

PATHOLOGY REPORT

Name:- Mr. Shri Prakash	Age :36Y/M	Date :-13/04/2024
Ref.By :- Dr. Bank Of Baroda	(E.C.No.99527)	Serial Number :- 0131

CBC (Complete Blood Count)

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
Hb (Haemoglobin)	12.0	gm/dl	12 - 17
Total Leukocyte Count	4,600	/Cumm.	4000 - 11000
RBC Count	4.67	Million/Cumm.	3.8 -5.8
PCV / Haematocrit	40.7	%	30 - 50
Platelet Count	1.68	Lakhs/c.mm	1.5 - 4.5
MCV	87.2	fl	80 - 100
MCH	26.8	pg	26 - 34
MCHC	31.9	gm/dl	31.5 - 35
Differential Leukocyte Count			
Neutrophil	50	%	40 - 70
Lymphocyte	40	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	08	%	01 -06
Basophil	00	%	<1 - 2 %
ESR	14	mm/1 st hr.	00 - 20

end of report

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KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	26.0	mg/dl	13 - 45
S. Creatinine	0.98	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	12.14	mg/dl	6.0 - 21
S. Sodium (Na ⁺)	144.3	mmol/ltr	135 - 150
S. Potassium(K ⁺)	4.98	mmol/ltr	3.5 - 5.5
S. Chloride(Cl ⁻)	101.3	mmol/ltr	94 - 110
S. Calcium	9.30	mg/dl	8.7 - 11.0
S. Uric Acid	4.51	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

BLOOD GROUPING

Grouping (ABO)	:	"B" Group
Rh Typing	:	Positive.

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LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.78	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	55.0	U/L	05 - 40
S. SGOT (AST)	48.0	U/L	05 - 40
S. GGT	45.0	U/L	05 - 45
S. Alkaline Phosphatase	101.3	U/L	Adult – 25 - 140 Children (1 – 12 yrs.) – 104 - 390
S. Total Protein	7.11	g/dl	6.0 - 8.3
S. Albumin	3.90	g/dl	3.2 - 5.0
S. Globulin	3.21	g/dl	2.8 - 4.5
S. A/G Ratio	1.21		

end of report


Signature



URMILA HEART & MULTI SPECIALITY HOSPITAL

Address

Naya Tola, Opp. Polytechnic
Muzaffarpur
Ph.: 0621-2222211
0621-2268042
Mob.: 9661179794
9471013402

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Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	190.0	mg/dl	130 - 200
S. Triglycerides	130.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	26.0	mg/dl	10 - 40
S. HDL-Cholesterol	48.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	116.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.95		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.41		1.5 - 3.5

BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	85.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	114.0	mg/dl	80 - 160

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GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	3.99	%

Mean Blood Glucose level (MBG) – 80.12 mg/dl

Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

Summary :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

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TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	139.7	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	9.01	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	4.07	µIU/mL	(0.3 - 5.5)

Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwich Competitive Chemi Luminescent Immuno Assay

REMARK :

THYROID HORMONES -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism. The expected increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland. Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism. The increase in total T4 and T3 is associated with pregnancy, oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration, which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR). a

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Urine Routine And Microscopy

<u>TEST</u>	<u>RESULTS</u>
Physical Examination	
Volume	20 ml
Colour	Straw
Specific Gravity	1.010
Appearance	Clear
pH	6.0
(Acidic)	
Chemical Examination	
Protein	Nil
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D
Microscopic Examination	
Pus Cells	1-2 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	Present (+)
Crystal/Cast	Nil
Other	Nil
end of report	


Signature



<u>Measurements</u>	<u>Normal Values</u>
Aorta 2.7	(2.0 – 3.7cm)
LV es 3.1	(2.2 – 4.0cm)
IVS ed 1.0	(0.6 – 1.1cm)
RVed	(0.7 – 2.6cm)
LVVd (ml)	
EF 60%	(54%-76%)

