

2/1, Residency Area, AB Road, Geeta Bhavan Square,
Indore - 452 001, MP, INDIA. E: info@vonehospital.com
T: +91 0731 3588888, 4238111 | M: +91 93299 22500

A unit of Mediheal Healthcare Private Limited



Patient Name : MR. KAMAL MOTIRAM [MRN-240800608]
Age / Gender : 48 Yr / M
Address : Vill Siroliya Dewas, Kalma, Dewas, MADHYA PRADESH
Req. Doctor: VONE HOSPITAL
Regn. ID: WALKIN.24-25-7913

HAEMATOLOGY

Request Date : 10-08-2024 08:52 AM
Collection Date : 10-08-2024 08:59 AM | H-5801
Acceptance Date : 10-08-2024 08:59 AM | TAT: 04:46 [HH:MM]
Reporting Date : 10-08-2024 01:45 PM
Reporting Status : Revised And Finalized

Investigations	Result	Biological Reference Range
CBC		
Haemoglobin	14.9 gm%	M 14 - 18 gm% (Age 1 - 100)
RBC Count	4.85 mill./cu.mm *	M 3.8 - 4.8 mill./cu.mm (Age 1 - 100)
Packed Cell Volume (PCV)	42.8 %	M 40 - 54 % (Age 1 - 100)
MCV	88.2 Cu.m.	76 - 96 Cu.m. (Age 1 - 100)
MCH	30.6 pg	27 - 32 pg (Age 1 - 100)
MCHC	34.7 % *	30.5 - 34.5 % (Age 1 - 100)
Platelet Count	190 10 ³ /uL	150 - 450 10 ³ /uL (Age 1 - 100)
Total Leukocyte Count (TLC)	11.22 10³/uL *	4.5 - 11 10 ³ /uL (Age 1 - 100)
Differential Leukocyte Count (DLC)		
Neutrophils	70 %	40 - 70 % (Age 1 - 100)
Lymphocytes	25 %	20 - 40 % (Age 1 - 100)
Monocytes	04 %	2 - 10 % (Age 1 - 100)
Eosinophils	01 %	1 - 6 % (Age 1 - 100)
Basophils	00 %	< 1 %
Remark:	Platelet count done manually . Platelet clump seen	

END OF REPORT.

DR. QUTBUDDIN CHAHWALA
M.D. PATHOLOGIST

Result relate to the sample as received.

V-ONE HOSPITAL Department of Laboratory Medicine.

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HAEMATOLOGY
Request Date : 10-08-2024 08:52 AM Reporting Date : 10-08-2024 01:46 PM
Collection Date : 10-08-2024 08:59 AM | H-5801 Reporting Status : Finalized
Acceptance Date : 10-08-2024 08:59 AM | TAT: 04:47 [HH:MM]

Investigations	Result	Biological Reference Range
ESR (WINTROBE METHOD)	11 mm/hr	M 0 - 12 mm/hr
BLOOD GROUP		
ABO GROUP	AB	
RH FACTOR	Positive	
HBA1C		
Glyco Hb (HbA1C)	5.4 %	4 - 6 %
Estimated Average Glucose	108.28 mg/dL	mg/dL

Interpretation: 1.HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes
using a cut off point of 6.5%
2.Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
3.In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent control-6-7 %

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BIOCHEMISTRY


Request Date : 10-08-2024 08:52 AM
Collection Date : 10-08-2024 08:59 AM | BIO6975

Reporting Date : 10-08-2024 03:49 PM
Reporting Status : Revised And Finalized

Acceptance Date : 10-08-2024 08:59 AM | **TAT:** 06:50 [HH:MM]

Investigations	Result	Biological Reference Range
FBS & PPBS *[Ser/Plas]		
FBS	91.5 mg/dL	70 - 110 mg/dL
PPBS	146.2 mg/dL *	100 - 140 mg/dL
URIC ACID	6.1 mg/dL	M 3.5 - 7.2 mg/dL
BUN		
BUN	18.62 mg/dL	5 - 20 mg/dL
CREATININE	0.88 mg/dL	0.7 - 1.4 mg/dL
AST/ ALT RATIO	1.29 *	< 1
BUN / CREATINE RATIO	21.15 *	10 - 20

END OF REPORT.


