

HOLTER REPORT

Patient Name: **SUDHIR KUMAR,**
ID: **375586**
Age: **66 yr**
Gender: **Male**
Date of Birth:

Hookup Date: **07-Jul-2021**
Hookup Time: **10:56:00**
Duration: **24:00:00**
Recorder Serial #: **85015b81**
Order #:

Overreading Physician: **SOFAT, DR.SUNIL**
Referring Physician: ,
Ordering Physician: **SOFAT, DR.SUNIL**
Hook-Up Technician: ,
Analyzing Technician: **VAISHALI**
Indication/Diagnosis: **SHORT SINUS PAUSES,HTN**
Medications:

General

66917 QRS complexes
3 Ventricular beats (< 1%)
82 Supraventricular beats (< 1%)
< 1 % of total time classified as noise

Heart Rates

39 Minimum at 12:50:39 07-Jul
46 Average
68 Maximum at 02:05:04 08-Jul
0 Beats in tachycardia (≥ 100 bpm), 0% total
58412 Beats in bradycardia (≤ 50 bpm), 87% total
1.8 Seconds Max R-R at 12:50:26 07-Jul

Supraventriculars (S, J, A)

82 Isolated
0 Couplets
0 Bigeminal cycles
0 Runs totaling 0 beats

Ventriculars (V, F, E, I)

3 Isolated
0 Couplets
0 Bigeminal cycles
0 Runs totaling 0 beats

Interpretation

Signed: _____ Date: _____

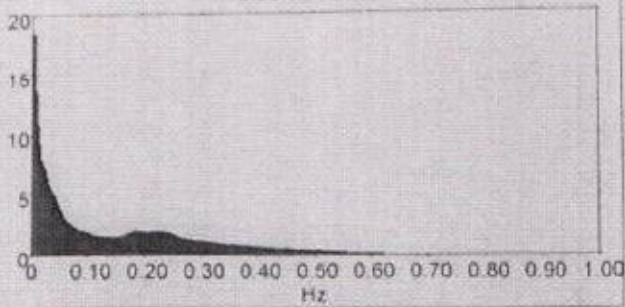
22/07/2021

OPD CARD

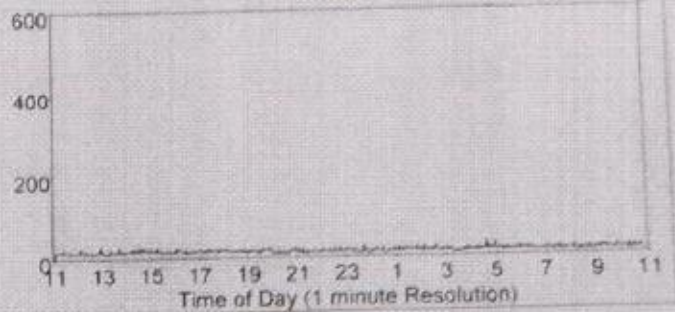
Patient: SUDHIR KUMAR,
ID: 375586

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021

of Occurrences Histogram (ms)
10:56:00-10:56:00



HRV Trend (ms)
0.15 Hz - 0.40 Hz



Spectral Power

26.59 ms	Very Low Frequency	(0.0033 - 0.0400 Hz)
13.26 ms	Low Frequency	(0.0400 - 0.1500 Hz)
12.13 ms	High Frequency	(0.1500 - 0.4000 Hz)
32.21 ms	Wideband Frequency	(0.0033 - 1.7070 Hz)
12.13 ms	User Frequency	(0.1500 - 0.4000 Hz)
Low/High Ratio: 1.09		

Time Domain

1292 ms	Mean NN
98 ms	SDNN
81 ms	SDANN
47 ms	ASDNN
30 ms	rMSSD
7.7%	pNN50
3.9%	pNN50a
3.7%	pNN50b
5104 beats	BB50
2610 beats	BB50a
2494 beats	BB50b

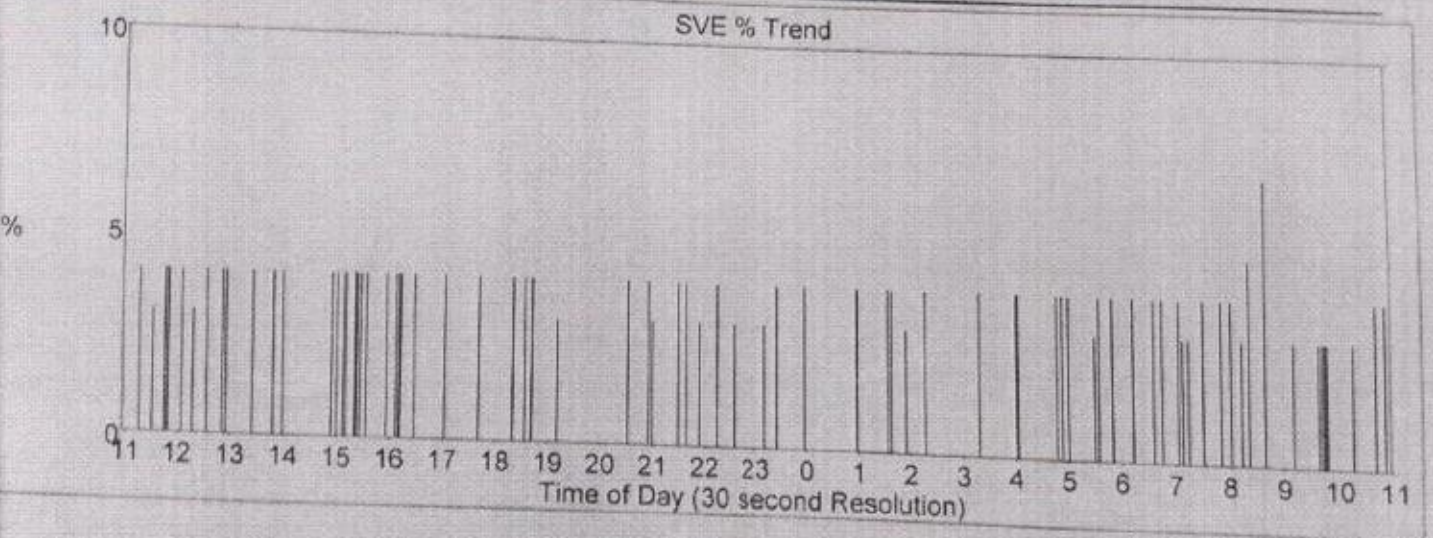
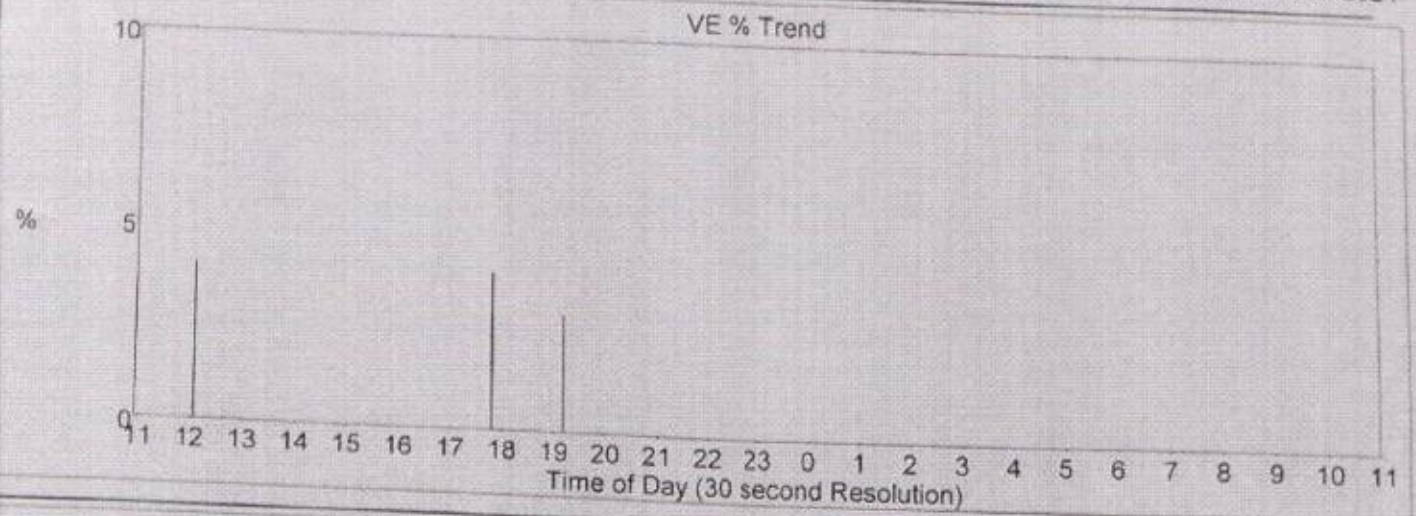
Exclusions

Time analyzed: 86400 sec. (24:00:00)
from 10:56:00 07-Jul-2021 to 10:56:00 08-Jul-2021
Time excluded: 0% (00:12:31)
Exclude RR interval ratios: < 0.80 > 1.20
Exclude RR intervals: < 150 ms > 5000 ms

before	Intervals Excluded	after
1	Fusion	1
1	Idioventricular	1
1	Ventricular Escape	1
1	Ventricular	1
1	Questionable	1
1	Junctional	1
1	Aberrant	1
1	Supraventricular	1
1	Paced Fusion	1
1	Dual Paced	1
1	Atrial Paced	1
1	Ventricular Paced	1

Patient: SUDHIR KUMAR
ID: 375586

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021



Patient: SUDHIR KUMAR,
ID: 375586

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021

Hourly Summary

*RR Pause Criteria: 2000

Hour	Min.s Used	Heart Rate				Ventricular					Supraventricular					
		#QRS's	Min	Ave	Max	Pauses	Iso	Cplt	Runs	Max Run	Max Rate	Iso	Cplt	Runs	Max Run	Max Rate
10	34	1590	41	47	60	0	0	0	0	0	0	1	0	0	0	0
11	60	2681	41	45	57	0	1	0	0	0	0	6	0	0	0	0
12	60	2687	39	45	54	0	0	0	0	0	0	4	0	0	0	0
13	60	2708	41	45	54	0	0	0	0	0	0	2	0	0	0	0
14	60	2729	41	45	53	0	0	0	0	0	0	8	0	0	0	0
15	60	2726	40	45	55	0	0	0	0	0	0	6	0	0	0	0
16	60	2760	40	46	58	0	0	0	0	0	0	1	0	0	0	0
17	60	2744	42	46	53	0	1	0	0	0	0	2	0	0	0	0
18	60	2714	41	45	55	0	1	0	0	0	0	3	0	0	0	0
19	60	2650	41	44	49	0	0	0	0	0	0	0	0	0	0	0
20	60	2809	40	47	58	0	0	0	0	0	0	4	0	0	0	0
21	60	2809	43	47	54	0	0	0	0	0	0	3	0	0	0	0
22	60	2899	44	48	59	0	0	0	0	0	0	3	0	0	0	0
23	60	2632	40	44	58	0	0	0	0	0	0	1	0	0	0	0
00	60	2704	41	45	59	0	0	0	0	0	0	2	0	0	0	0
01	60	2941	43	49	68	0	0	0	0	0	0	4	0	0	0	0
02	60	2858	44	48	57	0	0	0	0	0	0	1	0	0	0	0
03	60	2687	41	45	56	0	0	0	0	0	0	2	0	0	0	0
04	60	2632	40	44	64	0	0	0	0	0	0	4	0	0	0	0
05	60	2694	40	45	56	0	0	0	0	0	0	4	0	0	0	0
06	60	2757	39	46	59	0	0	0	0	0	0	4	0	0	0	0
07	60	3109	45	52	68	0	0	0	0	0	0	5	0	0	0	0
08	60	3137	47	52	60	0	0	0	0	0	0	6	0	0	0	0
09	60	3002	46	50	58	0	0	0	0	0	0	3	0	0	0	0
10	26	1258	44	48	57	0	0	0	0	0	0	5	0	0	0	0
												2	0	0	0	0
1440		66917	39	46	68	0	3	0	0	0	0	82	0	0	0	0

Patient: SUDHIR KUMAR,
ID: 375586

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021

Description

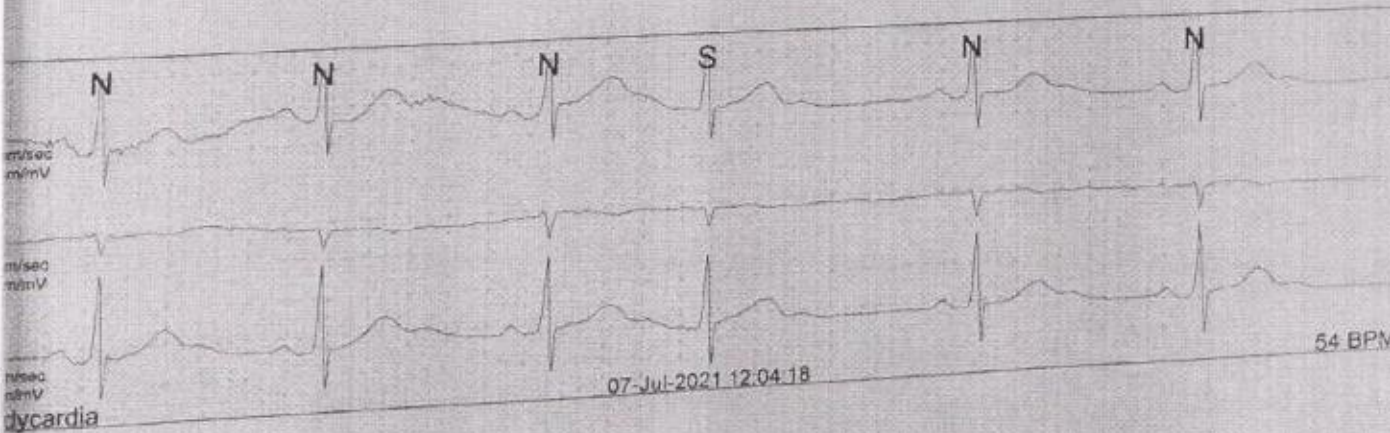
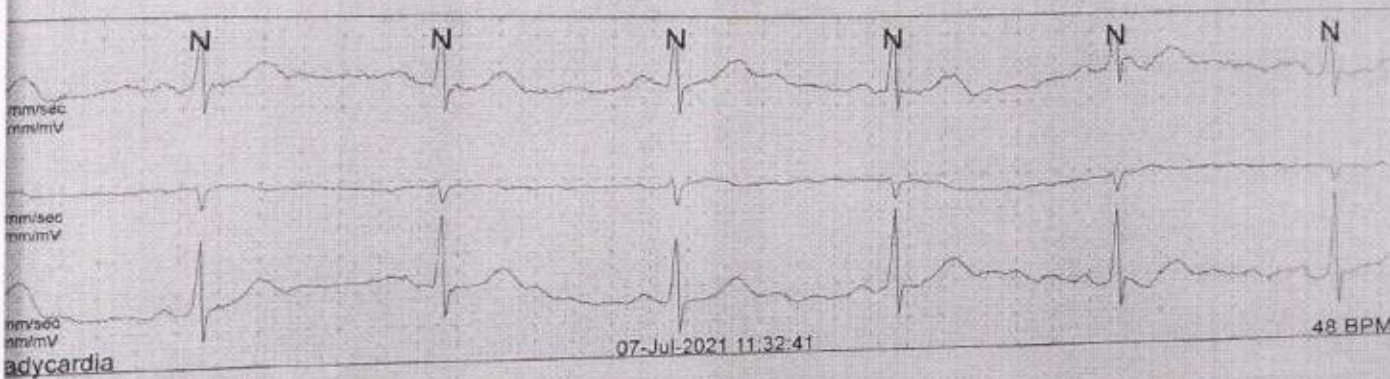
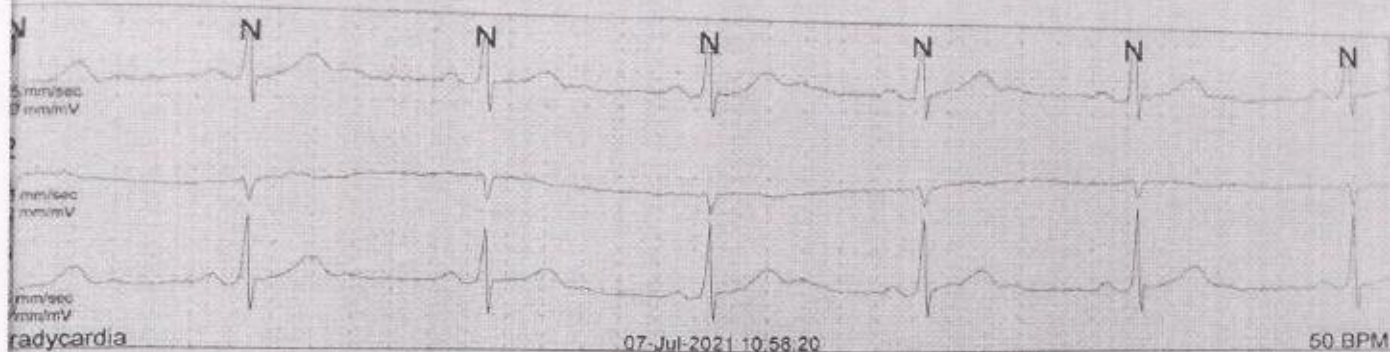
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	Strip	19
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Automatic U6 2 121 (1)

