PID No. :- 202427117126892 **Name** :- Mr. DEEPAK TIRKEY

 Age/Sex
 :- 33 Y / M
 Sample Received on/at :
 Reported on/at

 Ref. By.
 :- ARCOFEMI HEALTHCARE LIMITED
 27/01/2024 9:10AM
 27/01/2024 5:14PM



	BIOCHEMISTRY		
love at least or		11!4	Distanted Defenses B
Investigation	Observed Value	Unit	Biological Reference Range
GGT/GammaGT	00.4		44 04
Gamma GT Szasz method	26.1	U/L	11 - 34
BLOOD SUGAR F	407		00 440
Glucose Fasting	107	mg/dl	60 - 110
BLOOD SUGAR PP			
Glucose PP	148	mg/dl	70 - 140
LFT (LIVER FUNCTION TEST)			
Bilirubin (Total)	0.89	mg/dL	<1.0
(Serum,Diazo)			
Bilirubin (Direct)	0.20	mg/dL	0 - 0.3
(Serum,Diazo)			
Bilirubin (Indirect)	0.69	mg/dL	UPTO 1.0
(Serum,Calculated)			5 07
SGOT (AST)	62	U/L	5 - 37
(Serum,Enzymatic)	00	11/1	10 - 40
SGPT (ALT) (Serum,Enzymatic	80	U/L	10 - 40
Alkaline Phosphatase	259	U/L	80 - 290
(Serum,pNPP)	255	O/L	00 - 200
Total Proteins	7.31	g/dL	6.4 - 8.3
(Serum,Biuret)		9/42	
Albumin	4.25	g/dL	3.7 - 5.6
Globulin	3.06	g/dL	1.8 - 3.6
(Serum)		Ŭ	
A/G Ratio	1.39	g/dl	1.1 - 2.2
(Serum)		-	
Gamma GT	30.4	U/L	11 - 34
Szasz method			

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

PID No. :- 202427117126892 **Name** :- Mr. DEEPAK TIRKEY



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Lipid Profile (Fasting Sample Required)			
Cholesterol - Total	210	mg/dL	Desirable <200 Borderline High : 200-239 High :>=240
Triglycerides Level	166	mg/dL	Normal : <150 Borderline High :150-199 High : 200-499 Very High : >=500
HDL Cholesterol	48	mg/dl	Major risk factor for heart Disease :<40 Negative risk factor for heart Disease:>=60
LDL Cholesterol	128.80	mg/dL	Optimal : <100 Near Optimal : 100-129 Borderline High : 130 - 159 High :160 - 189 Very High : >190
VLDL Cholesterol	33.20	mg/dL	6-38
LDL/HDL RATIO	2.68		2.5-3.5
CHOL/HDL RATIO	4.38		3.5 - 5

Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

RFT (RENAL FUNCTION TEST)

Renal (Kidney) Function Test

Reliai (Niuliey) Fullction Test			
Urea	32.1	mg/dL	15 - 43
(Serum)			
Creatinine	0.99	mg/dL	0.57 - 1.4
(Serum, Jaffe)			
Sodium	142	mmol/L	135 - 145
Potassium	4.1	mmol/L	3.5 - 5.1
Uric Acid	4.8	mg/dL	2.6 - 6
(Serum, Uricase)			
Chlorides	101	mmol/L	98 - 107

The performance of the Roche cobas c 111 was evaluated using sigma metrics. The calculations were performed using James O. Westgard methodology.[2] This approach uses an assays total allowable error (TEa), accuracy (bias), and precision (SD) to calculate a Sigma metric to characterize the performance of that assay.

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

PID No. :- 202427117126892

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HBA1C

 HbA1c Value
 5.96
 %
 4-6=Normal Control Fair Control
 6-7=Good Control 7-8=Fair Control

8-10=Unsatisfactory Control >10%=Poor Control

Diagnostics & Imagin

Dr. Ruprela's

Glycosylated Hemoglobin/Glycated Hemoglobin/GlycoHemoglobin/HbA1c. [1]

Its primary use is to monitor diabetic patient's compliance and long term blood glucose level control. It is an index of diabetic control (direct relationship between poor control and development of complications). It predicts development and progression of diabetic microvascular complications.

