




# BERLIN DIAGNOSTICS & DAY CARE



Name : RAHUL .  
 Age/Gender : 35 Years/Male  
 UHID : QL249245587  
 Refer By :  
 Wing : BERLIN GENERAL HOSPITAL RANCHI  
 Client Name : BDDC - CGHS

Reg.No. :   
 240127QLBG014  
 Reg.Date : 27-Jan-24 02:59 PM  
 Received On : 27-Jan-24 02:59 PM  
 Reported On : 28-Jan-24 01:59 PM

Test Particular	Result	Unit	Biological Reference Interval
<b>Fasting Plasma Glucose</b> Method: (By GOD-POD Method)	65	mg/dl	( 65 - 110 )
<b>Post Prandial Plasma Glucose</b> Method: (By GOD-POD Method)	120	mg/dl	( 75 - 140 )

\*\*\*\*\*



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 Supplied Sample

  
 Dr. Suchismita Panda  
 MD (Biochemistry)

P.T.O.



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Test Particular	Result	Unit	Biological Reference Interval
Fasting Urine Sugar	Nil		

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*Richa Verma*  
**Dr. Richa Verma**  
 MBBS, MD (Pathology)

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Page : 2 | 8



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<b>LIPID PROFILE :-</b>			
Serum Triglyceride Method: (By Enzymatic, end point)	97	mg/dl	(< 150)
Serum Cholesterol Method: (By Oxidase, Esterase, Peroxidase)	242	mg/dl	(125 - 200)
Serum HDLc (Direct) Method: (By PTA/MgC12, Reflectance photometry)	54	mg/dl	(30 - 65)
Serum LDLc (Direct) Method: (By Direct Homogeneous, Spectrophotometry)	169	mg/dl	(85 - 150)
VLDL	19	mg/dl	(5 - 40)
LDL & HDL Ratio Method: (By Calculated)	3.13		(1.5 - 3.5)
Total Cholesterol & HDL Ratio Method: (By Calculated)	4.48		Low Risk(0 - 3) High Risk(5 - 10)
<b>LFT :-</b>			
Serum Bilirubin (Total) Method: (By Diphylline, Diazonium Salt)	0.7	mg/dl	(0.2 - 1.3)
Serum Bilirubin (Direct) Method: (By Diphylline, Diazonium Salt)	0.1	mg/dl	(0.1 - 0.4)
Serum Bilirubin (Indirect)	0.60000	mg/dl	(0.2-1.1)
S G O T (AST) Method: By IFCC	30.2	u/l	(17 - 59)
S G P T (ALT) Method: By IFCC	39.1	u/l	(21-72)
Serum Alkaline Phosphate (ALP) Method: By IFCC	87.0	u/l	Adult (38 - 126)
Serum Protein Method: By Biuret Method	7.8	gm/dl	Adult( 6.2 - 8.2 ) Children( 5.6 - 8.4 )
Serum Albumin Method: By BCG, Dye Binding Method	4.7	gm/dl	Newborn Children(2.4 - 4.8) Adult(3.5 - 5.0)
Serum Globulin	3.10		Adult(2.3 - 3.6)
Serum Albumin / Globulin (A / G) Method: By BCG	1.52	gm/dl	(1 - 2.3)
<b>HBA1C ( Nephelometry )</b>			
HBA1C Method: HPLC	5.9	%	Non diabetic level( < 6.0 ) Goal( < 7.0 ) Action Suggested( > 8.0 )
Average Blood Glucose (eAg)	123.34	mg/dl	

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Test Particular	Result	Unit	Biological Reference Interval
<b>KFT</b>			
Serum Urea Method: GLDH,Kinetic Assay	17.8	mg/dl	Adult ( 17 - 43 ) New Born ( 8.4 - 25.8 ) Infant ( 10.8 - 38.4 )
Serum Creatinine Method: Modified Jaffe, Kinetic	0.8	mg/dl	Male: ( 0.72-1.18 ) Neonate : ( 0.26 - 1.01 ) Infant { 2months - less than 3 yrs } : ( 0.15 - 0.37 ) Children { 3 yrs - less than 15 yrs } : ( 0.24 - 0.73 )
Serum Sodium (Na+) Method: By Indirect ISE	138.8	mmol/L	( 136 - 145 )
Serum Potassium (K+) Method: By Indirect ISE	5.0	mmol/L	( 3.5 - 5.1 )
Serum Calcium Method: By uricase-Colorimetric	10.1	mg/dl	( 8.4 - 10.2 )
Serum Uric Acid Method: By uricase-Colorimetric	5.1	mg/dl	( 3.5 - 8.5 )
Serum Urea Nitrogen Method: BIOCHEMISTRY	8.3	mg/dl	( 5 - 20 )

