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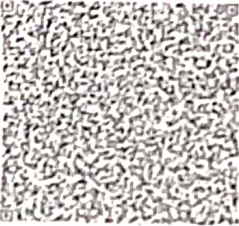


भारत सरकार
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राष्ट्रीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नमांकन क्रम/ Enrolment No.: 0000/00273/91481

To
शिवानंद प्रसाद
Shivandan Prasad
SO LATE HARI LAL
CHHOTI PAHARI
KIDZEE SCHOOL ROAD
DOCTOR COLONY
Gulzarbagh
Patna Bihar - 800007
9595377480



आपका आधार क्रमांक / Your Aadhaar No. :

8829 1299 6635
VID : 9109 7019 3332 2882

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



शिवानंद प्रसाद
Shivandan Prasad
जन्म तिथि/DOB: 01/03/1977
लिंग/ GENDER: MALE

01/03/1977

Shivandan Prasad

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मेरा आधार, मेरी पहचान



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन पहचान प्रमाणित करे।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

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- आधार कई सरकारी और गैर सरकारी सेवाओं को बना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
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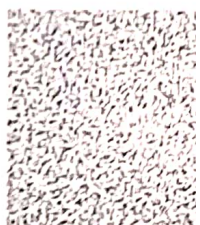
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पता:
शिवानंद प्रसाद प्रसाद, छोट्टी पहाड़ी, किड्डी स्कूल रोड,
डॉक्टर कॉलोनी, गुलजारबाग, पटना,
बिहार - 800007

Address:
SO LATE HARI LAL CHHOTI PAHARI KIDZEE
SCHOOL ROAD, DOCTOR COLONY,
Gulzarbagh, Patna,
Bihar - 800007



8829 1299 6635

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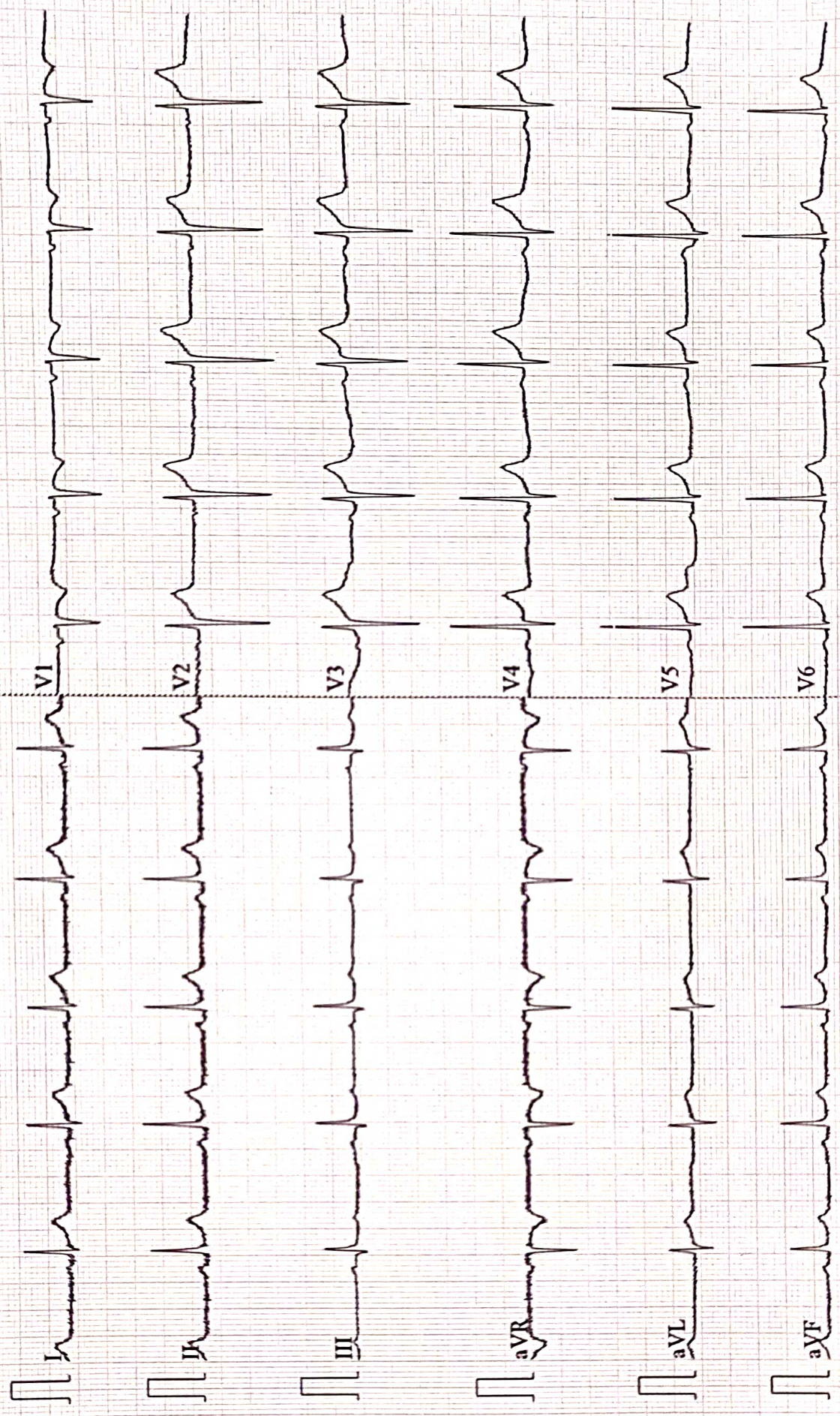
27-03-2024 10:32:34 AM

