

Hosp. Reg. No.: TMC - Zone -386

Akash Dewangan 30 yrs/ male

24/02/2024

No fresh complainte. No comosbidities. No Plt. No 81H.

Fin- Mother-DM Fother-DM.

Height-165 cm Weight-55 15g BMI-20.2 15g1m2 (Nooma)

BP-110/20 mm/g P-92/min SP02-981.

Pt is fit and can resume his normal duties.

TSH, chalesteros, in blood



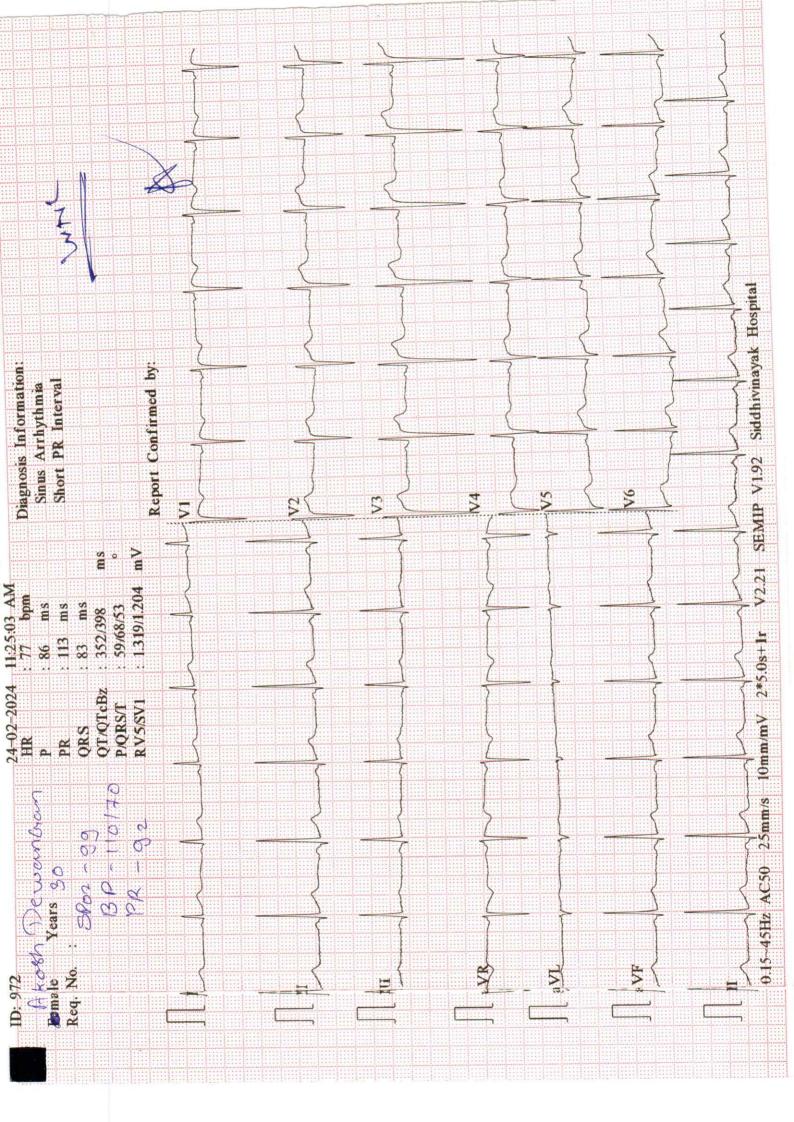
HELPLINE

022 - 2588 3531

S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606 **www.siddhivinayakhospitals.org**







OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE AKASH DEWANGAN

AGE

30

DATE - 24.02.2024

Spects: With Glasses

	RT Eye	Lt Eye
NEAR	N/6	N/6
DISTANT	6/6	6/6
Color Blind Test	NORMAL	

SIDDHIVINAYAK HOSPITALS



Siddhivinayak Hospital



Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

Name – Mr. Akash Devangan	Age- 30 Y/M
Ref by Dr Siddhivinayak hospital	Date - 24/02/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

· No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. AMOL BENDRE

MBBS; DMRE
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.







