



PREM-DHARAM HOSPITAL & DIAGNOSTICS

(Govt. Recognised Advanced 3D-4D Ultrasound and State-of-the-art Digital X-Ray Centre)

Regn. No.: RMEE1905483



10D-180 (Near Nagar Nigam Office), Vasundhara, Ghaziabad, Phone: 0120-4127778, 9899004884, E-mail : premdharamhospital@ymail.com

Name : Mr. Pankaj Kant Sadhak

Patient ID : 24/230300013

Visit No. : SR242303013

Received On : 23/03/2024 14:20

Age/Gender : 40 Y/Male

Collected On : 23/03/2024 14:20

Referred by : PREM-DHARAM HOSPITAL

Reported On : 23/03/2024 19:34

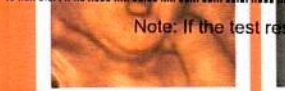
Barcode : PDH42289A

HAEMATOLOGY

COMPLETE BLOOD COUNT WITH ESR

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
HAEMOGLOBIN <i>Methodology : Colorimetric</i>	14.5	g/dl	13.0- 17.5
RED BLOOD CELL COUNT (RBC) <i>Methodology : Electrical Impedence</i>	4.74	millions/mm ³	4.5 - 6
PACKED CELL VOLUME/HEMATOCRIT (PCV) <i>Methodology : Calculated</i>	40.1	% Vol	40 - 50
MEAN CORPUSCULAR VOLUME (MCV) <i>Methodology : Calculated</i>	84.5	fL	80 - 96
MEAN CORPUSCULAR HAEMOGLOBIN (MCH) <i>Methodology : Calculated</i>	30.6	pg	27 - 33
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION (MCHC) <i>Methodology : Calculated</i>	36.2	g/dl	31 - 36
RED CELL DISTRIBUTION WIDTH (RDW-CV) <i>Methodology : Automated-Cell Counter</i>	15.2	%	11 - 16
RED CELL DISTRIBUTION WIDTH (RDW-SD) <i>Methodology : Automated-Cell Counter</i>	43.0	fL	35 - 56
TOTAL LEUCOCYTE COUNT <i>Methodology : Flow Cytometry</i>	7.76	10 ³ /μL	4 - 11
DIFFERENTIAL COUNT (DC)			
NEUTROPHILS	48	%	40 - 75
LYMPHOCYTES	45	%	20 - 45
EOSINOPHILS	03	%	0 - 6
MONOCYTES	04	%	0 - 10
BASOPHILS	00	%	0 - 1
ABSOLUTE NEUTROPHIL COUNT (ANC) <i>Methodology : Calculated</i>	3.76	10 ³ /μL	2 - 8
ABSOLUTE LYMPHOCYTE COUNT (ALC) <i>Methodology : Calculated</i>	3.53	10 ³ /μL	0.8 - 7
ABSOLUTE EOSINOPHIL COUNT (AEC) <i>Methodology : Calculated</i>	0.21	10 ³ /μL	0.02 - 0.8

Barcode



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- 3D/4D Ultrasound
- Whole Body Color Doppler
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- ECG-3 Channel

FOR TELEPHONIC APPOINTMENT RADIOLOGY : 8287900395 (9 AM - 2:30 PM, 5:30 PM - 8:45 PM)

FOR ICU & AMBULANCE ENQUIRY : 8287900395

FOR OPD APPOINTMENT : 8287900395



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ABSOLUTE MONOCYTE COUNT (AMC)	0.28	$10^3/\mu\text{L}$	0.12 - 1.2
<i>Methodology : Calculated</i>			
ABSOLUTE BASOPHIL COUNT (ABC)	00	$10^3/\mu\text{L}$	0 - 0.1
<i>Methodology : Calculated</i>			
PLATELET COUNT	162	$10^3/\mu\text{L}$	150 - 450
<i>Methodology : Electrical Impedence</i>			
MEAN PLATELET VOLUME (MPV)	9.1	fL	7 - 12
<i>Methodology : Electrical Impedence</i>			
PLATELET DISTRIBUTION WIDTH (PDW)	15.9	fL	9 - 17
<i>Methodology : Calculated</i>			
PCT(PLATELET CRIT)	0.14	%	0.108 - 0.282
<i>Methodology : Calculated</i>			
P-LCR	23.5	%	11 - 45
<i>Methodology : Calculated</i>			
P-LCC	38	$10^9/\text{L}$	30 - 90
<i>Methodology : Calculated</i>			
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm in 1st hr	0 - 10
<i>Methodology : Westergreen</i>			

