



CLOUD 36 BILDING SHOP
NO 8 PLOT NO 6 SEC11,

Lat: 19.119240, Long: 72.993637

23 Mar, 24, 11:01 AM, Saturday



0°



273 W



भारत सरकार
GOVERNMENT OF INDIA



तानाजी हरी पाटील
Tanaji Hari Patil
जन्म तारीख/DOB: 16/07/1976
पुरुष/ MALE
Mobile No: 8108569802

8298 1415 4828
VID : 9170 6315 7162 3429

माझे आधार, माझी ओळख

Issue Date: 07/07/2011

Download Date: 17/07/2011

MEDICAL EXAMINATION FORM

Confidential without Prejudice Report. To Be Filled In Strictly By the Physician/Diagnostic Center

PART I: GENERAL DETAILS

NAME OF THE PATIENT: Mr. Tanaji Patil
 D.O.B: 16/07/1976 Age: 47 Sex: M Phone number 8652404982

PART II: MEDICAL EXAMINATION REPORT (Strictly to be filled by Medical Examiner)

(Kindly tick wherever applicable)

A. PERSONAL HISTORY:

1. Previous history if any:

Disease	Yes/No	Medicine & Surgery Details	Disease	Yes/No	Medicine & Surgery Details
Diabetes Mellitus		mm	Cancer		mm
Hypertension			Tumor/Benign		
IHD			Genital urinary disorder		
Stroke			Rheumatic joint diseases or symptoms		
Surgeries			Asthma		
Tuberculosis			Pulmonary Disease		
Congenital Disease			Anemia		
Arrhythmia			Bleeding disease or Disorder.		
Aids (HIV)			Mental Stress		

2. Habits:

Diet		Alcohol	-	Tobacco/Smoking		Medicine	
------	--	---------	---	-----------------	--	----------	--

3. Major complaints/Relevant past history if any: NO MEDICATION

4. Previous Illness (Hospitalization Investigation, consultation) NONE

5. Family history: NONE

C. SUMMARY of the examination findings:

Positive Findings if any: (Please Specify)

Advice:

Conclusion on the fitness of the client:

Clinically & Medically fit

D. DOCTOR'S DECLARATION:

I confirm that I have examined this CLIENT and the findings stated above are true and correct to the best of my knowledge.

1. Name of the Medical Examiner: _____

Signature of the Medical Examiner: _____

DR. ANAND PRAKASH GAUR
MBBS, MD, DM
(Consulting Physician)
M.M.C Reg. No.
2005/02/0965

Stamp of the Medical Examiner

Registration Number 2005/02/0965

Date of medicals conducted: _____

Place: Ghansoli

2. Name of the Client: Ms. Tanasi patil

Signature of the Client: _____

NOTE: NAME AND SIGNATURE OF MEDICAL EXAMINER AND THE CLIENT IS MANDATORY ON THIS FORM

B. MEDICAL EXAMINERS FINDING AND ASSESMENT: (Please answer each question and where appropriate provide particulars. You are asked not to give any information to the person, assured, about the results)

1. Anthropometry:

Height	167 cm	Weight	66.30 kg	BMI	
--------	--------	--------	----------	-----	--

2. Vital Parameters:

(i)

Respiratory Rate	21/min	Pulse Rate	64 BPP
------------------	--------	------------	--------

(ii) Blood Pressure (Three consecutive Reading):

Systolic	130		
Diastolic	90		
Further readings at 10 minute interval if the first reading exceeds 140/90			

3. Skin

Is there is any evidence of:

Chronic Ulcer:	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	Eczema	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Swelling	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	Varicose Veins	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Skin Discoloration	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	Psoriasis	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

Any Other skin problem and specific location describe _____

EXAMINATION FINDINGS DETAILS

4. Cardiovascular System: *S/S₂ @*

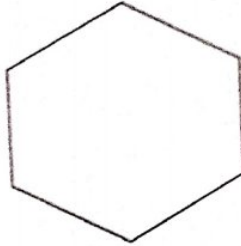
5. Genito-Urinary System: *@*

6. Respiratory System: *ausc clear*

7. Gastro-Entrology System:

(a) Oropharyngeal:

(b) Abdomen:



Evidence of Hernia, Hydrocele, Fissure, Fistula & piles,

If yes, please describe

8. Nervous System:

conscious / oriented

9. Eye Check-up

10. ENT

12. For Female Clients Only:

1. Is there any disease of breast? _____
2. (I) Is there any evidence of pregnancy? _____
(II) If Pregnant, are any complications to be expected? _____
3. Do you suspect any disease of uterus, cervix of ovaries? _____
4. Any menstrual complaints? _____

23.03.2024 11:09:14
CREDENCE HOSPITAL
GHANSOLI
NAVI MUMBAI

Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

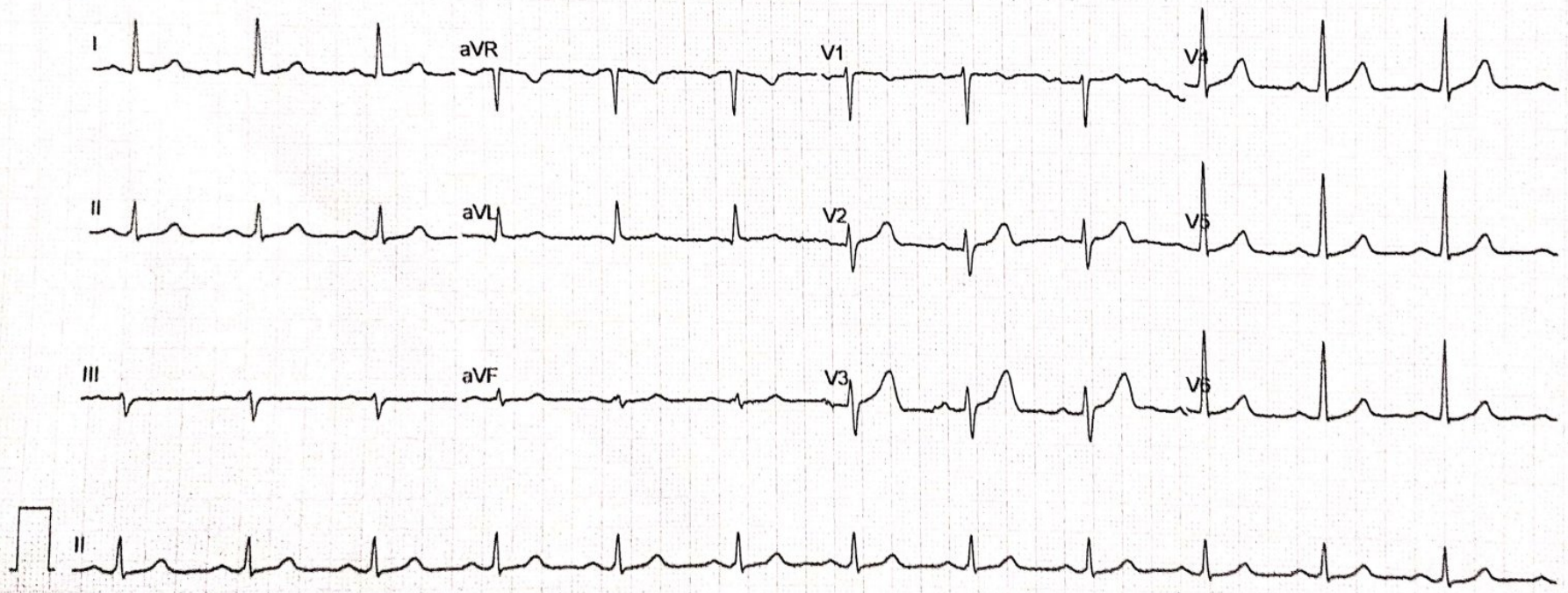
CE LOT 0785
74 bpm
--/-- mmHg

47 Years Male

QRS : 80 ms Normal sinus rhythm
QT / QTcBaz : 394 / 437 ms Normal ECG
PR : 176 ms
P : 118 ms
RR / PP : 814 / 810 ms
P / QRS / T : 43 / 10 / 24 degrees

