

Patient Name : Mr.NAZIM	Visit No : CHA250038118
Age/Gender : 24 Y/M	Registration ON : 03/Mar/2025 12: 18PM
Lab No : 10135413	Sample Collected ON : 03/Mar/2025 12: 19PM
Referred By : Dr.SANJAY KUMAR SINGH	Sample Received ON : 03/Mar/2025 12: 30PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 03/Mar/2025 01: 18PM
Doctor Advice : LFT,FASTING,CBC (WHOLE BLOOD),USG WHOLE ABDOMEN	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	12.9	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	5.00	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	41.3	%	36 - 45	Pulse hieght detection
MCV	83.4	fL	80 - 96	calculated
MCH	26.1	pg	27 - 33	Calculated
MCHC	31.2	g/dL	30 - 36	Calculated
RDW	19.4	%	11 - 15	RBC histogram derivation
RETIC	0.5 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	4900	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	62	%	40 - 75	Flowcytometry
LYMPHOCYTES	31	%	25 - 45	Flowcytometry
EOSINOPHIL	5	%	1 - 6	Flowcytometry
MONOCYTE	2	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	274,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	274000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	3,038	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,519	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	245	/cmm	20-500	Calculated
Absolute Monocytes Count	98	/cmm	200-1000	Calculated
Mentzer Index	17			
Peripheral Blood Picture	:			

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



[Checked By]



Sham

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

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Lab No : 10135413	Sample Collected ON : 03/Mar/2025 12: 19PM
Referred By : Dr.SANJAY KUMAR SINGH	Sample Received ON : 03/Mar/2025 12: 29PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 03/Mar/2025 02: 20PM
Doctor Advice : LFT,FASTING,CBC (WHOLE BLOOD),USG WHOLE ABDOMEN	



Test Name	Result	Unit	Bio. Ref. Range	Method
FASTING				
Blood Sugar Fasting	112.0	mg/dl	70 - 110	Hexokinase

LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.52	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.13	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.39	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	95.80	U/L	30 - 120	PNPP, AMP Buffer
SGPT	22.0	U/L	5 - 40	UV without P5P
SGOT	25.0	U/L	5 - 40	UV without P5P

*** End Of Report ***

CHARAK



[Checked By]



Sham

DR. NISHANT SHARMA PATHOLOGIST DR. SHADAB PATHOLOGIST Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

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Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 03/Mar/2025 01:36PM

ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver** is mildly enlarged in size, and shows homogenously 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.
- **Gall bladder** 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.
- **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 99 x 43 mm in size. Left kidney measures 99 x 48 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** 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 30 x 24 x 31 mm with weight of 12 gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- **MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.**

Clinical correlation is necessary.

[[DR. R.K SINGH , MD]]

TRANSCRIBED BY: ANUP

*** End Of Report ***