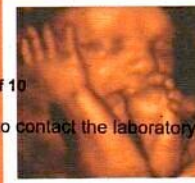
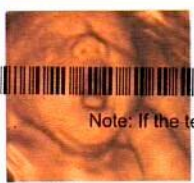
Sample Type : Whole Blood-EDTA

*** End Of Report ***

Processed by : Nisha Sharma

Verified by : Tabassum

Dr. Vivek Kapoor
Consultant Pathologist



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CLINICAL BIOCHEMISTRY

LIVER FUNCTION TEST

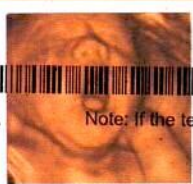
Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
TOTAL BILIRUBIN <i>Methodology : Diazo Method</i>	0.24	mg/dL	0.2 - 1.2
DIRECT BILIRUBIN <i>Methodology : Diazo Method</i>	0.16	mg/dL	0 - 0.3
INDIRECT BILIRUBIN <i>Methodology : Calculated</i>	0.08	mg/dL	
SGOT/AST <i>Methodology : IFCC</i>	26.2	U/L	0 - 40
SGPT/ALT <i>Methodology : IFCC</i>	37.1	U/L	0 - 35
Comments : KINDLY CORRELATE CLINICALLY			
ALKALINE PHOSPHATASE <i>Methodology : IFCC</i>	95.6	U/L	40 - 130
TOTAL PROTEIN <i>Methodology : Biuret</i>	7.7	g/dl	6 - 8.3
SERUM ALBUMIN <i>Methodology : BCG</i>	3.91	g/dl	3.2 - 5.2
GLOBULIN SERUM <i>Methodology : Calculated</i>	3.79	g/dl	2.3 - 4.5
A/G RATIO <i>Methodology : Calculated</i>	1.03	Ratio	1 - 2.5

Sample Type : serum

*** End Of Report ***

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CLINICAL BIOCHEMISTRY

RENAL FUNCTION TEST

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
BLOOD UREA <i>Methodology : Urease</i>	22.1	mg/dL	10 - 45
BLOOD UREA NITROGEN (BUN) <i>Methodology : Calculated</i>	10	mg/dL	5 - 21
SERUM CREATININE <i>Methodology : Jaffe Kinetic</i>	0.79	mg/dL	0.7 - 1.4
SODIUM - SERUM <i>Methodology : ISE</i>	152.6	meq/L	135 - 155
POTASSIUM - SERUM <i>Methodology : ISE</i>	5.24	meq/L	3.5 - 5.5
CHLORIDE - SERUM <i>Methodology : ISE</i>	103.6	mmol/L	98 - 106
CALCIUM - SERUM <i>Methodology : Arsenazo</i>	9.25	mg/dL	8.6 - 11
EGFR	140	mL/min/1.73 m ²	90 - 180 > = 90 : Normal 60 - 89 : Mild Decrease 45 - 59 : Mild to Moderate Decrease 30 - 44 : Moderate to Severe Decrease 15 - 29 : Severe Decrease
URIC ACID - SERUM <i>Methodology : URICASE</i>	6.09	mg/dL	3.5 - 7.2

Sample Type : serum

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Name : Mr. Pankaj Kant Sadhak	Patient ID : 24/230300013
Visit No. : SR242303013	Received On : 23/03/2024 14:20
Age/Gender : 40 Y/Male	Collected On : 23/03/2024 14:20
Referred by : PREM-DHARAM HOSPITAL	Reported On : 23/03/2024 19:34
	Barcode : PDH42289A

