HbA1C BY HPLC

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Range</u>
HbA1C	6.2	%	Normal : 4 - 6.2% Prediabetic : < 7 % Diabetes : > 8 %
Estimated average Glucose: (eAG)	131.24	mg / dl	70-140 mg / dl

**Method:** Particle enhanced immunoturbidimetric test

### NOTE:

#### CLINICAL SIGNIFICANCE

Hemoglobin A1c (HbA1c) is a glycosylated hemoglobin which is formed by the non enzymatic reaction of glucose with native hemoglobin. This process runs continuously throughout the circulatory life of the red cell (average life time 100 - 120 days).

The rate of glycation is directly proportional to the concentration of glucose in the blood. The blood level of HbA1c represents the average blood glucose level over the preceding 6 to 8 weeks (due to the kinetics of erythrocyte turnover this period is more affected by the blood glucose level than the preceding weeks).


Therefore, HbA1c is suitable for retrospective long term monitoring of blood glucose concentration in individuals with diabetes mellitus. Clinical studies have shown that lowering of HbA1c level can help to prevent or delay the incidence of late diabetic complications. As the amount of HbA1c also depends on the total quantity of hemoglobin, the reported HbA1c value is indicated as a percentage of the total hemoglobin concentration. Falsely low values (low HbA1c despite high blood glucose) may occur in people with conditions with shortened red blood cell survival (hemolytic diseases) or significant recent blood loss (higher fraction of young erythrocytes). Falsely high values (high HbA1c despite normal blood glucose) have been reported in iron deficiency anemia (high proportion of old erythrocytes). These circumstances have to be considered in clinical interpretation of HbA1c values


(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:52)

----- End Of Report -----



Checked By -

  
**Preeti Jaiswar**  
Senior Technician  
ADMLT

  
**Dr. Dhiraj Hivare**  
M.D. (PATH.)

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 18:53

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## REPORT ON PROSTATE SPECIFIC ANTIGEN

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
PSA IN PATIENT'S SERUM ECLIA	: 1.20	ng/ml	0.00-4.00 ng/ml
TEST DONE WITH	: ELISA METHOD		

### NOTE :

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:59)

## PERIPHERAL SMEAR EXAMINATION

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
RBC Morphology	: Normocytic, Normochromic		
WBC morphology	: Normal		
Platelets on Smear	: Adequate on smear.		
Malariaial Parasites	: Not Seen		


Method - Microscopy


(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:53:56)

----- End Of Report -----



Checked By -

  
Preeti Jaiswar  
Senior Technician  
ADMLT

  
Dr. Dhiraj Hivare  
M.D. (PATH.)

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# UNIVERSAL DIAGNOSTIC CENTRE

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 18:54

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## EXAMINATION OF URINE

Test	Result	Biological Ref. Range
<b>PHYSICAL EXAMINATION</b>		
QUANTITY (URINE)	20 ML	
Colour	Pale Yellow	
Appearance	Clear	
Reaction (pH)	6.5	4.5 - 8.0
Specific Gravity	1.015	1.010 - 1.030
<b>CHEMICAL EXAMINATION</b>		
Protein	Absent	Absent
Glucose	Absent	Absent
Ketone	Absent	Absent
Occult Blood	Absent	Absent
Bilirubin	Absent	Absent
Urobilinogen	Absent	Normal
<b>MICROSCOPIC EXAMINATION</b>		
Epithelial Cells	0 - 1 / hpf	
Pus cells	1 - 2 / hpf	
Red Blood Cells	Absent / hpf	
Casts	Absent / lpf	Absent / lpf
Crystals	Absent	Absent
<b>OTHER FINDINGS</b>		
Amorphous Deposits	Absent	Absent
Yeast Cells	Absent	Absent
Bacteria	Absent	Absent
Mucus Threads	Absent	
Spermatozoa	Absent	

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:02)

----- End Of Report -----



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

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# UNIVERSAL DIAGNOSTIC CENTRE

S3/57, Vedant Complex, Pokharan Road No. 1, Vartak Nagar, Thane (W) 400 606.  
Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 18:54

