

भारत सरकार
Government of India

Issue Date: 24/05/2014



रमेश कुमार राय
Ramesh Kumar Ray
जन्म तिथि/DOB: 01/01/1972
पुल्य/ MALE

4412 2216 6835
VID : 9165 8839 6943 8917

मेरा आधार, मेरी पहचान

Blank APP
14/12

ID: 88

RAMESH KUMAR RAY
Male 51Years

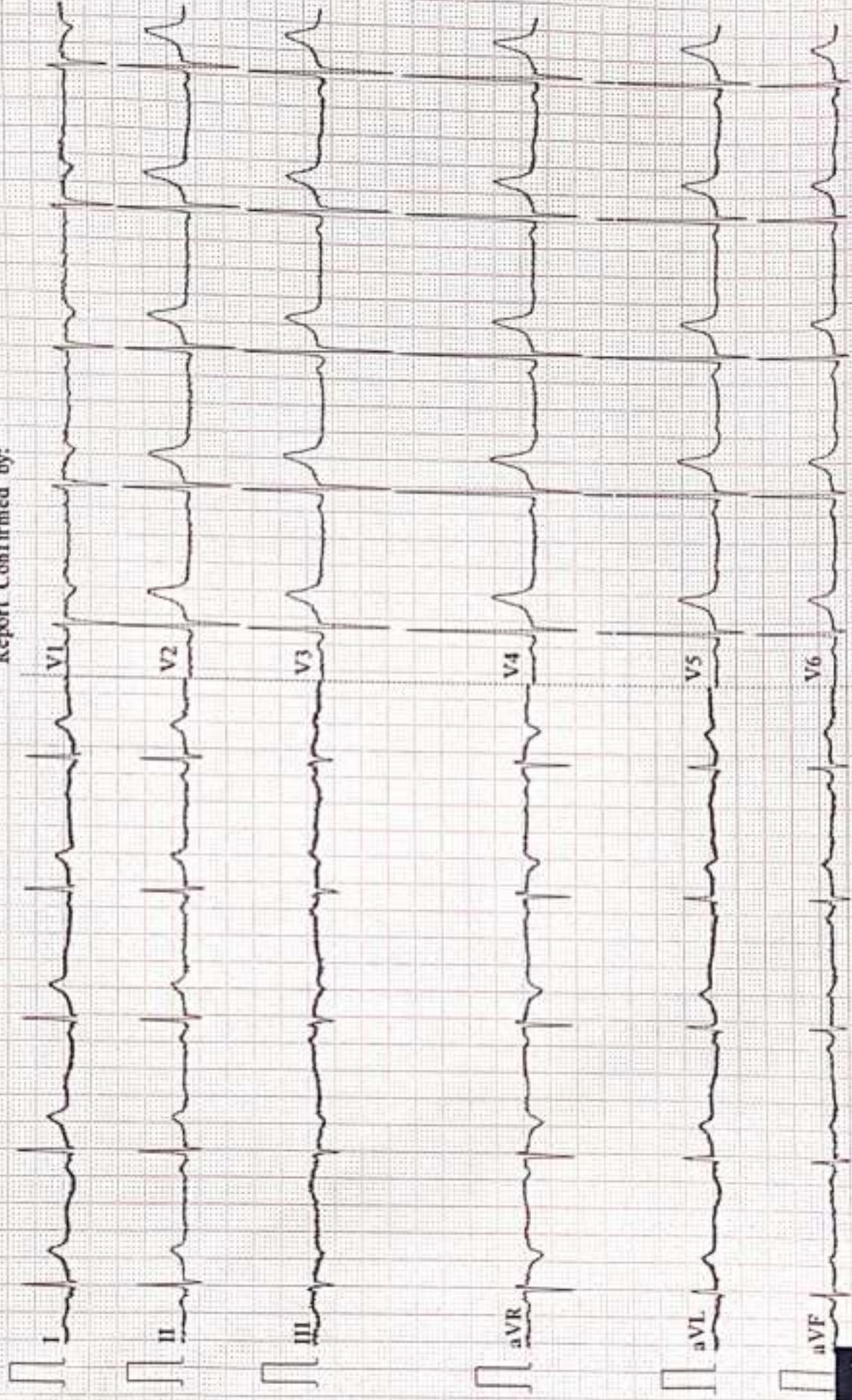
26-12-2023 10:54:44 AM

HR : 59 bpm
 P : 110 ms
 PR : 149 ms
 QRS : 71 ms
 QT/QTc : 381/378 ms
 P/QRS/T : 74/13/37 °
 RV5/SV1 : 2.337/0.836 mV

Diagnosis Information:
Sinus Bradycardia

Ref-Phys. :

Report Confirmed by:





Name :- Ramesh Kumar Ray
Refd by :- Corp.