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Test Particular	Result	Unit	Biological Reference Interval
<b>E.S. R.</b> 1st. Hr. E.S. R. Method: WESTERGREN'S METHOD	14	mm	(< 20)
<b>CBC :-</b> Haemoglobin Method: ( By Sahli's Method )	14.5	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5) Children (11 - 13) Children (1-6) : (12 - 14) Children (6-12) : (12 - 14)
P. C. V.	43.6	%	( 35 - 45 )
Total Platelet Count	1.7	Lacs Per cmm	(1.5 - 4)
Total R. B. C. Count	4.6	mill./uL	Women (4.2 - 5.4) Male (4.7 - 6.1) Children (4.6 - 4.8)
Total W. B. C. Count Method: Flow Cytometry	5,000	Per cmm	Adult :-Adult :- (4,000 - 11,000) New Born (10,000 - 26,000) (1-4) Years : (6,000 - 18,000) (5-7) Years : (5,000 - 15,000) (8-12) Years : (4,500 - 12,500)
M. C. V.	93.0	fl	(76 - 96)
MCH	31.0	pg	(22 - 32)
MCHC	33.4	g/dl	(30 - 35)
Neutrophils	55	%	( 40 - 70 )
Eosinophils	04	%	( 0.5 - 7 )
Basophils	00	%	( 0 - 1 )
Lymphocytes	40	%	( 15 - 40 )
Monocytes	01	%	( 0 - 6 )

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 Dr. Sampashree Nayak  
 M.D. (Path)


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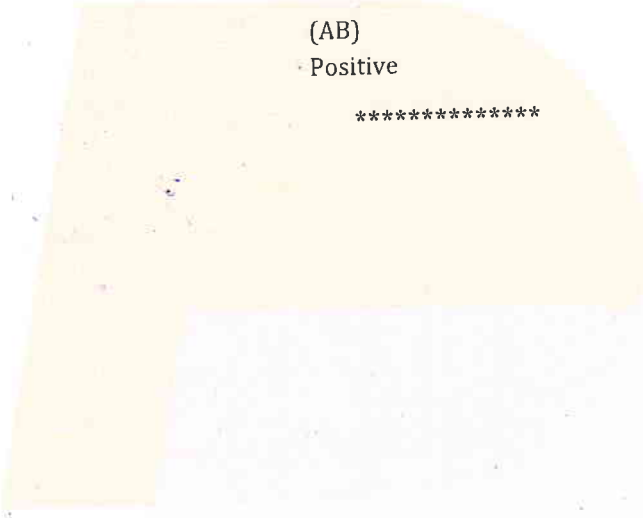
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 Received On : 27-Jan-24 02:59 PM  
 Reported On : 28-Jan-24 05:01 PM

Test Particular	Result	Unit	Biological Reference Interval
<b>Blood Grouping</b>	(AB)		
Grouping	Positive		
Rh Typing ( D )	*****		



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Test Particular	Result	Unit	Biological Reference Interval
<b>Thyroid Profile</b>			
Thyroid Function Test [By CLIA] :-			
Tri-iodo Thyronine (T3)	0.83	ng/ml	(0.8 - 2.0) 11-15 Years ( 0.83 - 2.13 ) 1-10 Years ( 0.94 - 2.69 ) 1-12 Months ( 1.05 - 2.45 ) 1-7 Days ( 0.36 - 3.16 ) 1-4 Weeks ( 1.05 - 3.45 )
Thyroxine (T4)	6.94	µg/dl	(5.1 - 14.1) 1-12 Months ( 5.9 - 16 ) 1-7 Days ( 11 - 22 ) 1-4 Weeks ( 8.2 - 17 ) 1-10 Years ( 6.4 - 15 ) 11-15 Years ( 5.5 - 12 )
Thyroid Stimulating Hormone (T S H)	4.18	µIU/ml	(0.27 - 5.01) 1-4 Weeks ( 1 - 39 ) 1-7 Days ( 1 - 20 ) 1-12 Months ( 0.5 - 6.5 ) 1-10 Years ( 0.6 - 8 )

Mild to moderate degree of elevation normal T3&T4 levels indicates impaired thyroid hormone reserves and indicates subclinical hypothyroidism.

