



अ० भ० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
 बहिरंग रोगी विभाग / Out Patient Department
 अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

एकक/Unit _____
 विभाग/Dept. Med - IT

OPR-6
UW10-102359919
 मरुतोपि पंजीकृत सं० / O.P.D. Regn. No. _____

नाम/Name	पिता/पुत्र/पत्नी/पुत्री F/S/W/D of	लिंग Sex	आयु Age	पता/Address
<u>Mrs Premvada Sharma</u>		<u>F</u>	<u>65y</u>	

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
<u>25.6.18</u> BP. <u>120/70 mmHg</u>	① CBC, FBS, HbA1c, RFT, LFT, T3, T4, TSH Lipids, Na, K, Vit D, Vit B12, Urine $< \frac{r}{m}$
<u>28.6.18</u> ①	② Review with reports
<u>2.7.19</u>	1) S. Amlol safe 5mg 100 2) low salt diet 3) cap revit 100
<u>out. same for 6 months</u>	<u>< 3 months</u>

Dr. SANJEEV SINHA
 M.B.S., M.D (Medicine), M.NAMS
 Consultant Physician
 Professor

Dr. SANJEEV SINHA
 M.B.S., M.D (Medicine), M.NAMS
 Consultant Physician
 Professor
 Department of Medicine
 All India Institute of Medical Sciences

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

शरीरपादं बन्तु धर्मसाधनम्

एकक / Unit _____
विभाग / Dept. _____
नाम / Name _____

General Consultation Time: 9.00 AM-1.00 PM
UHID: 101765384
Dept. Regn. 2016/001/0017662
Name: R V SHARMA
S/O R. P. SHARMA, 64Y 9M 26D, M
Ph: 9871833098
C-1/10 PANDARA PARK RD, DELHI,
INDIA
Appt. ID: 2018020802071

OPR-6

No. _____
पता / Address _____

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

25.6.18

① Upr, FBS, HbA1c, RFT, LFT,
Lipids, T3, T4, TSH, Anti TPO,
PSA, vit D, vit B12,
Uric acid, Na, K, Ca

BP
124/80 mmHg

② Urine CM

③ Review with reports

Dr. SANJEEV SINHA
M.B.B.S., M.D. (Medicine), MNAMS
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical Sciences
New Delhi-110029

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प

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 बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

एकक/Unit

विभाग/Dept.

med

OPR-6

U M D - 101765384

न० रोगी पंजीकृत सं० / O.P.D. Regn. No.

नाम/Name

पिता/पुत्र/पत्नी/पुत्री
F/S/W/D of

लिंग
Sex

आयु
Age

पता/Address

Dr R. V. Sharma

M 66 yrs

निदान/Diagnosis

दिनांक/Date

उपचार/Treatment

22.8.19

① Tab Muscar - AM

5mg 100

② Tab Rolomet 50mg 100

③ Tab Rivotril 0.5mg 100

④ Tab Udiliv 300mg 100

X 2 months

⑤ Cp A-2 gold 100

⑥ Tab Nephrosave 100 X 1 month

⑦ Tab Ebroxin 25mg 100

⑧ Low fat / low salt diet ^{BBF}

⑨ Exercise X 6 months

BP 146/80 mmHg

urology opinion on

naty of fluids

DR. RANJEEV SINHA
 M.B.B.S., M.D. (Medicine), MNAIIS
 Consultant Physician
 Professor

Department of Medicine
 All India Institute of Medical Sciences
 New Delhi-110029

CLEAN AND GREEN AIIMS

अंगदान-जीवन का

उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 20

3444, www.orbo.org helpline - 1060 (24 hrs service)

pls exempt charges

प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE
नैदानिक रसायनिक
CLINICAL CHEMISTRY

Dr. SANJEEV SINHA
M.B.B.S., M.D. (Medicine), MNAMS
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical Sciences
New Delhi-110029

अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029
रक्त रसायन/BLOOD CHEMISTRY

नाम/Name Mr. R.V. Sharma आयु/Age 65 लिंग/Sex M

UHID. No. 101768384 OPD/WARD medicine UNIT 2 BED NO.

Date: 21/6/18

Diagnosis & Clinical Note:-

Signature [Signature]
Dr. SANJEEV SINHA
M.B.B.S., M.D. (Medicine), MNAMS
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical Sciences
New Delhi-110029

Time of Specimen Collection
Time of Receiving Specimen

For Lab Use only
Lab Ref. No. 915

~~INCOMPLETE FORM WILL NOT BE ACCEPTED~~
Patient to Report Fasting

25/6

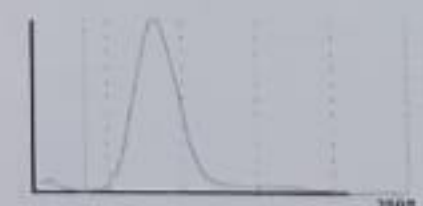
BASO 0.15 + [10³/uL] 1.4 + [%]
IG 0.02 [10³/uL] 0.2 [%]

By lab

EGR 12 mm/hr
(WINGROBE'S)

RBC

PLT



RC IP Message

RBC IP Message

PLT IP Message

Dr. HAR PAL SINGH
हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब. रो. वि.

अ. भा. आ. सं., नई दिल्ली-११००२९

Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi- 110029

दिनांक
Date

विभाग
Deptt.

ब.रो.वि.सं.
O.P.D. No.

SC 109/2017

Neuro Surgery-II

UHID: 102617941

SPINE CLINIC

Date 25/02/2017

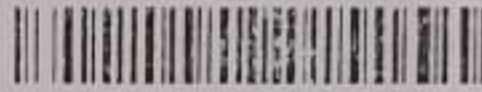
SAT

Slip

Name KANIKA SHARMA

37Y /Female

MR. ANUTOSH SHARMA



e No. 9415333358

Consultant Room 21

Dr. S. S KALE

SR Room:

Registration Time: 8.30 AM - 10.30 AM

~~25/2/17~~

L5/S1 Extended disc
no deficits

At seen on
23/2

Adv

To avoid forward bending
cough, straining, lifting
heavy weights.

walking \approx 2km. 70T

gradually -

levicid 3m/8T

Sat 9AM

Spine clinic



Test No. : 379346
UHID : 376459 Dept No.
Name : Mrs. PREAMVADA SHARMA
Age / Sex :

Bill No. : 14612
Referred by : Dr. A.I.I.M.S
Result Date : 21/09/19 1:07 pm
Print Date : 21/09/2019
BILL Date : 21/09/2019 11:25:00AM
Company : CGHS(CR)

ARTERIAL COLOR DOPPLER

ARTERIAL COLOR DOPPLER BOTH LOWER LIMBS

Mild atherosclerotic intimal medial thickening with scattered tiny calcific foci noted involving bilateral lower limb arteries.

Both lower limbs including common femoral arteries, superficial femoral arteries, popliteal arteries, posterior and anterior tibial arteries and dorsalis pedis arteries are normal in course and calibre.

No evidence of significant flow limiting stenosis / plaque noted.

Spontaneous flow noted on CDFI. No evidence of any thrombus / filling defect.

Spectral tracing reveals normal high resistance triphasic flow pattern.

No evidence of spectral broadening.

Impression :

- **Mild atherosclerotic intimal medial thickening with scattered tiny calcific foci noted involving bilateral lower limb arteries.**

- **No evidence of significant flow limiting stenosis / plaque noted.**

Advice : Clinical correlation.

Swati Paliwal
Radiodiagnosis
Head of Department
Radiology & Imaging

Dr. A.K. Gupta
MBBS, DNB

Radio Diagnosis Consultant Radio-Diagnosis

Dr. Saurabh Banthia
MBBS, DMRD, DNB

Dr. Anilesh Prasad
MD Radio Diagnosis



Test No.	: 317801	Receipt No.	: 63441
UHID	: 379742	Dept No.	
Name	: Mr. RAJVIR SHARMA	Referred by	: Dr. RAHUL
Age / Sex	: 66 Yrs./M	Result Date	: 10/01/19 12:21 pm
		Print Date	: 10/01/2019
		BILL Date	: 10/01/2019 11:48:00AM
		Company	: CGHS (CASH)

ABDOMEN USG

Liver is normal in size (span 13.4 cm), shape and shows **grade II fatty changes**. No focal lesion seen. Intrahepatic biliary radicles and venous channels are normal.
Gall Bladder is distended and shows smooth walls and lumen is echo free. CBD is not dilated.
Pancreas is normal in size, shape and echotexture.
Spleen is normal in size and echotexture.
Both Kidneys are normal in size, shape and echopattern. No calculi or hydronephrosis seen.
Left kidney shows a simple cortical cyst measuring 2.9 cm in diameter in the interpolar region.
Right kidney measures 10.5 x 4.6 cm.
Left kidney measures 10.6 x 5.3 cm.
No enlarged retroperitoneal or mesenteric nodes noted.
No evidence of fluid in peritoneal cavity.
Urinary Bladder is normal in distensibility. Wall thickness is normal and lumen is echofree.
Pre void urine volume is 182 cc. Post void residual urine volume is nil.
Prostate is enlarged in size, measures 48 cc.
Breecb noted in linea alba at the level of umbilicus (width 17 mm) - suggestive of umbilical hernia.

Impression :

- Grade II fatty liver.
- Grade II prostatomegaly.
- Umbilical hernia as described.

Advice : Clinical Correlation.

Dr. Swati Paliwal
MD Radio Diagnosis

Dr.A.K.Gupta
DNB Radio Diagnosis

Neema
Dr. Neema Agarwal
MD Radio Diagnosis

A unit of Yatharth Hospital & Trauma Care Services Pvt. Ltd.

Yatharth Wellness Hospital & Trauma Centre

📍 Sector Omega 1, Greater Noida, Uttar Pradesh - 201308, India

📧 admin@yatharthhealthcare.com 🌐 www.yatharthhealthcare.com



Helpline No
08826447777, 08800



Pt Id. : 392181	Reg. date : 16/08/2019
Name : Mr. RAJVIR SHARMA	Consultant : Dr. RAHUL PUNJ
Age/Sex : 66 M	Specialisation : MEDICINE
Tel No. : 9871833098	Qualification : MBBS, MD, FACC(USA)
Company : CGHS (CASH)	Room No. :

Timings	MON	TUE	WED	THU	FRI	SAT	SUN
Morning	09:30- 13:30	09:30- 13:30	09:30- 13:30	09:30- 13:30	09:30- 13:30	09:30- 13:30	
Evening	17:30- 20:30	17:30- 20:30	17:30- 20:30	17:30- 20:30	17:30- 20:30	17:30- 20:30	
							10:00- 13:00

(1)
(2)
G (12)
G (15)

Temp °F Pulse Perminute B.P. mmhg
 Height cm Weight Kg Allergies

History:
 • Subclinical hypothyroidism
 • HTN.
 • Peripheral neuropathy
 • B6/B12 Def.

CLINICAL ASSESSMENT:

1. Nisar-AM(5) 1 ————— M
 • Protonet XL 50mg ————— 1 E
 • Rivolin 0.5mg 1 ————— N
 • Upnel D3 60K Monon 1 feedm
 • Folic acid 1 ————— 1
 • MCB (1500-ym) 1 ————— 1

CBC BS ESR CRP
 LFT KFT
 PROVISIONAL DIAGNOSIS:
 PSA Total
 Free

Wue RMI E
 Wue CESTA

x. 2 Well

A unit of Yatharth Hospital & Trauma Care Services Pvt. Ltd.



Yatharth Super Speciality Hospital

Sector Omega 1, Greater Noida, Uttar Pradesh - 201308, India
 admin@yatharthhospitals.com www.yatharthhospitals.com

[Signature]
 Helpline Numbers
 08825447777, 08800447777

Patient Name	: MRS. PREMVADA SHARMA	Reg. Date	: 14/JAN/2017
Age/Sex	: 63 YRS/F	Report Date	: 14/JAN/2017
Referred By	: DR SANJEEV SINHA	Print Date	: 14/JAN/2017

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Measurements	Absolute Value	Normal
		Absolute /M2
Aortic root diameter	31	20 –37 mm < 22mm /M2
Aortic valve opening	N	
Left atrial dimension	30	19 –40 mm < 22 mm /M2
RV Dimension	N	07 –26 mm
RV Thickness	N	03 –09 mm
LV ED Dimension	41	37 –56 mm < 32 mm /M2
LV ES Dimension	25	22 –40 mm
IVS Thickness	11	06 –12 mm
LVPW Thickness	11	05 – 11 mm
IVS / LVPW Ratio	N	

INDICES OF LV FUNC.		
EPSS	N	< 9 mm
FS %	N	24-42 %
LV Ejection fraction	60%	> 55 %
MV Dec T	180ms	
MV Dec Slope	4.8m/s ²	

IMAGING: (FAIR ECHOGENIC WINDOW)

- LA/LV/RA/RV are all normal sized.
- **Borderline concentric LVH noted.**
- Mitral and aortic valves are essentially normal.
- **Trivial MR/TR noted with normal gradients.**
- **Grade-I LV diastolic dysfunction noted.**
- Normal LV systolic function noted.
- No RWMA; LVEF=60%
- Normal pericardium seen.

Cont.../2

Patient Name	: MRS. PREMVADA SHARMA	Reg. Date	: 14/JAN/2017
Age/Sex	: 63 YRS/F	Report Date	: 14/JAN/2017
Referred By	: DR SANJEEV SINHA	Print Date	: 14/JAN/2017

RWMA - Absent

DOPPLER:

MV	0.86m/sec	MR	1/4
TV	0.53m/sec	TR	1/4
AV	1.07m/sec	AR	0/4
PV	0.57m/sec	PR	0/4
E/e ratio	14.33		

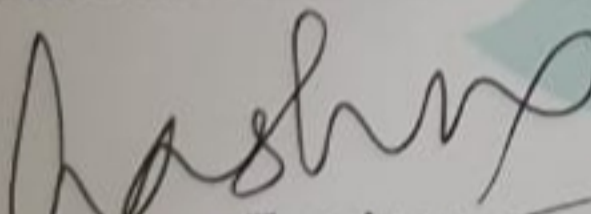
COLOUR FLOW MAPPING:

Trivial TR/MR noted

FINAL IMPRESSION:

- Borderline concentric LVH noted.
- Trivial MR/TR noted.
- Grade-I LV diastolic dysfunction noted.
- Normal LV systolic function noted.
- No RWMA; LVEF=60%

Please correlate clinically.


Dr. Aashna Treohan
MBBS PGDCC Cardiology
Consultant- NIC (Cardiology)

Note: (Echocardiography report given is that of the procedure done on that day and needs to be assessed in conjunction with the clinical findings. This is not for medico legal purposes. No record of this report is kept in the hospital).



Visit No.	: 021806190038	UID No.	: 212375
Patient Name	: Mr. RAJVIR SHARMA	Reg. Date	: 19/Jun/2018 10:57 AM
Age/Sex	: 64.11 YRS / Male	Report Date	: 19/Jun/2018 01:01PM
Referred By	: CGHS	Print Date	: 19/Jun/2018 01:02 PM

ULTRASOUND WHOLE ABDOMEN

Ultrasound was done using a curvilinear probe with special 2D enhancement features including compound and speckle reduction imaging (SRI).

Clinical profile: Patient has complaints of abdominal discomfort.

Liver: is enlarged in size and measures 16.8cm craniocaudally. It shows mild increased echogenicity suggestive of grade I fatty changes. No evidence of any focal parenchymal lesion is seen. Intrahepatic biliary radicals are normal in course and calibre. Portal and hepatic veins are normal in course and calibre. Portal vein at porta measures 13mm in maximum diameter.

Gall bladder: is well distended with clear lumen and normal wall thickness. No calculus is seen. No pericholecystic fluid seen. CBD is normal in calibre and measures 2.2mm in maximum diameter.

Pancreas: is normal in size and echotexture. No focal lesion is seen. The pancreatic duct is not dilated.

Spleen: is normal in size (8.1cm) and echotexture. No focal lesion is seen.

Both kidneys: are normal in size, shape, position and echotexture. Corticomedullary differentiation is maintained bilaterally. No evidence of any calculus or hydronephrosis is noted on either side. Two well-defined exophytic cortical cysts are seen in the left kidney measuring approximately 27.6 x 19.4mm at interpolar cortex and 14.2 x 10.0mm at lower cortex.

Right kidney measures 11.6 x 5.0cm. Cortical thickness measures 1.6cm.

Left kidney measures 11.1 x 5.0cm. Cortical thickness measures 1.2cm.

Urinary Bladder: is normally distended. The bladder wall thickness is normal. No calculus is seen. Pre-void bladder volume measures 493cc. Post-void residual urine measures 51cc.

Prostate: is enlarged in size, and shows homogenous echopattern. It approximately measures 4.6 x 4.2 x 4.0cm (volume: 41.4cc).

No free fluid / significant lymphadenopathy is seen in abdomen or pelvis.

Note is made of a small anterior abdominal wall defect measuring approximately 2.6cm at umbilical level with herniation of omental fat suggestive of umbilical hernia.

