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Youth) 77425370 23

Rajasthant Diagnostic & Medical Research Centre Jhunjhunu









### RAJASTHANI DIAGNOSTIC & MR CENTRE

### FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME	YOGESH CHOBDAR	AGE-	SEX: M	_
REF/BY:	BOB HEALTH CHECHUP	DATE	9-Mar-24	

### ULTRASONOGRAPHY WHOLE ABDOMEN

<u>Liver</u>: is normal in size, shape and **mild bright echotexture**. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

Gall bladder: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

Pancreas: is normal in size, shape and echotexture. No focal mass or lesion is detected.

Pancreatic duct is not dilated.

Rt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Lt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Spleen: is mildly enlarged in size 12.6 cm, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

<u>Urinary Bladder</u>: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

Prostate: is normal in size, regular in shape and outline. Capsule is intact.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

### IMPRESSION:

- . Grade I fatty liver.
- Mild splenomegaly.

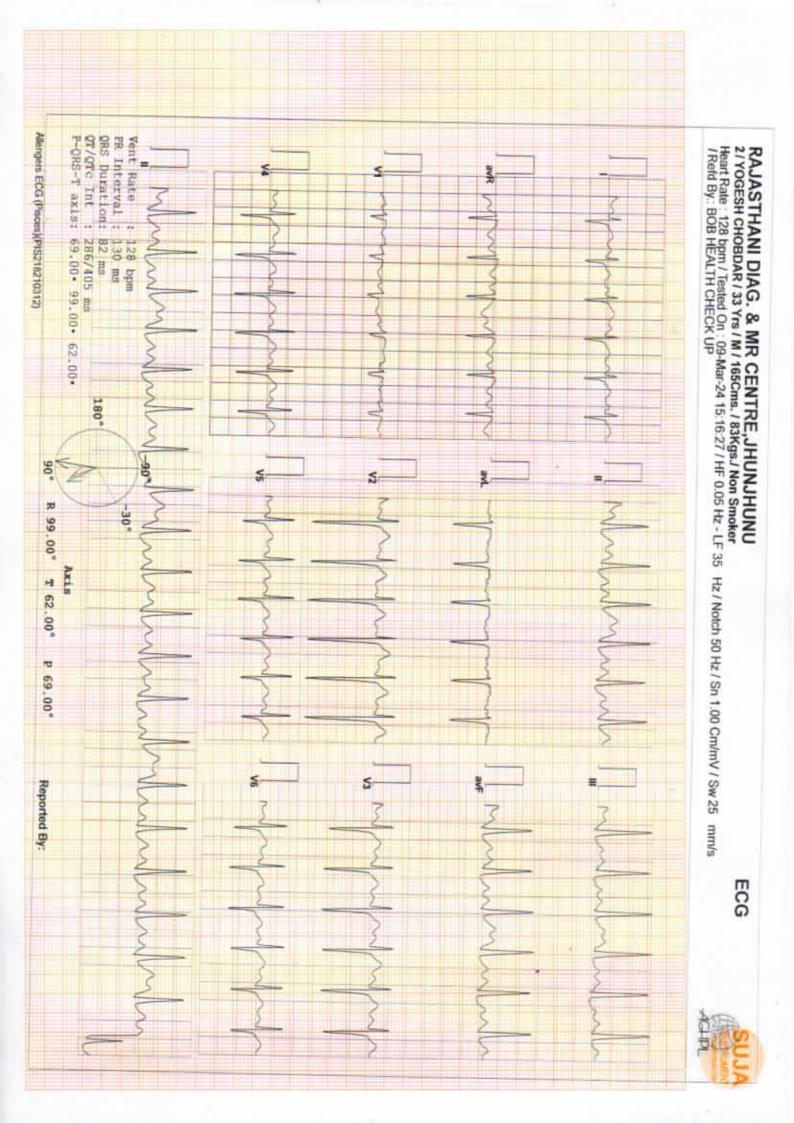
Advised: clinicopathological correlation

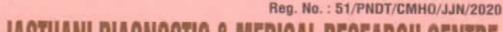
DR. ANUSHA MAHALAWAT MD RADIODIAGNOSIS

> Dr. Anusba Mahalawat MD (Radfodiagnosis ) (RMC, 38742/25457 )











### RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE



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ECG

MEMOGRAPHY



### Hematology Analysis Report

First Name: YOGESH CHOBD Semple Type:

Last Name: Gender:

Age:

Male 30 Year Department: Med Rec. No.: Sample ID: 15

Test Time: 09/03/2024 13:17

Diagnosis:

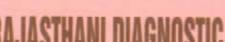
Parameter	D	Table Car Table Control of	AVC 00
	Result	Ref. Range	Unit
1 WBC	8.90	4.00-10.00	10^3/uL
2 Neu%	61.2	50.0-70.0	% WBC
3 Lym%	31.6	20,0-40.0	EDICA
4 Mon%	4.8	3.0-12.0	" UICA
5 Eos%	2.1	0.5-5.0	%
6 Bas%	0.3	0.0-1.0	%
7 Neu#	5.44	2.00-7.00	10^3/uL
8 Lym#	2.81	0.80-4.00	10^3/uL RBC
9 Mon#	0.43	0.12-1.20	10*3/uL
10 Eos#	0.19	0.02-0.50	10*3/uL
11 Bas#	0.03	0.00-0.10	10^3/uL
12 RBC	5.26	3.50-5.50	10^6/uL 0 100 200 300
13 HGB	12.9	11.0-16.0	g/dL PLT
14 HCT	45.8	37.0-54.0	%
15 MCV	45.8 87.2	80.0-100.0	fL
16 MCH	24.5 L	27.0-34.0	P9
17 MCHC	28.1 L	32.0-36.0	g/dL
18 RDW-CV	13.1	11.0-16.0	% 0 10 20 50
19 RDW-SD	47.0	35:0-56.0	IL ILS O
20 PLT	131	100-300	10^3/uL
21 MPV	11.1	6.5-12.0	fL -
22 PDW	17.1 H	9.0-17.0	The state of the s
23 PCT	0.146	0.108-0.282	X .
24 P-LCR	46.3 H	11.0-45.0	*
25 P-LCC	60	30-90	10*3/uL
	Dr. A	Mamta Khuteta M D. (Path.) Io: 4720/16260	U (RA)

Submitter: Operator: admin Approver: Draw Time: 09/03/2024 13:16 Received Time: 09/03/2024 13:16 Validated Time: Report Time: 09/03/2024 13:31 Remarks:

\*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours









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**MEMOGRAPHY** 



02:01 PM

Patient Name: YOGESH CHOBDAR

Sr. No. : 3237 Patient ID No.: 3048 Gender MALE

Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP

Registered on : 09-03-2024 11:09 AM

Collected On : 09-03-2024 11:09 AM Received On : 09-03-2024 11:09 AM

Bar Code LIS Number

Reported On : 09-03-2024

HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	15	mm/hr	20
BLOOD GROUPING (ABO & Rh.)	AB+ Positive	'So	

### HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	4.90	*CH C	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adeqate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	93.93	mg/dL	
eAG (Estimated Average Glucose)	5.21	mmol/L	

Method: Fluorescence Immunoassay Technology

Sample Type: EDTA Blood Test Performed by:-

Fully Automated (EM 200) ERBA MANNHEIM.

Gycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatement Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.



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**PATHOLOGIST** 

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Reported On : 09-03-2024 02:01 PM Bar Code 

LIS Number

### **BIO-CHEMISTRY**

Test Name	Observed Values	Units	Reference Intervals	
Glucose Fasting (Method: G00-P00)	102.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born,>1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121	
Blood Sugar PP	118.00	mg/dL	Glucose 2 h Postparandial: <120	







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### BIO-CHEMISTRY KIDNEY FUNCTION TEST

Test Name	Observed Values	Units '	Reference Intervals
Blood Urea (Method   Urease-GLDH)	22.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method: Enzymatic Creatmesse)	0.83	mg/dL	0.6-1.30
Calcium	10.94	mg/dL	8.511
Uric Acid [Method: Uricase-POD]	5.68	mg/dL	2.4-7.2

Test Name	Observed Values	Units	Reference Intervals
Gamma glutamyl transferase (GGT)	25.41	IU/L	15.0-85.0

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Received On : 09-03-2024 11:09 AM Reported On : 09-03-2024 02:01 PM