<u>Measurements</u>	<u>Normal values</u>
LAes 2.9	(1.9 – 4.0cm)
LV ed 4.3	(3.7 – 5.6cm)
PW (LV) 1.1	(0.6 – 1.1cm)
RV Anterior wall	(upto 5 mm)
LVVs (ml)	
IVS motion	Normal/Flat/Paradoxical

CHAMBERS:

LV **Normal/Enlarged/Clear/Thrombus/Hypertrophy**
Contraction Normal/Reduced

Regional wall motion abnormality **Absent/Present**

LA **Normal/Enlarged/Clear/Thrombus**

RA **Normal/Enlarged/Clear/Thrombus**

RV **Normal/Enlarged/Clear/Thrombus**

PERICARDIUM **Normal/Thickening/Calcification/Effusion**

COMMENTS & SUMMARY

All chambers are Normal in size
gd I LV Diastolic Dysfunction
Normal LV Systolic Function
No RWMA/LVEF=60%
No MR /AR / PR /TR
Normal Pericardium

Dr. Anil Kr Singh
 Cardiologist



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Name :-Shriprakash.

Refd.By:- Dr./Self.

Date :- 13/04/2024

Sex:- M

Thanks for the kind referral.

USG of Whole Abdomen

- Liver:-** Liver is normal in size [143.6mm] with homogenous coarse echo texture. No focal lesion seen or Intrahepatic ducts dilation seen. Movements of both domes of diaphragm appears normal
- GB:-** Gall bladder not seen.H/O Cholecystectomy.
- C.B.D:-** C.B.D. is normal in calibre.
- Pancreas:-** Pancreas normal in size shape and echotexture.
- Spleen:-** Normal in shape, size & contour . (bipolar length is 107.1 mm).
- Kidneys:-** Both kidneys are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification,hydronephrotic changes or mass lesion seen.
- UB:-** Urinary bladder is smoothly outlined. There is no calculus within.
- Prostate :-** The prostate is normal in shape and size .
- Free fluid:-** No free fluid is noted in the peritoneal cavity.

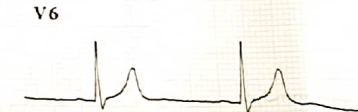
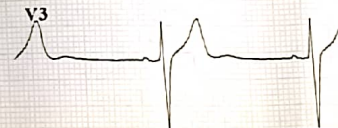
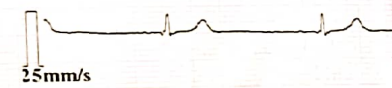
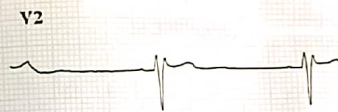
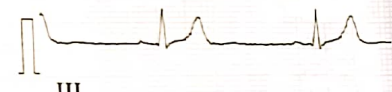
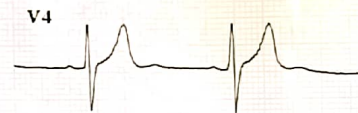
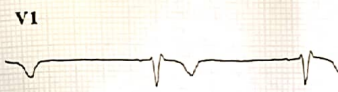
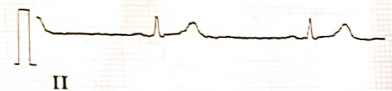
Impression :- Normal Study.


(sonologist)



10mm/mV 0.5-75Hz AC50

08-06-2005 07:24:04



25mm/s

V2.47

ID : 050608-0792
Name :
Age : 36 yr
Sex : Male
BP : mmHg
Height : cm
Weight : kg

Minnesota Code:
8-8-3
1-1-2(V1)

