

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited)

CIN: U85110CT2005PTC017751 GSTIN/UIN: 22AADCP8009N2Z9



UHID

: 176819

VISITID

: 0000338546

PATIENT NAME

: MR. SEVA RAM NIRMALKAR

ORDER DATE

: 16/03/2024 2:34:00PM

AGE/SEX

: 54Y/MALE

SAMP. DATE

: 16/03/2024 3:50:00PM

SPEC. NO

: 10506032

CONSULTANT DOCTOR

: HOSPITAL CASE

RESULT DATE

: 17/03/2024 7:24:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

SERUM PSA TOTAL

PARAMETER

VALUE

RESULT

REFERENCE RANGE

PSA (TOTAL)

0.691 ng/ml

Normal

Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liqueties semen in the terminal coagulum and allows sperms to swim freely.

Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, begin prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is a accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

Clinical Use

1)An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.

2) Followup and management of Prostate cancer patients

3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

Note:

- 1) Diagnosis of a disease should not be base on the result of a single test, but should be determined in conjuction with clinical findings in association with medical judgement.
- 2) Patient sample containing human anti mouse antibodies (HAMA)may give falsely elevated of decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.
- 3)Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

Dr. AVISHESH SINGH MD PATH MIS

CONSULTAN

TECHNICIAN



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CONSULTANT DOCTOR

CRC (COMPLETE BLOOD COUNT)

: MR. SEVA RAM NIRMALKAR

ORDER DATE

: 16/03/2024 2:34:00PM

AGE/SEX

: 54Y/MALE

SAMP. DATE

: 16/03/2024 3:50:00PM

: HOSPITAL CASE

SPEC. NO

: 10506041

RESULT DATE

: 16/03/2024 4:21:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CRC (COMPLETE BLOOD C	LOUNT)			
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
HAEMOGLOBIN (Hb)	14.2 gm%	Normal	13.5 - 17.5	
TOTAL RBC COUNT	6.99 Million/cumm	High	4.5 - 5.9	
HAEMATOCRIT (PCV)	41.7 %	Normal	41.5 - 50.4	
RBC INDICES				
MCV	59.7 fl	Low	78 - 96	
MCH	20.3 pg	Low	27 - 32	
MCHC	34.0 %	Normal	33 - 37	
RDW	14.0 %	Normal	11 - 16	
	3			
TOTAL WBC COUNT (TLC)	9900 /cumm	Normal	4000 - 11000	
DIFFERENTIAL COUNT				
NEUTROPHILS	76 %	High	0 - 75	
LYMPHOCYTES	18 %	Low	22 - 48	
EOSINOPHILS	02 %	Normal	0 - 6	
MONOCYTES	04 %	Normal	2 - 10	
BASOPHILS	00 %	Normal	0 - 2	
BANDS	00 %	Normal	0 - 5	
BLAST	00 %	Normal		
PLATELET COUNT	293000 /cumm	Normal	150000 - 450000	

TECHNICIAN

Dr. AVISHESH SINGH MD PATH



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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10506039

RESULT DATE

: 16/03/2024 4:58:00PM

: MEDIWHEEL TPA

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
BLOOD GROUPING AND RH TYPIN	IG			
BLOOD GROUP	"B"		-	
RH FACTOR	Positive		-	
BUN (BLOOD UREA NITROGEN)				
BUN (BLOOD UREA NITROGEN)	7.94 mg / dl	Low	8 - 23	
CREATININE				
SERUM CREATININE	0.79 mg/dL	Normal	0.3 - 1.5	
GGT (GAMMA GLUTAMYL TRANSF	ERASE)			
GGT (GAMMA GLUTAMYL TRANSFERASE)	15 U / L	Normal	8 - 52	
LIPID PROFILE				
CHOLESTEROL TOTAL	178 mg / dl	Normal	150 - 220	
TRIGLYCERIDES - SERUM	106 mg / dl	Normal	60 - 165	
HDL	38.05 mg / dl	Normal	35 - 80	
LDL	118.75 mg/dL	Normal	90 - 160	
VLDL	21.2	Normal	20 - 50	
CHOL: HDL Ratio	4.67:1		3.5 - 5.5	
LDL: HDL Ratio	3.12:1		-	
URIC ACID				
URIC ACID	2.43 mg/dL	Low	3.6 - 7.7	

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AGE/SEX

एक एहशाश अपनेपन का **Sparsh Multispecialty Hospit**

(A Unit of Sparsh Multispecialty Hospital Private Limited)

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ORDER DATE

: 16/03/202 SAMP. DATE : 16/03/2024 3:50:00PM

: 000033854

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10506034

> **RESULT DATE** : 17/03/2024 2:00:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE	
BLOOD SUGAR - FASTING AND PP				
BLOOD SUGAR FASTING	307 mg/dL	High	80 - 120	
BLOOD SUGAR PP	437 mg/dL	High	120 - 140	
URINE SUGAR FASTING				
URINE FOR SUGAR	++			
URINE SUGAR PP				
URINE FOR SUGAR	++		•	

Dr. AVISHESH SINGH MD

PATH

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NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.