Patient: SUDHIR KUMAR,
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Location: SEC 128 NOIDA
Hookup: 07-Jul-2021

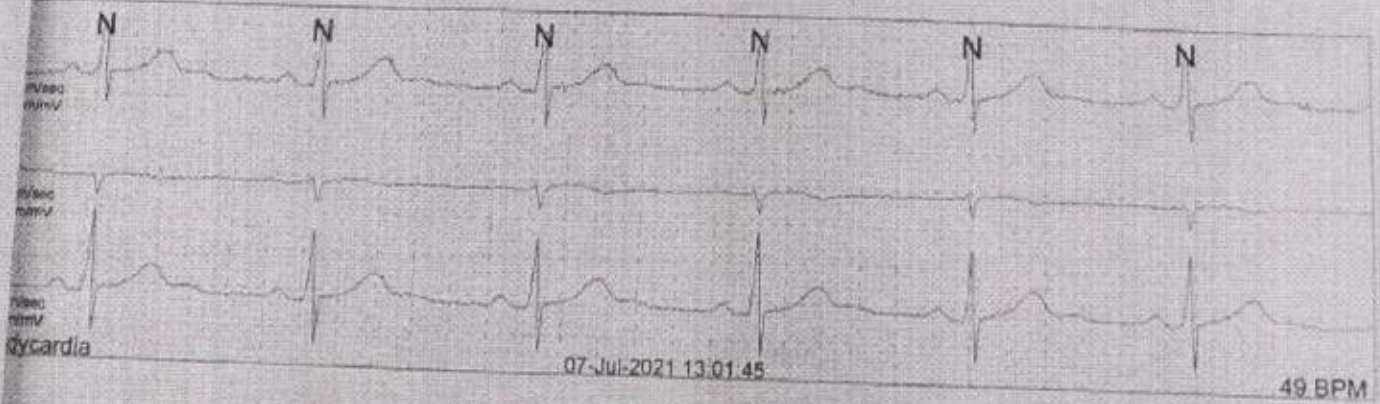
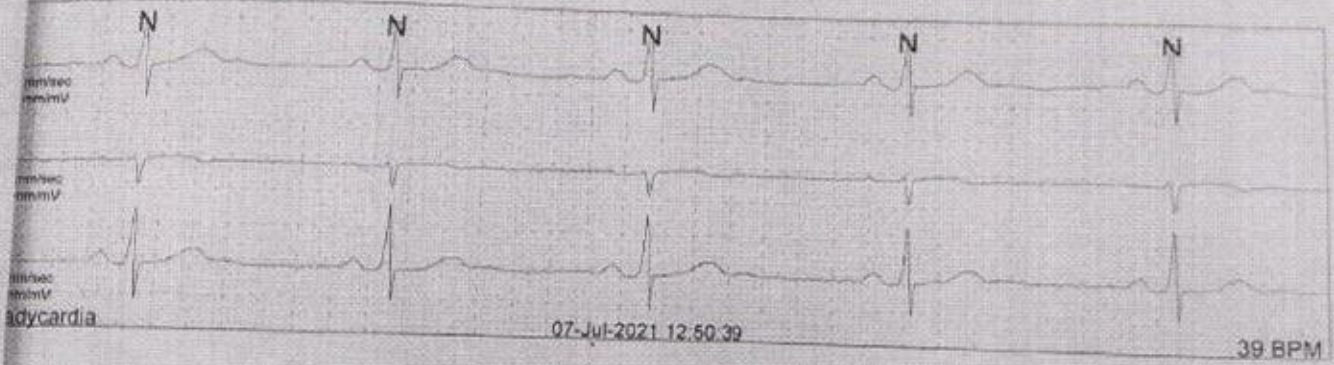
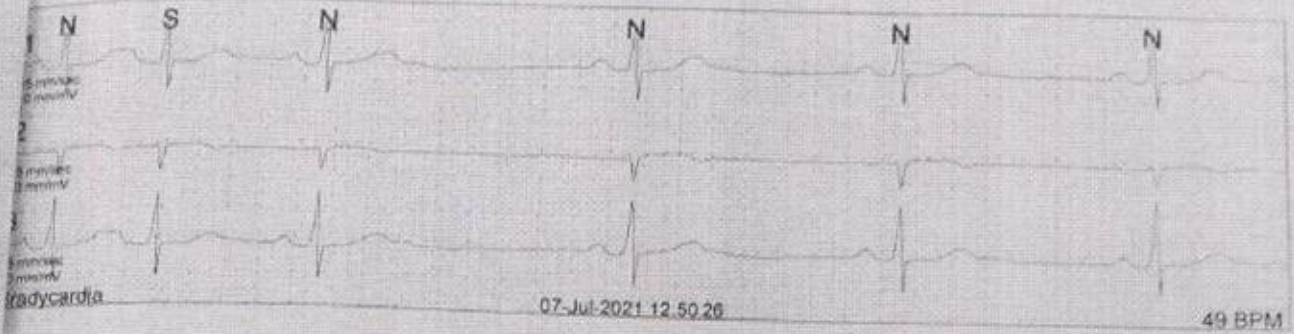


B Dr Lal Path Labs

Prog. Office: National Reference Lab (NRL) Pathology, Block E, Sector 10, Gurgaon, Haryana
Tel: +91-12-2625550, 2625551, 2625552, 2625553, 2625554, 2625555, 2625556, 2625557, 2625558, 2625559, 2625560
Web: www.drallpathlabs.com, CIN No. J-1499921995PLC0603300

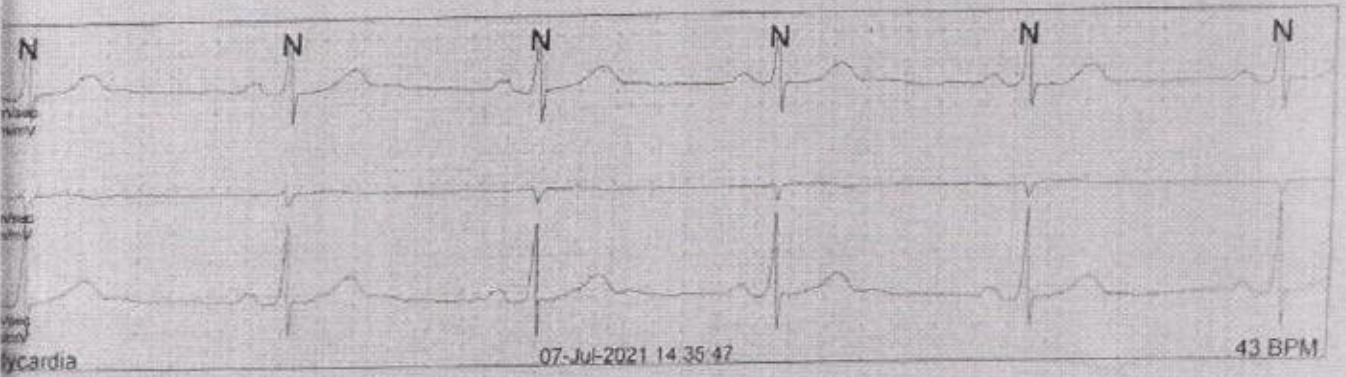
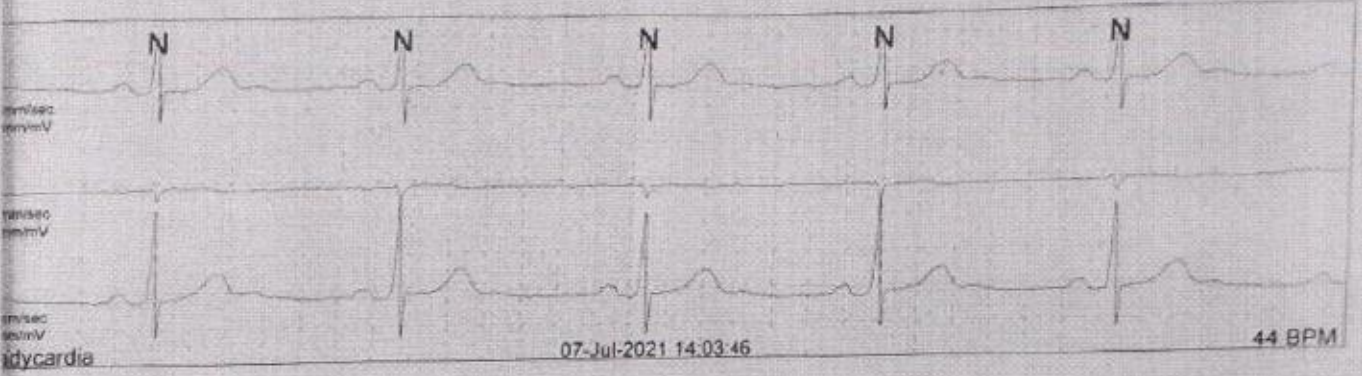
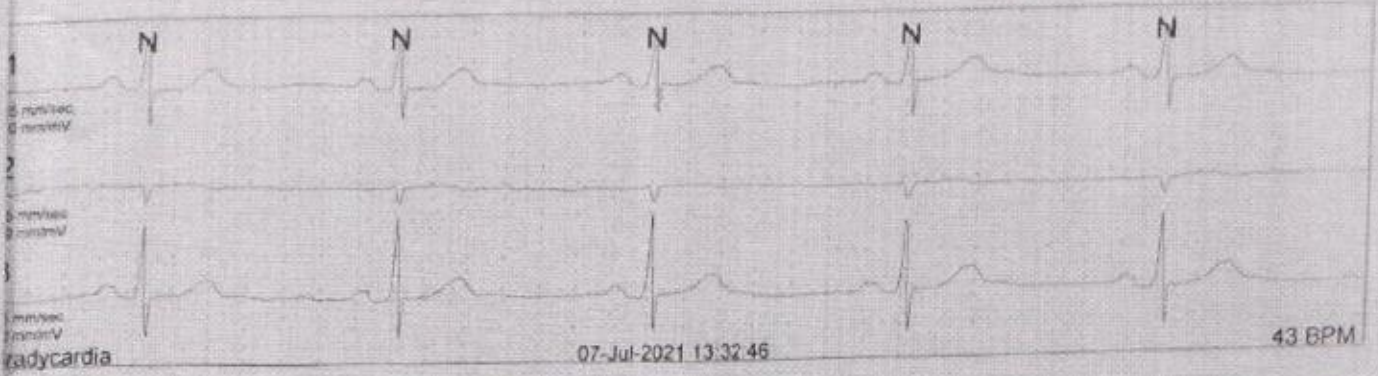
Patient: SUDHIR KUMAR,
ID: 375596

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021



Patient: SUDHIR KUMAR
ID: 375586

Site: JAYPEE HOSPITAL
Location: SEC 128 NOIDA
Hookup: 07-Jul-2021



M: SUDHIR KUMAR,
20615

Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Hourly Summary

*RR_Pause_Criteria: 2000

		<u>Heart Rate</u>					<u>Ventricular</u>					<u>Supraventricular</u>				
Hour	Min s Used	#QRS's	Min	Ave	Max	Pauses	Iso	Cplt	Runs	Max Run	Max Rate	Iso	Cplt	Runs	Max Run	Max Rate
20	15	869	50	58	83	0	0	0	0	0	0	1	0	0	0	0
21	60	3692	50	62	80	0	0	0	0	0	0	5	0	0	0	0
22	60	3755	53	63	83	0	0	0	0	0	0	4	0	0	0	0
23	60	3757	53	63	93	0	0	0	0	0	0	8	0	0	0	0
00	60	3449	47	57	78	0	0	0	0	0	0	0	0	0	0	0
01	60	3334	47	56	80	0	0	0	0	0	0	3	0	0	0	0
02	60	3394	46	57	84	0	0	0	0	0	0	1	0	0	0	0
03	60	3540	50	59	82	0	0	0	0	0	0	4	0	0	0	0
04	60	3353	48	56	77	0	0	0	0	0	0	3	0	0	0	0
05	60	3860	52	64	118	0	0	0	0	0	0	2	1	1	7	116
06	60	3886	53	65	88	0	0	0	0	0	0	5	0	0	0	0
07	60	4059	53	68	81	0	0	0	0	0	0	1	0	0	0	0
08	60	3930	56	66	144	0	0	0	0	0	0	4	0	1	12	141
09	60	3861	53	64	80	0	0	0	0	0	0	5	0	0	0	0
10	60	4007	56	67	90	0	0	0	0	0	0	2	0	0	0	0
11	60	4210	59	70	96	0	0	0	0	0	0	4	1	0	0	0
12	60	3694	49	62	85	0	0	0	0	0	0	2	1	0	0	0
13	60	3773	49	63	92	0	1	0	0	0	0	4	1	1	3	106
14	60	3681	50	61	90	0	0	0	0	0	0	2	1	0	0	0
15	60	3597	51	60	80	0	0	0	0	0	0	2	0	0	0	0
16	60	3638	46	61	85	0	0	0	0	0	0	3	0	0	0	0
17	60	3724	53	62	82	0	0	0	0	0	0	1	0	0	0	0
18	60	3908	55	65	81	0	0	0	0	0	0	3	0	0	0	0
19	38	2494	57	66	97	0	0	0	0	0	0	3	0	0	0	0
	1373	85465	46	62	144	0	1	0	0	0	0	72	5	3	12	141

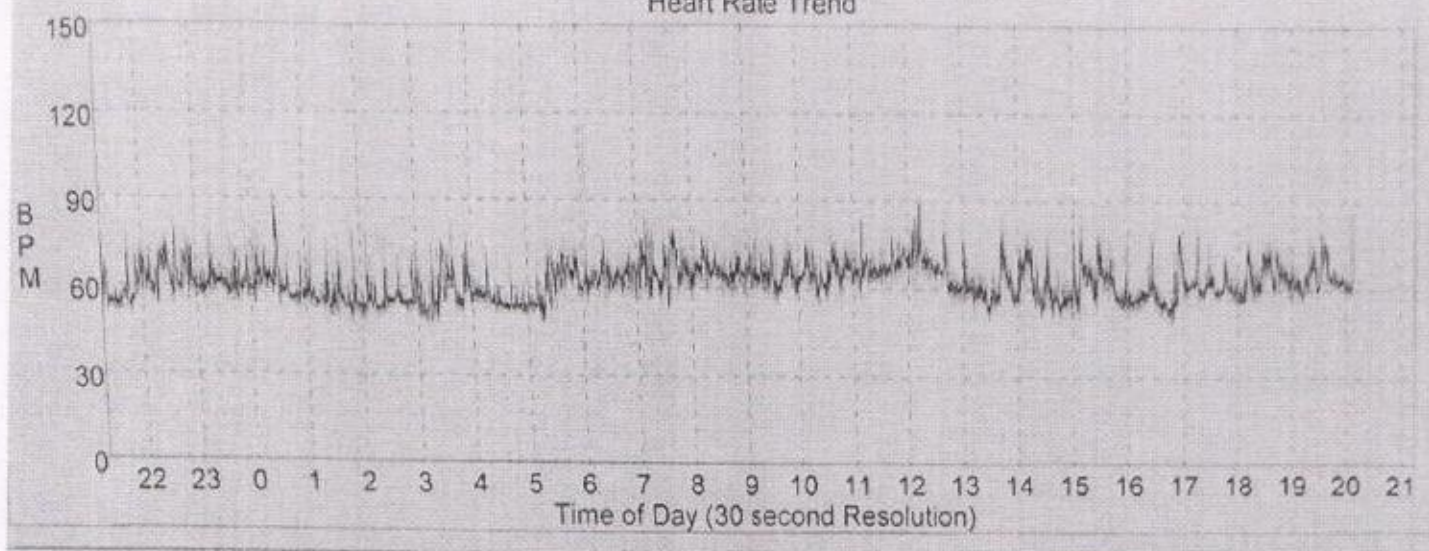
Analyst Comment

Pat: SUDHIR KUMAR,
20615

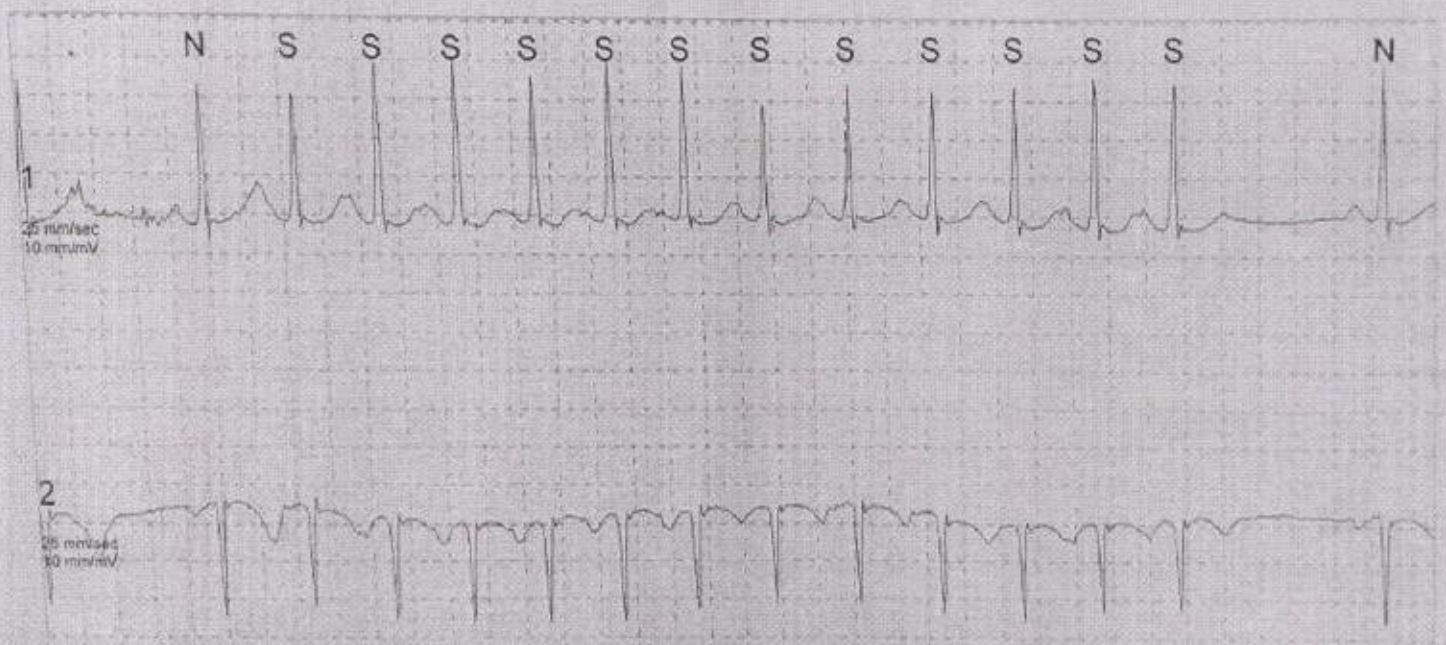
Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Heart Rate Trend