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## BLOOD GROUP

Test	Result	Unit	Biological Ref. Range
ABO Group	: A		
RH Factor	: POSITIVE		

Slide agglutination test

Slide Agglutination Test

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:09)

## RENAL FUNCTION TESTS

Test	Result	Unit	Biological Ref. Range
Blood Urea Method: Urease UV/GLDH	: 31.40	mg/dl	10-50 mg/dl
Blood Urea Nitrogen	: 14.64	mg/dl	5-18 mg/dl
S. Creatinine Method: Modified Jaffe's	: 0.96	mg/dl	0.7-1.3 mg/dl
S. Uric Acid	: 5.2	mg/dl	3.5-7.2 mg/dl
Total Proteins	: 6.8	gm/dl	6.0-8.0 gm/dl
S. Albumin	: 3.9	gm/dl	3.5-5.0 gm/dl
S. Globulin	: 2.90	gm/dl	2.3-3.5 gm/dl
A/G Ratio	: 1.34		0.90-2.00
Calcium	: 10.20	mg/dl	8.5-11.0 mg/dl
S. Phosphorus	: 3.2	mg/dl	2.5-5.0 mg/dl
S. Sodium	: 140.20	mmol/L	135-155 mmol/L
S. Potassium	: 3.65	mmol/L	3.5-5.0 mmol/L
S. Chloride	: 98.20	mmol/L	98-110 mmol/L

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120

ELECTROLYTE TEST DONE ON EL-120 ANALYZER

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:29)

----- End Of Report -----



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

**Name** : MR. SANDESH GANPAT MORE

**LABID** : 13333

**Sample Collection** : 26/10/2024 13:45

**Age** : 42 Yrs. **Sex** : M

**Sample Received** : 26/10/2024 13:45

**Ref. By** : SIDDHIVINAYAK HOSPITAL (APOLLO)

**Report Released** : 26/10/2024 14:58

**Sent By** : UNIVERSAL DIAGNOSTIC CENTRE

## ERYTHROCYTE SEDIMENTATION RATE (WESTERGREN'S)

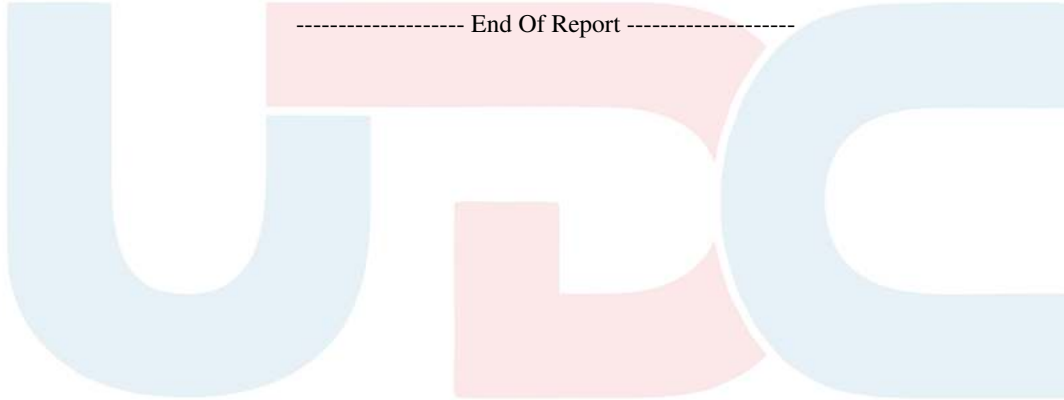
<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
E.S.R (Westergren)	: 12	mm at 1hr	0-20 mm at 1hr

**Method** : Westergren`s

**Done with**: ErySed Random Access ESR analyzer

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:32)

----- End Of Report -----



Checked By -

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Senior Technician  
ADMLT

**Dr. Dhiraj Hivare**  
M.D. (PATH.)

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Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