Mild to moderate decrease with normal T3 & T4 indicates subclinical hyperthyroidism.


TSH measurement is used for screening & diagnosis of Euthyroidism, hypothyroidism & hyperthyroidism.

Suppressed TSH (< 0.01 µ IU/ml) suggests diagnosis of hyperthyroidism.

Elevated concentration of TSH (>7 µ IU/ml) suggest diagnosis of hypothyroidism.

Please correlate clinically.

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## URINE RM

Particular	Findings	Unit	Biological Reference Interval
<b>PHYSICAL</b>			
Colour	Straw		
Transparency	Clear		
Deposite	Nil		
Sp Gravity	1020		
Reaction	Acidic		
<b>CHEMICAL</b>			
Sugar	Nil	gm%	
Protein	xx		
pH	xx		
Ketone	xx		
Blood	xx		
Albumin	Nil		
Phosphate	Nil		
<b>MICROSCOPIC</b>			
RBC	Nil	/HPF	
Pus Cells	1-2	/HPF	
Epith Cells	0-2	/HPF	
Bacteria	Nil		
Casts	Nil	/HPF	
Crystals	Nil	/HPF	
Yeast	Nil		
Spermatozoa	Nil	/HPF	

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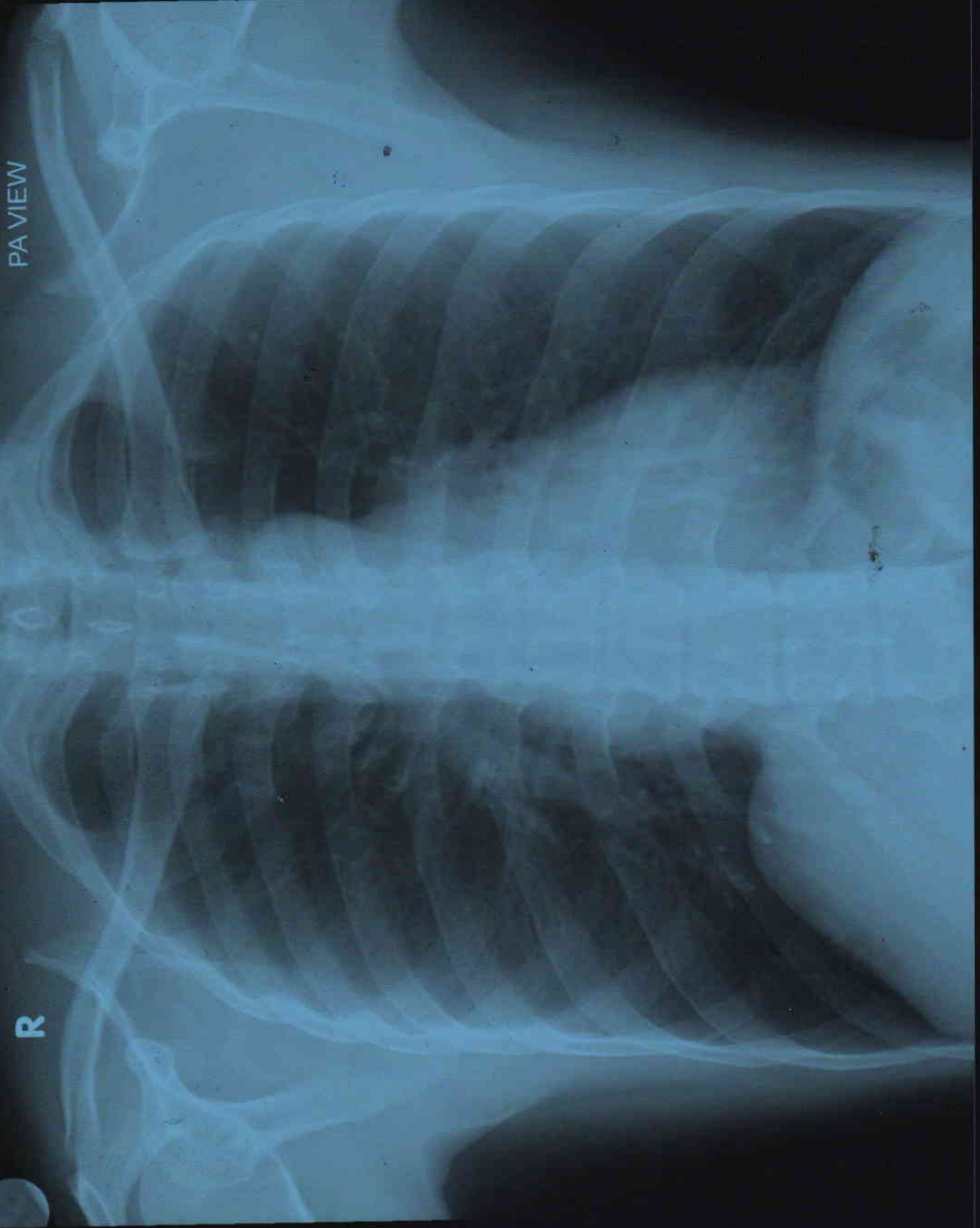


