



**PANCHMUKHI HOSPITAL**

Dr C P Dadhaniya

Dr R C Dadhaniya

MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639,8320711901

policy number :  
full name : **MOTIHANI ILYAS ABDULBHAI**  
identity proof : Adhar Card  
identity proof no : 2697 833  
gender : Male  
height : 162  
weight : 73  
BP : 120/80  
pulse : 56  
blood sample : yes  
fasting mode : yes  
non fasting mode : no

past history : Cholesterol 1.5 year  
Tab! ATORLL-10

Dental : normal

Romberg Test :

Colour vision : normal

*X*

**DR. C. P. DADHANIYA**  
M.B. Diabetologist  
Ind. Physician  
Regd. No. 1998  
Code No. 1998  
Panchmukhi Hospital  
Mavdi Chowki, RAJKOT.  
150 Ft. Ring Road, RAJKOT.



NAME: Madhavi Iyas  
AGE/GENDER: 33

DIAG. DATE: 24/02/24

PATIENT'S REFRACTION DETAILS

		SPHE	CYL	AXIS	VN
R	D	n	n	n	6/6
	N	n			6/6
L	D	n	n	n	6/6
	N	n			6/6

REMARKS:

CHECKED BY:

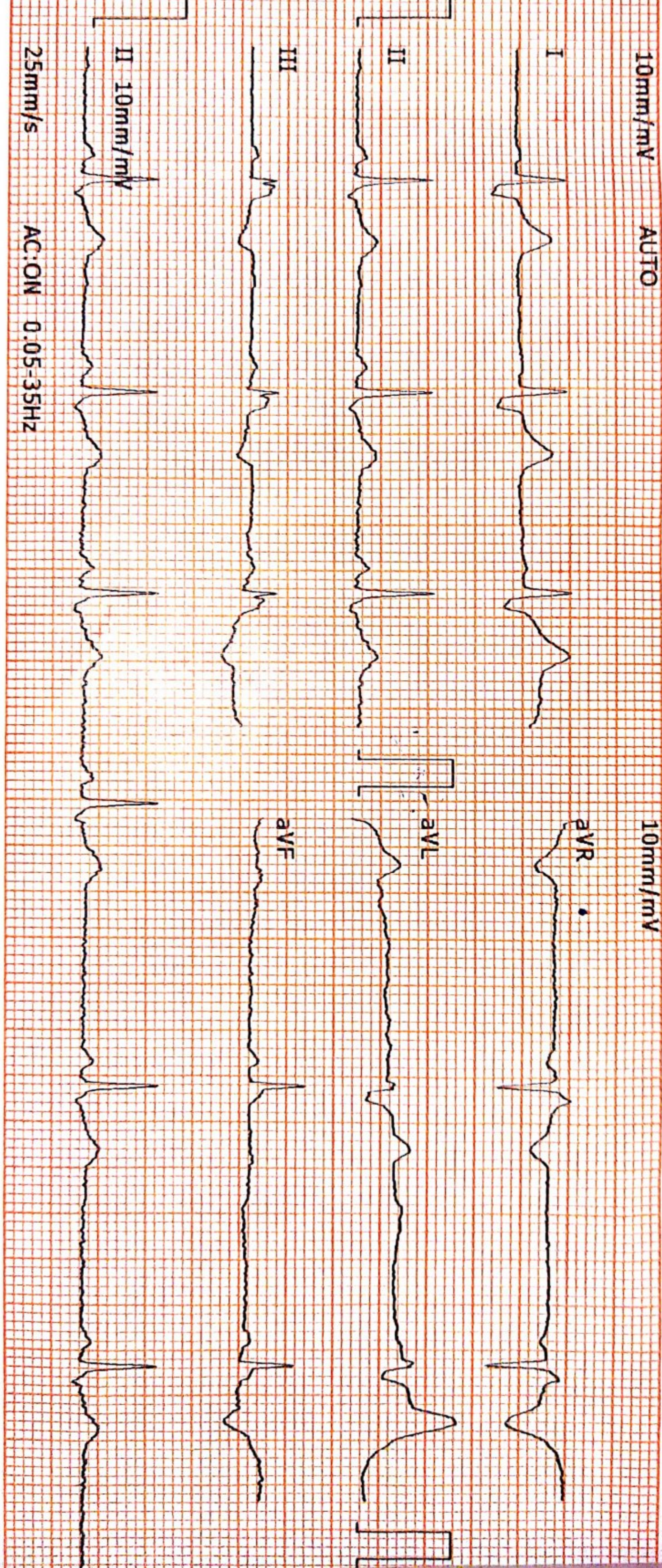
Dr. C. P. Dabur

*[Handwritten signature]*

DR. C. P. DABUR  
M.B. Diabetology  
Physician (C)  
Regd. No. 6  
Code No. 37

Panchmukhi Hospital  
Maid Chowk  
150 Ft. Ring Road, RAJKOT







2024-2-24 10:49:09 ID: 00003797

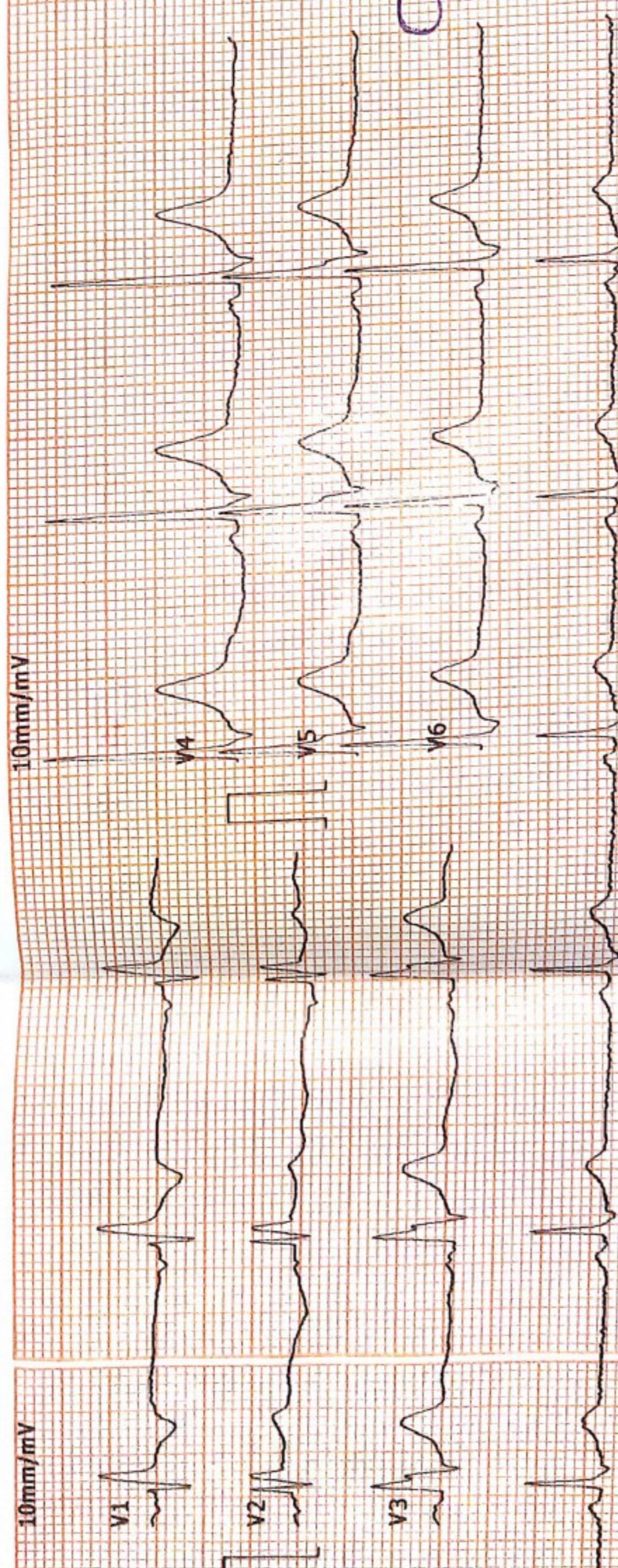
ID Card: Name: Mithraji Dhyot Gender: Male  
Age: 33 Height(cm):  
Weight(Kg): BP(mmHg): /

**DR. C. P. DADHANIYA**

HR..... 56  
P-R..... 106  
Q-R-S..... R: 19793 ms 123  
QT/QTc..... 378943 ms 430/413  
P/QRS/T/AXES/Axis/deg..... deg 65/64/46  
RV5/SV0..... mV 1.28/0.35  
RV5+SV0..... mV 1.63

\*The result must be confirmed by doctor!

Report Confirmed by:



X



## Tread Mill Test

Patient Name	:	Ilyas Mithani	Age	:	33yrs/M
Ref. By	:	Dr. C.P.Dadhaniya	Resting BP	:	130/80
Report Date	:	24/02/2024	Max. BP	:	160/80

Patient Reaches exercise limit at 7.00 METS.

Baseline ECG shows RBBB.

No signs of ischemia at the exercise level and during recovery.

Adequate increase of HR & BP.

No significant Arrhythmia.