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Request Date : 10-08-2024 08:52 AM Reporting Date : 10-08-2024 01:47 PM
Collection Date : 10-08-2024 08:59 AM | BIO6975 Reporting Status : Revised And Finalized
Acceptance Date : 10-08-2024 08:59 AM | TAT: 04:48 [HH:MM]

Investigations	Result	Biological Reference Range
FT		
SGOT	18.2 U/L	0 - 40 U/L
SGPT	23.5 U/L	M 0 - 40 U/L
TOTAL BILIRUBIN	0.88 mg/dL	0 - 1.1 mg/dL
DIRECT BILIRUBIN	0.25 mg/dL *	0 - 0.2 mg/dL
INDIRECT BILIRUBIN	0.63 mg/dL	0.2 - 0.8 mg/dL
TOTAL PROTEIN	7.34 mg/dL	6.6 - 8.8 mg/dL
S.ALBUMIN	4.27 mg/dL	3.5 - 5.5 mg/dL
GLOBULIN	3.07 mg/dL	2 - 3.5 mg/dL
A.G.RATIO	1.39	1.1 - 1.5
ALKALINE PHOSPHATASE	73.0 U/L	M 40 - 129 U/L CHILD 54 - 369 U/L
PT INR		
PT	13.7 sec	13 - 15 sec
CONTROL	12.8 sec	
INR	1.08	0.8 - 1.1
HBSAG	Non Reactive	
ALT / AST RATIO	1.29	< 1.5
AST / ALT RATIO	0.77	< 1

END OF REPORT.

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BIOCHEMISTRY

Request Date : 10-08-2024 08:52 AM
Collection Date : 10-08-2024 08:59 AM | BIO6975
Acceptance Date : 10-08-2024 08:59 AM | **TAT: 04:44**
[HH:MM]

Reporting Date : 10-08-2024 01:43 PM
Reporting Status : Revised And Finalized

Investigations	Result	Biological Reference Range
Lipid Profile		
Total Cholesterol	156 mg/dL	0 - 200 mg/dL
Tryglyceride	160.8 mg/dL	150 - 200 mg/dL
HDL Cholesterol	36.7 mg/dL	35 - 79 mg/dL
VLDL (Calculated)	32.16 mg/dL	5 - 40 mg/dL
LDL	87.14 mg/dL	0 - 130 mg/dL
Total Cholesterol /HDL	4.25	0 - 5
LDL/HDL	2.37	0.3 - 5

END OF REPORT.

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BIOCHEMISTRY

Request Date : 10-08-2024 08:52 AM **Reporting Date :** 10-08-2024 04:23 PM
Collection Date : 10-08-2024 08:59 AM | BIO6975 **Reporting Status :** Finalized
Acceptance Date : 10-08-2024 08:59 AM | **TAT:** 07:24 [HH:MM]

Investigations	Result	Biological Reference Range
AST(GAMMA GLUTAMYL TRANSFERASE)	15.7 U/L	M 11 - 60 U/L

END OF REPORT.

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Regn. ID: WALKIN.24-25-7913



IMMUNOLOGY

Request Date : 10-08-2024 08:52 AM **Reporting Date :** 10-08-2024 04:24 PM
Collection Date : 10-08-2024 04:24 PM | PATH5114 **Reporting Status :** Finalized
Acceptance Date : 10-08-2024 04:24 PM | **TAT:** 00:00 [HH:MM]

Investigations	Result	Biological Reference Range
PSA	0.24 ng / ml	0 - 4 ng / ml (Age 0 Y - 100 Y)

Interpretation: INTERPRETATIONS:
Useful for Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year.
Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
Prostate-specific antigen (PSA) values are reported with the 95th percentile limits by decade of age. These reference limits include men with benign prostatic hyperplasia. They exclude all cases with proven cancer.
PSA values exceeding the age-specific limits are suspicious for prostate disease, but further testing, such as prostate biopsy, is needed to diagnose prostate pathology.
Values >0.2 ng/mL are considered evidence of biochemical recurrence of cancer in men after prostatectomy

END OF REPORT.