*Prabhat
PTO*

- Defence Colony • Gurugram • Hauz Khas Enclave • Sir Ganga Ram Hospital • Fortis Ft. Lt. Rajan Dhall Hospital
- PSRI Hospital • BLK Super Speciality Hospital • Sports Injury Centre, Safdarjung Hospital • Bali Nagar • Dehradun

- Advanced 3T- 32 Channel Digital MRI • 128 Slice Multi - Detector CT • CT Coronary Angiography • Fibroscan for Liver • Cone Beam Dental CT / OPG / Cephalogram
- 4D Ultrasound with Doppler • Dual Energy 1000mA True Digital X-Ray • Full Field Digital Mammography with CAD • DEXA Bone Densitometry
- 4D-Echo, Stress Echo, TMT, ECG, Holter & PFT • MRI / CT / US Guided Biopsy

PSC GREATER NOIDA (OMEGA 1)
 S-38, P2, SECTOR-OMEGA 1ST BUILDERS
 AREA, GREATER NOIDA
 NOIDA



Name	: Mr. RAJVIR SHARMA	Collected	: 19/10/2018 8:59:00AM
Lab No.	: 143233421	Received	: 19/10/2018 9:12:51AM
Age	: 65 Years	Reported	: 20/10/2018 10:43:38AM
Gender	: Male	Report Status	: Final
A/c Status	: P	Ref By	: AIIMS

Test Name	Results	Units	Bio. Ref. Interval
60-69	85		
>=70	75		

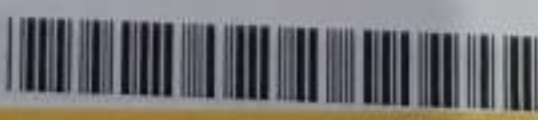
- Note**
1. National Kidney Disease Education program recommends the use of MDRD equation to estimate or predict GFR in adults (>=20 years) with Chronic Kidney Disease (CKD)
 2. MDRD equation is most accurate for GFR <=60 mL/min/1.73m²
 3. Recalculation of estimated GFR is required for African American race

Interpretation

CKD STAGE	DESCRIPTION	GFR(mL/min/1.73m ²)	ASSOCIATED FINDINGS
0	Normal kidney Function	>90	No Proteinuria
1	Kidney damage with normal or high GFR	>90	Presence of Protein, albumin, cells or casts seen in urine
2	Mild decrease in GFR	60 - 89	-
3	Moderate decrease in GFR	30 - 59	-
4	Severe decrease in GFR	15 - 29	-
5	Kidney Failure	<15	-

Comments

Modification of diet in renal disease (MDRD) equation is most thoroughly validated and superior to all the other methods for estimation of GFR. It does not require weight as a variable and yields an estimated GFR normalized to 1.73m² body surface area. Using serum creatinine alone gives a poor inference of GFR because they are inversely related and effects of age, sex and race on creatinine production complicate interpretation. For African American races a modified formula is used for calculation of GFR.



If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory
 If te
 @ Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory
 @ Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory

MAHAJAN IMAGING DEFENCE COLONY

Name **SHARM, PREMVADA**
Patient Id **81795**
Age **63**

Date **14/01/2017**
Sex **Female**

Image 1



Image 2



Image 3

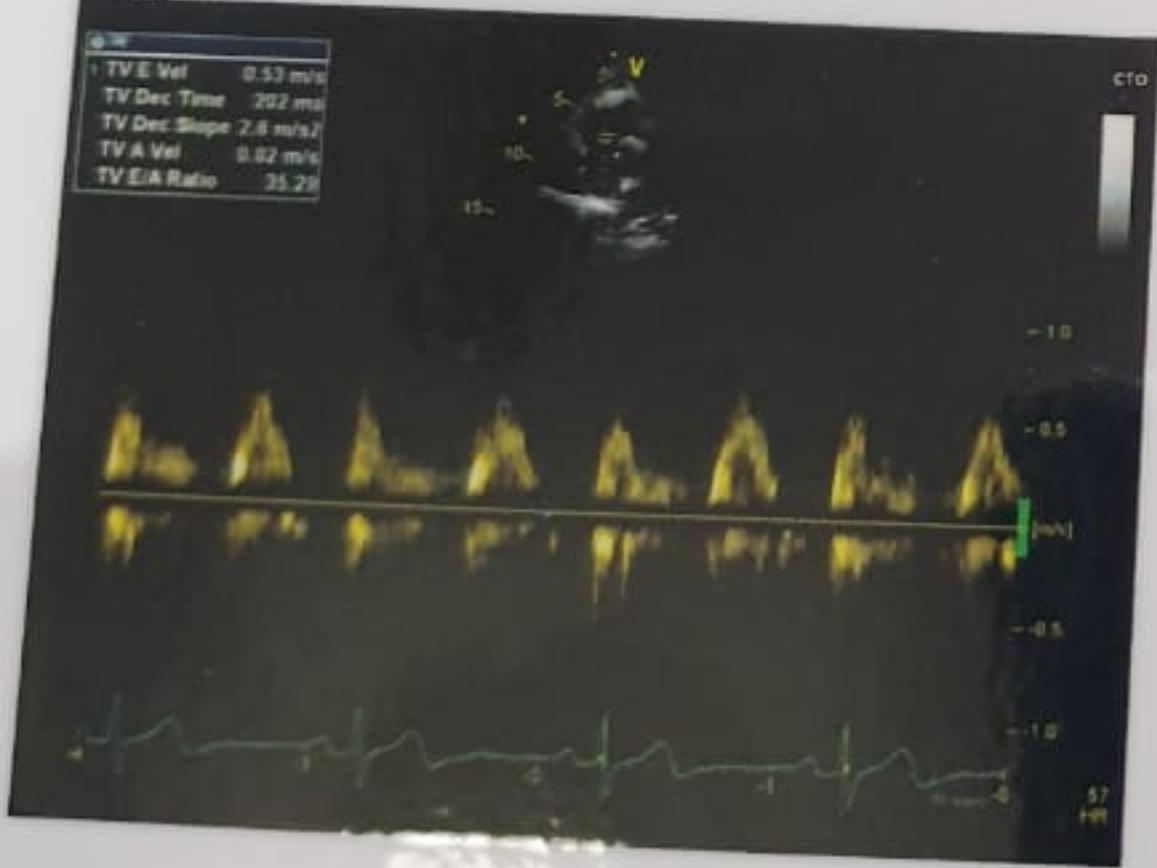


Image 4

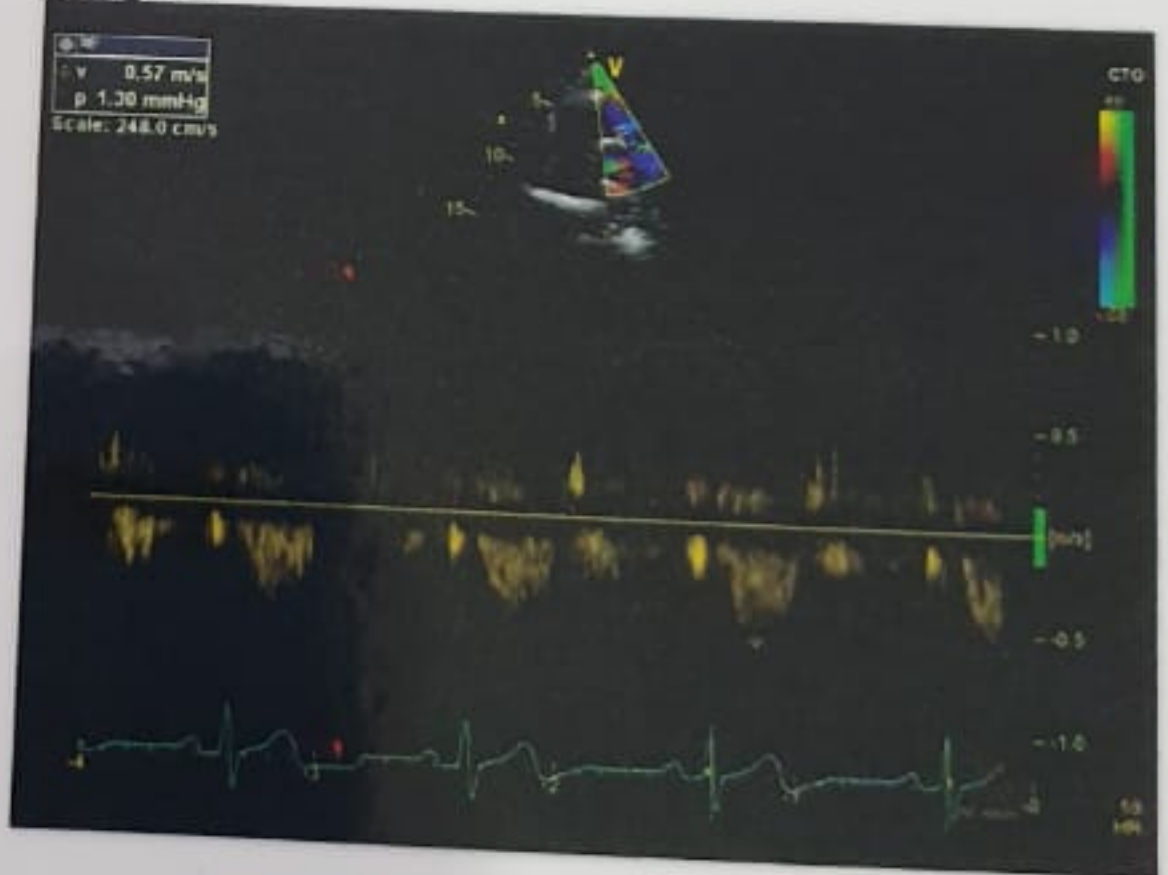
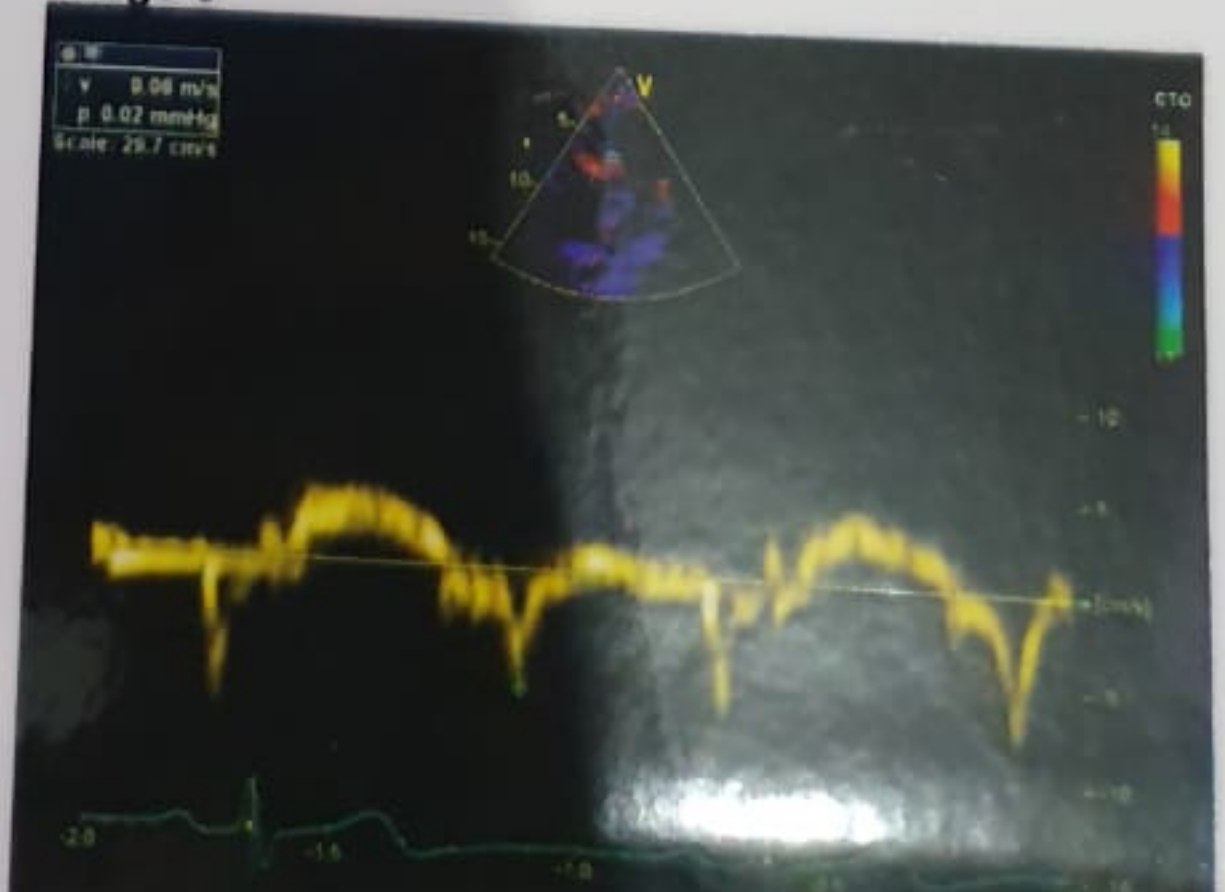


Image 5



Image 6



L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA



Name : CGHS-4313113.MR. RAJVIR SHARMA Collected : 19/12/2018 8:44:00AM
 Lab No. : 144501126 Age: 65 Years Gender: Male Received : 19/12/2018 8:44:34AM
 A/c Status : P Ref By : CGHS Reported : 19/12/2018 1:53:39PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
LIVER PANEL 1; LFT,SERUM (Spectrophotometry)			
Bilirubin Total	1.60	mg/dL	0.20 - 1.10
Bilirubin Direct	0.90	mg/dL	<0.20
Bilirubin Indirect	0.70	mg/dL	<1.10
AST (SGOT)	42	U/L	<50
ALT (SGPT)	54	U/L	<50
GGTP	19	U/L	<55
Alkaline Phosphatase (ALP)	89	U/L	30.00 - 120.00
Total Protein	7.50	g/dL	6.40 - 8.10
Albumin	4.40	g/dL	3.20 - 4.60
A : G Ratio	1.42		0.90 - 2.00

Note : In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or Non alcoholic fatty liver disease. Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis.

Dr. Swati Singh
 MD (Pathology)
 Chief of Lab

-----End of report-----

IMPORTANT INSTRUCTIONS

*Test results released pertain to the specimen submitted.*All test results are dependent on the quality of the sample received by the Laboratory
 *Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician.*Sample repeats are accepted on request of Referring Physician within 7 days post reporting.*Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted.*Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting.*Test results may show interlaboratory variations.*The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s).*Test results are not valid for medico legal purposes.*Contact customer care Tel No. +91-11-39885050 for all queries related to test results.



L28 - PSC GREATER NOIDA (OMEGA 1)
NS-38, P2, SECTOR-OMEGA 1ST BUILDERS
AREA, GREATER NOIDA
NOIDA



Name	: Mr. RAJVIR SHARMA	Collected	: 19/10/2018 8:59:00AM
Lab No.	: 143233421	Age: 65 Years	Gender: Male
A/c Status	: P	Ref By: AIIMS	Report Status: Final
		Received	: 19/10/2018 9:12:51AM
		Reported	: 20/10/2018 10:43:38AM

Test Name	Results	Units	Bio. Ref. Interval
LIVER & KIDNEY PANEL, SERUM (Spectrophotometry, Indirect ISE)			
Bilirubin Total	1.17	mg/dL	0.20 - 1.10
Bilirubin Direct	0.21	mg/dL	<0.20
Bilirubin Indirect	0.96	mg/dL	<1.10
AST (SGOT)	39	U/L	<50
ALT (SGPT)	45	U/L	<50
GGTP	23	U/L	<55
Alkaline Phosphatase (ALP)	129	U/L	30.00 - 120.00
Total Protein	8.00	g/dL	6.40 - 8.10
Albumin	4.47	g/dL	3.20 - 4.60
A : G Ratio	1.27		0.90 - 2.00
Urea	19.00	mg/dL	17.00 - 43.00
Creatinine	1.07	mg/dL	0.67 - 1.17
Uric Acid	6.98	mg/dL	3.50 - 7.20
Calcium, Total	9.70	mg/dL	8.80 - 10.20
Phosphorus	2.80	mg/dL	2.30 - 3.70
Sodium	138.00	mEq/L	136.00 - 146.00
Potassium	3.65	mEq/L	3.50 - 5.10
Chloride	100.00	mEq/L	101.00 - 109.00

GFR (GLOMERULAR FILTRATION RATE), MDRD @
(Compensated Jaffe's reaction, IDMS traceable)

Creatinine, Serum	1.07	mg/dL	0.67 - 1.17
GFR, Estimated	69	mL/min/1.73m ²	

Interpretation

AGE IN YEARS	GFR IN mL/min/1.73m ²
20-29	116
30-39	107
40-49	99
50-59	93



L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 3/4/2019 9:40:00AM
Lab No.	: 145909115	Age: 66 Years	Gender: Male
A/c Status	: P	Ref By: CGHS	Report Status: Final
		Received	: 3/4/2019 9:41:10AM
		Reported	: 3/4/2019 7:03:55PM

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY PANEL; KFT,SERUM (Spectrophotometry, Indirect ISE)			
Urea	22.10	mg/dL	17.00 - 43.00
Creatinine	0.80	mg/dL	0.67 - 1.17
Uric Acid	5.80	mg/dL	3.50 - 7.20
Calcium, Total	9.40	mg/dL	8.80 - 10.20
Phosphorus	3.10	mg/dL	2.30 - 3.70
Alkaline Phosphatase (ALP)	103	U/L	30.00 - 120.00
Total Protein	7.80	g/dL	6.40 - 8.10
Albumin	4.40	g/dL	3.20 - 4.60
A : G Ratio	1.29		0.90 - 2.00
Sodium	145.00	mEq/L	136.00 - 146.00
Potassium	3.90	mEq/L	3.50 - 5.10
Chloride	107.00	mEq/L	101.00 - 109.00



Test No. : 370125	Receipt No. : 44220
UHID : 392181 Dept No.	Referred by : Dr. RAHUL PUNJ
Name : Mr. RAJVIR SHARMA	Result Date : 21/08/19 12:24 pm
Age / Sex : 66 Yrs./M	Print Date : 21/08/2019
	BILL Date : 21/08/2019 10:49:00AM
	Company : CGHS (CASH)

ABDOMEN USG

Liver is enlarged in size (16.2cm), shape and shows grade I fatty changes. No focal lesion seen. Intrahepatic biliary radicles and venous channels are normal.