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

DR. ANAND PRAKASH GAUR
MBBS, DNB, DM, DDEBDM
(Consulting Physician)
MMC Reg. No.
2005/02/0965





Patient Name	: MR. TANAJI PATIL	Patient ID: 2025
Age /Gender	: 47 YRS/MALE	Date: 23/03/2024

X-RAY CHEST PA

Plain P.A. Radiograph of chest shows: -
The hilar shadows are normal in size, position and density.
Both Cardio phrenic and Costophrenic angles are clear.
The Cardiac silhouette is within normal limits. Aortic shadow is normal.
Rest of the visualized mediastinum shadows are normal. Both domes of diaphragms are normal.
The visualized bony thorax is normal.

CONCLUSION:

NO SIGNIFICANT ABNORMALITY DETECTED

DR. Nikunj Kothia
MBBS, DMRD Reg-2009093218

CT SCAN | USG | 2D ECHO | X-RAY | PATHOLOGY | ECG | DOPPLER |

36 cloud , Plot No.6,Sector -11,New Palm Beach Road, Ghansoli,Navl Mumbai,Maharashtra-400701

Jumbolabhub@gmail.com
+917718032706



Credence
Care Hospital Pvt. Ltd.



**RAMAN CT SCAN &
DIAGNOSTIC CENTER**

Name: Mr. Tanaji Patil

Age/Sex: 47Y/Male

Date: 23/03/2024

2 D Echocardiography & color Doppler Study

FINDINGS:

- No left ventricle regional wall motion abnormality.
- No left ventricle diastolic dysfunction.
- No left ventricle wall hypertrophy. No LV dilation.
- Normal left ventricle systolic function. LVEF aprx-60%.
- No mitral regurgitation.
- No aortic regurgitation.
- No TR. No pulmonary hypertension.
- Cardiac valves are structurally normal.
- Normal size of cardiac chambers.
- Intact IAS & IVS.
- No LV clot/vegetation/pericardial effusion.
- Normal RV systolic function. No hepatic congestion.

Conclusion:

Normal 2D echo & color Doppler Study.

DR. KUMAR RAJEEV
M.D.(Med),DNB(Cardiology)



Name: Mr. Tanaji Patil

Age/Sex: 47Y/Male

Date: 23/03/2024

2D Measurements:

LA	32 mm
AORTIC ROOT	24 mm
EF SLOPE	90 mm/sec
LVIDD	40 mm
LVIDS	28 mm
IVS(D)	10 mm
PW(D)	10 mm
RVID	32 mm
LVEF	60%

Doppler study:

AV max -	1.1 m/sec	E vel	0.9 m/sec
PV max -	0.9 m/sec	A vel	0.7 m/sec
PASP		E/A	1.3

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: PATHIL, TANAJI
Patient ID: 67762
Height:
Weight:

DOB: 16.07.1976
Age: 47yrs
Gender: Male
Race: Asian

Study Date: 23.03.2024
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:
--

Medical History:
--

Reason for Exercise Test:
Screening for CAD

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:06	0.00	0.00	71	120/80	
	STANDING	00:10	0.00	0.00	72		
	HYPERV.	00:28	0.50	0.00	73		
EXERCISE	STAGE 1	03:00	1.70	10.00	96	120/80	
	STAGE 2	03:00	2.50	12.00	107	130/80	
	STAGE 3	02:57	3.40	14.00	113	130/90	
RECOVERY		01:09	0.00	0.00	77	130/90	

The patient exercised according to the BRUCE for 8:56 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 71 bpm rose to a maximal heart rate of 116 bpm. This value represents 67% of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 130/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.

Conclusions

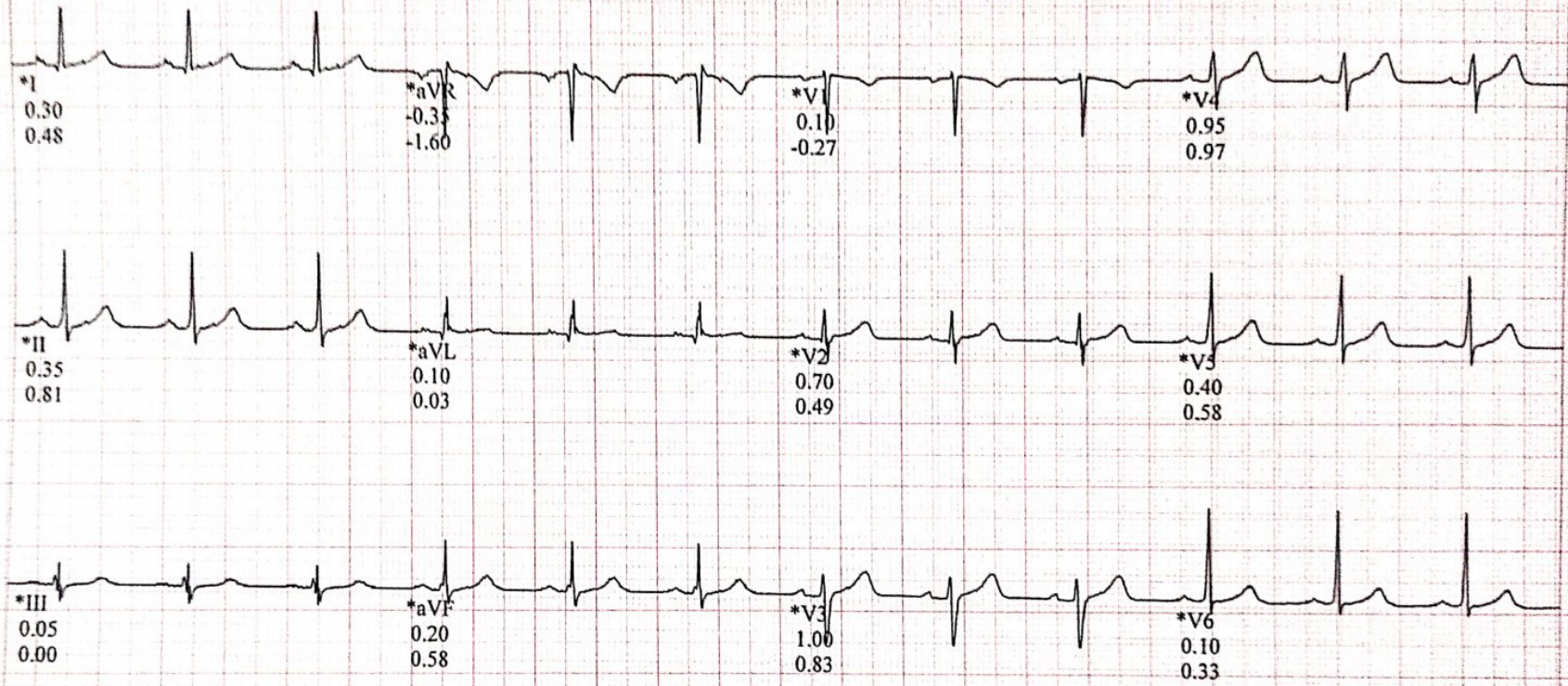
TEST IS NEGATIVE FOR EXERCISE INDUCIBLE MYOCARDIAL ISCHEMIA.
DR KUMAR RAJEEV.
MD DNB CARDIOLOGY.