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**\*End Of Report\***

*Richa Verma*  
**Dr. Richa Verma**  
 MBBS, MD (Pathology)





PA VIEW

R

RAHUL AGE 35Y/M MEDIWHEEL BER/202420103 CHEST PA VIEW 27/01/2024  
BERLIN DIAGNOSTICS & DAY CARE, BARIATU ROAD, RANCHI.



# BERLIN DIAGNOSTICS & DAY CARE



Patient ID	BER/202420103	Age/Sex	35YRS. /M
Patient Name	MR. RAHUL	Date	27 - Jan - 2024
Referred By	MEDIWHEEL	Reported Date	27 - Jan - 2024

## X - RAY CHEST PA VIEW

Both lung fields under vision appear normal.  
No e/o any consolidation, collapse or mass lesion seen.

Cardiac size appears normal.

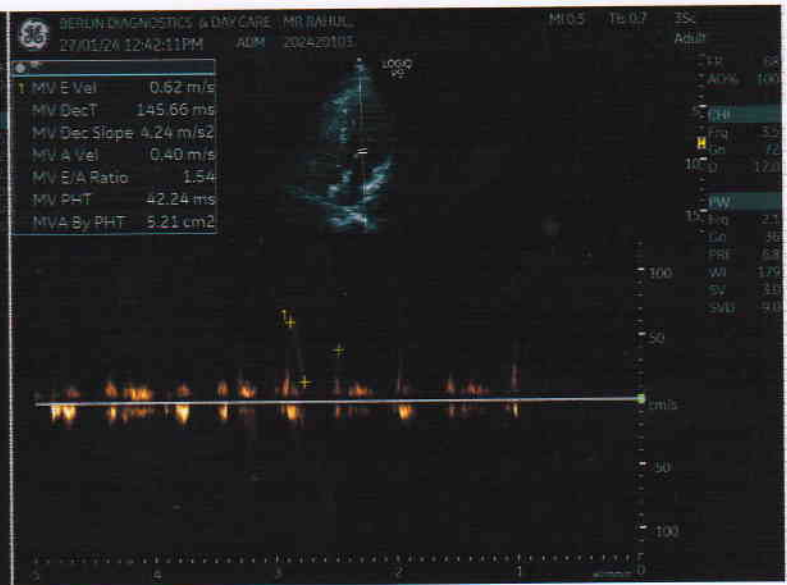
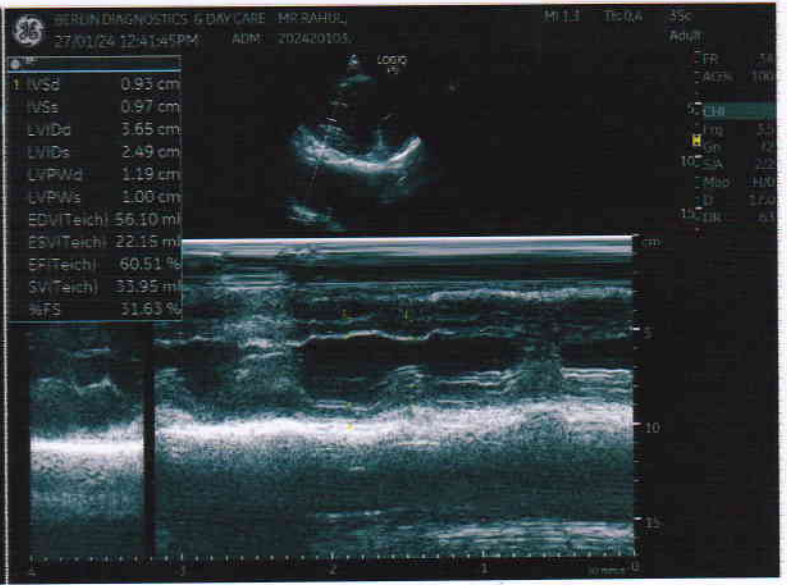
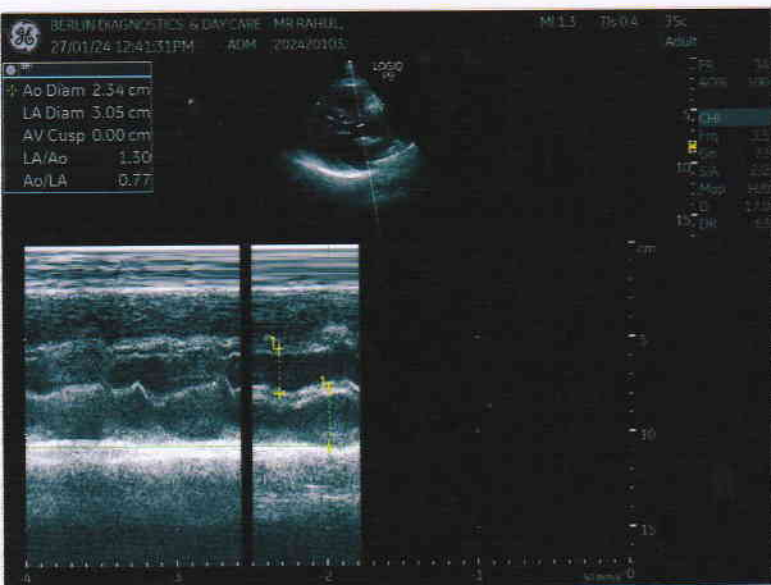
Both costophrenic angles are clear.  
Hilar regions are normal.

