


भारत सरकार
Government of India



रंजीत कुमार
Ranjeet Kumar
जन्म तिथि/DOB: 28/02/1982
पुरुष/ MALE



Aadhaar no. secret: 07012012

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सुधारण (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑनलाइन एक्सएमएल को स्कैन) के साथ किया जाना चाहिए।
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).

5996 8786 3264

मेरा आधार, मेरी पहचान


भारतीय विधिपत्र पहचान प्राधिकरण
Indian Verification Authority of India

पता:
S/O भरत प्रसाद, बिहार शरीफ, अम्बर, नालंदा,
बिहार - 803101

Address:
S/O Bharat Prasad, BIHAR SHARIF, AMBER,
DIST: Nalanda,
Bihar - 803101

Details as on: 04/02/2024



5996 8786 3264

VID : 9181 5979 3969 4347

1647 | help@uidai.gov.in | www.uidai.gov.in

11/04/24
081941
20
11/09
03/23
18
08



STAR HOSPITAL

(A unit of Magadh Nursing Home)

An ISO 9001:2015 Certified Hospital

Between East of Alok Petrol Pump &
West of Mahindra Show Room in
Bypass Fourlane, Fatuha Road,
Bari Pahari, Patna
Ph.: 9431046838, 9334269730, 7488893768

Mr. Ranjret Kumar
41y/m

Wt 81kg 90 Cam for annual Health check up
HT 162cm
Pulse 95/w
Room 30-9

BP 110/80 mmHg
SpO2 99%

Diabetic

Palms
Cyanosis
9/4

P/A 6/2

Liver
Spleen 1/NA

Chest
1/NA

ECG - within normal limit

Vision For < R 6/6 Mean < R N-18
< L 6/6 < L N-18
Color vision Normal

Echo Cardiography - within normal limit

Blood investigation - within normal limit (except ↑ B&R (R) & PP
↑ cholesterol)

USG of W/A - grade II fatty liver

Xy chest Patient - within normal limit

ENT - both tympanic membrane intact, no hearing deficit

Diet - Avoid fatty diets



Sumit



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DR. ASHISH RANJAN SINGH
BDS (Hon) MU
Consultant Oral & Dental Surgeon
Ph.: 9470585838, 9852542738

DR. VINAY KUMAR
BDS, MIDA
Consultant Oral Dental Surgeon

Not for Medico Legal Purpose

Name: Ranjeet Kumar

Date: 22/03/24

Add:

Age/Sex: 41y/M

Qc:- Pt comes for dental checkup

QE:-

- Aberration lost $\frac{6}{6} / \frac{6}{6}$

- check bite Present in right side

Adv:- OPG (pan) to be dr.

Rx:-

- arnidgrede oitment
apply twice daily
in affected area

1
Shubh
22/3/24





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Collection Date/Time : 22/03/2024/ 9:10:51 AM
Bill No : 232414127
Patient's Name : RANJEET KUMAR
Referred By : Dr. Self

Reporting Date/Time 22/03/2024/ 5:07:49 PM
Uhid/Lab ID : 23241872 /
Age / Sex : 41 Years/Male
Bed No : //

BIO-CHEMISTRY EXAMINATION

Investigation Name	Result	Reference Range
BLOOD SUGAR FASTING	123.0 mg/dl	70 — 110
BLOOD SUGAR PP	149.0 mg/dl	70 — 140
GAMMA-GT	39.0 U/Lt	9 — 52 (Male:<55 (Female:<38)

KIDNEY FUNCTION TEST

BLOOD UREA	22.0 mg/dl	5.0 — 40.0
SERUM CREATININE	0.80 mg/dl	0.60 — 1.20
SERUM URIC ACID	5.02 mg/dl	3.4 — 7.0
BUN	10.27 mg/dl	7.5 — 23.0

