

Patient Name : Mr.RAMESH Visit No : CHA250041048
Age/Gender : 54 Y/M Registration ON : 07/Mar/2025 10:49AM
Lab No : 10138343 Sample Collected ON : 07/Mar/2025 10:51AM
Referred By : Dr.LUCKNOW HOSPITAL Sample Received ON : 07/Mar/2025 10:51AM
Refer Lab/Hosp : CHARAK NA Report Generated ON : 07/Mar/2025 02:08PM
Doctor Advice : 2D ECHO,ECG,USG WHOLE ABDOMEN,CHEST PA,CBC (WHOLE BLOOD),LFT,ANA ,URINE COM. EXMAMINATION,LIPID-PROFILE



Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID-PROFILE				
Cholesterol/HDL Ratio	3.98	Ratio		Calculated
LDL / HDL RATIO	2.58	Ratio		Calculated
			Desirable / low risk - 0.5 -3.0	
			Low/ Moderate risk - 3.0-6.0	
			Elevated / High risk - >6.0	
			Desirable / low risk - 0.5 -3.0	
			Low/ Moderate risk - 3.0-6.0	
			Elevated / High risk - > 6.0	

URINE EXAMINATION REPORT				
Colour-U	STRAW		Light Yellow	
Appearance (Urine)	CLEAR		Clear	
Specific Gravity	1.015		1.005 - 1.025	
pH-Urine	Acidic (6.0)		4.5 - 8.0	
PROTEIN	Absent	mg/dl	ABSENT	Dipstick
Glucose	1.0 gm/dl			
Ketones	Present (40 mg/dl)		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	



[Checked By]

Print.Date/Time: 07-03-2025 14:45:10

*Patient Identity Has Not Been Verified. Not For Medicolegal

DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Dr. Aditi D Agarwal
DR. ADITI D AGARWAL
PATHOLOGIST

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Referred By : Dr.LUCKNOW HOSPITAL Sample Received ON : 07/Mar/2025 11:48AM
Refer Lab/Hosp : CHARAK NA Report Generated ON : 07/Mar/2025 12:59PM
Doctor Advice : 2D ECHO,ECG,USG WHOLE ABDOMEN,CHEST PA,CBC (WHOLE BLOOD),LFT,ANA ,URINE COM. EXMAMINATION,LIPID-PROFILE



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	14.6	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.80	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	44.0	%	36 - 45	Pulse hieght detection
MCV	91.1	fL	80 - 96	calculated
MCH	30.2	pg	27 - 33	Calculated
MCHC	33.2	g/dL	30 - 36	Calculated
RDW	11.9	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	15380	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	90	%	40 - 75	Flowcytometry
LYMPHOCYTES	10	%	25 - 45	Flowcytometry
EOSINOPHIL	0	%	1 - 6	Flowcytometry
MONOCYTE	0	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	390,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	390000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	13,842	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,538	/cmm	1000-3000	Calculated
Mentzer Index	19			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic. WBCs show neutrophilic leucocytosis. Platelets are adequate. No parasite seen.



[Checked By]



Sham

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

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Lab No : 10138343 Sample Collected ON : 07/Mar/2025 10:51AM
Referred By : Dr. LUCKNOW HOSPITAL Sample Received ON : 07/Mar/2025 11:38AM
Refer Lab/Hosp : CHARAK NA Report Generated ON : 07/Mar/2025 12:37PM
Doctor Advice : 2D ECHO, ECG, USG WHOLE ABDOMEN, CHEST PA, CBC (WHOLE BLOOD), LFT, ANA, URINE COM. EXAMINATION, LIPID-PROFILE



Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.60	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.07	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.53	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	91.30	U/L	30 - 120	PNPP, AMP Buffer
SGPT	24.0	U/L	5 - 40	UV without P5P
SGOT	18.0	U/L	5 - 40	UV without P5P

LIPID-PROFILE				
TOTAL CHOLESTEROL	191.00	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-239 mg/dl High: >=240 mg/dl	CHOD-PAP
TRIGLYCERIDES	95.90	mg/dL	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high: >=500 mg/dl	Serum, Enzymatic, endpoint
H D L CHOLESTEROL	48.00	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	123.82	mg/dL	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >= 190 mg/dl	CO-PAP
VLDL	19.18	mg/dL	10 - 40	Calculated

*** End Of Report ***



[Checked By]



Sham

DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)

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ECG -REPORT

RATE : 94 bpm

* RHYTHM : Normal

* P wave : Normal

* PR interval : Normal

* QRS Axis : Normal

Duration : Normal

Configuration : q in L2,L3, avF
concave ST Elevation in L2,L3, avF

* ST-T Changes : T Inversion in avL

* QT interval :

* QTc interval : Sec.

