

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

CMO Reg. No. RMEE 2445133 NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr.BIMAL MANI TANDON

Age/Gender : 75 Y/M Lab No

: 10132447

Referred By : Dr.RAM MANOHAR LOHIA HOSPITA

Refer Lab/Hosp : CHARAK NA

. CHEST PA,CREATININE,UREA,NA+K+,LFT,CBC (WHOLE BLOOD) Doctor Advice

Visit No : CHA250035151

Sample Received ON

Registration ON : 27/Feb/2025 08:41AM

Sample Collected ON : 27/Feb/2025 08:43AM

Report Generated ON : 27/Feb/2025 10:52AM

: 27/Feb/2025 09:28AM

| Test Name | Result | Unit | Bio. Ref. Range | Method | |
|------------------------------|---------------------|---------|-----------------|----------------|--|
| CBC (COMPLETE BLOOD COUNT) | | | | | |
| Hb | 12.5 | g/dl | 12 - 15 | Non Cyanide | |
| R.B.C. COUNT | 4.30 | mil/cmm | 3.8 - 4.8 | Electrical | |
| | | | | Impedence | |
| PCV | 40.3 | % | 36 - 45 | Pulse hieght | |
| | | | | detection | |
| MCV | 94.6 | fL | 80 - 96 | calculated | |
| MCH | 29.3 | pg | 27 - 33 | Calculated | |
| MCHC | 31 | g/dL | 30 - 36 | Calculated | |
| RDW | 12.4 | % | 11 - 15 | RBC histogram | |
| | | | | derivation | |
| RETIC | 0.9 % | % | 0.5 - 2.5 | Microscopy | |
| TOTAL LEUCOCYTES COUNT | 1 <mark>5570</mark> | /cmm | 4000 - 10000 | Flocytrometry | |
| DIFFERENTIAL LEUCOCYTE COUNT | | | | | |
| NEUTROPHIL | 91 | % | 40 - 75 | Flowcytrometry | |
| LYMPHOCYTES | 5 | % | 25 - 45 | Flowcytrometry | |
| EOSINOPHIL | 0 | % | 1 - 6 | Flowcytrometry | |
| MONOCYTE | 4 | % | 2 - 10 | Flowcytrometry | |
| BASOPHIL | 0 | % | 00 - 01 | Flowcytrometry | |
| PLATELET COUNT | 340,000 | /cmm | 150000 - 450000 | Elect Imped | |
| PLATELET COUNT (MANUAL) | 340000 | /cmm | 150000 - 450000 | Microscopy . | |
| Absolute Neutrophils Count | 14,169 | /cmm | 2000 - 7000 | Calculated | |
| Absolute Lymphocytes Count | 778 | /cmm | 1000-3000 | Calculated | |
| Absolute Monocytes Count | 623 | /cmm | 200-1000 | Calculated | |
| Mentzer Index | 22 | | | | |
| Peripheral Blood Picture | : | | | | |

Red blood cells are normocytic normochromic. Platelets are adequate. No parasite seen.







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PR.

. CHEST PA,CREATININE,UREA,NA+K+,LFT,CBC (WHOLE BLOOD) Doctor Advice

Visit No : CHA250035151

Registration ON : 27/Feb/2025 08:41AM

Sample Collected ON : 27/Feb/2025 08:43AM Sample Received ON : 27/Feb/2025 09:04AM

Report Generated ON : 27/Feb/2025 10:50AM

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--------------------------------|--------|-------|-----------------|-------------------|
| NA+K+ | | | | |
| SODIUM Serum | 136.0 | MEq/L | 135 - 155 | ISE Direct |
| POTASSIUM Serum | 4.2 | MEq/L | 3.5 - 5.5 | ISE Direct |
| T | | | | |
| BLOOD UREA | | | | |
| BLOOD UREA | 28.50 | mg/dl | 15 - 45 | Urease, UV, Serum |
| SERUM CREATININE | | | | |
| CREATININE | 0.60 | mg/dl | 0.50 - 1.40 | Alkaline picrate- |
| | | | | kinetic |
| LINED FUNCTION TEST | | | | |
| LIVER FUNCTION TEST | | | | |
| TOTAL BILIRUBIN | 1.31 | mg/dl | 0.4 - 1.1 | Diazonium Ion |
| CONJUGATED (D. Bilirubin) | 0.43 | mg/dL | 0.00-0.30 | Diazotization |
| UNCONJUGATED (I.D. Bilirubin) | 0.88 | mg/dL | 0.1 - 1.0 | Calculated |
| ALK PHOS | 70.50 | U/L | 30 - 120 | PNPP, AMP Buffer |
| SGPT | 27.0 | U/L | 5 - 40 | UV without P5P |
| SGOT | 25.0 | U/L | 5 - 40 | UV without P5P |
| | | | | |

*** End Of Report ***

CHARAK





Patient Name

: Mr.BIMAL MANI TANDON

Visit No : CHA250035151

Age/Gender

Refer Lab/Hosp

: 75 Y/M

: CHARAK NA

Registration ON : 27/Feb/2025 08:41AM

Lab No

: 10132447

Sample Collected ON : 27/Feb/2025 08:41AM

Referred By : Dr.RAM MANOHAR LOHIA HOSPITAL* Sample Received ON

Report Generated ON : 27/Feb/2025 02:26PM

SKIAGRAM CHEST PA VIEW

- Ryle's tube is seen in situ .
- Calcified pleural plaque is seen in right mid and lower zones.
- Ill defined opacities are seen in left mid and lower zones? Infective.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

Adv: Repeat X-ray after a course of antibiotics.

[DR. RAJESH KUMAR SHARMA, MD]

TRANSCRIBED BY: ANUP

*** End Of Report ***