LIPID PROFILE

TOTAL CHOLESTEROL	234.0 mg/dl	140 — 200
TRIGLYCRIDE	176.0 mg/dl	30 — 160
HDL CHOLESTEROL	53.0 mg/dl	35 — 90
VLDL CHOLESTEROL	35.2 mg/dl	06 — 32
LDL CHOLESTEROL	145.8 mg/dl	85 — 130
LDL /HDL RATIO	2.75	1.5 — 3.0
TC / HDL	4.42	< 3.0 - Low Risk 3.0 - 5.0 Avg. Risk > 5.0 High Risk





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Age / Sex : 41 Years/Male

Bed No : //

Quality Control : by Human Chemistry Control (BIO-RAD,U.S.A)

URINE SUGAR +

HAEMATOLOGY EXAMINATION

BLOOD GROUP

ABO GROUP

"A"

RH TYPE

POSITIVE

E S R

12.0 mm/hr

0 — 15

PSA

3.69

0 — 4



LAB TECHNICIAN

Dr. T.K. Chakraverti
M.B.B.S. M.D.
(Microbiology)
Reg. No.-35997/06

PATHOLOGIST



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BIO-CHEMISTRY EXAMINATION

Investigation Name	Result	Reference Range
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LIVER FUNCTION TEST

SERUM BILIRUBIN

TOTAL	0.70 mg/dl	0.3 — 1.0
DIRECT	0.28 mg/dl	0.1 — 0.3
INDIRECT	0.42 mg/dl	0.2 — 0.7
SGPT	33.0 Iu/LT	05 — 40
SGOT	28.0 U/Lt	05 — 40
SERUM ALKALINE PHOSPHATASE	102.0 U/Lt	Adult :- 39 - 137 U/L New born : 95 - 368 U/L (<14 yrs) :- 58 - 460 IU/L

SERUM PROTEIN

PROTEIN	6.89 gm/dl	6.0 — 8.0
ALBUMIN	3.57 gm/dl	3.7 — 5.3
GLOBULIN	3.32 gm/dl	2.3 — 3.6
A : G RATIO	1.08	1.0 — 2.3



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HAEMATOLOGY EXAMINATION

Investigation Name	Result	Reference Range
HGB	13.90 gm/dl	13 — 17
R.B.C	4.54 million/Cu mm	3.5 — 5.5
H.C.T	42.20 %	40 — 54
M.C.V	93.0 fl	73 — 91
M.C.H	30.60 pg	27 — 32
M.C.H.C	32.90 g/dL	31.5 — 34.5
PLATELET COUNT	1.37 Lakh's/Cu. mm	1.50 — 4.50
W.B.C	6000 /cu mm	4000 — 11000
DIFFERENTIAL COUNT		
NEUTROPHILS	75 %	40 — 70
LYMPHOCYTES	25 %	20 — 40
EOSINOPHILS	02 %	01 — 06
MONOCYTES	03 %	02 — 10
BASOPHILS	00 %	00 — 02



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HAEMATOTOLOGY EXAMINATION

Investigation Name	Result	Reference Range
GLYCOCYLATED HAEMOGLOBIN (HbA1c)	7.52 %	Normal < 8.0 % Good Control : 8.0 – 9.0 % Fair Control : 9.0 – 10.0 % Poor Control : > 10.0 %

INTERPRETATION :

HbA1c is an indicator of glycaemic control .HbA1c has been thought to represent average glycaemia over the past 6-8 wks.A pt. in stable control will have 50 % of their HbA1c formed in the month before sampling, 25 % is in the month before that & the remaining 25 % in the month 2-4.LEVEL OF HbA1c : < 5.3 % :- may represent an acute & chronic possibility for severe hypoglycaemia events < 5.4-5.7 % :-Represents a very good level of diabetic control (caution should be used to avoid hypoglycaemia).5.8-7.2 % :- Represents a good level of diabetes control (continue to monitor frequently and strive for a reduction of HbA1c level to between 5.8 - 7.0) .- 8.0 % : - Represents a fair level of diabetes control(Suggest physician//patient / evaluation to determine where improvement can be made. >8.0 % :- Represents a sub-optimal level of diabetic control.(This level represents a significant increase in the risk for developing possible chronic complications).Effective intervention is strongly suggested, along with specific diagnostic tests.