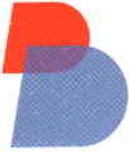
Both domes appear normal in position.  
Bony thorax under vision appears normal.

**REMARK-** Normal radiograph.

Dr. Anjali Tanna  
MD Radiology REG-34614

This Report is done and digitally signed via Tele Radiology Done at Radiscan Diagnostic Ahmedabad. For any clinical discrepancy, please discuss with the Radiologist. This report is not valid for any medico-legal purposes





# BERLIN DIAGNOSTICS & DAY CARE



Name **MR RAHUL**

Age **35**

Date **27/01/2024**

Patient Id **202420103.**

Sex **Male**

Ref.Physician

## Measurements

### 2D & M-Mode Measurements

IVSd	0.93 cm
LVIDd	3.65 cm
LVPWd	1.19 cm
IVSs	0.97 cm
LVIDs	2.49 cm
LVPWs	1.00 cm
EDV(Teich)	56.10 ml
ESV(Teich)	22.15 ml
EF(Teich)	60.51 %
%FS	31.63 %
SV(Teich)	33.95 ml
Ao Diam	2.34 cm
LA Diam	3.05 cm
LA/Ao	1.30
Ao/LA	0.77

### PW-Measurements

MV E Vel	0.62 m/s
MV DecT	145.66 ms
MV Dec Slope	4.24 m/s <sup>2</sup>
MV A Vel	0.40 m/s
MV E/A Ratio	1.54
MV PHT	42.24 ms
MVA By PHT	5.21 cm <sup>2</sup>
AV Vmax	0.82 m/s
AV maxPG	2.68 mmHg

