



**URMILA HEART**  
**& MULTI SPECIALITY HOSPITAL**  
**PATHOLOGY REPORT**

**Address**

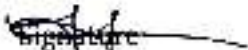
Naya Tola, Opp. Polyte  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Names:- Mr. Pushpendra Shekhar	Age :44Y/M	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(F.C.No116895)	Serial Number :- 092

**CBC (Complete Blood Count)**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
Hb (Haemoglobin)	12.4	gm/dl	12 - 17
Total Leukocyte Count	3,600	/Cumm.	4000 - 11000
RBC Count	4.17	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	38.2	%	30 - 50
Platelet Count	1.19	Lakhs/c.mm	1.5 - 4.5
MCV	94.0	fL	80 - 100
MCH	27.6	pg	26 - 34
MCHC	31.8	gm/dl	31.5 - 35
<b>Differential Leukocyte Count</b>			
Neutrophil	50	%	40 - 70
Lymphocyte	42	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	06	%	01 - 06
Basophil	00	%	<1 - 2%
ESR	18	mm/1" hr.	00 - 20

\*\*\*end of report\*\*\*







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**KFT (KIDNEY Function Test) – serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	32.0	mg/dl	13 - 45
S. Creatinine	1.24	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	14.94	mg/dl	6.0 - 21
S. Sodium (Na <sup>+</sup> )	143.0	mmol/ltr	135 - 150
S. Potassium(K <sup>+</sup> )	4.14	mmol/ltr	3.5 - 5.5
S. Chloride(Cl <sup>-</sup> )	107.3	mmol/ltr	94 - 110
S. Calcium	9.18	mg/dl	8.7 - 11.0
S. Uric Acid	7.64	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

**BLOOD GROUPING**

Grouping (ABO)	:	"B" Group
Rh Typing	:	Positive.

\*\*\*end of report\*\*\*



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Name:- Mr. Pushendra Shekhar	Age :44Y/M	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 092

**LFT (Liver Function Test) – serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	1.02	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	31.0	U/L	05 - 40
S. SGOT (AST)	26.0	U/L	05 - 40
S. Alkaline Phosphatase	87.5	U/L	Adult - 25 - 140 Children (1 - 12 yrs.) - 104 - 390
S. Total Protein	7.38	g/dl	6.0 - 8.3
S. Albumin	4.16	g/dl	3.2 - 5.0
S. Globulin	3.22	g/dl	2.8 - 4.5
S. A/G Ratio	1.29		

\*\*\*end of report\*\*\*



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Name:- Mr. Pushpendra Shekhar	Age :44Y/M	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 092

**Lipid Profile - serum**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	194.0	mg/dl	130 - 200
S. Triglycerides	145.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	29.0	mg/dl	10 - 40
S. HDL-Cholesterol	48.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	117.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	4.04		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.43		1.5 - 3.5

**BIOCHEMISTRY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	90.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	118.0	mg/dl	80 - 160

\*\*\*end of report\*\*\*





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Muzaffarpur  
Ph.: 0621-2222211  
0621-2268041  
Mob.: 9881179794  
9471013401

Name:- Mr. Pushendra Shekhar	Age :44Y/M	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 092

**GLYCOSYLATED HEMOGLOBIN**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	4.10	%

Mean Blood Glucose level (MBG) - 96.04 mg/dl

**Normal Reference Values**

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

**Summary :-** Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

\*\*\*end of report\*\*\*



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Naya Tola, Opp. Polyte  
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0621-2268045  
Mob.: 9661179794  
9471013402

Name:- Mr. Pushendra Shakhari

Age :-44Y/M

Date :-09/11/2024

Ref. By :- Dr. Bank Of Baroda

(E.C.No116895)

Serial Number :- 092

TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	126.0	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	6.03	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	3.10	µIU/mL	(0.3 - 5.6)

**Technology :**

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwich Competitive Chemi Luminescent Immuno Assay

