🖠 Siddhivinayak Hospital

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

Changdor Kathinath Sadgir 47 yrs/ Male

19/02/2024.

No fresh complaints KICLO - DM "" 1 yr. 31H - Haemoschoid ectomy Syrs back

FIH - Mother - I healthy father - I healthy

Ht-173 cm wt-73 kg BMI-24.4 kg/m2 (Normay)

RP- 120/20 mutig P- 61/min SP02-981

Pt is fit and can resume here normal during

& Fasting blood Sug q= raised An Consult physician

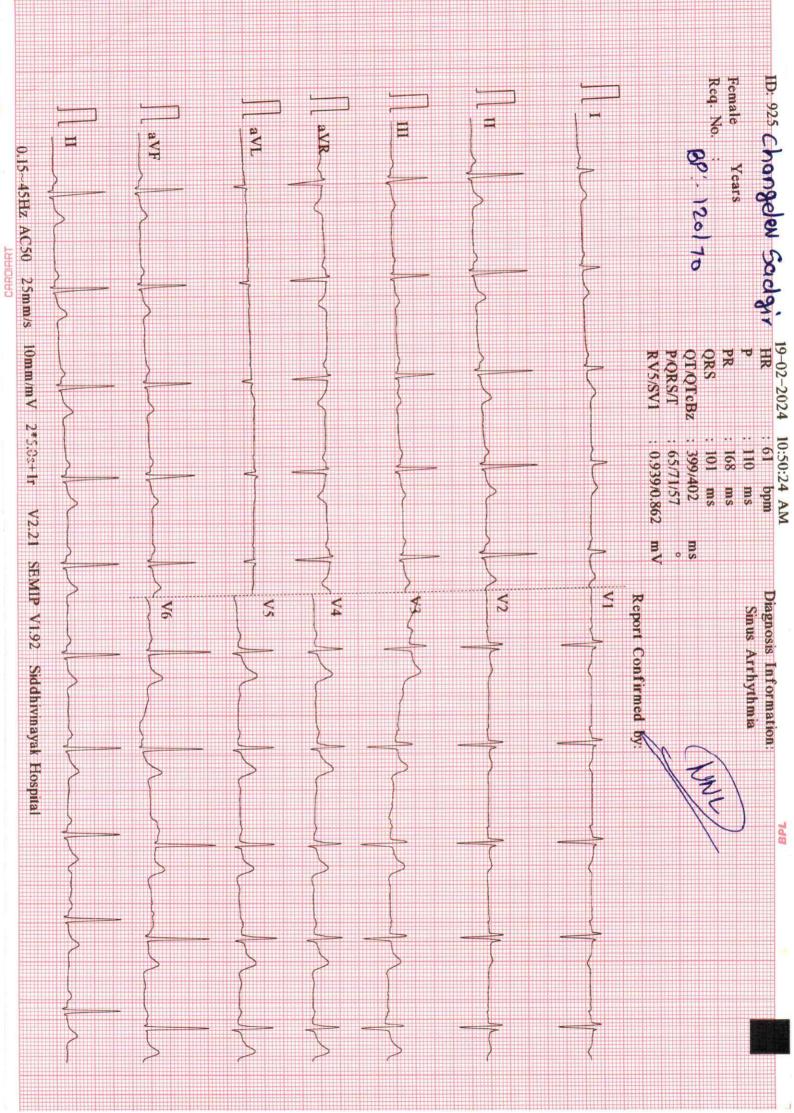




022 - 2588 3531 S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606 www.siddhivinayakhospitals.org

HELPLINE







Siddhivinayak Hospital



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

2D ECHOCARDIOGRAM & COLOUR DOPPLER REPORT

| NAME AGE DATE OF EXAMINATION | : MR.CHANGDEV SADGIR : 47 YR/M : 19/02/2024 | | | | |
|------------------------------------|---|--------------|--|--|--|
| REF BY ECHOCARDIOGRAM DONE BY | : SIDDHIVINAYAK HOP | | | | |
| ECHOCARDIOGRAM DONE BY | : DR.SANDIP FULPAGAI | RE | | | |
| Mitral Valve | : Normal. | | | | |
| Aortic Valve | : Normal. | | | | |
| Pulmonary Valve | : Normal. | | | | |
| Tricuspid Valve | : Normal. | | | | |
| Interatrial septum | : Intact. | | | | |
| Interventricular septum | : Intact. | | | | |
| RA | : Normal | | | | |
| RV | : Normal | | | | |
| LA | : 3.7cm | | | | |
| LV | : Normal, No RW | MA | | | |
| LV Dimensions | , | | | | |
| LVID (d): 4.4 cm | LVID (s):2.5 cm | LVEF: 60% | | | |
| IVS (d): 1.0 cm | LVPW (d):1.0cm | B. B. (0070 | | | |
| Aorta | 2.7cm | | | | |
| Pericardium | : Normal. | | | | |
| IVC / Other findings | | | | | |
| DOPPLER MEASUREMENTS:- | | | | | |
| MV: E = 0.4, A= 0.7, DT = 160 ms. | | | | | |
| A | | | | | |

Aortic flow velocity = 1.2 m/s. Pulmonary flow velocity = 0.7 m/s. MR: Nil, AR: Nil, TR: Nil, PR: Nil

IMPRESSION:-

Normal Sized cardiac chambers. No RWMA, Good LV Systolic Function. (LVEF- 60 %) Normal Valves. RA/ RV Normal, Good RV systolic function. No pericardial effusion/ Clot.