**Name** : MR. SANDESH GANPAT MORE

**LABID** : 13333

**Sample Collection** : 26/10/2024 13:45

**Age** : 42 Yrs. **Sex** : M

**Sample Received** : 26/10/2024 13:45

**Ref. By** : SIDDHIVINAYAK HOSPITAL (APOLLO)

**Report Released** : 26/10/2024 14:58

**Sent By** : UNIVERSAL DIAGNOSTIC CENTRE

## LIPID PROFILE

Test	Result	Unit	Reference Range
Total Cholesterol	: 169.8	mg/dl	Desirable <200 Borderline high 200 - 239 High >240
S. Triglyceride	: 133.50	mg/dl	Desirable <150 Borderline high 150 - 199 High 200 - 499 Very high >500
HDL Cholesterol	: 32.10	mg/dl	Desirable >80 Borderline 30 - 80
LDL Cholesterol	: 111.00	mg/dl	Low <30 Optimal <100 Near optimal 100 - 129 Borderline high 130 - 159 High 160 - 189 Very high >190
VLDL Cholesterol	: 26.7	mg/dl	5 - 30 mg/dl
TC/HDL Ratio	: 5.3		0 - 4.5
LDL/HDL Ratio	: 3.5		0-3.5

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120.

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:58:42)

----- End Of Report -----



Checked By -

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Senior Technician  
ADMLT

**Dr. Dhiraj Hivare**  
M.D. (PATH.)

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13333 261024

**Name** : MR. SANDESH GANPAT MORE

**LABID** : 13333

**Sample Collection** : 26/10/2024 13:45

**Age** : 42 Yrs. **Sex** : M

**Sample Received** : 26/10/2024 13:45

**Ref. By** : SIDDHIVINAYAK HOSPITAL (APOLLO)

**Report Released** : 26/10/2024 18:54

**Sent By** : UNIVERSAL DIAGNOSTIC CENTRE

## REPORT OF GAMMA GT

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Range</u>
SERUM GAMMA GT	: 16.3	IU/L	11-50 IU/L

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 18:54:13)

----- End Of Report -----



Checked By -

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Senior Technician  
ADMLT

**Dr. Dhiraj Hivare**  
M.D. (PATH.)

\*\*Sample has been collected outside the laboratory. The results pertain to the sample received.



# UNIVERSAL DIAGNOSTIC CENTRE

S3/57, Vedant Complex, Pokharan Road No. 1, Vartak Nagar, Thane (W) 400 606.  
Contact No: 022 47488444 / +91 9930081525. Email: udcpath@gmail.com



13333 261024

Name : MR. SANDESH GANPAT MORE

LABID : 13333

Sample Collection : 26/10/2024 13:45

Age : 42 Yrs. Sex : M

Sample Received : 26/10/2024 13:45

Ref. By : SIDDHIVINAYAK HOSPITAL (APOLLO)

Report Released : 26/10/2024 14:59

Sent By : UNIVERSAL DIAGNOSTIC CENTRE

## LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	: 0.47	mg/dl	0-1.2 mg/dl
S. Bilirubin (Direct)	: 0.24	mg/dl	0-0.40 mg/dl
S. Bilirubin (Indirect)	: 0.23	mg/dl	0-0.55 mg/dl
S. G. O.T	: 36.50	IU/L	0-42 IU/L
S. G. P. T	: 18.40	IU/L	0-42 IU/L
S. Alkaline Phosphatase	: 174.60	IU/L	40-306 IU/L
Total Proteins	: 6.80	gm/dl	6.-8 gm/dl
S. Albumin	: 3.9	gm/dl	3.5-5.0 gm/dl
S. Globulin	: 2.90	gm/dl	2.3-3.5 gm/dl
A/G Ratio	: 1.34		0.90-2.00

BIOCHEMISTRY TEST DONE ON FULLY-AUTOMATED ANALYZER BS120

(Collected At: 26/10/2024 13:45:36, Received At: 26/10/2024 13:45:36, Reported At: 26/10/2024 14:59:48)

----- End Of Report -----



Checked By -

Preeti Jaiswar  
Senior Technician  
ADMLT

Dr. Dhiraj Hivare  
M.D. (PATH.)

\*\*Sample has been collected outside the laboratory. The results pertain to the sample received.