**REMARK :**

**THYROID HORMONES** -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones. It is an early and sensitive indicator of decrease in thyroid reserve. It is diagnostic of primary hypothyroidism. The expected increase in TSH demonstrates the classical feedback mechanism between pituitary and thyroid gland. Additionally TSH measurement is equally important in differentiating secondary and tertiary (hypothalamic) hypothyroidism. The increase in total T4 and T3 is associated with pregnancy, oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration, which can be monitored by calculating Free Thyroxine Index (FTI) or Thyroid Hormone Binding Ratio (THBR).  
\*\*\*end of report\*\*\*

*Signature*



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Age :44Y/M

Date :-09/11/2024

Ref. By :- Dr. Bank Of Baroda

(E.C.No116895)

Serial Number :- 092

**Urine Routine And Microscopy**

<b><u>TEST</u></b>	<b><u>RESULTS</u></b>
<b>Physical Examination</b>	
Volume	20 ml
Colour	Straw
Specific Gravity	1.010
Appearance	Clear
pH	6.5
(Acidic)	
<b>Chemical Examination</b>	
Protein	Nil
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D
<b>Microscopic Examination</b>	
Pus Cells	1-2 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	<b>Present (+)</b>
Crystal/Cast	Nil
Other	Nil
***end of report***	

*[Signature]*





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9471013402

Name :- Pushpendra Shekhar.  
Refd.By:- Dr./Self.

Date :- 09/11/2024  
Sex:- M

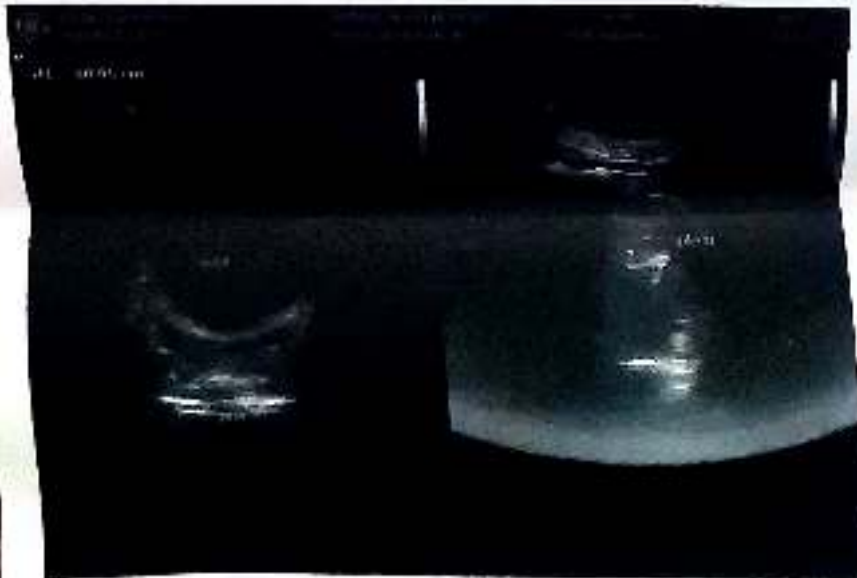
Thanks for the kind referral.  
USG of Whole Abdomen