The stress test was terminated after 6:00 minutes as patient complained of Fatigue.  
Patient achieved 90% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

**Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.**

**DR. MAULIK HANSALIA**  
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

**DR. NISHANT SIRODARIYA**  
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

**CURE CARDIOLOGY CLINIC**

2nd floor, Kansagra Hospital, Astron Chowk, Sardarnagar main road, RAJKOT - 360 001. Ph. 0281-2483799, M. 93 13 12 19 87





**CURE CARDIOLOGY CLINIC**

**ZND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.**

15412/ILYAS MITHANI

33 Yrs/Male

0 Kg/0 Cms

Date: 24-Feb-2024 12:12:29 PM

**Summary**

Protocol : BRUCE

History :

Ref. By :  
Medication :  
Objective :

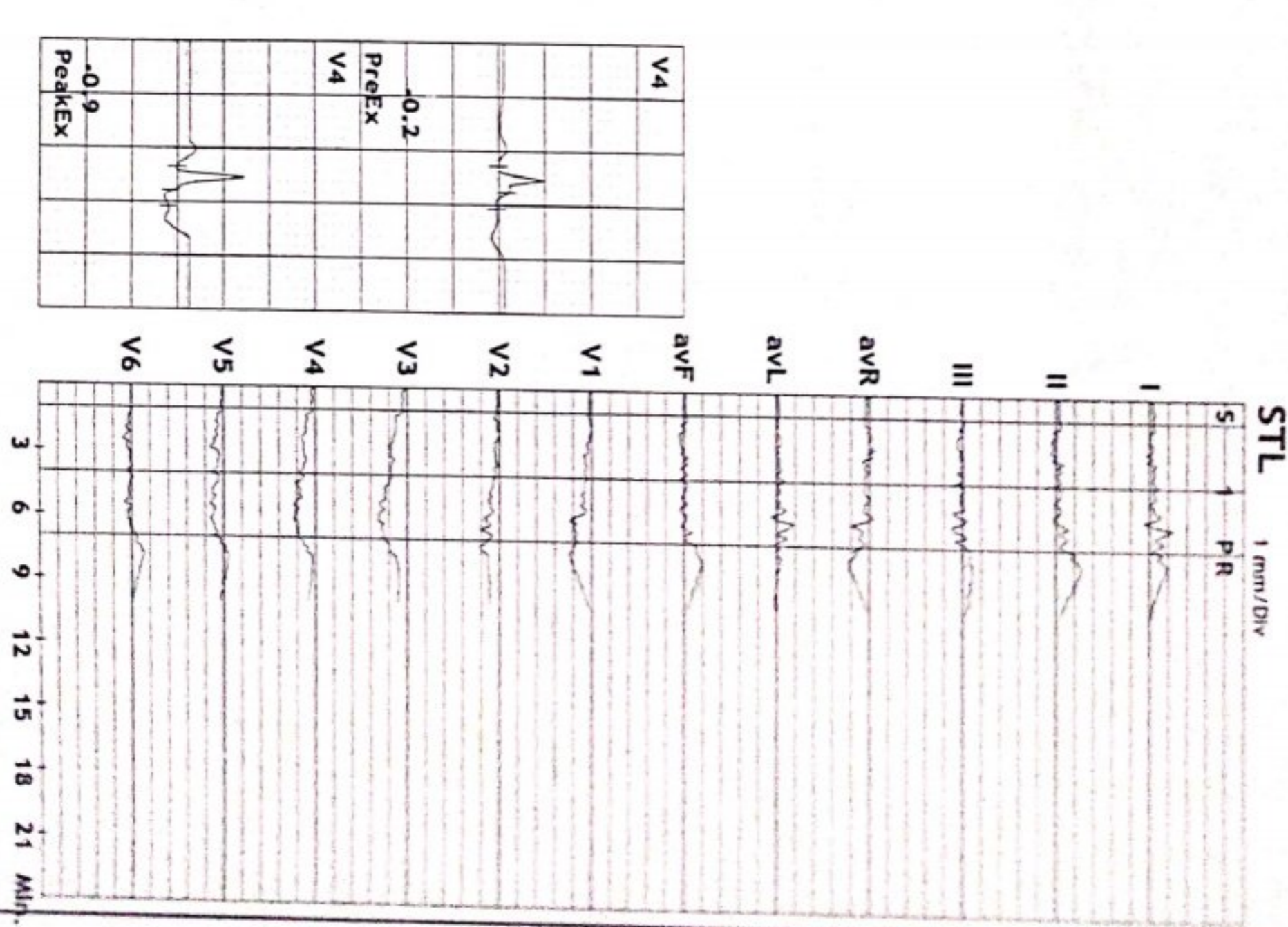
Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine	0:01	0:51	0.0	0.0	1.0	93	130/80	120	-	
Standing	0:01	0:55	0.0	0.0	1.0	86	130/80	111	-	
HV	0:01	0:59	0.0	0.0	1.0	86	130/80	111	-	
ExStart	0:01	1:02	0.0	0.0	1.0	89	130/80	115	-	
Stage 1	3:00	3:00	2.7	10.0	4.6	133	140/80	186	-	
PeakEx	3:00	5:59	4.0	12.0	7.0	168	160/80	268	-	
Recovery	1:00	6:01	0.0	0.0	1.0	128	160/80	204	-	
Recovery	2:00	6:01	0.0	0.0	1.0	118	150/80	176	-	
Recovery	3:00	6:01	0.0	0.0	1.0	112	140/80	156	-	

**Findings :**

Exercise Time : 6:00 minutes  
 Max HR attained : 168 bpm 90% of Max Predictable HR 187  
 Max BP : 160/80(mmHg)  
 Workload attained : 7 (Fair Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maximum Depression: 4:58  
 Test Complete

Advice/Comments:

*(Handwritten signature)*





**CURE CARDIOLOGY CLINIC**  
**2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.**  
 15412 / ILYAS MITHANI  
 33 Yrs / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 93 bpm  
 METS: 1.0  
 BP: 130/80

MPHR: 49% of 187  
 Speed: 0.0 kmph  
 Grade: 0.0%

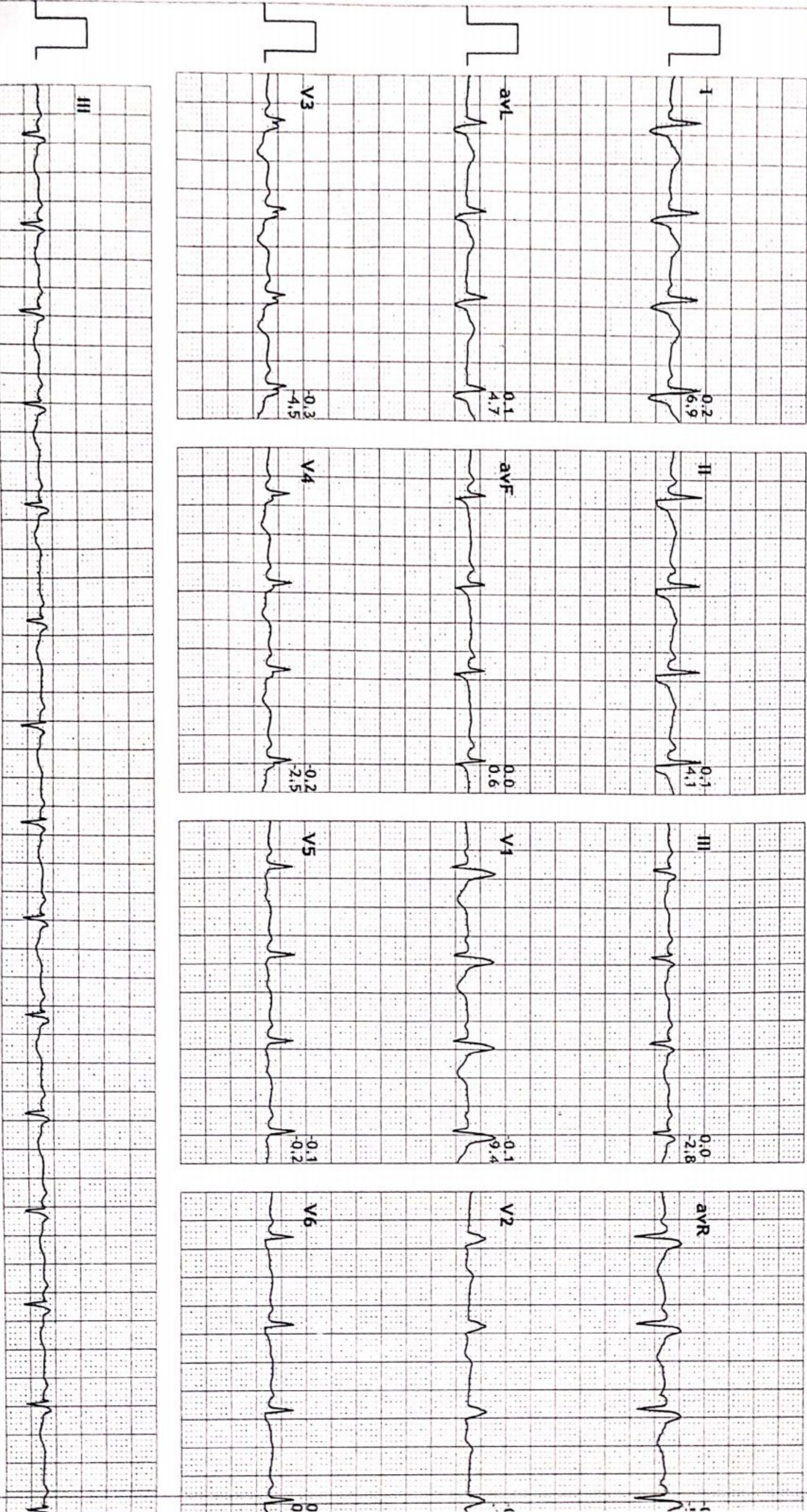
Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 00:50  
 BLC : On  
 Notch : On

Supine  
 10.0 mm/mV  
 25 mm/Sec.

