



भारत सरकार
Government of India



Issue Date: 08/04/2015



प्रमोद कुमार
Pramod Kumar
जन्म तिथि/DOB: 09/07/1969
पुरुष/ MALE

7188 5045 8019

VID : 9153 9976 4063 6874

मेरा **आधार**, मेरी पहचान



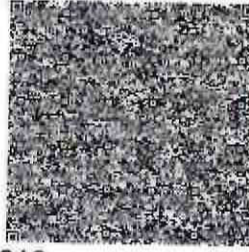
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एलडेको एस्टेट, पानीपत, पानीपत,
हरियाणा - 132103

Address:
S/O Late Sukhdev Prasad, C-IX/4, SECTER-4
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7188 5045 8019

VID : 9153 9976 4063 6874

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Diagnosics S. No. : LSHHI346164	MR No. : MR/24/000407
Patient Name : Mr. PRAMOD KUMAR	Doctor : Dr. PANKAJ GOYAL
Age/Sex : 54.7 YRS Sex : Male	Date : 10-Feb-2024
OPD/IPD : OPD	Sample Collection : 10-Feb-2024
IPDNo :	Reporting Date : 13-Feb-2024
	ReferDoctor :

BIO-CHEMISTRY

Test Name	Status	Result	Biological Reference Interval	Unit
<u>BLOOD GLUCOSE FASTING</u>				
BLOOD SUGAR FASTING		85	70-110	mg/dl
<u>BLOOD GLUCOSE PP</u>				
BLOOD SUGAR PP		110	80-140	mg/dl

HAEMATOLOGY

BLOOD GROUP And RH TYPE

BLOOD GROUP ABO & Rh "B" POSITIVE

CBC (COMPLETE BLOOD COUNT)

HAEMOGLOBIN		15.4	13.0-17.0	gm/dl
TLC (Total Leucocyte Count)		9500	4000-11000	/cumm
NEUTROPHILS		52	45-75	%
LYMPHOCYTES		32	20-45	%
EOSINOPHILS	H	10	0-06	%
MONOCYTES		06	02-10	%
BASOPHILS		00	0-2	%
RBC	H	6.21	3.8-5.5	Millions/cmm
PCV/HAEMATOCRIT	H	51.4	35-45	%
MCV		82.8	76-96	fl
MCH	L	24.8	27-31	Picogram
MCHC		30	30-35	gm/dl



(This is only professional opinion and not the diagnosis, Please correlate clinically)

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Diagnosics S. No. : LSHH1346164	MR No. : MR/24/000407
Patient Name : Mr. PRAMOD KUMAR	Doctor : Dr. PANKAJ GOYAL
Age/Sex : 54.7 YRS Sex : Male	Date : 10-Feb-2024
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RDW	14.5	11.5-14.5	%
PLATELETS	L 1.45	1.5-4.0	Lacs

BIO-CHEMISTRY

CREATININE SERUM

CREATININE	1.1	0.6-1.4	mg/dl
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HAEMATOLOGY

ESR

ESR	12	0-20	mm/1sthr
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BIO-CHEMISTRY

LFT(LIVER FUNCTION TEST)

BILIRUBIN (TOTAL)	H 1.26	0.1-1.2	mg/dl
BILIRUBIN DIRECT	H 0.48	0.0-0.3	mg/dl
BILIRUBIN INDIRECT	0.78	0.1-0.9	mg/dl
SGOT (AST)	35	0-40	IU/L
SGPT (ALT)	H 59	0-40.0	IU/L
ALK.PHOSPHATASE	H 124	42.0-119	IU/L
TOTAL PROTEIN	7.4	6.0-8.0	gm/dl
ALBUMIN	4.0	3.20-5.0	gm/dl
GLOBULIN	3.4	2.30-3.80	gm/dl
A/G Ratio	1.1	1.0-1.60	

LIPID PROFILE

TOTAL CHOLESTEROL	142	0-250	mg/dL
TRIGLYCERIDE	H 177	0-161	mg/dL
HDL-CHOLESTEROL	38	30.0-60.0	mg/dL



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LDL CHOLESTEROL	68.6	0-130	mg/dL
VLDL	35.4	0-40	mg/dL
LDL / HDL RATIO	1.8	0.0-3.55	
UREA			
BLOOD UREA	30	13.0-45.0	mg/dl
URIC ACID, SERUM			
URIC ACID	H 9.0	3.0-7.2	mg/dl

CLINICAL PATHOLOGY

URINE ROUTINE EXAMINATION

VOLUME	30	-	ml
COLOUR	P. YELLOW	-	
APPEARANCE	S. TURBID	-	
URINE pH	6.0	5.5-8.5	
SPECIFIC GRAVITY	1.010	1.005-1.030	
KETONE	NEG.	-	
URINE PROTEIN	TRACE	-	
URINE SUGAR	NEG.	-	
PUS CELLS	12-15	1-2	/HPF
RBC CELLS	1-2	-	/HPF
EPITHELIAL CELLS	0-1	2-3	/HPF
CRYSTALS	NIL	-	