### **BIO-CHEMISTRY**

### **Liver Function Test**

Test Name	Observed	Values Units	Reference Intervals
Ca)		76	
SGOT/AST(Tech.:-UV Kinetic)	H 85.0	0 U/L	5-40
SGPT/ALT(Tech.:-UV Kinetic)	H 116.0	00 U/L	5-40
Bilirubin(Total) (Method Diazo)	0.90	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.22	2 mg/dL	00.3
Bilirubin(Indirect)	0.76	5 mg/dL	0.11.0
Total Protein	7.09	G g/dL	Adults: 6.4 - 8.3 Premature: 3.6 - 6.0 Newborn: 4.6 - 7.0 1 Week: 4.4 - 7.6 7-12 months: 5.1 - 7.3 1-2 Years: 5.6 - 7.5 2 Years: 6.0 - 8.0
Albumin(Tech.:-BCG) (Method: BCG)	3.99	gm/dL	0-4 days:2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y : 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Giobulin(CALCULATION)	7UN1113.06	gm/dL	2.5-4.5
A/G Ratio(Tech.:-Calculated)	1.30	101	1.2 - 2.5
Alkaline Phosphatase(Tech.:-Pnp Amp Kinetic)	189.0	00 U/L	108-306





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### **BIO-CHEMISTRY** LIPID PROFILE

Test Name	Observed Values	Units	Reference Intervals
Chalesterol (Method: CHOD-PAP.)	159.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	54.10	mg/dL	35-65
Triglycerides (Method GPQ)	132.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	78.50	mg/dL	10-150
VLDL Cholesterol	26.40	mg/dL	0-40





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**PATHOLOGIST** 

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Bar Code LIS Number

### THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	1.19	ng/ML	0.5 - 1.5 ng/ML
T4 (TotalThyroxine)	9.52	pg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	0.96	µlU/mL	0.35 - 5.50 µlU/mL

Sample Type : Serum

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS ) Abbott USA

### Remarks:

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.









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Reg. No.: 51/PNDT/CMHO/JJN/2020

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Patient Name: YOGESH CHOBDAR

Sr. No. : 3237 Patient ID No.: 3048 Gender MALE

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Collected On : 09-03-2024 11:09 AM Received On : 09-03-2024 11:09 AM Reported On : 09-03-2024 02:01 PM

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### URINE EXAMINATION URINE COMPLETE

Test Name Observed Values		Units	Reference Intervals
PHYSICAL		70	
Quantity		ml	
Colour	Yellow	C	
Appearance / Transparency	Clear	30	
Specific Gravity	1.020	0	
PH	6.0	1	4.5-6.5
CHEMICAL		0	
Reaction	Acidic	[7]	
Albumin	TRACE	2	
Urine Sugar	Nil		
MICROSCOPIC	D O	2	
Red Blood Cells	Nil	m.p.f.	
Pus Cells	12	/h.p.f.	
Epithelial Cells	0-1	/h.p.f.	
Crystals	Huy Nil and	/h.p.f.	
Casts	TON HINA HAVE	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	

Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

END OF REPORT >>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

333

Note: This report is not valid for medico legal purposes.



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Marsh Wester Dr. Marrito Khuli MLSZ (Port

PATHOLOGIST

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NAME : YOGESH CHOBDAR	AGE 30 /SEX M
REF.BY :BOB HEALTH CHECK UP	DATE: 09.03.2024

### X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- · Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

The

DR. ANUSHA MAHALAWAT

MD (RADIODIAGNOSIS)

or Anusha Mahalawat MD (Radiodiagnosis) (EMC, 38742/25457)





YOGESH CHOBDAR / 30 Yrs / M / 165 Cms / 83 Kg
Date: 09 - 03 - 2024 Technician: MANOJ KUMAR Examined By:

Stage	Time 00:30	Duration 0:30	mph)	Elevation 00.0	tion	tion METs 01.0		METs Rate 01.0 115	METs Rate %THR 1	METs Rate %THR 1
na "	01:33	1:03	0.00	0.00		01.0			119	119 63 % 126/82
	02:38	1:05	0.00	0.00		01.0			128 67%	128 67 % 126/82
Varm Up	03:40	1:02	00.0	00.0		01.0			127 67 %	127 67% 126/82
xStart	04:44	1:04	01.0	0.00		01.0			140 74 %	140 74 % 128/82
BRUCE Stage 1	07:44	3:00	01.7	10.0		04.7			165 87 %	165 87 % 132/84
PeakEx	09:44	2:00	02.5	12.0		06.3			181 95%	181 95 % 138/88
Recovery	10:14	0:30	01.1	0.00		01.7			183 96 %	183 96 % 138/88
Recovery	10:44	1:00	01.1	0.00		01.0			178 94 %	178 94 % 140/90
Recovery	11.44	2:00	00.0	00.0		01.0			146 77%	146 77% 136/88
Document	42.23	2.38	00.0	00.0		01.0	277	277	277	136 72 % 132/82

REPORT:

Sample Name: Stress Test Graded Exercise Treadmill

Description: Chest pain, Chest wall tenderness occurred with exercise

INDICATIONS: Chest pain.