3x4+1 Rhythm Lead

*(Signature)*





**CURE CARDIOLOGY CLINIC**  
**2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.**  
 15412 / ILYAS MITHANI  
 33 YRS / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 86 bpm  
 METS: 1.0  
 BP: 130/80

MPHR: 45% of 187  
 Speed: 0.0 kmph  
 Grade: 0.0%

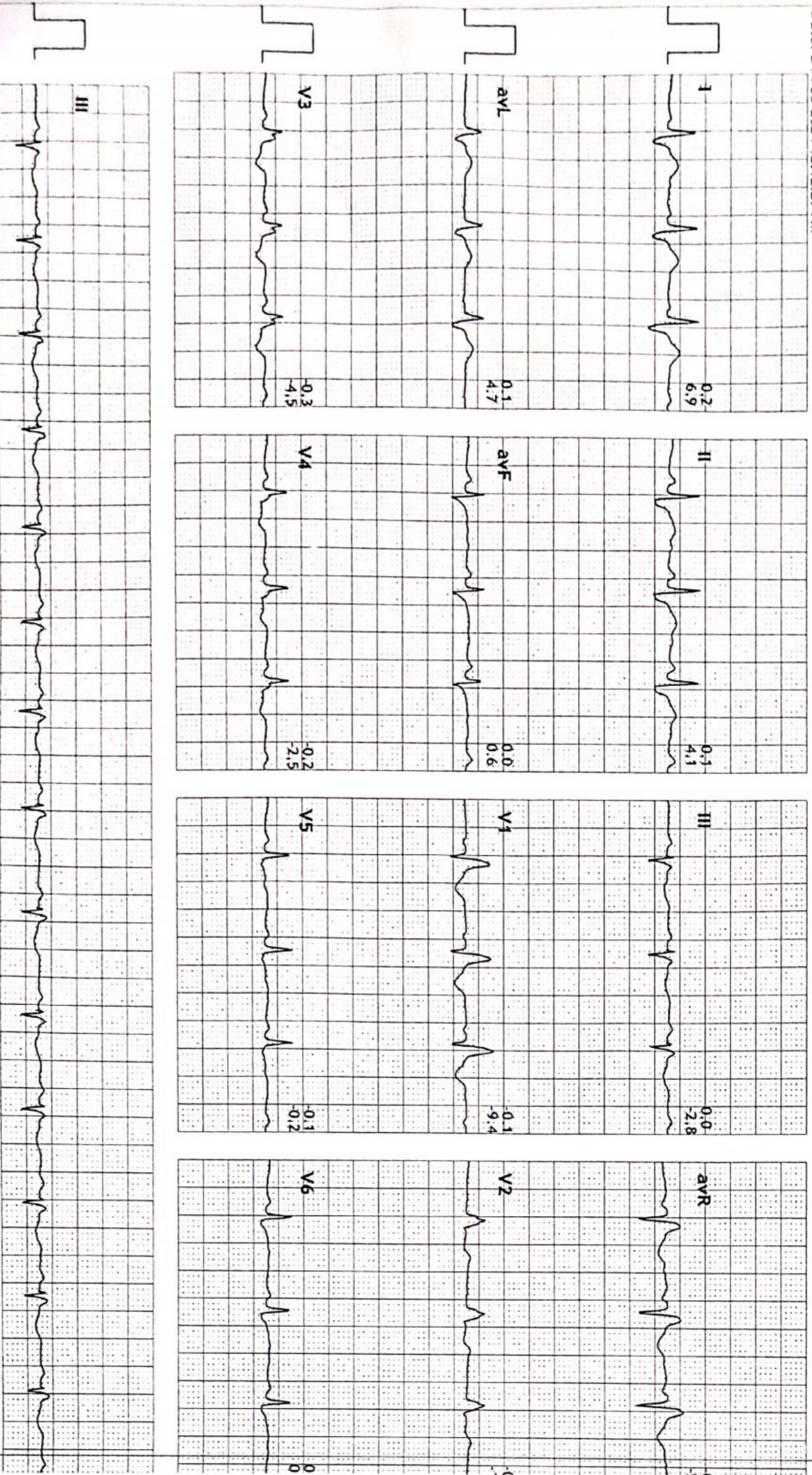
Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 00:54  
 BLC : On  
 Notch : On

Standing  
 10.0 mm/mV  
 25 mm/Sec.



3x4+1 Rhythm Lead





CURE CARDIOLOGY CLINIC  
2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
15412 / ILYAS MITHANI  
33 Yrs / Male  
0 Kg / 0 Cm  
Date: 24-Feb-2024 12:12:29 PM

HR: 86 bpm  
METs: 1.0  
BP: 130/80

MpHR: 45% of 187  
Speed: 0.0 kmph  
Grade: 0.0%

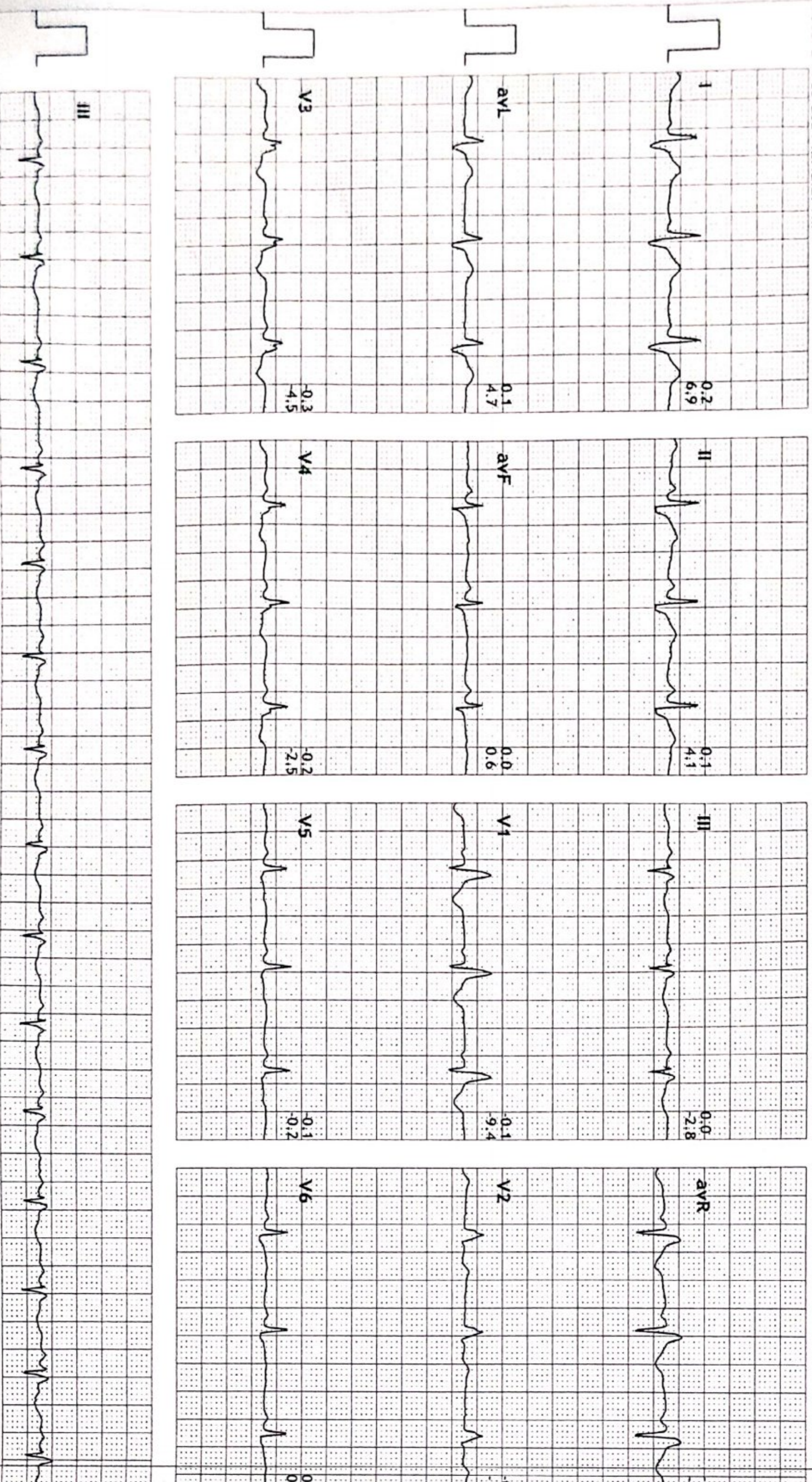
Raw ECG  
BRUCE  
(0.05-100)Hz

Ex Time 00:58  
BLC : On  
Notch : On

HV  
10.0 mm/mV  
25 mm/Sec.



