

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

E-mail: charak1984@gmail.com

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

Patient Name : Mr.AMRENDRA KUMAR Visit No : CHA250037986

Age/Gender Registration ON : 26 Y/M : 03/Mar/2025 10:33AM Sample Collected ON Lab No : 10135281 : 03/Mar/2025 10:36AM Referred By : Dr.NABARD Sample Received ON : 03/Mar/2025 10:36AM Refer Lab/Hosp : CHARAK KRISHNA NAGAR Report Generated ON : 03/Mar/2025 01:27PM

Doctor Advice : URINE COM. EXMAMINATION, LIPID-PROFILE, CHEST PA, ECG, USG WHOLE ABDOMEN, PP, HBA1C

(EDTA),FASTING,SGOT,SGPT,CREATININE,ESR,CBC (WHOLE BLOOD)

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Test Name	Result	Unit	Bio. Ref. Range	Method	
ESR					
Erythrocyte Sedimentation Rate ESR	9.00		0 - 15	Westergreen	

Note:

P.R.

- 1. Test conducted on EDTA whole blood at 37°C.
- 2. ESR readings are auto-corrected with respect to Hematocrit (PCV) values.
- It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever. It is also increased in multiple myeloma, hypothyroidism.

HBA1C						
Glycosylated Hemoglobin	(HbA1c)	5.7	%	4	- 5.7	HPLC (EDTA)

NOTE:-

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

EXPECTED (RESULT) RANGE:

Bio system	Degree of normal	
4.0 - 5.7 %	Normal Value (OR) Non Diabetic	
5.8 - 6.4 %	Pre Diabetic Stage	
> 6.5 %	Diabetic (or) Diabetic stage	
6.5 - 7.0 %	Well Controlled Diabet	ADAL
7.1 - 8.0 %	Unsatisfactory Control	
> 8.0 %	Poor Control and needs treatment	



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[Checked By

DR. NISHANT SHARMA DR. SHADAB
PATHOLOGIST PATHOLOGIST

Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

Print.Date/Time: 03-03-2025 16:45:13
*Patient Identity Has Not Been Verified. Not For Medicolegal

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(EDTA), FASTING, SGOT, SGPT, CREATININE, ESR, CBC (WHOLE BLOOD)

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID-PROFILE	Result	Oilit	2.0. Non Rungo	moniou
Cholesterol/HDL Ratio	3.36	Ratio		Calculated
LDL / HDL RATIO	1.92	Ratio		Calculated
			Desirable / low risk - 0.5	5
			-3.0	
			Low/ Moderate risk - 3.0)-
			6.0	
			Elevated / High risk - >6.	0
			Desirable / low risk - 0.5	5
			-3.0	
			Low/ Moderate risk - 3.0)-
			6.0	
			Elevated / High risk - > 6	.0

URINE EXAMINATION REPORT						
Colour-U	DARK <mark>YELLOW</mark>		Light Yellow			
Appearance (Urine)	CLEAR		Clear			
Specific Gravity	1.015	1.005 - 1.025				
pH-Urine	Acidic (6.0)		4.5 - 8.0			
PROTEIN	10 mg/dl	mg/dl	ABSENT	Dipstick		
Glucose	Absent					
Ketones	Absent		Absent			
Bilirubin-U	Absent		Absent			
Blood-U	Absent		Absent			
Urobilinogen-U	0.20	EU/dL	0.2 - 1.0			
Leukocytes-U	Absent		Absent			
NITRITE	Absent		Absent			
MICROSCOPIC EXAMINATION						
Pus cells / hpf	Occasional	/hpf	< 5/hpf			
Epithelial Cells	Occasional	/hpf	0 - 5			
RBC / hpf	Nil		< 3/hpf			





P.R.

