

12.08.2023 10:42:15

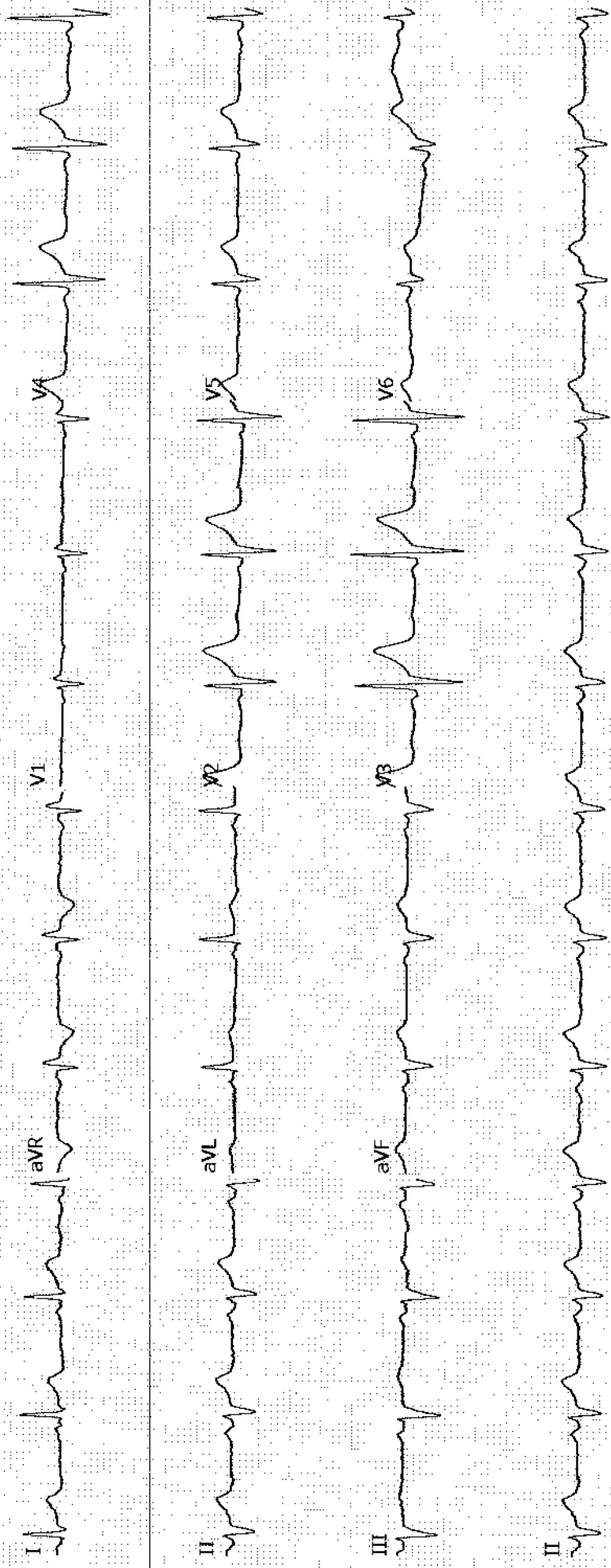
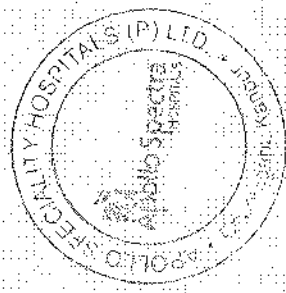
Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

73 bpm  
-- / -- mmHg

QRS : 80 ms  
QT / QTcBaz : 352 / 387 ms  
PR : 130 ms  
P : 98 ms  
RR / PP : 816 / 821 ms  
P / QRS / T : 60 / -30 / 38 degrees

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

MR Anoop Kumar Tiwari  
HIV 17/CM  
met ECG



Vu → 6/6  
 Vu → 6/6  
 (Distance)

Nu → Add: 2.00 sph  
 Nu → Add: 2.00 sph.

