



# Sparsh Multispecialty Hospital

एक एहशासि क्प्रनेपन का

(A Unit of Sparsh Multispecialty Hospital Private Limited)  
(Formerly known as Paedia Health Private Limited)

CIN : U85110CT2005PTC017751  
GSTIN/UIN : 22AADCP8009N2Z9



UHID	: 39709	Visit ID	: 0000307884
Patient Name	: MR. VED PRAKASH ..	Spec No.	:
Age / Sex	: 43Y / MALE		:
Consultant	: DR. HOSPITAL CASE	Order Date	: 10/02/2024 9:34AM
Ref. By	: DR. HOSPITAL CASE	Samp.Date	:
Category	: MEDIWHEEL	Report Date	: 10/02/24 11:03AM

## SONOGRAPHY USG WHOLE ABDOMEN

- \* **LIVER** :Normal in size and shape. **Diffuse increase in echogenecity seen - Suggestive of fatty infiltration.**  
IHBRs are not dilated. No focal lesions seen
- \***PORTO CAVAL SYSTEM**: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal.Portal vein is normal.
- \***COLLECTING DUCT & CBD**:Normal in size and have echo lucent lumen.
- \***GALL BLADDER** :Seen in distended state with normal wall and lumen is echofree
- \***SPLEEN**:Normal in size, shape & echo texture. No focal lesions seen.
- \***PANCREAS**:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.
- \***RIGHT KIDNEY**: Right kidney is normal shape, size and position.Cortical thickness is normal .CMD is maintained.There is no evidence of hydronephrosis or calculus
- \***LEFT KIDNEY**: Left kidney is normal shape, size and position.Cortical thickness is normal .CMD is maintained.There is no evidence of hydronephrosis.
- **Tiny Echogenic Focus of size 5.2 mm is seen in upper pole calyx of Left Kidney.**
- \***URINARY BLADDER** : Seen in distended state and has normal wall architecture.Lumen is echo free.
- \***PROSTATE**:Normal in shape, size and echotexture.No median lobe bulge is seen.
- No free fluid is seen in the peritoneal cavity.  
There is no evidence of any retroperitoneal lymphadenopathy/mass.

### FINAL IMPRESSION :

- **Fatty Liver.**
- **Tiny Left Renal calculus.**

- Please correlate clinically , followup USG is recommended.

  
Dr. DILIP KUMAR SONI  
MBBS, DMRD  
CGMC 102/2003

Please bring all your previous reports. You should preserve and bring this report for future reference.



**SPARSH**  
MULTISPECIALTY HOSPITAL PVT. LTD.  
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Ref. By	: DR. HOSPITAL CASE	Samp.Date	:
Category	: MEDIWHEEL	Report Date	: 12/02/24 10:07AM

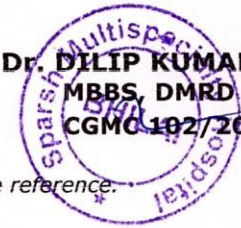
## X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

### IMPRESSION

- **No Remarkable Abnormality Detected .**  
- Please correlate clinically

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PATIENT NAME	: MR. VED PRAKASH ..	ORDER DATE	: 10/02/2024 09:34:00
AGE/SEX	: 43Y/MALE	SAMP. DATE	: 10/02/2024 11:42:00
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498781
		RESULT DATE	: 10/02/2024 12:58:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### LIPID PROFILE

PARAMETER	VALUE	RESULT	REFERENCE RANGE
CHOLESTEROL TOTAL	157 mg / dl	Normal	150 - 220
TRIGLYCERIDES - SERUM	90 mg / dl	Normal	60 - 165
HDL	37.65 mg / dl	Normal	35 - 80
LDL	101.35 mg/dL	Normal	90 - 160
VLDL	18.0	Low	20 - 50
CHOL : HDL Ratio	2.69:1		3.5 - 5.5
LDL: HDL Ratio	1.38:1		-

TECHNICIAN

  
Dr. AVISHESH SINGH MD  
PATH

CONSULTANT

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AGE/SEX	: 43Y/MALE	SAMP. DATE	: 10/02/2024 11:42:00
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498791
		RESULT DATE	: 10/02/2024 13:51:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### CBC (COMPLETE BLOOD COUNT)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	14.8 gm%	Normal	13.5 - 17.5
TOTAL RBC COUNT	4.74 Million/cumm	Normal	4.5 - 5.9
HAEMATOCRIT (PCV)	41.7 %	Normal	41.5 - 50.4
RBC INDICES			
MCV	88.0 fl	Normal	78 - 96
MCH	31.3 pg	Normal	27 - 32
MCHC	35.6 %	Normal	33 - 37
RDW	13.6 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	5000 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	46 %	Normal	0 - 75
LYMPHOCYTES	47 %	Normal	22 - 48
EOSINOPHILS	03 %	Normal	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	153000 /cumm	Normal	150000 - 450000

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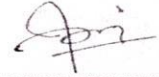


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AGE/SEX	: 43Y/MALE	SAMP. DATE	: 10/02/2024 11:42:00
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498789
		RESULT DATE	: 10/02/2024 12:27:00
		TPA	: MEDIWHEEL

**DEPARTMENT OF PATHOLOGY**

PARAMETER	VALUE	RESULT	REFERENCE RANGE
<b>BLOOD GROUPING AND RH TYPING</b>			
BLOOD GROUP	"O"	-	-
RH FACTOR	Positive	-	-
<b>BUN (BLOOD UREA NITROGEN)</b>			
BUN (BLOOD UREA NITROGEN)	12.14 mg / dl	Normal	8 - 23
<b>CREATININE</b>			
SERUM CREATININE	1.18 mg/dL	Normal	0.3 - 1.5
<b>GGT (GAMMA GLUTAMYL TRANSFERASE)</b>			
GGT (GAMMA GLUTAMYL TRANSFERASE)	23 U / L	Normal	8 - 52
<b>URIC ACID</b>			
URIC ACID	5.44 mg/dL	Normal	3.6 - 7.7

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498782
		RESULT DATE	: 10/02/2024 13:36:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### SERUM PSA TOTAL

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PSA (TOTAL)	0.857 ng/ml	Normal	0 - 4

#### Note:

PSA is a member of the kallikrein-related peptidase family and is secreted by the epithelial cells of the prostate glands. PSA is produced for the ejaculate where it liquefies semen in the terminal coagulum and allows sperms to swim freely.