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

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(EDTA),FASTING,SGOT,SGPT,CREATININE,ESR,CBC (WHOLE BLOOD)



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	15.7	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	5.70	mil/cmm	3.8 - 4.8	Electrical
				Impedence
PCV	49.2	%	36 - 45	Pulse hieght
				detection
MCV	85.9	fL	80 - 96	calculated
MCH	27.4	pg	27 - 33	Calculated
MCHC	31.9	g/dL	30 - 36	Calculated
RDW	14.1	%	11 - 15	RBC histogram
				derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	6290	/cmm	4000 - 10000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	67	%	40 - 75	Flowcytrometry
LYMPHOCYTES	26	%	25 - 45	Flowcytrometry
EOSINOPHIL	1	%	1 - 6	Flowcytrometry
MONOCYTE	6	%	2 - 10	Flowcytrometry
BASOPHIL	0	%	00 - 01	Flowcytrometry
PLATELET COUNT	149,000	/cmm	150000 - 450000	Elect Imped
PLATELET COUNT (MANUAL)	160,000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	4,214	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,635	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	63	/cmm	20-500	Calculated
Absolute Monocytes Count	377	/cmm	200-1000	Calculated
Mentzer Index	15			
Peripheral Blood Picture	:			

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





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Doctor Advice : URINE COM. EXMAMINATION, LIPID-PROFILE, CHEST PA, ECG, USG WHOLE ABDOMEN, PP, HBA1C

(EDTA),FASTING,SGOT,SGPT,CREATININE,ESR,CBC (WHOLE BLOOD)

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Test Name	Result	Unit	Bio. Ref. Range	Method
FASTING				
Blood Sugar Fasting	123.3	mg/dl	70 - 110	Hexokinase
PP				
Blood Sugar PP	176.4	mg/dl	up to - 170	Hexokinase
SERUM CREATININE				
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate- kinetic
SGPT				
SGPT	45.0	U/L	5 - 40	UV without P5P
SGOT				
SGOT	31.0	U/L	5 - 40	UV without P5P
LIPID-PROFILE				
TOTAL CHOLESTEROL	191.80	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-23 mg/dl High:>/=240 mg/dl	
TRIGLYCERIDES	125.50	mg/dL	Normal: <150 mg/dl Borderline-high:150 - 10 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/d	·
H D L CHOLESTEROL	57.00	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	109.70	mg/dL	Optimal:<100 mg/dl Near Optimal:100 - 12 mg/dl Borderline High: 130 - 1 mg/dl High: 160 - 189 mg/dl Very High:>/= 190 mg/d	59
VLDL	25.10	mg/dL	10 - 40	Calculated

*** End Of Report ***





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Age/Gender : 26 Y/M Lab No : 10135281

Referred By

Refer Lab/Hosp

: Dr.NABARD : CHARAK KRISHNA NAGAR

Doctor Advice : (EDTA),FASTING,SGOT,SGPT,CREATININE,ESR,CBC (WHOLE BLOOD)

Report Generated ON : 03/Mar/2025 11:28AM URINE COM. EXMAMINATION, LIPID-PROFILE, CHEST PA, ECG, USG WHOLE ABDOMEN, PP, HBA1C

Bio. Ref. Range **Test Name** Result Unit

Visit No

Registration ON

Sample Collected ON

Sample Received ON







Patient Name : Mr.AMRENDRA KUMAR

 Age/Gender
 : 26 Y/M

 Lab No
 : 10135281

Referred By : Dr.NABARD

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Refer Lab/Hosp : CHARAK KRISHNA NAGAR

Visit No : CHA250037986

Registration ON : 03/Mar/2025 10:33AM Sample Collected ON : 03/Mar/2025 10:33AM

Sample Received ON

Report Generated ON : 03/Mar/2025 11:17AM

ECG-REPORT

RATE : 92 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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ULTRASOUND STUDY OF WHOLE ABDOMEN

- <u>Liver</u> is normal in size measures 122 mm and shows homogenous 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** 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 normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- <u>Both kidneys</u> 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 97 x 49 mm in size. Left kidney measures 95 x 43 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 normal in size measures 38 x 24 x 26 mm with weight of 13 gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

• NO SIGNIFICANT ABNORMALITY DETECTED.

Clinical correlation is necessary.

DR. NISMA WAHEED MD, RADIODIAGNOSIS

(Transcribed by Rachna)



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SKIAGRAM CHEST PA VIEW

• Both lung fields are clear.

- Bilateral hilar shadows are normal.
- 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.

IMPRESSION:

• NO ACTIVE LUNG PARENCHYMAL LESION IS DISCERNIBLE.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

transcribed by: anup

*** End Of Report ***