Color Vision → 10/10

no further intervention

NAME: *Dr. Anup*

DATE: *12/08/23*

(VD = 12.00)

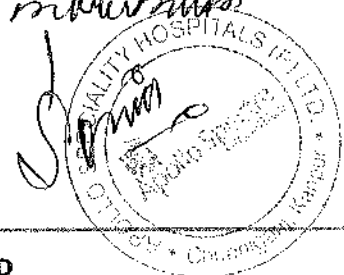
<R>	S	C	A
+	0.25	+0.50	114
+	0.50	+0.25	110
+	0.25	+0.50	100

\* + 0.25 +0.50 110

<L>	S	C	A
+	0.25	+0.25	171
+	0.25	+0.50	172
+	0.25	+0.25	3

\* + 0.25 +0.25 172

PD = 0mm



Patient Name : Mr. ANUP KUMAT TIWARI  
UHID : SKAN.0000128140  
Reported on : 12-08-2023 10:45  
Adm/Consult Doctor :

Age : 49 Y M  
OP Visit No : SKANOPV151349  
Printed on : 12-08-2023 10:45  
Ref Doctor : SELF

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .  
No obvious active pleuro-parenchymal lesion seen .  
Both costophrenic and cardiophrenic angles are clear .  
Both diaphragms are normal in position and contour .  
Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

No obvious abnormality seen

Printed on:12-08-2023 10:45

---End of the Report---

*Varshney*  
**Dr. DUSHYANT KUMAR VARSHNEY**

**MD, DNB**  
Radiology



Patient Name : Mr. ANUP KUMAT TIWARI  
UHID : SKAN.0000128140  
Reported on : 12-08-2023 12:04  
Adm/Consult Doctor :

Age : 49 Y M  
OP Visit No : SKANOPV151349  
Printed on : 12-08-2023 12:05  
Ref Doctor : SELF

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

*Liver- normal in size shape & mild fatty liver . No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.*

*Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.*

*BD normal in course, caliber & clear in visualized region.*

*Pancreas – obscured by bowel gas*

*Spleen -normal in size, shape and echogenecity. No focal lesion. Splenic vein at hilum is normal caliber.*

*Retroperitoneum –obscured by bowel gas*

*Bilateral Kidney -Normal in size, shape, position and echogenecity. Corticomedullary differentiation preserved. Pelvicalyceal system not dilated.No calculus. Bilateral ureter not dilated.*

**Right kidney**

*lower pole simple cortical cyst measuring 2.6 x 2.2 cm*

*Urinary Bladder -Normal in size, shape & distention. No calculus or mass lesion.*

*Prostate - is normal in size, shape and outline.*

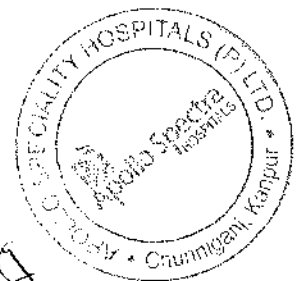
*No evidence of ascites.*

**IMPRESSION:**

*Mild fatty liver.*

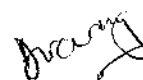
***Suggest – clinical correlation.***

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Printed on:12-08-2023 12:04

---End of the Report---

  
**Dr. DUSHYANT KUMAR VARSHNEY**  
**MD, DNB**

**Patient Name :- MR ANUP KUMAR TIWARI**

**Date :- 12 August 2023**

**Referred By :- MHC**

**Age/Sex: 49Y/MALE**

**IPD/OPD:- OPD**

## HEART STATION ECHO REPORT

PROCEDURES:	M-MODE/2D/DOPPLER/COLOR/CONTRAST		B.S.A. M <sup>2</sup>	
MEASUREMENTS:			NORMAL	
Aortic root diameter	3.3		2.0-3.7 cm < 2.2 cm	
Aortic valve opening	1.8		1.5-2.6 cm	
Right ventricular dimension	2.5		0.7-2.6 cm < 1.4 cm / M <sup>2</sup>	
Right atrial dimension	3.3		0.3-2.9 cm	
Left atrial dimension	3.6		1.9-4.0 cm < 2.2 cm / M <sup>2</sup>	
Left ventricular ED dimension	4.8		3.7-5.6 cm < 3.2 cm / M <sup>2</sup>	
Left ventricular ES dimension	3.1		2.2-4.0 cm	
Interventricular septal thickness	ED 1.2	ES 1.8	0.6-1.2 cm	
Left vent PW thickness	ED 1.2	ES 1.6	0.5-1.0 cm	