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Age / Sex : 41 Years/Male
Bed No : //

IMMUNOLOGY EXAMINATION

Investigation Name	Result	Reference Range
THYROID PROFILE		
T3	0.81 ng/ml	0.52 -1.90 ng/ml.
T4	8.93 µg/dL	M- 4.4 - 10.8 µg/dL. F - 4.8 - 11.6 µg/dL.
TSH	1.670 µIU/ml	0.30 - 6.02 µIU/ml.

Method :- Enhanced Pulse Chemiluminescence Assay by Lumax
Quality Control :- by appropriate lyphocek Immunoassay Plus Control(BIO-RAD,U.S.A).

The guidelines for pregnancy related reference ranges for T3,T4 & TSH :-

Levels in Pregnancy	Total T3 (ng/ml)	Total T4 (µg/dL)	TSH (µIU/ml)
1 st Trimester	0.52 -1.90	6.6 - 12.4	0.1 - 2.5
2 nd Trimester	0.52 - 1.90	6.6 - 15.5	0.2 - 3.0
3 rd Trimester	0.52 - 1.90	6.6-15.5	0.3 - 3.0

The guidelines for age related reference ranges of T3,T4 & TSH :-

AGE	TOTAL T3 (ng/ml)	TOTAL T4 (µg/dL)	TSH (µIU/ml)
Premature Infants			0.8 - 5.2
CORD BLOOD	0.4 - 1.3	6.0 - 13.1	1.0 - 17.4
1 - 2 days	0.8 - 2.6	10.7 - 25.8	1.0 - 17.4
3 - 30 days	0.7 - 2.0	7.8 - 19.7	1.7 - 9.1
1 - 12 Months	1.0 - 2.3	5.4 - 13.8	0.8 - 9.1
1 - 7 years	1.2 - 2.0	5.3 - 12.3	0.8 - 8.2
7 - 13 years	1.1 - 2.0	6.0 - 11.1	0.7 - 7.0
13 - 18 years	1.0 - 1.8	4.9 - 10.7	0.7 - 5.7



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Age / Sex : 41 Years/Male
Bed No : //

CLINICAL PATHOLOGY EXAMINATION

REPORT ON THE EXAMINATION OF URINE

PHYSICAL EXAMINATION

Volume 30 ml
Colour Straw
Appearance Clear
Sediments Nil

CHEMICAL EXAMINATION

Specific Gravity 1.015
PH 6.5
SUGAR Nil
ALBUMIN Nil

MICROSCOPIC EXAMINATION

Erythrocytes / RBC Nil /hpf
Pus Cells A FEW /hpf
Epithelial Cells 2-3 /hpf
Casts Nil
Crystals Nil
YEAST CELLS Absent
MICRO-ORGANISM Absent
Others Nil

-\$ End of Report \$:-



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Bill No : 232414127

Patient's Name : RANJEET KUMAR

Referred By : Dr. Self

Reporting Date/Time: 22/03/2024/5:07:23 PM

Uhid/Lab ID : 23241872/

Age / Sex : 41Years/Male

Bed No : //

HAEMATOLOGY EXAMINATION

Investigation Name	Result	Reference Range
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* PERIPHERAL BLOOD PICTURE, WHOLE BLOOD
Microscopy

RBCs are predominantly normocytic normochromic. No nucleated cell is noted.

Anisocytosis + Poikilocytosis +

Reticulocyte count is normal, indicating normal bone marrow response.

WBC: Normal in count and morphology. No immature cell is noted.

IMPRESSION: Normal Study.