Max Heart Rate



SVE Run Length 12 beats (141 bpm)

03-Jul-2015 09:10:41

144 BPM

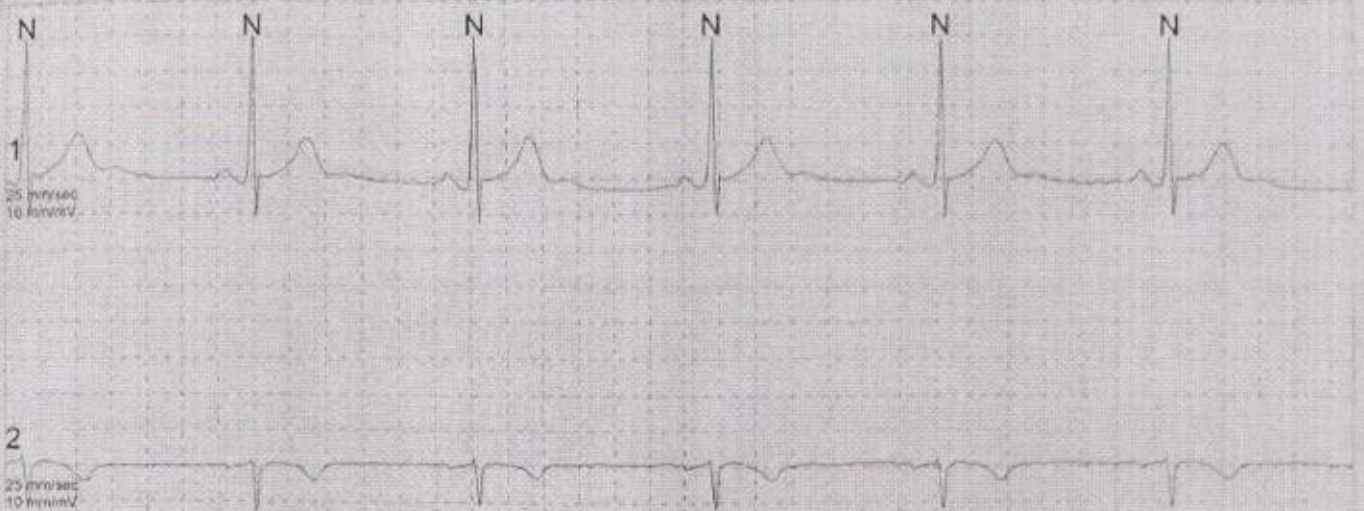
Unit: SUDHIR KUMAR,
20615

Unit Cardio

Unit NON INV

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Min Heart Rate

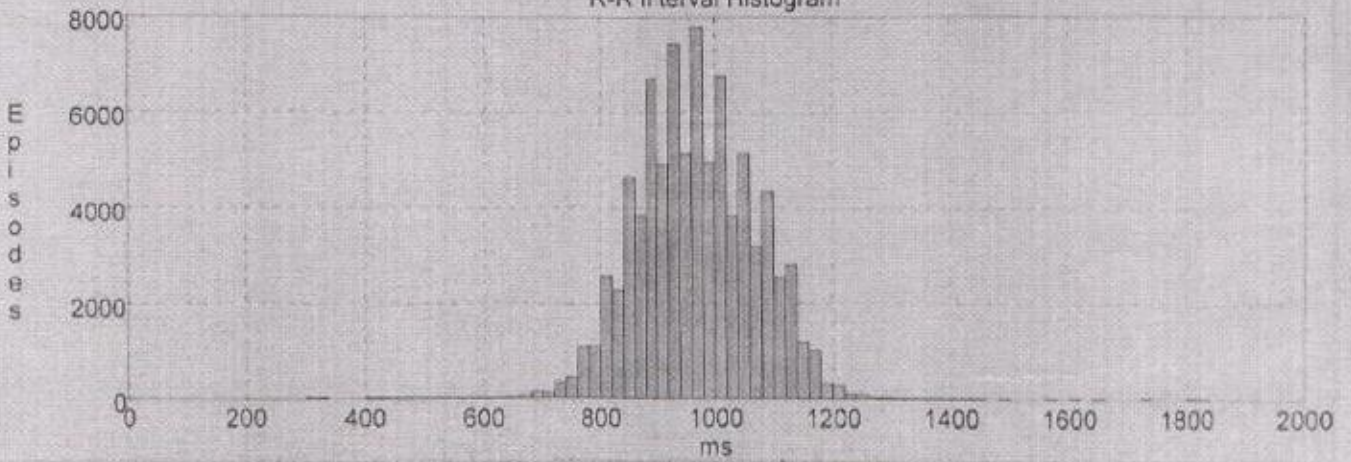


Bradycardia

03 Jul-2015 03:05:02

46 BPM

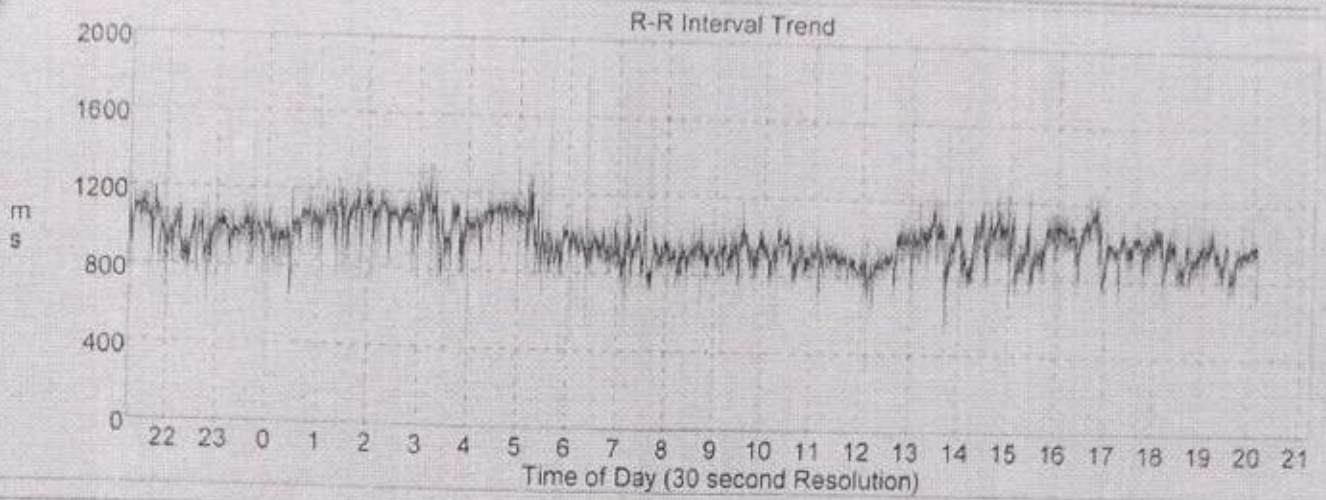
R-R Interval Histogram



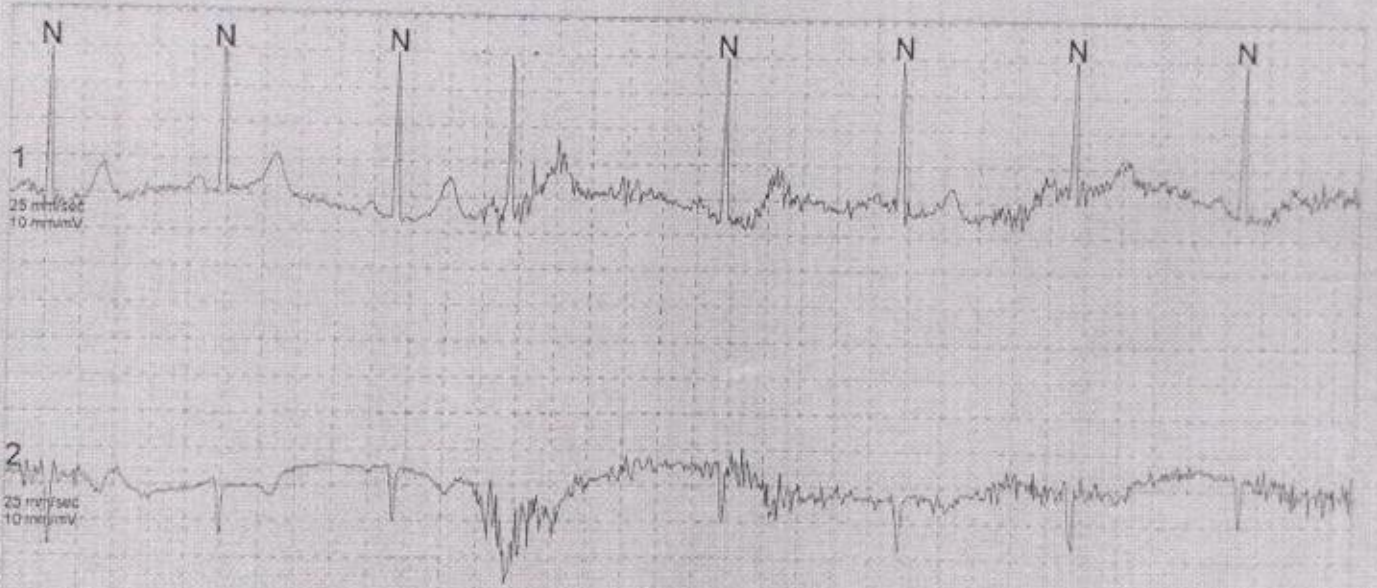
Pat: SUDHIR KUMAR
020615

Unit Cardio

Unit NON INV
Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015



Max R-R



Bradycardia

03-Jul-2015 07:11:13

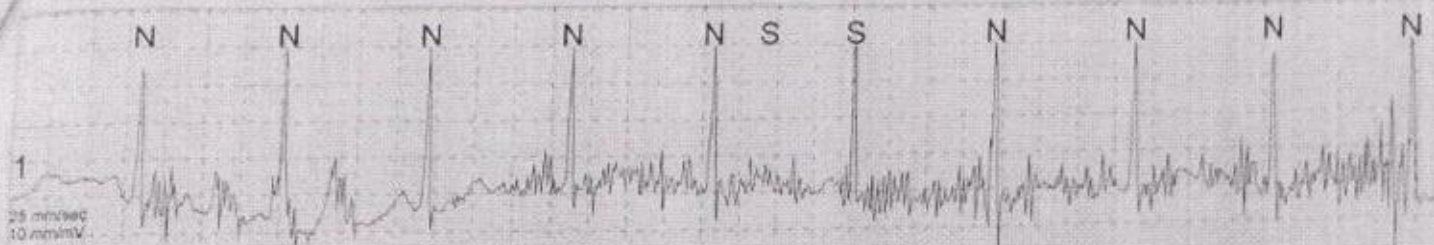
53 BPM

Unit: SUDHIR KUMAR
20615

Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Minimum R-R



SVE Couplet

03-Jul-2015 12:08:17

90 BPM

HOLTER REPORT

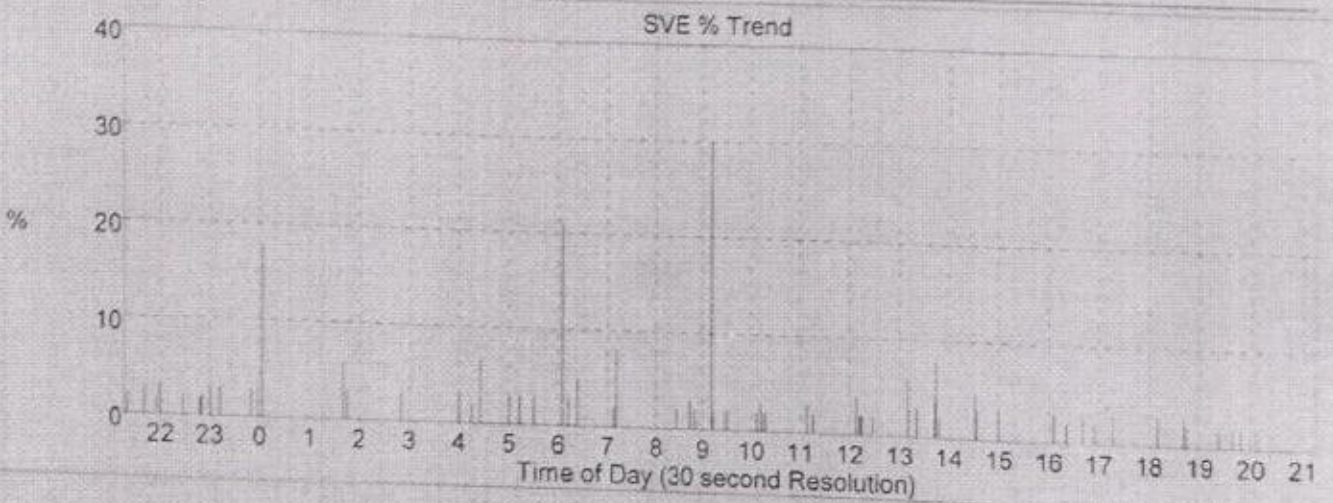
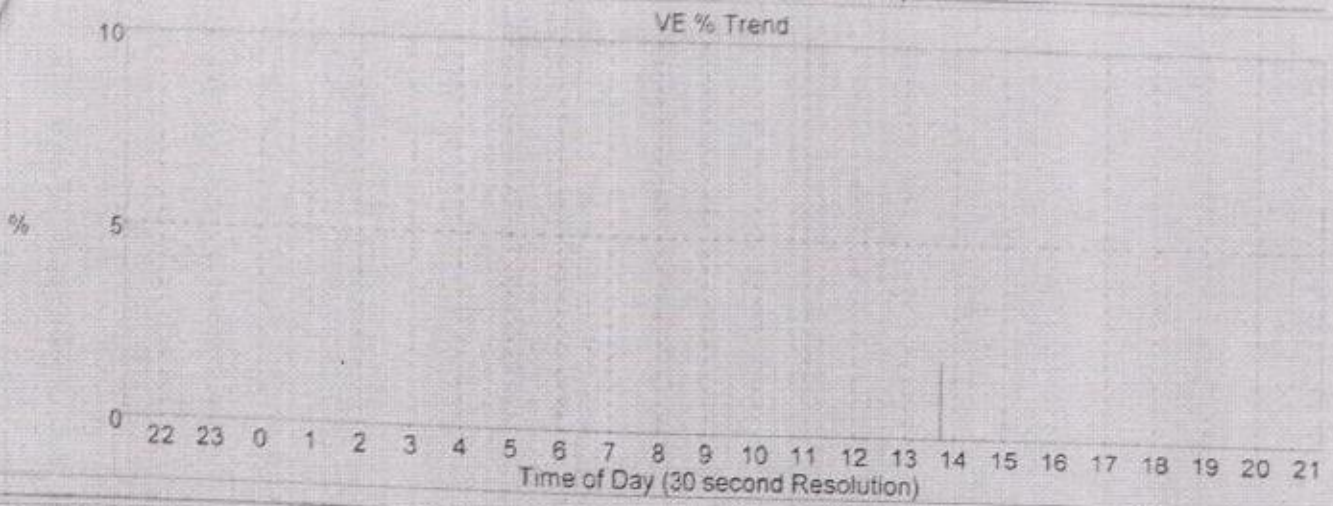
SAHARA