DR. QUTBUDDIN CHAHWALA
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IMMUNOLOGY

quest Date : 10-08-2024 08:52 AM **Reporting Date :** 10-08-2024 04:24 PM
llection Date : 10-08-2024 08:59 AM | PATH5091 **Reporting Status :** Finalized
ceptance Date : 10-08-2024 08:59 AM | **TAT:** 07:25 [HH:MM]

Investigations	Result	Biological Reference Range
Thyroid Profile		
T3	1.09 ng/dL	0.58 - 1.62 ng/dL (Age 1 - 100)
T4	9.03 ug/dl	5 - 14.5 ug/dl (Age 1 - 100)
TSH	1.39 uIU/ml	0.35 - 5.1 uIU/ml (Age 1 - 100)

Interpretation: Ultra sensitive-thyroid stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, sTSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test). when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism. Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations. Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy. TSH ref range in Pregnancy Reference range (microIU/ml)
 First trimester 0.24 - 2.00
 Second trimester 0.43-2.2

END OF REPORT.

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CLINICAL PATHOLOGY

Request Date : 10-08-2024 08:52 AM
Collection Date : 10-08-2024 08:59 AM | CP-2508
Acceptance Date : 10-08-2024 08:59 AM | TAT: 04:46 [HH:MM]

Reporting Date : 10-08-2024 01:45 PM
Reporting Status : Finalized

Investigations	Result	Biological Reference Range
Urine Routine		
PHYSICAL EXAMINATION		
Quantity	30 ml	
Colour	Pale yellow	Pale Yellow
Deposit	Absent	Absent
Clarity	Clear	Clear
Reaction	Acidic	Acidic
Specific Gravity	1.015	1.001 - 1.035
CHEMICAL EXAMINATION		
Albumin	Absent	Absent
Sugar	Absent	Absent
Bile Salt	Absent	Absent
Bile Pigment	Absent	Absent
Keton	Absent	Absent
Blood	Absent	Absent
MICROSCOPY EXAMINATION		
Red Blood Cells	Nil /hpf	Nil/hpf
Pus Cells	1-2 /hpf	2-3/hpf
Epithelial Cells	3-4 /hpf	3-4/hpf
Casts	Absent	Absent
Crystals	Absent	Absent
Bacteria	Absent	Absent

END OF REPORT.

DR. QUTBUDDIN CHAHWALA
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USG - WHOLE ABDOMEN

Liver is normal in size (14 cm) and shape. Its echogenicity is normal. Margins are smooth and regular. The portal vein and biliary radicals are normal in calibre.

GB is well distended. Wall thickness is normal with echofree lumen. CBD is within normal limits.

Pancreas is normal in size, shape and echo pattern.

Bilateral kidneys are normal in shape, size and echotexture. Corticomedullary differentiation is maintained. No evidence of any calculus or hydronephrosis.

Rt. Kidney Length: 9.3 cm

Lt. Kidney Length: 9.8 cm

Spleen is normal in size and echopattern.

Urinary bladder is normal in shape and size. Lumen appears echofree. Wall thickness is normal.

Prostate is normal in size. Echotexture is homogenous. Capsule is intact.

No evidence of ascites / pleural effusion.

Visualized bowel loops are normal in course and calibre.

IMPRESSION :-

No significant abnormality detected.

DR. RAVINDRA SINGH
Consultant Radiologist



Department of Facial Surgery & Dentistry
(For Appointment- +91-9754523000)

General Examination Report

Name: Mr. Kamal Motiral Age : 48y/M. Date: 10/08/2024

Medical History: No Relevant History

Dental History: root canal treatment done before 15 years.

Habit History: Tobacco chewer from last 5 years.