Siddhivinayak Hospital



Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

Name - Mr. Akash Dewangan	Age - 30 Y/M
Ref by Dr Siddhivinayak Hospital	Date - 24/02/2024

USG ABDOMEN & PELVIS

FINDINGS: -

The **liver** dimension is normal in size. It appears normal in morphology with normal 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 (9.7 cm) and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 8.7 x 4.0 cm.

The left kidney measures 10.1 x 4.7 cm.

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

Prostate is normal in size and morphology Size: 16.0 gms.

No free fluid is seen.

IMPRESSION:-

No obvious significant abnormality detected

DR. AMOL BENDRE

MBBS; DMRE

CONSULTANT RADIOLOGIST







Siddhivinayak Hospital



Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

ECHOCARDIOGRAM

NAME	MR. AKASH DEWANGAN
AGE/SEX	30 YRS/M
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	/02/2024

2D/M-MODE ECHOCARDIOGRAPHY

VALVES:	CHAMBERS:
MITRAL VALVE:	LEFT ATRIUM: Normal
AML: NormalPML: Normal	Left atrial appendage: Normal
 Sub-valvular deformity: Absent 	LEFT VENTRICLE: Normal
AORTIC VALVE: Normal No. of cusps: 3	RWMA: No Contraction: Normal
PULMONARY VALVE: Normal	RIGHT ATRIUM: Normal
TRICUSPID VALVE: Normal	RIGHT VENTRICLE: Normal RWMA: No Contraction: Normal
GREAT VESSELS:	SEPTAE:
AORTA: Normal	IAS: Intact
 PULMONARY ARTERY: Normal 	IVS: Intact
CORONARIES: Proximal coronaries normal CORONARY SINUS: Normal	VENACAVAE: • SVC: Normal
PULMONARY VEINS: Normal	IVC: Normal and collapsing >20% with respiration PERICARDIUM: Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	30 mm	Right atrium	mm
Aortic sinus	mm	LVIDa	40.8 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	23.1 mm	RVEF	%
Ascending aorta	mm	IVSd	8.9 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	8.9 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	67 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	mm





COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MR. AKASH DEWANGAN	
AGE/SEX	30 YRS/M	
REFERRED BY	SIDDHIVINAYAK HOSPITAL	
DATE OF EXAMINATION	24/02/2024	

	MITRAL	TRICUSPID	AORTIC	PULMONARY
	MITKAL		1.06	0.83
FLOW VELOCITY (m/s)			1100	
PPG (mmHg)				
MPG (mmHg)				
VALVE AREA (cm²)				
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/				
DECELERATION TIME (ms)				
PHT (ms)			_	
VENA CONTRACTA (mm)				
REGURGITATION		TRJV= m/s		
		PASP= mmHg		
E/A	1.23			
E/E'	6.9			

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 67 %)
- Good RV systolic function
- Normal diastolic function
- · All cardiac valves are normal
- · All cardiac chambers are normal
- IAS/IVS intact
- · No pericardial effusion/ clot/vegetations

ADVICE: Nil

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB, DM (CARDIOLOGY)

Dr. Anant Ramkishanrao Munde MBBS, DNB, DM (Cardiology) Reg. No. 2005021228





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: 24/2/2024 8:44 am

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: 30 Years

/ Male

: 24/2/2024 7:02 pm

Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

*	TDTD	DDOETLE	

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDA SE)	220.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	39.4	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	149.5	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	30	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	151	mg/dL	Optimal:<100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High: 160 - 189mg/dl. Very high:>= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	3.83		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	5.58		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

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Collected On : 24/2/2024 8:44 am Name : Mr. AKASH DEWANGAN (A) . 24/2/2024 8:54 am Received On

Lab ID. : 184712

Reported On : 24/2/2024 7:02 pm Age/Sex : 30 Years / Male

Report Status Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

: FINAL

COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	14.0	gm/dl	13 - 18
HEMATOCRIT (PCV)	42.0	%	42 - 52
RBC COUNT	4.7	x10^6/uL	4.70 - 6.50
MCV	89	fl	80 - 96
MCH	29.8	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	14.9	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	7720	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	46	%	40 - 80
LYMPHOCYTES	33	%	20 - 40
EOSINOPHILS	12	%	0 - 6
MONOCYTES	09	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	286000	/ cumm	150000 - 450000
MPV	11.6	fl	6.5 - 11.5
PDW	15.9	%	9.0 - 17.0
PCT	0.330	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochron	nic	
WBC MORPHOLOGY	Eosinophilia		
PLATELETS ON SMEAR	Adequate		