LAB
TECHNICIAN

Dr. VISHAL SALHOTRA
MD (PATHOLOGY)

Nidhi

Dr. NIDHI KAUSHIK
MBBS, MD, DNB
(PATHOLOGY)

Dr. NISHITA KHERA
MBBS, MD (PATHOLOGY)

Dr. PARDIP KUMAR
CONSULTANT(MICROBIOLOGY)

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Lab No.	012402110065	Age/Gender	54 YRS/MALE	Coll. On	11/Feb/2024 07:52AM
Name	Mr. PRAMOD KUMAR			Reg. On	11/Feb/2024
Ref. Dr.				Approved On	11/Feb/2024 10:20AM
Rpt. Centre	Self			Printed On	13/Feb/2024 03:16PM

Test Name	Value	Unit	Biological Reference Interval
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HbA1c (Glycosylated haemoglobin), EDTA whole blood <i>Method : HPLC</i>	5.50	%	< 5.7
Estimated average plasma Glucose <i>Method : Calculated</i>	111.15	mg/dL	65 - 136

The test is approved by NGSP for patient sample testing.

Interpretation:

Metabolically normal patients	%	< 5.7
Pre-diabetic	%	5.7 - 6.4
Diabetic	%	> 6.4

Glycosylated hemoglobin or HbA1c is a reliable indicator of mean plasma glucose levels for a period of 8-12 weeks preceding the date on which the test is performed and is a more reliable indicator of overall blood sugar control in known diabetic patients than blood sugar levels. A value of less than 5.7 % is usually seen in metabolically normal patients, however diabetics with very good control can also yield similar values. The HbA1c test, thus can not be used to differentiate between diabetic patients with very good control over the plasma glucose levels from metabolically normal, non-diabetic subjects as both groups may reveal very similar values in the assay.

*Disclaimer: This is an electronically validated report. If any discrepancy is found, it should be confirmed by the user.
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Dr. Smita Sadwani
MD(Biochemistry)
Technical Director

Dr. Mayank Gupta
MD, DNB Pathology
Consultant Pathologist



Dr. Moushmi Mukherjee
MBBS, MD (Pathology)
Consultant Pathologist



Lab No.	012402110065	Age/Gender	54 YRS/MALE	Coll. On	11/Feb/2024 07:52AM
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Test Name	Value	Unit	Biological Reference Interval
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TSH (Thyroid Stimulating Hormone), serum 1.27 uIU/ml 0.27 - 4.2
 Method : ECLIA

Interpretation:

1. Primary hyperthyroidism is accompanied by elevated serum FT3 and FT4 values alongwith depressed TSH levels.
2. Primary hypothyroidism is accompanied by depressed serum FT3 and FT4 values and elevated serum TSH levels.
3. High FT3 levels accompanied by normal FT4 levels and depressed TSH levels may be seen in T3 toxicosis.
4. Central hypothyroidism occurs due to pituitary or thalamic malfunction (secondary and tertiary hypothyroidism respectively). This relatively rare but important condition is indicated by presence of low serum FT3 and FT4 levels, in conjunction with TSH levels that are paradoxically either low/normal or are not elevated to levels that are expected.

The following ranges are recommended for pregnant females:

First trimester	uIU/ml	0.1 - 2.5
Second trimester	uIU/ml	0.2 - 3.0
Third trimester	uIU/ml	0.3 - 3.0

PSA Total, serum 0.62 ng/mL 0 - 3.1
 Method : ECLIA

Interpretation:

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. Normally, very little PSA is secreted in the blood. Increases in glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels.

In patients with previously diagnosed prostate cancer, PSA testing is advocated as an early indicator of tumor recurrence and as an indicator of response to therapy.

The test is also useful for initial screening for prostate cancer:

Total PSA levels < 2 ng/ml almost rule out the possibility of prostatic malignancy.

Total PSA levels between 2 and 10 ng/ml lie in the grey zone. Such values may be obtained in prostatitis, benign hyperplasia and malignancy. Further testing including a free PSA/PSA ratio and prostate biopsy is recommended for these patients for confirmation of the diagnosis.

Total PSA values >10 ng/ml are highly suspicious for prostate cancer but further testing, such as prostate biopsy, is needed to diagnose the exact pathology.