Gall Bladder is distended and shows smooth walls and lumen is echo free. CBD is not dilated.

Pancreas is normal in size, shape and echotexture.

Spleen is normal in size (7.0 cm) and echotexture.

Both kidneys are normal in size, shape and echopattern. No calculi or hydronephrosis seen on left side. Right kidney measures 11.4 x 4.9 cm.

Left kidney measures 10.7 x 5.2 cm and shows a calculus measuring 3.0 mm at upper calyx.

Focal partly exophytic cortical cyst measuring 2.5 cm noted in the mid pole.

No evidence of fluid in peritoneal cavity.

There is seen defect in anterior abdominal wall in umbilical region with herniation of omentum through it, neck of defect measuring 1.8 x 1.7 cm.

Urinary bladder is normal in distensibility. Wall thickness is normal and lumen is echofree.

Prevoid urine volume is 229 cc.

Post void urine volume is 30 cc.

Prostate is enlarged in size and normal in echotexture. It measures 48 cc.

Impression:

- **Hepatomegaly with grade I fatty changes.**
- **Left renal calculus.**
- **Umbilical hernia.**
- **Prostatomegaly.**

Advice: Clinical Correlation.

Dr. Swati Paliwal
MD Radio Diagnosis

Dr. A.K. Gupta
DNB Radio Diagnosis

Dr. Saurabh Banthia
MBBS, DMRD, DNB
Consultant Radio-Diagnosis

Dr. Anilesh Pratap Singh
MD Radio Diagnosis

Name : CGHS-4313113.MR. RAJVIR SHARMA
 Lab No. : 148743529 Age: 66 Years Gender: Male
 A/c Status : P Ref By : CGHS
 Collected : 23/8/2019 8:34:00AM
 Received : 23/8/2019 8:35:32AM
 Reported : 23/8/2019 5:10:34PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
ANTI THYROID PEROXIDASE ANTIBODY;(ANTI TPO), SERUM @ (CLIA)	54.00	U/mL	<60.00

Note: Thyroid Peroxidase antibodies may be detected in individuals without clinically significant thyroid disease. They do not define the patient's thyroid functional status. Anti TPO is technically superior and a more specific method for measuring thyroid antibodies. It is especially useful in patients presenting with subclinical hypothyroidism where TSH is elevated but free T4 levels are normal.

Clinical Use

- Confirm presence of Autoimmune thyroid disease

Increased Levels

- Hashimoto thyroiditis
- Graves disease
- Postpartum thyroiditis
- Primary hypothyroidism due to Hashimoto thyroiditis

T4, FREE; FT4, SERUM (Chemiluminescent Immunoassay)	1.17	ng/dL	0.89 - 1.76
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Clinical Use

- Initial test of thyroid function in patients with suspected thyroid dysfunction
- Assess thyroid status in patients with abnormal total T4 concentrations
- Distinguish Euthyroid hyperthyroxinemias from hypothyroidism.

Increased Levels: Thyroid hormone resistance, Hyperthyroidism

Decreased Levels: Primary hypothyroidism, Secondary hypothyroidism

TSH, ULTRASENSITIVE, SERUM (Chemiluminescent Immunoassay)	7.517	uIU/mL	0.550 - 4.7
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Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
2. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some



LPL - WALK IN PSC HANUMAN ROAD
 REG. BUILDING CANNUAGHT PLACE-110001



Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 19/6/2018 10:09:00AM
Lab No.	: 140158291	Age: 65 Years	Gender: Male
A/c Status	: P	Ref By : CGHS DISPENSARY [CASH]	Report Status : Final
		Received	: 19/6/2018 10:13:10AM
		Reported	: 19/6/2018 4:39:29PM

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE, BASIC, SERUM (Spectrophotometry, Calculated)			
Cholesterol Total	182.00	mg/dL	<200.00
Triglycerides	144.00	mg/dL	<150.00
HDL Cholesterol	34.20	mg/dL	>40.00
LDL Cholesterol, Direct	131.00	mg/dL	<100.00
VLDL Cholesterol	16.80	mg/dL	<30.00
Non-HDL Cholesterol	147.80	mg/dL	<130.00

Interpretation

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL in mg/dL	TRIGLYCERIDE in mg/dL	LDL CHOLESTEROL in mg/dL	NON HDL CHOLESTEROL in mg/dL
Optimal	<200	<150	<100	<130
Above optimal	-	-	100- 129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

Note

- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.
- As per NLA-2014 guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended. Low HDL levels are associated with increased risk for Atherosclerotic Cardiovascular disease (ASCVD) due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues. NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogenic lipoproteins such as LDL, VLDL, IDL, and Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL & Non HDL. Lipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved. Testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients





Test No. : **317801**
UHID : 379742 Dept No.
Name : Mr. RAJVIR SHARMA
Age / Sex : 66 Yrs./M

Receipt No. : 63441
Referred by : Dr. RAHUL
Result Date : 10/01/19 12:21 pm
Print Date : 10/01/2019
BILL Date : 10/01/2019 11:48:00AM
Company : CGHS (CASH)

ABDOMEN USG

Liver is normal in size (span 13.4 cm), shape and shows **grade II fatty changes**. No focal lesion seen. Intrahepatic biliary radicles and venous channels are normal. Gall Bladder is distended and shows smooth walls and lumen is echo free. CBD is not dilated. Pancreas is normal in size, shape and echotexture. Spleen is normal in size and echotexture.

Both Kidneys are normal in size, shape and echopattern. No calculi or hydronephrosis seen. **Left kidney shows a simple cortical cyst measuring 2.9 cm in diameter in the interpolar region.** Right kidney measures 10.5 x 4.6 cm. Left kidney measures 10.6 x 5.3 cm.

No enlarged retroperitoneal or mesenteric nodes noted. No evidence of fluid in peritoneal cavity.

Urinary Bladder is normal in distensibility. Wall thickness is normal and lumen is echofree. Pre void urine volume is 182 cc. Post void residual urine volume is nil.

Prostate is enlarged in size, measures 48 cc.

Breech noted in linea alba at the level of umbilicus (width 17 mm) - suggestive of umbilical hernia.

Impression :

- Grade II fatty liver.
- Grade II prostatomegaly.
- Umbilical hernia as described.

Advice : Clinical Correlation.

Dr. Swati Paliwal
MD Radio Diagnosis

Dr. A.K. Gupta
DNB Radio Diagnosis

Neema
Dr. Neema Agarwal
MD Radio Diagnosis

A unit of Yatharth Hospital & Trauma Care Services Pvt. Ltd.



Yatharth Wellness Hospital & Trauma Centre

📍 Sector Omega 1, Greater Noida, Uttar Pradesh - 201308, India
📧 admin@yatharthhealthcare.com 🌐 www.yatharthhealthcare.com

Helpline Numbers
08826447777, 08800447777

📧 admin@yatharthhealthcare.com 🌐 www.yatharthhealthcare.com

08826447777, 08800447777

... Noida
 ... to 21,
 ... 116
 ALPHA 1, ALPHA COMMERCIAL BELT

Name : CGHS-4313113.MR. RAJVIR SHARMA
 Age: 66 Years Gender: Male
 Lab No. : 145909115 Ref By : CGHS
 Collected : 3/4/2019 9:40:00AM
 Received : 3/4/2019 9:41:10AM
 Reported : 3/4/2019 7:03:55PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
COMPLETE BLOOD COUNT (CBC) (Electrical Impedance, Manual)			
Hemoglobin	16.60	g/dL	13.00 - 17.00
Packed Cell Volume (PCV)	49.30	%	40.00 - 50.00
RBC Count	5.45	mill/mm3	4.50 - 5.50
MCV	90.00	fL	80.00 - 100.00
MCH	30.60	pg	27.00 - 32.00
MCHC	33.80	g/dL	32.00 - 35.00
Red Cell Distribution Width (RDW)	11.70	%	11.50 - 14.50
Total Leukocyte Count (TLC)	9.60	thou/mm3	4.00 - 10.00
Differential Leucocyte Count (DLC)			
Segmented Neutrophils	59.90	%	40.00 - 80.00
Lymphocytes	29.10	%	20.00 - 40.00
Monocytes	5.20	%	2.00 - 10.00
Eosinophils	5.70	%	1.00 - 6.00
Basophils	0.10	%	<2.00
Absolute Leucocyte Count			
Neutrophils	5.75	thou/mm3	2.00 - 7.00
Lymphocytes	2.79	thou/mm3	1.00 - 3.00
Monocytes	0.50	thou/mm3	0.20 - 1.00
Eosinophils	0.55	thou/mm3	0.02 - 0.50
Basophils	0.01	thou/mm3	0.01 - 0.10
Platelet Count	274.0	thou/mm3	150.00 - 450.00

Note



If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 ... conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory

18/10

Rajvir Sharma

148/86 mmHg

low salt

Nephro opinion:

HTN. / CKD (PNDIEM)

Am.
18.10.18

~~ADDM~~

~~SALT RESTRICTED DIET / NO JUICES
NO AYURVED MEDICATION / NO PAIN KILLERS~~

~~ADD~~

~~TAB NEFROSAFE (1) - (1)~~

- @ TAB LWD₃ @ CALCIMIA PARTNER
60k (10m)

once per week



(X) 1 month

Noida
 CGHS-4313113.MR. RAJVIR SHARMA
 ALPHA 1, ALPHA COMMERCIAL BELT

CGHS-4313113.MR. RAJVIR SHARMA
 Lab No. : 148743767 Age: 66 Years Gender: Male
 A/C Status : P Ref By : CGHS
 Collected : 20/8/2019 8:38:00AM
 Received : 20/8/2019 8:43:02AM
 Reported : 20/8/2019 6:05:18PM
 Report Status : Interim

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE, TOTAL, SERUM (Chemiluminescent Immunoassay)			
T3, Total	1.15	ng/mL	0.60 - 1.81
T4, Total	10.40	ug/dL	5.01 - 12.45
TSH	9.87	uIU/mL	0.35 - 5.50

Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm . The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood





Name : Mr. RAJVIR SHARMA
Lab No. : 143233421 Age: 65 Years Gender: Male
A/c Status : P Ref By : AIIMS
Collected : 19/10/2018 8:59:00AM
Received : 19/10/2018 9:12:51AM
Reported : 20/10/2018 10:43:38AM
Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
LIVER & KIDNEY PANEL, SERUM (Spectrophotometry, Indirect ISE)			
Bilirubin Total	1.17	mg/dL	0.20 - 1.10
Bilirubin Direct	0.21	mg/dL	<0.20
Bilirubin Indirect	0.96	mg/dL	<1.10
AST (SGOT)	39	U/L	<50
ALT (SGPT)	45	U/L	<50
GGTP	23	U/L	<55
Alkaline Phosphatase (ALP)	129	U/L	30.00 - 120.00
Total Protein	8.00	g/dL	6.40 - 8.10
Albumin	4.47	g/dL	3.20 - 4.60
A : G Ratio	1.27		0.90 - 2.00
Urea	19.00	mg/dL	17.00 - 43.00
Creatinine	1.07	mg/dL	0.67 - 1.17
Uric Acid	6.90	mg/dL	3.50 - 7.20
Calcium, Total	9.70	mg/dL	8.80 - 10.20
Phosphorus	2.80	mg/dL	2.30 - 3.70
Sodium	138.00	mEq/L	136.00 - 146.00
Potassium	3.65	mEq/L	3.50 - 5.10
Chloride	100.00	mEq/L	101.00 - 109.00

GFR (GLOMERULAR FILTRATION RATE), MDRD @ (Compensated Jaffe's reaction, IDMS traceable)			
Creatinine, Serum	1.07	mg/dL	
GFR, Estimated	69	mL/min/1.73m ²	0.67 - 1.17

Interpretation

AGE IN YEARS	GFR IN mL/min/1.73m ²
20-29	116
30-39	107
40-49	99
50-59	93



66 Yrs./M
 No. 118
 ALPHA 1, ALPHA COMMERCIAL BELT

Referred by : Dr. RAHUL
 Result Date

CGHS-4313113.MR. RAJVIR SHARMA
 No. 148743767 Age: 66 Years Gender: Male
 Status P Ref By : CGHS
 Collected : 20/8/2019 8:38:00AM
 Received : 20/8/2019 8:43:02AM
 Reported : 20/8/2019 6:05:08PM
 Report Status : Interim

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY PANEL: KFT,SERUM @			
Urea (Urease UV)	20.00	mg/dL	17.00 - 43.00
Creatinine (Modified Jaffe, Kinetic)	0.92	mg/dL	0.67 - 1.17
Uric Acid (Urease)	6.70	mg/dL	3.50 - 7.20
Calcium, Total (Arsenazo III)	<u>8.70</u>	mg/dL	8.80 - 10.20
Phosphorus (Molybdate UV)	2.60	mg/dL	2.30 - 3.70
Alkaline Phosphatase (ALP) (IFCC-AMP)	104	U/L	30 - 120
Total Protein (Buret)	7.30	g/dL	6.40 - 8.10
Albumin (BCG)	4.01	g/dL	3.20 - 4.60
A : G Ratio (Calculated)	1.22		0.90 - 2.00
Sodium (Indirect ISE)	137.00	mEq/L	136.00 - 146.00
Potassium (Indirect ISE)	<u>3.41</u>	mEq/L	3.50 - 5.10



If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 @ Tests conducted at Referral Lab.

KIDNEY PANEL; KFT,SERUM
(Spectrophotometry, Indirect ISE)

Urea	22.10	mg/dL	17.00 - 43.00
Creatinine	0.80	mg/dL	0.67 - 1.17
Uric Acid	5.80	mg/dL	3.50 - 7.20
Calcium, Total	9.40	mg/dL	8.80 - 10.20
Phosphorus	3.10	mg/dL	2.30 - 3.70
Alkaline Phosphatase (ALP)	103	U/L	30.00 - 120.00
Total Protein	7.80	g/dL	6.40 - 8.10
Albumin	4.40	g/dL	3.20 - 4.60
A : G Ratio	1.29		0.90 - 2.00
Sodium	145.00	mEq/L	136.00 - 146.00
Potassium	3.90	mEq/L	3.50 - 5.10
Chloride	107.00	mEq/L	101.00 - 109.00

L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116

MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name : CGHS-4313123.MS. PREAMVADA SHARMA

Lab No. : 150196012 Age: 66 Years

Gender: Female

A/c Status : P

Ref By : CGHS

Collected : 22/10/2019 9:13:00AM
 Received : 22/10/2019 9:14:50AM
 Reported : 22/10/2019 3:57:43PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
GLUCOSE, FASTING (F), PLASMA (Hexokinase)	96.00	mg/dL	70.00 - 100.00



L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 3/4/2019 9:40:00AM
Lab No.	: 145909115	Age: 66 Years	Gender: Male
A/c Status	: P	Ref By : CGHS	Report Status : Final
		Received	: 3/4/2019 9:41:10AM
		Reported	: 3/4/2019 7:03:55PM

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY PANEL; KFT,SERUM (Spectrophotometry, Indirect ISE)			
Urea	22.10	mg/dL	17.00 - 43.00
Creatinine	0.80	mg/dL	0.67 - 1.17
Uric Acid	5.80	mg/dL	3.50 - 7.20
Calcium, Total	9.40	mg/dL	8.80 - 10.20
Phosphorus	3.10	mg/dL	2.30 - 3.70
Alkaline Phosphatase (ALP)	103	U/L	30.00 - 120.00
Total Protein	7.80	g/dL	6.40 - 8.10
Albumin	4.40	g/dL	3.20 - 4.60
A : G Ratio	1.29		0.90 - 2.00
Sodium	145.00	mEq/L	136.00 - 146.00
Potassium	3.90	mEq/L	3.50 - 5.10
Chloride	107.00	mEq/L	101.00 - 109.00



L28 - PSC GREATER NOIDA (OMEGA 1)
 NS-38, P2, SECTOR-OMEGA 1ST BUILDERS
 AREA, GREATER NOIDA
 NOIDA



Name	: Mr. RAJVIR SHARMA	Collected	: 30/3/2019 1:31:00PM
Lab No.	: 145698554	Age: 66 Years	Gender: Male
A/c Status	: P	Ref By: SELF	Reported
			: 30/3/2019 1:42:41PM
			: 31/3/2019 10:46:41AM
			Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
PROTEIN, TOTAL, RANDOM URINE @ (Spectrophotometry)	36.70	mg/dL	<14.00

Note

1. Excretion of total protein in individuals is highly variable with or without kidney disease.
2. Conditions affecting protein excretion other than kidney disease are urinary tract infection, diet, menstruation & physical activity.