Physician _____

Technician _____



Lead
ST Level (mm)
ST Slope (mV/s)



II
Raw Data

*Computer Synthesized Rhythms

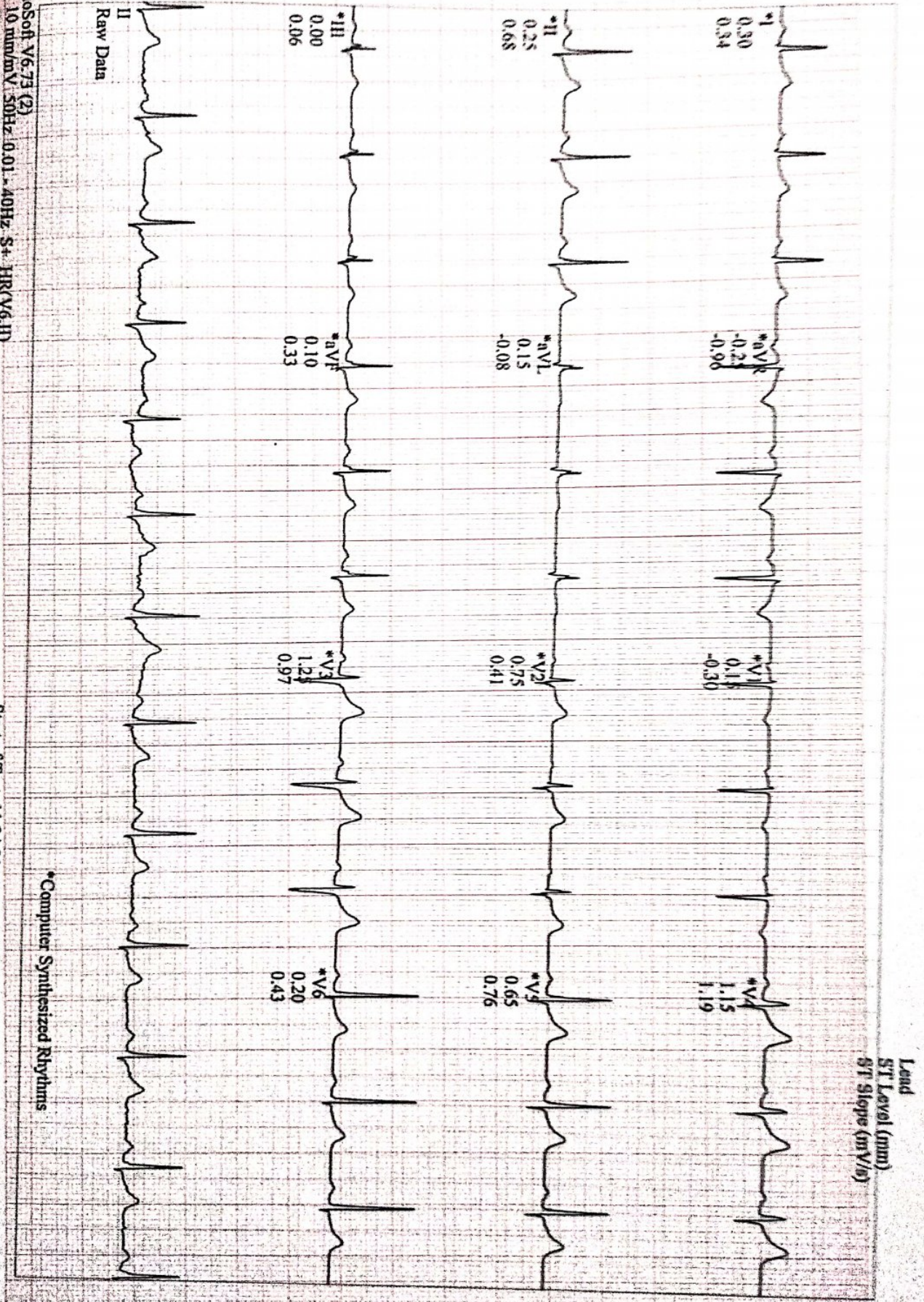
PATIENT: TANAJI
Patient ID: 67762
23.03.2024
11:24:44am

Linked Medians
72 bpm
120/80 mmHg

PRETEST
STANDING
00:12

BRUCE
0.0 mph
0.0 %

OPCRENDENCE HOSPITAL



GE CardioSoft V6.73 (2)
mm/s: 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6,II)