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

PID No. :- 202427117126892 **Name** :- Mr. DEEPAK TIRKEY



CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Range
URINE R/M			
Physical Examination			
Specific Gravity	1.030		1.003-1.030
Appearance	Clear		Clear
Colour	Pale Yellow		Pale Yellow
pH (Reaction)	Acidic		Acidic
Chemical Examination			
Protein	NIL		NIL
Glucose	NIL		NIL
Microscopic Examination			
PUS CELLS	2-4	/hpf	0-5
Epithelial Cells	1-2	/hpf	0-5
RBC	Absent	/hpf	Absent
Bacteria	Absent		Absent
Crystals	Absent		Absent
Casts	Absent		Absent

Test Done by Urisys 1100 (ROCHE) Fully Automatic.

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

Dr. Avishesh Kumar Singh M.D. (Pathologist)

Diagnostics & Imagin

PID No. :- 202427117126892 **Name** :- Mr. DEEPAK TIRKEY

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Complete Blood Count (Haemogram)

Investigation	Observed Value	Unit	Biological Reference Range
CBC			
Erythrocytes			
Haemoglobin (Hb)	11.4	gm/dL	12.5 - 16.5
Erythrocyte (RBC) Count	6.60	mill/cu.mm	4.2 - 5.6
PCV (Packed Cell Volume)	39.1	%	36 - 47
MCV (Mean Corpusculer Volume)	59	fl	78 - 95
MCH (Mean Corpusculer Hb)	17.3	pg	26 - 32
MCHC (Mean Corpuscular Hb Concn.)	29.3	g/dL	32 - 36
RDW (Red Cell Distribution Width)	18.8	%	11.5 - 14
<u>Leucocytes</u>			
Total Leucocytes (WBC) Count	7000	cells/cu.mm	4000 - 11000
Neutrophils	60	%	40 - 75
Lymphocytes.	33	%	20 - 40
Monocytes	06	%	2-10
Eosinophils	01	%	1-6
Basophils	00	%	0 - 1
Platelets-			
Platelet count	193	x10^9/L	150 - 450
MPV (Mean Platelet Volume)	8.0	fL.	6 - 9.5
PCT (Platelet Haematocrit)	0.155	%	0.15 - 0500
PDW (Platelet Distribution Width)	12.6	%	11 - 18

EDTA Whole Blood - Tests done on Automated ABX Micros ES60(HORIBA) Cell Counter. WBC, RBC & Platelet count by impedance method, WBC differential by VCS technology & other parameters calculated) All abnormal Haemograms are reviewed & confirmed microscopically. Differential count is based on approximately 10,000 cells.

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

PID No. :- 202427117126892 Name

:- Mr. DEEPAK TIRKEY

Age/Sex :- 33 Y / M Sample Received on/at: Reported on/at 27/01/2024 9:10AM 27/01/2024 5:14PM Ref. By. :- ARCOFEMI HEALTHCARE LIMITED

Dr. Ruprela's Diagnostics & Imagin

Hematology

Investigation **Observed Value** Unit **Biological Reference Range**

Blood Group & RH Type Screening

"AB" **ABO** Group

"POSITIVE" Rh Type

Method: Column agglutination technology (CAT) is an automated. System for blood grouping which is superior in sensitivity to conventional tube method.

ESR

ESR - Erythrocyte Sedimentation Rate 40 mm at 1hr 0 - 15

(Citrate Blood) Method: Westergren

Interpretation:

- 1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
- 2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia
- 3. It is also increased in pregnancy, multiple myeloma.

