



### DEPARTMENT OF RADIOLOGY

|                     |               |                  |
|---------------------|---------------|------------------|
| NAME: TANUJ AGRAWAL | AGE : 38 YRS. | SEX : M          |
| REF. BY: DR. CIMS   | UHID: 10468   | DATE: 29-03-2024 |

### ULTRASOUND SCAN OF ABDOMEN

#### FINDINGS:

**Liver** is normal in size (14.2 cm). **Echotexture is slightly echogenic.** No focal space occupying lesion is seen within liver parenchyma. Intrahepatic biliary channel are not dilated. Portal vein is normal in caliber.

**Gall bladder** wall is not thickened. No calculus or mass lesion is seen in gall bladder. Common bile duct is not dilated.

**Pancreas** is of normal in size and contour. Echo-pattern is normal. No focal lesion is seen within pancreas. (Only head & proximal body is visualized)

**Spleen** is normal in size (9.6 cm). Echotexture is normal. No focal Lesion is seen.

**Right kidney** is normally sited and is of normal size (RT ~ 9.8 x 5.1 cm) and shape. Cortico medullary echoes are normal. No focal mass lesion is seen. Collecting system does not show any calculus.

**Left kidney** is normally sited and is of normal size (LT ~ 9.2 x 5.0 cm) and shape. Cortico medullary echoes are normal. No focal mass lesion is seen. Collecting system does not show any calculus.

**Urinary bladder** is normal in distension and wall is not thickened. No calculi seen.

**Prostate** is normal in size and normal in echotexture.

No free fluid seen in peritoneal cavity.

#### IMPRESSION-

- **GRADE I FATTY CHANGES IN LIVER.**

PLEASE CORRELATE CLINICALLY & F/E.

DR. ABHAY RAJ  
M.B.B.S., D.N.B (RADIO-DIAGNOSIS)  
CONSULTANT RADIOLOGIST





# CIMS



## City Institute of Medical Sciences

(Multi Super Speciality 200 Bedded Hospital)

### DEPARTMENT OF CARDIOLOGY

Name : MR.TANUJ AGRAWAL      Age/Sex :38Yrs/Male  
Date : 29/03/2024      ID No. : CIMS-10468  
Done By : DR. ARPIT AGARWAL

### ECHOCARDIOGRAPHY

- ❖ All Cardiac chamber normal size.
- ❖ Normal LV systolic function, LVEF ~ 60%.
- ❖ No RWMA
- ❖ **Trace MR.**
- ❖ **Trace TR.**
- ❖ RVSP=RAP+18 mmHg
- ❖ Normal AFV
- ❖ Intact IAS/IVS.
- ❖ No clot/vegetation/pericardial effusion.
- ❖ IVC non-dilated & collapsing > 50% during inspiration.

### CLINICAL IMPRESSION:

- ❖ Normal LV systolic function, LVEF ~ 60%.
- ❖ No RWMA
- ❖ **Trace MR.**
- ❖ **Trace TR.**
- ❖ No PHT, PASP = 23 mmHg.

**Dr. ARPIT AGARWAL**

MBBS, MD (M) (CARDIOLOGY)

Consultant Intervention Cardiologist

Ex. Fortis Escort Heart Institute, Delhi

**NOTE:** Normal Echocardiography report does not rule out CAD.

This report is not valid for Medico-legal purpose.

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**DEPARTMENT OF PATHOLOGY**

|                  |                                    |                       |                        |
|------------------|------------------------------------|-----------------------|------------------------|
| UHID             | CIMS-10468                         | Visit Type/No         | OP/EPD-14037/EPD-14037 |
| Name             | Mr Tanuj Agrawal                   | Order No              | OR-26797               |
| Age/Gender       | 38 Y,2 M,28 D/Male                 | Order Date/Time       | 29-03-2024             |
| Accession Number | OPAC-3178                          | Collection Date/Time  | 29-03-2024 10:42 AM    |
| Treating Doctor  | Dr Self                            | Acknowledge Date/Time | 29-03-2024 01:32 PM    |
| Ordering Doctor  | Dr Self                            | Report Date/Time      | 29-03-2024 01:36 PM    |
| Payer Name       | Mediwheel Full Body Health Checkup | Refer By              |                        |