3x4+1 Rhythm Lead





**CURE CARDIOLOGY CLINIC**  
**2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.**  
 15412 / ILYAS MITHANI  
 33 Yrs / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 89 bpm  
 METS: 1.0  
 BP: 130/80

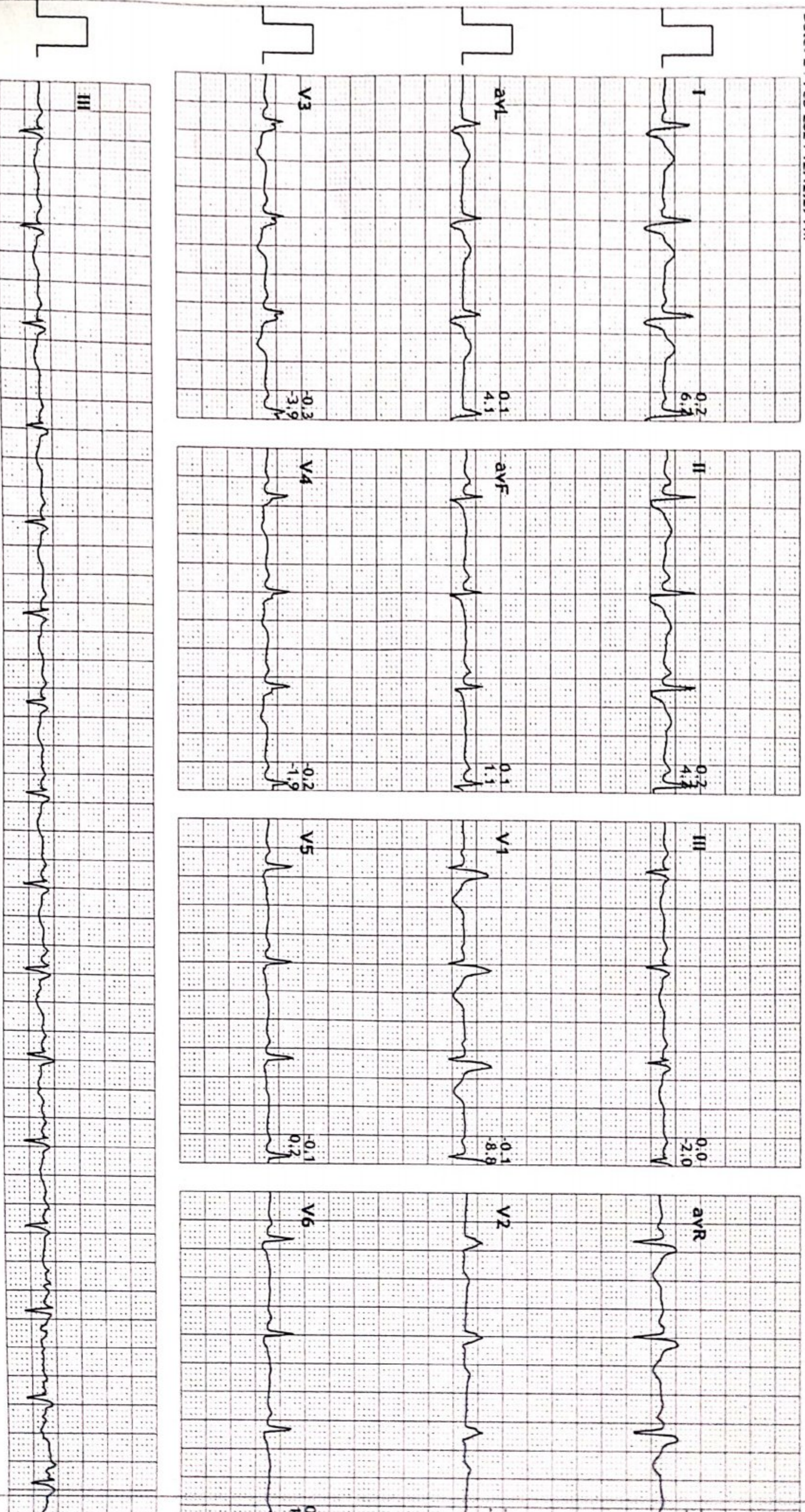
MPHR: 47% of 187  
 Speed: 0.0 kmph  
 Grade: 0.0%

Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 01:01  
 BLC: On  
 Notch: On

ExStart  
 10.0 mm/mV  
 25 mm/Sec.

**3x4+1 Rhythm Lead**





CURE CARDIOLOGY CLINIC  
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
 15412 / ILYAS MITHANI  
 33 Yrs / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 133 bpm  
 METS: 4.6  
 BP: 140/80

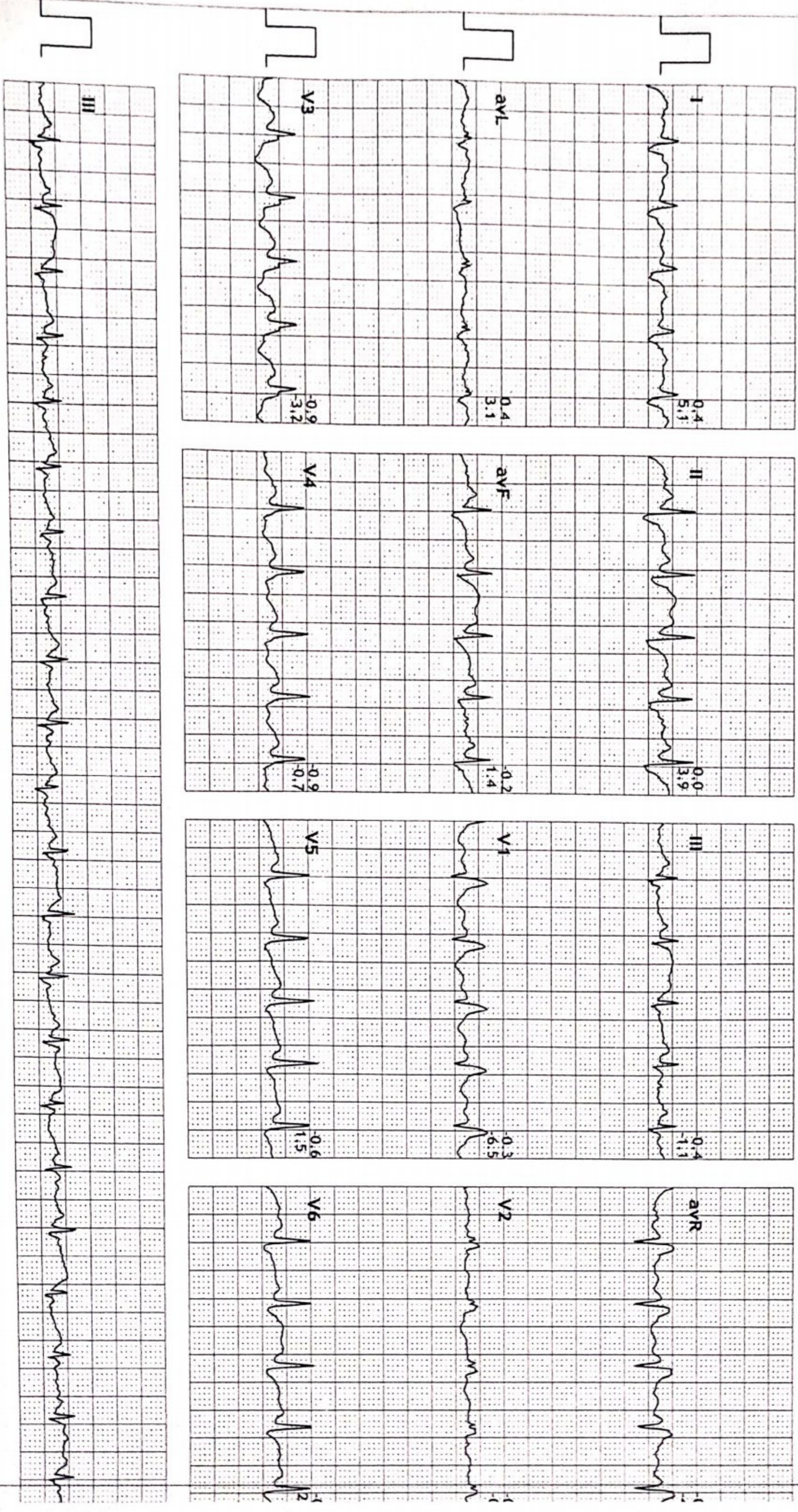
MPHR: 71% of 187  
 Speed: 2.7 kmph  
 Grade: 10.0%

Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 02:59  
 BLC: On  
 Notch: On

BRUCE: Stage 1  
 10.0 mm/mV  
 25 mm/Sec.