Himangshu Mazumdar

Dr Himangshu Mazumdar
 MD, Biochemistry
 Consultant Biochemist
 NRL - Dr Lal PathLabs Ltd

Nimmi Kansal

Dr Nimmi Kansal
 MD, Biochemistry
 National Head - Clinical Chemistry &
 Biochemical Genetics
 NRL - Dr Lal PathLabs Ltd

-----End of report-----

IMPORTANT INSTRUCTIONS

*Test results released pertain to the specimen submitted.*All test results are dependent on the quality of the sample received by the Laboratory.
 *Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician.*Sample repeats are accepted on request of Referring Physician within 7 days post reporting.*Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted.*Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting.*Test results may show interlaboratory variations.*The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s).*Test results are not valid for medico legal purposes. *Contact customer care Tel No. +91-11-39885050 for all queries related to test results.
 (#) Sample drawn from outside source.

Patient Name	: MRS. PREMVADA SHARMA	Reg. Date	: 14/JAN/2017
Age/Sex	: 63 YRS/F	Report Date	: 14/JAN/2017
Referred By	: DR SANJEEV SINHA	Print Date	: 14/JAN/2017

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Measurements	Absolute Value	Normal
		Absolute /M2
Aortic root diameter	31	20 –37 mm < 22mm /M2
Aortic valve opening	N	
Left atrial dimension	30	19 –40 mm < 22 mm /M2
RV Dimension	N	07 –26 mm
RV Thickness	N	03 –09 mm
LV ED Dimension	41	37 –56 mm < 32 mm /M2
LV ES Dimension	25	22 –40 mm
IVS Thickness	11	06 –12 mm
LVPW Thickness	11	05 – 11 mm
IVS / LVPW Ratio	N	

INDICES OF LV FUNC.		
EPSS	N	< 9 mm
FS %	N	24-42 %
LV Ejection fraction	60%	> 55 %
MV Dec T	180ms	
MV Dec Slope	4.8m/s ²	

IMAGING: (FAIR ECHOGENIC WINDOW)

- LA/LV/RA/RV are all normal sized.
- **Borderline concentric LVH noted.**
- Mitral and aortic valves are essentially normal.
- **Trivial MR/TR noted with normal gradients.**
- **Grade-I LV diastolic dysfunction noted.**
- Normal LV systolic function noted.
- No RWMA; LVEF=60%
- Normal pericardium seen.

Cont.../2.

Total
Album
A : G F
Urea
am,
spho
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GLO
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nine,
Estim
tatic
W Y



L28 - Greater Noida
SH.# G-18 to 21,
114,115 & 116
MSX T ALPHA 1, ALPHA COMMERCIAL BELT
NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 19/12/2018 8:43:00AM
Lab No.	: 144501125	Received	: 19/12/2018 8:43:48AM
Age	: 65 Years	Reported	: 19/12/2018 5:27:21PM
Gender	: Male	Report Status	: Final
A/c Status	: P	Ref By	: CGHS

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY PANEL; KFT,SERUM (Spectrophotometry, Indirect ISE)			
Urea	28.10	mg/dL	17.00 - 43.00
Creatinine	1.10	mg/dL	0.67 - 1.17
Uric Acid	8.20 ✓	mg/dL	3.50 - 7.20
Calcium, Total	10.30	mg/dL	8.80 - 10.20
Phosphorus	3.20	mg/dL	2.30 - 3.70
Alkaline Phosphatase (ALP)	89	U/L	30.00 - 120.00
Total Protein	7.80	g/dL	6.40 - 8.10
Albumin	4.40	g/dL	3.20 - 4.60
A : G Ratio	1.29		0.90 - 2.00
Sodium	139.00	mEq/L	136.00 - 146.00
Potassium	3.70	mEq/L	3.50 - 5.10
Chloride	99.00	mEq/L	101.00 - 109.00

Comment:
Urea and creatinine are early markers of kidney disease. The Protein Creatinine ratio is a simple and convenient method to identify and monitor proteinuria in adults with chronic kidney disease. Patients with 2 or more positive results within a period of 3-6 weeks should be labeled as having persistent proteinuria and treated accordingly.

Signature: _____
Name: _____
Designation: _____
Date: _____



L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 3/4/2019 9:44:00AM
Lab No.	: 145909114	Age: 66 Years	Gender: Male
A/c Status	: P	Ref By: SELF	Reported
			: 3/4/2019 9:46:02AM
			: 3/4/2019 6:21:33PM
			Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE, BASIC, SERUM (Spectrophotometry, Calculated)			
Cholesterol Total	195.00	mg/dL	<200.00
Triglycerides	179.00	mg/dL	<150.00
HDL Cholesterol	36.00	mg/dL	>40.00
LDL Cholesterol	123.20	mg/dL	<100.00
VLDL Cholesterol	35.80	mg/dL	<30.00
Non-HDL Cholesterol	159.00	mg/dL	<130.00

Interpretation

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL in mg/dL	TRIGLYCERIDE in mg/dL	LDL CHOLESTEROL in mg/dL	NON HDL CHOLESTEROL in mg/dL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100- 129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

Note

1. Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.
2. As per NLA-2014 guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
3. Low HDL levels are associated with increased risk for Atherosclerotic Cardiovascular disease (ASCVD) due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.