CLINICAL BIOCHEMISTRY

LIPID PROFILE

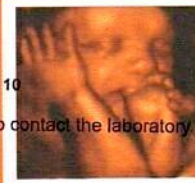
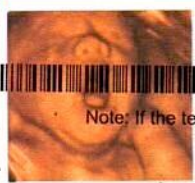
Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
TOTAL CHOLESTEROL	253.8	mg/dL	1-200 Desirable < 200 Borderline high risk 200 - 240 High risk > 240
<i>Methodology : CHO-POD</i>			
Comments : KINDLY CORRELATE CLINICALLY			
HDL CHOLESTEROL	59.6	mg/dL	NO RISK : - > 60.0 MODERATE RISK :- 35 - 55 HIGH RISK : - < 35.0
<i>Methodology : Direct</i>			
LDL CHOLESTEROL	140.80	mg/dL	0 - 130 Desirable < 130 Borderline high risk 130 - 160 High risk > 160
<i>Methodology : Calculated</i>			
Comments : KINDLY CORRELATE CLINICALLY			
VLDL	53.40	mg/dL	0 - 45
<i>Methodology : Calculated</i>			
TRIGLYCERIDES (TG) - SERUM	267	mg/dL	0 - 200 Desirable: < 200 (fasting) Borderline high: 200 - 400 Elevated > 400
<i>Methodology : GPO-POD</i>			
Comments : KINDLY CORRELATE CLINICALLY			
CHOL/HDL Ratio	4.26	Ratio	3.5 - 5.5
<i>Methodology : Calculated</i>			
LDL/HDL Ratio	2.36	mg/dL	2.5 - 3.5
<i>Methodology : Calculated</i>			
Sample Type : serum			

*** End Of Report ***

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Dr. Vivek Kapoor

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CLINICAL BIOCHEMISTRY

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
PLASMA GLUCOSE FASTING (FBS)	91.2	mg/dL	70 - 110

Methodology : Hexokinase

Interpretation Notes:

Interpretation (In accordance with the American diabetes association guidelines):

- A fasting plasma glucose level below 100 mg/dL is considered normal.
- A fasting plasma glucose level between 100-126 mg/dL is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood sugar test (after consumption of 75 gm of glucose) is recommended for all such patient.
- A fasting plasma glucose level of above 126 mg/dL is highly suggestive of a diabetic state. A repeat fasting test is strongly recommended for all such patients. A fasting plasma glucose level in excess of 126 mg/dL on both the occasions is confirmatory of a diabetic state.

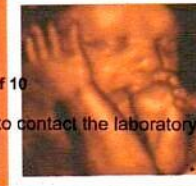
Sample Type : Plasma

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HAEMATOLOGY

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
BLOOD GROUP, RH FACTOR			
<i>Methodology : Forward & Reverse</i>			
Blood Grouping	"O"		
RH Typing	POSITIVE		

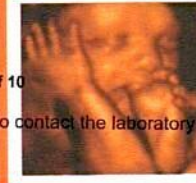
Sample Type : Whole Blood-EDTA

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HAEMATOLOGY

HbA1c

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
GLYCOSYLATED HAEMOGLOBIN(HbA1c)	4.65	%	4.5 - 6.0 Good Control : 6.1-7.0 Fair Control : 7.1-9.0 Poor Control : >9.0
ESTIMATED AVERAGE GLUCOSE(eAG)	86.75	mg/dL	90 - 120 Excellent Control 121 - 150 Good Control 151 - 180 Average Control 181 - 210 Action Suggested > 211 Panic Value

Methodology : HPLC

Methodology : Calculated

Sample Type : Whole Blood-EDTA

Interpretation Notes:

In vitro quantitative determination of HbA1c in whole blood is utilized in long term monitoring of glycemia. The HbA1c level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose. It is recommended that the determination of HbA1c be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy. Results of HbA1c should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Note: If variant hemoglobin is observed in HbA1c HPLC screen, HbA1c levels may not truly represent in vivo condition. In such condition HbA1c analysis by HPLC may not be the method of choice. You are advised to consult your referring physician and discuss the alternative tests as suggested below.

Advised:

1. To follow patient for glycemic control test like fructosamine or glycated albumin may be performed instead. 2. Hemoglobin HPLC screen to analyze abnormal hemoglobin variant.

estimated Average Glucose (eAG) :

estimated Average Glucose (eAG) based on value calculated according to National Glycohemoglobin Standardization Program (NGSP) criteria.