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

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Ref. By. :- ARCOFEMI HEALTHCARE LIMITED

Age/Sex :- 33 Y / M Sample Received on/at : Reported on/at

PATHOLOGY

27/01/2024 9:10AM

Dr. Ruprela's

Diagnostics & Imagin

27/01/2024 5:14PM

Investigation Observed Value Unit Biological Reference Range
Urine Sugar Fasting
Urine Sugar (Fasting) Absent Absent

Thyroid Panel 1 (T3, T4, TSH)

T3 1.21 ng/dl 0.6-1.8

Remarks :1. Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism 2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

T4 6.59 ug/dl 4.5-12.6

Remark:1.Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy,Drugs (Androgens,Estrogens,O C pills, Phenytoin) Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

TSH 2.01 uIU/ml 0.25-5.5

Remarks : 1.4.51 to 15 μ IU/mL - Suggested clinical co-relation or repeat the test with new sample as physiological factors can give falsely high TSH.

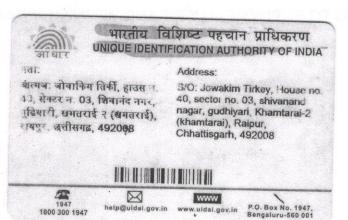
- 2.TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe burns, trauma and surgery etc
- 3.Drugs that decrease TSH values e.g:L-dopa, Glucocorticoids Drugs that increase TSH values e.g lodine, Lithium, Amiodarone

Remark

Method Used: ELFA (Enzyme Linked Fluorescence Assay) on Mini Vidas most Efficient Analyzer Internationally accepted most advanced technology with high quality result.

