


 भारत सरकार
 Government of India
 
 आधार


 Anil Kumar Sidha
 Anil Kumar Sidha
 जन्म तिथि / DOB : 15/06/1967
 पुरुष / Male

31/03/2012

4184 3168 2747

मेरा आधार, मेरी पहचान


 भारतीय विशिष्ट पहचान प्राधिकरण
 Unique Identification Authority of India
 
 AADHAAR

पता: S/O Mukat Bihari Sidha, ward
 no 11, HARIJAN ka MOHALLA, Churi
 Chatarpura, Jhunjhunun, Rajasthan,
 333701

Address: S/O Mukat Bihari Sidha, ward
 no 11, HARIJAN ka MOHALLA, Churi
 Chatarpura, Jhunjhunun, Rajasthan,
 333701

4184 3168 2747

 1947
  help@uidai.gov.in
 www.uidai.gov.in

अनिल कुमार सिद्धा

6376157511


 Rajasthan Diagnostic &
 Medical Research Centre
 Jhunjhunu



RAJASTHANI DIAGNOSTIC & MRI CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

'X-RAY

ECG

MAMOGRAPHY

NAME	ANIL KUMAR SIDHA	AGE-	SEX: M
REF/BY:	BOB HEALTH CHECK UP	DATE	25-Jan-24

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver: is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

Gall bladder: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

Pancreas: is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

Rt. Kidney: is normal in size, shape, position and mild bright echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus /hydronephrosis is seen.

Lt. Kidney: is normal in size, shape, position and mild bright echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/hydronephrosis is seen.

Spleen: is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

Urinary Bladder: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

Prostate: is enlarged in size 32gm, regular in shape and outline. Capsule is intact. No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen.

IMPRESSION:

- ❖ Bilateral MRD grade 1.
- ❖ Prostatomegaly grade 1

Advised: clinicopathological correlation

CSA
DR. UMMED SINGH RATHORE
 MD RADIODIAGNOSIS

Dr. Ummed Singh
 MD (Radiodiagnosis)
 (RMC.34498/24812)



THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE



B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977

Name: Anil Kumar Sidha -
Patient ID: Bob66578

Date of birth: 15.06.1967
Gender: Male
Height: [blank]
Weight: [blank]
Ethnicity: Undefined
Pacemaker: Unknown
Indication: [blank]
Remark: [blank]

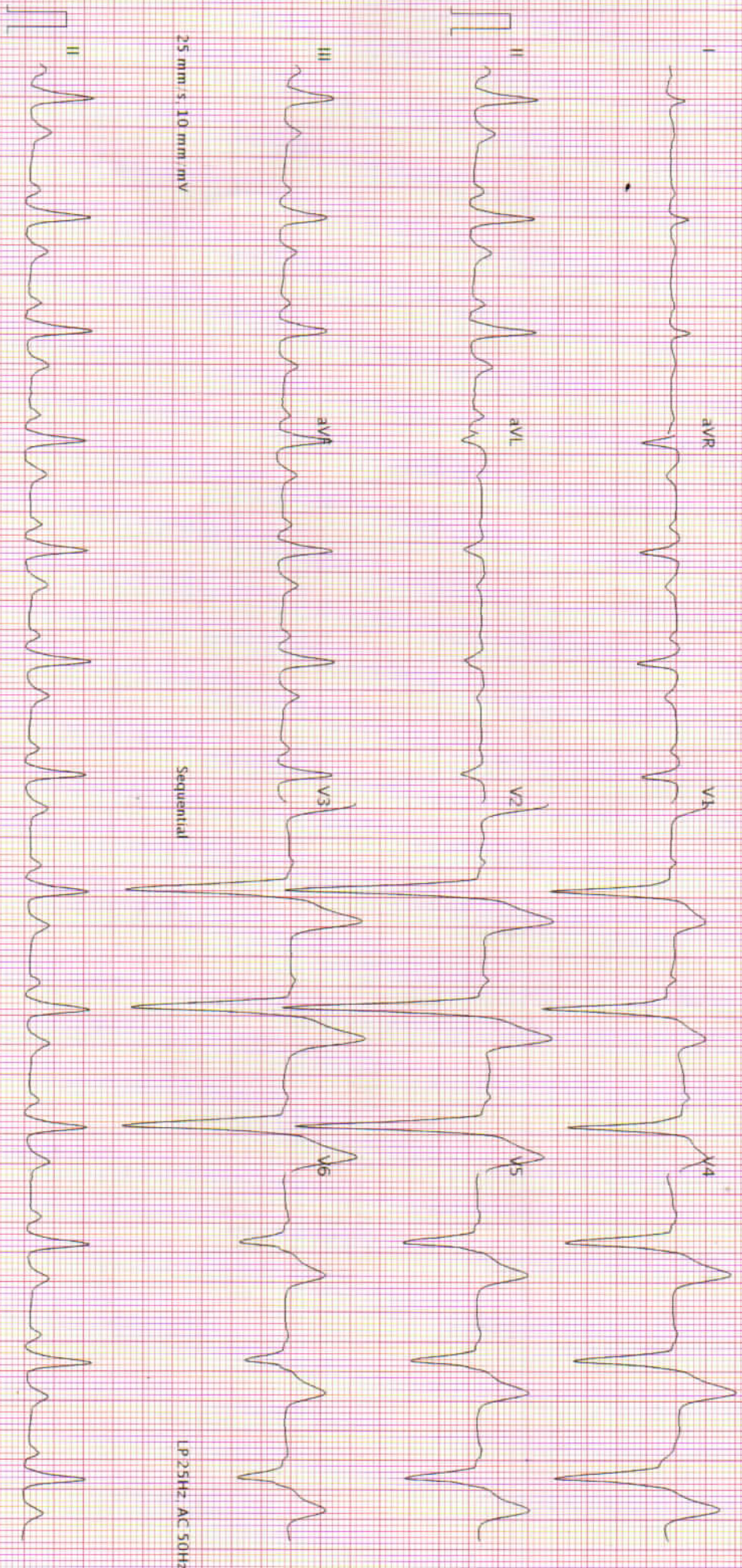
25.01.2024 12:43:27
Standard 12-Lead
HR: 77 bpm
P axis: 67°
QRS axis: 71°
T axis: 74°
RR: 77
P: 107 ms
PR: 141 ms
QRS: 154 ms
QTc: 414 ms
QTcB: 470 ms