**Haematology**

| Service Name  | Result              | Unit          | Reference Range | Method            |
|---|---------------------|---------------|-----------------|-------------------|
| <b>BLOOD GROUP ( ABO )</b>                                      |                     |               |                 |                   |
| BLOOD GROUP (ABO)- RH TYPING                                    | <b>"A" POSITIVE</b> |               |                 |                   |
| The upper agglutination test for grouping has some limitations. |                     |               |                 |                   |
| <b>CBC (Complete Blood Count), Blood</b>                        |                     |               |                 |                   |
| Hemoglobin (Hb)   | 15.6                | gm/dl         | 13-17           | Spectrophotometry |
| TLC (Total Leukocyte Count)                                     | 5940                | /cumm         | 4000-11000      | Impedance         |
| <b>DIFFERENTIAL LEUCOCYTE COUNT</b>                             |                     |               |                 |                   |
| Neutrophils   | 48                  | %             | 40-80           |                   |
| Lymphocytes   | 42                  | %             | 20-45           |                   |
| Monocytes   | 07                  | %             | 4-10            |                   |
| Eosinophils   | 03                  | %             | 1-6             |                   |
| Basophils   | 00                  | %             | 0-1             |                   |
| RBC Count   | 5.29                | millions/cumm | 4.5-5.5         |                   |
| PCV / Hct (Hematocrit)  | <b>45.5 H</b>       | %             | 40-45           | Calculated        |
| MCV   | 86.1                | fl            | 76-96           |                   |
| MCH   | 29.5                | pg            | 27-32           |                   |
| MCHC  | 34.3                | g/dL          | 30-35           |                   |
| Platelet Count  | 2.21                | lakl/cumm     | 1.5-4.5         | Impedance         |
| RDW   | 13.2                | %             | 1-15            |                   |
| ESR (Erythrocyte Sedimentation Rate), Blood                     | 04                  | mm 1st Hr.    | 0-10            | Wintrobe          |

**Pathology**

| Service Name                               | Result | Unit   | Reference Range | Method |
|--|--------|--------|-----------------|--------|
| <b>Thyroid Profile -T3, T4, TSH, Blood</b> |        |        |                 |        |
| Triiodothyronine (T3)                      | 1.99   | ng/mL  | 0.69-2.15       | CLIA   |
| Thyroxine (T4)                             | 82.4   | ng/mL  | 52-127          | CLIA   |
| Thyroid Stimulating Hormone (TSH)          | 1.19   | uIU/mL | 0.3-4.5         | CLIA   |

**Interpretation**
**: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.
- Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 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



**URINE ANALYSIS/ URINE ROUTINE EXAMINATION, Urine**  
 All tests have technical limitations Corroborative clinicopathological interpretation is indicated. In case of any disparity in including machine error or typing the test should be repeated immediately.

**NOT VALID FOR MEDICO LEGAL PURPOSE.**

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| Service Name                   | Result      | Unit  | Reference Range | Method        |
|--------------------------------|-------------|-------|-----------------|---------------|
| <b>Physical Examination</b>    |             |       |                 |               |
| COLOUR                         | Straw Color |       |                 | Manual method |
| TRANSPARENCY                   | Clear       |       |                 | Manual        |
| SPECIFIC GRAVITY               | 1.020       |       | 1.001-1.03      | Strip         |
| PH URINE                       | 6.0         |       | 5-8             | Strip         |
| DEPOSIT                        | Absent      |       |                 | Manual        |
| <b>BIOCHEMICAL EXAMINATION</b> |             |       |                 |               |
| ALBUMIN                        | Absent      |       |                 | Strip         |
| SUGAR                          | Absent      |       |                 | Strip         |
| BILE SALTS (BS)                | Absent      |       |                 | Manual        |
| BILE PIGMENT (BP)              | Absent      |       |                 | Manual        |
| <b>MICROSCOPIC EXAMINATION</b> |             |       |                 |               |
| PUS CELLS                      | 0-1         | / hpf |                 | Microscopy    |
| EPITHELIAL CELLS               | 0-1         | / hpf |                 | Microscopy    |
| RBC'S                          | Absent      | /hpf  |                 | Microscopy    |
| CASTS                          | Absent      |       |                 | Microscopy    |
| CRYSTALS                       | Absent      |       |                 | Macroscopy    |
| BACTERIA                       | Absent      |       |                 | Macroscopy    |
| FUNGUS                         | Absent      |       |                 | Microscopy    |
| SPERMATOZOA                    | Absent      |       |                 | Microscopy    |
| OTHERS                         | Absent      |       |                 | Microscopy    |