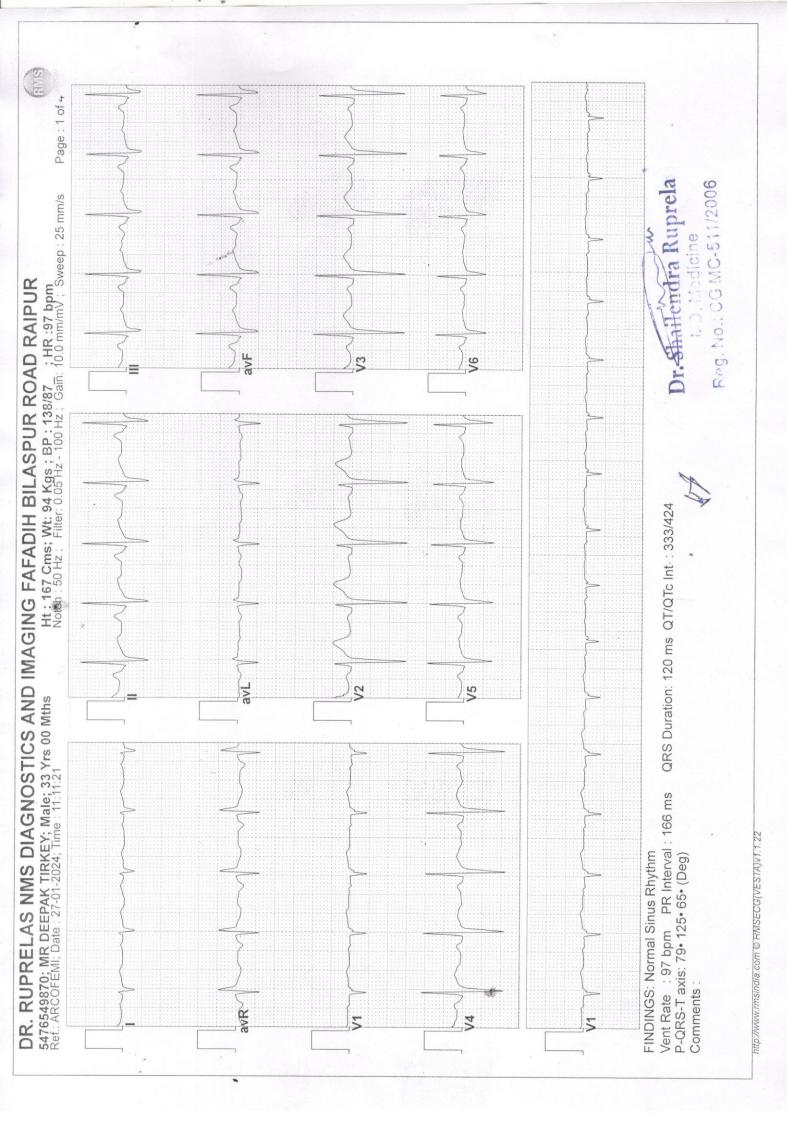
----- End Of Report -----



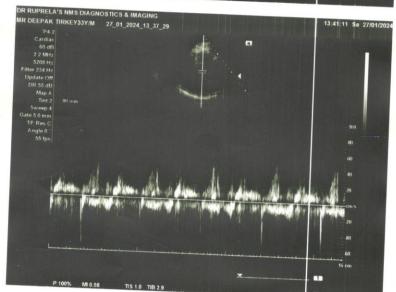




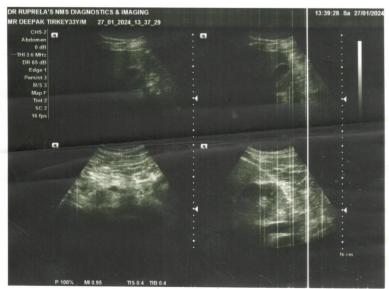














REF.BY: ARCOFEMI HEALTHCARE LTD.

AGE/SEX: 33 Y/M DATE: 27.01.2024

ECHO - CARDIOGRAPHY

M-MODE MEASUREMENTS:

	Patient value (cm) normal	value (cm)
Aortic Root	3	.3	2.0-3.7
Left Atrial Dimension	2	.1	1.9-4.0
Left Ventricular ED	3	.2	3.7-5.6
Left Ventricular ES	2	.7	2.2-4.0
Intervenrticular Septal	ED: 0.8	ES: 0.9	0.6-1.2
LEFT VENT PW	ED: 0.8	ES: 0.9	0.6-1.2

2 D ECHO

All cardiac chambers normal. **CHAMBERS**

NORMAL VALVE

IVS/IAS INTACT SEPTAE

NO RWMA 60 % EF (OVARALL)(LV) NIL **CLOT/ VEGETATION** NIL PER. EFFUSION

CONTINUOUS WAVE & PULSE WAVE DOPPLER

Gradient(mm Hg) Regurgitation Valve

Not Significant NIL Mitral Valve **Not Significant** NIL **Aortic Valve** PASP= NIL **Tricuspid Valve Not Significant** Nil **Pulmonary Valve**

PULSE WAVE DOPPLER

MITRAL VALVE INFLOW **Waves DT** m sec

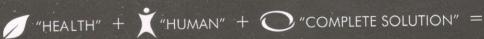
IMPRESSION -

- NO RWMA AT REST, LVEF=60%
- NORMAL BIVENTRICULAR FUNCTION
- NORMAL CHAMBERS DIMENSION.
- NO CLOT/VEGETATION/PERICARDIAL EFFUSION.
- **NORMAL VALVES**

DR AJAY HALWAI MBBS,MD,PGDCC

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)











NAME

: MR. DEEPAK TIRKEY

AGE/SEX : 33 Y/M

REFERRED BY: ARCOFEMI HEALTHCARE LTD.

DATE

: 27.01.2024

PERIPHERAL SMEAR EXAMINATION

RBC: Macrocytic normochromic.

WBC: Total counts within normal range. No toxic granulation seen.

Band cells-9%, Neutrophils-46%, Lymphocytes-43%, Monocytes-2%.

Platelets: Appears adequate on smear.

Haemoparasite: No haemoparasite seen.

Dr. Avishesh Kumar Singh MD (Pathologist)













AGE: 33 Y/SEX/M

Ref. By: ARCOFEMI HEALTHCARE LTD.