Unit NON INV

Pt: SUDHIR KUMAR,
20615

Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

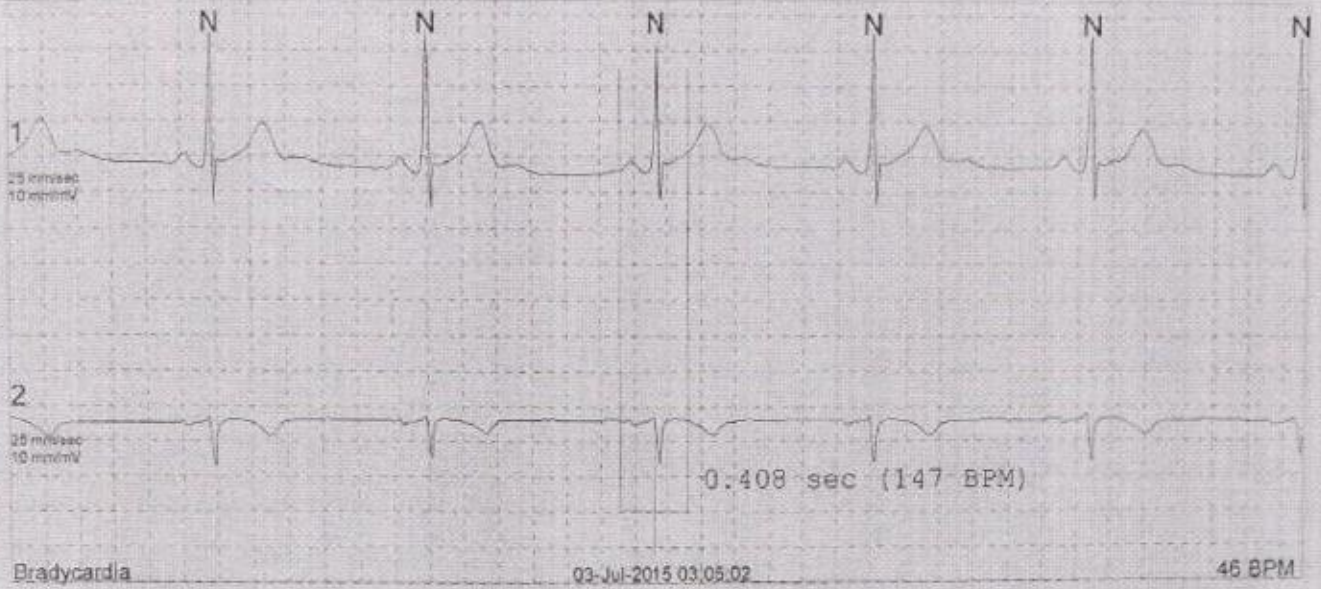


pt: SUDHIR KUMAR,
20615

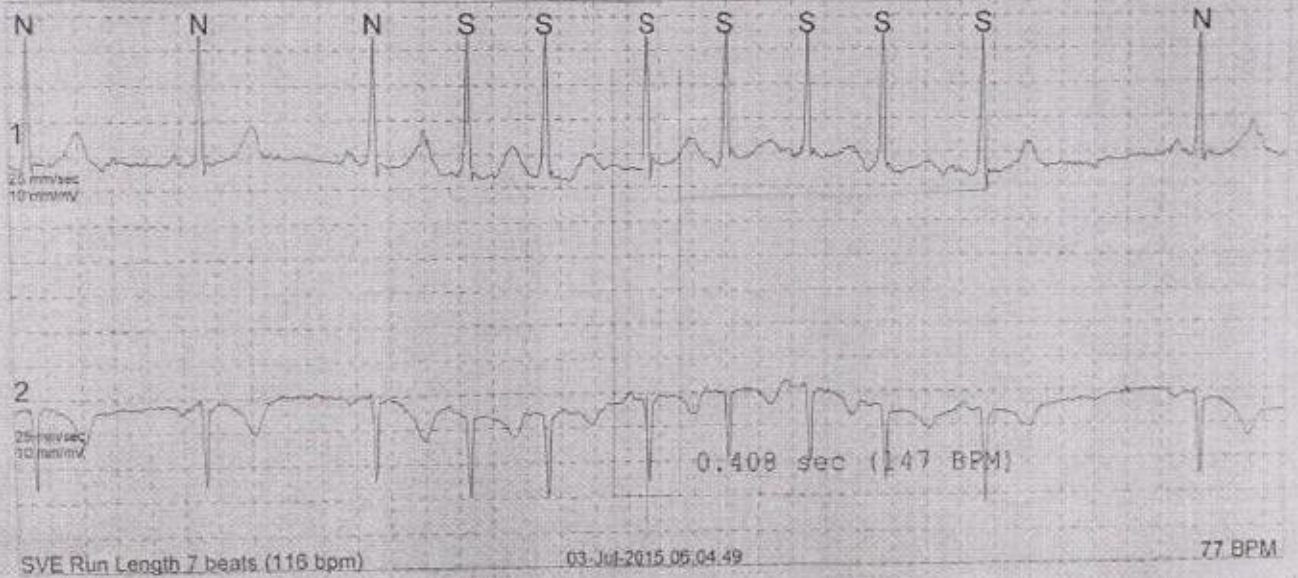
Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Sinus Bradycardia



SVE



HOLTER REPORT

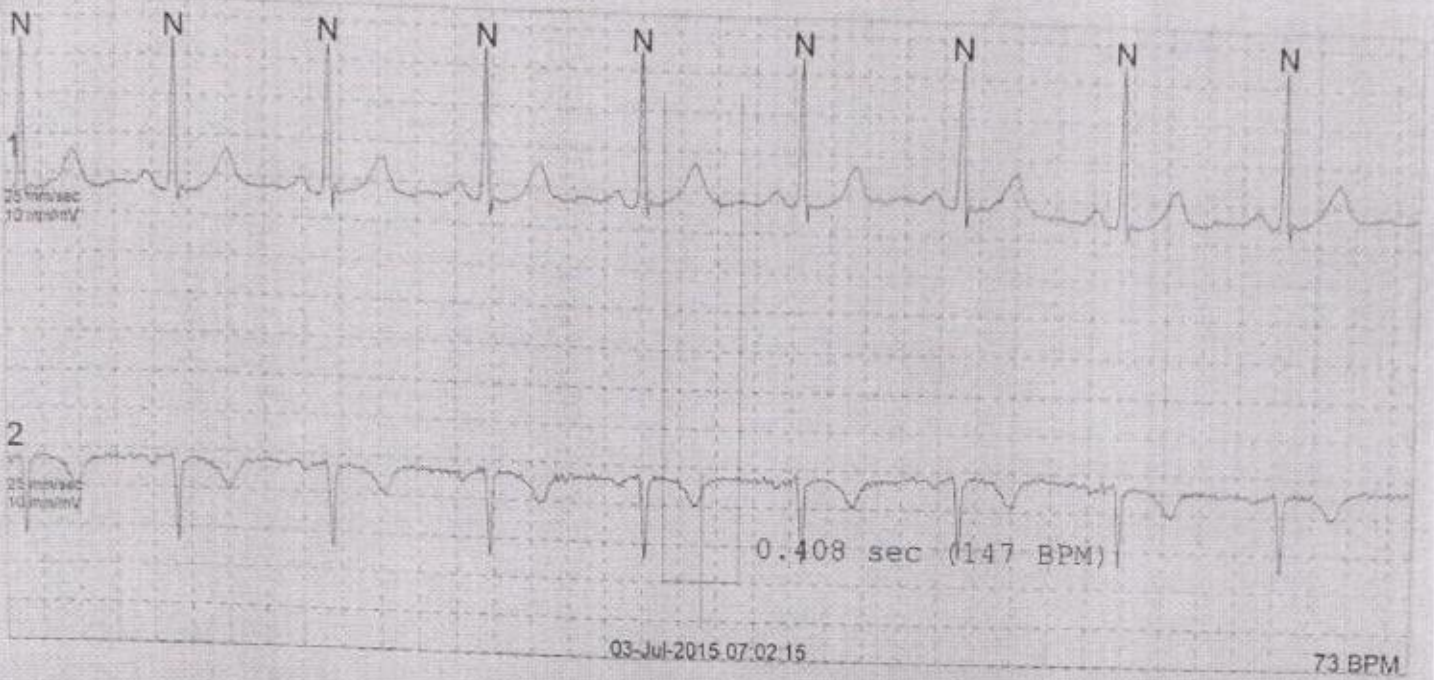
SAHARA Unit NON INV

Pt: SUDHIR KUMAR,
20615

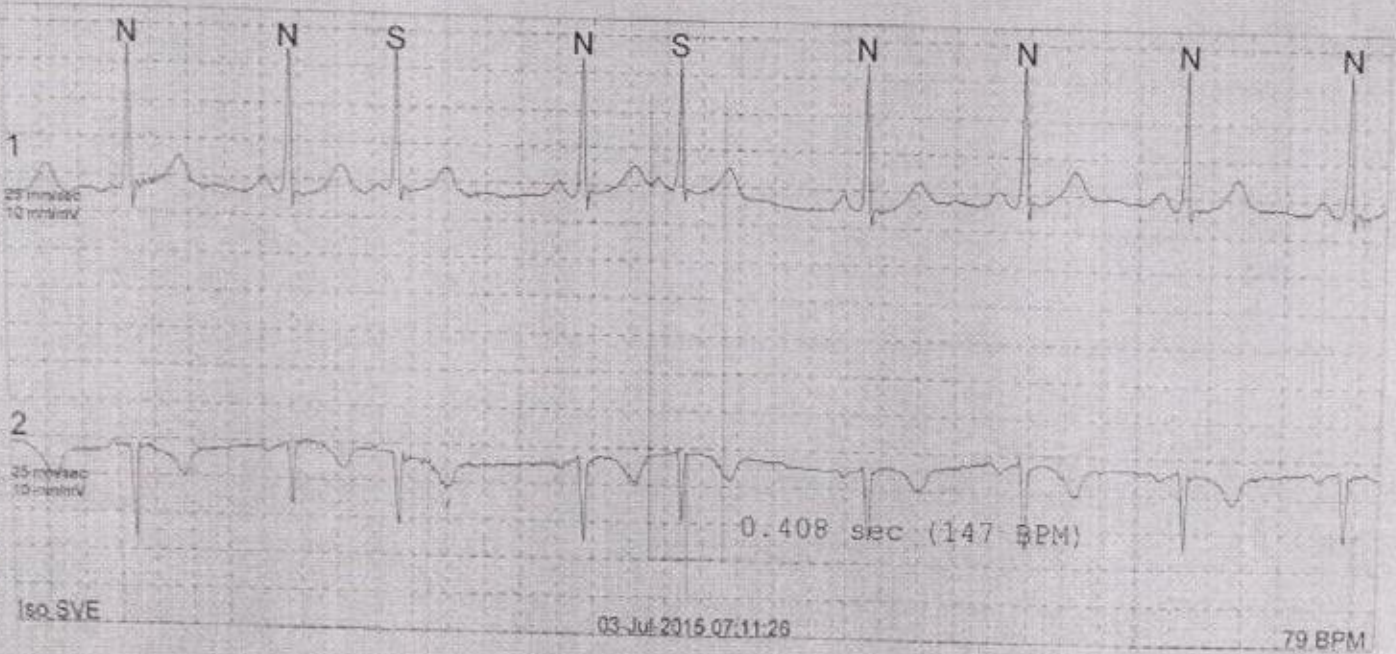
Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Normal sinus rhythm



SVE

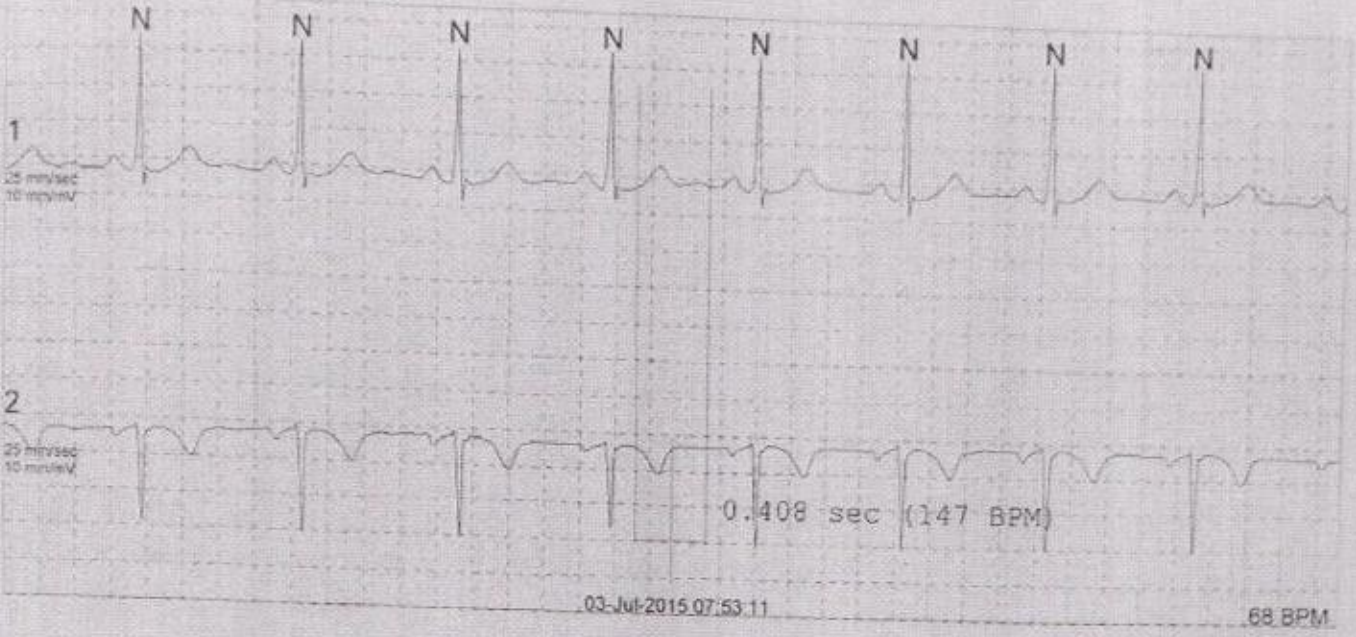


Pt: SUDHIR KUMAR,
20615

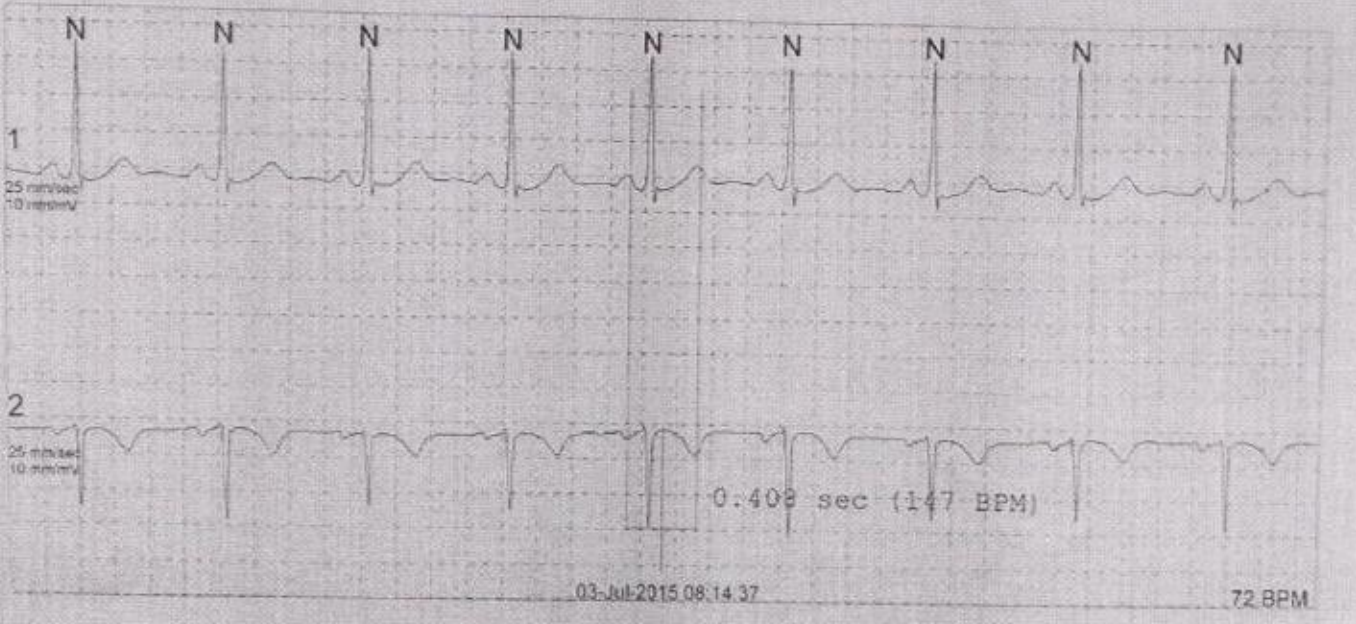
Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Normal Sinus Rhythm