Start of Test: 11:24:31am

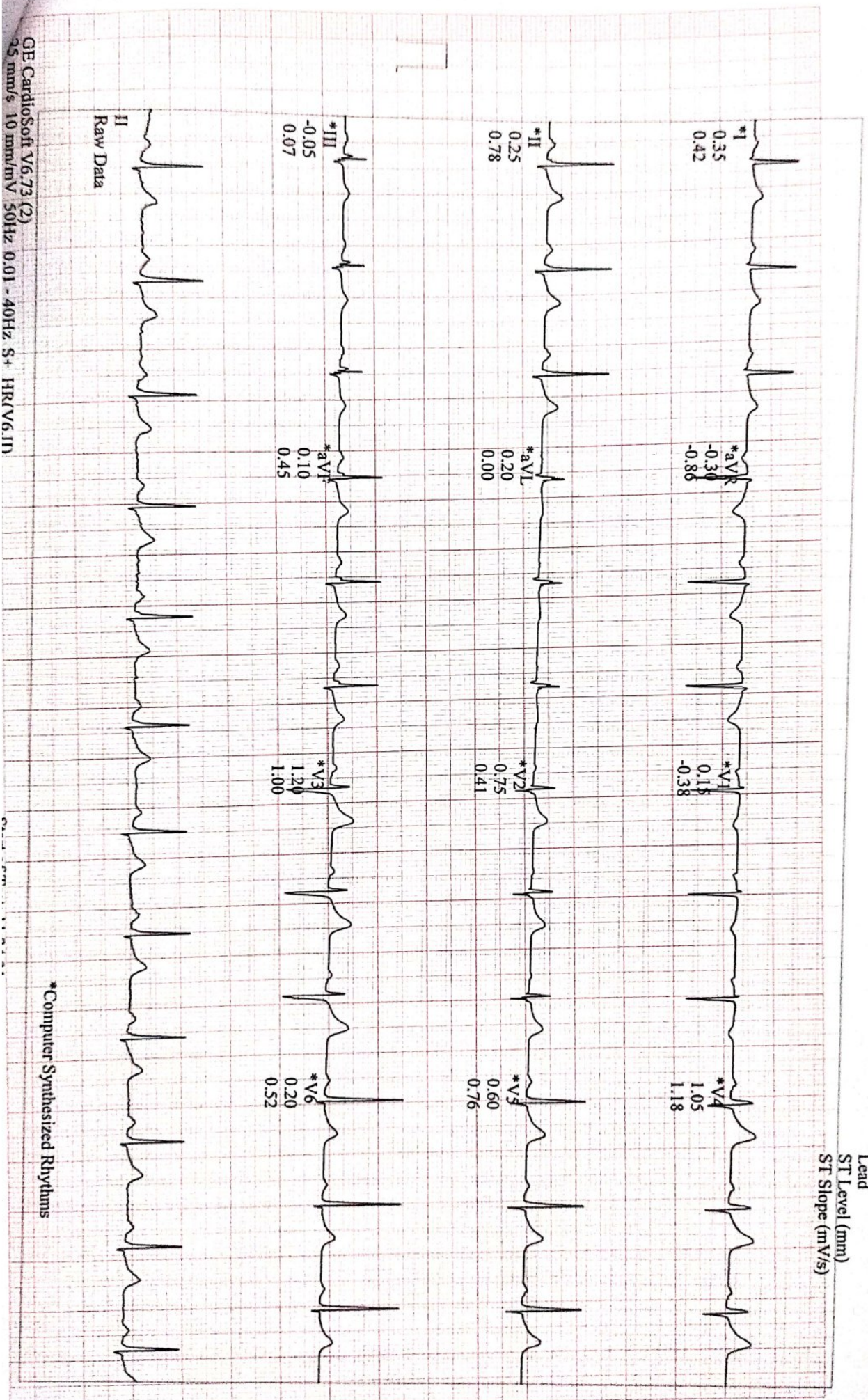
PATIL, TANAJI
Patient ID 67762
23.03.2024
11:24:49am

72 bpm
120/80 mmHg

Linked Mediums
PRETEST
HYPERV.
00:18

BRUCE
0.0 mph
0.0 %

-OPCREDDENCE HOSPITAL



Raw Data

*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6.III)

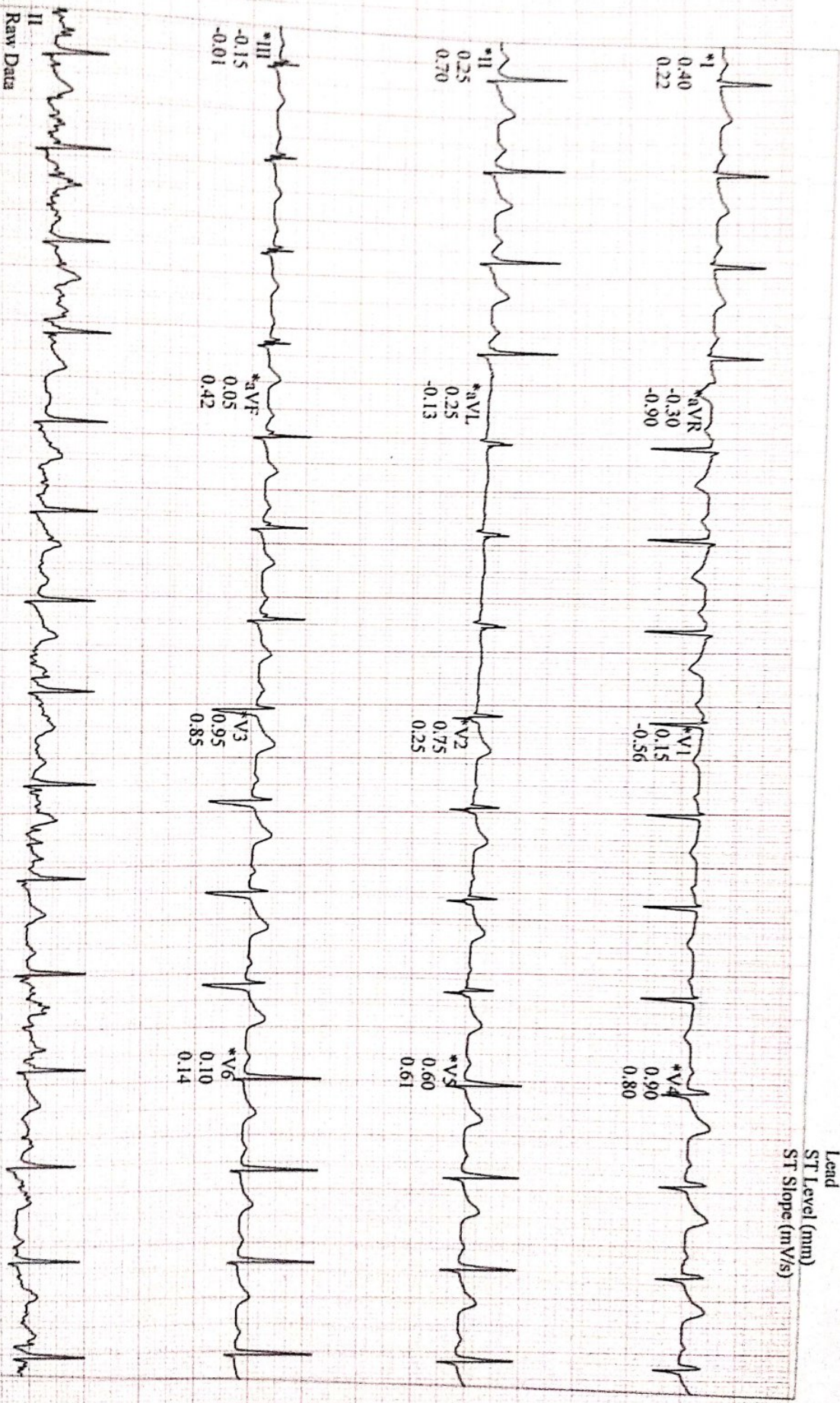
PATIL, TANAJI
Patient ID 67762
23.03.2024
11:25:32am

88 bpm
120/80 mmHg

Linked Medians
EXERCISE
STAGE 1
00:18

BRUCE
1.7 mph
10.0%

-OPCREDESCENCE HOSPITAL



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6,II)