PROCEDURE DONE: Graded exercise treadmill stress test.

PROCEDURE DONE: Graded exercise treadmill stress test.

STRESS ECG RESULTS: The initial HR was recorded as 119.0 bpm, and the maximum predicted Target Heart Rate 190.0. The BP increased at the time of generating report as 138.0/88.0 mmHg The Max Dep went upto 0.3. 0.0 Ectopic Beats were observed during the Test.

The Test was completed because of Test Complete, Heart Rate Achieved.

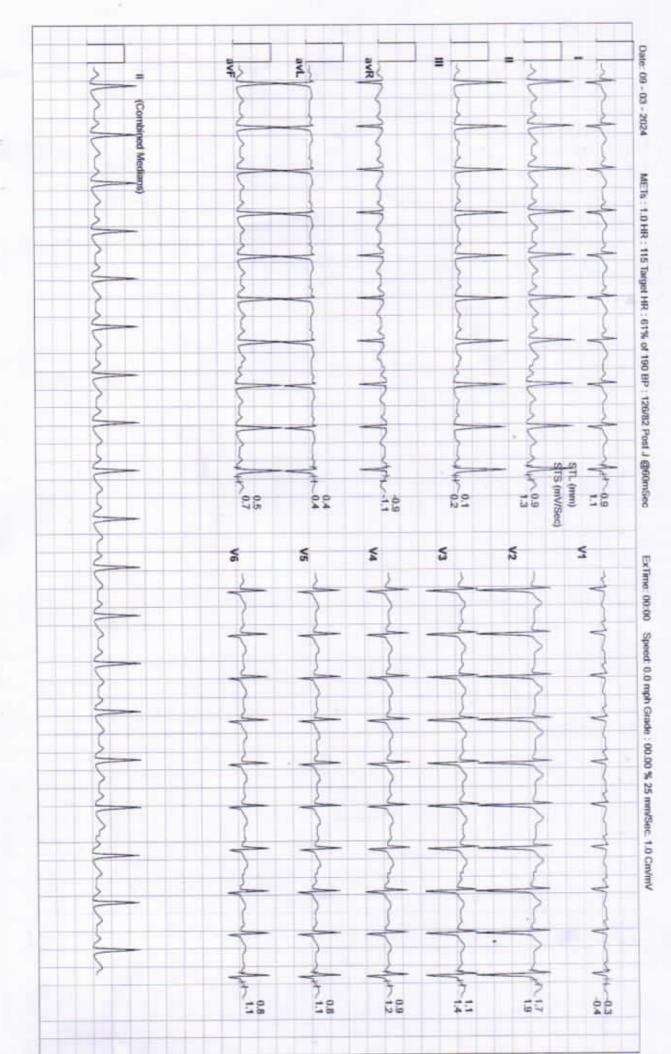
CONCLUSIONS:

- Stress test is negative for ischemia.
- Chest wall tendemess occurred with exercise
- Blood pressure response to exercise is normal.