Age/Sex:-51Yrs/M
Date :-26/12/23

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size(13.5cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size(8.8cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 10.3cm and Left Kidney measures 10.3cm.
- U. Bladder**:- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Prostate** :- Normal in size (10.2cc)& normal echotexture.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Normal Scan.*

Dr. U. Kumar
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist



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AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, PC. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna - 20

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info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	26/12/2023	Srl No.	13	Patient Id	2312260013
Name	Mr. RAMESH KUMAR RAY	Age	51 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.2	%	

EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Date	26/12/2023	Srl No. 13	Patient Id 2312260013
Name	Mr. RAMESH KUMAR RAY	Age 51 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	14.5	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,500	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	60	%	40 - 75
LYMPHOCYTE	35	%	20 - 45
EOSINOPHIL	01	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	12	mm/1st hr.	0 - 15
R B C COUNT	4.83	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	43.5	%	40 - 54
M C V	90.06	fl.	80 - 100
M C H	30.02	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.30	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"A"		
RH TYPING	NEGATIVE		
BLOOD SUGAR FASTING	85.7	mg/dl	70 - 110
SERUM CREATININE	0.93	mg%	0.7 - 1.4
BLOOD UREA	24.5	mg /dl	15.0 - 45.0
SERUM URIC ACID	5.2	mg%	3.4 - 7.0
<u>LIVER FUNCTION TEST (LFT)</u>			



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Name	Mr. RAMESH KUMAR RAY	Age 51 Yrs.	Sex M
Ref. By Dr.BOB			

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.66	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.25	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.41	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.8	gm/dl	6.6 - 8.3
ALBUMIN	4.0	gm/dl	3.4 - 5.2
GLOBULIN	2.8	gm/dl	2.3 - 3.5
A/G RATIO	1.429		
SGOT	14.8	IU/L	5 - 40
SGPT	20.2	IU/L	5.0 - 55.0
ALKALINE PHOSPHATASE IFCC Method	47.8	U/L	40.0 - 130.0
GAMMA GT	23.9	IU/L	8.0 - 71.0
LFT INTERPRET			
<u>LIPID PROFILE</u>			
TRIGLYCERIDES	78.2	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	175.1	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	44.3	mg/dL	35.1 - 88.0
V L D L	15.64	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	115.16	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.953		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.6		0.00 - 3.55
THYROID PROFILE			
QUANTITY	15	ml.	



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Name	Mr. RAMESH KUMAR RAY	Age	51 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.010		
PH	6.0		
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	0-1	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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Name	Mr. RAMESH KUMAR RAY	Age	51 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.			
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.			

**** End Of Report ****

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Name	Mr. RAMESH KUMAR RAY	Age	51 Yrs.	Sex	M
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR PP	109.7	mg/dl	80 - 160
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STOOL EXAMINATION

STOOL ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

COLOUR/ APPEARANCE	BROWNISH
CONSISTENCY	SEMI-FORMED
PUS	NIL
MUCUS	NIL
BLOOD	NIL

CHEMICAL REACTION

REACTION	ACIDIC
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MICROSCOPY EXAMINATION

PUS CELLS	/HPF
RBC'S	NIL
OVA	NIL
CYST	NIL
BACTERIA	NIL
OTHERS	NIL

**** End Of Report ****

Page 6 of 6

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MC-2024

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Regd. Office : 5th Floor, Doctor House, Nr. Parimal Garden, Ahmedabad-380006 Gujarat
CIN: U85195GJ2009PLC057059



31204100353

TEST REPORT

Reg.No : 31204100353	Reg.Date : 28-Dec-2023 12:59	Collection : 28-Dec-2023 12:59
Name : RAMESH KUMAR RAY		Received : 28-Dec-2023 12:59
Age : 51 Years	Sex : Male	Report : 28-Dec-2023 14:19
Referred By : AAROGYAM DIAGNOSTICS @ PATNA		Dispatch : 28-Dec-2023 14:41
Referral Dr : □	Status : Final	Location : 41 - PATNA

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <small>CMLA</small>	0.78	ng/mL	0.40 - 1.81
T4 (Thyroxine), Total <small>CMLA</small>	6.24	µg/dL	4.6 - 10.5
TSH (Thyroid stimulating hormone) <small>CMLA</small>	4.367	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

----- End Of Report -----

(Signature)

Dr. Avani Patel
M.D. Biochemistry
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