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IMMUNOLOGY

THYROID PROFILE

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
TOTAL TRIIODOTHYRONINE (T3) <i>Methodology : Chemiluminescence Immunoassay(CLIA)</i>	0.89	ng/dL	0.70-2.04
TOTAL THYROXINE (T4) <i>Methodology : Chemiluminescence Immunoassay(CLIA)</i>	7.84	ug/dl	4.5 - 12
THYROID STIMULATING HORMONE (TSH)	1.14	uIU/mL	0.35 - 5.50

Newborns: 0.70 - 15.2
 Peadiatric:
 2weeks-4 months :1.7-9.1
 <12 months : 1.36 - 8.8
 1- 6 years : 0.85 - 6.5
 7-12 years : 0.28 - 4.3
 Pregnancy:
 1st Trimester: 0.1-2.5
 2nd&3rd Trimester:0.2-3.0

Methodology : Chemiluminescence Immunoassay(CLIA)

Sample Type : serum

Interpretation Notes:

- 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
 - Physiological rise in Total T3/T4 levels is seen in pregnancy and in patients on steroid therapy.

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Verified by : Nisha Sharma MSC MB

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CLINICAL PATHOLOGY

Test Name	Obtained Value	Units	Bio. Ref. Intervals(Age/Gender specific)
URINE ROUTINE			
PHYSICAL EXAMINATION			
Quantity	15	ml	-
colour	PALE YELLOW		-
Appearance	CLEAR		-
pH	6.0		4.5 - 8
Specific Gravity	1.025		1.005 - 1.025
MICROSCOPIC EXAMINATION			
Pus Cells	1-2	/HPF	1 - 3
RBC CELLS	NIL	/HPF	-
Epithelial Cells	1-2	/HPF	1 - 2
Casts	ABSENT	/Hpf	-
Crystals	ABSENT	/Hpf	-
CHEMICAL EXAMINATION			
Albumin/Protein	ABSENT		-
Glucose	ABSENT		-
Urobilinogen	ABSENT		-
Blood	ABSENT		-
Nitrite	ABSENT		-
Leucocyte	ABSENT		-

Interpretation Notes:

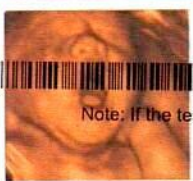
Sample Type : URINE

*** End Of Report ***

Processed by : Nisha Sharma

Verified by : Tabassum

Dr. Vivek Kapoor
Consultant Pathologist



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Note: If the test results are alarming or unexpected, Client is advised to contact the laboratory immediately for possible remedial action.

- 3D/4D Ultrasound
- Whole Body Color Doppler
- Digital X-Ray (24 Hours)
- 2D Echocardiography
- ECG-3 Channel

FOR TELEPHONIC APPOINTMENT RADIOLOGY : 8287900395 (9 AM - 2:30 PM, 5:30 PM - 8:45 PM)