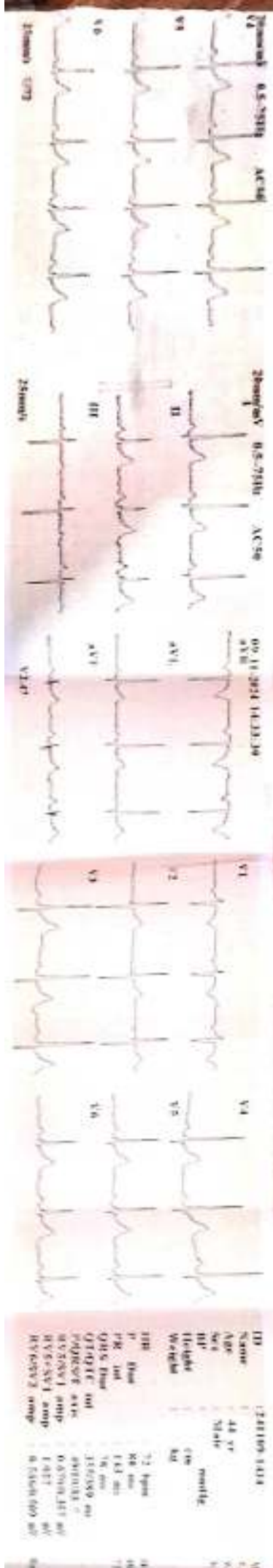
- Liver:-** Liver is enlarged in size [161.1mm] & shows fatty infiltration. No focal lesion seen or Intrahepatic ducts dilation seen. Movement of both domes of diaphragm appears normal.
- GB:-** Normal distention, Walls are not thickened. No evidence of calculus, sludge, or mass lesion seen.
- C.B.D:-** C.B.D. is normal in calibre.
- Pancreas:-** Pancreas normal in size shape and echotexture.
- Spleen:-** Normal in shape, size & contour. (bipolar length is 109.5mm)
- Kidneys:-** Both kidneys are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification, hydronephrotic changes or mass lesion seen.
- UB:-** Urinary bladder is smoothly outlined. There is no calculus within.
- Prostate :-** The prostate is normal in shape and size.
- Free fluid:-** No free fluid is noted in the peritoneal cavity.

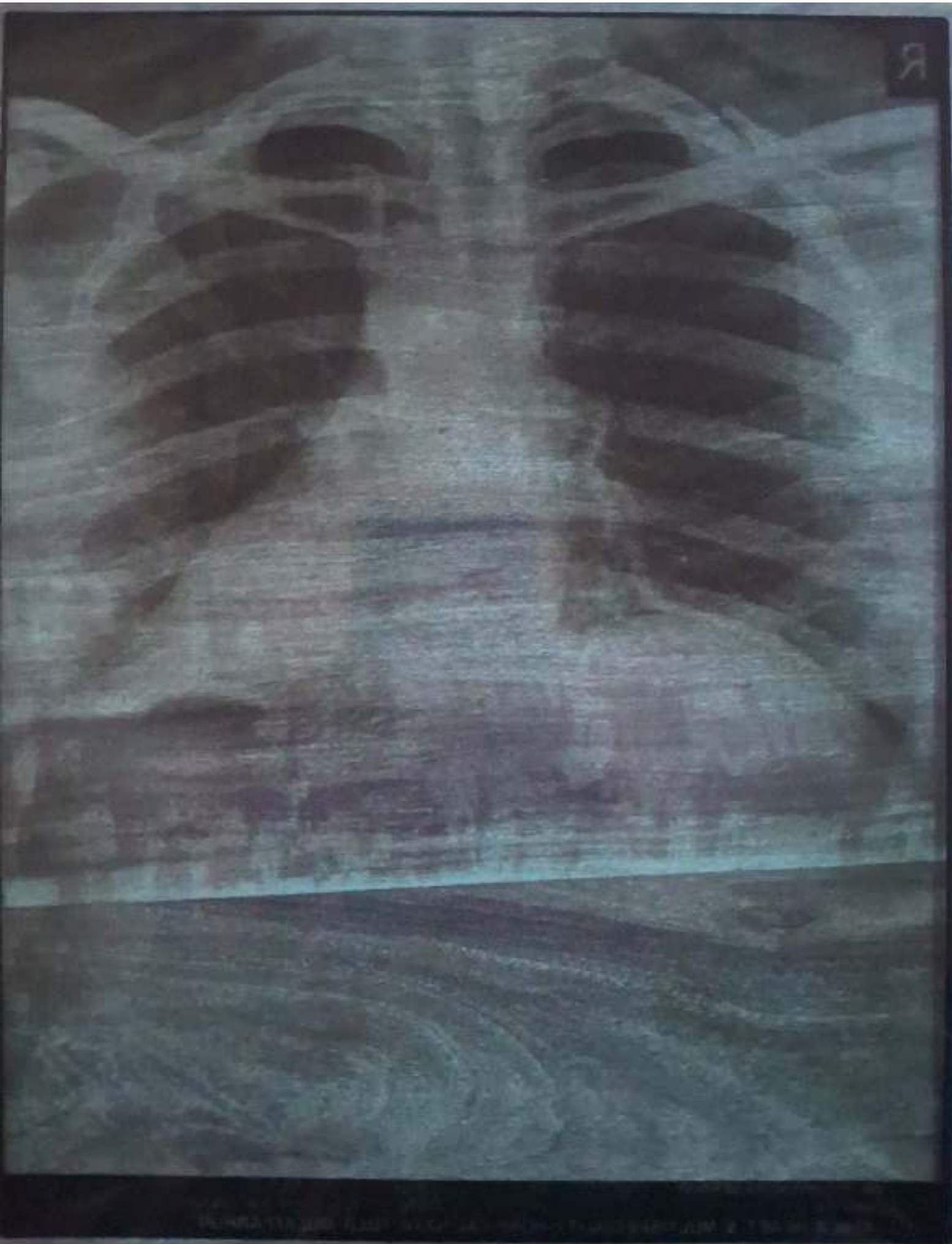
**Impression :-** Hepatomegaly with fatty liver. Grade II.