Normal sinus rrythm

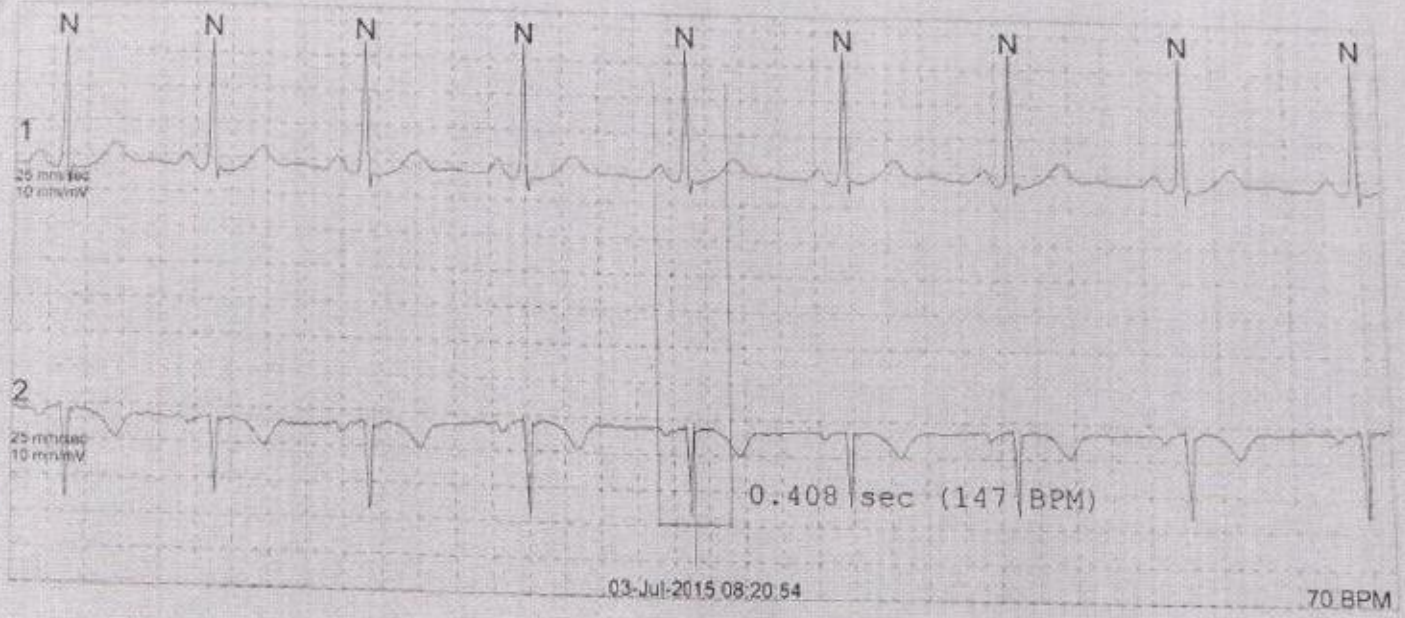


pt: SUDHIR KUMAR,
20615

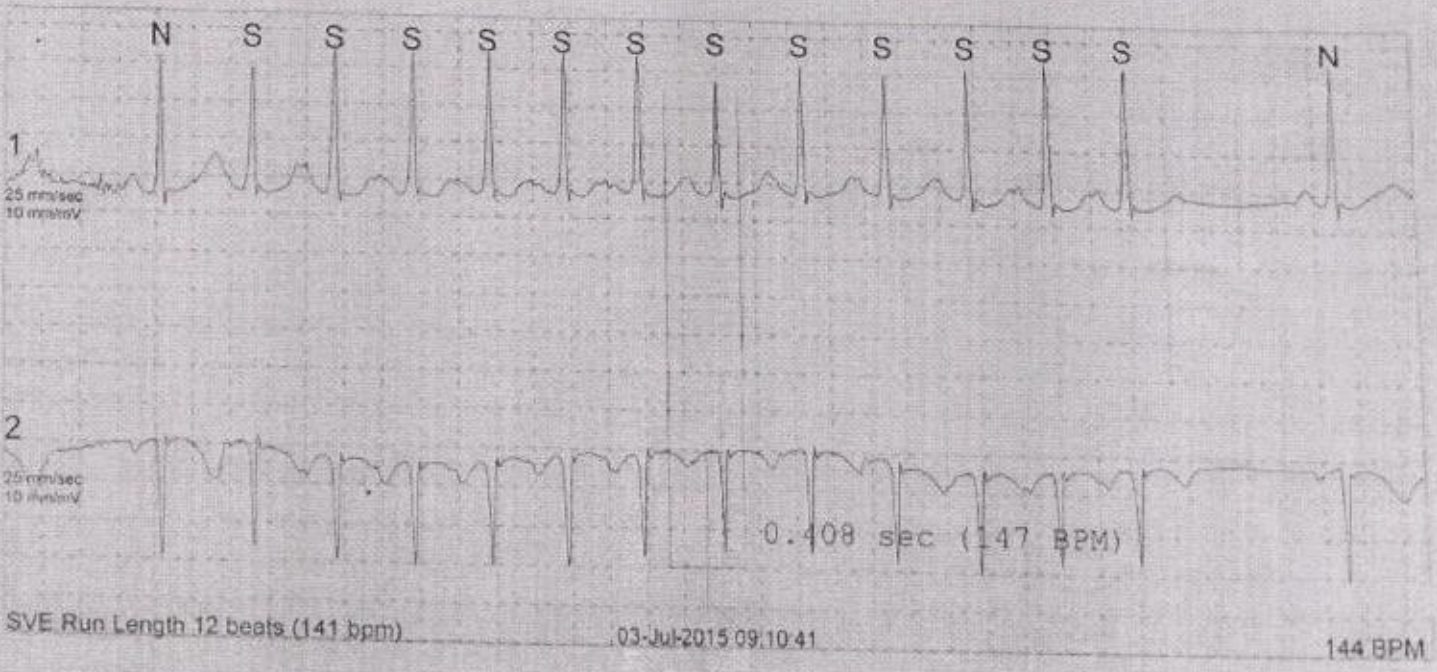
Unit Cardio

Site: Unknown
Location: Unknown
Hookup: 02-Jul-2015

Normal Sinus Rhythm



SVE



SVE Run Length 12 beats (141 bpm)

03-Jul-2015 09:10:41

144 BPM



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No : 51560
Collected : 05/03/2020 07:37AM	Lab Ref No. : 2040790
Received : 05/03/2020 07:46AM	Specimen :
Reported : 05/03/2020 01:22PM	Man.Lab No. : 811

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
ESR (ERYTHROCYTE SEDIMENTATION RATE) <i>(Westergren Method)</i>	15		0 - 15	mm 1st hr.
COMP.HAEMOGRAM(CBC)				
HAEMOGLOBIN <i>(Spectrophotometry)</i>		12.69 (L)	13.0 - 17.0	g/dl
TOTAL LEUCOCYTE COUNT (TLC) <i>(Impedence Method)</i>	6.06		4.0 - 10.0	thousand/ul
PLATELET COUNT <i>(Impedence Method)</i>	195		150 - 410	thousand/ul
MPV <i>(Calculated)</i>	9.9		7.2 - 11.1	fl
HEMATOCRIT (HCT) <i>(Numeric Integration)</i>	39.4		37 - 54	%
RBC COUNT <i>(Impedence Method)</i>		4.17 (L)	4.2 - 6.5	million/ul
MCV <i>(Calculated)</i>	94		83 - 101	fl
MCH <i>(Calculated)</i>	30.44		27.0 - 32	pg
MCHC <i>(Calculated)</i>	32.24		31.5 - 34.5	g/dl
RED DISTRIBUTION WIDTH (RDW) <i>(Calculated)</i>		14.8 (H)	11.5 - 14.5	%
.DIFFERENTIAL LEUCOCYTE COUNT				
SEGMENTED NEUTROPHILS <i>(Cytochemical staining / Light Microscopy)</i>	65.5		40 - 76	%
LYMPHOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	27.3		20 - 40	%
EOSINOPHILS <i>(Cytochemical staining / Light Microscopy)</i>	2.2		1 - 6	%
MONOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	4.8		2 - 10	%
BASOPHILS <i>(Cytochemical staining / Light Microscopy)</i>	0.2		0 - 1	%
*ATYPICAL LYMPHOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	0.8		0.5 - 2.8	%

Dr. SEEMA GUPTA

Dr. TANISH MANDAL

Dr. SHUCHI GHAI

Neeru Nagar, Ghaziabad-201 001 (U.P.)
Tel: 0120-4182000 (30 lines), Fax: 0120-2752168

MD CONSULTANT PATHOLOGIST

MD CONSULTANT PATHOLOGIST

8-1 & 2, Sector 23, Saray Nagar, Ghaziabad-201003 (U.P.) • Ph: 0120-4012000

Encoded By: DEEP CHANDRA

Website: www.yashodahospital.org • For Enquiry: Feedbackforashoda@gmail.com • For Feedback: Feedbackforashoda@gmail.com

Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No : 51560
Collected : 05/03/2020 07:37AM	Lab Ref No. : 2040790
Received : 05/03/2020 07:46AM	Specimen : BLOOD
Reported : 05/03/2020 09:35AM	Man.Lab No. : 811

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
LIVER FUNCTION TEST				
SGOT,Serum (Modified JFCC)	20		0 - 46	IU/L
SGPT,Serum (Modified JFCC)	23		0 - 49	IU/L
ALKALINE PHOSPHATASE,Serum (Modified JFCC)	110		53 - 141	IU/L
TOTAL PROTIEN,Serum (BIURET Method)		6.1 (L)	6.7 - 8.7	g/dl
ALBUMIN,Serum (BCG Method)	3.9		3.5 - 5.0	g/dl
GLOBULIN,Serum (BCG Method)	2.2		2.0 - 3.5	g/dl
GAMA-GT,Serum		333 (H)	7 - 34	IU/L
BILIRUBIN TOTAL DIRECT, SERUM				
TOTAL (DCA With ATCS)		1.1 (H)	0.2 - 1.0	mg/dl
DIRECT (DCA With ATCS)	0.5		0 < 0.5	mg/dl
INDIRECT (DCA With ATCS)		0.6 (H)	0.2 - 0.5	mg/dl
KIDNEY FUNCTION TEST				
BLOOD GLUCOSE, Serum (GOD-PAP)	100		70 - 140	mg/dl
BLOOD UREA,Serum (Urease GLDH Kinetic)	17		10 - 50	mg/dl
CREATININE,Serum (Modified JAFFE)	0.74		0.72 - 1.25	mg/dl
URIC ACID,Serum (Enzymatic)	5.6		3.0 - 7.0	mg/dl
TOTAL PROTIEN,Serum (BIURET Method)		6.1 (L)	6.7 - 8.7	g/dl
ALBUMIN,Serum (BCG Method)	3.9		3.5 - 5.0	g/dl
GLOBULIN,Serum (BCG)	2.2		2.0 - 3.5	g/dl

Dr. SEEMA GUPTA

Dr. TANISH MANDAL

Dr. SHUCHI GHAI

 Nehru Medical College, Ghaziabad-201002
 Tel: 0120-4182000 (50 lines), Fax: 0120-2752168

 MD, CONSULTANT PATHOLOGIST
 YASHODA SUPER SPECIALTY HOSPITAL & CANCER INSTITUTE
 B-1 & 2, Sector 23, Sanjay Nagar, Ghaziabad-201003 (U.P.) Ph: 0120-4612000

 MD, CONSULTANT PATHOLOGIST
 YASHODA SUPER SPECIALTY HOSPITAL & CANCER INSTITUTE
 B-1 & 2, Sector 23, Sanjay Nagar, Ghaziabad-201003 (U.P.) Ph: 0120-4612000



YASHODA

HOSPITAL & RESEARCH CENTRE

INVESTIGATION REPORT



YHRC/HRM/05/V1

MC-3022

Page 1 of 1

Patient Name : Mr. SUDHIR KUMAR **Age / Sex** : 62 Yrs Male/ M
OPD/IPD : OPD **Reg. No.** :
Referred by : Dr. DINESH ARORA **Bill No** : 51560
Collected : 05/03/2020 07:37AM **Lab Ref No.** : 2040790
Received : 05/03/2020 07:46AM **Specimen** : BLOOD
Reported : 05/03/2020 09:35AM **Man.Lab No.** : 811

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
SODIUM,Serum (ISE)	137		135 - 145	mmol/lit
POTASSIUM,Serum (ISE)	4.3		3.5 - 5.2	mmol/lit
CALCIUM,Serum (Arsenate)	8.8		8.0 - 10.5	mg/dl
PHOSPHOROUS	3.8		2.5 - 4.5	mg/dl
CHOLESTEROL,Serum (CHOD-PAP With ATCS)	132		130 - 200	mg/dl
CHLORIDE,Serum (ISE Direct)	104		98.0 - 115	mmol/lit

End Of Report

Dr. SEEMA GUPTA

Dr. TANISH MANDAL

Dr. SHUCHI GHAI

Neeru Hospital, Consultant, Sangay Nagar, Ghaziabad-201003 (U.P.)
Tel: 0120-4182000 (30 lines) Fax: 0120-2752168

MD CONSULTANT PATHOLOGIST

MD CONSULTANT PATHOLOGIST

8-1 & 2, Sector 23, Sangay Nagar, Ghaziabad-201003 (U.P.) • Ph: 0120-4012000



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No. : 51560
Sample Date : 05/03/2020 07:37AM	Lab Ref No. : 2040790
S. Received in Lab : 05/03/2020 07:46AM	Specimen :
Result Date : 05/03/2020 12:59PM	Man.Lab No. : 811

SEROLOGY

* Test	Result	Units	Ref Range
MICROALBUMIN, URINE, MAU	28.0	mg/L	

Category	Reference Range in mg/L
Normal / Non diabetic	< 30
Microalbuminuria	30 - 300
Clinical albuminuria	> 300

Note : It is recommended that at least two of these specimens collected within a 3 -6 month period be abnormal before considering a patient to be within a diagnostic category.

Clinical Use :

- * Early detection of diabetic nephropathy.
- * Therapeutic monitoring of patient with Nephropathy.
- * Routine management of patient with Diabetes.

Only Tests Marked With * are Not Accredited by NABL

End Of Report

Technologist	Dr. SEEMA GUPTA	Dr. TANISH MANDAL	Dr. SHUCHI GHAI
	MD	MD	MD
	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST

Encoded By: ASHWANI KUMAR DIWAKAR

Page 1 of 6



Patient Name : Mr. SUDHIR KUMAR
OPD/IPD : OPD
Referred by : Dr. DINESH ARORA
Sample Date : 05/03/2020 07:37AM
S. Received in Lab : 05/03/2020 07:46AM
Result Date : 05/03/2020 09:52AM

Age / Sex : 62 Yrs Male/ M
Reg. No. :
Bill No. : 51560
Lab Ref No. : 2040790
Specimen : BLOOD
Man.Lab No. : 811

BIOCHEMISTRY

Lipid Profile

INVESTIGATION NAME	RESULTS	Biological Reference Interval
CHOLESTEROL (CHO-PAP With ATCS Method)	132	
Suggested risk for CAD		
Levels (mg/dl)		Interpretation
<200		Desirable
200-240		Borderline risk
>240		high risk

Comments:

Determination of cholesterol is one of the important tools in the diagnosis and classification of hyperlipidemia. Elevated levels are seen with
 -Hypercholesterolemia Type I & IV
 -Hyperlipoproteinemia
 -Hypothyroidism
 -Poorly controlled Diabetes mellitus
 -Alcoholism
 -Biliary cirrhosis

INVESTIGATION NAME	RESULTS	Biological Reference Interval
TRIGLYCERIDES (GPO-PAP Method)	95	
Suggested risk for CAD		
Levels (mg/dl)		Interpretation
<160		Normal
160-199		Borderline risk
200-499		High
>500		Very high

Comments:

Elevated levels can be seen with
 -Overnight fasting less than 12 hrs.
 -Non insulin dependent Diabetes mellitus
 -Hepatitis

Technologist **Dr. SEEMA GUPTA**

MD
CONSULTANT PATHOLOGIST

Dr. TANISH MANDAL

MD
CONSULTANT PATHOLOGIST

Dr. SHUCHI GHAI

MD
CONSULTANT PATHOLOGIST



MC-3022

Encoded By: SARVESH SHUKLA



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No. : 51560
Sample Date : 05/03/2020 07:37AM	Lab Ref No. : 2040790
S. Received in Lab : 05/03/2020 07:46AM	Specimen : BLOOD
Result Date : 05/03/2020 09:52AM	Man.Lab No. : 611

BIOCHEMISTRY

- Hepatitis
- Intrahepatic biliary obstruction
- Cirrhosis
- Obesity
- Alcohol Intake
- Pancreatitis (level > 500mg/dl)
- Drug use
 - Thiazide
 - Cholestyramine
 - Corticosteroids

INVESTIGATION NAME	RESULTS	Biological Reference Interval
*HDL-CHOL (Immuno-inhibition Method)	58	(35-60 mg/dl)

Comments:

- This test is used to assess risk for CAD and in diagnosis of various lipo proteinemia
- For every 1mg/dl decrease in HDL risk for CAD increase by 2-3%.
- Decrease levels are seen in
 - Diabetes mellitus
 - Obesity
 - Stress
 - Starvation
 - Smoking
 - Hypothyroidism
 - Drug use (anabolic steroids, B Blockers, thiazide)

INVESTIGATION NAME	RESULTS	Biological Reference Interval
*VLDL	19.0	(< 40 mg/dl)
*LDL Cholesterol	63	(< 130 mg/dl)

Suggested risk for CAD
Levels
<130

Interpretation
Desirable

Technologist	Dr. SEEMA GUPTA	Dr. TANISH MANDAL	Dr. SHUCHI GHAI
	MD	MD	MD
	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST	CONSULTANT PATHOLOGIST



MC-3022

Encoded By: SARVESH SHUKLA

Page 3 of 6



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No. : 51560
Sample Date : 05/03/2020 07:37AM	Lab Ref No. : 2040790
S. Received in Lab : 05/03/2020 07:46AM	Specimen : BLOOD
Result Date : 05/03/2020 09:52AM	Man.Lab No. : 811

BIOCHEMISTRY

110-159
>160 Borderline risk
high risk

Comments:

-This test is used to asses risk, monitor and decide treatment & CAD
Increase levels are seen in
Familial hypercholesterolemia
Diabetes mellitus
Hypothyroidism
Nephrotic syndrome
CRF
Multiple myeloma

*TOTAL LIPID	430.0	400-700 mg/dl
*Total Cholestrol: HDL Ratio	4.2	

Suggested risk for CAD

Total cholestrol: HDL ratio
3.43 - 4.4
4.5 - 7.05
7.1 - 11.0
>11

Interpretation
low risk
Average risk
Moderate risk
high risk

Comments:

This risk factor gives the most accurate and definite assessment of heart disease risk when cholestrol value fall in borderline range.