22/03/2024 12:27PM

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PATIENT NAME : MR. SEVA RAM NIRMALKAR ORDER DATE : 16/03/2024 2:34:00PM SAMP, DATE : 16/03/2024 3:50:00PM AGE/SEX : 54Y/MALE

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10506030

> RESULT DATE : 17/03/2024 7:23:00PM

: MEDIWHEEL TPA

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER VALUE RESULT REFERENCE RANGE 0.69 - 2.15 Normal T3 (TRIIODOTHYRONINE) 1.252 ng/ml Normal T4 (THYROXINE) 52 - 127 95.11 ng/ml

TSH (THYROID STIMULATING HORMONE)

2.009 uIU/ml

Normal 0.3 - 4.5

REFERENCE GROUP

REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

0.30 - 4.5

Pregnancy

1st Trimester 0.10 - 2.500.20 - 3.002nd Trimester 0.30 - 3.003rd Trimester

Note:

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10~pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.

- 1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders

Thyroid dysfunction in infancy and early childhood

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ORDER DATE

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AGE/SEX

: 54Y/MALE

SAMP. DATE

: 16/03/2024 3:50:00PM

CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10506040

RESULT DATE

: 17/03/2024 2:02:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER

VALUE

RESULT

REFERENCE RANGE

HBA1 C (GLYCOSYLATED HEAMOGLOBIN)

10.8 %

High

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0At risk (Prediabetes)

- > = 6.0 to < = 6.5

Diagnosing diabetes

->=6.5

Therapeutic goals for glycemic control

- Age> 19 years

Goal of therapy: <7.0

Action suggested: >8.0

- Age< 19 years

- goal of therapy: < 7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appopriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

TECHNICIAN



LIDTHE DOUTTNE AND MICROSCODY

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AGE/SEX : 54Y/MALE SAMP. DATE : 16/03/2024 3:50:00PM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10506035

RESULT DATE : 16/03/2024 6:29:00PM

TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICRO	DSCOPY			
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
PHYSICAL EXAMINATION				
QUANTITY	10 ml		in the second second	
COLOUR	Straw		*	
APPEARANCE	Clear		-	
REACTION	Acidic			
CHEMICAL EXAMINATION				
ALBUMIN	Nil			
SUGAR	++		S. · STAR STAR STAR	
MICROSCOPIC EXAMINATION				
EPITHELIAL CELLS	Occasional /hpf		0 - 5	
PUS CELLS	Occasional /hpf		1 - 2	
RBC	Nil /hpf			
CAST	Nil /lpf			
CRYSTAL	Nil			
AMORPHOUS MATERIAL DEPOSIT	Nil		-	
OTHERS	Nil		-	

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22/03/2024 12:26PM

Dage 1 of 1



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CONSULTANT DOCTOR

: HOSPITAL CASE

SPEC. NO

: 10506033

RESULT DATE

: 17/03/2024 2:01:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.56 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.19 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.37 mg / dl	Normal	0.1 - 0.4
ALKALINE PHOSPHATASE	160 U/L	Normal	0 - 270
SGOT	18 U/L	Normal	10 - 55
SGPT	11 U/L	Normal	0 - 40
TOTAL PROTEIN	7.55 g / dl	Normal	6 - 8
ALBUMIN	4.15 g/dl	Normal	4 - 5
GLOBULIN	3.40 g/dl	Normal	2 - 3.5
A.G.RATIO	1.22:1		1 - 2.5

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• Ram Nagar, Supela, Bhilai (C.G.) • Ph.: 0788 4252222, 4052040 info@sparshbhilai.com @ www.sparshbhilai.com @ Toll Free No.: 1800 309 1616

22/02/2024 12:26DM



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ORDER DATE : 16/03/2024 2:34:00PM

AGE/SEX

: 54Y/MALE

SAMP. DATE : 16/03/2024 3:50:00PM

SPEC. NO

: 10506042

CONSULTANT DOCTOR : HOSPITAL CASE

RESULT DATE : 16/03/2024 5:33:00PM

TPA

: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	05 mm at end of 1 hr	Normal	0 - 20

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12:25PM 22/03/2024

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