-\$ End of Report \$-



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Reg. No.-35997/06

PATHOLOGIST
DR. T. K. CHAKARVERTI
MBBS, MD(MICRO)

22-03-2024 09:43:51 AM

ID: 0

ranjeet kumar

Male 41 Years

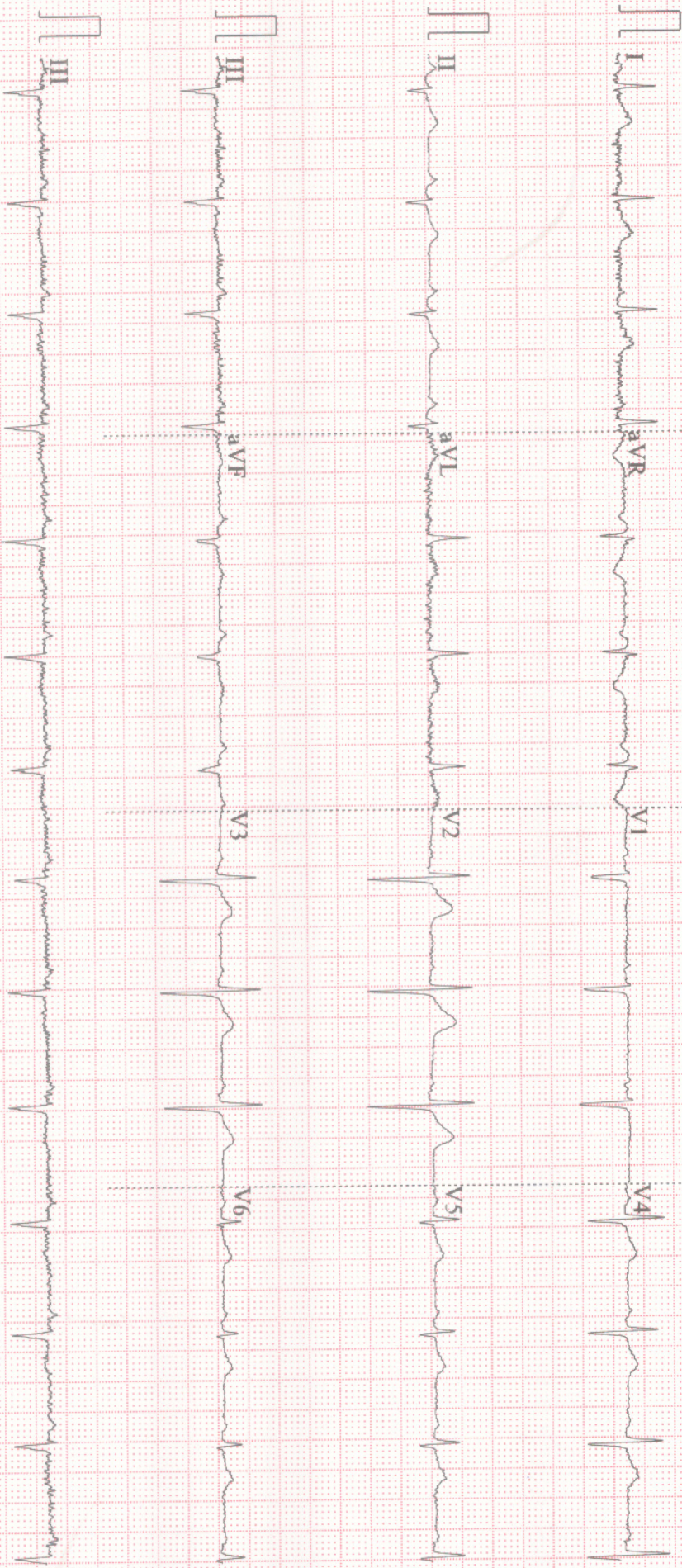
cm kg / mmHg

Room No. :

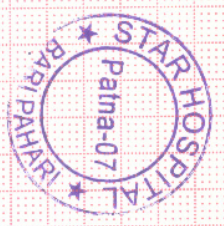
HR	:	80	bpm
P	:	102	ms
PR	:	145	ms
QRS	:	80	ms
QT/QTc	:	346/399	ms
P/ORS/ST	:	58/-41/20	°
RV5/SV1	:	0.417/0.647	mV

Diagnosis Information:
 Sinus Rhythm
 Left Axis Deviation

Report Confirmed by:



0.67~35Hz AC50 25mm/s 10mm/mV 4*2.5s+1r 80 SE-1200Express V2.01 SEMIP V1.7 STAR HOSPITAL





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No: 02.

