



ZENA
Healthcare Services
Professional | Accuracy | Precision

Professional Accuracy Precision

Regd. No. : 1834

ZENA HEALTHCARE SERVICES

(A Unit of Zena Enterprises)

Patient Name : MR. RAJ KUMARV DAS

Age / Gender : 40 years / Male

Patient ID : 19254

Referral : MEDI WHEEL

Collection Time : 09/12/2023, 10:59 AM

Reporting Time : 09/12/2023, 05:17 PM

Sample ID :



22136

Test Description	Value(s)	Reference Range	Unit
LFT, Liver Function Test			
Bilirubin - Total Method : Serum, Jendrassik Grof	0.59	0.00 - 1.00	mg/dL
Bilirubin - Direct Method : Serum, Diazotization	0.18	0.00 - 0.20	mg/dL
Bilirubin - Indirect Method : Serum, Calculated	0.41	0.10 - 0.80	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	12.6	8 - 33	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	28.7	3 - 35	U/L
GGT-Gamma Glutamyl Transpeptidase Method : Serum, G-glutamyl-carboxy-nitroanilide	9.36	< 55	U/L
Alkaline Phosphatase Method : PNPP-AMP Buffer/Kinetic	115.3	53-128	U/L
Total Protein Method : Serum, Biuret, reagent blank end point	6.85	6.60 - 8.70	g/dL
Albumin Method : Serum, Bromocresol green	3.67	3.50 - 5.30	g/dL
Globulin Method : Serum, EIA	3.18	2.00-3.50	g/dL
A/G Ratio Method : Serum, EIA	1.15	1.2 - 2.2	

END OF REPORT

Lab technician

Dr. Kundan Kumar Sahoo
CONSULTANT PATHOLOGIST /
MICROBIOLOGIST

For Home Collection Please Call at Number :

Page 1 of 1

Zena Healthcare Services

Plot No. 119, Opp. Water tank Lane, Near Police Phandi, Saheed Nagar, Bhubaneswar-07
Ph. : 0674-2549902, 9692276908, 8337964922, E-mail : zenahealthcare@gmail.com

Website : www.zenahealthcare.com

Wishing Good Health



Patient Name : MR. RAJ KUMARV DAS

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Test Description	Value(s)	Reference Range	Unit
Lipid Profile			
Cholesterol-Total Method : Spectrophotometry	186.3	Desirable level < 200 Borderline High 200-239 High >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	96.33	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	43.5	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	123.53	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic	19.27	6 - 38	mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	4.28	3.5 - 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic	2.84	2.5 - 3.5	

Note:

8-10 hours fasting sample is required.

END OF REPORT

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Test Description	Value(s)	Reference Range	Unit
Thyroid Profile (T3, T4, TSH)			
T3-Total Method: CLIA	0.95	0.87 - 2.73	ng/dL
T4-Total Method: CLIA	9.23	6.09 - 12.23	ug/dL
TSH-Ultrasensitive Method: CLIA	0.65	0.45 - 4.50	uIU/mL

Interpretation

TSH	T3	T4	Suggested Interpretation for the Thyroid Function Tests Pattern
Raised	Within range	Within range	Raised Within Range Within Range .Isolated High TSH especially in the range of 4,7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism .Intermittent T4 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis"
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion"
Decreased	Decreased	Decreased	Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease). Multinodular goitre, Toxic nodule •Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased Within Rang	Raised	Within range	T3 toxicosis •Non-Thyroidal illness
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%.

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Test Description	Value(s)	Reference Range	Unit
Complete Blood Count			
Hemoglobin (Hb)	13.6	13.5 - 18.0	gm/dL
Erythrocyte (RBC) Count	4.85	4.7 - 6.0	mil/cu.mm
Packed Cell Volume (PCV)	42.6	42 - 52	%
Mean Cell Volume (MCV)	87.84	78 - 100	fL
Mean Cell Haemoglobin (MCH)	28.04	27 - 31	pg
Mean Corpuscular Hb Concn. (MCHC)	31.92	32 - 36	g/dL
Red Cell Distribution Width (RDW)	12.6	11.5 - 14.0	%
Total Leucocytes (WBC) Count	9200	4000-10000	cell/cu.mm
Neutrophils	55	40 - 80	%
Lymphocytes	37	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	06	1 - 6	%
Basophils	00	1-2	%
Platelet Count	298	150 - 450	10 ³ /ul
Mean Platelet Volume (MPV)	9.6	7.2 - 11.7	fL
PCT	0.29	0.2 - 0.5	%
PDW	17.0	9.0 - 17.0	%

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Test Description	Value(s)	Reference Range	Unit
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Urine(R/M) Routine Examination of Urine