### INDICES OF LEFT VENTRICLE FUNCTION

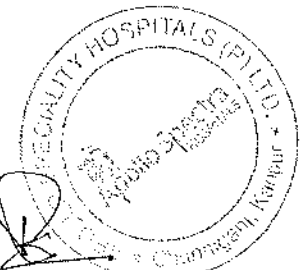
LV Ejection Fraction 60% 60-62%

### DOPPLER

MV	90	Cm/sec	MR	Nil
AoV	111	Cm/sec	AI	Nil
TV	85	Cm/sec	TR	Nil
PV	72	Cm/sec	PI	Nil

### FINAL DIAGNOSIS:

- **LVDD grade I.**
  - Normal cardiac chamber dimensions.
  - No regional wall motion abnormality.
  - LVEF 60%
  - Normal valves and flows.
  - No evidence of pericardial effusion.
  - No evidence of RHD/ASD/VSD/PDA.
  - No LA/LV, Clot/Vegetation/mass
- (Kindly correlate clinically and further investigation)



**DR. V K YADAV**  
**MD, DM (Cardiology)**  
**Consultant Cardiologist**

Please correlate clinically

Kindly Note

Please intimate us for any typing mistakes and send the report for correction within 7 days.

The science of Radiological diagnosis is based on the interpretation of various shadows produced by both the normal and abnormal tissues and are not always conclusive. Further biochemical and radiological investigation & clinical correlation is required to enable the clinician to reach the final diagnosis

**APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED**

(Formerly known as Nova Specialty Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Registered Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad-500 016, Telangana, India.

**BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE**



Consultant Pathologist :  
**Dr. Poonam Kainth**  
 M.D. (Pathology)  
**Dr. Ritu Pradhan**  
 M.D. (Pathology)

## DEPARTMENT OF LABORATORY SERVICES

**Patient Name** : Mr. ANUP KUMAT TIWARI  
**UHID/MR No.** : SKAN.0000128140  
**Sample Collected on** : 12-08-2023 10:12  
**LRN#** : LAB13051840  
**Ref Doctor** : SELF  
**Package Name** : ARCOFEMI - MEDIWHEEL - FULL BODY  
 ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO -  
 PAN INDIA - FY2324  
**Emp/Auth/TPA ID** : 615865  
**Sponsor Name** : ARCOFEMI HEALTHCARE LIMITED

**Age / Gender** : 49Y/Male  
**OP Visit No** : SKANOPV151349  
**Reported on** : 12-08-2023 13:05  
**Specimen** : Blood(EDTA)

**Adm/Consult Doctor** :

## DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>HEMOGRAM + PERIPHERAL SMEAR</b>			
<b>Hemoglobin</b> Method: Cyanide Photometric	15.6	13 - 17	g/dL
<b>RBC Count</b> Method: Electrical Impedance	4.94	4.5 - 5.5	millions/cu mm
<b>Haematocrit</b> Method: Calculated	46.5	40 - 50	%
<b>MCV</b> Method: Calculated	94.1	83 - 101	fl
<b>MCH</b> Method: Calculated	31.6	27 - 32	pg
<b>MCHC</b> Method: Calculated	33.5	31.5 - 34.5	g/dl
<b>RDW</b>	14.4*	11.6 - 14	%
<b>Platelet Count</b> Method: Electrical Impedance	1.50	1.5 - 4.1	lakhs/cumm
<b>TLC Count</b> Method: Electrical Impedance	7400	4000 - 11000	cells/cumm



*Results are to be correlated clinically*

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 Pathology excelhospitals@gmail.com  
 ♦ Emergency No. 9935577550



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**Reported on** : 12-08-2023 13:05  
**Specimen** : Blood(EDTA)