March 22, 2024.

Mr. Ranjeet Kumar. 41/M

Refd. by Star Hospital.

U. S. G. of Whole Abdomen

LIVER: Normal in size, but parenchyma shows increased echotexture. Intra hepatic ducts and vessels are within normal limits. Right lobe measures 139 mm and Left lobe measures 76 mm in cranio caudal length.

GALL BLADDER: Normal in shape and size. Lumen is echofree. GB wall is of normal thickness.

C.B.D. & PORTAL VEIN: No abnormality seen. CBD measures 3.2 mm and PV 8.5 mm in caliber.

PANCREAS: Normal in shape, size and echotexture.

BOTH KIDNEYS: Right kidney measures 93 mm x 40 mm. Left kidney measures 94 mm x 44 mm. No mass, cyst or calculus. P C S Not Dilated. No Hydronephrosis. The C M D is well maintained.

SPLEEN: Normal in shape, size and echopattern. Size measures 87 mm x 35 mm. SV – Normal.

URINARY BLADDER: Echofree and no abnormality seen. UB wall is of normal thickness. Pre void urine volume 330 ml and post void residual urine volume 15 ml. (insignificant)

PROSTATE: Normal in shape, size and echotexture. Weight = 17 Grams, approx.

OTHER: No evidence of ascites/peritoneal collection. No basal pleural effusion. No enlarged lymph nodes. No mass, lump or abscess in iliac scan.

OPINION: Grade ' II ' Fatty Liver.
No evidence of ascites.


Consultant Sonologist



ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Patient's Name : Mr.RANJEET KR

Age/Sex :41yr/M

DATE : 22/03/2024

ECHOCARDIOGRAPHIC WINDOW :Good
2D & M MODE ECHOCARDIOGRAPHY

Left ventricle

EDD:	44	mm (20 - 28 mm / m ²)	ESD:	28	mm(13 - 21 mm /m ²)
IVS :	10	mm (6 - 11 mm	PW:	10	mm(6 -11 mm)
Ejection fraction:	65% (67 ± 8%)		FS:	35% (34 - 44 %)	
IVS:	Intact		LV clot	Absent	

Left atrium/ Aorta 36/30mmhg

Right ventricle Normal

Right atrium Normal

Pericardium Normal

2D:

Normal LA & LV cavity ,and normally contracting left ventricle.
No RWMA,

Mitral valve

AML/ PML: Normal

Tricuspid valve Normal

Aortic valve Normal

Pulmonary valve Normal

Continuous & Pulse Wave Doppler study

Valve	Velocity (m/sec)			Gradient (mmHg)			Valve area (PHT Method)	Regurg.
	Peak	Mean	EDV	Peak	Mean	EDG		
Mitral	E=0.6 A=1.0			4.0	2.0			NIL
Tricuspid	E=0.5 A=0.3			1	0.2			NIL
Aortic	1.12			5.0	2.5			Nil
Pulmonary	0.9			3.5	1.7			NIL



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Colour Flow Imaging

No PR, No AR/ MR/ TR

No shunt flow

COMMENTS :

- ◆ Normal LA & LV cavity
- ◆ Normal LV filling Pressure
- ◆ Normal RWMA
- ◆ Normal LV systolic function
- ◆ Grade I diastolic dysfunction(E/A-0.9)
- ◆ Global LVEF = 65%
- ◆ All cardiac valves are normal
- ◆ No MS / TS / AS / PS /PR
- ◆ No clot / vegetation.

IMPRESSION:

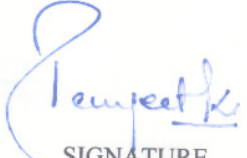
Normal LA & LV cavity

No RWMA,

Grade I LV Diastolic Dysfunction

Normal LV systolic function, LVEF – 65%

Please correlate clinically
Not valid for medico legal purposes


SIGNATURE
DR. RANJEET KUMAR
(CONSULTANT CARDIOLOGY)
MBBS, PGDCC, CCEBDM

EX-Senior Registrar, RTIICS, KOLKATA