3x4+1 Rhythm Lead





CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

15412 / ILYAS MITTHANI

33 Yrs / Male

0 Kg / 0 Cm

Date: 24-Feb-2024 12:12:29 PM

HR: 168 bpm  
METS: 7.0  
BP: 160/80

MPHR: 89% of 187  
Speed: 4.0 kmph  
Grade: 12.0%

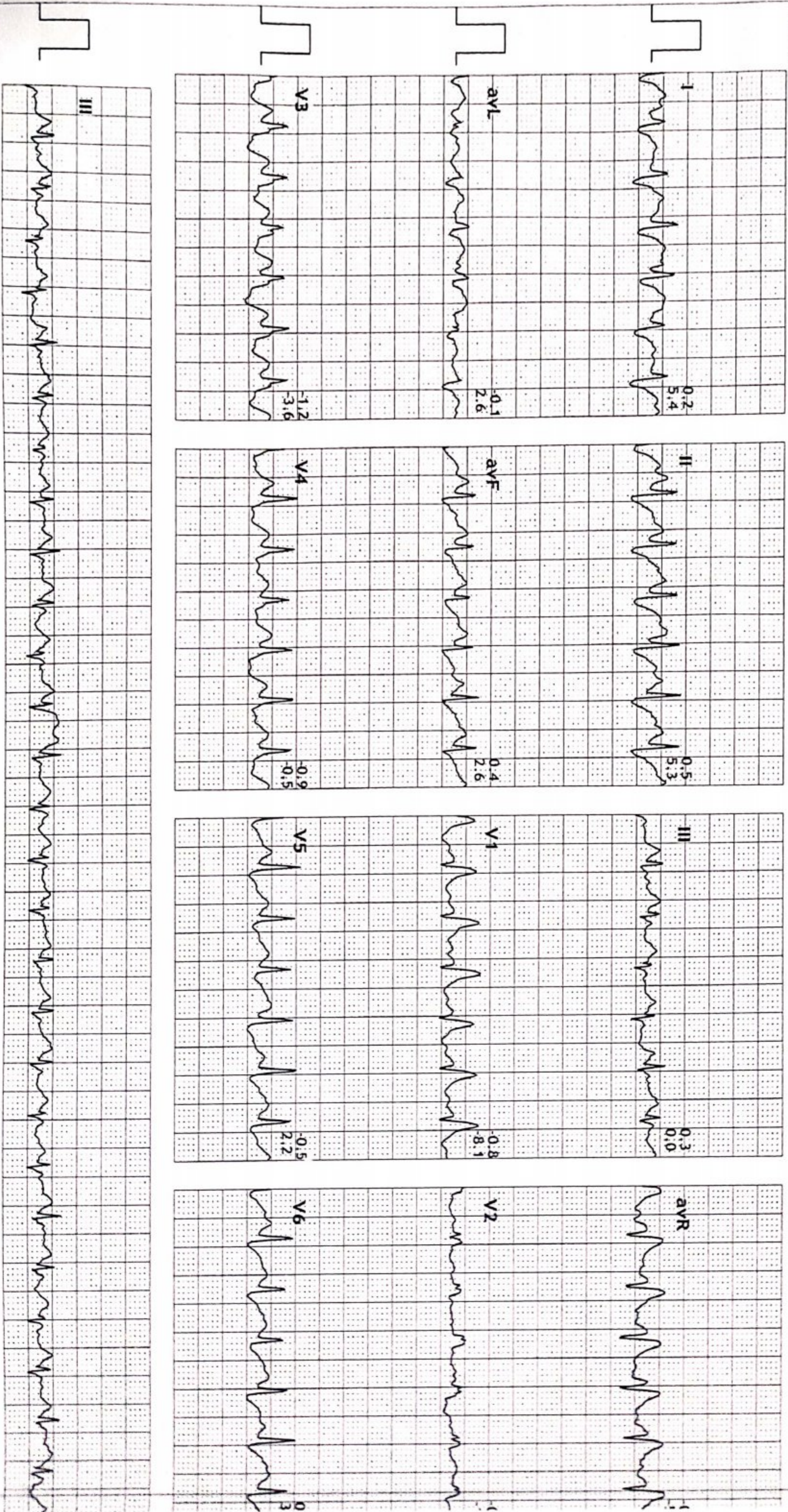
Raw ECG  
BRUCE  
(0.05-100)Hz

Ex Time 05:58  
BLC : On  
Notch : On

BRUCE: PeakEx  
10.0 mm/mV  
25 mm/Sec.



3x4+1 Rhythm Lead





CURE CARDIOLOGY CLINIC  
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
 15412 / ILYAS MITHANI  
 33 Yrs / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 128 bpm  
 METS: 1.0  
 BP: 160/80

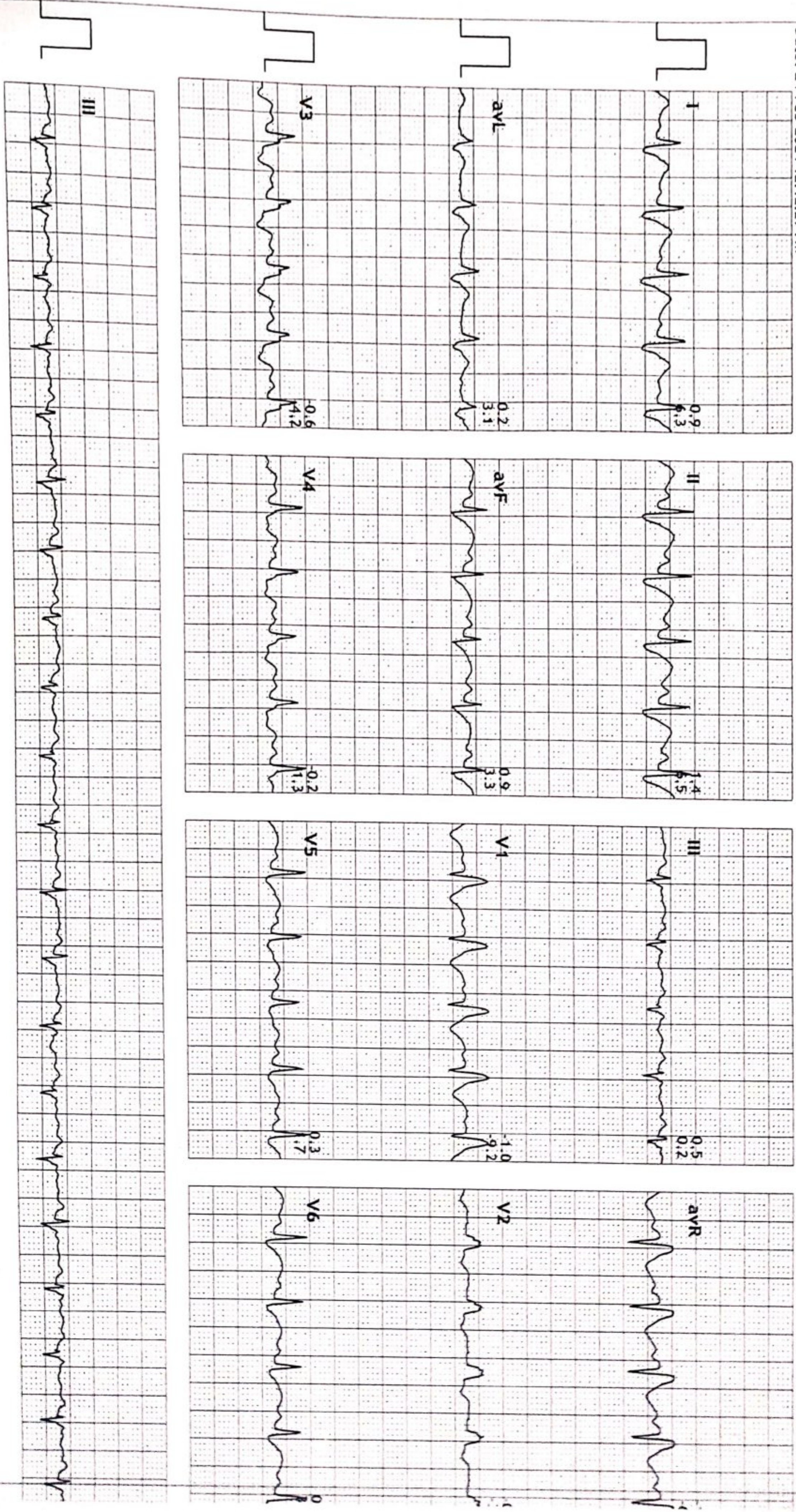
MPHR: 68% of 187  
 Speed: 0.0 kmph  
 Grade: 0.0%

Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 06:00  
 BLC: On  
 Notch: On

Recovery(1:00)  
 10.0 mm/mV  
 25 mm/Sec.