Start of Test: 11:24:31am

*Computer Synthesized Rhythms

PATIL, TANAJI
Patient ID 67762
23.03.2024
11:29:16am

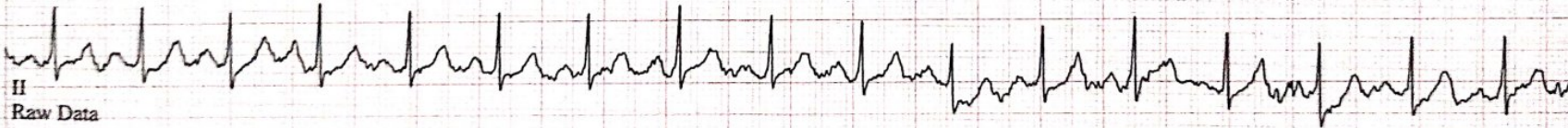
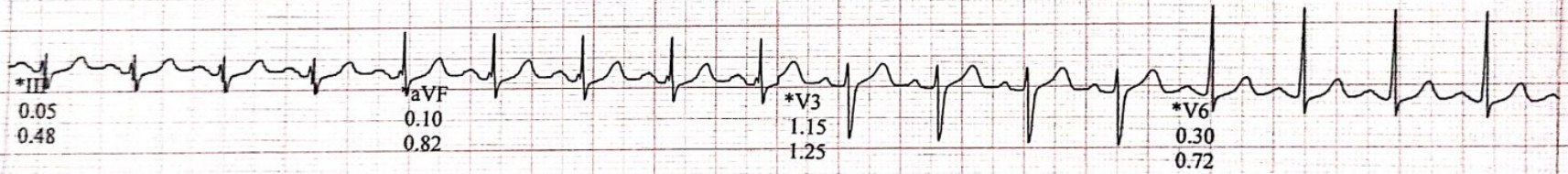
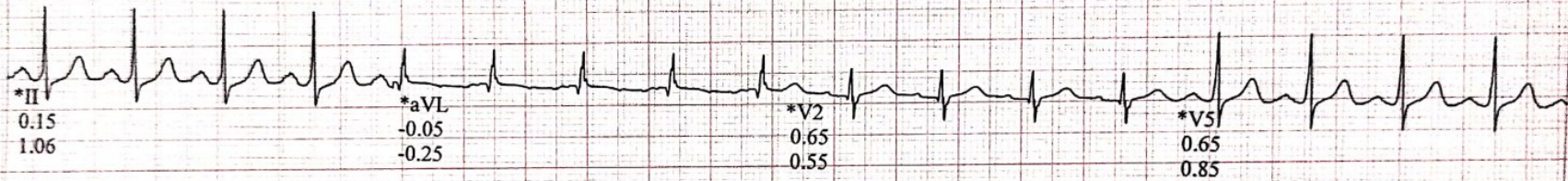
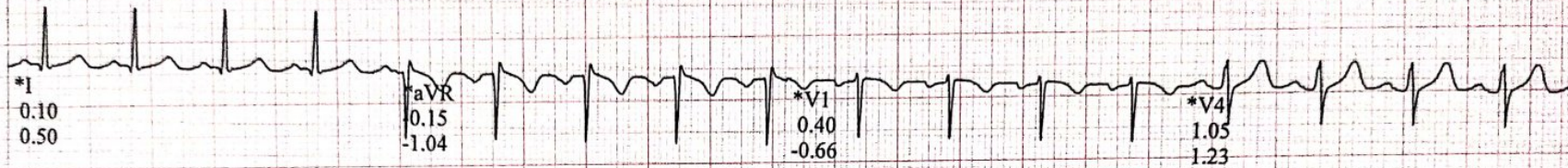
104 bpm
130/80 mmHg

Linked Medians
EXERCISE
STAGE 2
04:02

BRUCE
2.5 mph
12.0 %

-OpCREDENCE HOSPITAL

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6,II)

Start of Test: 11:24:31am

Page 5

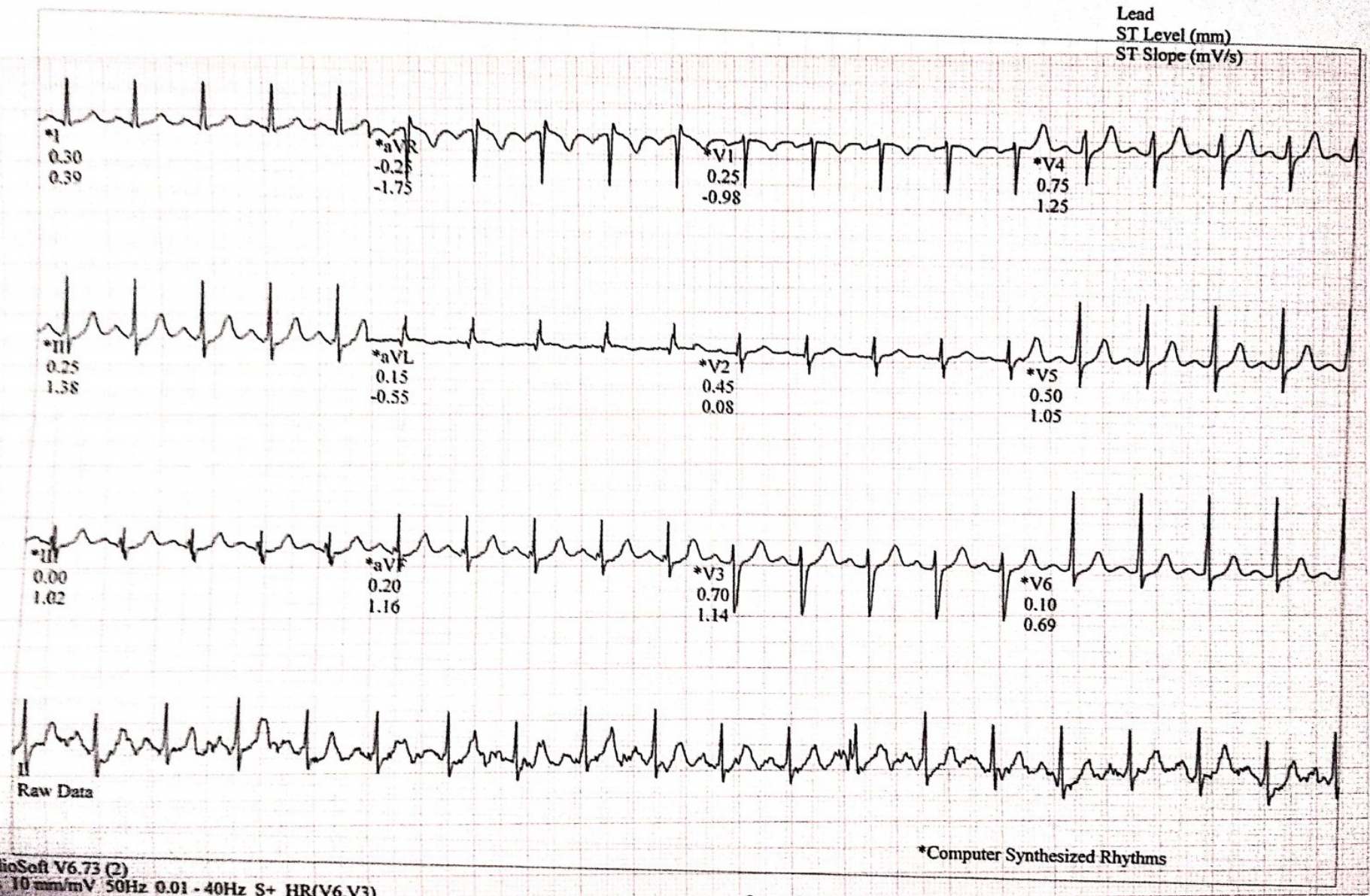
PATIL, TANAJI
Patient ID 67762
23.03.2024
11:33:24am