DATE: 27.01.2024

Complain Of: No Complaints

Ocular H/O: Nil

Family Ocular H/O: Nil

Drug Allergy (If Any): Not Aware

DISTANCE VISION:

(With / without PGP

RE

6/12 **LE**

6/9

NEAR VISION:

(With / without PGP)

RE

N/6 LE N/6

REFRACTION:

EYE	SPH	CYL	AXIS	ADD	VISION
RE	-3.50			6/6	N/6
LE	-2.50			6/6	N/6

EXTERNAL EYE EXAMINATION:

RE

EOM:

NAD

SQUINT EVALUATION:

ABSENT

NYSTAGMUS:

ABSENT

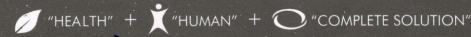
COLOR VISION TEST: NORMAL

NYCTALOPIA (Night Blindness): ABSENT

Dr. Valbhay Sharma Ophthalmologist

Reg. No. MCI/10-37,782

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)







MR. DEEPAK TIRKEY

DATE: 27.01.2024

AGE: 33

SEX: MALE

HEIGHT: 167 cms

WEIGHT: 94 kgs

BMI: 33.7

BLOOD PRESSURE: 138/87 mmhg

MEDICAL HISTORY: NOT SIGNIFICANT

ADVICE:

- 1. DRINK MINIMUM 10 GLASSES OF WATER.
- 2. EXERCISE/BRISK WALK FOR MINIMUM 50 MINS DAILY.
- 3. INCREASE INTAKE OF FIBRE LIKE SALAD, FRUIT, SPROUTS.
- TAKE GOOD SLEEP FOR 7-8 HOURS DAILY.
- 5. AVOID SPICY AND DEEP FRIED FOOD.
- 6. AVOID ALCOHOL, SMOKING, NICOTINE.
- 7. AVOID STRESS.
- 8. RELAX AND BE HAPPY.

DR. RASHI SALUJA **CONSULTANT DIETICIAN**

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.) Ph.: 0771-4048886, 2888800, Mob.: 9406396296, Email: nmsdiagnostic.service@gmail.com, Website: www.nmsdiagnostics.co.in











TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. DEEPAK TIRKEY AGE-33/M HE UNDERGONE ENT EXAMINATION ON 27/01/2024. DURING HIS EXAMINATION NO SOFT AND HARD TISSUE ABNORMALITIES WERE DETECTED IN THE EAR, NOSE AND THROAT. NO DISCHARGE FOUND. NO SIGNIFICANT HISTORY.

NO LYMPH NODES WERE TENDER AND PALPABLE.

AIR AND BONE CONDUCTION TEST WERE NEGATIVE.

ADVISE: MAINTAIN GOOD HYGIENE AND FOLLOW UP

Dr. Anoop Rekha Mudgal MS, ENT Reg. No.: CGMC- 5083/2014

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)
Ph.: 0771-4048886, 2888800, Mob.: 9406396296, Email: nmsdiagnostic.service@gmail.com, Website: www.nmsdiagnostics.co.in





TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. DEEPAK TIRKEY AGE 33 YEAR/MALE HAS UNDERGONE MEDICAL EXAMINATION ON 27.01.2024 DURING HIS GENERAL EXAMINATION NO ABNORMALITIES WERE DETECTED.

HE WAS FULLY ORIENTED, NO DISABILITY WITH NORMAL GAIT.

NO SIGNS OF PALPABLE OR ENLARGED LYMPH NODES.

NO GROWTH / SWELLING OBSERVED.

HIS VITALS PARAMETERS ARE HEIGHT: 167cms, WEIGHT:94kg, BP:138/87mmhg, HR: 89 bpm, BMI: 33.7

HIS BOWEL HABITS ARE REGULAR. NO BURNING DURING MICTURITION.

ALL REFLEXES WERE NORMAL.

NO ABNORMALITIES WERE DETECTED DURING PALPATION, PERCUSSION AND AUSCULTATION OF VISCERA.