3x4+1 Rhythm Lead





CURE CARDIOLOGY CLINIC  
 2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
 15412 / ILYAS MITHANI  
 33 Yrs / Male  
 0 Kg / 0 Cm  
 Date: 24-Feb-2024 12:12:29 PM

HR: 118 bpm  
 METS: 1.0  
 BP: 150/80

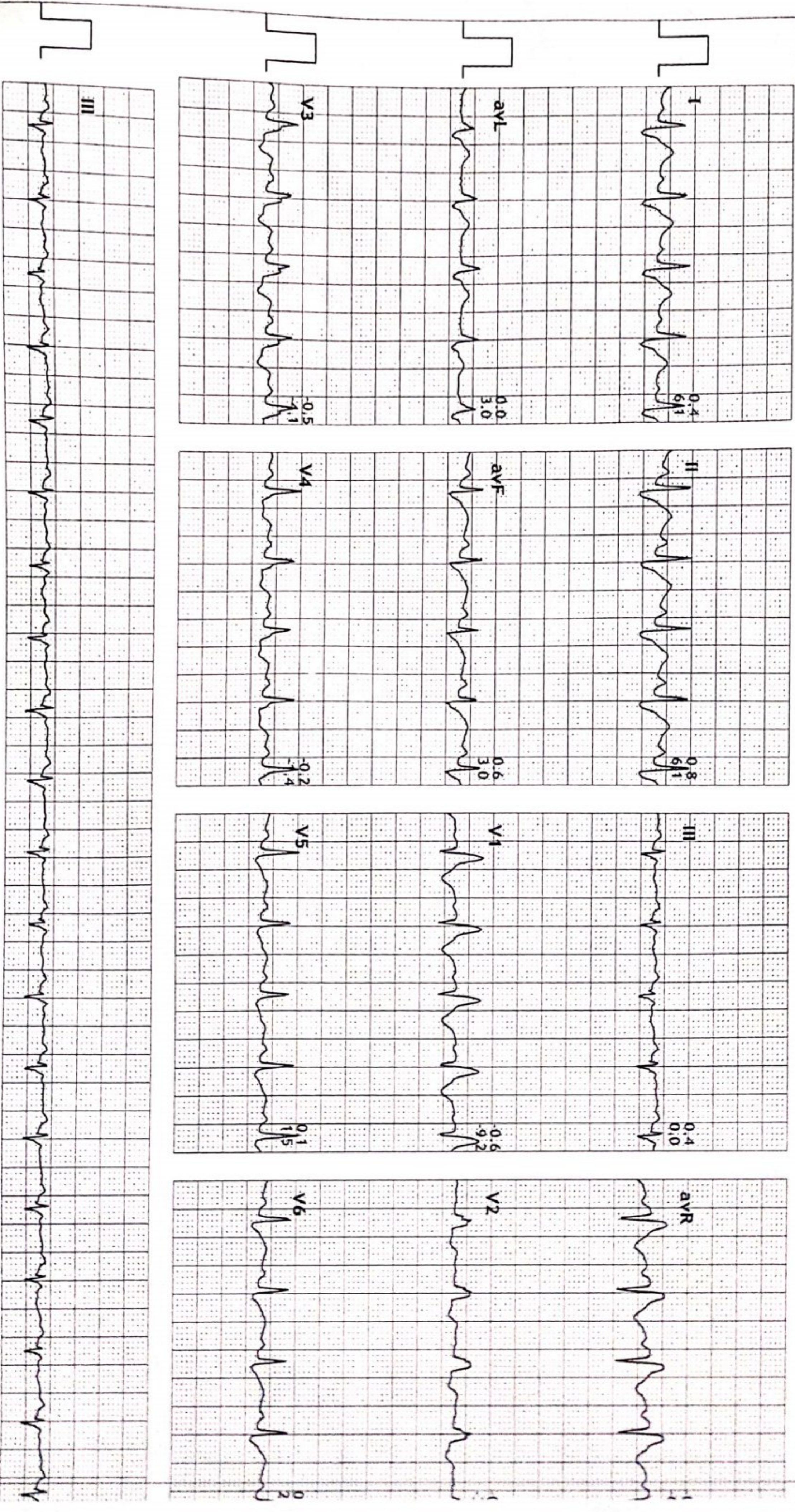
MPHR: 63% of 187  
 Speed: 0.0 kmph  
 Grade: 0.0%

3x4+1 Rhythm Lead

Raw ECG  
 BRUCE  
 (0.05-100)Hz

Ex Time 06:00  
 BLC : On  
 Notch : On

Recovery(2:00)  
 10.0 mm/mV  
 25 mm/Sec.





CURE CARDIOLOGY CLINIC

2ND FLOOR KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.

15412 / ILYAS MITHANI

33 Yrs / Male

0 Kg / 0 Cm

Date: 24-Feb-2024 12:12:29 PM

MPHR: 59% of 187

Speed: 0.0 kmph

Grade: 0.0%

Raw ECG

BRUCE

(0.05-100)Hz

Ex Time 06:00

BLC :On

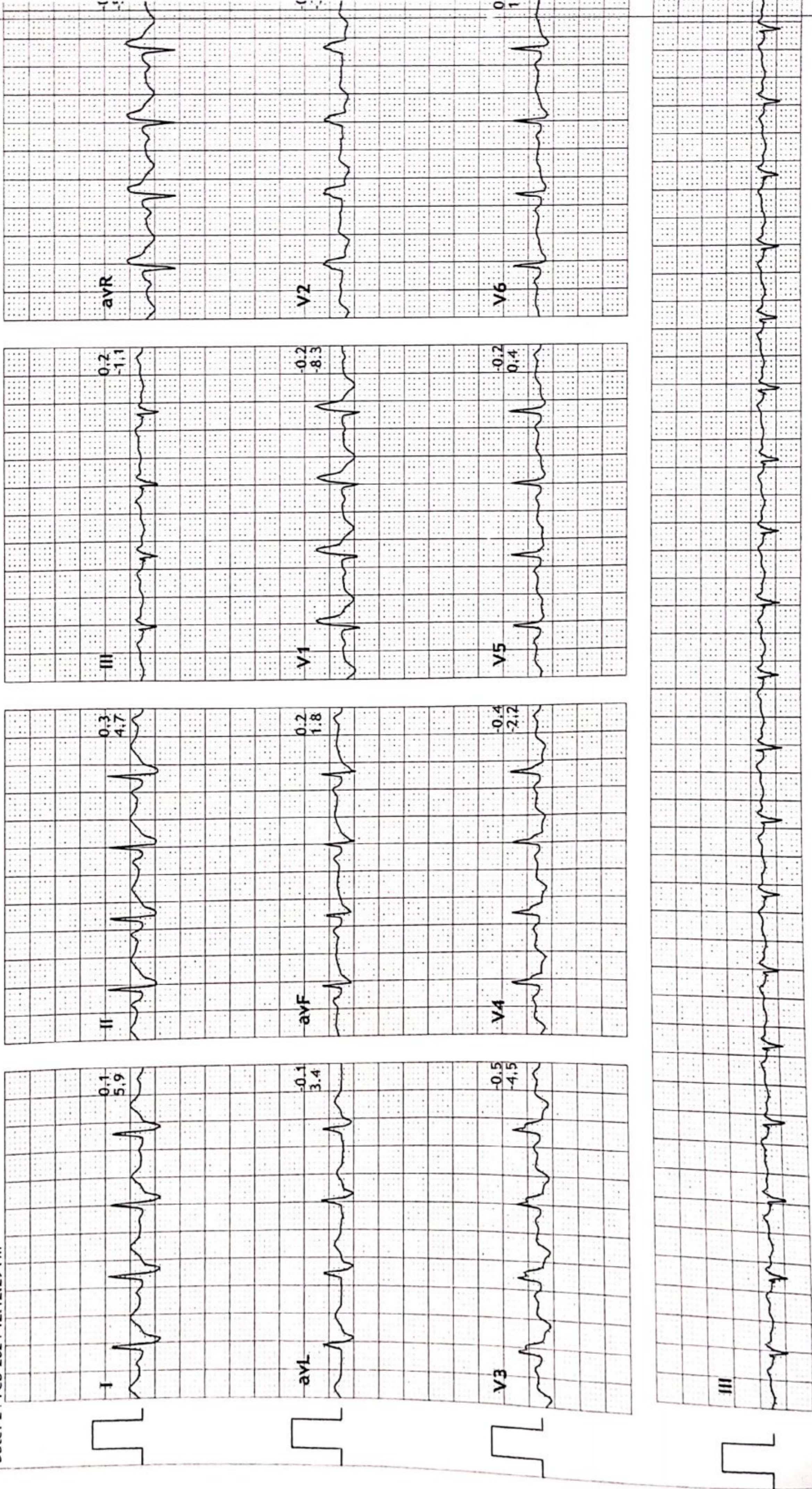
Notch :On

Recovery(3:00)

10.0 mm/mV

25 mm/Sec.