> DR. SANDIP FULPAGARE, MD (MEDICINE), DNB (CARDIOLOGY).FESC.





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Siddhivinayak Hospital



Sonography | Colour Doppler | 3D / 4D USG

| | Name – Mr. Changdev Sadgir | Age - 47 Y/M |
|---|----------------------------|--------------|
| 1 | | |

Ref by Dr.- Siddhivinayak Hospital Date - 19/02/2024

USG ABDOMEN & PELVIS

FINDINGS: -

The liver dimension is enlarged in size (18.4cm). 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 10.1cm and morphology.

Both kidneys demonstrate normal morphology.

Both kidneys show normal cortical echogenicity.

The right kidney measures 9.9x4.6 cm.

The left kidney measures 8.2x4.4 cm.

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

Prostate is enlarged in Size: 28 gms

No free fluid is seen.

IMPRESSION:-

- Hepatomegaly with Fatty liver (Grade I)
- Mild prostatomegaly.

DR. AMOL BENDRE MBBS; DMRE CONSULTANT RADIOLOGIST









| Name – Mr. Changdev Sadgir | Age - 47 Y/M |
|----------------------------------|-------------------|
| Ref by Dr Siddhivinayak Hospital | Date - 19/02/2024 |

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.





OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE CHANGDEV SADGIR

AGE 47 19.02.2024 DATE -

Spects : With Glasses

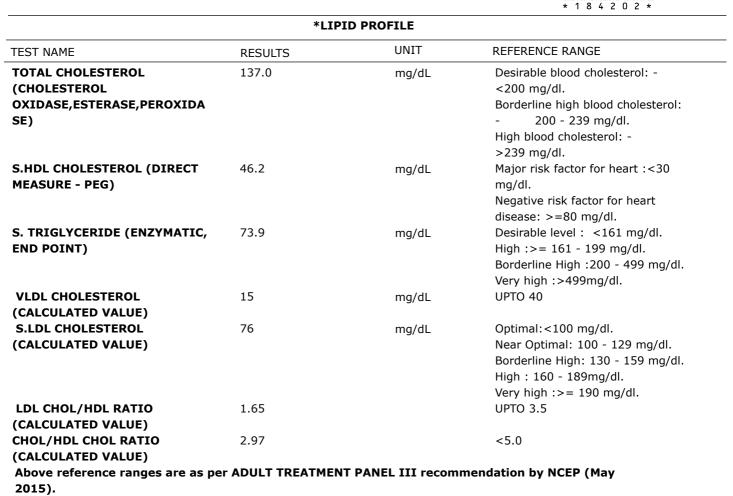
| | RT Eye | Lt Eye |
|------------------|--------|--------|
| NEAR | N/6 | N/6 |
| DISTANT | 6/6 | 6/6 |
| Color Blind Test | NORMAL | 5 |







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



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

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

Checked By Priyanka_Deshmukh



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COMPLETE BLOOD COUNT TEST NAME UNIT **REFERENCE RANGE** RESULTS HEMOGLOBIN 15.5 gm/dl 13 - 18 HEMATOCRIT (PCV) 42 - 52 46.5 % **RBC COUNT** 5.52 x10^6/uL 4.70 - 6.50 MCV 84 fl 80 - 96 MCH 28.1 27 - 33 pg MCHC 33 g/dl 33 - 36 RDW-CV 13.9 % 11.5 - 14.5 TOTAL LEUCOCYTE COUNT 5480 4000 - 11000 /cumm **DIFFERENTIAL COUNT** NEUTROPHILS 54 % 40 - 80 **LYMPHOCYTES** 20 - 40 36 % EOSINOPHILS 03 % 0 - 6 % MONOCYTES 07 2 - 10 BASOPHILS 00 0 - 1 % **PLATELET COUNT** 235000 150000 - 450000 / cumm MPV fl 6.5 - 11.5 10 PDW 16.4 9.0 - 17.0 % PCT 0.200 - 0.500 0.240 % **RBC MORPHOLOGY** Normocytic Normochromic WBC MORPHOLOGY Normal 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.