SHIVNANDAN PRASAD
Male 47Years

Diagnosis Information:
Sinus Rhythm
Largd PtfV1

HR : 63 bpm
P : 93 ms
PR : 155 ms
QRS : 73 ms
QT/QTc : 347/356 ms
P/QRS/T : 60/54/38 °
RV5/SV1 : 1.433/0.793 mV

Ref-Phys. :
Report Confirmed by:



Patient Name	SHIVNANDAN PRASAD	Date	27-03-2024
Age/Sex	47/M	Ref. Dr.	CORPORATE

CHEST X-ray(PA)

FINDINGS:

Normal bronchovascular markings in bilateral lung fields

Bilateral hila are normal.

Trachea appears normal.

Visualized bones are grossly normal.

Cardiac shadow is within normal limits

Bilateral costophrenic angles are clear.

Impression :

- *No significant abnormality detected.*



Dr. Sandip Maheshwari

MD Radio diagnosis



Name :- Shiv Nandan Prasad
Refd by :- Corp.

Age/Sex:-47Yrs/M
Date :-27/03/24

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size (13.5cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (9.1cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.9cm and Left Kidney measures 10.2cm.
- Ureters** :- Ureters are normal.
- U. Bladder** :- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (11.4cc) and echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Normal Scan.*

Dr. Arjun Kumar
MBBS, DMRD (Radio-Diagnosis)
Consultant Radiologist



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 9264278360, 9065875700, 8789391403
 info@aarogyamdiagnostics.com
 www.aarogyamdiagnostics.com

Date	27/03/2024	Srl No.	12	Patient Id	2403270012
Name	Mr. SHIVNANDAN PRASAD	Age	47 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.2	%	

EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Date	27/03/2024	Srl No. 12	Patient Id 2403270012
Name	Mr. SHIVNANDAN PRASAD	Age 47 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	14.2	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,700	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	66	%	40 - 75
LYMPHOCYTE	30	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	03	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	12	mm/1st hr.	0 - 15
R B C COUNT	4.72	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	42.6	%	40 - 54
M C V	90.25	fl.	80 - 100
M C H	30.08	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.38	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"A"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	75.6	mg/dl	70 - 110
SERUM CREATININE	0.86	mg%	0.7 - 1.4
BLOOD UREA	19.2	mg /dl	15.0 - 45.0
SERUM URIC ACID	3.8	mg%	3.4 - 7.0

LIVER FUNCTION TEST (LFT)



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Name	Mr. SHIVNANDAN PRASAD	Age	47 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.69	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.28	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.41	mg/dl	0.00 - 0.70
TOTAL PROTEIN	7.8	gm/dl	6.6 - 8.3
ALBUMIN	4.4	gm/dl	3.4 - 5.2
GLOBULIN	3.4	gm/dl	2.3 - 3.5
A/G RATIO	1.294		
SGOT	18.5	IU/L	5 - 40
SGPT	30.4	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	52.9	U/L	40.0 - 130.0
GAMMA GT	23.4	IU/L	8.0 - 71.0

LFT INTERPRET

LIPID PROFILE

TRIGLYCERIDES	89.6	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	205.1	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	57.3	mg/dL	35.1 - 88.0
V L D L	17.92	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	129.88	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.579		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.267		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



Date	27/03/2024	Srl No. 12	Patient Id 2403270012
Name	Mr. SHIVNANDAN PRASAD	Age 47 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.010		
PH	6.0		
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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Name	Mr. SHIVNANDAN PRASAD	Age 47 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.			
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.			

**** End Of Report ****

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