3x4+1 Rhythm Lead









Issue Date: 28/09/2012



भारत सरकार

Government of India



मीनाली ईल्य़ास अब्दुलभाई

Mithani Ilyas Abdulbhai

જન્મ તારીખ / DOB : 20/07/1990

પુરુષ / Male

7382 8227 2697



મેરા આધાર, મેરી પહચાન





भारतीय विशिष्ट पहचान प्राधिकरण

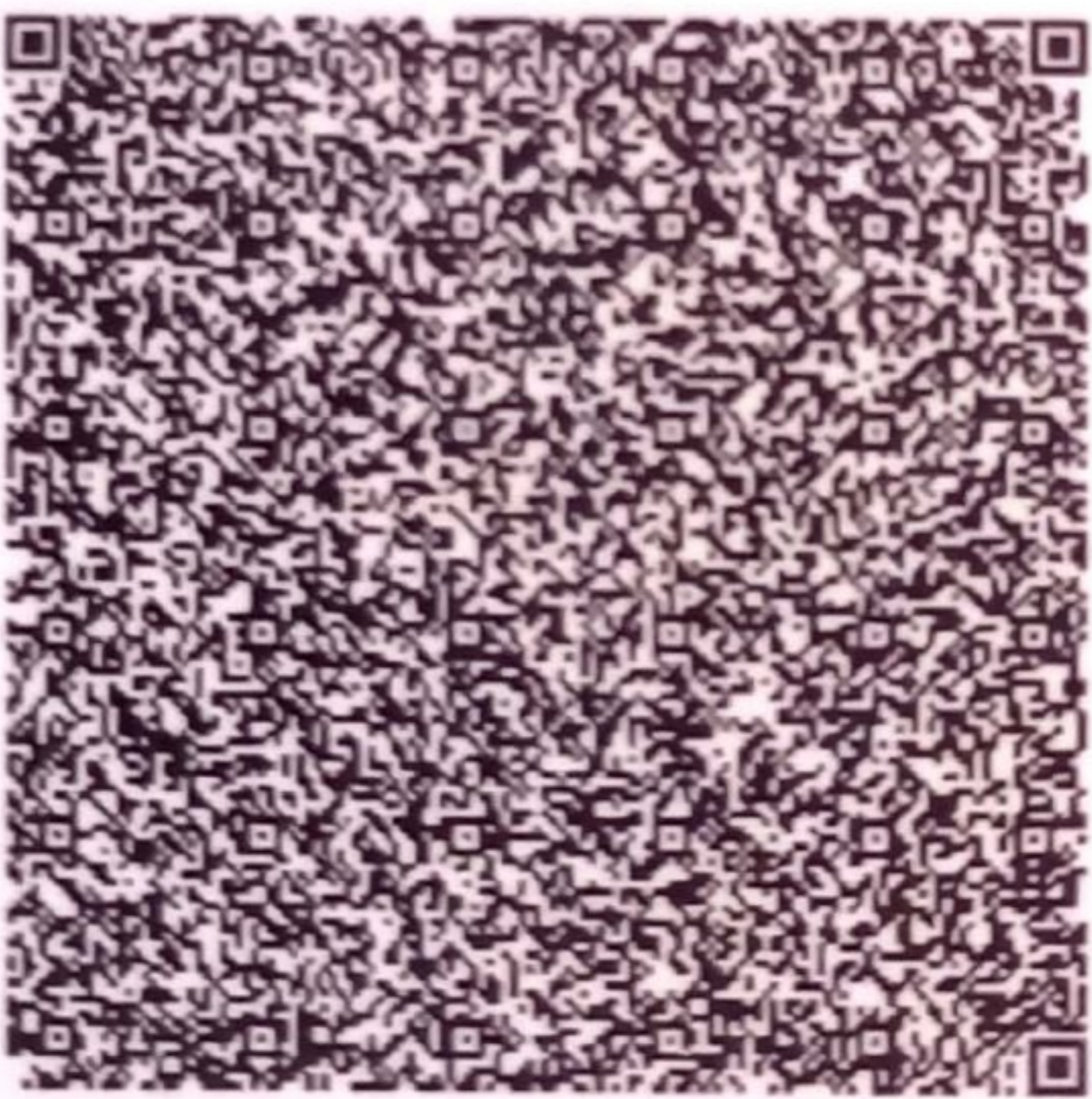
Unique Identification Authority of India



Print Date: 08/01/2023

सरनामं : S/O: मीकान्नी अळ्फ्दल्लाह  
आदमल्लाह, भादिकायालय, मस्जिद पास,े,  
भादिकायालय, सवार कुंदला, अमरेली, गुजरात,  
364515

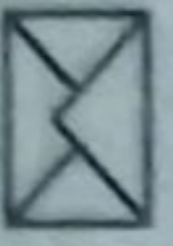
Address: S/O: Mithani Abdulbhai Adambhai,  
Khadikaryalay, masjid pase, khadikaryalay,  
Savar Kundla, Amreli, Gujarat, 364515



7382 8227 2697



1947



help@uidai.gov.in



www.uidai.gov.in



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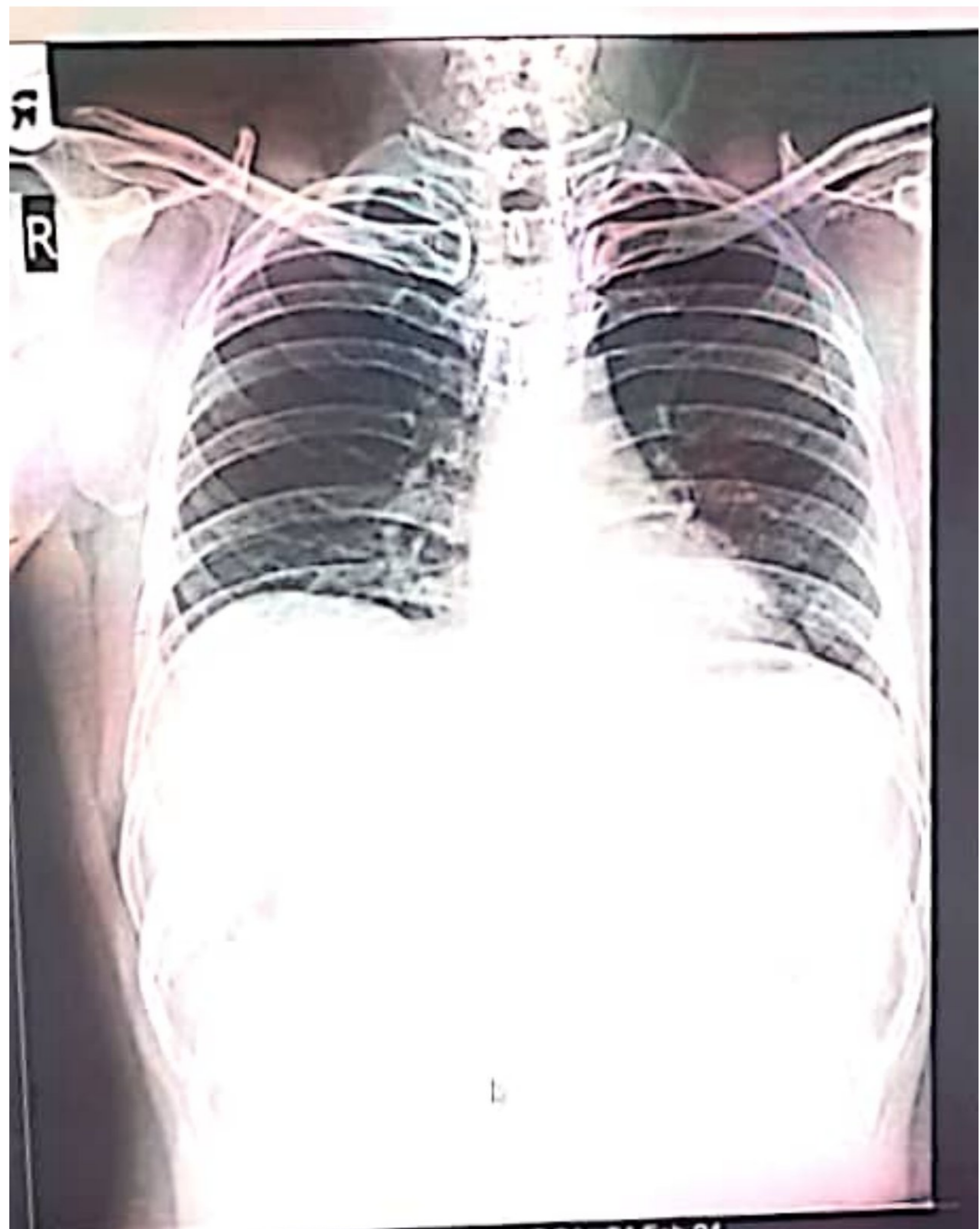
medi wheel mithani Ilyas

GPS Map  
Camera Lite

7Q7M+XR9, Poonam Society, Chandreshnagar, Rajkot, Gujarat  
360004, India

Latitude 22.2650387° Longitude 70.7846792°  
Local 10:55:17 AM Altitude 145 meters  
GMT 05:25:17 AM Saturday, 24.02.2024





mithani Ilyas/M CHEST PA 24-Feb-24  
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)



Pt.'s Name: MITHANI ILYAS

Date: 24 February, 2024

**Radiograph of chest (PA view)**

- Both the lung fields are clear.
- No e/o consolidation, cavitations or collapse.
- Both the hila appears normal
- Both costophrenic angles appear clear.
- Both domes of diaphragm appear normal.
- Cardiac size is within normal limit.
- Bones underview reveals no evident abnormality.

Thanks for reference.

  
DR PRATIK KAGATH

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

**32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVEN**



Pat.s' Name: MITHANI ILYAS

DATE: 24 February 2024

### U.S.G. OF ABDOMEN AND PELVIS

- **LIVER:** is normal size and shows normal parenchymal echotexture. No focal lesion noted. Intrahepatic billiary radicals appear normal. C.B.D and portal vein appears normal in calibre.
- **GALL BLADDER:** Well distended and appears normal. No evidence of gallstone or changes of cholecystitis.
- **PANCREAS:** appears normal in size, shape, echogenicity and echotexture. No focal lesion noted. No e/o peripancreatic fluid collection.
- **SPLEEN:** normal in size, shape, echogenicity and echotexture. No focal lesion noted.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No e/o calculi or hydronephrosis on either side.
- **URINARY BLADDER:** Well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **PROSTATE:** is normal in size, shape and echogenicity. No focal lesion.
- Visualised bowel loops show no evident abnormality. No e/o lymphadenopathy. RIF/ LIF CLEAR. Bilateral C-P angels clear.