**Adm/Consult Doctor** :

**Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology )**

Cell Type	Count	Reference Range	Unit
Neutrophils	60	40 - 80	%
Lymphocytes	35	20 - 40	%
Monocytes	03	2 - 10	%
Eosinophils	02	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	10	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>BLOOD GROUP ABO AND RH FACTOR</b>			
<b>ABO</b> Method: Microplate Hemagglutination	O		
<b>Rh (D) Type:</b> Method: Microplate Hemagglutination	POSITIVE		

End of the report



*Results are to be correlated clinically*

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 MD Ph. 0512-2555991, 2555992  
 Email: excelhospitals@gmail.com  
 Pathology  
 Emergency No. 9935577550



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 M.D. (Pathology)  
**Dr. Ritu Pradhan**  
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**DEPARTMENT OF LABORATORY SERVICES**

Patient Name : Mr. ANUP KUMAT TIWARI  
 UHID/MR No. : SKAN.0000128140  
 Sample Collected on : 12-08-2023 10:12  
 LRN# : LAB13051840  
 Ref Doctor : SELF  
 Emp/Auth/TPA ID : 615865  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 49Y/Male  
 OP Visit No : SKANOPV151349  
 Reported on : 12-08-2023 13:34  
 Specimen : Blood(EDTA)  
 Adm/Consult Doctor :

**DEPARTMENT OF LABORATORY MEDICINE**

**PERIPHERAL SMEAR**

Methodology : Microscopic  
 RBC : Normocytic Normochromic  
 WBC : Within Normal limits.DLC is as mentioned.  
 Platelets : Adequate in Number  
 Parasites : No Haemoparasites seen  
 IMPRESSION : Normocytic normochromic blood picture  
 Note/Comment : Please Correlate clinically

End of the report



*Results are to be correlated clinically*

*Satinder Singh*

Lab Technician / Technologist

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Dr. SATINDER SINGH

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**Ref Doctor** : SELF  
**Package Name** : ARCOFEMI - MEDIWHEEL - FULL BODY  
ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO -  
PAN INDIA - FY2324  
**Emp/Auth/TPA ID** : 615865  
**Sponsor Name** : ARCOFEMI HEALTHCARE LIMITED

**Age / Gender** : 49Y/Male  
**OP Visit No** : SKANOPV151349  
**Reported on** : 12-08-2023 15:59  
**Specimen** : Serum

**Adm/Consult Doctor** :

### DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>LIPID PROFILE</b>			
<b>CHOLESTEROL</b> Method: CHOD-End Point POD (Enzymatic)	213*	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
<b>HDL</b> Method: Direct Measure PEG	58	<40 - Low ≥60 - High	mg/dL
<b>LDL</b> Method: Calculation Friedewald's Formula	134	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
<b>TRIGLYCERIDES</b> Method: Enzymatic GPO/POD/End Point	105	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥ 500 Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.	mg/dl
<b>VLDL</b> Method: Calculated	21	10-40	mg/dL
<b>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</b>			
<b>CREATININE - SERUM / PLASMA</b>	1.2	0.7 - 1.3	mg/dl

Results are to be correlated clinically



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Consultant Pathologist :  
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**Dr. Ritu Pradhan**  
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**DEPARTMENT OF LABORATORY SERVICES**

Patient Name : Mr. ANUP KUMAR TIWARI  
 UHID/MR No. : SKAN.0000128140  
 Sample Collected on : 12-08-2023 10:12  
 LRN# : LAB13051840  
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Age / Gender : 49Y/Male  
 OP Visit No : SKANOPV151349  
 Reported on : 12-08-2023 15:59  
 Specimen : Serum

Adm/Consult Doctor :