116 bpm
130/90 mmHg

Linked Medians
EXERCISE
STAGE 3
08:11

BRUCE
3.4 mph
14.0 %

-OpCREENCE HOSPITAL



GE CardioSoft V6.73 (2)
5 mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6.V3)

Start of Test: 11:24:31am

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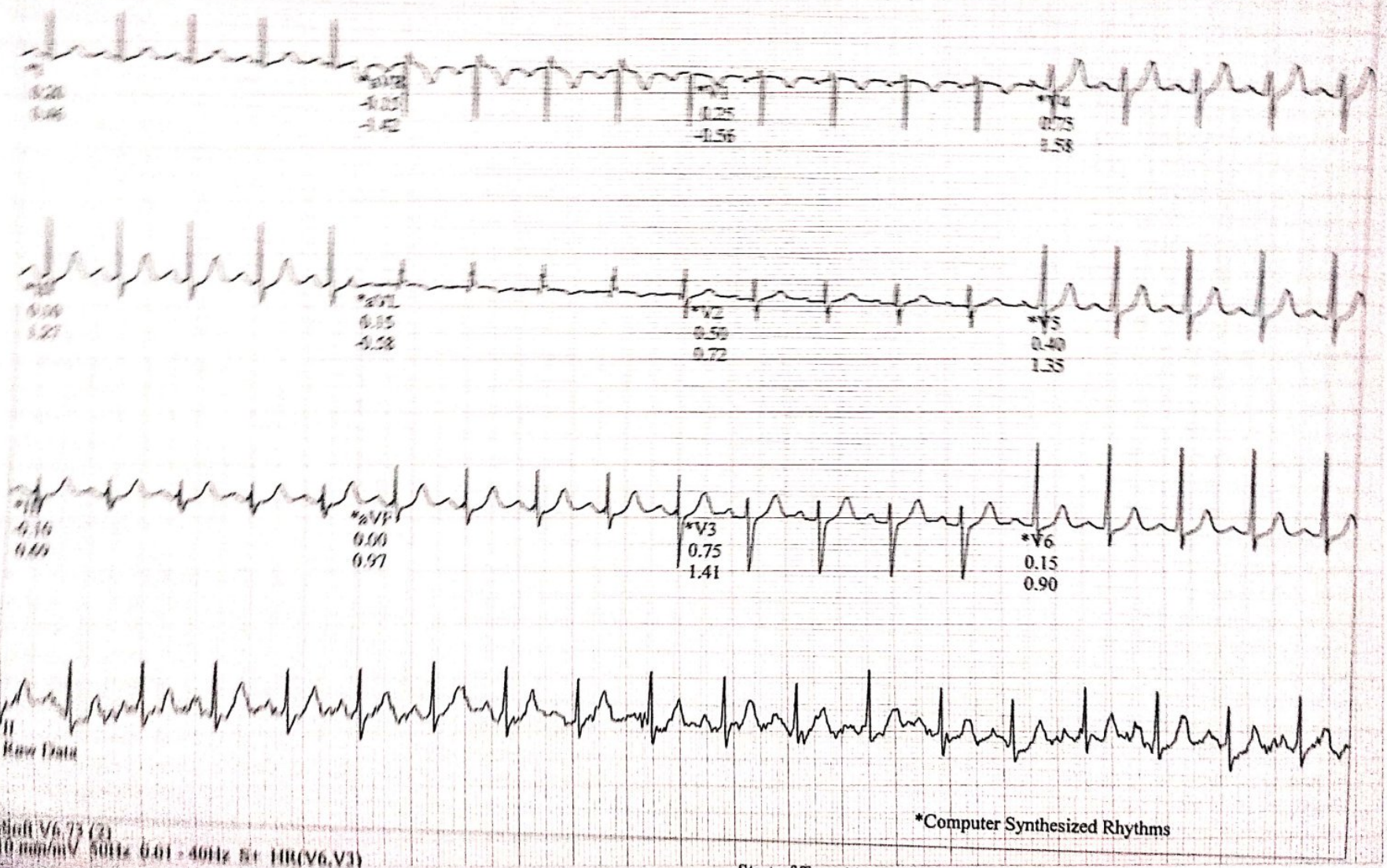
PATIENT NAME: PATEL, TANUJ
PATIENT ID: 5782
DATE: 05/05/2024
TIME: 11:24:31am

HR: 123 bpm
SBP: 130 mmHg

Linked Medium (PEAK EXERCISE)
EXERCISE STAGE 3
HR: 57
BRUCE 3.4 mph
14.0 %

ACCREDITED HOSPITAL

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

12 Lead Calibration V6, V3 (2)
10 mm/mV 50 Hz 0.01 - 40 Hz 8:1 IIR(V6,V3)

Start of Test: 11:24:31am

Page 7

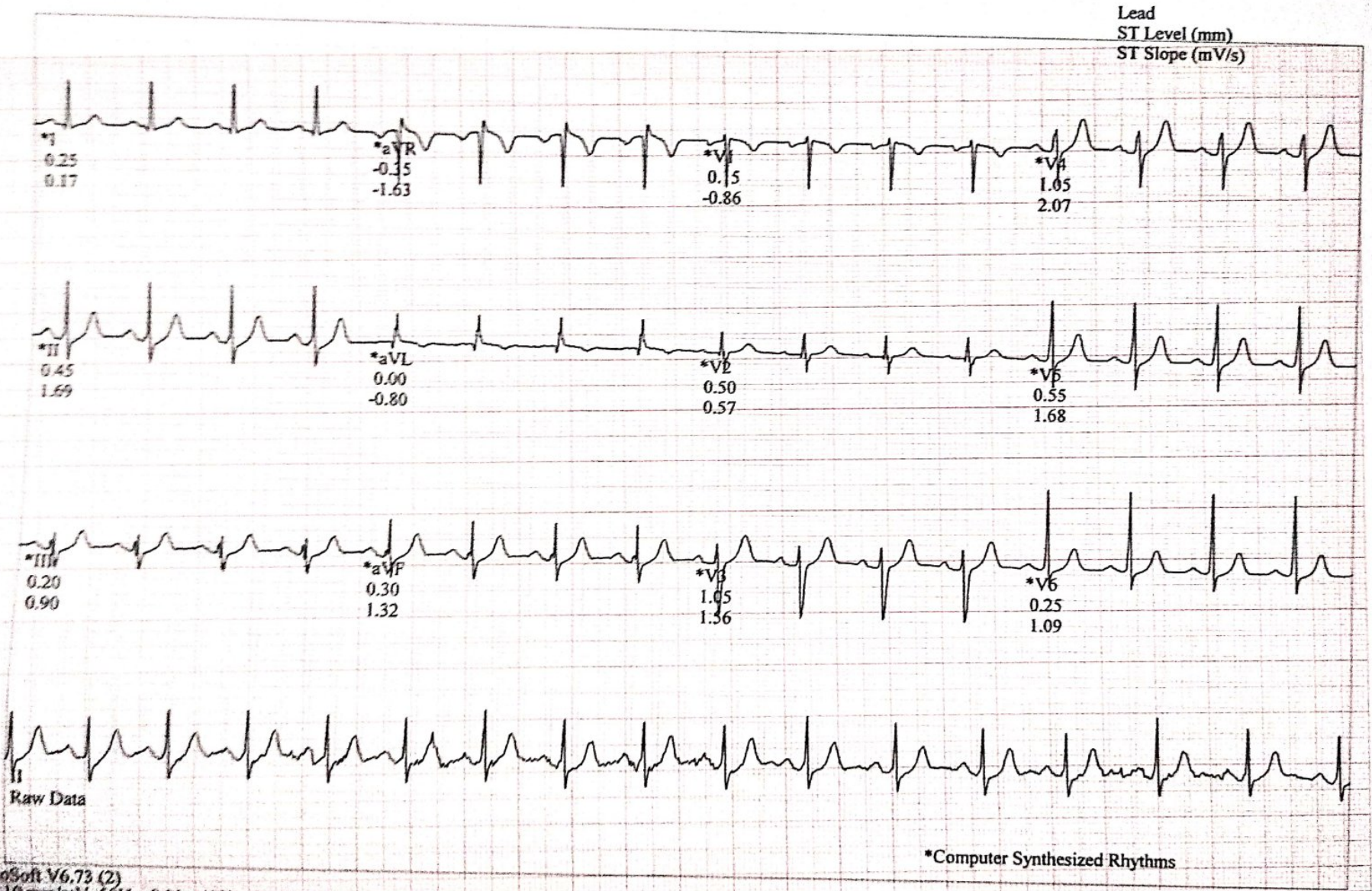
PATIL, TANAJI
Patient ID 67762
23.03.2024
11:34:42am