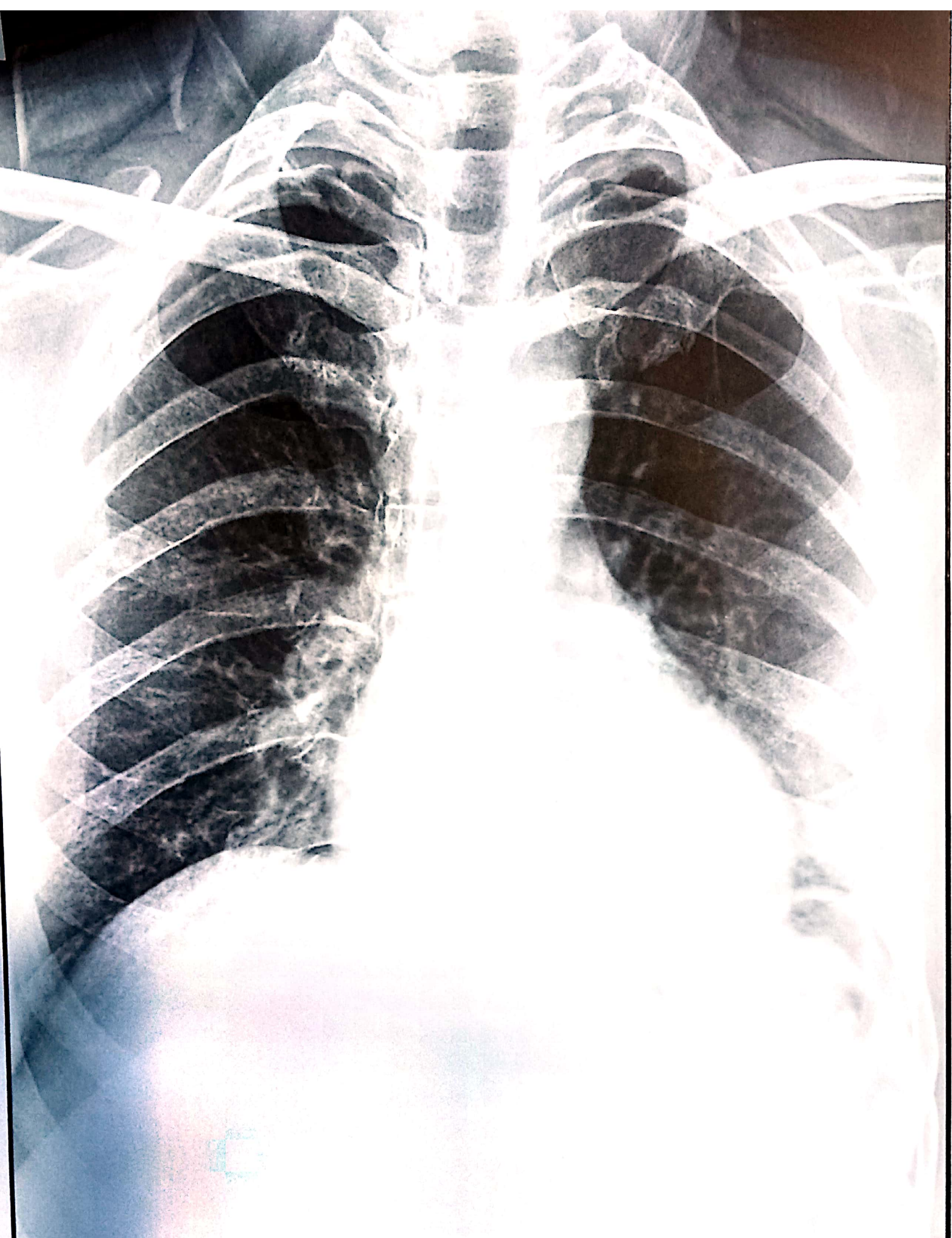
Sho & peak cath

HR : 54 bpm
P Dur : 86 ms
PR int : 138 ms
QRS Dur : 83 ms
QT/QTc int : 371/353 ms
P/QRS/T axis : 23/55/56 °
RV5/SV1 amp : 1.118/0.493 mV
RV6/SV2 amp : 1.611 mV
RV6/SV2 amp : 1.153/0.733 mV

Diagnosis Information:
811: Sinus Bradycardia
Normal ECG

Report Confirmed by:





SHRI PRAKASH
Chest PA

36 Male
13-04-24 1:37:49 PM

64.2 %
DR. A. K. SINGH

URMILA HEART & MULTISPECIALITY HOSPITAL, NAYA TOLA MUZAFFARPUR