FOR ICU & AMBULANCE ENQUIRY : 8287900395

FOR OPD APPOINTMENT : 8287900395

ID: 9532

MADHSHREE

Female 40Years

23-03-2024 11:09:56 PM

HR : 63 bpm

P : 124 ms

PR : 190 ms

QRS : 85 ms

QT/QTc : 396/407 ms

P/QRS/T : -26/49/27 °

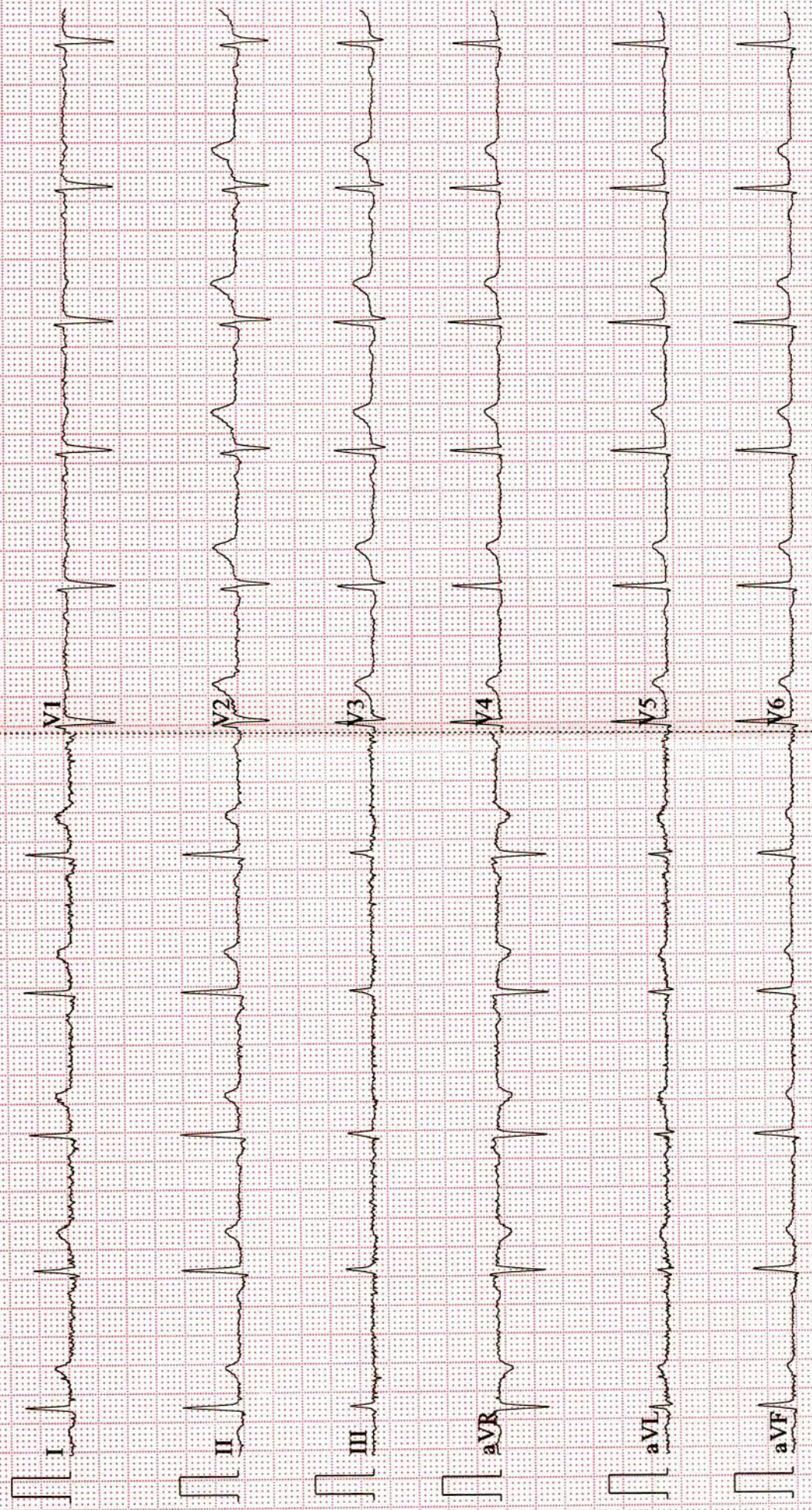
RV5/SVI : 0.972/0.820 mV

Diagnosis Information:

Sinus Rhythm

Prolonged P-wave

Report Confirmed by:





PREM-DHARAM HOSPITAL & DIAGNOSTICS

(Govt. Recognised Advanced 3D-4D Ultrasound and State-of-the-art Digital X-Ray Centre)

Regn. No.: RMEE1905483



10D-180 (Near Nagar Nigam Office), Vasundhara, Ghaziabad, Phone: 0120-4127778, 9899004884, E-mail : premdharamhospital@ymail.com

Date : 23/03/2024

Receipt No. : 9531

Pt.ID No. : PAT/22_23/2202!

Patient Name : Mr. PANKAJ KANT SADAK

Age : 42 Y 0 M 0 D

Sex : Male

Ref.By : PREM DHARAM HOSPITAL

XRAY CHEST PA

Bilateral lung fields show no obvious parenchymal lesion.

Trachea is central.

Hila and mediastinum are unremarkable.

Both domes of diaphragm are normal.

Both cardiophrenic and costophrenic angles are normal.

Cardiac size is normal.

Bony thoracic cage appears normal.

ADVISED: CLINICOPATHOLOGICAL CORRELATION.

Note: (1) This report is a professional opinion based on imaging findings. NOT valid for medico-legal purposes.
(2) In case of any discrepancy due to machine error or typing error, please get it rectified immediately.