Abnormal

Rajasthan Diagnostic & MR Centre
8-110, Subhash Marg, Indira Nagar, Mandawa, Noida
Jhunjhunu (Raj.)
Pacemaker spikes noted
Consider WPW type B
Normal electrical axis
QRS(T) contour abnormality
consistent with recent anterior myocardial infarction
Abnormal ECG

[Signature]
Rajasthan Diagnostic Centre
Medical Research
Jhunjhunu

Unconfirmed report



25 mm/s, 10 mm/mV
AT-102 G2 1.2.0 (080 009831)

Printed on 25.01.2024 12:43:45

LP 25Hz AC 50Hz
Page 1 of 1

SCHILLER

Part No. 2.157048M

CE 0123

S-80



RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

EKG

MAMOGRAPHY

NABL CERTIFICATE NO.
MC-5346

NAME : ANIL KUMAR SIDHA	AGE 56 /SEX M
REF.BY :BOB HEALTH CHECK-UP	DATE: 25.01.2024

X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

DR. ANUSHA MAHALAWAT

MD (RADIOLOGIST)

RMC -38742/25457

Dr. Anusha Mahalawat
MD (Radiodiagnosis)
(RMC. 38742/25457)



आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE





RAJASTHANI DIAGNOSTIC & MRI CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

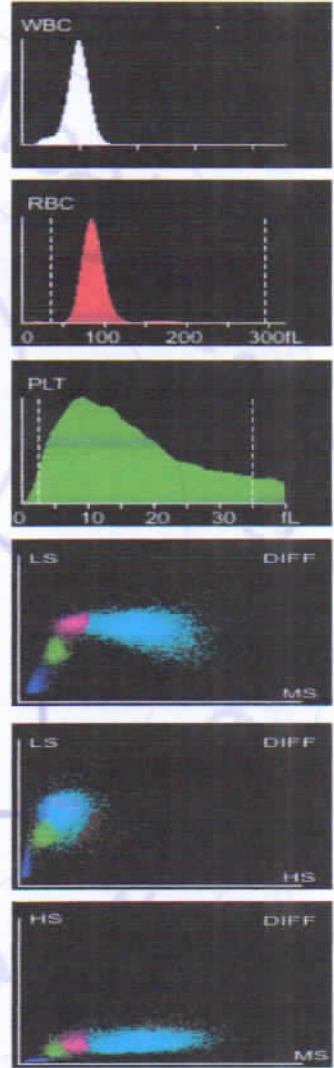


NABL CERTIFICATE NO.
MC-5346

Hematology Analysis Report

First Name: ANIL KUMAR SIDHA
Last Name: Department: Sample ID: 5
Gender: Male Med Rec. No.: Test Time: 25/01/2024 12:30
Age: 56 Year Diagnosis:

