

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

: CHA250036850 Patient Name : Mr.RAGHUVEER Visit No

Age/Gender : 53 Y/M Registration ON : 01/Mar/2025 11:11AM Lab No : 10134146 Sample Collected ON : 01/Mar/2025 11:15AM Referred By : Dr.KGMU Sample Received ON : 01/Mar/2025 11:15AM Refer Lab/Hosp : CHARAK NA Report Generated ON : 01/Mar/2025 02:30PM

Doctor Advice : URINE COM. EXMAMINATION, HBA1C (EDTA), LIPID-PROFILE, FASTING, ECG, CALCIUM, LFT, NA+K+, CREATININE, UREA, CBC (WHOLE

BLOOD), USG WHOLE ABDOMEN



Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C				
Glycosylated Hemoglobin (HbA1c)	5.7	%	4 - 5.7	HPLC (EDTA)

NOTE:-

P.R.

Glycosylated Hemoglobin Test (HbA1c)is performed in this laboratoryby the Gold Standard Reference method,ie:HPLC Technology(High performance Liquid Chromatography D10) from Bio-Rad Laboratories. USA.

EXPECTED (RESULT) RANGE:

Degree of normal
Normal Value (OR) Non Diabetic
Pre Diabetic Stage
Diabetic (or) Diabetic stage
Well Controlled Diabet
Unsatisfactory Control
Poor Control and needs treatment

SERUM CALCIUM				
CALCIUM	10	mg/dl	8.8 - 10.2	dapta / arsenazo III
LIPID-PROFILE				
Cholesterol/HDL Ratio	4.95	Ratio	/	Calculated
LDL / HDL RATIO	3.37	Ratio		Calculated
		Des	sirable / low risk - (0.5
			-3.0	
		Low	// Moderate risk - 3	3.0-
			6.0	
		Elev	ated / High risk - >	. 6.0
		Des	sirable / low risk - (0.5
			-3.0	
		Low	// Moderate risk - 3	3.0-
			6.0	
		Elev	ated / High risk - >	6.0



DR. NISHANT SHARMA DR. SHADAB **PATHOLOGIST**

PATHOLOGIST

Dr. SYED SAIF AHMAD MD (MICROBIOLOGY) Page 1 of 5

Print.Date/Time: 01-03-2025 16:55:32 *Patient Identity Has Not Been Verified. Not For Medicolegal



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Test Name	F	Result	Unit	Bio. Ref. Range Method			
URINE EXAMINATION REPORT							
Colour-U	Ligh	nt yellow		Li	ght Yellow		
Appearance (Urine)	(CLEAR			Clear		
Specific Gravity	•	1.010		1.0	005 - 1.025		
pH-Urine	Aci	dic (6.0)			4.5 - 8.0		
PROTEIN	H	Absent	mg/dl		ABSENT	[Dipstick
Glucose	Į.	Absent					
Ketones	Į.	Absent			Absent		
Bilirubin-U	A	Absent			Absent		
Blood-U	Į.	Absent			Absent		
Urobilinogen-U		0.20	EU/dL		0.2 - 1.0		
Leukocytes-U	Į.	Absent			Absent		
NITRITE	Į.	Absent			Absent		
MICROSCOPIC EXAMINATION							
Pus cells / hpf	Oc	casional	/hpf		< 5/hpf		
Epithelial Cells	Oc	casional	/hpf		0 - 5		
RBC / hpf		Nil			< 3/hpf		

CHARAK



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BLOOD), USG WHOLE ABDOMEN

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Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	13.8	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.70	mil/cmm	3.8 - 4.8	Electrical
				Impedence
PCV	42.4	%	36 - 45	Pulse hieght
				detection
MCV	90.6	fL	80 - 96	calculated
MCH	29.5	pg	27 - 33	Calculated
MCHC	32.5	g/dL	30 - 36	Calculated
RDW	15.2	%	11 - 15	RBC histogram
				derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	8750	/cmm	4000 - 10000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT	\ _			
NEUTROPHIL	67	%	40 - 75	Flowcytrometry
LYMPHOCYTES	27	%	25 - 45	Flowcytrometry
EOSINOPHIL	3	%	1 - 6	Flowcytrometry
MONOCYTE	3	%	2 - 10	Flowcytrometry
BASOPHIL	0	%	00 - 01	Flowcytrometry
PLATELET COUNT	217,000	/cmm	150000 - 450000	Elect Imped
PLATELET COUNT (MANUAL)	217000	/cmm	150000 - 450000	Microscopy.
Absolute Neutrophils Count	5,862	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,362	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	262	/cmm	20-500	Calculated
Absolute Monocytes Count	262	/cmm	200-1000	Calculated
Mentzer Index	19			
Peripheral Blood Picture	:			

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





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PR.