MAHAJAN IMAGING DEFENCE COLONY

Name SHARM, PREMVADA
Patient Id 81795
Age 63

Date 14/01/2017

Sex Female

Image 1

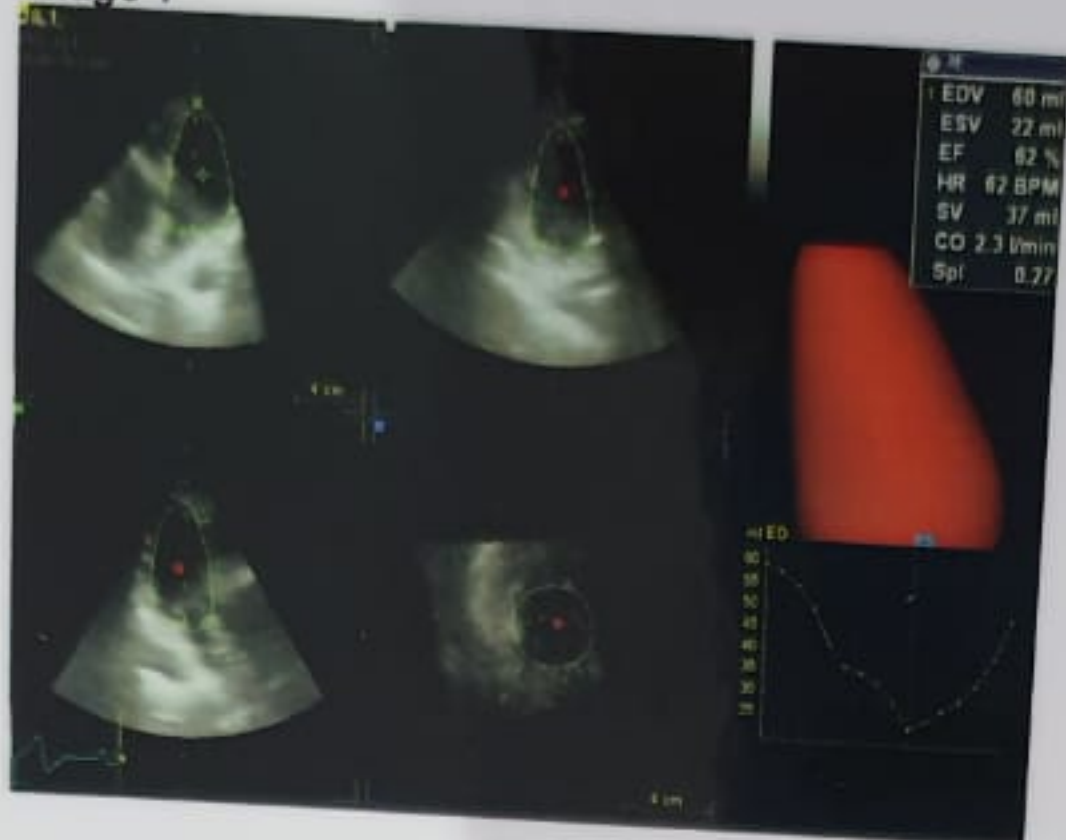


Image 2

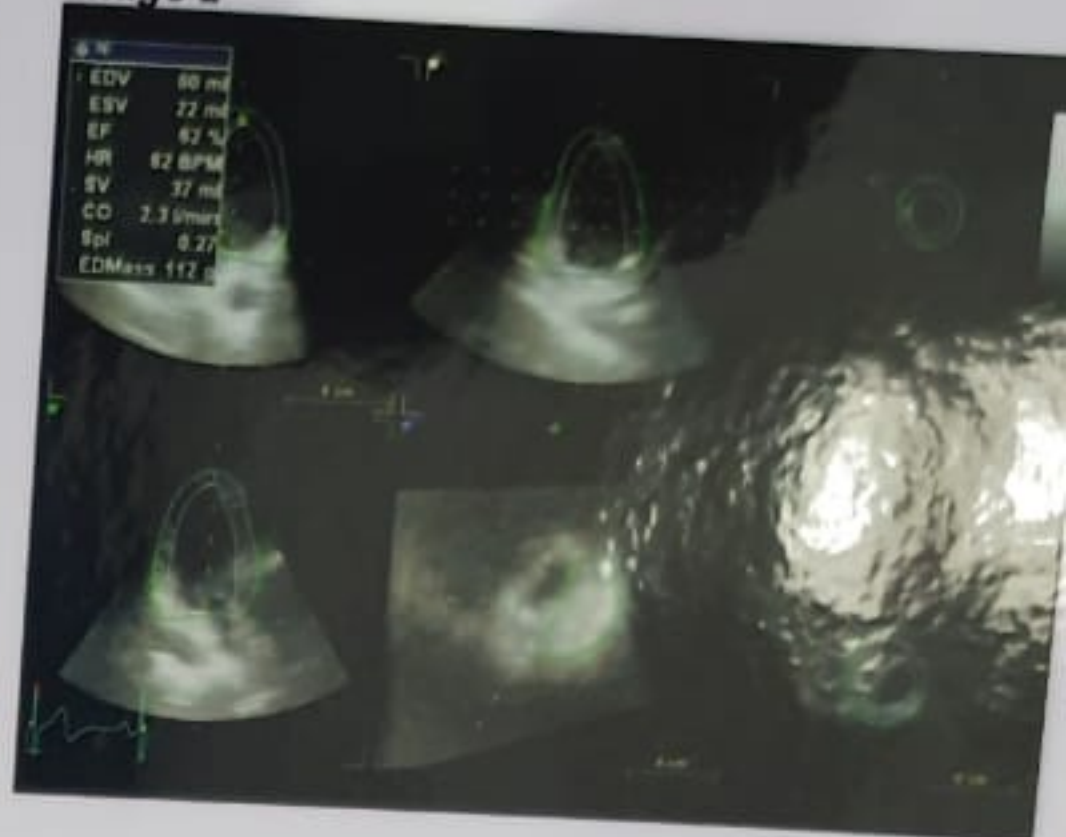


Image 3

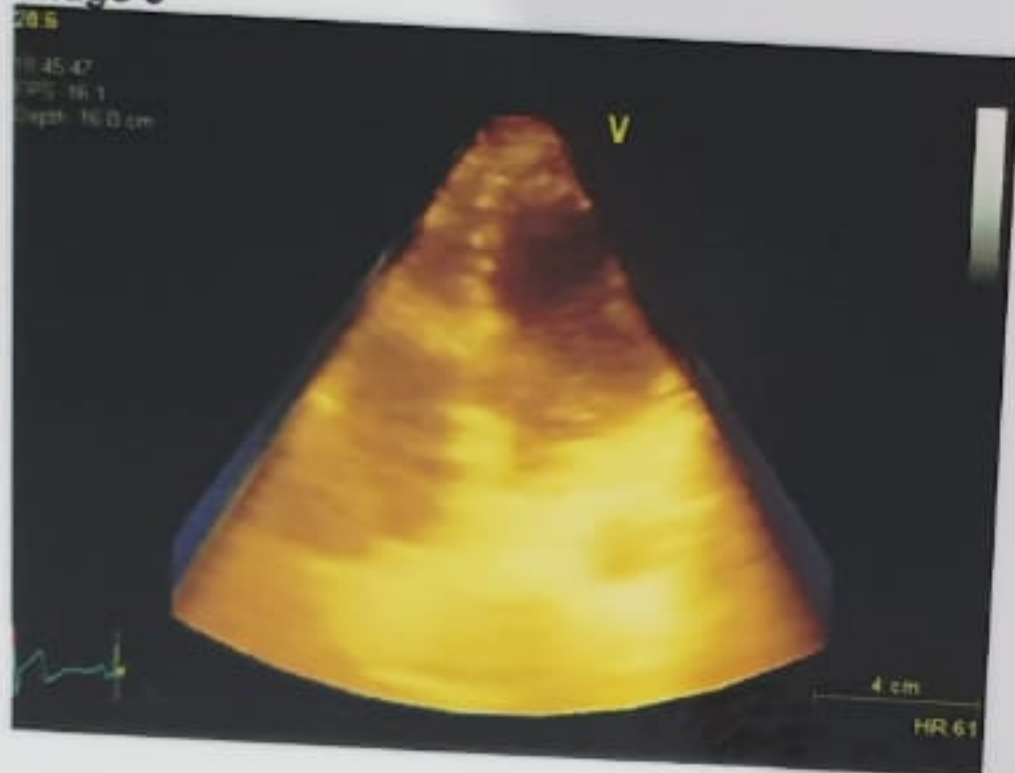


Image 4

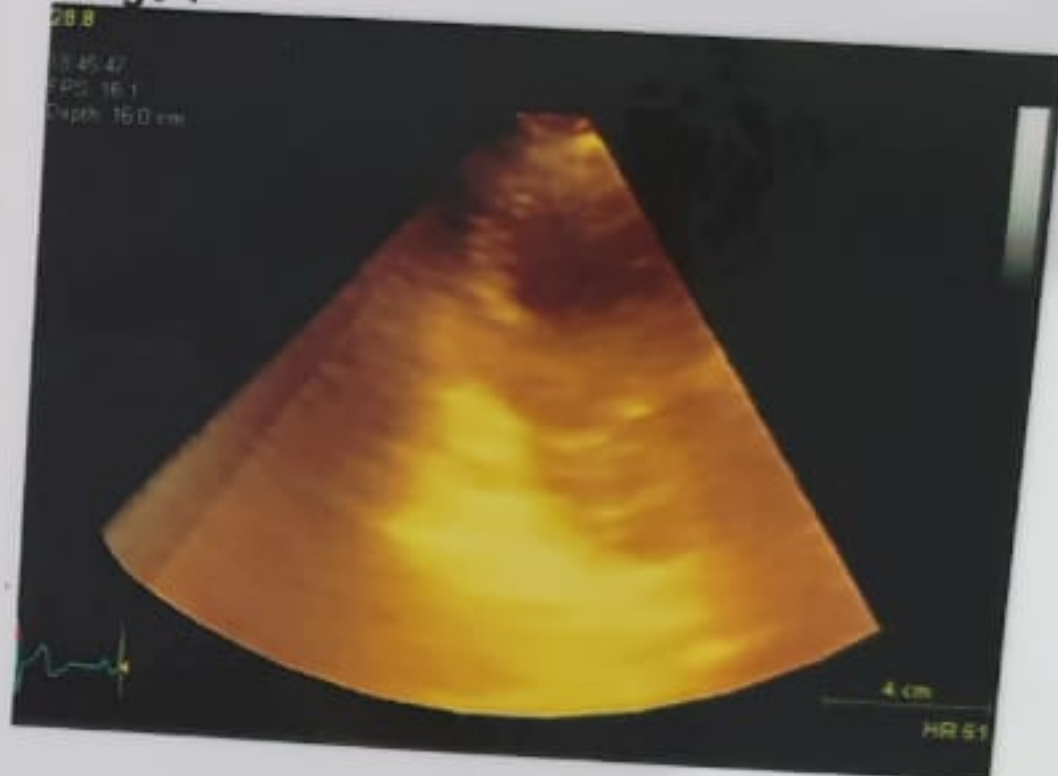


Image 5

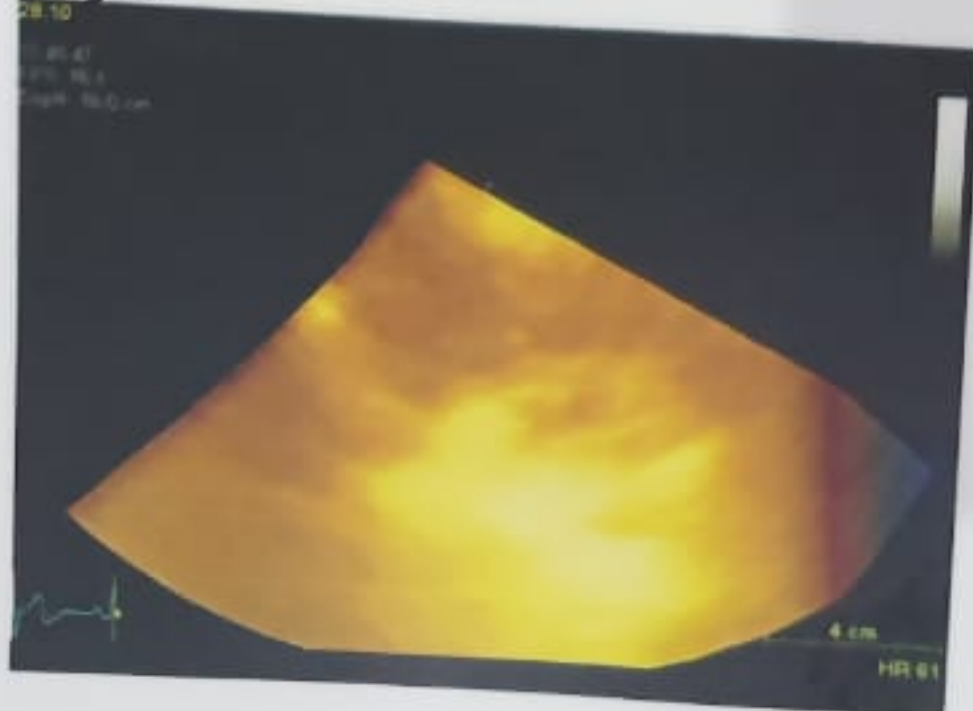
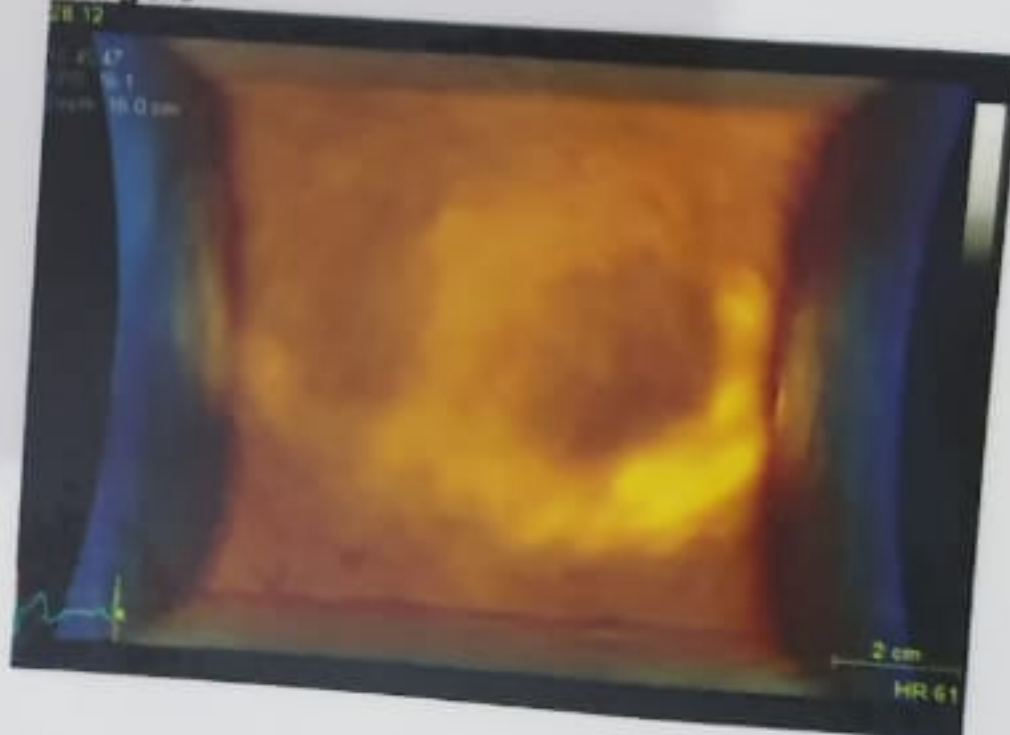


Image 6



for Noida
B to 21,
A 116
ALPHA 1, ALPHA COMMERCIAL BELT

Ref No. :	CGHS-4313113.MR. RAJVIR SHARMA	Collected :	20/8/2019 8:38:00AM
Age :	66 Years	Received :	20/8/2019 8:43:02AM
Gender :	Male	Reported :	20/8/2019 6:05:08PM
Ref By :	CGHS	Report Status :	Interim

Test Name	Results	Units	Bio. Ref. Interval
AST:ALT Ratio	0.90		<1.00
GGTP @ (IFCC)	27	U/L	<55
Alkaline Phosphatase (ALP) @ (IFCC-AMP)	104	U/L	30 - 120
Bilirubin Total (DPD)	1.26	mg/dL	0.20 - 1.10
Bilirubin Direct (DPD)	0.21	mg/dL	<0.20
Bilirubin Indirect (Calculated)	1.05	mg/dL	<1.10
Total Protein (Buret)	7.30	g/dL	6.40 - 8.10
Albumin (BCG)	4.01	g/dL	3.20 - 4.60
A : G Ratio (Calculated)	1.22		0.90 - 2.00

Note

1. In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome.
2. In most type of liver disease, ALT activity is higher than that of AST; exception may be seen in Alcoholic Hepatitis, Hepatic Cirrhosis, and Liver neoplasia. In a patient with Chronic liver disease, AST:ALT ratio >1 is highly suggestive of advanced liver fibrosis.
3. In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or NAFLD, Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis.
4. In a patient with Chronic Liver disease, AFP and Des-gamma carboxyprothrombin (DCP)/PIVKA II can be used to assess risk for development of Hepatocellular Carcinoma.



L28 - Greater Noida
 SF-18 to 21,
 114, 115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name : CGHS-4313113.MR. RAJVIR SHARMA Collected : 16/8/2019 3:10:00PM
 Lab No. : 148742259 Age: 66 Years Gender: Male Received : 16/8/2019 3:12:02PM
 A/c Status : P Ref By : Dr.SANDEEP SAHAYA Reported : 16/8/2019 6:00:31PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E (Automated Strip test, Chemical, Light microscopy)			
Physical			
Colour	Lemon Yellow		Pale yellow
Specific Gravity	1.010		1.001 - 1.030
pH	6.5		5.0 - 8.0
Chemical			
Proteins	Traces (20.0 mg/dL)		Nil
Glucose	Nil		Nil
Ketones	Nil		Nil
Bilirubin	Nil		Nil
Urobilinogen	Normal		Normal
Leucocyte Esterase	Negative		Negative
Nitrite	Negative		Negative
Microscopy			
R.B.C.	6 - 8 RBC/HPF		Negative
Pus Cells	3-4 WBC/HPF		0-5 WBC / hpf
Epithelial Cells	Few		Few
Casts	Nil		Nil /lpf
Crystals	Negative		Nil
Others	Nil		-

Result Rechecked,
 Please Correlate Clinically.

A un

Yath

If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 @ Tests conducted at Referral Lab.

admin@yatharthhospitals.com www.yatharthhospitals.com

Helpline Numbers
 08826447777, 08800447777

L28 - Greater Noida
 SN# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 20/4/2019 10:36:00AM
Lab No.	: 145267805	Received	: 20/4/2019 10:36:27AM
Age	: 66 Years	Reported	: 22/4/2019 10:00:25AM
Gender	: Male	Report Status	: Final
A/c Status	: P	Ref By	: CGHS

Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E (Automated Strip test, Chemical, Light microscopy)			
Physical			
Colour	Lemon Yellow		Pale yellow
Specific Gravity	1.010		1.001 - 1.030
pH	5.5		5.0 - 8.0
Chemical			
Proteins	Nil		Nil
Glucose	Nil		Nil
Ketones	Nil		Nil
Bilirubin	Nil		Nil
Urobilinogen	Normal		Normal
Leucocyte Esterase	Negative		Negative
Nitrite	Negative		Negative
Microscopy			
R.B.C.	2-3 RBC/HPF		Negative
Pus Cells	0-1 WBC/HPF		0-5 WBC / hpf
Epithelial Cells	+(in small numbers)		Few
Casts	Nil		Nil /lpf
Crystals	Negative		Nil
Others	Nil		-
Result Rechecked, Please Correlate Clinically.			



If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 @ Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory



Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E			
(Automated Strip test, Chemical, Light microscopy)			
Physical	Colour	Pale Yellow	Pale yellow
	Specific Gravity	1.015	1.001 - 1.030
	pH	6	5.0 - 8.0
Chemical	Proteins	Traces (20.0 mg/dL)	Nil
	Glucose	Nil	Nil
	Ketones	Nil	Nil
	Bilirubin	Nil	Nil
	Urobilinogen	Normal	Normal
	Leucocyte Esterase	Negative	Negative
	Nitrite	Negative	Negative
Microscopy	R.B.C	20-30 RBC/HPF	Negative
	Pus Cells	3-4 WBC/HPF	0-5 WBC / hpf
	Epithelial Cells	Few	Few
	Casts	Nil	Nil /hpf
	Crystals	Negative	Nil
	Others	Nil	

Result Rechecked,
 Please Correlate Clinically.

Lab No. : 145909115 Age: 66 Years Gender: Male
 A/c Status : P Ret By : CGHS

Collected : 3/4/2019 9:40:00AM Reported : 3/4/2019 9:41:10AM Report Status : Final
 Received : 3/4/2019 7:03:55PM