Any other: -

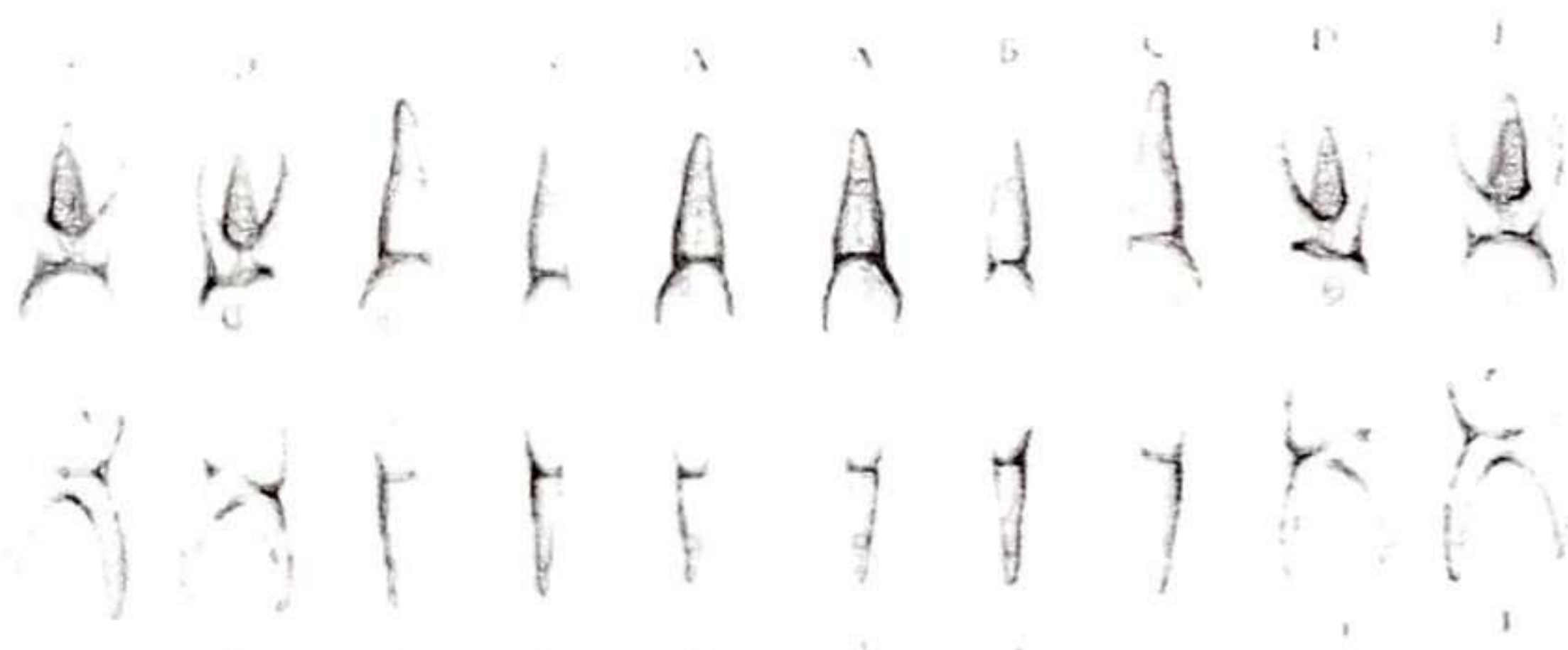
Oral examination

- | | | |
|--|---|---|
| 1. Calculus/Stain/Plaque <input checked="" type="checkbox"/> | 2. Carious Teeth <input type="checkbox"/> | 3. Gum Disease <input type="checkbox"/> |
| 4. Fractured Teeth <input type="checkbox"/> | 5. Missing Teeth <input type="checkbox"/> | 6. Mobile Teeth <input type="checkbox"/> |
| 7. Occlusal Abnormalities <input type="checkbox"/> | 8. Precancerous lesion/condition <input type="checkbox"/> | 9. Any Other Finding <input type="checkbox"/> |

Treatment Advised

- | | | |
|--|--|---|
| 1. Cleaning of Teeth <input checked="" type="checkbox"/> | 2. Filling/Preventive treatment <input type="checkbox"/> | 3. Removal of teeth <input type="checkbox"/> |
| 4. Replacement of Teeth <input type="checkbox"/> | 5. Orthodontic treatment <input type="checkbox"/> | 6. Oral health counselling <input type="checkbox"/> |