Medical Research Centre asthani Diagnostic & unucland

### 6X2 Combine Medians + 1 Rhythm BRUCE:Supine(0:31)

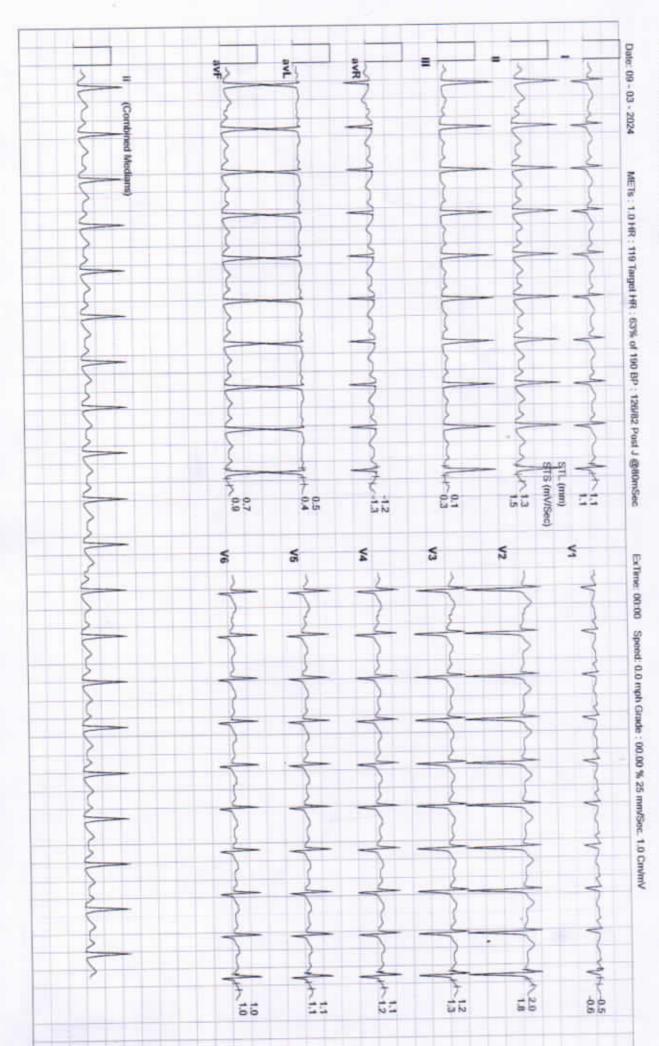




# YOGESH CHOBDAR / 30 Yrs / Male / 165 Cm / 83 Kg

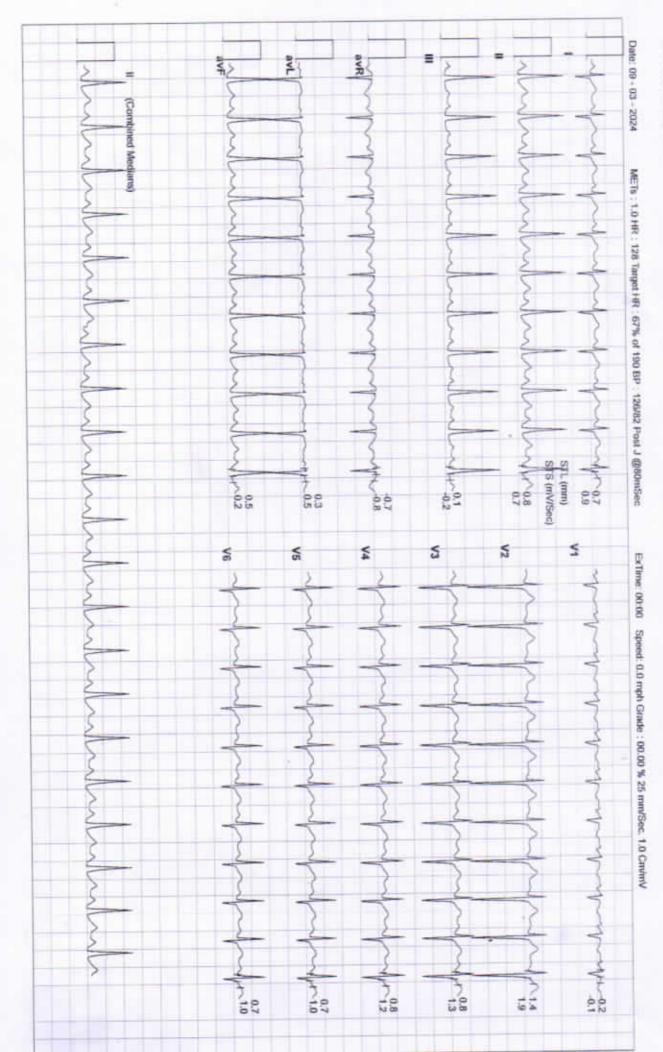
# 6X2 Combine Medians + 1 Rhythm BRUCE:Standing(1:04)