End Of Report

Technologist **Dr. SEEMA GUPTA**
MD
CONSULTANT PATHOLOGIST

Dr. TANISH MANDAL
MD
CONSULTANT PATHOLOGIST

Dr. SHUCHI GHAI
MD
CONSULTANT PATHOLOGIST



MC-3022

Encoded By: SARVESH SHUKLA

Page 4 of 6



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No. : 51560
Sample Date : 05/03/2020 07:37AM	Lab Ref No. : 2040790
S. Received in Lab : 05/03/2020 07:46AM	Specimen : BLOOD
Result Date : 05/03/2020 09:52AM	Man.Lab No. : 811

IMMUNOLOGY

TSH

Specimen : SERUM
Method : CMIA

Investigation Name	Result	Units	Biological Ref. Interval
ULTRASENSITIVE h TSH, Serum	1.95	uIU/mL	
CHILDREN			
PRE MATURE-28-36 WEEKS:	0.7	-	2.7
BIRTH-4 DAYS	1.0	-	3.9
5 DAYS-20 WEEKS	1.7	-	9.1
21 WEEKS - 20 YEARS	0.7	-	6.4
AUDLTS			
	0.35	-	4.94
PREGNANCY			
Ist Trimester	0.1	-	2.5
IInd Trimester	0.2	-	3.0
IIIrd Trimester	0.3	-	3.0

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11p.m to 6.a.m. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates + - 50 % hence time of the day has influence on the measured serum TSH concentrations.

CHANGES IN ULTRASENSITIVE h TSH SECRETION:

- * Glucocorticoids, severe non-thyroid illness, Dopaminergics, may lead to reduced TSH.
- * Metoclopramide, noradrenaline, antidopaminergics, antidepressants, may lead to increased TSH.
- * Depression : In certain major depressions, Low TSH associated with normal T3 and T4 Level is sometimes observed in the absence of endocrinopathy .

End Of Report

Technologist **Dr. SEEMA GUPTA**
MD
CONSULTANT PATHOLOGIST

Dr. TANISH MANDAL
MD
CONSULTANT PATHOLOGIST

Dr. SHUCHI GHAI
MD
CONSULTANT PATHOLOGIST



MC-3022

Encoded By: SARVESH SHUKLA

Page 5 of 6



patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs Male/ M
OPD/IPD : OPD	Reg. No. :
Referred by : Dr. DINESH ARORA	Bill No. : 51560
Sample Date : 05/03/2020 07:37AM	Lab Ref No. : 2040790
S. Received in Lab : 05/03/2020 07:46AM	Specimen : BLOOD
Result Date : 05/03/2020 09:52AM	Man.Lab No. : 811

IMMUNOLOGY

PSA

Specimen : SERUM
Method : CMIA

Investigation Name	Result	Units	Biological Ref. Interval
TOTAL P-S-A	1.14	ng/ml	< 4.0

Prostate Specific Antigen is one of the few organ specific tumor markers i.e. for prostate cancer, which is the leading cancer in older men. In the serum of normal men PSA levels are usually below 4 ng/ml.

PSA is found to correlate with clinical stages of prostate cancer. Higher PSA levels in higher percentage of patients are associated with advanced stages. Advanced pathological stages are associated with higher PSA levels in serum. The greatest clinical use of PSA is in the monitoring of definitive treatment of prostate cancer.

It is recommended that measurement of PSA be done every 3 months during the first year following surgery, every 4 months during the second year, and once every 6 months thereafter.

End Of Report

IF THERE IS ANY PRINTING ERROR KINDLY NOTIFY PATH LAB IMMEDIATELY

Technologist **Dr. SEEMA GUPTA**
MD
CONSULTANT PATHOLOGIST

Dr. TANISH MANDAL
MD
CONSULTANT PATHOLOGIST

Dr. SHUCHI GHAI
MD
CONSULTANT PATHOLOGIST



MC-3023

Encoded By: SARVESH SHUKLA

Page 6 of 6



DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Sudhiz Kumar	Bill Date	25/08/2019 3:11AM
Age/Gender	62 Yrs 6 Mths 25 Days/Male	Sample Date	25/08/2019 3:19AM
Reg No	377498	Ack. Date	25/08/2019 10:29AM
Bed No/Ward	OPD	Finalize Date	25/08/2019 11:21AM
Referred By		Lab No	797895
Report Stage	Final		

BIOCHEMISTRY

Test	Result	Unit	Reference Range	Method
KIDNEY FUNCTION TEST(KFT)				
UREA, Serum	22.00	mg/dl	15.60 - 48.50	
Creatinine, Serum	0.98	mg/dl	0.70 - 1.20	Alkaline Pictate Kinetic
Uric Acid, Serum	5.3	mg/dl	3.6 - 7.0	Colorimetric - Uricase
Protein Total, Serum	L 6.5	g/dl	6.6 - 8.7	Biuret Kinetic
Albumin, Serum	4.3	g/dl	3.5 - 5.2	BROMOCRESOL GREEN
Globulin, Serum	2.2	g/dl	2.0 - 3.0	Calculated Value
Phosphorus, Serum	2.9	mg/dl	2.7 - 4.9	Phosphomolybdate Method
Sodium, Serum	L 135	mmol/L	136 - 146	ISE Direct
Potassium, Serum	4.0	mmol/L	3.5 - 5.2	ISE Direct
Calcium (Ionic)	1.23	mmol/L	1.10 - 1.35	ISE Direct
Chlorides	100	mmol/L	98 - 107	ISE Indirect
LIVER FUNCTION TEST(LFT)				
Bilirubin Total, Serum	H 1.7	mg/dl	< 1.2	Diazonium Ion
Bilirubin Direct, Serum	H 0.5	mg/dl	< 0.3	Diazotization
Bilirubin Indirect, Serum	H 1.2	mg/dl	0.2 - 0.7	CALCULATED

Mr. BHUVANESH KUMAR GAUR

Prasant
Dr. PRASRANT KR SINGH
Sr Consultant-Pathologist
Reg.No.-DMC-80306



DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mths 25 Days/Male	Sample Date	25/08/2019 9:13AM
Reg No	377498	Ack. Date	25/08/2019 10:25AM
Bed No/Ward	OPD	Finalize Date	25/08/2019 11:21AM
Referred By		Lab No	797895
Report Stage	Final		

BIOCHEMISTRY

SGOT (AST), Serum	20	U/L	0 - 40	UV without PSE
SGPT (ALT), Serum	28	U/L	0 - 41	UV without PSE
Alkaline Phosphatase, Serum	H 142	U/L	40 - 130	PNPP, AMP Buffer
Protein Total, Serum	L 6.5	g/dl	6.5 - 8.7	Biuret Kinetic
Albumin, Serum	4.3	g/dl	3.5 - 5.2	BROMOCRESOL GREEN
Globulin, Serum	2.2	g/dl	2.0 - 3.0	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	H 1.95		0.80 - 1.40	Calculated Value
GGT (GAMMA GT), Serum	H 572	U/L	< 60	G-glutamyl-carboxy-nitrobenzylisr

End Of Report

Mr. BHUWANESH KUMAR GAUR

Sudhir
Dr. PRASHANT KR SINGH

Sr. Consultant-Pathologist
Reg. No. -DMC-80306

* This Report is not for Medical Legal Purpose

H-1, Kaushambi, Near Dabur Chowk, Ghaziabad-201010 • Ph. 0120-4181900, 4189500, 08500069461

For Enquiry : admin.yhk@yashodahospital.org • For Feedback : admin.yhk@yashodahospital.org

Website : www.yashodahospital.org

M.D. PATHOLOGY



DEPARTMENT OF LABORATORY MEDICINE


Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 8:11AM
Age/Gender	62 Yrs 6 Mths 20 Days/Male	Sample Date	25/08/2019 8:15AM
Reg No	377438	Ack. Date	25/08/2019 10:31AM
Bed No/Ward	OTD	Finalize Date	25/08/2019 11:21AM
Referred By		Lab No	187895
Report Stage	Final		

BIOCHEMISTRY

Glucose (F) 185 mg/dl 65 - 110 Reference

End Of Report

Mr. BHUWANESH KUMAR GAUR


Dr. PRASHANT KR SINGH
Sr Consultant-Pathologist
Reg. No. - DMC-80306



DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Sudhar Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mos 25 Days/Male	Sample Date	25/08/2019 9:11AM
Reg No	375495	Ack. Date	25/08/2019 10:16AM
Bed No/Ward	OPD	Finalize Date	25/08/2019 11:21AM
Referred By		Lab No	797895
Report Stage	Final		

HAEMATOLOGY

COMP HAEMOGRAM (CBC+ESR)-WHOLE BLOOD

Hb (haemoglobin) whole blood	L 12.9	g/dl	13.0 - 17.0	Colorimetric
WBC (Total Leukocyte Count)	8000	/Cumm	4000 - 10000	Electric Impedance
DLC				
Neutrophils	H 82	%	40 - 80	Microscopy
Lymphocytes	L 11	%	20 - 40	Microscopy
Monocytes	06	%	2 - 10	Microscopy
Eosinophils	01	%	1 - 6	Microscopy
ESR	H 30	mm/hr	0 - 10	Westergren
RBC Count (Red Blood Cell)	L 4.20	millions/c u.mm	4.50 - 5.50	DC Detection
Hematocrit - (Hct.)	L 39.1	%	40.0 - 50.0	
MCV	93.1	fl	83.0 - 101.0	MEASURED BASED ON RBC HISTOGRAM
MCH	30.8	pg	27.0 - 32.0	Calculated Value
MCHC	33.1	g/dl	31.5 - 34.5	Calculated Value
Platelet Count	2.72	lakn/cumm	1.50 - 4.10	Impedance Method

End Of Report

Mr. SHREE KRISHNA

Prashant Kr Singh
Dr. PRASHANT KR SINGH
Sr. Consultant-Pathologist
Reg. No. -DMC-80306



DEPARTMENT OF LABORATORY MEDICINE


Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mths 25 Days/Male	Sample Date	25/08/2019 9:19AM
Reg No	377498	Ack. Date	25/08/2019 11:17AM
Bed No/Ward	ORD	Finalize Date	25/08/2019 11:21AM
Referred By		Lab No	757895
Report Stage	Final		

CLINICAL PATHOLOGY

Urine Microalbumin (Random Urine) H 44.0 mg/L 1.0 - 30.0

End Of Report

Mr. ABU SALAM


Dr. PRASHANT KR SINGH
Sr. Consultant-Pathologist
Reg No. -DMC-80306



LABORATORY INVESTIGATION REPORT

Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age Gender	62 Yrs 6 Mths 25 Days/Male	Sample Date	25/08/2019 9:19AM
Reg No	377498	Ack. Date	25/08/2019 10:25AM
Bed No/ Ward	OPD	Finalize Date	25/08/2019 12:30PM
Doctor		Lab No	797895

IMMUNOLOGY

Test	Value	Unit	Reference Range
TSH			
TSH,serum	0.2447	uIU/ml	
		Age	uIU/ml
		New born screen	<20
		21 wk - 20 yrs	0.7 - 6.4
		21 - 54 yrs	0.4 - 4.2
		55 - 87 yrs	0.5 - 8.9

METHOD : CMIA

CHANGES IN TSH SECRETION

- *Glucocorticoids, severe non-thyroid illness, Dopaminergics may lead to reduced TSH
- *Metoclopramide, noradrenaline, antidopaminergics, antidepressants may lead to increased TSH
- *Depression - In certain major depressions, Low TSH associated with normal T3 and T4 Level is sometimes observed in the absence of endocrinopathy
- *Patient not receiving treatment

Results are to be correlated with clinical findings of the patients.

-----End of Report-----

Nalini Singh

Dr. NALINI SINGH
Consultant Pathologist Reg No -DMC-52374
M.D. PATHOLOGY



LABORATORY INVESTIGATION REPORT

Subject Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mths 25 Days/Male	Sample Date	25/08/2019 9:19AM
Reg No.	377498	Ack. Date	25/08/2019 10:25AM
Bed No / Ward	OPD	Finalize Date	25/08/2019 12:19PM
Doctor		Lab No.	797895

IMMUNOLOGY

PSA Total

TEST

RESULT

Total PSA - serum by CMIA

1.39

Biological
 Reference value

Age(Years)

Ref.(Unit)

<40 yr

<1.4 ng/ml

40-50 yr

<2.0 ng/ml

51-60 yr

<3.1 ng/ml

61-70 yr

<4.1 ng/ml

>70 yr

<4.4 ng/ml

Remarks :

PSA (Prostate Specific Antigen)

- Total PSA is increased in 25 - 46% of the patients with benign prostatic hyperplasia
- The total PSA range of 4.0-10.0 ng/mL has been described as a diagnostic grey zone. In which the free/total PSA ratio helps to determine the relative risk of prostate cancer.

-----End of Report-----

Nalini Singh

Dr. NALINI SINGH
 Consultant Pathologist Reg. No. DMIC-52374
 M.D. PATHOLOGY

* This Report is not for Medical Legal Purpose

ASHODA Super Speciality Hospitals



Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mths 23 Days/Male	Request Date	
Reg No	377498	Ack. Date	26/08/2019 10:35AM
Bed No/Ward	OPD	Finalize Date	25/08/2019 10:57AM
Referred By		Lab No	797635
Report Stage	Final		

ULTRASOUND

ULTRASOUND WHOLE ABDOMEN

ULTRASOUND WHOLE ABDOMEN

LIVER measures 15.0 cm, borderline enlarged in size. Parenchyma shows normal echopattern with no focal lesion noted. Intrahepatic biliary radicals, common bile duct and portal vein are normal.

GALL BLADDER well distended. Normal wall thickness. Lumen echofree.

PANCREAS is normal in shape, size & echotexture. Main pancreatic duct is not dilated.

SPLEEN measures 8.3 cm, normal in size and shows normal echotexture. No focal lesion seen.

BOTH KIDNEYS are normal in size & shows normal outline and corticomedullary differentiation. Pelvicalyceal system appears normal bilaterally. No evidence of any hydronephrosis, calculi or mass lesion is seen.

R.K. - measures 10.9 x 4.3 cm

L.K. - measures 10.9 x 5.8 cm

No evidence of any significant retroperitoneal lymphadenopathy noted. No free fluid noted in visualized peritoneal cavity.

URINARY BLADDER Well distended. Normal wall thickness. No evidence of any filling defect is seen within it. Prevoid urine volume - 469 cc.

PROSTATE measures 52.4 cc in volume, enlarged in size. Parenchyma shows normal echotexture. Periprostatic fat planes are well maintained.

IMPRESSION:

BORDERLINE HEPATOMEGALY.

PROSTATOMEGALY.

PLEASE CORRELATE CLINICALLY.