Method:	Result	Reference Range	Unit
Method: Jaffe's Kinetic			
<b>URIC ACID - SERUM</b>	6.8	3.5 - 7.2	mg/dl
Method: Modified Uricase			
<b>UREA - SERUM/PLASMA</b>	28	Male: 19 - 43	mg/dl
Method: Urease with indicator dye			
<b>CALCIUM</b>	8.50	8.5 - 10.1	mg/dl
Method: O-Cresolphthalein complexone			
<b>BUN</b>	13.05	9-20	mg/dl
Method: Urease with indicator dye			
<b>ELECTROLYTES (Na)</b>	138	135 - 145	meq/L
Method: ISE-Direct			
<b>ELECTROLYTES (K)</b>	4.3	3.5 - 5.1	meq/L
Method: ISE-Direct			
<b>GLUCOSE, FASTING</b>			
<b>FASTING SUGAR</b>	110	70 - 110	mg/dl
Method: GOD-PAP			
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)</b>			
<b>GLUCOSE - SERUM / PLASMA (POST PRANDIAL)</b>	149*	70 - 140	mg/dl
Method: Glucose Oxidase-Peroxidase			
<b>LIVER FUNCTION TEST (LFT)</b>			
<b>BILIRUBIN TOTAL</b>	1.65*	0.2 - 1.3	mg/dL
Method: Azobilirubin/dyphylline			

Results are to be correlated clinically



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Lab Technician / Technologist  
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## DEPARTMENT OF LABORATORY SERVICES

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**Reported on** : 12-08-2023 15:59  
**Specimen** : Serum

**Adm/Consult Doctor** :

<b>BILIRUBIN (DIRECT)</b> Method: Dual Wavelength Spectrophotometric	0.54	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
<b>BILIRUBIN UNCONJUGATED(INDIRECT)</b> Method: Dual Wavelength Spectrophotometric	1.11*	0.0 - 1.1	mg/dL
<b>ALBUMIN</b> Method: Bromocresol Green dye binding	4.5	3.0 - 5.0	g/dL
<b>PROTEIN TOTAL</b> Method: Biuret Reaction	7.4	6.0 - 8.2	g/dL
<b>AST (SGOT)</b> Method: Kinetic (Leuco dye) with P 5 P	23	14 - 36	U/L
<b>GLOBULINN</b> Method: Calculation	2.9	2.8 - 4.5	g/dL
<b>ALT(SGPT)</b>	27	9 - 52	U/L
<b>GAMMA GLUTAMYL TRANFERASE (GGT)</b>			
<b>GAMMA GT</b> Method: Kinetic Photometric	21	< 55	U/L

End of the report



Results are to be correlated clinically

Lab Technician / Technologist  
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## DEPARTMENT OF LABORATORY SERVICES

<b>Patient Name</b> : Mr. ANUP KUMAT TIWARI	<b>Age / Gender</b> : 49Y/Male
<b>UHID/MR No.</b> : SKAN.0000128140	<b>OP Visit No</b> : SKANOPV151349
<b>Sample Collected on</b> : 12-08-2023 10:12	<b>Reported on</b> : 12-08-2023 13:06
<b>LRN#</b> : LAB13051840	<b>Specimen</b> : Urine
<b>Ref Doctor</b> : SELF	
<b>Package Name</b> : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
<b>Emp/Auth/TPA ID</b> : 615865	<b>Adm/Consult Doctor</b> :
<b>Sponsor Name</b> : ARCOFEMI HEALTHCARE LIMITED	

## DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>COMPLETE URINE EXAMINATION</b>			
<b>Color:</b>	Straw	Pale Yellow	
<b>Specific Gravity</b> Method: Indicator Method	1.005	1.005 - 1.035	
<b>Transparency:</b>	Clear	Clear	
<b>Protein :</b> Method: Indicator Method	Nil	Nil	
<b>Glucose:</b> Method: Glucose Oxidase	Absent	Nil	
<b>pH</b> Method: Indicator Method	6.0 ( Acidic )	4.6 - 8	
<b>DEPOSITS:</b>	Absent		
<b>WBC/Pus Cells</b>	Nil	0-5	/hpf
<b>Tc/Sqc(Transitional/Squamous epithelial cells)</b>	Occasional	2-3	/hpf



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**Age / Gender** : 49Y/Male  
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**Reported on** : 12-08-2023 13:06  
**Specimen** : Urine