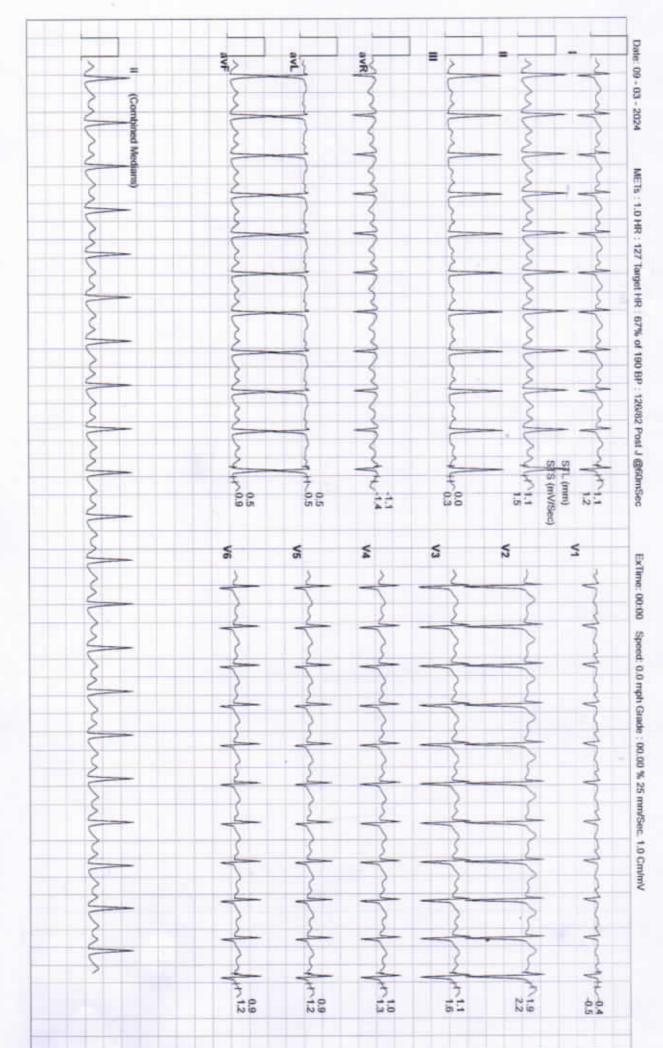
# 6X2 Combine Medians + 1 Rhythm BRUCE:HV(1:06)





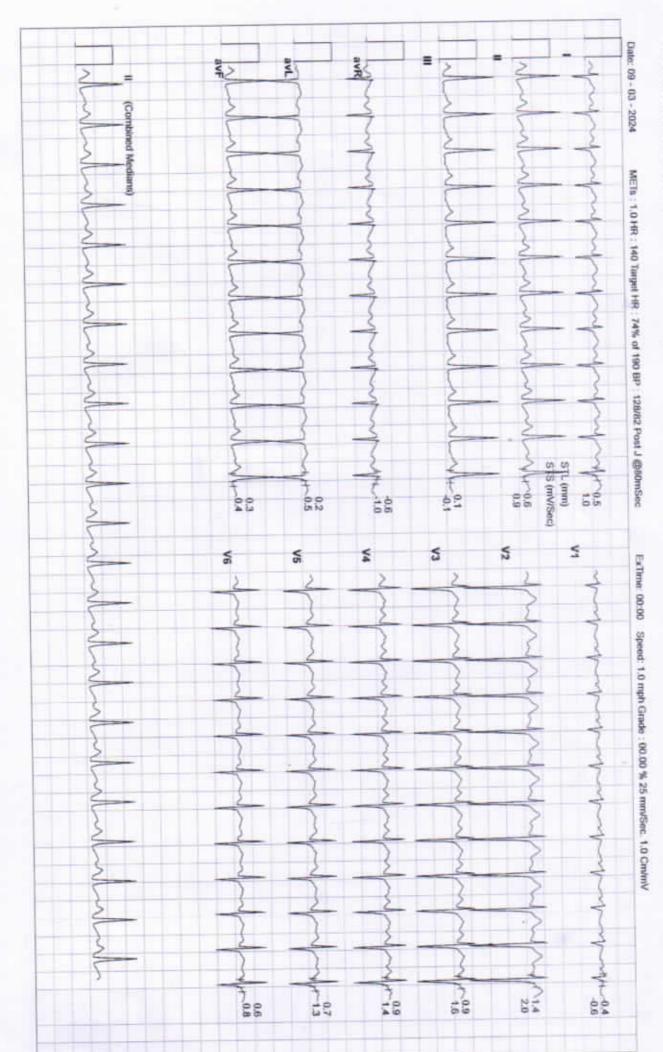
# 6X2 Combine Medians + 1 Rhythm BRUCE:Warm Up(1:02)