Method: EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method). Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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Report Status : FINAL Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

URINE ROUTINE EXAMINATION

TEST NAME UNIT REFERENCE RANGE **RESULTS**

URINE ROUTINE EXAMINATION PHYSICAL EXAMINATION

VOLUME 30ml

COLOUR Pale Yellow Pale Yellow

APPEARANCE Clear Clear

CHEMICAL EXAMINATION

REACTION Acidic Acidic

(methyl red and Bromothymol blue indicator)

1.005 - 1.022 SP. GRAVITY 1.010

(Bromothymol blue indicator)

PROTEIN Absent Absent

(Protein error of PH indicator)

BLOOD Absent Absent

(Peroxidase Method)

SUGAR Absent Absent

(GOD/POD)

KETONES Absent Absent

(Acetoacetic acid)

BILE SALT & PIGMENT Absent Absent

(Diazonium Salt)

UROBILINOGEN Normal Normal

(Red azodye)

LEUKOCYTES Absent Absent

(pyrrole amino acid ester diazonium salt)

Negative

(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)

MICROSCOPIC EXAMINATION

RED BLOOD CELLS Absent / HPF Absent **PUS CELLS** 1-2 / HPF 0 - 5 **EPITHELIAL** 0-2 / HPF 0 - 5

CASTS Absent

Checked By

Pathologist

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: 24/2/2024 7:02 pm Reported On Age/Sex : 30 Years / Male

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
CRYSTALS	Absent			
BACTERIA	Absent		Absent	
YEAST CELLS	Absent		Absent	
ANY OTHER FINDINGS	Absent			
REMARK	Result relates to s	Result relates to sample tested. Kindly correlate with clinical findings.		

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By Pathologist

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Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / **Report Status** : FINAL



IMMUNO ASSAY							
TEST NAME		RESULTS		UNIT	REFERENCE RANGE		
TFT (THYROII	FUNCTION TI	EST)					
SPACE				Space	-		
SPECIMEN		Serum					
T3		194.9		ng/dl	84.63 - 201.8		
T4		10.42		μg/dl	5.13 - 14.06		
TSH		7.65		μIU/ml	0.270 - 4.20		
T3 (Triido Thyronine)		T4 (Thyroxine)		TSH(Thyroid stimulating			
hormone)							
AGE	RANGE	AGE	RANGES	AGE	RANGES		
1-30 days	100-740	1-14 Days	11.8-22.6	0-14 Day	/s 1.0-39		
1-11 months	105-245	1-2 weeks	9.9-16.6	2 wks -5 r	months 1.7-9.1		
1-5 yrs	105-269	1-4 months	7.2-14.4	6 months	s-20 yrs		
6-10 yrs	94-241	4 -12 months	7.8-16.5	Pregnan	су		
11-15 yrs	82-213	1-5 yrs	7.3-15.0	1st Trim			
0.1-2.5		,					
15-20 yrs	80-210	5-10 yrs	6.4-13.3	2nd Trin	nester		
0.20-3.0		/					
		11-15 yrs	5.6-11.7	3rd Trii	mester		

0.30-3.0

INTERPRETATION:

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

END OF	DEDODT	
	REPURI	

Checked By

Priyanka Deshmukh

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Report Status : FINAL

Received On

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

HAEMATOLOGY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

BLOOD GROUP

Ref By

SPECIMEN WHOLE BLOOD EDTA & SERUM

* ABO GROUP '0'