100 bpm
130/90 mmHg

Linked Medians
RECOVERY
#1
00:32

BRUCE
1.5 mph
0.0 %

-OpCREDENCE HOSPITAL



GE CardioSoft V6.73 (2)
mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6,V3)

Start of Test: 11:24:31am

Page 8

PATIL, TANAJI
Patient ID 67762
23.03.2024
11:35:17am

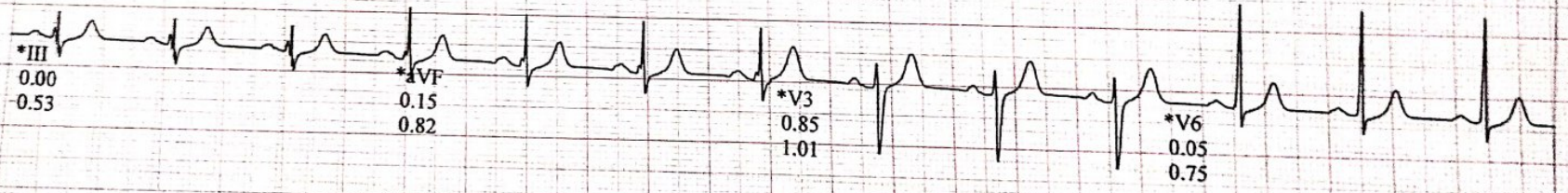
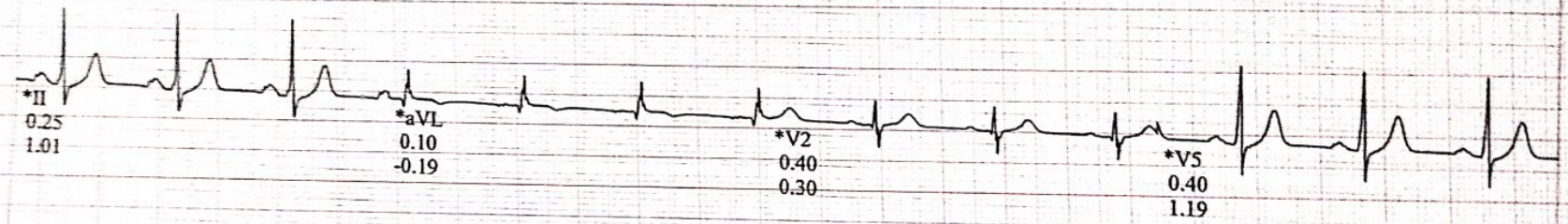
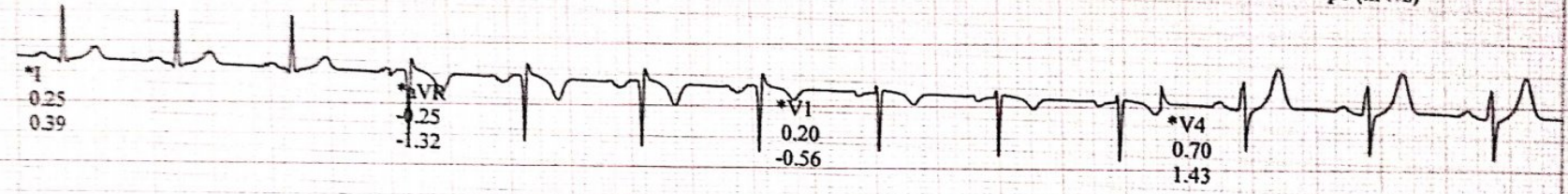
77 bpm
130/90 mmHg

Linked Medians
RECOVERY
#1
01:08

BRUCE
0.0 mph
0.0 %

-0pCREDENCE HOSPITAL

Lead
ST Level (mm)
ST Slope (mV/s)



GE CardioSoft V6.73 (2)
mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(V6,V3)

*Computer Synthesized Rhythms

Start of Test: 11:24:31am

Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/  1051

Reporting Date : 23/03/2024 04:31 PM

Complete Blood Count (CBC)

Test Description	Value(s)	Unit	Reference Range
Hemoglobin	14.3	gms/dl	13 - 16
RBC Count	4.34	mil./cmm	4.5 - 6.5
Haematocrit (HCT)	40.5	%	40 - 54
RBC Indices			
MCV	93.32	fL	80 - 100
MCH	32.95	pg	27 - 34
MCHC	35.31	gm/dl	32 - 36
RDW-CV	13.5	%	11 - 16
Total WBC Count	4300	/uL	4000 - 10000
DIFFERENTIAL COUNT			
Neutrophil	61	%	40 - 70
Lymphocytes	34	%	20 - 40
Eosinophil	03	%	1 - 6
Monocytes	02	%	2 - 8
Basophils	00	%	0 - 1
Platelet Indices			
Platelet Count	243000	/cmm.	150000 - 450000
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Within Normal Limits		
Platelet	Adequate on smear		

Done on fully Automated cell counter-ERBA H360



Checked By

Authenticity Check

Dr. Harshal Thorat

MD (Path)

Reg No. 2014/10/4438



Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

ESR (ERYTHROCYTE SEDIMENTATION RATE)

Test Description	Value(s)	Unit	Reference Range
Erythrocyte Sedimentation Rate Wintrobe method	08	mm/hr	< 15

Interpretation: It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

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Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

BLOOD GROUP (BG)

Test Description	Value(s)	Unit	Reference Range
------------------	----------	------	-----------------

Sample Type : WHOLE BLOOD EDTA

Blood Group : O Rh Positive

METHOD : Monoclonal blood grouping (Agglutination test) by slide method

KIT : Span diagnostics.