Image 1

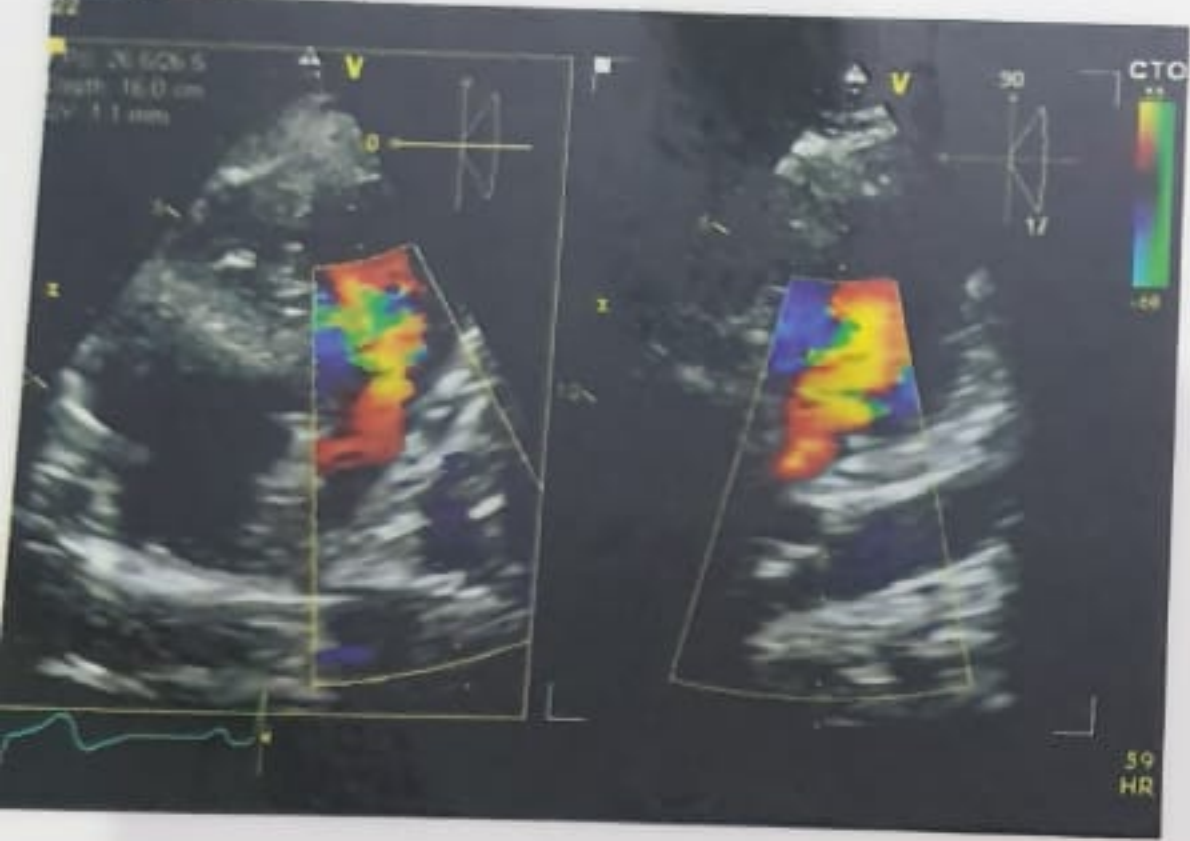


Image 2

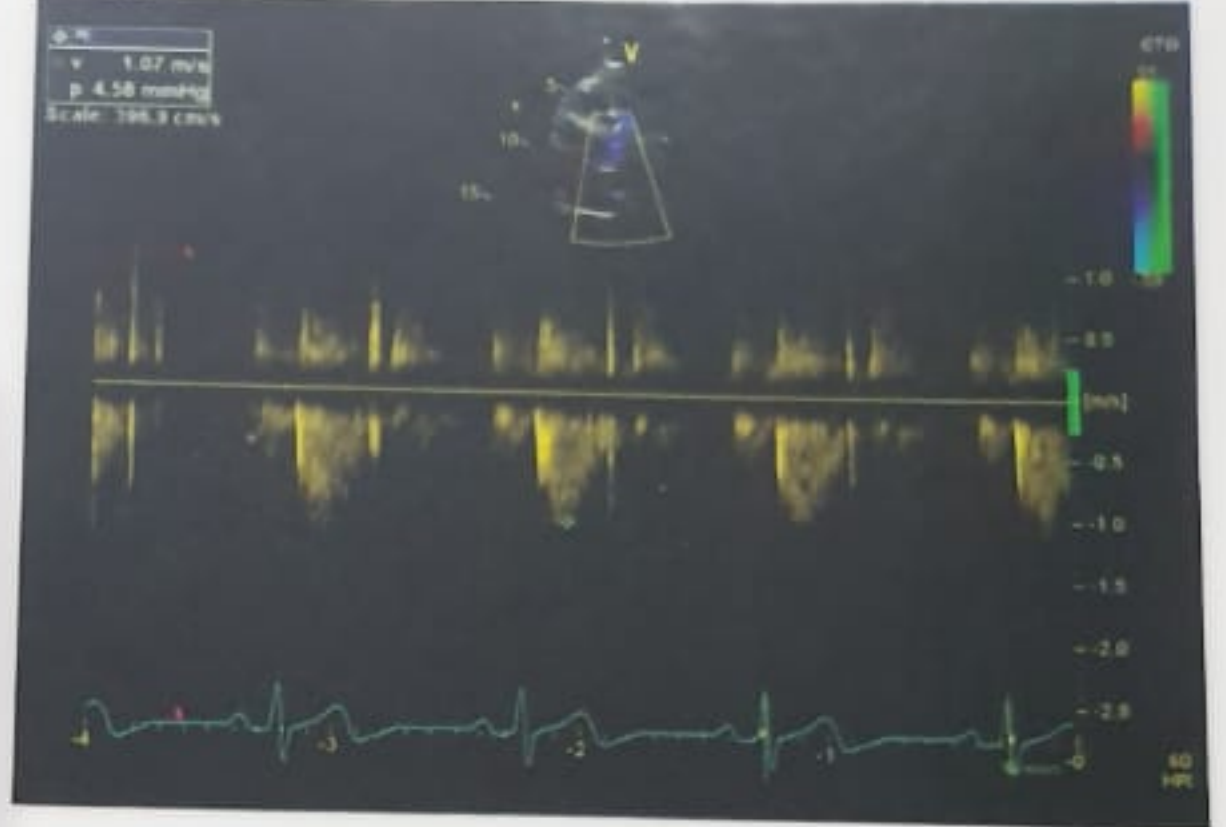


Image 3



Image 4

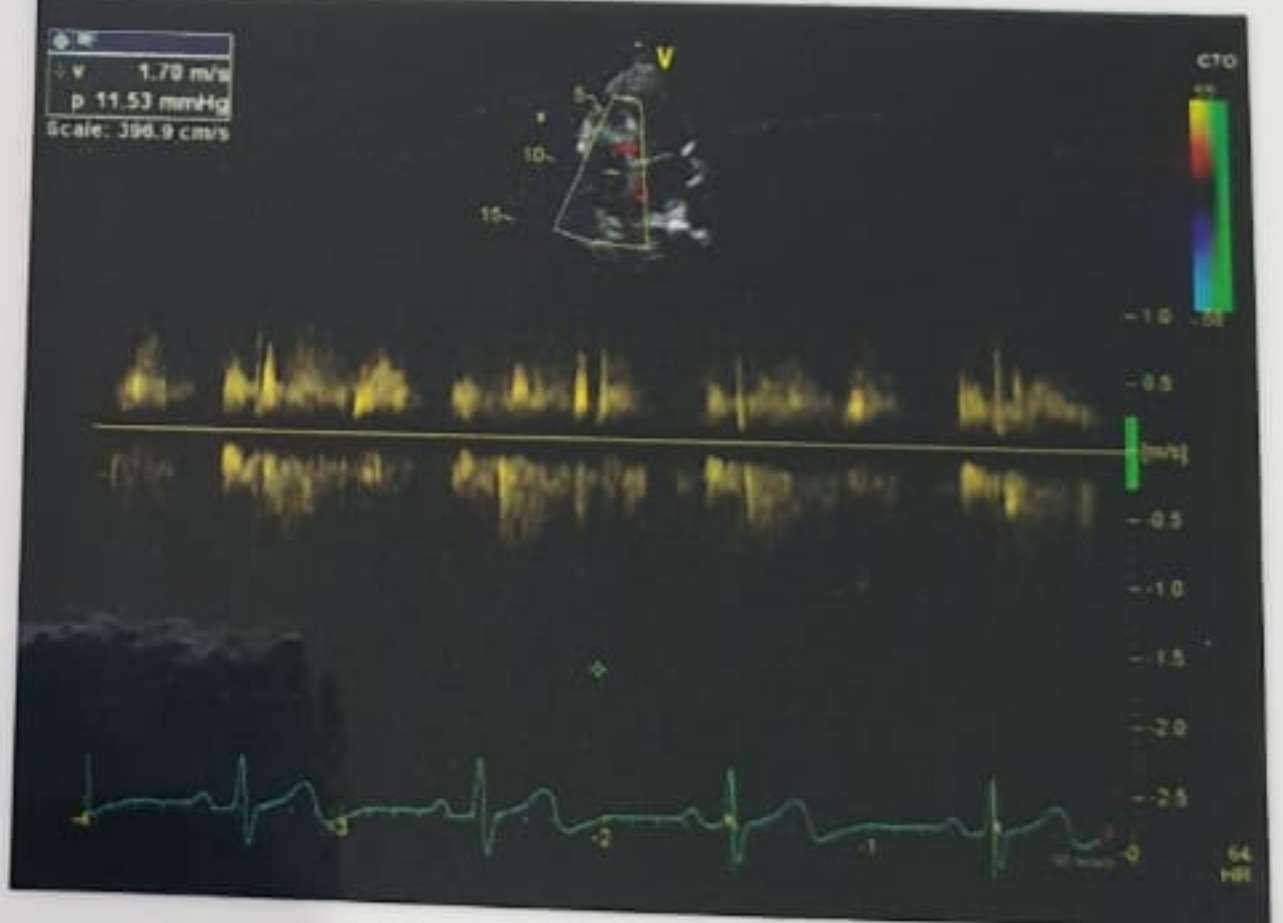


Image 5

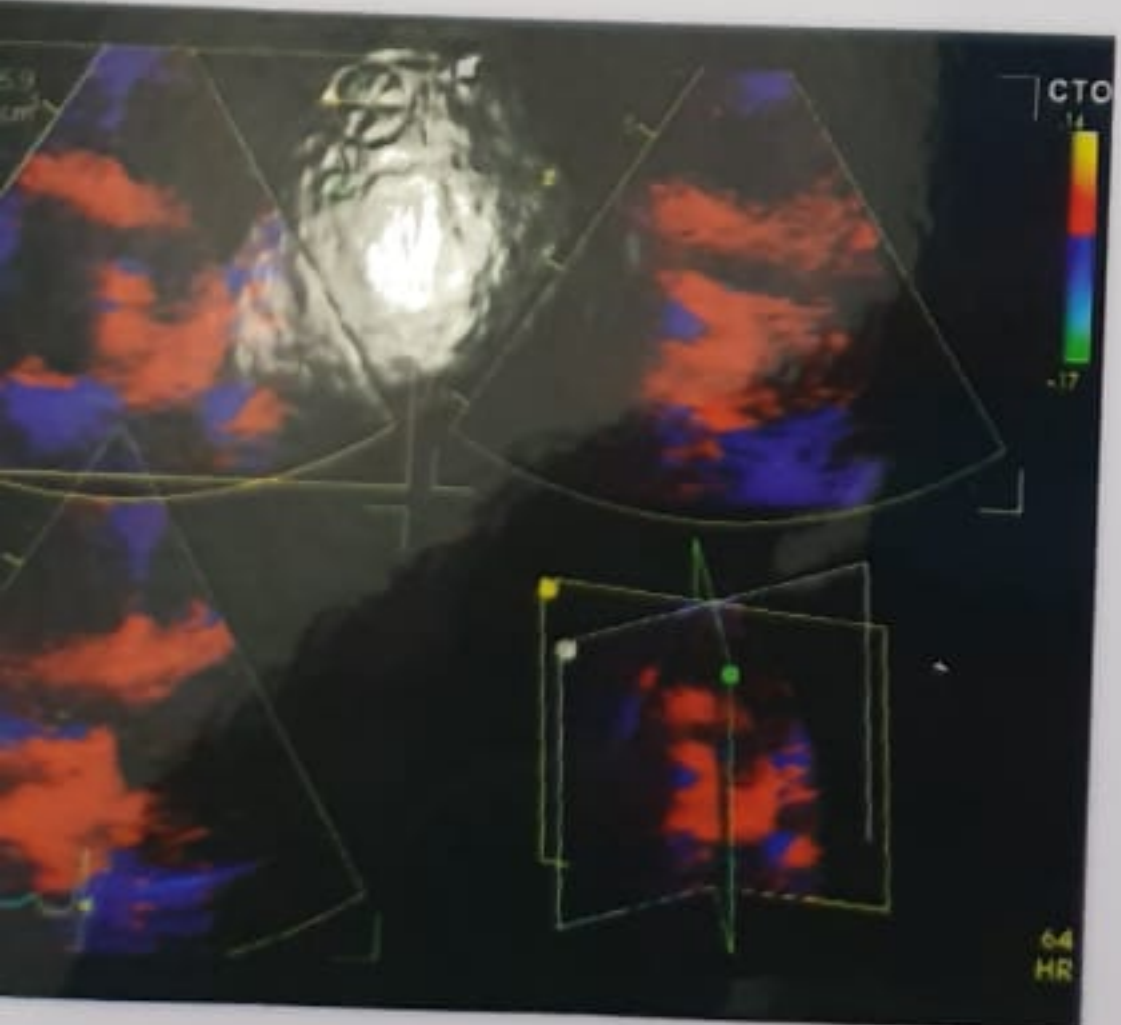
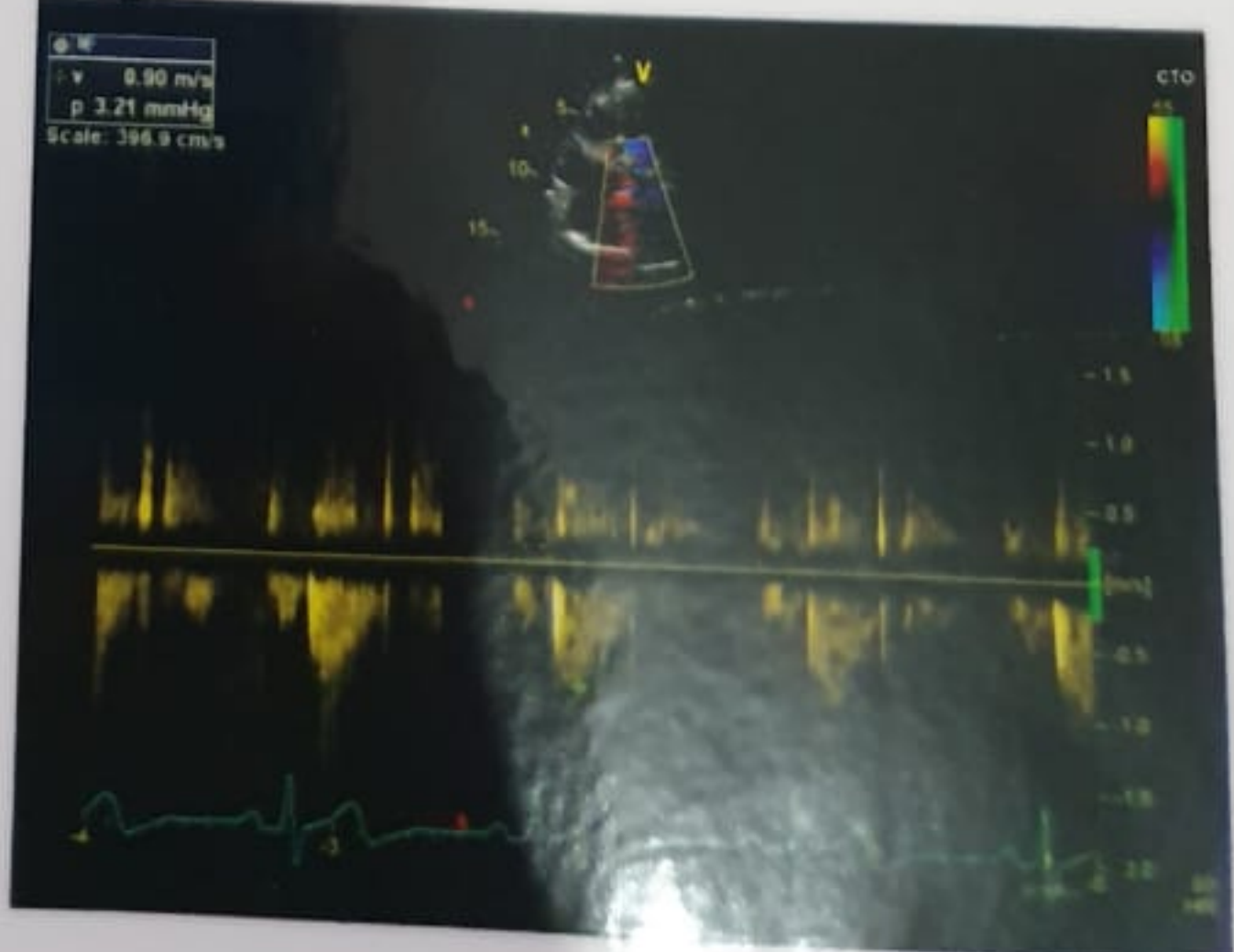


Image 6



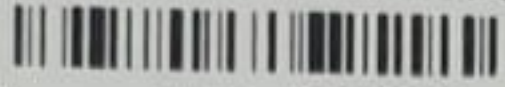
- ① Tab Nusar - AM
5mg 100
- ② Tab Rolomet 50mg 100
- ③ Tab Rivotril
0.5mg 100
- ④ Tab Udiliv 300mg 100
x 2 months
- ⑤ Cap A-2 gold 100
- ⑥ Tab Nephrosave 100 x 1 month
- ⑦ Tab Elexokin
25mg 100
- ⑧ Low fat / low salt diet
BBF
- ⑨ Exercise x 6 months

muscle

swelling
fluids

DR. SANJEEV PINHA
M.B.B.S., M.D. (Medicine), MNAI, IS
Consultant Physician
Professor

General Consultation Time: 9.00 AM-1.00 PM

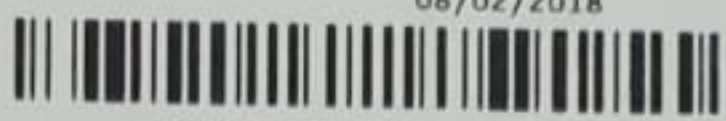


DeptSeq: 856

UHID: 101765384
Dept. Regn. 2016/001/0017662
Name: R V SHARMA
S/O R. P. SHARMA, 64Y 9M 26D , M
Ph: 9871833098
C-I/10 PANDARA PARK ND, DELHI,
INDIA

Dept: Medicine
Unit: Unit-II
Room: 31
F/34
Days: Mon, Thu (सोम, गुरु)
App. Date:
08/02/2018

Appt. ID:



2018020802071

उपचार/Treatment

mtg

① Hg, FBS, HbA1c,
Lipids, T3, T4, TSH,
PSA, vit D, vit
Uric acid, ↑

② Urine CR

③ Review with

3
Dr. SANJEEV SINGH
M.B.B.S., M.D. (Medicine), M
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical
New Delhi-110029



21.12.18

RV Shama

150/80 mmHg

f low salt diet

Temp °F Pulse Perminute B.P. mmhg
Height cm Weight Kg Allergies

History:

• Nusar-Am (5mg) | _____

• Rolomet-SL (50mg) | _____

• Rivotri (0.5mg) | _____

• Indin (300mg) | _____

• A to Z Cold | _____

• Nephrosane | _____

• Uprise-D3 60k - Once weekly

CLINICAL ASSESSMENT:

LFT
(after 30 days)
PROVISIONAL DIAGNOSIS:

X 15 days

Dr. Rahul Kuni
(Internal medicine) FACC (USA)
Consultant Physician Internal medicine





Name : CGHS-4313113.MR. RAJVIR SHARMA
 Lab No. : 145909115 Age: 66 Years Gender: Male
 A/C Status : P Ref By : CGHS
 Collected : 3/4/2019 9:40:00AM
 Received : 3/4/2019 9:41:10AM
 Reported : 3/4/2019 7:03:55PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
TSH, ULTRASENSITIVE, SERUM @ (CLIA)	6.936	uIU/mL	0.550 - 4.780

Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm . The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
2. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals

Clinical Use

- Diagnose Hypothyroidism and Hyperthyroidism
- Monitor T4 replacement or T4 suppressive therapy
- Quantify TSH levels in the subnormal range

Increased Levels: Primary hypothyroidism, Subclinical hypothyroidism, TSH dependent Hyperthyroidism, Thyroid hormone resistance

Decreased Levels: Graves disease, Autonomous thyroid hormone secretion, TSH deficiency

Dr Himangshu Mazumdar
MD, Biochemistry
Consultant Biochemist
NRL - Dr Lal PathLabs Ltd

Dr Nimmi Kansal
MD, Biochemistry
National Head - Clinical Chemistry & Biochemical Genetics
NRL - Dr Lal PathLabs Ltd