General Examination

Colour	PALE YELLOW	Pale Yellow	
Transparency (Appearance)	CLEAR	Clear	
Deposit	Absent	Absent	
Reaction (pH)	Acidic 6.0	4.5 - 7.0	
Specific gravity	1.015	1.005 - 1.030	

Chemical Examination

Urine Protein (Albumin)	Absent	Absent	
Urine Glucose (Sugar)	Absent	Absent	

Microscopic Examination

Red blood cells	Absent	0-4	/hpf
Pus cells (WBCs)	2 - 4 /HPF	0-9	/hpf
Epithelial cells	1 - 2 /HPF	0-4	/hpf
Crystals	Absent	Absent	
Cast	Absent	Absent	
Bacteria	Absent	Absent	

END OF REPORT

Lab technician

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Sample ID :



22136

Test Description	Value(s)	Reference Range	Unit
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HbA1c, Glycosylated Hemoglobin

HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD	5.55		%
Method : (HPLC, NGSP certified)			
Estimated Average Glucose :	112.58	-	mg/dL

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

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.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212



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22136

Test Description	Value(s)	Reference Range	Unit
10	240		
11	269		
12	298		

ESR, Erythrocyte Sedimentation Rate

ESR - Erythrocyte Sedimentation Rate 4 0 - 15 mm/hr

Method : EDTA Whole Blood, Manual Westergren

Interpretation:

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

END OF REPORT

Lab technician

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Sample ID :



Test Description	Value(s)	Reference Range	Unit
Glucose, Fasting (FBS)			
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	89.2	75 - 115	mg/dL
Glucose, Post Prandial (PP)			
Blood Glucose-Post Prandial Method : Hexokinase	106.5	70 - 140	mg/dL
Uric acid, Serum			
Uric Acid Method : Uricase, Colorimetric	3.85	3.4 - 7.0	mg/dL
Creatinine			
Creatinine Method : Serum, Jaffe	0.75	0.60 - 1.30	mg/dL
BUN, Serum			
BUN-Blood Urea Nitroge Method : Serum, Urease	16.8	10 - 50	mg/dL
Blood Group ABO & Rh Typing, Blood			
Blood Group (ABO typing) Method : Manual-Hemagglutination	"A"		
RhD Factor (Rh Typing) Method : Manual hemagglutination	Positive		

END OF REPORT

Lab technician

K. Sahoo
Dr. Kundan Kumar Sahoo
CONSULTANT PATHOLOGIST /
MICROBIOLOGIST



NAME:- RAJ KUMAR DAS
AGE:- 40YRS

REFERRAL:-MEDI-WHEEL

Patient ID:- 03

DATE :-09.12.2023
SEX :-MALE

CHEST X-RAY PA VEIW SHOWS.

- Both side lung fields are clear.
- Trachea within normal limit.
- Both costophrenic cardiophrenic angle are clear.
- Cardiac shadow within normal limit.
- Media stinum in position

IMPRESSION:-NORMAL STUDY.

Dr.Bhagaban Pradhan
M.D.(Radio diagnosis)