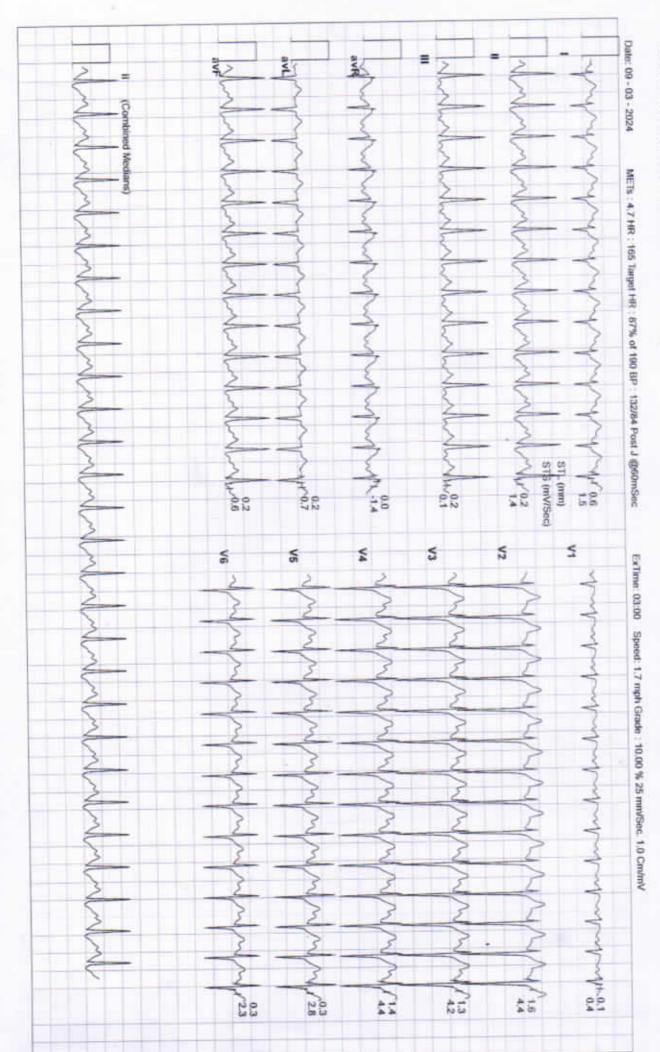
# 6X2 Combine Medians + 1 Rhythm ExStart





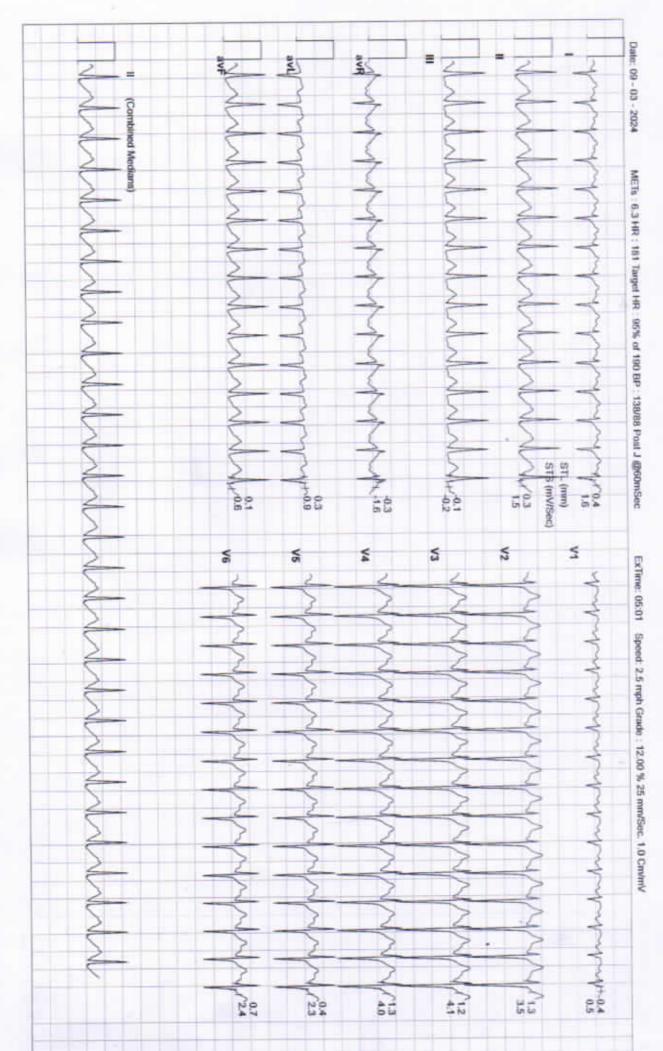
# 6X2 Combine Medians + 1 Rhythm BRUCE:Stage 1(3:00)