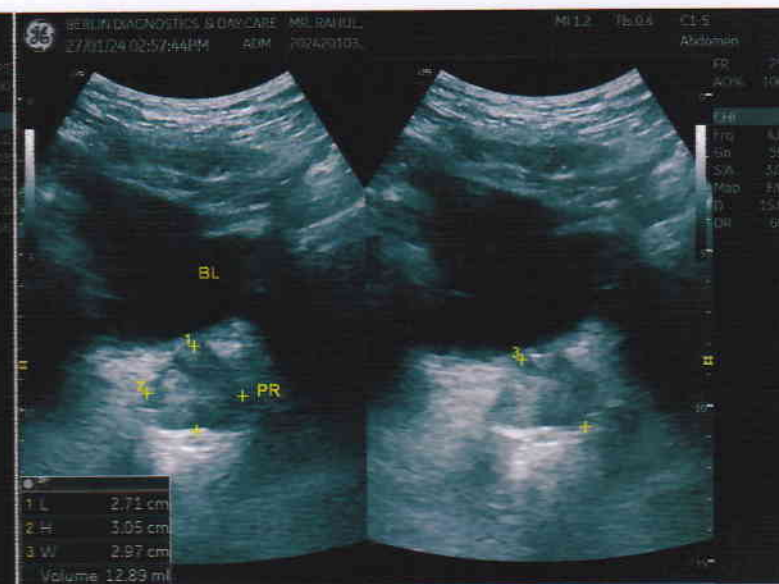
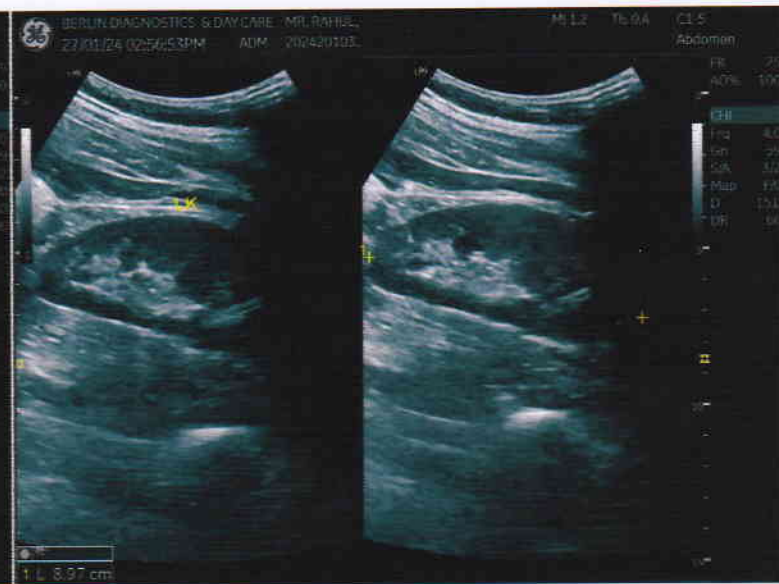
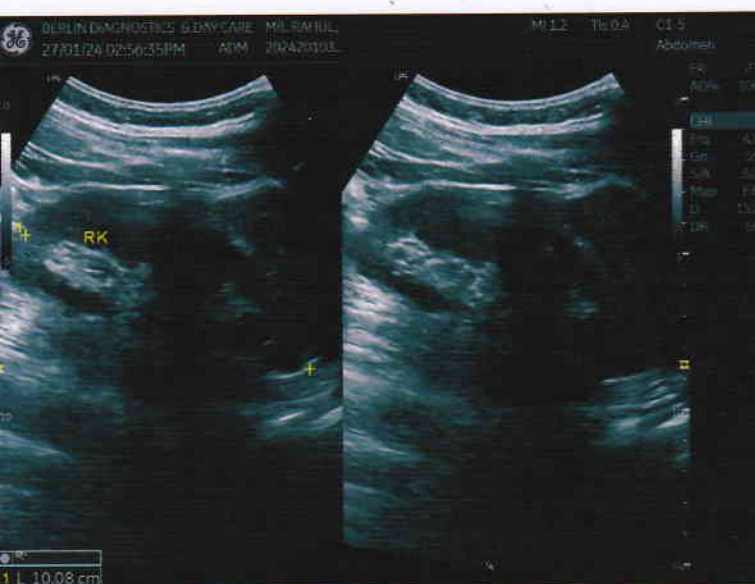
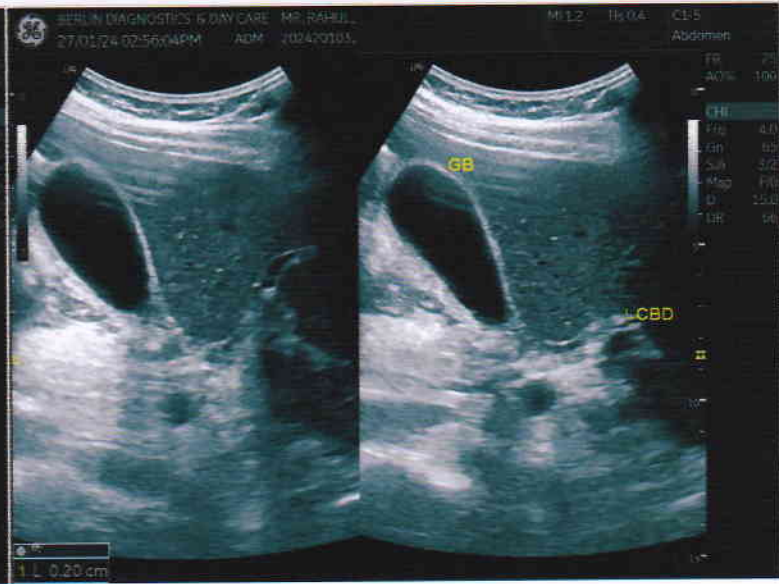
## Comments:

NORMAL LA, LV, RA AND RV SIZE, 2DEF= 60%, NO RWMA, ALL VALVBES AND PERICARDIUM NORMAL.

## Impression:

NORMAL LV SYSTOLIC AND RV FUNCTION IN NSR, NO PAH.

**DR. AMAR KUMAR**  
**DIP CARD (P.G.D.C.C)**  
**CLINICAL CARDIOLOGIST**





<b>Patient Name</b>	<b>MR. RAHUL</b>	<b>Requested By</b>	<b>MEDIWHEEL</b>
<b>MRN</b>	<b>BER/2024/OPD20103</b>	<b>Procedure Date</b>	<b>27.01.2024</b>
<b>Age/Sex</b>	<b>35 Y/MALE</b>	<b>Hospital</b>	<b>BERLIN DIAGNOSTICS &amp; DAY CARE</b>

## USG WHOLE ABDOMEN

**Liver :** The liver is normal in size (**11.3 cm**) and outline. It shows a uniform echopattern. No obvious focal or diffuse pathology is seen. The intra and extra hepatic biliary passage are not dilated. The portal vein is normal in caliber at the porta hepatis.

**Gall bladder :** The gall bladder is normal in size, has normal wall thickness with no evidence of calculi.

**CBD :** The CBD is of normal caliber.

**Pancreas :** The pancreas is normal in size and echogenicity with distinct outline. No obvious focal lesion is seen.

**Kidneys :** Both kidneys were normal in position:

Right kidney measures **10.0 cm**

Left Kidney measures **9.0 cm**

The renal cortical thickness and corticomedullary differentiation were adequate on both sides. No evidence of renal calculus or hydronephrosis seen on either sides.

**Spleen :** The spleen is normal in size (**7.3 cm**) and echogenicity.

**Urinary Bladder :** The urinary bladder is normal in size. Its walls show a smooth outline. There is no evidence of any intraluminal or perivesical abnormality.

**Prostate :** The prostate is normal in size, measures (**12.9 gm**) and shows normal parenchymal echogenicity.

No significant probe tenderness in RIF.

No evidence of pleural effusion on either side.

No evidence of ascites or lymphadenopathy seen.

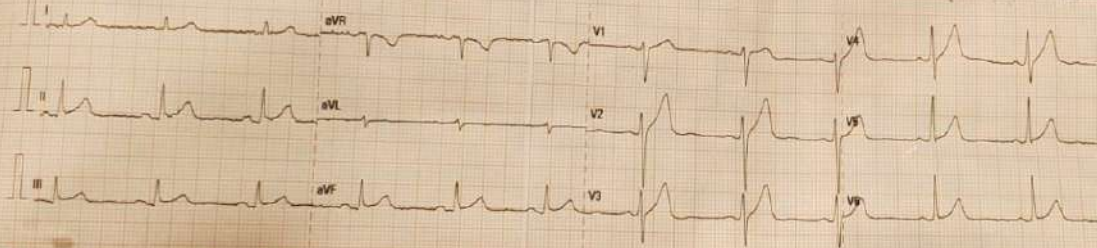
**IMPRESSION : Normal study**

**Please correlate clinically.**

**Dr. Poonam Choudhary**  
Sonologist.

We regret typographical errors if any. Please contact us for correction.

Reshma



ID: 01  
 Name: 2024-01-27 13:47:33  
 Vent. Rate (bpm): 66  
 PR Interval (ms): 150  
 QRS Duration (ms): 80  
 QT/QTc Interval (ms): 358/363  
 P/QRS/T Axis (deg): 72/71/63

Sinus rhythm  
 Lead(s) unsuitable for analysis: V1  
 — Interpretation made without knowing patient's gender/age —  
 Normal ECG based on available leads      Unconfirmed Diagnosis

Dr. Krishna Murari Prasad  
 MBBS, MD, Cardiology