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

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BLOOD), USG WHOLE ABDOMEN

Test Name	Result	Unit	Bio. Ref. Range	Method	
FASTING					
Blood Sugar Fasting	102.7	mg/dl	70 - 110	Hexokinase	
NA+K+					
SODIUM Serum	139.0	MEq/L	135 - 155	ISE Direct	
POTASSIUM Serum	4.3	MEq/L	3.5 - 5.5	ISE Direct	
BLOOD UREA		7			
BLOOD UREA	24.80	mg/dl	15 - 45	Urease, UV, Serum	
SERUM CREATININE					
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate- kinetic	
LIVER FUNCTION TEST		The second			
TOTAL BILIRUBIN	1.46	mg/dl	0.4 - 1.1	Diazonium Ion	
CONJUGATED (D. Bilirubin)	0.25	mg/dL	0.00-0.30	Diazotization	
UNCONJUGATED (I.D. Bilirubin)	1.21	mg/dL	0.1 - 1.0	Calculated	
ALK PHOS	115.40	U/L	30 - 120	PNPP, AMP Buffer	
SGPT	29.0	U/L	5 - 40	UV without P5P	
SGOT	30.0	U/L	5 - 40	UV without P5P	







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Test Name		Result	Unit	Bio. Ref. Range	Method
LIPID-PROFILE					
TOTAL CHOLESTEROL		211.90	mg/dL	Desirable: <200 mg/dl	CHOD-PAP
				Borderline-high: 200-239	
				mg/dl	
				High:>/=240 mg/dl	
TRIGLYCERIDES		125.30	mg/dL	Normal: <150 mg/dl	Serum, Enzymatic,
				Borderline-high:150 - 199	endpoint
				mg/dl	·
				High: 200 - 499 mg/dl	
				Very high:>/=500 mg/dl	
H D L CHOLESTEROL		42.80	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL		144.04	mg/dL	Optimal:<100 mg/dl	CO-PAP
				Near Optimal: 100 - 129	
				mg/dl	
				Borderline High: 130 - 159)
				mg/dl	
				High: 160 - 189 mg/dl	
				Very High:>/= 190 mg/dl	
VLDL		25.06	mg/dL	10 - 40	Calculated

*** End Of Report ***

CHARAK





PATHOLOGIST

Patient Name

: Mr.RAGHUVEER

Age/Gender

: 53 Y/M

Lab No

PR.

: 10134146

Referred By

: Dr.KGMU

Refer Lab/Hosp

: CHARAK NA

Visit No : CHA250036850

Registration ON : 01/Mar/2025 11:11AM

Sample Collected ON : 01/Mar/2025 11:11AM

Sample Received ON :

Report Generated ON : 01/Mar/2025 12:32PM

ECG-REPORT

RATE : 72 bpm

* RHYTHM : Normal

* P wave : Normal

* PR interval : Normal

* QRS Axis : Normal

Duration : Normal

Configuration : Normal

* ST-T Changes : None

* QT interval :

* QTc interval : Sec.

* Other :

OPINION: ECG WITH IN NORMAL LIMITS

(FINDING TO BE CORRELATED CLINICALLY)

[DR. PANKAJ RASTOGI, MD, DM]



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 : 10134146
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 : 01/Mar/2025 11:11AM

Referred By : Dr.KGMU Sample Received ON :

Refer Lab/Hosp : CHARAK NA Report Generated ON : 01/Mar/2025 12:02PM

ULTRASOUND STUDY OF WHOLE ABDOMEN

- <u>Liver</u> is mildly enlarged in size and shows increased echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- <u>Gall bladder</u> is normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are not thickened.
- **CBD** is normal at porta. No obstructive lesion is seen.
- Portal vein is normal at porta.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is mildly enlarged in size (~ 136 mm) and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 80 x 40 mm in size. Left kidney measures 106 x 42 mm in size.
- <u>Ureters</u> Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- Bilateral seminal vesicles are seen normally.
- **Prostate** is enlarged in size, measures 48 x 41 x 44 mm with weight of 45gms with median lobe enlarged bulging into base of bladder and shows homogenous echotexture of parenchyma.
- Post void residual urine volume approx 45 cc.

OPINION:

- Mild hepato-splenomegaly with fatty infiltration of liver grade-I.
- Grade-II prostatomegaly with median lobe enlargement with significant post void residual urine volume (ADV: SPSA).

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