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Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

BLOOD GLUCOSE LEVEL (FASTING & POST PRANDIAL)

Test Description	Value(s)	Unit	Reference Range
Glucose Fasting (Plasma)	100.0	mg/dl	70 - 110
Glucose Urine	Absent		
Glucose PP (Plasma)	108.0	mg/dl	90 - 150
Glucose Urine	Absent		

Interpretation : Fasting Blood Sugar more than 126 mg/dl on more than one occasion can indicate Diabetes Mellitus.

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Age / Gender : 47 Years / Male

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Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/  1051

Reporting Date : 23/03/2024 04:31 PM

LIPID PROFILE

Test Description	Value(s)	Unit	Reference Range
Total Cholesterol	219.0	mg/dl	Low < 125 Desirable : < 200 Borderline High : 201 - 240 High : > 240
Triglycerides	140.0	mg/dl	Low < 25 Normal : < 150 Borderline High : 151 - 199 High : > 200
HDL Cholesterol	43.0	mg/dl	<35 Low >80 High
Non HDL Cholesterol	176.00	mg/dl	Desirable : < 130 Boderline high : 130 - 159 High : > 160
LDL Cholesterol	148.00	mg/dl	Low < 85 Optimal : <100 Near/Above Optimal : 101 - 129 Borderline High : 130 - 159 High : >160
VLDL Cholesterol	28.00	mg/dl	Below 40
TOTAL CHOL/HDL Ratio	5.09	-	Desirable/Low Risk : 3.3 - 4.4 Borderline/Middle Risk : 4.5 - 7.1 Elevated/High Risk : 7.2 - 11.0
LDL/HDL Ratio	3.44	-	Desirable/Low Risk : 0.5 - 3.0 Borderline/Middle Risk : 3.1 - 6.0 Elevated/High Risk : >6.1
Appearance of Serum	Clear		

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Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

LIVER FUNCTION TEST (LFT)

Test Description	Value(s)	Unit	Reference Range
Bilirubin Total	0.69	mg/dL	0.3 - 1.5
Bilirubin Direct	0.24	mg/dL	0.0 - 0.5
Bilirubin Indirect	0.45	mg/dL	0.2 - 0.9
SGOT (AST)	21.0	U/L	0 - 45
SGPT (ALT)	29.6	U/L	0 - 45
Alkaline Phosphatase	180.0	U/L	80 - 306
Protein Total	6.8	g/dL	6 - 8
Albumin	3.7	g/dL	3.2 - 5.0
Globulin	3.1	g/dL	2.5 - 3.3
A/G Ratio	1.19	-	1.0 - 2.1



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Reg No. 2014/10/4438



Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

GAMMA GT

Test Description	Value(s)	Unit	Reference Range
Gamma Glutaryl Trans Peptidase	25.0	U/L	5 - 40



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Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

CREATININE

Test Description	Value(s)	Unit	Reference Range
CREATININE Jaffe IDMS	0.8	mg/dl	0.7 - 1.4

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Reg No. 2014/10/4438



Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

BLOOD UREA NITROGEN

Test Description	Value(s)	Unit	Reference Range
BUN* Serum,Calculated	10.0	mg/dL	7 - 18.0

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Age / Gender : 47 Years / Male

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Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/ 
1051

Reporting Date : 23/03/2024 04:31 PM

URIC ACID

Test Description	Value(s)	Unit	Reference Range
Uric Acid	5.32	mg/dl	3.5 - 7.2

Checked By



Authenticity Check

Dr. Harshal Thorat

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Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

Pt.Type / ID : OPD/  1051

Reporting Date : 23/03/2024 04:31 PM

GLYCOSYLATED HAEMOGLOBIN (GHB / HBA1c)

Test Description	Value(s)	Unit	Reference Range
HbA1c H.P.L.C	5.2	%	Below 6.0% - Normal Value 6.0% - 7.0% - Good Control 7.0% - 8.0% - Fair Control 8.0% - 10% - Unsatisfactory Control Above 10% - Poor Control

Interpretation: Glycosylated Haemoglobin is accurate and true index of the " Mean Blood Glucose Level in the body for the previous 2-3 months. HbA1c is an indicator of glycemic control. HbA1c represent average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs the entire 120 days life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months 2-4.

Checked By



Authenticity Check

Dr. Harshal Thorat

MD (Path)

Reg No. 2014/10/4438

Patient Name : MR. TANAJI PATIL

Age / Gender : 47 Years / Male

Referral Doctor: HEALTH CHRCK UP

Collection Date : 23/03/2024 10:06 AM

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1051

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URINE ROUTINE REPORT

Test Description	Value(s)	Unit	Reference Range
Physical Examination			
Quantity	20	ml	-
Colour	Pale Yellow		Pale yellow/Yellow
Appearance	Slightly Hazy		Clear
Specific Gravity	1.010		1.005-1.030
pH	Acidic		Acidic
Deposit	Absent		Absent
Chemical Examination			
Protein	Absent		Absent
Sugar	Absent		Absent
Ketones	Absent		Absent
Bile Salt	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal		Normal
Microscopic Examination (/hpf)			
Pus Cell	2-4		Upto 5
Epithelial Cells	1-2		Upto 5
Red Blood Cells	Absent		Absent
Casts	Absent		Absent
Crystals	Absent		Absent
Bacteria	Absent		Absent



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PROSTATE SPECIFIC ANTIGEN (PSA)

Test Description	Value(s)	Unit	Reference Range
PSA-total Prostate Specific Antigen, total (Serum)	2.0	ng/ml	0 - 4

** **Elevated levels of PSA are associated with prostate cancer, but may also be seen with prostatitis (Inflammation of the prostate) and benign prostatic hyperplasia (BPH). PSA test done along with free PSA provides additional information. Studies have suggested that the percentage of free PSA in total PSA is lower in patients with prostate cancer than those with benign prostate hyperplasia.

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THYROID FUNCTION TEST (TFT)

Test Description	Value(s)	Unit	Reference Range
TOTAL TRIIODOTHYRONINE (T3) Competitive Chemi Luminescent Immuno Assay	112.0	ng/dl	60 - 181
TOTAL THYROXINE (T4) Competitive Chemi Luminescent Immuno Assay	5.65	µg/dL	4.5 - 12.6
THYROID STIMULATING HORMONE (TSH) SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY	1.35	uIU/mL	0.3 - 5.5

SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

Reference range for < 18 years

TEST	1 - 3 D	4 - 30 D	31 - 60 D	61 D - 12 M	1 - 5 Y	6 - 10 Y	11 - 14 Y	15 - 18 Y
TSH	0.1-9.2	0.2-8.5	0.2-7.8	0.30-5.9	0.4-4.8	0.5-4.7	0.5-4.6	0.6-4.5
T3	41.7-272.1	48.2-272.1	54.7-272.1	76.8-272.1	89.2-246.7	87.2-218.1	86.6-199.8	85.3-188.8
T4	4.9-15.8	5-15.3	5.2-14.8	5.7-13.3	5.7-11.7	5.4-10.7	5.2-10	5.1-9.6
FT3	1.5-5.3	1.6-5.2	1.6-5.1	1.8-4.8	2-4.5	2.1-4.4	2.3-4.4	2.3-4.3
FT4	0.84-2.08	0.85-1.98	0.85-1.89	0.89-1.62	0.89-1.48	0.85-1.46	0.84-1.45	0.84-1.45

END OF REPORT



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