Dr. VASUDHA AGARWAL

Senior Resident-Radiology

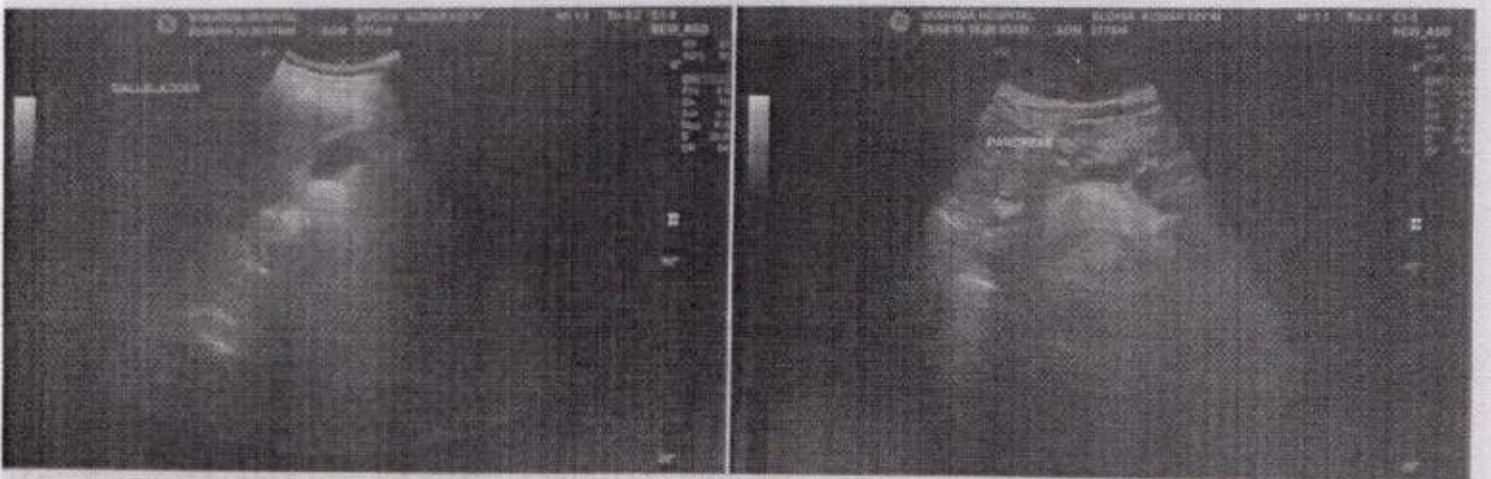
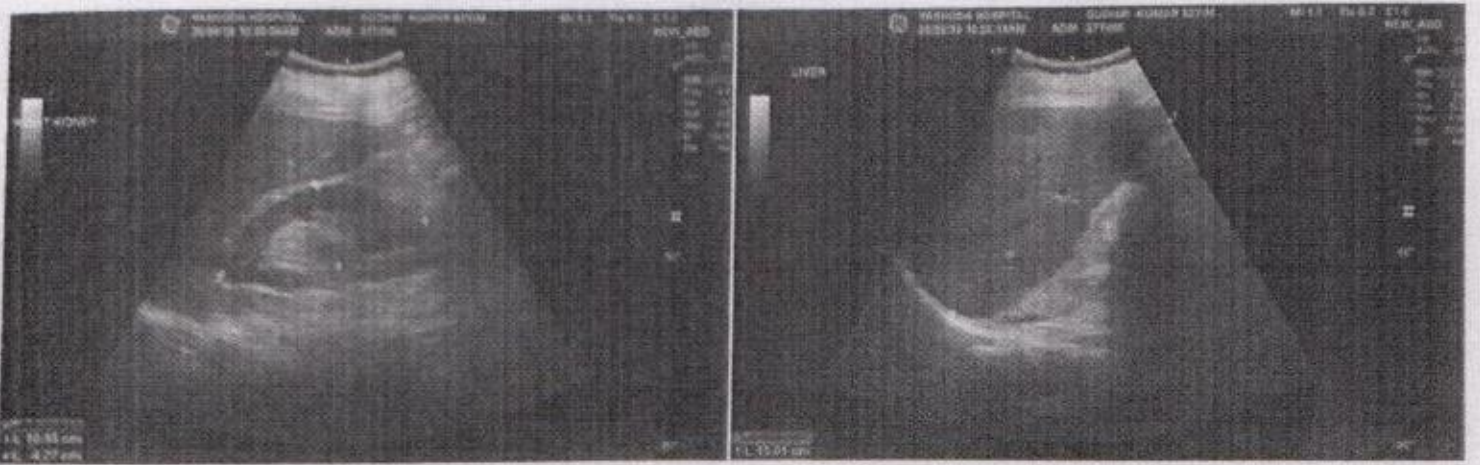
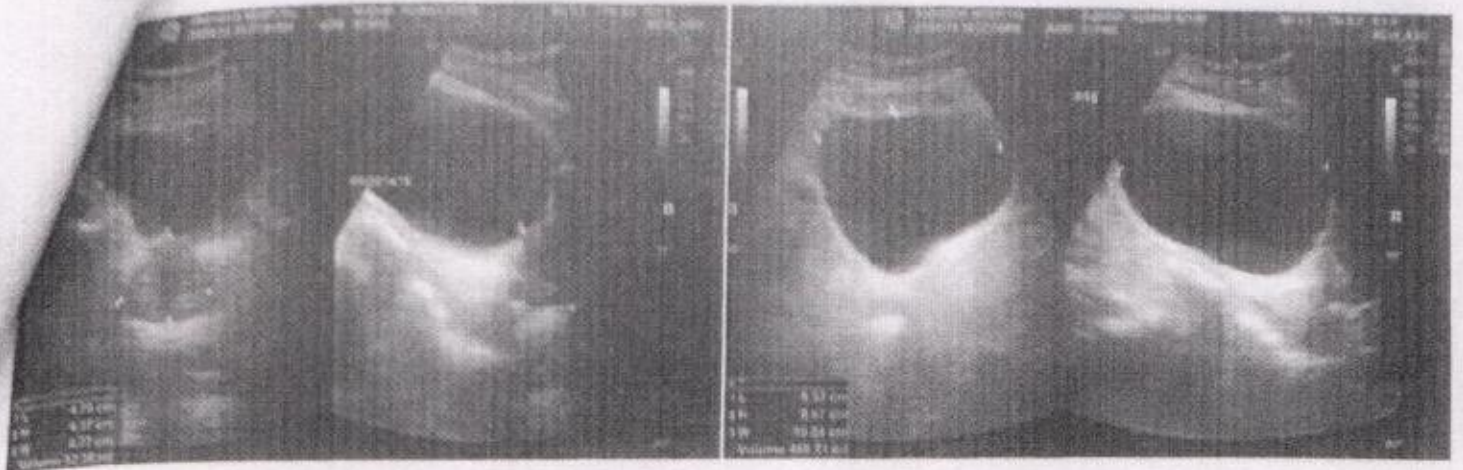
MBS, MD, DNB (Radiology)

* This Report is not for Medico Legal Purpose

Prepared By: H-1, Kaustantia, Near Dabur Chowk, Ghaziabad-201008 • Ph. 0120-4181900, 4189500, 08506069461

For Enquiry: admin.yhk@yashodahospital.org • For Feedback: admin.yhk@yashodahospital.org

Website: www.yashodahospital.org



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs. / M
OPD/IPD : OPD	Reg. No. : 391391
Referred by : Dr.	Bill No : 34588
Collected : 28/01/2019 11:28AM	Lab Ref No. : 1755005
Received : 28/01/2019 11:32AM	Specimen : BLOOD
Reported : 28/01/2019 12:09PM	Man.Lab No. : 828

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
COMP.HAEMOGRAM(CBC)				
HAEMOGLOBIN <i>(Spectrophotometry)</i>	13.16		13.0 - 17.0	g/dl
TOTAL LEUCOCYTE COUNT (TLC) <i>(Impedence Method)</i>	5.72		4.0 - 10.0	thousand/uL
PLATELET COUNT <i>(Impedence Method)</i>	184		150 - 410	thousand/uL
MPV <i>(Calculated)</i>		11.5 (H)	7.2 - 11.1	fL
HEMATOCRIT (HCT) <i>(Numeric Integration)</i>	41.7		37 - 54	%
RBC COUNT <i>(Impedence Method)</i>	4.28		4.2 - 6.5	million/uL
MCV <i>(Calculated)</i>	97		83 - 101	fL
MCH <i>(Calculated)</i>	30.72		27.0 - 32	pg
MCHC <i>(Calculated)</i>	31.59		31.5 - 34.5	g/dl
RED DISTRIBUTION WIDTH (RDW) <i>(Calculated)</i>		15.6 (H)	11.5 - 14.5	%
.DIFFERENTIAL LEUCOCYTE COUNT				
SEGMENTED NEUTROPHILS <i>(Cytochemical staining / Light Microscopy)</i>	74.4		40 - 76	%
LYMPHOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	20.2		20 - 40	%
EOSINOPHILS <i>(Cytochemical staining / Light Microscopy)</i>		0.7 (L)	1 - 6	%
MONOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	4.7		2 - 10	%
BASOPHILS <i>(Cytochemical staining / Light Microscopy)</i>	0		0 - 1	%
#ATYPICAL LYMPHOCYTES <i>(Cytochemical staining / Light Microscopy)</i>	1.1		0.5 - 2.8	%
#LARGE IMMATURE CELLS <i>(Cytochemical staining / Light Microscopy)</i>	0.5		0.2 - 1.4	%
ABSOLUTE COUNT				

Dr. SEEMA GUPTA Nehru Nagar - IIIrd M. Nehru Nagar, Ghaziabad-201 001 (U.P.) Tel: 0120-2732168 MD, CONSULTANT	Dr. TANISH MANDAL Kaushambi - H-4 MD CONSULTANT PATHOLOGIST	Dr. SHUCHI GHAT Kaushambi - Near Dabur Chowk, Ghaziabad MD, CONSULTANT PATHOLOGIST
--	---	--



Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs. / M
OPD/IPD : OPD	Reg. No. : 391391
Referred by : Dr.	Bill No. : 34586
Collected : 28/01/2019 11:28AM	Lab Ref No. : 1755005
Received : 28/01/2019 11:32AM	Specimen : BLOOD
Reported : 28/01/2019 12:09PM	Man. Lab No. : 828

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
SEGMENTED NEUTROPHILS <small>(Cytochemical staining / Light Microscopy)</small>	4.25		1.9 - 8	thousand/ μ l
LYMPHOCYTES <small>(Cytochemical staining / Light Microscopy)</small>	1.15		.9 - 5.2	thousand/ μ l
MONOCYTES <small>(Cytochemical staining / Light Microscopy)</small>	0.27		0.16 - 1	thousand/ μ l
EOSINOPHILS <small>(Cytochemical staining / Light Microscopy)</small>	0.04		0 - 0.8	thousand/ μ l
BASOPHILS <small>(Cytochemical staining / Light Microscopy)</small>	0		0 - 0.2	thousand/ μ l
#ATYPICAL LYMPHOCYTES <small>(Cytochemical staining / Light Microscopy)</small>	0.06		0.0 - 2.8	thousand/ μ l
#LARGE IMMATURE CELLS <small>(Cytochemical staining / Light Microscopy)</small>	0.03		0.0 - 9.0	thousand/ μ l

End Of Report

TESTS ARE CONDUCTED ON EDTA WHOLE BLOOD VIA 7 PART AUTOMATED HEMATOLOGY ANALYZER PENTRA DX.

#FOR RESEARCH PURPOSE ONLY

IF THERE IS ANY PRINTING ERROR KINDLY NOTIFY PATH LAB IMMEDIATELY

Dr. SEENA GUPTA Nehru Nagar, 3rd M. Nehru Nagar, Ghaziabad 201 301 (I.P.) MD, CONSULTANT	Dr. TANISH MANDAL Kaushambi, P-1, Kaushambi, Near Dabur Chowk, Ghaziabad 201 418002 MD CONSULTANT PATHOLOGIST	Dr. SHUCHI GHAI Kaushambi, P-1, Kaushambi, Near Dabur Chowk, Ghaziabad 201 418002 MD, CONSULTANT PATHOLOGIST
---	--	---

Patient Name : Mr. SUDHIR KUMAR Age / Sex : 62 Yrs. / M
 OPD/IPD : OPD Reg. No. : 391391
 Referred by : Dr. Bill No : 34588
 Collected : 28/01/2019 11:28AM Lab Ref No. : 1755005
 Received : 28/01/2019 11:32AM Specimen : BLOOD
 Reported : 28/01/2019 12:20PM Man. Lab No. : 828

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
LIVER FUNCTION TEST				
SGOT Serum <i>(Modified IFCC)</i>	20		0 - 46	IU/L
SGPT, Serum <i>(Modified IFCC)</i>	16		0 - 49	IU/L
ALKALINE PHOSPHATASE, Serum <i>(Modified IFCC)</i>	70		53 - 141	IU/L
TOTAL PROTIEN, Serum <i>(BIURET Method)</i>		6.6 (L)	6.7 - 8.7	g/dl
ALBUMIN, Serum <i>(BCG Method)</i>	4.4		3.5 - 5.0	g/dl
GLOBULIN, Serum <i>(BCG Method)</i>	2.2		2.0 - 3.5	g/dl
GAMA-GT, Serum	20		7 - 34	IU/L
BILIRUBIN TOTAL DIRECT, SERUM				
TOTAL <i>(DCA With ATCS)</i>		1.4 (H)	0.2 - 1.0	mg/dl
DIRECT <i>(DCA With ATCS)</i>		0.6 (H)	0 < 0.5	mg/dl
INDIRECT <i>(DCA With ATCS)</i>		0.8 (H)	0.2 - 0.5	mg/dl
KIDNEY FUNCTION TEST				
BLOOD GLUCOSE, Serum <i>(GOD-PAP)</i>	100		70 - 140	mg/dl
BLOOD UREA, Serum <i>(Urease GLDH Kinetic)</i>	18		10 - 50	mg/dl
CREATININE, Serum <i>(Modified JAFFE)</i>		0.61 (L)	0.72 - 1.25	mg/dl
URIC ACID, Serum <i>(Enzymatic)</i>	4.6		3.0 - 7.0	mg/dl
TOTAL PROTIEN, Serum <i>(BIURET Method)</i>		6.6 (L)	6.7 - 8.7	g/dl
ALBUMIN, Serum <i>(BCG Method)</i>	4.4		3.5 - 5.0	g/dl
GLOBULIN, Serum <i>(BCG)</i>	2.2		2.0 - 3.5	g/dl

(Signature)

Dr. SEEMA GUPTA Nehru Nagar, Ind M, Nehru Nagar, Ghaziabad-201 001 (U.P.) MD, CONSULTANT Fax: 0120-2752168	Dr. TANISH MANDAL Kaushambi - H-1, Kaushambi, Near Dabur Chowk, Ghaziabad MD, CONSULTANT PATHOLOGIST 418950	Dr. SHUCHI GHAI Kaushambi - H-1, Kaushambi, Near Dabur Chowk, Ghaziabad MD, CONSULTANT PATHOLOGIST
---	--	--

Patient Name : Mr. SUDHIR KUMAR Age / Sex : 62 Yrs. / M
 OPD/IPD : OPD Reg. No. : 391391
 Referred by : Dr. Bill No : 34588
 Collected : 28/01/2019 11:28AM Lab Ref No. : 1755005
 Received : 28/01/2019 11:32AM Specimen : BLOOD
 Reported : 28/01/2019 12:20PM Man.Lab No. : 828

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
SODIUM Serum (ISE)	137		135 - 145	mmol/l.
POTASSIUM Serum (ISE)	4.1		3.5 - 5.2	mmol/l.
CALCIUM Serum (Arsenase)	8.4		8.0 - 10.5	mg/dl
PHOSPHOROUS		2.3 (L)	2.5 - 4.5	mg/dl
CHOLESTEROL Serum (CHOD-PAP With ATCS)	199		130 - 200	mg/dl
CHLORIDE Serum (ISE Direct)	111		96.0 - 115	mmol/l.