Dr Parul Joshi
MD, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

Dr Swati Singh
MD, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

-----End of report-----



Sex Female

Image 1

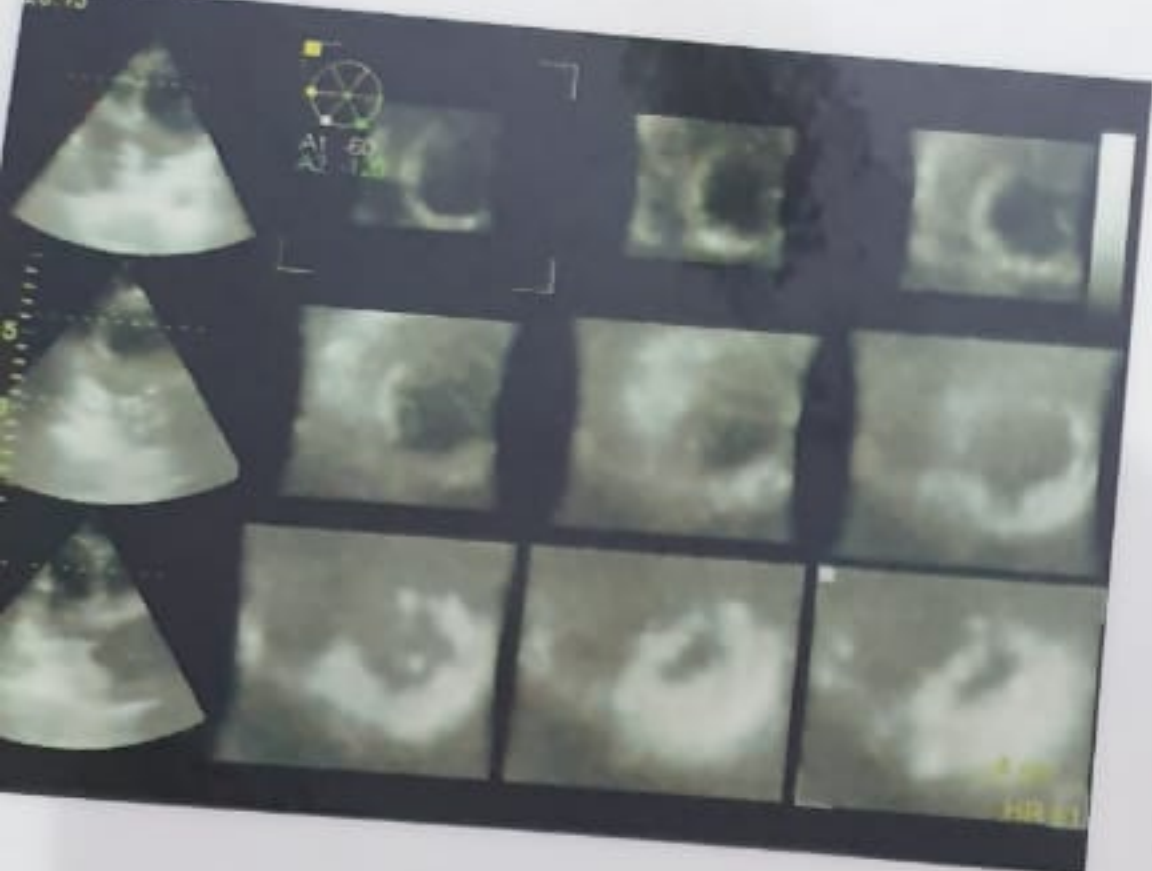


Image 2

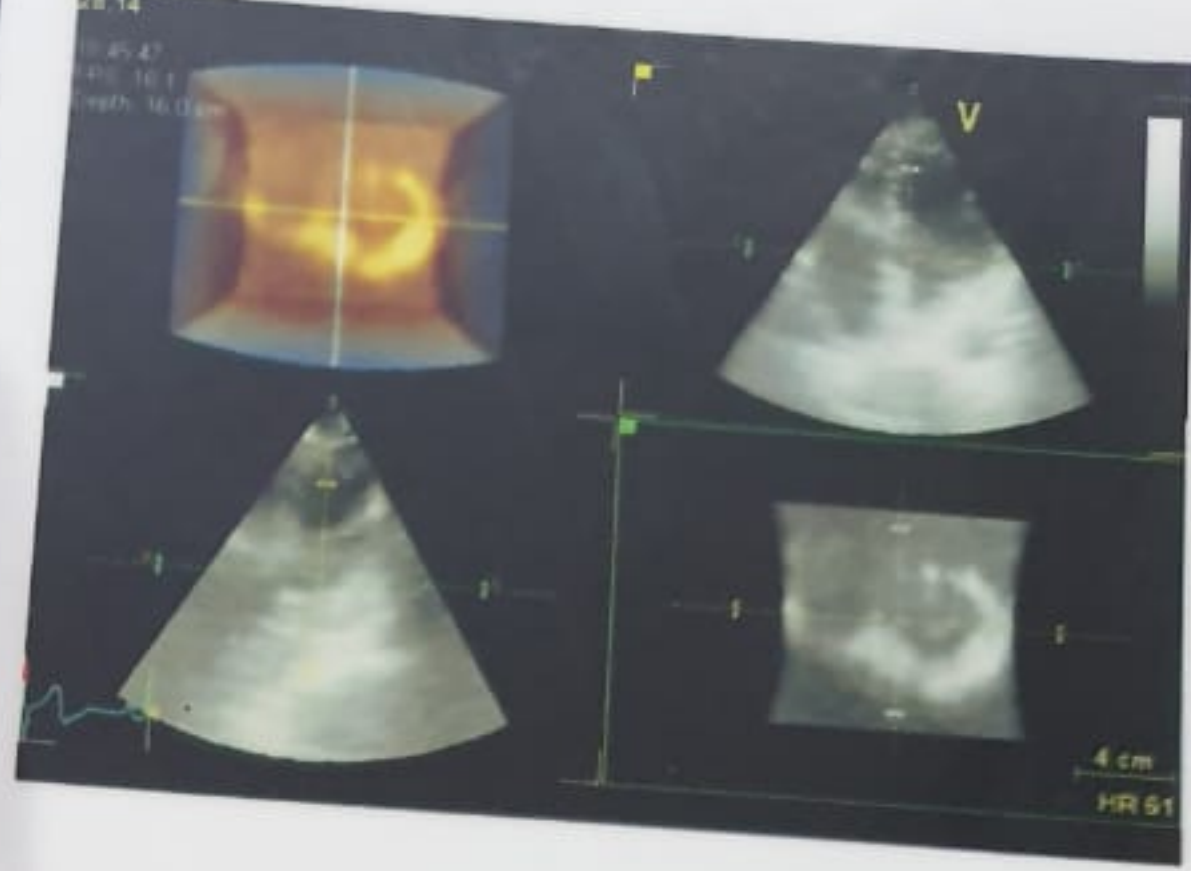


Image 3

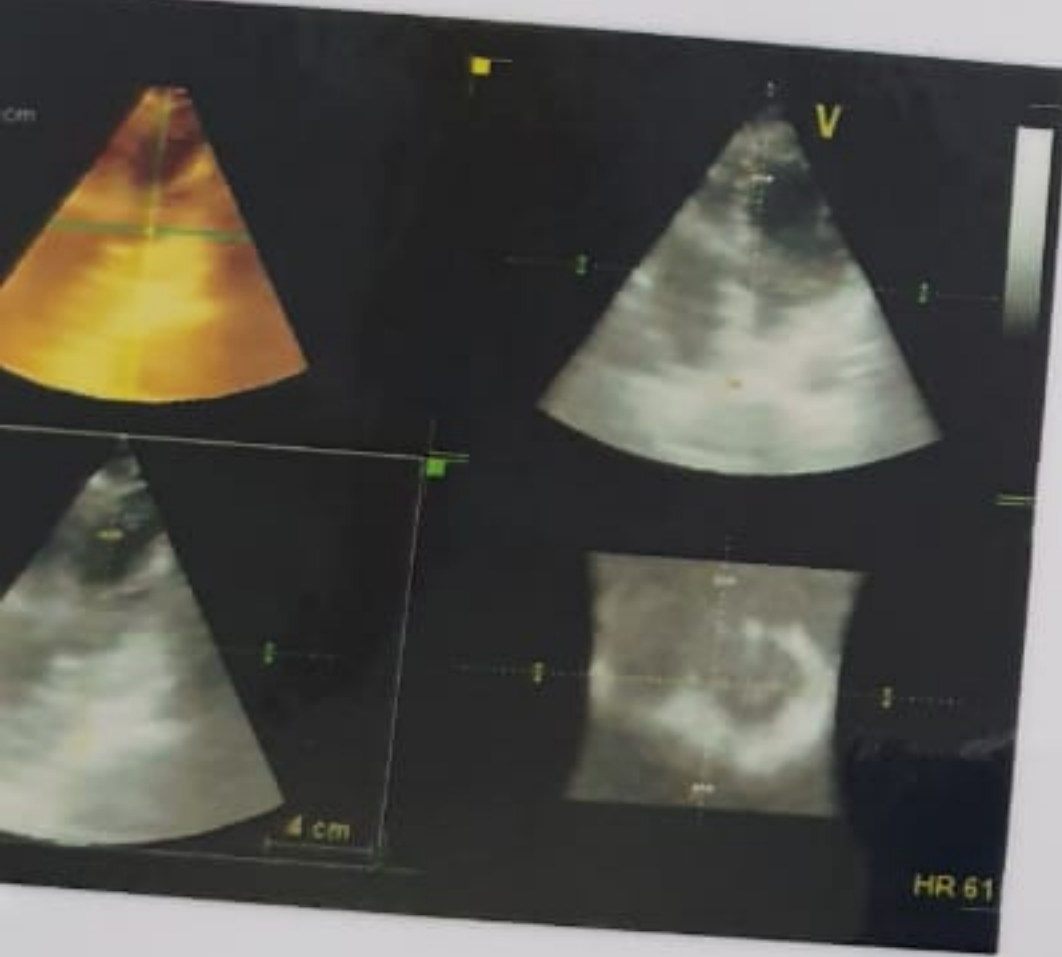


Image 4

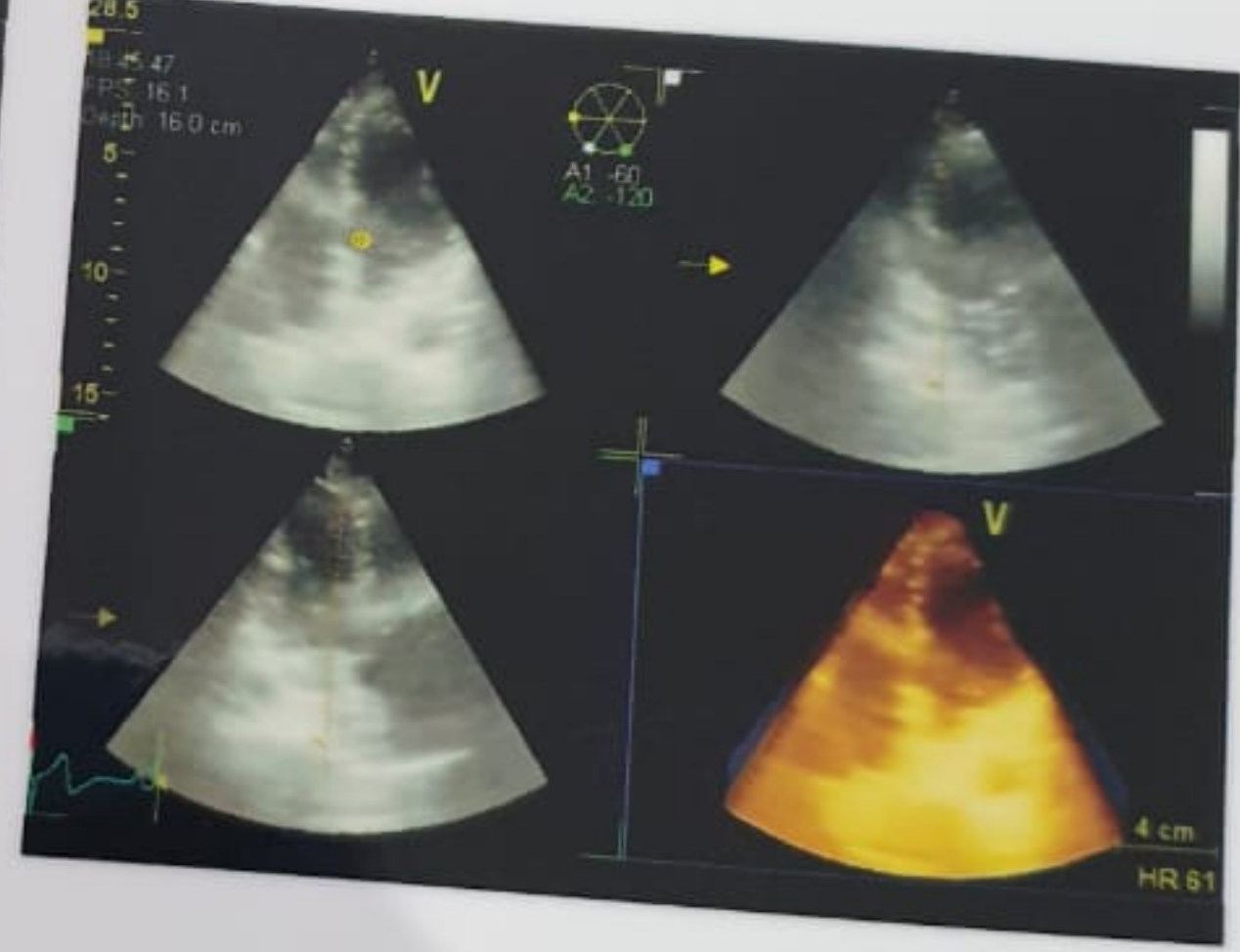
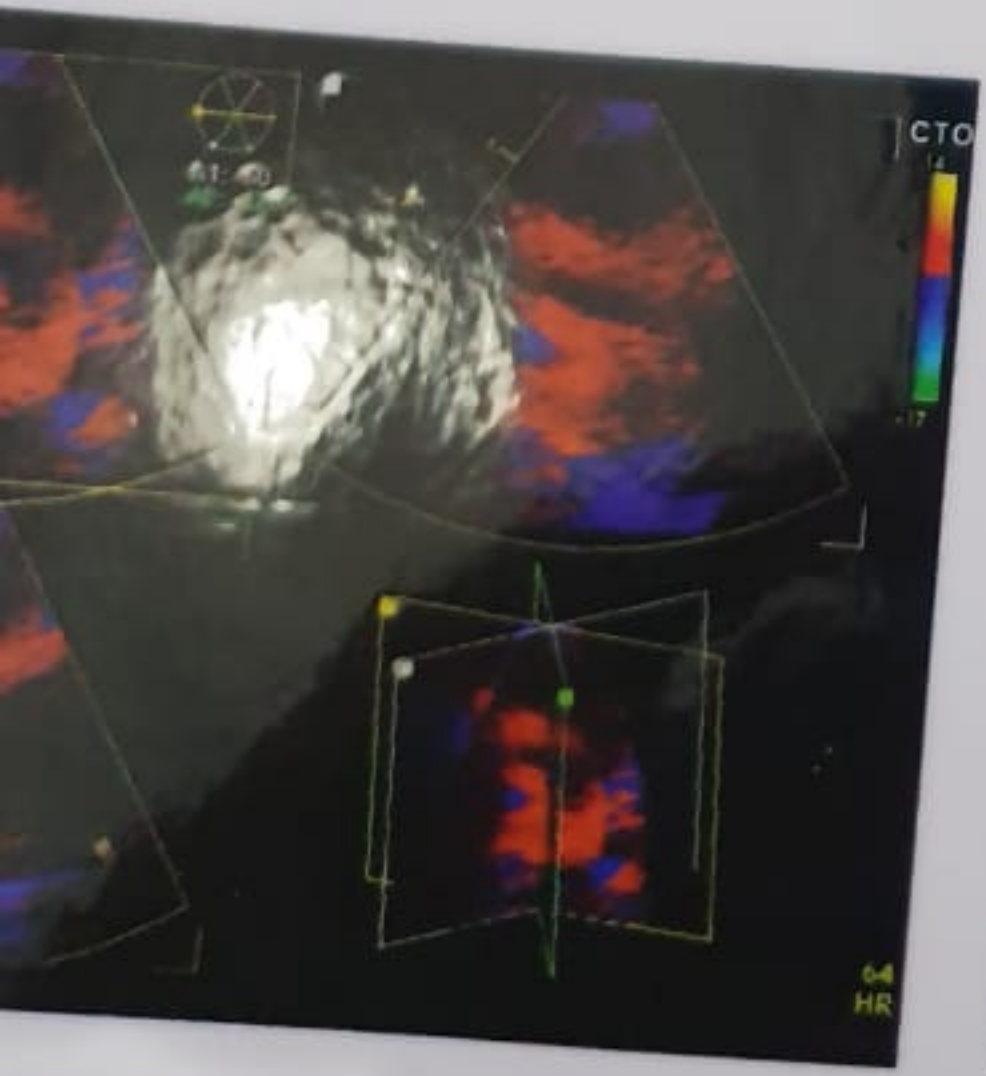
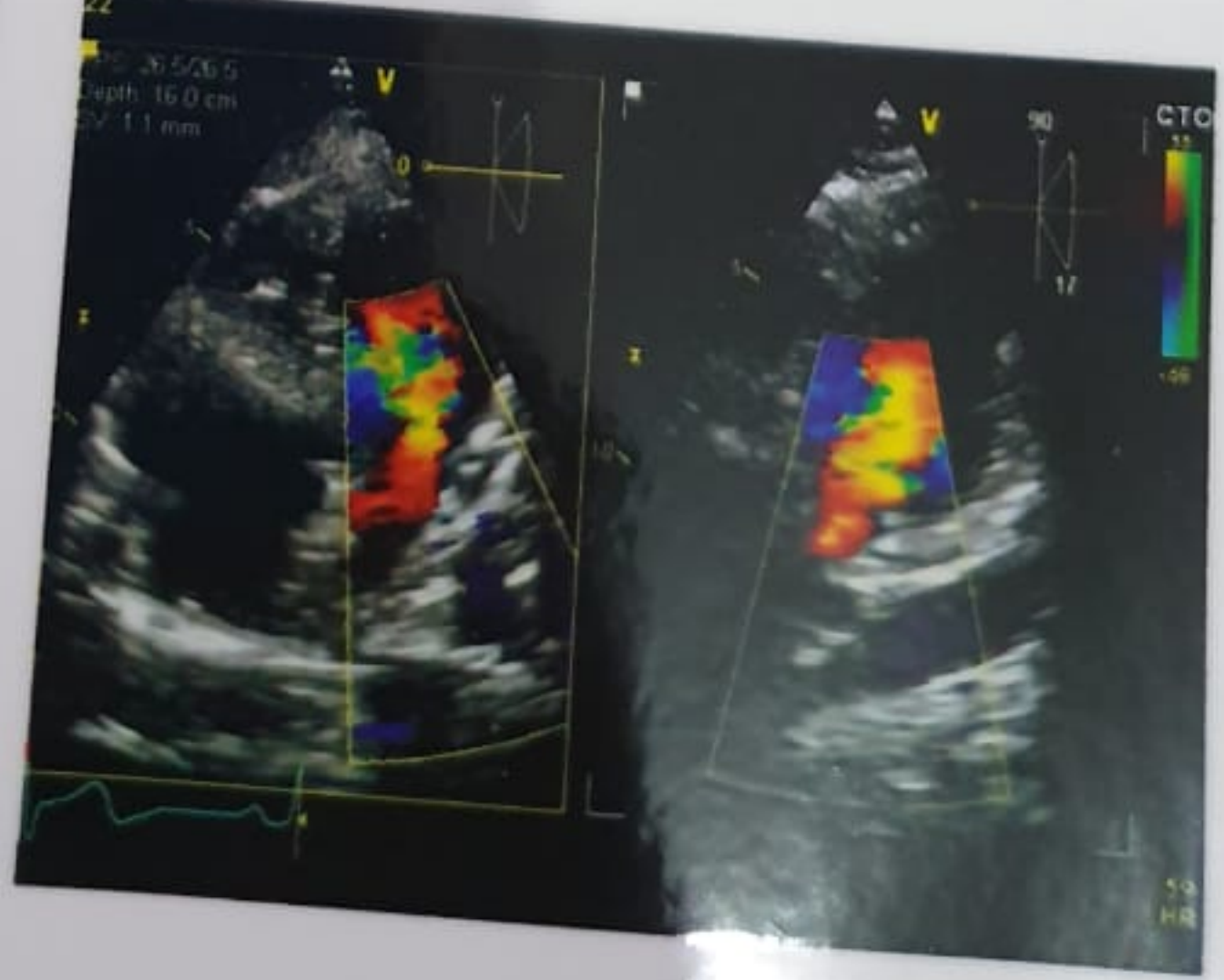


Image 6



L28 - Greater Noida
 SK.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313113.MR. RAJVIR SHARMA	Collected	: 20/4/2019 10:36:00AM
Lab No.	: 145267805	Age: 66 Years	Gender: Male
A/c Status	: P	Ref By : CGHS	Reported
			: 20/4/2019 10:36:27AM
			: 22/4/2019 10:00:25AM
			Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E (Automated Strip test, Chemical, Light microscopy)			
Physical			
Colour	Lemon Yellow		Pale yellow
Specific Gravity	1.010		1.001 - 1.030
pH	5.5		5.0 - 8.0
Chemical			
Proteins	Nil		Nil
Glucose	Nil		Nil
Ketones	Nil		Nil
Bilirubin	Nil		Nil
Urobilinogen	Normal		Normal
Leucocyte Esterase	Negative		Negative
Nitrite	Negative		Negative
Microscopy			
R.B.C.	2-3 RBC/HPF		Negative
Pus Cells	0-1 WBC/HPF		0-5 WBC / hpf
Epithelial Cells	+(in small numbers)		Few
Casts	Nil		Nil /tpf
Crystals	Negative		Nil
Others	Nil		

Result Rechecked,
 Please Correlate Clinically.