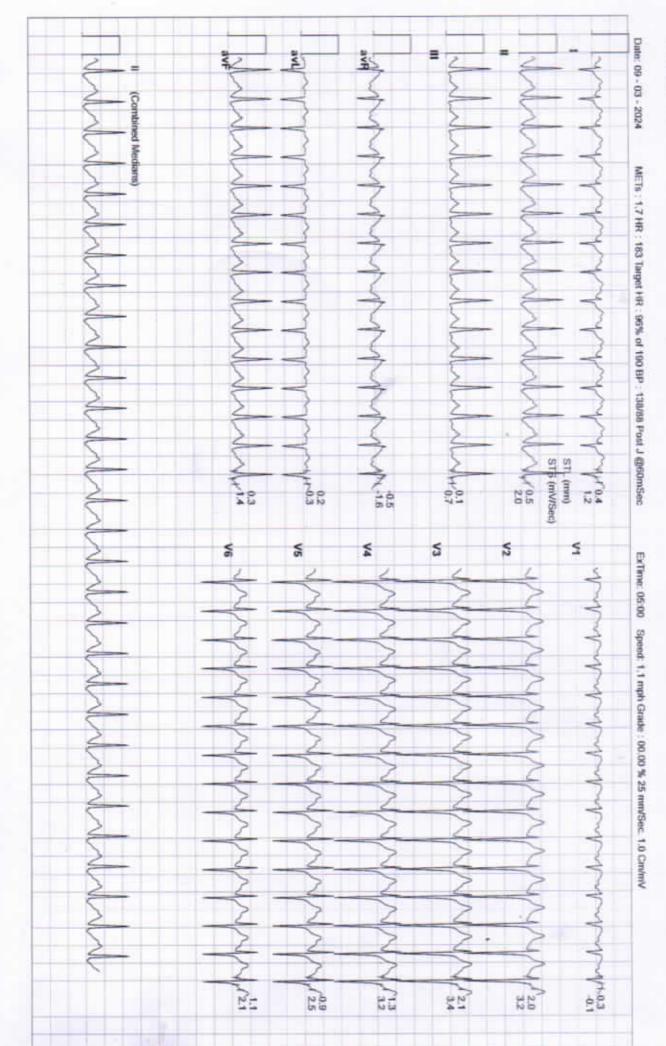
# 6X2 Combine Medians + 1 Rhythm PeakEx





# 6X2 Combine Medians + 1 Rhythm Recovery(0:30)

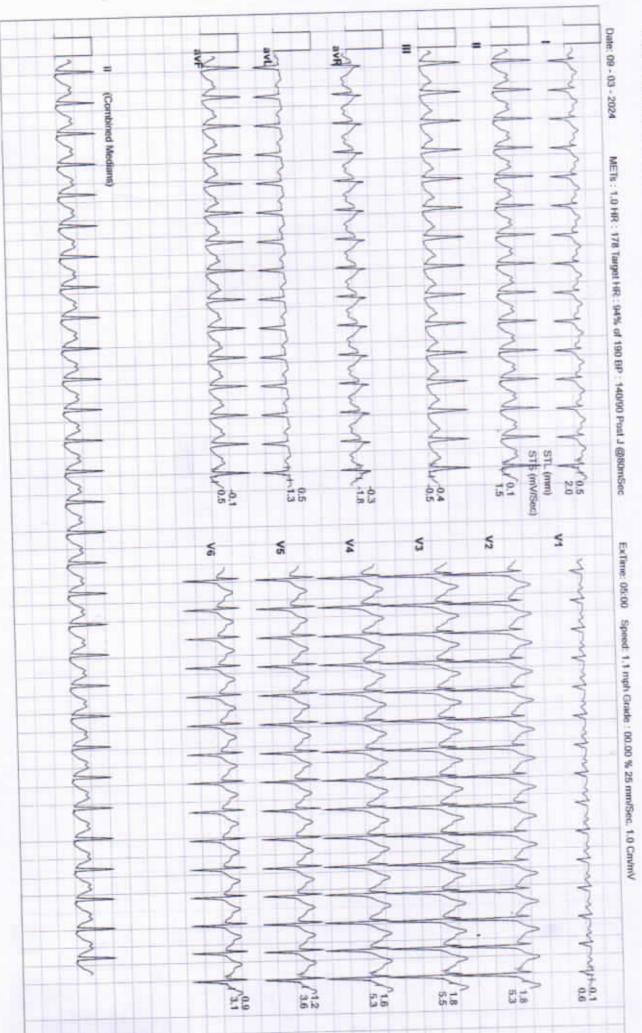




YOGESH CHOBDAR / 30 Yrs / Male / 165 Cm / 83 Kg

# 6X2 Combine Medians + 1 Rhythm Recovery(1:00)





# 6X2 Combine Medians + 1 Rhythm Recovery(2:00)