**Adm/Consult Doctor** :

<b>RBC</b>	Nil	0 - 2	/hpf
<b>Crystals:</b>	Nil		
<b>Casts:</b>	Nil		/hpf

**End of the report**

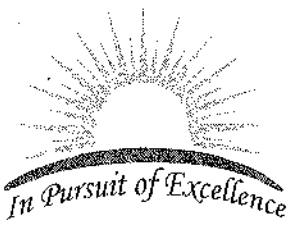


*Results are to be correlated clinically*

**NOTE** : All pathological test have technical limitations  
 Lab Technician/Technologist interpretative errors.  
 Clinical and pathological co-relation is necessary.  
 In case of any discrepancy, results may be reviewed and  
 repeat investigation is advised. Typographical errors  
 should be reported immediately for correction. The report is  
 not valid for medico legal purpose.

**Excel Hospitals (P) Ltd.**

DR. SATINDER SINGH  
 SONT  
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 Emergency No. 9935577550



# SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MR. ANUP KUMAR TIWARI

Age / Gender : 40 years / Male

Patient ID : 35590

Source : Excel Hospital

Referral : SELF

Collection Time : 12/08/2023, 02:43 p.m.

Reporting Time : 12/08/2023, 04:31 p.m.

Sample ID :



232240015

Test Description	Value(s)	Reference Range	Unit(s)
<b>PSA</b> <u>Sample type : Serum</u> PSA Method : CLIA	1.22	0 - 4	ng/mL
<b>Interpretation :</b> Elevated serum PSA concentrations are found in men with prostate cancer, benign prostatic hyperplasia or inflammatory condition of other adjacent genitourinary tissues. PSA has been demonstrated to be accurate marker for monitoring advancing clinical stage in untreated patients and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.			

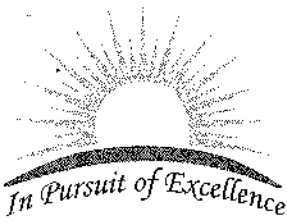
**\*\*END OF REPORT\*\***

All the reports have to be correlated clinically. If the result of the tests are unexpected ,the patient is advised to contact the lab immediately for a recheck.

**Dr. S.S.Soni**  
**M.D. (PATHOLOGY)**



All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.



# SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

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Reporting Time : 12/08/2023, 04:31 p.m.

Sample ID :



232240015

Test Description	Value(s)	Reference Range	Unit(s)
<b>HbA1C</b>			
Sample Type : EDTA			
HbA1C	7.1	Normal - Less than 5.7 Prediabetes - 5.7% - 6.4 Diabetes - 6.5% or Higher	%
Method : Nephelometry			

A1C	Average Blood Sugar
%	mg/dL
6.0	126
6.5	140
7.0	154
7.5	169
8.0	183
8.5	197
9.0	212
9.5	226
10.0	240
11.0	269
12.0	298

**\*\*END OF REPORT\*\***

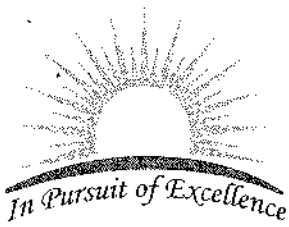
All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.



**Dr. S.S. Soni**

**M.D. (PATHOLOGY)**

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118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

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Reporting Time : 12/08/2023, 04:31 p.m.

Sample ID :



232240015

Test Description	Value(s)	Reference Range	Unit(s)
<b>T3,T4,TSH</b>			
<b>SAMPLE TYPE : SERUM</b>			
T3 Method : CLIA	0.94	0.79 - 1.58	ng/mL
T4 Method : CLIA	7.56	5.2-12.7	µg/dL
TSH Method : CLIA	1.56	0.3-4.5	µIU/mL

### Interpretation

TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

**\*\*END OF REPORT\*\***

All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.

**Dr. S.S.Soni**

**M.D. (PATHOLOGY)**

All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.