ConsultantRadiologist

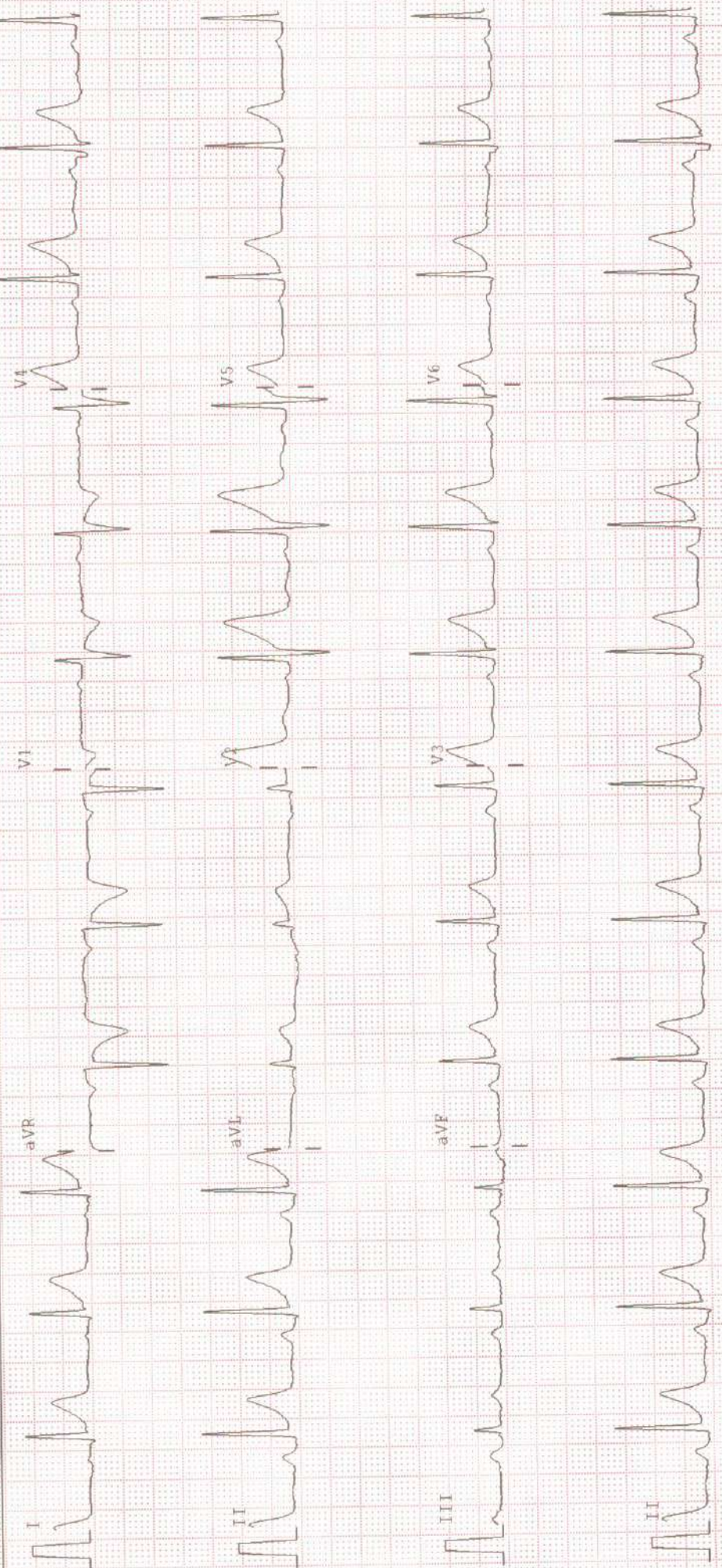
ID: 1291 CASE RAJ KUMAR DAS
AGE: 40Y M D MALE
Cms Kg
09/12/2023 10:08:34
ZENA HEALTHCARE
PLOT -119, SAHIDNAGAR, BHUBANESWAR

RATE: 69 bpm SINUS RHYTHM
R-R: 462 ms
P-R: 174 ms
QRS: 90 ms
QT: 366 ms
QTc: 382 ms

P-Axis: 72°
QRS: NORMAL ECG
T: 50°
41°

12 SL. REPORT FORMAT: 3x1+1L SQ

REF: Dr





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EYE REPORT

NAME : Mr. RAJ KUMAR DAS DATE : 09.12.2023
AGE : 40 YRS SEX : MALE

WITHOUT GLASSES

	RT EYE	LT EYE
COLOUR	NORMAL	NORMAL
NEAR	6/6	6/6
FAR	6/6	6/6

Dr. M. K. HOTA
M.B.B.S.
REGD No. 699
SIGNATURE

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Wishing Good Health

MATERNITY CARE HOPITAL

NAME :RAJKUMAR DAS

DATE : 09-12-2023

AGE-41Y/M

SONOGRAPHER : DR. PARUL PATI

USG OF WHOLE ABDOMEN

LIVER: Normal in size, shape and parenchymal echotexture. No. SOL seen. Intrahepatic biliary channels normal in caliber and contains no echogenic structure. Portal and hepatic vascular systems within normal limits. P. V. measures 7.3mm,

GALL BLADDER: normal in shape and size no sol ,no calculi seen **C.B.D.:** Common duct bile normal in calibre (3.2 mms).

SPLEEN : Normal in size, shape and parenchymal echotexture.

PANCREAS: Normal in size, shape and parenchymal echotexture. Pancreatic duct not dilated.

KIDNEYS: Both the kidneys are normal in size, shape and position. Renal cortical echotexture is within normal limits. Cortico medullary differentiation maintained. No evidence of my calculus or hydronephrosis on both sides. Pelvi-calyceal systems appear normal. No focal lesion seen.

- Right kidney measures : 9.6 x 4.7cms.
- Left kidney measures: 8.9 x 5.6cms.

URETERS: Both ureters not visualized (normal).

URINARY BLADDER: Symmetrical and normal in outline. Lumen clear. Walls normal in thickness

Prostrate-normal in size shape and echosructure .

Impression:Normal study of abdomen

Parul Pati
DR. PARUL PATI MD
SONOGRAPHER
MATERNITY CARE HOSPITAL & CLINIC
B-11, 1st Floor, Sector-10, Gurgaon, Haryana