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

Checked By Priyanka_Deshmukh



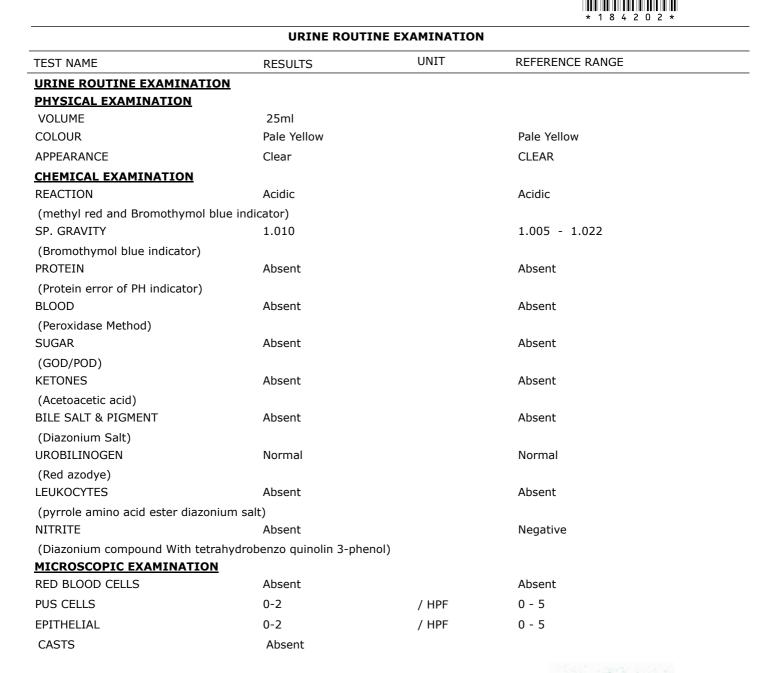
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URINE ROUTINE EXAMINATION

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

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

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| IMMUNO ASSAY | | | | | |
|---|-------------------|--------------------|-----------|------------------|--------------------|
| TEST NAME | | RESULTS | | UNIT | REFERENCE RANGE |
| TFT (THYROID | FUNCTION T | <u>EST)</u> | | | |
| SPACE | | | | Space | - |
| SPECIMEN | | Serum | | | |
| Т3 | | 105.8 | | ng/dl | 84.63 - 201.8 |
| T4 | | 8.68 | | µg/dl | 5.13 - 14.06 |
| TSH | | 1.93 | | µIU/ml | 0.270 - 4.20 |
| T3 (Triido Thyronine) T4 (Thyroxine) TSH(Thyroid stimulating hormone) | | nyroid stimulating | | | |
| AGE | RANGE | AGE | RANGES | AGE | RANGES |
| 1-30 days | 100-740 | 1-14 Days | 11.8-22.6 | 0-14 C | ays 1.0-39 |
| 1-11 months | 105-245 | 1-2 weeks | 9.9-16.6 | 2 wks - | 5 months 1.7-9.1 |
| 1-5 yrs | 105-269 | 1-4 months | 7.2-14.4 | 6 mon | ths-20 yrs 0.7-6.4 |
| 6-10 yrs | 94-241 | 4 -12 months | 7.8-16.5 | Pregn | ancy |
| 11-15 yrs 0.1-2.5 | 82-213 | 1-5 yrs | 7.3-15.0 | 1st Tr | imester |
| 15-20 yrs 0.20-3.0 | 80-210 | 5-10 yrs | 6.4-13.3 | 2nd T | rimester |
| | | 11-15 yrs | 5.6-11.7 | 3rd ⁻ | Trimester |

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 REPORT ------

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* 1 8 4 2 0 2 *

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| Rei Dy | | | |

| HAEMATOLOGY | | | |
|-----------------------------|----------------------------------|----------------------|-----------------|
| TEST NAME | RESULTS | UNIT | REFERENCE RANGE |
| BLOOD GROUP | | | |
| SPECIMEN | WHOLE BLOOD E | DTA & SERUM | |
| * ABO GROUP | 'O' | | |
| RH FACTOR | POSITIVE | | |
| Method: Slide Agglutination | n and Tube Method (Forward gro | ouping & Reverse gro | uping) |
| Result relates to samp | le tested, Kindly correlate with | clinical findings. | |
| | | | |