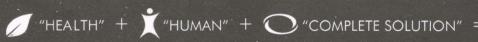
HE DOES NOT CARRY ANY COMMUNICABLE/TRANSFERRABLE DISEASE.

HE APPEARS TO BE PHYSICALLY FIT AND WE WISH HIS ALL THE BEST.

Dr. Shailendra Ruprela MD, Medicine

Reg. No.: CG MC-511/2006

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINGE 1937), RAIPUR (C.G.)







TO WHOM SO EVER IT MAY CONCERN

THIS IS TO DECLARE THAT MR. DEEPAK TIRKEY AGE 33 Y/M HAS UNDERGONE DENTAL EXAMINATION ON 27.01.2024.

DURING HIS INTRAORAL EXAMINATION NO HARD AND SOFT TISSUE ABNORMALITIES WERE DETECTED.

NO CAVITIES DETECTED.

CALCULUS +

STAINS +

HIS EXTRAORAL EXAMINATION REVEALS NO ABNORMALITY.

ADVISE: ORAL PROPHYLAXIS,

MAINTAIN GOOD ORAL HYGIENE,

FOLLOW UP,

BRUSH TWICE DAILY.

Or. Poonam Ruprela
Consultant Dental Surgeon
CGDC/15 G/2169

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINGE 1937), RAIPUR (C.G.)
Ph.: 0771-4048886, 2888800, Mob.: 9406396296, Email : nmsdiagnostic.service@gmail.com, Website : www.nmsdiagnostics.co.in





REF. BY: ARCOFEMI HEALTHCARE LTD.

AGE: 33 Y/M DATE: 27.01.2024

SONOGRAPHY OF WHOLE ABDOMEN

The Real time, B mode, gray scale sonography was performed.

LIVER: The liver is enlarged in size and has smooth margins.

It has raised echotexture, has normally distributed and normal size biliary and portal radicles and is without solid or cystic mass lesion or calcification.

GALL BLADDER: The gall bladder is seen as a partially distended, pear shaped bag with uniformly thinand regular walls, without, gall stones or mass lesions

COMMON BILE DUCT: The common bile duct is normal in caliber.

No evidence of calculus is noted in common bile duct.

PANCREAS: The pancreas is normal in size, shape, contours and echotexture.

No evidence of solid or cystic mass lesion is noted.

KIDNEYS: The kidneys are normal in size and have smooth renal margins.

Cortical echotexture is normal.

The central echocomplex does not show evidence of calculus or hydronephrosis.

SPLEEN: The spleen is normal in size and shape. Its echotexture is homogeneous.

No evidence of focal lesion is noted.

URINARY BLADDER: The urinary bladder is Partially distended.

No evidence of calculus is seen.

No evidence of mass or diverticulum is noted.

PROSTATE: The prostate shows well defined and sharp margins.

The prostatic echotexture is normal and homogenous.

IMPRESSION:

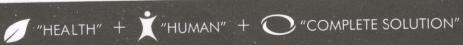
Diffuse fatty infiltration of liver Grade T

Thanks for referral

As with any other investigations the results obtained serve as an aid to diagnosis and should be interpreted in relation to any other clinical and diagnostic findings.

Dr. Chhavi Jangde

FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)







REF. BY: ARCOFEMI HEALTHCARE LTD.

AGE: 33 Y/M DATE: 27.01.2024

X-RAY CHEST PA VIEW

- The lungs on the either side show equal translucency.
- The peripheral pulmonary vasculature is normal.
- No focal lung lesion is seen.
- The pleural spaces are normal.
- The cardiac size is normal.
- The domes of the diaphragms are normal in position, and show smooth outline.
- Both hila are normal in size, have equal density and bear normal relationship.
- The heart and trachea are central in position and no mediastinal abnormality is visible.
- <u>IMPRESSION</u>: No evidence of pulmonary, pleural or cardiac pathology is noted. Radiograph of chest is within normal limits.



FAFADIH, NEAR OVER BRIDGE, RUPRELA MARG (SINCE 1937), RAIPUR (C.G.)