Primary Tooth Structure

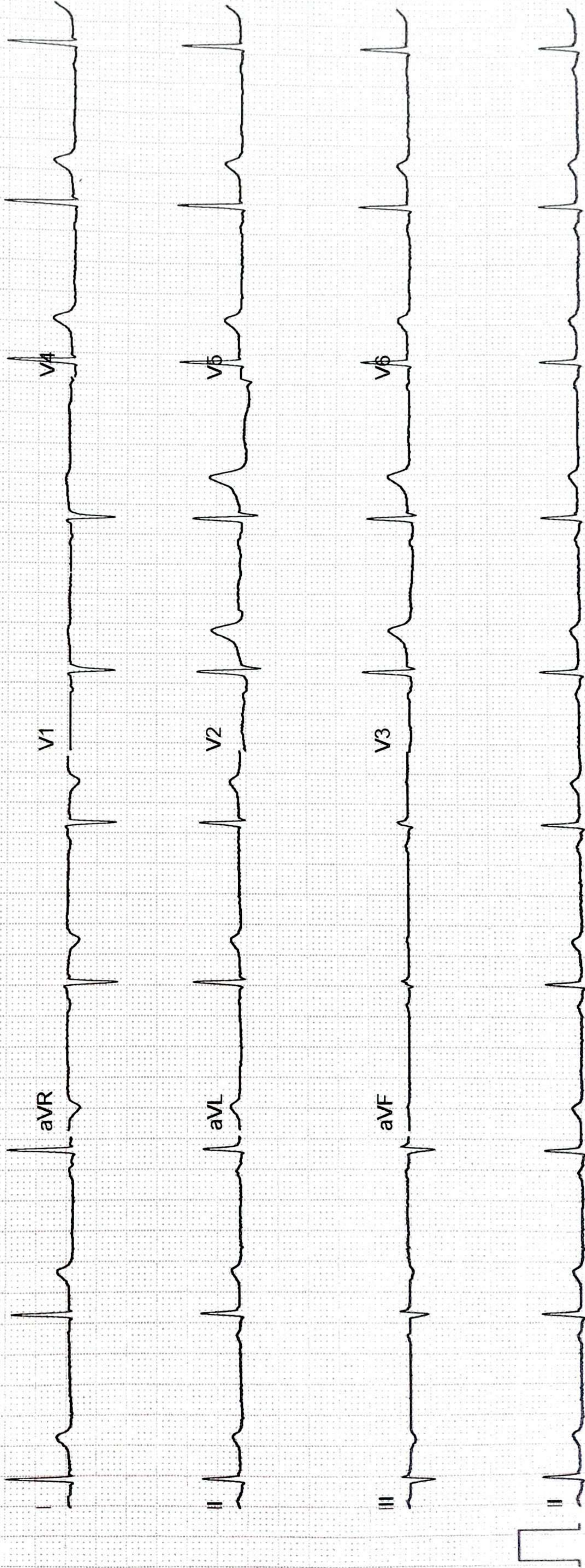


Permanent Tooth Structure



QRS : 76 ms
QT / QTcBaz : 394 / 383 ms
PR : 152 ms
P : 92 ms
RR / PP : 1056 / 1052 ms
P / QRS / T : 56 / 15 / 13 degrees

Sinus bradycardia
Otherwise normal ECG



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Request Date : 10-08-2024

2D- & COLOR DOPPLER ECHO

Measuring Dimensions	Observed Values	Normal Value (For Adult)
Aortic root diameter (AOD)	26mm	20-37 mm
Aortic Valve Cusp Opening (ACS)	22mm	15-26 mm
Left atrial dimensions (LAs diam)	35mm	19-40 mm
Left ventricular ED dimensions (LVIDd)	48mm	17-56 mm
Left ventricular ES dimensions (LVIDs)	32mm	18-42 mm
Interventricular ED septal thickness (IVSd)	11mm	6-11 mm
LVPW (D) (LVPWD)	11mm	6-11 mm
LVEF	60%	55-70%

Regional wall motion abnormalities : No.

IVS motion : Normal

CHAMBERS SIZE & SHAPE :-

Left Ventricle : Normal.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Pulmonary artery : Normal

PERICARDIUM : Normal.

IVC : Normal.



VALVULAR ECHO :-

MITRAL VALVE :- : Morphology :- A vel- 0 m/sec
Doppler : E vel- 0 m/sec
Mitral stenosis : Absent
Mitral regurgitation : Normal

TRISCUSPID VALVE :- : Morphology :-
Tricuspid Stenosis : Absent
Tricuspid regurgitation : **Grade - I/IV TR No PAH (PASP:- 30mmHg)**

PULMONARY VALVE :- : Morphology :-
Doppler : PV Vmax- 0.59m/sec PV Max PG- 1.27mmHg.
Pulmonary Stenosis : Absent
Pulmonary regurgitation : Normal

AORTIC VALVE :- : Morphology :-
Doppler : AV Vmax- 1.05m/sec AV max PG- 4.42mmHg.
Aortic Stenosis : Absent
Aortic Regurgitation : Normal

IMPRESSION :-

➤ **Normal 2D Echo & CD study.**


Dr. Deepesh Kothari, MD, DM
Consultant Cardiologist