Parameter	Result		Ref. Range	Unit
1 WBC	18.20	H	4.00-10.00	10 ³ /uL
2 Neu%	80.2	H	50.0-70.0	%
3 Lym%	8.9	L	20.0-40.0	%
4 Mon%	9.4		3.0-12.0	%
5 Eos%	1.2		0.5-5.0	%
6 Bas%	0.3		0.0-1.0	%
7 Neu#	14.60	H	2.00-7.00	10 ³ /uL
8 Lym#	1.62		0.80-4.00	10 ³ /uL
9 Mon#	1.71	H	0.12-1.20	10 ³ /uL
10 Eos#	0.22		0.02-0.50	10 ³ /uL
11 Bas#	0.05		0.00-0.10	10 ³ /uL
12 RBC	4.53		3.50-5.50	10 ⁶ /uL
13 HGB	11.8		11.0-16.0	g/dL
14 HCT	40.9		37.0-54.0	%
15 MCV	90.3		80.0-100.0	fL
16 MCH	26.1	L	27.0-34.0	pg
17 MCHC	29.0	L	32.0-36.0	g/dL
18 RDW-CV	12.0		11.0-16.0	%
19 RDW-SD	45.0		35.0-56.0	fL
20 PLT	190		100-300	10 ³ /uL
21 MPV	11.2		6.5-12.0	fL
22 PDW	17.3	H	9.0-17.0	fL
23 PCT	0.213		0.108-0.282	%
24 P-LCR	46.2	H	11.0-45.0	%
25 P-LCC	88		30-90	10 ³ /uL



Mamta Khuteta
Dr. Mamta Khuteta
M.D. (Path.)
RMC No. 4720/16260

Submitter: Operator: admin Approver:
Draw Time: 25/01/2024 12:28 Received Time: 25/01/2024 12:28 Validated Time:
Report Time: 25/01/2024 15:20 Remarks:

*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE





RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY

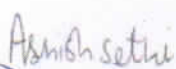
Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code 
 LIS Number 7 4 4 1

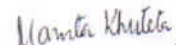
LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol (Method : CHOD-PAP)	161.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	59.00	mg/dL	35--88
Triglycerides (Method : GPO)	118.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	78.40	mg/dL	0--100
VLDL Cholesterol	23.60	mg/dL	0--35
TC/HDL Cholestrol Ratio	2.73	Ratio	2.5--5
LDL/HDL Ratio	L 1.33	Ratio	1.5--3.5


 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUPOSE


 Dr. Mamta Khuteta
 M.D.(Path.)
 RMC No. 4720/16260



T&C : * This Reports is Not Valid for Medico Legal Purpose. * Interpretation and name of person is Not our responsibility.
 D-110, Surajesh Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977

* No part of this report should be reproduced for any purpose. * Interpret result after considering Age,sex effect of drug and other relevant factor.




RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code 
 LIS Number 3 4 4 1

HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	10	mm/hr	20
BLOOD GROUPING (ABO & Rh)	A+ Positive		



Ashish sethi

Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUROSE

Mamta Khute

Dr. Mamta Khute
 M.D.(Path.)
 RMC No. 4720/16260



T&C : * This Reports is not valid for medico legal purpose. * Interpret result after considering Age,sex effect of drug and other relevant factor.

B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No : 1592-294977

* No part of this report should be reproduced for any purpose. * Interpret result after considering Age,sex effect of drug and other relevant factor.



RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY


X-RAY

ECG

MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code 
 LIS Number 7 4 4 1

HAEMATOLOGY

HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	5.20	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	102.54	mg/dL	
eAG (Estimated Average Glucose)	5.69	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-

Fully Automated (EM 200) ERBA MANNHEIM.

Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.


Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Anemia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
Glucose Fasting (Method : GOD-POD)	81.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born, >1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121
Blood Sugar PP (Method : GOD-POD)	108.00	mg/dL	Glucose 2 h Postparandial: <120


 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं


 Dr. Mamta Khuteta
 M.D.(Path.)
 RMC No. 4720/16289

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE

T&C : * This Reports is Not Valid for Medico Legal Purpose. * Interpret result after considering Age, sex effect of drug and other relevant factor.

* No part of this report should be reproduced for any purpose. * Interpret result after considering Age, sex effect of drug and other relevant factor.

B-10 Subhash Marg, Indira Nagar, Jhunjhunu (Raj) Ph. No. : 1592-294977




RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : **745**
 Patient ID No.: **1518**
 Age : **56** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : **25-01-2024 12:35 PM**
 Collected On : **25-01-2024 12:35 PM**
 Received On : **25-01-2024 12:35 PM**
 Reported On : **25-01-2024 03:21 PM**
 Bar Code 
 LIS Number : **3 4 4 1**

BIO-CHEMISTRY KIDNEY FUNCTION TEST


Test Name	Observed Values	Units	Reference Intervals
Blood Urea (Method : Urease-GLDH)	23.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method : Enzymatic Creatinase)	0.86	mg/dL	0.6-1.30
Calcium	10.52	mg/dL	8.5-11
Uric Acid (Method : Uricase-POD)	5.62	mg/dL	2.4-7.2
Test Name	Observed Values	Units	Reference Intervals
Gamma glutamyl transferase (GGT)	24.00	IU/L	15.0-85.0

JHUNJHUNU (RAJ.)


Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUROSE


Dr. Mamta Khuteta
 M.D.(Path.)
 RMC No. 4720/16260



T&C : * This Reports is not valid for medico legal purpose. Identification and name of person is not our responsibility.
 * No part of this report should be reproduced for any purpose. * Interpret result after considering Age, sex effect of drug and other relevant factor.

D-110, Surash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977




RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code 
 LIS Number 7 4 4 1

BIO-CHEMISTRY Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.:UV Kinetic)	37.00	U/L	5-40
SGPT/ALT(Tech.:UV Kinetic)	26.00	U/L	5-40
Bilirubin(Total) (Method : Diazo)	0.95	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days :10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.20	mg/dL	0-0.3
Bilirubin(Indirect)	0.75	mg/dL	0.1-1.0
Total Protein (Method : BIURET Method)	7.01	g/dL	Adults : 6.4 - 8.3 Premature : 3.6 - 6.0 Newborn : 4.6 - 7.0 1 Week : 4.4 - 7.6 7-12 months : 5.1 - 7.3 1-2 Years : 5.6 - 7.5 > 2 Years : 6.0 - 8.0
Albumin	3.98		
Globulin(CALCULATION)	3.03	gm/dL	2.5-4.5
A/G Ratio(Tech.:Calculated)	1.31		1.2 -- 2.5
Alkaline Phosphatase(Tech.:Pnp Amp Kinetic)	238.00	U/L	108-306



Ashish sethi
 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUPOSE

Mamta Khute
 Dr. Mamta Khute
 M.D.(Path.)
 RMC No. 4720/16260



T&C : * This Reports is not valid for medico legal purpose. * Interpret result after considering Age,sex effect of drug and other relevant factor.
 * No part of this report should be reproduced for any purpose. * Interpret result after considering Age,sex effect of drug and other relevant factor.

B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977



RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code 
 LIS Number 1 4 4 1

THYROID HORMONES T3, T4, TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.98	ng/ML	0.5 - 1.5 ng/ML
T4 (Total Thyroxine)	12.36	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	0.46	µIU/mL	0.35 -- 5.50 µIU/mL

Sample Type : Serum

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS) Abbott USA

Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.


Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

JHUNJHUNU (RAJ.)


 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUPOSE


 Dr. Mamta Khutela
 M.D.(Path.)
 RMC No. 4720/16260

T&C : * This Reports is Not Valid for Legal Purposes. Identification and name of person is not our responsibility.

* No part of this report should be reproduced for any purpose. * Interpret result after considering Age, sex effect of drug and other relevant factor.



RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : 745
 Patient ID No.: 1518
 Age : 56 Gender : MALE
 Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 25-01-2024 12:35 PM
 Collected On : 25-01-2024 12:35 PM
 Received On : 25-01-2024 12:35 PM
 Reported On : 25-01-2024 03:21 PM
 Bar Code : 
 LIS Number : 1 4 4 1

IMMUNOLOGY

Test Name	Observed Values	Units	Reference Intervals
PSA (Prostate-Specific Antigen)	0.71	ng/mL	NORMAL 0 - 4.00 Borderline 4 - 10 High More than 10.00

Method : Fluorescence Immunoassay Technology

Sample Type : Serum / Plasma / Whole Blood

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS) Abbott USA

SUMMARY:-

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate, it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions. Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone. PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.

Ashish sethi
 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

Mamta Khute
 Dr. Mamta Khute
 M.D.(Path.)
 RMC No. 4720/16260

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE

T&C : * This Reports is Not Valid for Medico Legal Purposes. Identification and Name of person is not our responsibility
 * No part of this report should be reproduced for any purpose. * Interpret result after considering Age, sex effect of drug and other relevant factor.

B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977



RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY

Patient Name: **ANIL KUMAR SIDH**
 Sr. No. : **745**
 Patient ID No.: **1518**
 Age : **56** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : **25-01-2024 12:35 PM**
 Collected On : **25-01-2024 12:35 PM**
 Received On : **25-01-2024 12:35 PM**
 Reported On : **25-01-2024 03:21 PM**
 Bar Code 
 LIS Number : **7 4 4 1**

URINE EXAMINATION

URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
PHYSICAL			
Quantity		ml	
Colour	Pale Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.025		
PH	5.0		4.5-6.5
CHEMICAL			
Reaction	Acidic		
Albumin	TRACE		
Urine Sugar	Nil		
MICROSCOPIC			
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	3-5	/h.p.f.	
Epithelial Cells	1-2	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	

Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

Note: This report is not valid for medico legal purposes.



Ashish Sethi
 Dr. Ashish Sethi
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PUROSE

Mamta Khute
 Dr. Mamta Khute

M.D.(Path.)
 RMC No. 4720/16260