If test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.
 @ Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), NABL (MC-2113) and ISO (FS 60411) accredited laboratory

L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name : CGHS-4313123.MS. PREAMVADA SHARMA
 Lab No. : 150196094 Age: 66 Years Gender: Female
 A/c Status : P Ref By : Dr. RAHUL PUNJ
 Collected : 19/10/2019 11:11:00AM
 Received : 19/10/2019 11:14:36AM
 Reported : 19/10/2019 6:44:58PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
LIVER PANEL 1; LFT,SERUM (Spectrophotometry)			
AST (SGOT)	27	U/L	<35
ALT (SGPT)	21	U/L	<35
AST:ALT Ratio	1.29		<1.00
GGTP	13	U/L	<38
Alkaline Phosphatase (ALP)	96	U/L	30 - 120
Bilirubin Total	0.55	mg/dL	0.20 - 1.10
Bilirubin Direct	0.11	mg/dL	<0.20
Bilirubin Indirect	0.44	mg/dL	<1.10
Total Protein	7.17	g/dL	6.40 - 8.10
Albumin	3.91	g/dL	3.20 - 4.60
A : G Ratio	1.20		0.90 - 2.00

Note

- In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome.



tion.

20.6.18

T. Musav - AM 5mg 100

Tab Kolomet - SL 50mg 100

Rivotril 0.5mg 100

Tab Udiliv 300mg 100

Op A-2 gold 100

low salt & low fat diet

S x 3 months
(S. Sinha)

Dr. SANJEEV SINHA
M.B.B.S., M.D. (Medicine), MNAMS
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical Sciences
New Delhi-110029

2.11.18

11 Continue same treatment

21 Tab Nephrosave 100 x 30 days

x 6 months

BP - 130/80 mmHg

S
Dr. SANJEEV SINHA
M.B.B.S., M.D. (Medicine), MNAMS
Consultant Physician
Professor
Department of Medicine
All India Institute of Medical Sciences
New Delhi-110029

Greater Noida
 G-15 to 21,
 115 & 116
 EX T ALPHA 1, ALPHA COMMERCIAL BELT
 Noida

Name: CGHS-4313113.MR. RAJVIR SHARMA
 Lab No.: 148743767 Age: 66 Years Gender: Male
 A/c Status: P Ref By: CGHS
 Collected: 20/8/2019 8:38:00AM
 Received: 20/8/2019 8:43:02AM
 Reported: 20/8/2019 6:05:09PM
 Report Status: Interim

Test Name: URINE EXAMINATION, ROUTINE; URINE, R/E
 (Automated Strip test, Chemical, Light microscopy)

Test Name	Results	Units	Bio. Ref. Interval
Physical			
Colour	Slight Lemon Yellow		Pale yellow
Specific Gravity	1.020		1.001 - 1.030
pH	6		5.0 - 8.0
Chemical			
Proteins	Traces(10.0 mg/dL)		Nil
Glucose	Nil		Nil
Ketones	Nil		Nil
Bilirubin	Nil		Nil
Urobilinogen	Normal		Normal
Leucocyte Esterase	Negative		Negative
Nitrite	Negative		Negative
Microscopy			
R.B.C.	6 - 8 RBC/HPF		Negative
Pus Cells	2-3 WBC/HPF		0-5 WBC / hpf
Epithelial Cells	Few		Few
Casts	Nil		Nil /lpf
Crystals	Negative		Nil
Others	Nil		

Result Rechecked,
 Please Correlate Clinically.



L28 - Greater Noida
 SH.# G-18 to 21,
 114,115 & 116
 MSX T ALPHA 1, ALPHA COMMERCIAL BELT
 NOIDA

Name	: CGHS-4313123.MS. PREAMVADA SHARMA	Collected	: 19/10/2019 11:13:00AM
Lab No.	: 150196093	Age: 66 Years	Gender: Female
A/c Status	: P	Ref By : Dr. RAHUL PUNJ	Report Status : Final
		Received	: 19/10/2019 11:14:50AM
		Reported	: 19/10/2019 4:00:29PM

Test Name	Results	Units	Bio. Ref. Interval
TYPHI DOT/ SALMONELLA TYPHI IgM (ICT)	Negative		

Note

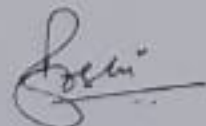
1. Low titre of IgM antibodies to S.typhi may persist for about 4 months post infection in endemic areas
2. All results to be clinically correlated

Comment

Accurate diagnosis of Typhoid fever at an early stage is not only important for etiological diagnosis, but also to identify and treat potential carriers and prevent acute typhoid fever outbreaks. The conventional Widal test detects antibodies to S.typhi in patient serum from the second week of onset of symptoms whereas early rising antibodies predominantly IgM in nature detected by this assay serve as a marker for recent infection.

Detectable IgM response

Onset of fever	Percent positive
4-6 days	43.5
6-9 days	92.9
>9 days	99.5



Dr Parul Joshi
 MD, Pathology
 Chief of Laboratory
 Dr Lal PathLabs Ltd

-----End of report-----



MAHAJAN IMAGING DEFENCE COLONY

Name **SHARM, PREMVADA**
Patient Id **81795**
Age **63**

Date **14/01/2017**
Sex **Female**

Image 1

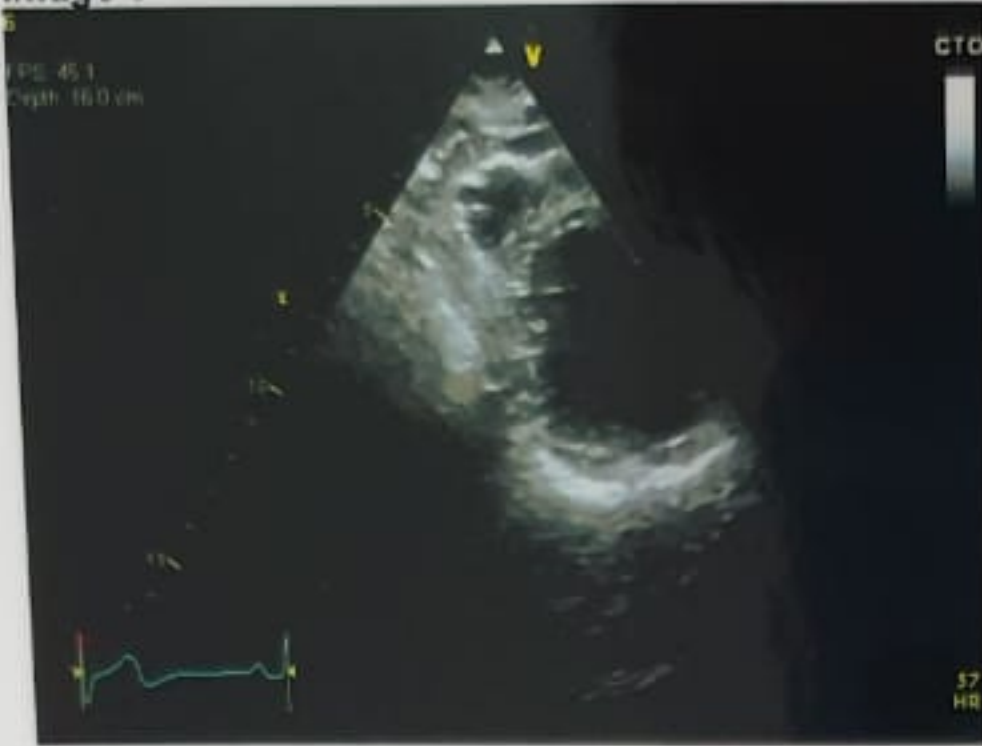


Image 2

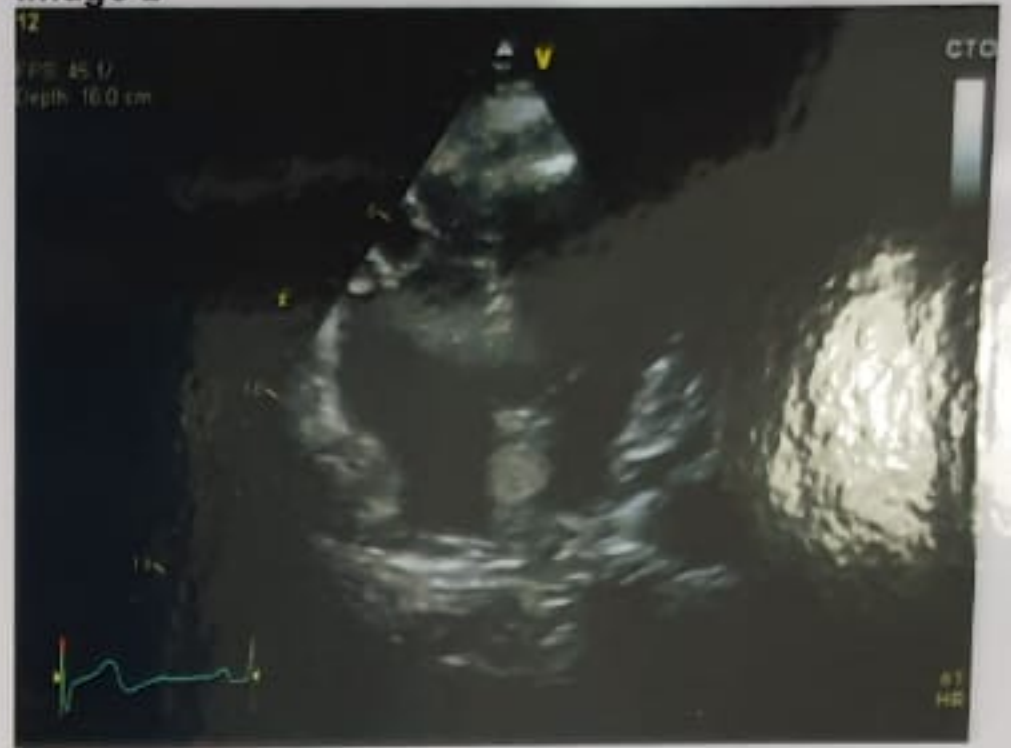


Image 3



Image 4

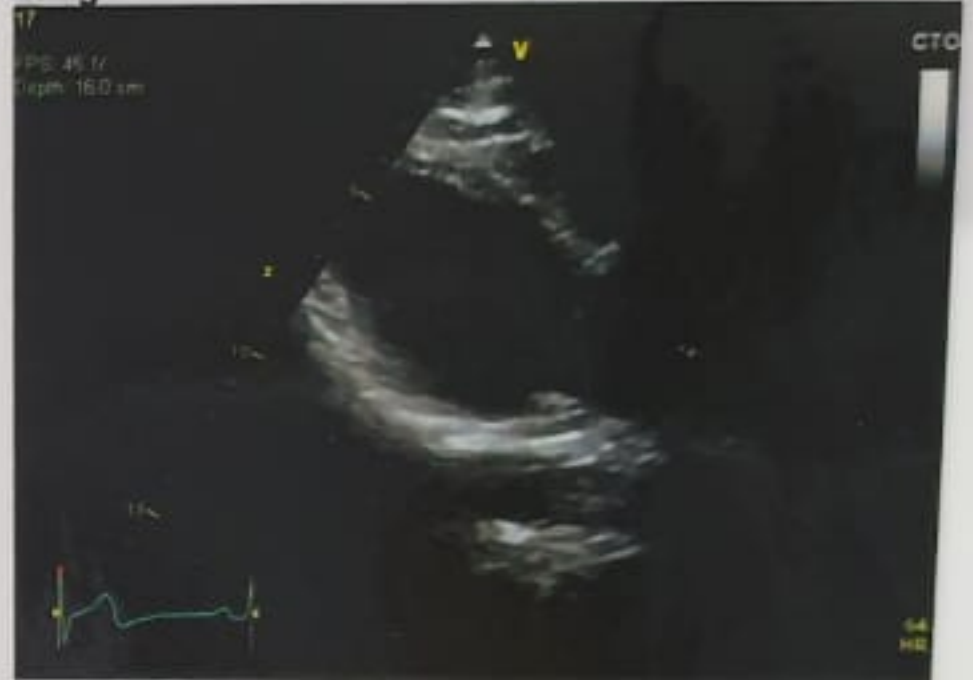


Image 5

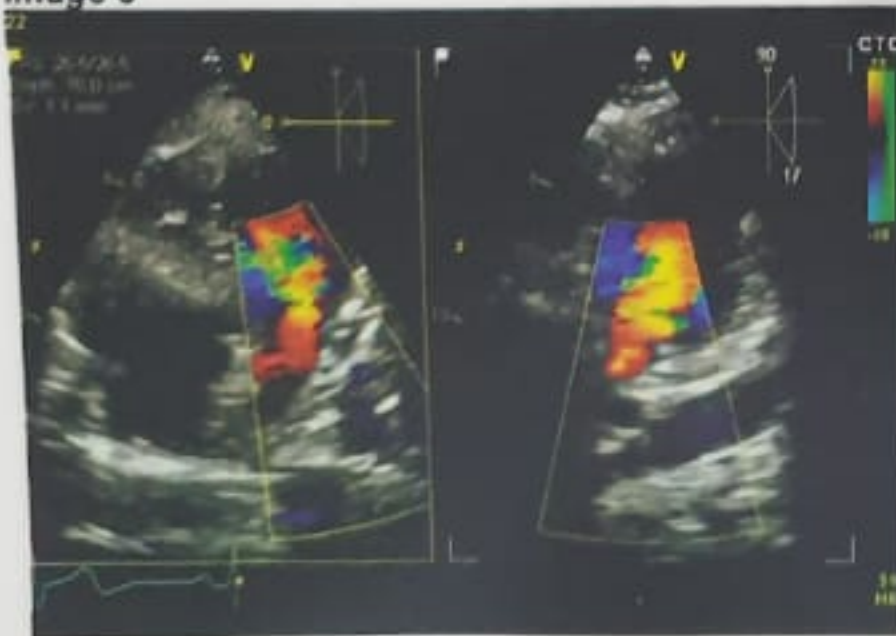


Image 6



L28 - PSC GREATER NOIDA (OMEGA 1)
NS-38, P2, SECTOR-OMEGA 1ST BUILDERS
AREA, GREATER NOIDA
NOIDA

Regd. Office: National Reference Lab: Dr. Lal PathLabs Ltd., Block E, Sector-18, Noida, New Delhi - 110085
Tel: +91-11-30244-100, 3088-5050, Fax: +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com
Web: www.lalpathlabs.com, CIN No.: L74899DL1995PLC065308



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L28 - Greater Noida
SH.# G-18 to 21,
114, 115 & 116
MSX T ALPHA 1, ALPHA COMMERCIAL BELT
NOIDA

Name : CGHS-4313113.MR. RAJVIR SHARMA
Lab No. : 144501125



INVESTIGATION REPORT

UHID : 367338
NAME : Mr. RAJVIR SHARMA
AGE/SEX : 65 Yrs.(M)
Referred By : Dr. RAHUL
Sample Collection Date/Time : 17/10/2018 10:51:00AM
LAB NO. : 301695
DATE : 17/10/2018 12:55:00PM
Bed No. :
COMPANY : CGHS(CR)
Bill Date/Time : 17/10/2018 10:49:00AM

DIAGNOSTIC

TEST REPORT STATUS : FINAL

VITD3 ASSAY

TEST NAME	VALUE	UNIT
VITAMIN D-25-HYDROXY	24.3	ng/ml

REF. RANGE

Deficient	<20.0
Insufficient	20-29
Sufficient	30-100
Potential	>100

Report Complete

NOTE- PLEASE CORRELATE CLINICALLY.

TECH.

DR. NUTAN DIXIT
M.D (PATH)

DR. PRIYAMVADA ROY
MD (MICROBIOLOGIST)

DR. SHIVANI KUSHWAHA
M.D (PATH)

A unit of Yatharth Hospital & Trauma Care Services Pvt. Ltd.

Yatharth Wellness Hospital & Trauma Centre

Sector Omega 1, Greater Noida, Uttar Pradesh - 201308, India
admin@yatharthhealthcare.com www.yatharthhealthcare.com

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