Dr. Nidhi Tyagi
Consultant Radiologist



- 3D/4D Ultrasound
- Whole Body Color Doppler
- Digital X-Ray (24 Hours)
- 2D Echocardiography
- ECG-3 Channel

Page 1 of 1

FOR TELEPHONIC APPOINTMENT RADIOLOGY : 8287900395 (9 AM - 2:30 PM, 5:30 PM - 8:45 PM)

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(Govt. Recognised Advanced 3D-4D Ultrasound and State-of-the-art Digital X-Ray Centre)

Regn. No.: RMEE1905483



10D-180 (Near Nagar Nigam Office), Vasundhara, Ghaziabad, Phone: 0120-4127778, 9899004884, E-mail : premdharamhospital@gmail.com

Date	23/03/2024	Srl No.	7	Pt. Id.	PD/2303202406
Name	MR. PANKAJ KANT SADHAK	Age	42 Yrs.	Sex	M
Ref. By	PREM DHARAM HOSPITAL				

WHOLE ABDOMEN MALE

Liver is normal in size, outline and echopattern. Vascular channels are clear. No evidence of I.H.B.D. No focal SOL noted. Portal vein is normal in course and caliber.

Gall Bladder is partially distended with normal wall thickness. Lumen is clear. CBD is normal.

Spleen is normal in size (measures approximately 102.08 mm), shape and shows homogeneous echotexture. No focal SOL noted.

Pancreas shows normal outline and echopattern. No focal SOL noted. Pancreatic duct is not dilated.

Retroperitoneum No evidence of significant retroperitoneal lymphadenopathy noted.

Right Kidney is normal in size (measures approximately 92.75X46.43 mm), outline and parenchymal echopattern. Cortico-medullary differentiation is well preserved. Pelvi-calyceal system is compact. No intra-renal calculus is seen.

Left Kidney is normal in size (measures approximately 101.11X56.42 mm), outline and parenchymal echopattern. Cortico-medullary differentiation is well preserved. Pelvi-calyceal system is compact. No intra-renal calculus is seen.

A tiny anechoic cyst measuring approximately 13.08x12.95 mm seen at mid pole of left kidney.

Urinary Bladder is partially distended and appears anechoic. The outline is smooth with mildly echogenic walls. The bladder wall thickness appears normal. There is no evidence of any debris or echogenic calculus in the bladder.

Prostate is normal in size (measuring approximately 27.5X36.6X32.5 mm) vol 17.12cc, shows normal outline and echopattern. No focal SOL noted.

Bowel loops show no abnormal dilatation or bowel wall thickening.

No free fluid seen in visualized peritoneal or pleural cavity.

IMPRESSION:

USG WHOLE ABDOMEN REVEALS NO SIGNIFICANT SONOGRAPHIC ABNORMALITY.

Clinical and lab correlation is recommended for further evaluation.

Dr. NIDHI TYAGI
CONSULTANT RADIOLOGIST



- 3D/4D Ultrasound
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FOR OPD APPOINTMENT : 8287900395

PREM DHARAM HOSPITAL & DIAGNOSTIC

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.2 23.03.2024
Tib 0.2 12:04:12 PM
MI 1.1 C1 5 RS
27Hz/18.2cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn 15
C9/M7
FF2/E2
SRI II 2/CRI 3

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.1 23.03.2024
Tib 0.1 12:04:56 PM
MI 1.1 C1 5 RS
31Hz/15.6cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn -2
C9/M7
FF2/E2
SRI II 2/CRI 3



1 D 92.75mm
2 D 46.43mm

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.1 23.03.2024
Tib 0.1 12:05:42 PM
MI 1.1 C1 5 RS
31Hz/15.6cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn -5
C9/M7
FF2/E2
SRI II 2/CRI 3

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.1 23.03.2024
Tib 0.1 12:06:12 PM
MI 1.1 C1 5 RS
31Hz/15.6cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn 10
C9/M7
FF2/E2
SRI II 2/CRI 3



1 D 102.08mm
2 D 101.11mm
3 D 56.42mm

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.1 23.03.2024
Tib 0.1 12:06:57 PM
MI 1.1 C1 5 RS
34Hz/14.2cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn 10
C9/M7
FF2/E2
SRI II 2/CRI 3

PANKAJ KANT/42,
PD/2303202406

PREM DHARAM USG & COLOR DOPPLI TIs 0.2 23.03.2024
Tib 0.2 12:07:56 PM
MI 1.1 C1 5 RS
29Hz/16.9cm
64/7/1
ABD CRI/ABD
HIL 7:10 - 3:06
AO 98%
Gn -4
C9/M7
FF2/E2
SRI II 2/CRI 3



1 D1 2.75cm
2 D2 3.66cm
3 D3 3.25cm
Vol 17.128cm³

1 D 13.08mm
2 D 12.95mm