* Other :

OPINION: ? EARLY REPOLARISATION CHANGES
(FINDING TO BE CORRELATED CLINICALLY)

[DR. PANKAJ RASTOGI, MD, DM]



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Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 07/Mar/2025 11:44AM

2D- ECHO & COLOR DOPPLER REPORT

1. **MITRAL VALVE STUDY** : MVOA - Normal (perimetry) cm² (PHT)

Anterior Mitral Leaflet:

- (a) **Motion:** Normal (b) **Thickness :** Normal (c) **DE :** 1.5 cm.
 (d) **EF :** 97 mm/sec (e) **EPSS :** 06 mm (f) **Vegetation :** -
 (g) **Calcium :** -

Posterior mitral leaflet : Normal

- (a). **Motion :** Normal (b) **Calcium:** - (c) **Vegetation :** -

Valve Score : Mobility /4 Thickness /4 SVA /4
Calcium /4 Total /16

2. **AORTIC VALVE STUDY**

- (a) **Aortic root :** 1.8cms (b) **Aortic Opening :** 1.0cms (c) **Closure:** Central
 (d) **Calcium :** - (e) **Eccentricity Index :** 1 (f) **Vegetation :** -

(g) **Valve Structure :** Tricuspid,

3. **PULMONARY VALVE STUDY** Normal

- (a) **EF Slope :** - (b) **A Wave :** + (c) **MSN :** -

(D) **Thickness :** (e) **Others :**

4. **TRICUSPID VALVE :** Normal

5. **SEPTAL AORTIC CONTINUITY** 6. **AORTIC MITRAL CONTINUITY**

Left Atrium : 2.1 cms **Clot :** - **Others :**
Right Atrium : Normal **Clot :** - **Others :** -

Contd.....



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VENTRICLES

RIGHT VENTRICLE : Normal

RVD (D)

RVOT

LEFT VENTRICLE :

LVIVS (D) 0.7 cm (s) 1.1 cm

Motion : normal

LVPW (D) 0.8cm (s) 1.6 cm

Motion : Normal

LVID (D) 3.3 cm (s)2.0 cm

Ejection Fraction :71%

Fractional Shortening : 40 %

TOMOGRAPHIC VIEWS

Parasternal Long axis view :

NORMAL LV RV DIMENSION
GOOD LV CONTRACTILITY.

Short axis view

Aortic valve level :

AOV - NORMAL
PV - NORMAL
TV - NORMAL

Mitral valve level :

MV - NORMAL

Papillary Muscle Level :

NO RWMA

Apical 4 chamber View :

No LV CLOT



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PERICARDIUM

Normal

DOPPLER STUDIES

	Velocity (m/sec)	Flow pattern	Regurgitation (/4)	Gradient (mm Hg)	Valve area (cm 2)
MITRAL	e = 0.6 a = 0.5	Normal	-	-	-
AORTIC	0.8	Normal	-	-	-
TRICUSPID	0.4	Normal	-	-	-
PULMONARY	0.7	Normal	-	-	-

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS :

- NORMAL LV RV DIMENSION
- GOOD LV SYSTOLIC FUNCTION
- LVEF = 71 %
- NO RWMA
- ALL VALVES NORMAL
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSION

OPINION – NORMAL 2D-ECHO & COLOUR DOPPLER STUDY

DR. PANKAJ RASTOGI, MD,DM



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ULTRASOUND STUDY OF WHOLE ABDOMEN

Compromised assessment due to excessive bowel gases.

- **Liver 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.
- **Gall bladder** is normal in size and **shows minimal sludge in 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 87 x 42mm in size. Left kidney measures 96 x 48mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is *partially distended* with foley's catheter in lumen. No calculus or mass lesion is seen.
- Bilateral seminal vesicles are seen normally.
- **Prostrate** is normal in size, measures 29 x 33 x 35mm with weight of 18gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

OPINION:

- **Mild hepatomegaly with fatty infiltration of liver grade-I.**
- **minimal sludge in g.b lumen.**

(Possibility of acid peptic disease could not be ruled out).

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

Transcribed By: Purvi



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SKIAGRAM CHEST AP (LYING) VIEW

- Few fibrotic opacities are seen in right mid zone.
- Heart size cannot be commented upon (AP view).
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply outlined.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by R R...

*** End Of Report ***