### CONCLUSION:

- No significant abnormality seen in present study.

Thanks for reference.



DR PRATIK KAGATHARA  
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

**32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS**





TEST REPORT

<b>Name</b> : Mithani Ilayas	<b>Reg. No</b> : 402101121
<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 24-Feb-2024 03:14 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 24-Feb-2024 06:01 PM

**COMPLETE BLOOD COUNT (CBC)**  
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval
<b>RBC Parameters</b>			
Hemoglobin (SLS method)	14.4	g/dL	13.0 - 18.0
Hematocrit (Electrical Impedance)	<b>41.10</b>	%	47 - 52
RBC Count (Electrical Impedance)	5.54	million/cmm	4.7 - 6.0
MCV (Calculated)	<b>74.2</b>	fL	78 - 110
MCH (Calculated)	<b>26.0</b>	Pg	27 - 31
MCHC (Calculated)	35.0	%	30 - 35
RDW (Calculated)	12.1	%	11.5 - 14.0
<b>WBC Parameters</b>			
WBC Count (Flowcytometry)	7460	/cmm	4000 - 10500
<b>DIFFERENTIAL WBC COUNT</b>			
Neutrophils (%)	58 %	% Range 42.0 - 75.2	Abs. Value 4327 /cmm Abs. Range 1800 - 7700
Lymphocytes (%)	36 %	20 - 45	2686 /cmm 1000 - 3900
Eosinophils (%)	01 %	1 - 4	75 /cmm 0 - 450
Monocytes (%)	05 %	2 - 8	373 /cmm 200 - 1000
Basophils (%)	00 %	0 - 1	0 /cmm 20 - 100
<b>Platelete Parameter</b>			
Platelet Count	348000	/cmm	150000 - 450000
MPV	9.7	fL	7.4 - 10.4
P-LCR	23.00	%	11.9 - 66.9
PDW	11.2	%	8.3 - 56.6
PCT (Platelet Haematocrit)	0.34	%	0.2 - 0.5

*DRJ*

This is an Electronically Authenticated Report.

Page 1 of 14

Dr. Viral Jethava

Dr. Viral R. Jethava

M.D. (Path, PDCC)



towards the healthiness...





TEST REPORT

<b>Name</b> : Mithani Ilayas	<b>Reg. No</b> : 402101121
<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 24-Feb-2024 03:14 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 24-Feb-2024 06:01 PM

**BLOOD GROUP & RH**

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	"O"		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

*towards the healthiness...*

*D.R.J.*

This is an Electronically Authenticated Report.

Dr. Viral Jethava

Dr. Viral R. Jethava  
M.D. (Path, PDCC)







TEST REPORT

<b>Name</b> : Mithani Ilayas	<b>Reg. No</b> : 402101121
<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 24-Feb-2024 03:14 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 24-Feb-2024 06:01 PM

Test	Result	Unit	Biological Ref. Interval
<b>Erythrocyte sedimentation rate</b> Sample, EDTA whole blood			
ESR (After 1 hour)	6	mm/hr	1 - 7

*D.R.J.*

Dr. Viral Jethava

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Page 3 of 14

Dr. Viral R. Jethava

M.D. (Path, PDCC)

towards the healthiness...







TEST REPORT

<b>Name</b> : Mithani Ilayas	<b>Reg. No</b> : 402101121
<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 24-Feb-2024 03:14 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 24-Feb-2024 06:01 PM

FASTING PLASMA GLUCOSE  
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <small>HEXOKINASE</small>	92.00	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic

Criteria for the diagnosis of diabetes :

- HbA1c  $\geq$  6.5 \*Or
- Fasting plasma glucose  $>126$  gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose  $\geq$  200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose  $\geq$  200 mg/dL.

\*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.  
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

towards the healthiness...

*D.R.J.*

This is an Electronically Authenticated Report.

Dr. Viral Jethava

Dr. Viral R. Jethava  
M.D. (Path, PDCC)







TEST REPORT

<b>Name</b> : Mithani Ilayas	<b>Reg. No</b> : 402101121
<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 24-Feb-2024 03:14 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 24-Feb-2024 06:01 PM

POST PRANDIAL PLASMA GLUCOSE  
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) <small>HEXOKINASE</small>	121.00	mg/dL	70 - 140

Criteria for the diagnosis of diabetes :

- HbA1c  $\geq$  6.5 \*Or
- Fasting plasma glucose  $>126$  gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose  $\geq$  200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose  $\geq$  200 mg/dL.

\*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.  
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

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TEST REPORT

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<b>Age/Sex</b> : 33 Years / Male	<b>Reg. Date</b> : 24-Feb-2024 03:14 PM
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LIPID PROFILE  
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <i>Cholesterol Oxidase</i>	194.00	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>Enzymatic Reaction With Glycerol Kinase</i>	138.00	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <i>Siemens AHDL</i>	41.00	mg/dL	High Risk : < 40 Low Risk : >= 60
LDL Cholesterol <i>Siemens ALDL</i>	91.00	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol <i>Calculated</i>	27.60	mg/dL	15 - 35
LDL / HDL RATIO <i>Calculated</i>	2.22		0 - 3.5
Cholesterol /HDL Ratio <i>Calculated</i>	4.73		0 - 5.0

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RENAL FUNCTION TEST

Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Creatinine</b> <i>ALKALINE PICRATE, COLORIMETRIC KINETIC</i>	0.84	mg/dL	0.7 - 1.3
<b>eGFR</b>	95.37	ml/min/1.73 sq m	Normal or High: $\geq 90$ Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: $< 15$
<b>Urea</b> <i>Calculated</i>	23.00	mg/dL	17 - 43
<b>Blood Urea Nitrogen (BUN)</b> <i>UREASE/GLDH</i>	10.74	mg/dL	7.0 - 18.0
<b>Uric Acid</b> <i>Uricase</i>	6.10	mg/dL	3.5 - 7.2
<b>Sodium</b> <i>Direct ion selective electrode</i>	142.5	mmol/L	137 - 145
<b>Potassium</b> <i>Direct ion selective electrode</i>	4.80	mmol/L	3.5 - 5.1
<b>Chloride</b> <i>Direct ion selective electrode</i>	101.0	mmol/L	98 - 107
<b>Calcium</b> <i>Cresolphthalein Complexone</i>	9.10	mg/dL	8.5 - 10.1

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Parameter	Result	Unit	Biological Ref. Interval
<b>GGT</b> <small>Siemens/37C</small>	71.00	U/L	15 - 85

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HEMOGLOBIN A1 C (HBA1C)  
Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HbA1C <i>Siemens Dimension</i>	5.20	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 %  Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <i>Calculated</i>	102.54	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

**Explanation :**

- Total hemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

**HbA1c assay Interferences :**

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
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<b>Thyroid Stimulating Hormone (TSH)</b> <small>CLIA</small>	3.540	µIU/ml	0.35 - 5.50
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Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012:2170

<b>Triiodothyronine (T3)</b> <small>CLIA</small>	1.28	ng/mL	0.6 - 1.81
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Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

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**Thyroxine (T4)** 8.90 µg/dL 4.5 - 12.6  
*CLIA*

**Clinical Significance :**

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

**Limitations:**

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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**STOOL EXAMINATION**

Parameter	Result	Unit	Biological Ref. Interval
Colour	Brown		
Consistency	Solid		
<b>CHEMICAL EXAMINATION</b>			
Occult Blood <i>Peroxidase Reaction with o-Dianisidine</i>	Negative		
Reaction <i>pH Strip Method</i>	Alkaline		
Reducing Substance	Absent		
<b>MICROSCOPIC EXAMINATION</b>			
Mucus	Absent		
Pus Cells	Absent		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

**Note:** Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.  
**False negative:** False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occassinal unruptured RBCs.  
**False positive:** False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

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**URINE ROUTINE EXAMINATION**

Parameter	Result	Unit	Biological Ref. Interval
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**PHYSICAL EXAMINATION**

Quantity	20 cc		
Colour	Pale Yellow		
Clarity	Clear		

**CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)**

pH	5.5		4.6 - 8.0
Sp. Gravity	1.025		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

**MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)**

Leucocytes (Pus Cells)	1 - 3/hpf
Erythrocytes (Red Cells)	Absent
Epithelial Cells	Absent
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

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**LIVER FUNCTION TEST**

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <i>BIURET</i>	8.10	g/dL	6.4 - 8.2
Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i>	4.50	g/dL	3.40 - 5.00
Globulin <i>Calculated</i>	<b>3.60</b>	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.25		0.8 - 3.1
SGOT (AST) <i>Siemens/37C</i>	25.00	U/L	15 - 37
SGPT (ALT) <i>Siemens/37C</i>	46.00	U/L	16 - 63
Alakaline Phosphatase <i>Siemens/37C</i>	104.00	U/L	46 - 116
Total Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.58	mg/dL	0.2 - 1
Conjugated Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.14	mg/dL	0 - 0.20
Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.44	mg/dL	0.0 - 1.1

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