  
Sonologist.













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**ECHOCARDIOGRAPHY REPORT**

**Address**

Naya Tola, Opp. Polye  
Muzaffarpur  
Ph.: 0621-222221  
0621-226804  
Mob.: 966117979  
947101340

Name : Mr. Puspendra Singh      Age/Sex : 44/M  
Date : 09/11/2024      ECHO No. :  
IPID No. :      UHID No. :  
Ref. By : BOB      Done By : Dr. Anil Kr. Singh

**MITRAL VALVE**

Morphology AML-Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming  
PML-Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.

Subvalvular deformity Present/Absent.      Score: \_\_\_\_\_  
Doppler Normal/Abnormal      E>A      A>E  
Mitral Stenosis Present/Absent      RR Interval \_\_\_\_\_ msec  
EDG \_\_\_\_\_ mmHg      MDG \_\_\_\_\_ mmHg      MVAcm<sup>2</sup>  
Mitral Regurgitation Absent/Trivial/Mild/Moderate/Severe.

**TRICUSPID VALVE**

Morphology Normal/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.

Doppler Normal/Abnormal  
Tricuspid stenosis Present/Absent      RR interval \_\_\_\_\_ msec.  
EDG \_\_\_\_\_ mmHg      MDG \_\_\_\_\_ mmHg  
Tricuspid regurgitation: Absent/Trivial/Mild/Moderate/Severe Fragmented signals  
Velocity \_\_\_\_\_ msec.      Pred. RVSP=RAP+ mmHg

**PULMONARY VALVE**

Morphology Normal/Atresia/Thickening/Doming/Vegetation.

Doppler Normal/Abnormal.  
Pulmonary stenosis Present/Absent      Level  
PSG \_\_\_\_\_ mmHg      Pulmonary annulus \_\_\_\_\_ mm  
Pulmonary regurgitation Present/Absent  
Early diastolic gradient \_\_\_\_\_ mmHg.      End diastolic gradient \_\_\_\_\_ mmHg

**AORTIC VALVE**

Morphology Normal/Thickening/Calcification/Restricted opening/Flutter/Vegetation

No. of cusps 1/2/3/4  
Doppler Normal/Abnormal  
Aortic Stenosis Present/Absent      Level  
PSG \_\_\_\_\_ mmHg      Aortic annulus \_\_\_\_\_ mm  
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe.