**Clinical Biochemistry**

| Service Name                                    | Result | Unit   | Reference Range | Method     |
|---|--------|--------|-----------------|------------|
| Glucose (Fasting), Plasma                       | 107.0  | mg/dL  | 60-110          |            |
| Glucose (Post Prandial), Plasma                 | 120.0  | mg/dL  | 80-150          |            |
| <b>KFT (Kidney Profile) -I, Serum</b>           |        |        |                 |            |
| Urea, Blood                                     | 17.3   | mg/dL  | 15-50           | Urease-uv  |
| Creatinine, Serum                               | 0.77   | mg/dL  | 0.6-1.2         | Enzymatic  |
| Blood Urea Nitrogen (BUN)                       | 8.07   | mg%    | 7.5-22.0        | Calculated |
| BUN-CREATININE RATIO                            | 10.48  |        | 10-20           | Calculated |
| Sodium, Serum                                   | 135.1  | mmol/L | 135-150         | ISE        |
| Potassium, Serum                                | 3.69   | mmol/L | 3.5-5.5         | ISE        |
| Calcium, Serum                                  | 9.36   | mg/dL  | 8.7-11.0        | ISE        |
| Chloride, Serum                                 | 95.6   | mmol/L | 94-110          | ISE        |
| Uric acid, Serum                                | 4.02   | mg/dL  | 3.4-7.0         |            |
| Magnesium, Serum                                | 1.90   | mg/dL  | 1.6-2.8         |            |
| Phosphorus, Serum                               | 3.14   | mg/dL  | 2.4-5.0         |            |
| Alkaline phosphatase, Serum                     | 83.0   | U/L    | 53-165          |            |
| Albumin, Serum                                  | 3.68   | g/dL   | 3.5-5.4         |            |
| <b>LFT (Liver Function Test) Profile, Serum</b> |        |        |                 |            |
| Bilirubin Total, Serum                          | 0.64   | mg/dL  | 0.1-1.0         | DMSO       |
| Conjugated (Direct), Serum                      | 0.20   | mg%    | 0.0-0.3         | DMSO       |
| Unconjugated (Indirect)                         | 0.44   | mg%    | 0.0-0.75        | Calculated |
| SGOT/AST  | 31.5   | U/L    | 0-40            | IFCC       |
| SGPT/ALT  | 57.0 H | U/L    | 0-48            | IFCC       |



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|-----------------------------|--------|-------|--|------------|
| Gamma GT, Serum             | 22.0   | U/L   | 10-45  | IFCC       |
| Alkaline phosphatase, Serum | 83.0   | U/L   | 53-165   | IFCC       |
| Total Protein, serum        | 6.69   | gm/dl | 6.0-8.4  | Biuret     |
| Albumin, Serum              | 3.68   | g/dL  | 3.5-5.4  | BCG        |
| Globulin                    | 3.01   | g/dL  | 2.3-3.6  | Calculated |
| A/G Ratio                   | 1.22   |       | 1.0-2.3  | Calculated |
| <b>Lipid Profile, Serum</b> |        |       |  |            |
| Cholesterol, serum          | 205.0  | mg%   | Optimal: < 200 mg/dl<br>Border Line High Risk:<br>150 -240 mg/dl<br>High Risk: > 250 mg/dl   |            |
| Triglycerides, serum        | 164.0  | mg%   | Optimal: < 150 mg/dl<br>Border Line High Risk:<br>150 - 199 mg/dl<br>High Risk: 200 - 499 mg<br>/dl<br>Very High Risk: > 500 mg<br>/dl |            |
| HDL Cholesterol             | 48.1   | mg%   | Optimal: 70 mg/dl<br>Border Line High Risk: 80<br>- 100 mg/dl<br>High Risk: > 120 mg/dl  |            |
| LDL Cholesterol             | 124.10 | mg%   | Optimal: < 100 mg/dl<br>Border Line High Risk:<br>100 - 129 mg/dl<br>High Risk: > 160 mg/dl  |            |
| VLDL Cholesterol            | 32.80  | mg%   | Male : 10 - 40 mg/dl<br>Female : 10 - 40 mg/dl<br>Child : 10 - 40 mg/dl  |            |
| LDL / HDL Cholesterol ratio | 2.58   |       | 0.0-3.5  |            |




**Interpretation**

- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.
- ATP III recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.
- Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is < 400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is > 400 mg/dL.



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|--------------|--------|------|-----------------|--------|

HbA1c

#### GLYCOSYLATED HAEMOGLOBIN (HbA1c)

Method- Immunofluorescence Assay

|                                       |       |       |   |
|---------------------------------------|-------|-------|---|
| Glycosylated Hemoglobin (HbA1c)       | 5.10  | %     | <6.5 : Non Diabetic<br>6.5-7 : Good Control<br>7-8 : Weak Control<br>> 8 : Poor Control                     |
| Estimated average blood glucose (eAG) | 99.67 | mg/dl | 90-120: Excellent Control<br>121-150: Good Control<br>151-180: Average Control<br>181-210: Action Suggested |

Note:

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

2. Target goals of 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of 7.0 % may not be appropriate.

Comments:

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






-----End of the Report-----



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