<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	: 12-08-2023 10:12	<b>Reported on</b>	: 12-08-2023 17:56
<b>LRN#</b>	: LAB13051840	<b>Specimen</b>	: Serum(Spl)
<b>Ref Doctor</b>	: SELF		
<b>Package Name</b>	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
<b>Emp/Auth/TPA ID</b>	: 615865		
<b>Sponsor Name</b>	: ARCOFEMI HEALTHCARE LIMITED		

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)</b>			
PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) Method: CLIA	1.22	0 - 4	ng/mL
<b>THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)</b>			
TOTAL T3: TRI IODOTHYRONINE - SERUM Method: CLIA	0.94	0.6 - 1.81 ng/mL	ng/mL
TOTAL T4: THYROXINE - SERUM Method: CLIA	7.56	3.2 - 12.6	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM Method: CLIA	1.56	0.35 - 5.5	µIU/mL
<b>HbA1c, GLYCATED HEMOGLOBIN</b>			
HbA1c, GLYCATED HEMOGLOBIN Method: HPLC	7.1*	<=5.6: Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	157.07		mg/dL

---End Of Report---

<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	: 12-08-2023 10:12	<b>Reported on</b>	: 12-08-2023 15:59
<b>LRN#</b>	: LAB13051840	<b>Specimen</b>	: Serum
<b>Ref Doctor</b>	: SELF		
<b>Package Name</b>	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
<b>Emp/Auth/TPA ID</b>	: 615865		
<b>Sponsor Name</b>	: ARCOFEMI HEALTHCARE LIMITED		

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>LIPID PROFILE</b>			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	213*	<200 - Desirable 200-239 - Borderline High ≥240 - High	mg/dL
HDL Method: Direct Measure PEG	58	<40 - Low ≥60 - High	mg/dL
LDL Method: Calculation Friedewald's Formula	134	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
TRIGLYCERIDES Method: Enzymatic GPO/POD/End Point	105	Normal : <150 Border High : 150 - 199 High : 200 - 499 Very High : ≥ 500 Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.	mg/dl
VLDL Method: Calculated	21	10-40	mg/dL
<b>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</b>			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	1.2	0.7 - 1.3	mg/dl
URIC ACID - SERUM Method: Modified Uricase	6.8	3.5 - 7.2	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	28	Male: 19 - 43	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.50	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	13.05	9-20	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	138	135 - 145	meq/L
ELECTROLYTES (K) Method: ISE-Direct	4.3	3.5 - 5.1	meq/L
<b>GLUCOSE, FASTING</b>			
FASTING SUGAR Method: GOD-PAP	110	70 - 110	mg/dl
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)</b>			
GLUCOSE - SERUM / PLASMA (POST PRANDIAL) Method: Glucose Oxidase-Peroxidase	149*	70 - 140	mg/dl
<b>LIVER FUNCTION TEST (LFT)</b>			
BILIRUBIN TOTAL Method: Azobilirubin/dyphylline	1.65*	0.2 - 1.3	mg/dL
BILIRUBIN (DIRECT) Method: Dual Wavelength Spectrophotometric	0.54	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
BILIRUBIN UNCONJUGATED(INDIRECT) Method: Dual Wavelength Spectrophotometric	1.11*	0.0 - 1.1	mg/dL
ALBUMIN Method: Bromocresol Green dye binding	4.5	3.0 - 5.0	g/dL
PROTEIN TOTAL Method: Biuret Reaction	7.4	6.0 - 8.2	g/dL

**Patient Name** : Mr. ANUP KUMAT TIWARI

**Age/Gender** : 49 Y/M

AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	23	14 - 36	U/L
GLOBULINN Method: Calculation	2.9	2.8 - 4.5	g/dL
ALT(SGPT)	27	9 - 52	U/L
<b>GAMMA GLUTAMYL TRANFERASE (GGT)</b>			
GAMMA GT Method: Kinetic Photometric	21	< 55	U/L

---End Of Report---

**Patient Name** : Mr. ANUP KUMAT TIWARI

**Age/Gender** : 49 Y/M

**UHID/MR No.** : SKAN.0000128140

**OP Visit No** : SKANOPV151349

**Sample Collected on** : 12-08-2023 10:12

**Reported on** : 12-08-2023 13:34

**LRN#** : LAB13051840

**Specimen** : Blood(EDTA)

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 615865

**Sponsor Name** : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF LABORATORY MEDICINE**

**PERIPHERAL SMEAR**

Methodology : Microscopic  
RBC : Normocytic Normochromic  
WBC : Within Normal limits.DLC is as mentioned.  
Platelets : Adequate in Number  
Parasites : No Haemoparasites seen  
IMPRESSION : Normocytic normochromic blood picture  
Note/Comment : Please Correlate clinically