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

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1 8 4 2 0 2 *

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***RENAL FUNCTION TEST** TEST NAME UNIT **REFERENCE RANGE** RESULTS **BLOOD UREA** 21.5 mg/dL 19 - 45 (Urease UV GLDH Kinetic) **BLOOD UREA NITROGEN** 5 - 20 10.05 mg/dL (Calculated) S. CREATININE 0.93 0.6 - 1.4 mg/dL (Enzymatic) S. URIC ACID 4.8 3.5 - 7.2 mg/dL (Uricase) S. SODIUM 135.2 137 - 145 mEq/L (ISE Direct Method) S. POTASSIUM 4.02 mEq/L 3.5 - 5.1 (ISE Direct Method) S. CHLORIDE 98 - 110 101.2 mEq/L (ISE Direct Method) **S. PHOSPHORUS** 3.02 mg/dL 2.5 - 4.5 (Ammonium Molybdate) 8.6 - 10.2 S. CALCIUM 8.60 mg/dL (Arsenazo III) PROTEIN 6.40 6.4 - 8.3 g/dl (Biuret) S. ALBUMIN 3.81 3.2 - 4.6 g/dl (BGC) S.GLOBULIN 2.59 1.9 - 3.5 g/dl (Calculated) 0 - 2 A/G RATIO 1.91 calculated NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

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

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

Checked By Pathologist



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Peripheral smear examination

| TEST NAME | RESULTS |
|---------------------------------|---|
| SPECIMEN RECEIVED | Whole Blood EDTA. |
| RBC | Normocytic Normochromic. |
| WBC | Total leukocytes count is normal on smear. |
| | NEUTROPHILS :54% |
| | LYMPHOCYTES :36% |
| | EOSINOPHILS :03% |
| | MONOCYTES :07% |
| | BASOPHILS :00% |
| PLATELET | Adequate on smear. |
| HEMOPARASITE | No Parasites seen. |
| Result relates to sample tested | I, Kindly correlate with clinical findings. |
| | END OF REPORT |

Checked By Pathologist



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LIVER FUNCTION TEST UNIT **REFERENCE RANGE** TEST NAME RESULTS **TOTAL BILLIRUBIN** 0.1 - 1.2 1.03 mg/dL (Method-Diazo) **DIRECT BILLIRUBIN** 0.51 0.0 - 0.4 mg/dL (Method-Diazo) **INDIRECT BILLIRUBIN** 0.52 0 - 0.8 mg/dL Calculated SGOT(AST) U/L 16.10 - 37 (UV without PSP) SGPT(ALT) 21.3 UP to 40 U/L UV Kinetic Without PLP (P-L-P) **ALKALINE PHOSPHATASE** 55.0 U/L 53 - 128 (Method-ALP-AMP) 6.4 - 8.3 S. PROTIEN 6.0 g/dl (Method-Biuret) S. ALBUMIN 3.81 g/dl 3.5 - 5.2 (Method-BCG) S. GLOBULIN 1.90 - 3.50 2.19 g/dl Calculated A/G RATIO 1.74 0 - 2 Calculated

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

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

Checked By Priyanka_Deshmukh

Sum

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| | | | |

| HAEMATOLOGY | | | | |
|-------------|---------|---------|-----------------|--|
| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | |
| ESR | | | | |
| ESR | 12 | mm/1hr. | 0 - 20 | |

METHOD - WESTERGREN

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

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

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184202

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| | | | |

| BIOCHEMISTRY | | | | |
|---------------------------------------|---------|-------|-----------------|--|
| TEST NAME | RESULTS | UNIT | REFERENCE RANGE | |
| GAMMA GT | 21.8 | U/L | 13 - 109 | |
| BLOOD GLUCOSE FASTING & PP | | | | |
| BLOOD GLUCOSE FASTING | 111.6 | mg/dL | 70 - 110 | |
| URINE GLUCOSE FASTING | | | | |
| BLOOD GLUCOSE PP | 126.7 | mg/dL | 70 - 140 | |
| BLOOD GLUCOSE PP | 126.7 | 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.

<u>GLYCOCELATED HEMOGLOBIN (HBA1C)</u>

| HBA1C (GLYCOSALATED | 6.0 | % | Hb A1c |
|------------------------------|-------|-------|----------------------------|
| HAEMOGLOBIN) | | | > 8 Action suggested |
| | | | < 7 Goal |
| | | | < 6 Non - diabetic level |
| AVERAGE BLOOD GLUCOSE (A. B. | 125.5 | mg/dL | NON - DIABETIC : <=5.6 |
| G.) | | | PRE - DIABETIC : 5.7 - 6.4 |
| | | | DIABETIC : >6.5 |

Checked By

Priyanka_Deshmukh

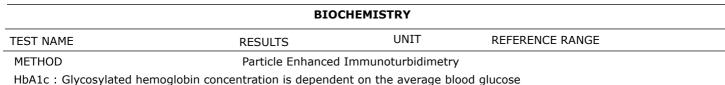
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concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It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

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

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

Checked By Priyanka_Deshmukh



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REPORT ON IMMUNOLOGY UNIT **REFERENCE RANGE** TEST NAME RESULTS PSA (PROSTATE SPECIFIC 0.323 0 - 4 ng/ml ANTIGEN)(TOTAL) (CLIA) **INTERPRETATION:**

Increased levels are noted in prostate cancer, benign prostatic hypertrophy, prostatitis Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By Pathologist



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