RH FACTOR **POSITIVE**

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ----

Checked By

Priyanka_Deshmukh

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Report Status

: FINAL

*RENAL FUNCTION TEST

TECT NAME	DECLUTO	UNIT	REFERENCE RANGE	
TEST NAME	RESULTS			
BLOOD UREA	23.2	mg/dL	19 - 45	
(Urease UV GLDH Kinetic)				
BLOOD UREA NITROGEN	10.84	mg/dL	5 - 20	
(Calculated)				
S. CREATININE	0.64	mg/dL	0.6 - 1.4	
(Enzymatic)				
S. URIC ACID	7.2	mg/dL	3.5 - 7.2	
(Uricase)				
S. SODIUM	142.1	mEq/L	137 - 145	
(ISE Direct Method)				
S. POTASSIUM	3.91	mEq/L	3.5 - 5.1	
(ISE Direct Method)				
S. CHLORIDE	104.1	mEq/L	98 - 110	
(ISE Direct Method)				
S. PHOSPHORUS	3.61	mg/dL	2.5 - 4.5	
(Ammonium Molybdate)				
S. CALCIUM	10.2	mg/dL	8.6 - 10.2	
(Arsenazo III)				
PROTEIN	6.41	g/dl	6.4 - 8.3	
(Biuret)				
S. ALBUMIN	4.26	g/dl	3.2 - 4.6	
(BGC)				
S.GLOBULIN	2.15	g/dl	1.9 - 3.5	
(Calculated)				
A/G RATIO	1.98		0 - 2	
calculated				
NOTE	BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.			

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

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Lab ID. 184712

Age/Sex : 30 Years / Male

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Collected On : 24/2/2024 8:44 am

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Report Status : FINAL

Received On

. 24/2/2024 8:54 am

Peripheral smear examination

TEST NAME RESULTS

SPECIMEN RECEIVED WHOLE BLOOD EDTA

RBC Normocytic Normochromic

WBC Total leukocytes count is normal on smear.

Eosinophils are increased on smear

NEUTROPHILS: 46% LYMPHOCYTES: 33% **EOSINOPHILS:** 12% MONOCYTES: 09% BASOPHILS: 00%

PLATELET Adequate on smear. **HEMOPARASITE** No parasites seen.

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

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Ref By

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Report Status

: FINAL

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
TOTAL BILLIRUBIN	0.48	mg/dL	0.1 - 1.2	
(Method-Diazo)				
DIRECT BILLIRUBIN	0.2	mg/dL	0.0 - 0.4	
(Method-Diazo)				
INDIRECT BILLIRUBIN	0.28	mg/dL	0 - 0.8	
Calculated				
SGOT(AST)	22.5	U/L	0 - 37	
(UV without PSP)				
SGPT(ALT)	36.0	U/L	UP to 40	
UV Kinetic Without PLP (P-L-P)				
ALKALINE PHOSPHATASE	71.0	U/L	53 - 128	
(Method-ALP-AMP)				
S. PROTIEN	6.41	g/dl	6.4 - 8.3	
(Method-Biuret)				
S. ALBUMIN	4.26	g/dl	3.5 - 5.2	
(Method-BCG)				
S. GLOBULIN	2.15	g/dl	1.90 - 3.50	
Calculated				
A/G RATIO	1.98		0 - 2	
Calculated				

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

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: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

/ Male

Report Status : FINAL

			GΥ

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
<u>ESR</u>				
ESR	23	mm/1hr.	0 - 20	

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By Pathologist

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Age/Sex : 30 Years / Male Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE		
BLOOD GLUCOSE FASTING & PP					
BLOOD GLUCOSE FASTING	103.9	mg/dL	70 - 110		
BLOOD GLUCOSE PP	105.8	mg/dL	70 - 140		

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

- 1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
- 2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance: 70-110 mg/dl

- Impaired Fasting glucose (IFG): 110-125 mg/dl

- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance: 70-139 mg/dl - Impaired glucose tolerance: 140-199 mg/dl

- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=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.

GAMMA GT 20.9 U/L 13 - 109

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED 5.6 Hb A1c HAEMOGLOBIN) > 8 Action suggested < 7 Goal < 6 Non - diabetic level AVERAGE BLOOD GLUCOSE (A. B. NON - DIABETIC: <=5.6 114.0 mg/dL

PRE - DIABETIC: 5.7 - 6.4 G.)

DIABETIC: >6.5

METHOD Particle Enhanced Immunoturbidimetry

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BIOCHEMISTRY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

HbA1c: Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c: Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

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