---End Of Report---

<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	: 12-08-2023 10:12	<b>Reported on</b>	: 12-08-2023 13:06
<b>LRN#</b>	: LAB13051840	<b>Specimen</b>	: Urine
<b>Ref Doctor</b>	: SELF		
<b>Package Name</b>	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
<b>Emp/Auth/TPA ID</b>	: 615865		
<b>Sponsor Name</b>	: ARCOFEMI HEALTHCARE LIMITED		

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>COMPLETE URINE EXAMINATION</b>			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.005	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.0 ( Acidic )	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	Occasional	2-3	/hpf
RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

---End Of Report---

<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	: 12-08-2023 10:12	<b>Reported on</b>	: 12-08-2023 13:05
<b>LRN#</b>	: LAB13051840	<b>Specimen</b>	: Blood(EDTA)
<b>Ref Doctor</b>	: SELF		
<b>Package Name</b>	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
<b>Emp/Auth/TPA ID</b>	: 615865		
<b>Sponsor Name</b>	: ARCOFEMI HEALTHCARE LIMITED		

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>HEMOGRAM + PERIPHERAL SMEAR</b>			
Hemoglobin Method: Cyanide Photometric	15.6	13 - 17	g/dL
RBC Count Method: Electrical Impedance	4.94	4.5 - 5.5	millions/cu mm
Haematocrit Method: Calculated	46.5	40 - 50	%
MCV Method: Calculated	94.1	83 - 101	fl
MCH Method: Calculated	31.6	27 - 32	pg
MCHC Method: Calculated	33.5	31.5 - 34.5	g/dl
RDW	<b>14.4*</b>	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.50	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	7400	4000 - 11000	cells/cumm
<b>Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology )</b>			
Neutrophils	60	40 - 80	%
Lymphocytes	35	20 - 40	%
Monocytes	03	2 - 10	%
Eosinophils	02	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	10	0 - 14	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>BLOOD GROUP ABO AND RH FACTOR</b>			
ABO Method: Microplate Hemagglutination	O		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

---End Of Report---

<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 12-08-2023 12:05
<b>LRN#</b>	: RAD2071815	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 615865		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**Liver-** normal in size shape & **mild fatty liver** . No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

**Gall Bladder-** Normal in distension and wall thickness.No sizeable calculus or mass lesion.  
CBD normal in course, caliber & clear in visualized region.

**Pancreas** – obscured by bowel gas

**Spleen** -normal in size, shape and echogenecity. No focal lesion. Splenic vein at hilum is normal caliber.

**Retroperitoneum** –obscured by bowel gas

**Bilateral Kidney** -Normal in size, shape, position and echogenecity. Corticomedullary differentiation preserved.  
Pelvicalyceal system not dilated.No calculus. Bilateral ureter not dilated. **Right kidney lower pole simple cortical cyst measuring 2.6 x 2.2 cm**

**Urinary Bladder** -Normal in size, shape & distention. No calculus or mass lesion.

**Prostate** - is normal in size, shape and outline.

No evidence of ascites.

**IMPRESSION:**

*Mild fatty liver.*

**Suggest – clinical correlation.**

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

**Dr. DUSHYANT KUMAR VARSHNEY**  
MD, DNB  
Radiology

<b>Patient Name</b>	: Mr. ANUP KUMAT TIWARI	<b>Age/Gender</b>	: 49 Y/M
<b>UHID/MR No.</b>	: SKAN.0000128140	<b>OP Visit No</b>	: SKANOPV151349
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 12-08-2023 10:45
<b>LRN#</b>	: RAD2071815	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 615865		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

No obvious abnormality seen

**Dr. DUSHYANT KUMAR VARSHNEY**  
**MD, DNB**  
Radiology