#### Increased value:

Elevated serum PSA concentration are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory condition of other adjacent genitourinary tissue it is an accurate marker for monitoring advancing clinical stage in untreated patients of ca prostate and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti androgen therapy.

#### Clinical Use

- 1) An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- 2) Followup and management of Prostate cancer patients
- 3) Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer.

#### Note:

1) Diagnosis of a disease should not be based on the result of a single test, but should be determined in conjunction with clinical findings in association with medical judgement.

2) Patient sample containing human anti mouse antibodies (HAMA) may give falsely elevated or decreased values. Although HAMA-neutralizing agents are added, extremely high HAMA serum concentration may occasionally influence results.

3) Therapeutic intervention may strongly influence the f/t PSA ratio. Manipulations at the prostate may also lead to variations in the f/t PSA ratio.

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16/02/2024 11:47AM

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498784
		RESULT DATE	: 10/02/2024 20:36:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
<b>BLOOD SUGAR - FASTING AND PP</b>			
BLOOD SUGAR FASTING	123 mg/dL	High	80 - 120
BLOOD SUGAR PP	165 mg/dL	High	120 - 140
<b>URINE SUGAR FASTING</b>			
URINE FOR SUGAR	Nil	-	-
<b>URINE SUGAR PP</b>			
URINE FOR SUGAR	Nil	-	-

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498780
		RESULT DATE	: 10/02/2024 13:36:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### T3,T4 TSH

PARAMETER	VALUE	RESULT	REFERENCE RANGE
T3 (TRIIODOTHYRONINE)	1.304 ng/ml	Normal	0.69 - 2.15
T4 (THYROXINE)	83.84 ng/ml	Normal	52 - 127
TSH (THYROID STIMULATING HORMONE)	2.677 uIU/ml	Normal	0.3 - 4.5

REFERENCE GROUP REFERENCE RANGE in uIU/mL  
As per American Thyroid Association

Adult Females (> 20 years)	0.30- 4.5
Pregnancy	
1st Trimester	0.10- 2.50
2nd Trimester	0.20 - 3.00
3rd Trimester	0.30 - 3.00

#### 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.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498790
		RESULT DATE	: 10/02/2024 12:59:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HBA1 C (GLYCOSYLATED HEAMOGLOBIN)	6.6 %	High	4 - 6

#### Interpretation

As per American diabetes Association (ADA)

Reference Group - HbA1c In%  
Non diabetic  $\geq 18$  years - 4.0 - 6.0  
At risk (Prediabetes) -  $\geq 6.0$  to  $\leq 6.5$   
Diagnosing diabetes -  $\geq 6.5$

#### 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 is recently under good control may still have a high concentration of HbA1c. converse is true for a diabetic previously under good control now poorly controlled.
2. Target goals of  $< 7.0$  % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, 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 glycemic control as compared to blood and urinary glucose determination.

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498785
		RESULT DATE	: 10/02/2024 14:07:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### URINE ROUTINE AND MICROSCOPY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PHYSICAL EXAMINATION			
QUANTITY	10 ml	-	-
COLOUR	Pale Yellow	-	-
APPEARANCE	Clear	-	-
REACTION	Acidic	-	-
CHEMICAL EXAMINATION			
ALBUMIN	Nil	-	-
SUGAR	Nil	-	-
MICROSCOPIC EXAMINATION			
EPITHELIAL CELLS	Occasional /hpf		0 - 5
PUS CELLS	Occasional /hpf		1 - 2
RBC	Nil /hpf		-
CAST	Nil /lpf		-
CRYSTAL	Nil		-
AMORPHOUS MATERIAL DEPOSIT	Nil		-
OTHERS	Nil		-

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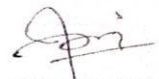
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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10498783
		RESULT DATE	: 10/02/2024 12:58:00
		TPA	: MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.41 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.12 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.29 mg / dl	Normal	0.1 - 0.4
ALKALINE PHOSPHATASE	105 U / L	Normal	0 - 270
SGOT	62 U / L	High	10 - 55
SGPT	97 U / L	High	0 - 40
TOTAL PROTEIN	7.57 g / dl	Normal	6 - 8
ALBUMIN	4.62 g/dl	Normal	4 - 5
GLOBULIN	2.95 g / dl	Normal	2 - 3.5
A.G.RATIO	1.56:1		1 - 2.5

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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10498792  
RESULT DATE : 10/02/2024 13:48:00  
TPA : MEDIWHEEL

## DEPARTMENT OF PATHOLOGY

### ESR (ERYTHROCYTE SEDIMENTATION RATE)

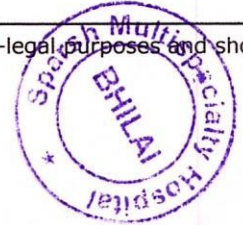
PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	10 mm at end of 1 hr	Normal	0 - 15

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