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*** End Of Report ***



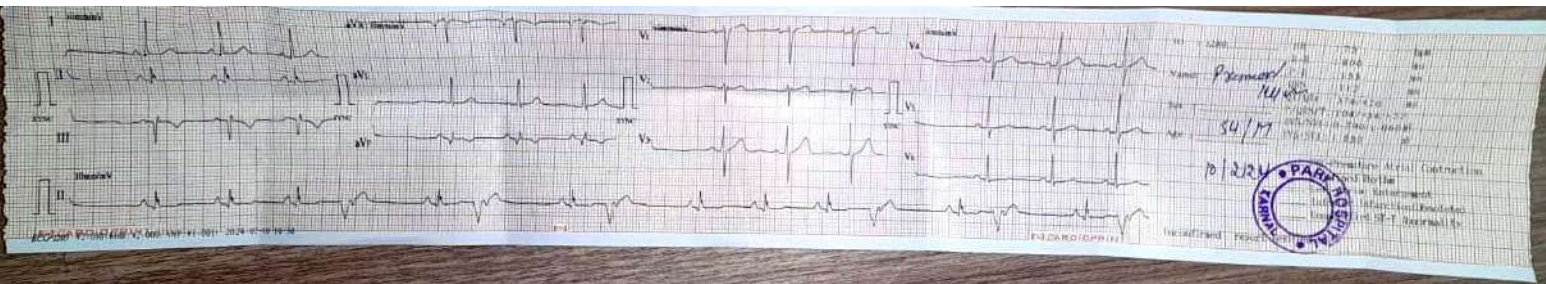
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Dr. Smita Sadwani
 MD(Biochemistry)
 Technical Director

Dr. Mayank Gupta
 MD, DNB Pthology
 Consultant Pathologist



Dr. Moushmi Mukherjee
 MBBS,MD (Pathology)
 Consultant Pathologist





ECHOCARDIOGRAPHY REPORT

NAME:-MR. PRAMOD KUMAR	AGE:- 54Y/M	IPD NO:- 0000
CONSULTANT:-DR. PREETI	DATE:- 13 - 02 -2024	MR NO:- MR/ 24/00407

ECHO

- Mitral valve.....**Normal**..... Pulmonary valve.....**Normal**.....
- Pulmonary artery.....**Normal**..... Aortic valve.....**Normal**.....
- Tricuspid valve..... **Normal**

2D RWMA

- **Mild Basal Inferior wall Hypokinetic** (Regional wall motion abnormality at rest).

COLOUR DOPPLER

-**No**.....Significant vavular stenosis/regurgitation.

COMMENTS AND SUMMARY

- All cardiac chambers ofSize and shape.....**No**.....Dilation or hypertrophy.
- **Mild Basal Inferior wall Hypokinetic** (Regional wall motion abnormality at rest).
-**No**..... clot/ vegetation/ pericardial effusion.
- LV..... **LVEF:50%**..... systolic function.
-**No**.....Significant valvular stenosis/ regurgitation.

FINAL IMPRESSION

- EF AT REST.....**50%**.....

Dr. PREETI
DM (Cardiology)
Reg. No. HN23089
Park Hospital Karnal

SENIOR CONSULTANT

MD (MED), DM CARDIOLOGY

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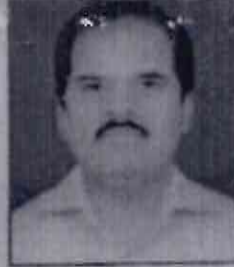


नाम : प्रमोद कुमार

Name : Pramod Kumar

Designation : Senior Manager

पद : वरिष्ठ प्रबन्धक



कर्मचारी क्र./ Employee No. : 385634

जन्म तिथि/ Birth Date : 09-07-1969

क्र.प्र. तिथि/ DOJ : 03-08-1992

रक्त समूह/ Blood Group : B+

Mobile No. : 9992750455

9588160317

हस्ताक्षर/ Signature

जारी करने का स्थान/ क्षेत्रीय कार्यालय करनाल

Place of Issue : Regional Office Karnal

जारी करने की तारीख

Date of Issue :

जारी करने का अधिकार/ Signature of issuing authority



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Age/Sex	: 54.7 YRS Sex : Male	Reporting DATE	: 10-Feb-2024
Visit DATE	: 10-Feb-2024		
OPD/IPD	: OPD	IPD NO	:

ULTRASOUND

Liver is normal in size and shows diffusely raised al echo pattern. There is no focal hepatic lesion present. CBD is normal in course & calibre .
There is no calculus defined in the CBD. Intra hepatic biliary radicals are normal.
Gallbladder is partially distended & contains no calculi,
Pancreas is normal in size & echopattern.
Spleen is normal in size & echopattern.
Both kidneys are normal in shape size contour & echo pattern. There is no hydronephrosis defined on either side. Both ureters are obscured by bowel gas.
Bladder is partially distended & contains no calculi. No mass is defined in bladder.
There is no free fluid present in abdomen.

IMPRESSION:

Grade 1 Fatty liver

Dr. Pooja Thakur
Reg No. HN 20933
Park Hospital



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