End Of Report



Dr. SEEMA GUPTA
Nehru Nagar - Bld M, Nehru Nagar, Ghaziabad - 201 001 (U.P.)
Tel: 0120-2751168 MD, CONSULTANT

Dr. TANISH MANDAL
Kaushambi - H-1, Kaushambi, Near Dabur Chowk, Ghaziabad
Tel: 0120-2751168 MD CONSULTANT PATHOLOGIST

Dr. SHUCHI GHAI
Kaushambi - H-1, Kaushambi, Near Dabur Chowk, Ghaziabad
Tel: 0120-2751168 MD, CONSULTANT PATHOLOGIST



INVESTIGATION REPORT

Page 1 of 7

Patient Name : Mr. SUDHIR KUMAR
OPD/IPD : OPD
Referred by : Dr.
Sample Date : 28/01/2019 11:28AM
S. Received in Lab : 28/01/2019 11:32AM
Result Date : 28/01/2019 03:17PM

Age / Sex : 62 Yrs. / M
Reg. No. : 391391
Bill No. : 34588
Lab Ref No. : 1755005
Specimen : BLOOD
Man.Lab No. : 828

BIOCHEMISTRY

Lipid Profile

INVESTIGATION NAME	RESULTS	Biological Reference Interval
CHOLESTEROL (CHO-PAP With ATCS Method)	200.0	
Suggested risk for CAD		
Levels (mg/dl)		Interpretation
<200		Desirable
200-240		Borderline risk
>240		high risk

Comments:

Determination of cholesterol is one of the important tools in the diagnosis and classification of hyperlipidemia. Elevated levels are seen with
 -Hypercholesterolemia Type I & IV
 -Hyperlipoproteinemia
 -Hypothyroidism
 -Poorly controlled Diabetes mellitus
 -Alcoholism
 -Biliary cirrhosis

INVESTIGATION NAME	RESULTS	Biological Reference Interval
TRIGLYCERIDES (GPO-PAP Method)	80.0	
Suggested risk for CAD		
Levels (mg/dl)		Interpretation
<160		Normal
160-199		Borderline risk
200-499		High
>500		Very high

Comments:

Elevated levels can be seen with
 -Overnight fasting less than 12 hrs.
 -Non insulin dependent Diabetes mellitus
 -Hepatitis

Technologist **Dr. SEEMA GUPTA** **Dr. TANISH MANDAL** **Dr. SHUCHI GHAI**
 MD MD MD
 CONSULTANT PATHOLOGIST CONSULTANT PATHOLOGIST CONSULTANT PATHOLOGIST



MC-3022

Encoded By: SARVESH SHUKLA

Page 1 of 7



INVESTIGATION REPORT

Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs. / M
OPD/IPD : OPD	Reg. No. : 391391
Referred by : Dr.	Bill No. : 34588
Sample Date : 28/01/2019 11:28AM	Lab Ref No. : 1755005
S. Received in Lab : 28/01/2019 11:32AM	Specimen : BLOOD
Result Date : 28/01/2019 03:17PM	Man.Lab No. : 828

BIOCHEMISTRY

- Hepatitis
- Intrahepatic biliary obstruction
- Cirrhosis
- Obesity
- Alcohol intake
- Pancreatitis (level > 500mg/dl)
- Drug use
 - Thiazide
 - Cholestyramine
 - Corticosteroids

INVESTIGATION NAME	RESULTS	Biological Reference Interval
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*HDL-CHOL (Immuno-inhibition Method)	60.0	(35-60 mg/dl)
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Comments:

- This test is used to assess risk for CAD and in diagnosis of various lipo proteinemia
- For every 1mg/dl decrease in HDL risk for CAD increase by 2-3%.
- Decrease levels are seen in
 - Diabetes mellitus
 - Obesity
 - Stress
 - Starvation
 - Smoking
 - Hypothyroidism
 - Drug use (anabolic steroids, B blockers, thiazide)

INVESTIGATION NAME	RESULTS	Biological Reference Interval
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*VLDL	16.0	(< 40 mg/dl)
*LDL Cholesterol	100.0	(< 130 mg/dl)

Suggested risk for CAD
levels <130

Interpretation
Desirable

Technologist	Dr. SEEMA GUPTA MD CONSULTANT PATHOLOGIST	Dr. TANISH MANDAL MD CONSULTANT PATHOLOGIST	Dr. SHUCHI GHAI MD CONSULTANT PATHOLOGIST
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MC-3022



INVESTIGATION REPORT Page 4 of 7

Patient Name : Mr. SUDHIR KUMAR Age / Sex : 62 Yrs. / M
 OPD/IPD : OPD Reg. No. : 391391
 Referred by : Dr. Bill No. : 34588
 Sample Date : 28/01/2019 11:28AM Lab Ref No. : 1755005
 S. Received in Lab : 28/01/2019 11:32AM Specimen : BLOOD
 Result Date : 28/01/2019 12:57PM Man.Lab.No. : 828

IMMUNOLOGY

THYROID PROFILE

T3 TOTAL

Specimen : SERUM
 Method : CHIRK

Investigation Name	Result	Units	Biological Ref. Interval
T3, TOTAL (Serum)	6.72	ng/ml	0.60 - 1.81

Clinical Use
 * Diagnose and monitor treatment of Hyperthyroidism

Increased Use

- * Pregnancy
- * Graves Disease
- * T3 thyrotoxicosis
- * Hyperthyroidism, TSH dependent
- * Increased TBG

Decreased Levels

- * Nephrotic illness
- * Hypothyroidism (1/3 cases)
- * Nutritional deficiency
- * Systemic illness
- * Decreased TBG

T4 TOTAL

Technologist : Dr. SEEMA GUPTA MD
 CONSULTANT PATHOLOGIST
 Dr. TANISH MANDAL MD
 CONSULTANT PATHOLOGIST
 Dr. SHUCHI GHAI MD
 CONSULTANT PATHOLOGIST



Headed By: HEERAMT SHARMA



INVESTIGATION REPORT

Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs. / M
OPD/IPD : OPD	Reg. No. : 391391
Referred by : Dr.	Bill No. : 34588
Sample Date : 28/01/2019 11:28AM	Lab Ref No. : 1755005
S. Received in Lab : 28/01/2019 11:32AM	Specimen : BLOOD
Result Date : 28/01/2019 12:57PM	Man.Lab No. : 828

IMMUNOLOGY

T4 TOTAL

Specimen : SERUM
Method : CMIA

Investigation Name	Result	Units	Biological Ref. Interval
T4 TOTAL (Serum)	104.28	nmole/L	58.1 - 140.6

Clinical Use:

* Diagnose Hypothyroidism and Hyperthyroidism when overt and / or due to pituitary or hypothalamic disease.

Increased levels:

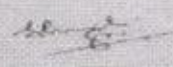
- * Hyperthyroidism
- * Increased TBG
- * Familial dysalbuminemic hyperthyroxinemia
- * Estrogen therapy
- * Pregnancy

Decreased levels:

- * Primary hypothyroidism
- * Pituitary TSH deficiency
- * Hypothalamic TRH deficiency

Technologist **Dr. SEEMA GUPTA**
MD
CONSULTANT PATHOLOGIST

Dr. TANISH MANDAL
MD
CONSULTANT PATHOLOGIST


Dr. SHUCHI GHAI
MD
CONSULTANT PATHOLOGIST



MC-3022

Encoded By: HEMANT SHARMA



INVESTIGATION REPORT

Page 6 of 7

YHRC/HRM/05/V1

Patient Name : Mr. SUDHIR KUMAR	Age / Sex : 62 Yrs./ M
OPD/IPD : OPD	Reg. No. : 391391
Referred by : Dr.	Bill No. : 34588
Sample Date : 28/01/2019 11:28AM	Lab Ref No. : 1755005
5. Received in Lab : 28/01/2019 11:32AM	Specimen : BLOOD
Result Date : 28/01/2019 12:57PM	Man.Lab No. : 828

IMMUNOLOGY

TSH

Specimen : SERUM
Method : CMIA

Investigation Name	Result	Units	Biological Ref. Interval
ULTRASENSITIVE h TSH (Serum)	0.12	uIU/mL	

CHILDREN	
PRE MATURE-28-36 WEEKS:	0.7 - 27
BIRTH-4 DAYS	: 1.0 - 39
5 DAYS 20 WEEKS	: 1.7 - 9.1
21 WEEKS - 20 YEARS	: 0.7 - 6.4
ADULTS	: 0.35 - 4.94
PREGNANCY	
Ist Trimester	: 0.1 - 2.5
IIInd Trimester	: 0.2 - 3.0
IIIrd Trimester	: 0.3 - 3.0

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11p.m to 6.a.m. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates + - 50 % hence time of the day has influence on the measured serum TSH concentrations.

CHANGES IN ULTRASENSITIVE h TSH SECRETION:

- * Glucocorticoids, severe non-thyroid illness, Dopaminergics, may lead to reduced TSH.
 - * Metoclopramide, noradrenaline, antidopaminergics, antidepressants, may lead to increased TSH.
 - * Depression : In certain major depressions, Low TSH associated with normal T3 and T4 Level is sometimes observed in the absence of endocrinopathy .
 - * Patient not receiving treatment.
- Results are to be correlated with clinical findings of the patients.

Technologist **Dr. SEEMA GUPTA**

MD
CONSULTANT PATHOLOGIST

Technologist **Dr. TANISH MANDAL**

MD
CONSULTANT PATHOLOGIST

Technologist **Dr. SHUCHI GHAI**

MD
CONSULTANT PATHOLOGIST



MC-3022

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Page 6 of 7



NABL ACCREDITED: M-02

YASHODA

HOSPITAL & RESEARCH CENTRE

INVESTIGATION REPORT

Patient Name : Mr. SUDHIR KUMAR Age / Sex : 62 Yrs Male / M
 OPD / ID : OPD Reg. No. :
 Referred by : Dr. DINESH ABORA Bill No. : 35122
 Collected : 26/01/2018 10:35AM Lab Ref No. : 1533394
 Received : 20/01/2018 10:41AM Specimen : BLOOD
 Reported : 20/01/2018 11:48AM Man. Lab No. : 832

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
COMP HAEMOGRAM (CBC)				
HAEMOGLOBIN	14.35		13.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT (TLC)	6.0		4.0 - 10.0	thousand/ μ L
PLATELET COUNT	258		150 - 410	thousand/ μ L
MPV	9		7.2 - 11.1	fL
HEMATOCRIT (HCT)	43.6		37 - 54	%
RBC COUNT	4.38		4.2 - 6.5	million/ μ L
MCV	95		85 - 101	fL
MCH	31.34		27.0 - 32	pg
MCHC	32.93		31.5 - 34.5	g/dL
RED DISTRIBUTION WIDTH (RDW)	13.9		11.5 - 14.5	%
DIFFERENTIAL LEUCOCYTE COUNT				
SEGMENTED NEUTROPHILS	68.7		40 - 75	%
LYMPHOCYTES	29.4		20 - 40	%
EOSINOPHILS	1.5		1 - 6	%
MONOCYTES	8.3		2 - 10	%
PLASMAPHILS	0.1		0 - 1	%
ATYPICAL LYMPHOCYTES	1.3		0.5 - 2.6	%
PLASMA IMMATURE CELLS			0.2 - 1.4	%
ABSOLUTE COUNT				
		1.9	(H)	

Dr. DEEPA GUPTA
 MD CONSULTANT
 9/18, 1st FLOOR, YASHODA HOSPITAL, KINVALE, KOLKATA-700013
 Tel: 033-25555555 | Fax: 033-25555555 | Email: info@yashoda.com

Dr. SRIVANI FINWARE
 DC CONSULTANT PATHOLOGIST
 9/18, 1st FLOOR, YASHODA HOSPITAL, KINVALE, KOLKATA-700013
 Tel: 033-25555555 | Fax: 033-25555555 | Email: info@yashoda.com

Dr. MEENU CHOPRA
 MD CONSULTANT PATHOLOGIST
 9/18, 1st FLOOR, YASHODA HOSPITAL, KINVALE, KOLKATA-700013
 Tel: 033-25555555 | Fax: 033-25555555 | Email: info@yashoda.com



Patient Name : Mr. SUDHIR KUMAR Age / Sex : 62 Yrs Male / M
 OPD / IPD : OPD Reg. No. :
 Referred by : Dr. DINESH ARORA Bill No : 35122
 Collected : 20/01/2018 10:25AM Lab Ref No. : 1533394
 Received : 20/01/2018 10:41AM Specimen : BLOOD
 Reported : 20/01/2018 11:48AM Man. Lab No. : 832

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
SEGMENTED NEUTROPHILS (Electromechanical staining / Light Microscopy)	3.51		1.9 - 8	thousand/ μ l
LYMPHOCYTES (Electromechanical staining / Light Microscopy)	1.75		.9 - 5.2	thousand/ μ l
MONOCYTES (Electromechanical staining / Light Microscopy)	0.49		0.15 - 1	thousand/ μ l
EOSINOPHILS (Electromechanical staining / Light Microscopy)	0.09		0 - 0.8	thousand/ μ l
PLATELETS (Electromechanical staining / Light Microscopy)	0.01		0 - 0.2	thousand/ μ l
PLATELET COUNT (Electromechanical staining / Light Microscopy)	0.06		0.0 - 2.8	thousand/ μ l
PLATELET MPV (Electromechanical staining / Light Microscopy)	0.11		0.0 - 9.0	thousand/ μ l

End of Report

TESTS ARE CONDUCTED ON EDI-MIXED BLOOD VIA A PART AUTOMATED-HEMATOLOGY ANALYZER HITECH LX FOR RESEARCH PURPOSE ONLY

Dr. VIKAS GUPTA
 MD. CONSULTANT
 HEMATOLOGY & PATHOLOGY

Dr. SHEKANT THAKUR
 MD. CONSULTANT
 PATHOLOGY

Dr. MEENU CHOPRA
 MD. CONSULTANT
 PATHOLOGY



NABL ACCREDITED: H-02

Patient Name : Mr. SIDHANT KUMAR
Age / Sex : 62 Yrs Male / M
Reg. No. :
OPD / IPD : OPD
Bill No. : 35122
Referred by : Dr. DINESH ARORA
Lab Ref No. : 1333394
Collected : 20/01/2018 10:25AM
Specimen : BLOOD
Received : 20/01/2018 10:43AM
Man. Lab No. : 832
Reported : 20/01/2018 11:52AM
Test Name : With In Range Out Of Range Biological Reference Range Unit

LIVER FUNCTION TEST

SGOT Serum (Aspartate Aminotransferase)	29	0 - 46	IU/L
SGPT Serum (Alanine Aminotransferase)	10	0 - 49	IU/L
ALP Serum (Alkaline Phosphatase)	80	53 - 141	IU/L
TOTAL BILIRUBIN Serum (Total Bilirubin)	6.9	0.2 - 1.2	mg/dl
ALBUMIN Serum (Albumin)	3.9	3.5 - 5.0	g/dl
GAMMA-GT Serum (Gamma-Glutamyl Transaminase)	3	2.0 - 3.5	U/L
		7 - 34	IU/L

BILIRUBIN TOTAL DIRECT, SERUM

TOTAL	6.9	0.2 - 1.0	mg/dl
DIRECT	0.3	0 - 0.5	mg/dl
INDIRECT	0.8	0.2 - 0.5	mg/dl

KIDNEY FUNCTION TEST

BLOOD GLUCOSE Serum (Fasting)	99	70 - 140	mg/dl
BLOOD UREA Nitrogen Serum (BUN)	14	10 - 50	mg/dl
CREATININE Serum (Serum Creatinine)	0.61	0.5 - 1.5	mg/dl
URIC ACID Serum (Uric Acid)	5.3	3.0 - 7.0	mg/dl
TOTAL PROTEIN Serum (Total Protein)	6.9	6.7 - 8.7	g/dl
ALBUMIN Serum (Albumin)	3.9	3.5 - 5.0	g/dl

DR. SEENA GUPTA
MD. CONSULTANT

DR. SHIVANI TIWARI
DC/CONSULTANT PATHOLOGIST

DR. MEENU CHOPRA
MD. CONSULTANT PATHOLOGIST



NABL ACCREDITED No. 02

Patient Name : Mr. SUDHIR KUMAR
 Age / Sex : 62 Yrs Male / M
 OPD / IPD : OPD
 Referred by : Dr. DINESH ARORA
 Reg. No. :
 Collected : 20/01/2018 10:25AM
 Bill No. : 35122
 Received : 20/01/2018 10:41AM
 Lab Ref No. : 1533394
 Specimen : BLOOD
 Reported : 20/01/2018 11:52AM
 Man. Lab No. : 832

Test Name	With In Range	Out Of Range	Biological Reference Range	Unit
GLUCOSE IN Serum	3		2.0 - 3.3	g/dl
PKC				
SODIUM Serum	137		135 - 145	mmol/L
PKC				
POTASSIUM Serum	3.7		2.5 - 3.2	mmol/L
PKC				
CALCIUM Serum	9.3		8.0 - 10.5	mg/dl
(Ionized)				
PHOSPHORUS	2.8		2.5 - 4.5	mg/dl
CHOLESTEROL Serum	190		130 - 200	mg/dl
(WHD - HDL - LDL)				
CHLORIDE Serum	103		98.0 - 115	mmol/L
(IM - DM)				

End Of Report

Dr. SEENA GUPTA
 MD CONSULTANT
 Dr. SHIVANI TIWARI
 DC CONSULTANT PATHOLOGIST
 Dr. NEENU CHOPRA
 MD CONSULTANT PATHOLOGIST
 Dr. RAJESH SHUKLA
 DC CONSULTANT PATHOLOGIST
 Dr. RAJESH SHUKLA
 DC CONSULTANT PATHOLOGIST
 Dr. RAJESH SHUKLA
 DC CONSULTANT PATHOLOGIST

Yashoda Hospital & Research Center
 Plot No. 10, Sector 10, Gurgaon, Haryana
 Ph: 0122-4433333 Fax: 0122-7700000
 Website: www.yashodahospital.org

3:45 AM
3:55 AM
4:05 AM
4:15 AM

Name: Mr. SUDHIR KUMAR
Lab No: 281168755 Age: 44 Years Gender: Male
Ac Status: P Ref By: Dr SANJAY SHARMA
Collected: 15/02/20 12:53:06PM
Received: 15/02/20 1:00:30PM
Reported: 15/02/20 5:59:53PM
Report Status: Final

Test Name: TSH, ULTRASENSITIVE, SERUM (Chemiluminometric Immunoassay)
Results: 0.096
Units: uIU/mL
Bio. Ref. Interval: 0.550 - 4.780

Note

- TSH levels are subject to circadian variation, resulting peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 30%, hence time of the day has influence on the measured serum TSH concentrations.
- Values <0.03 uIU/mL need to be critically 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

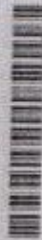
Hyperthyroidism, Thyroid hormone resistance

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

[Signature]

Dr. Sandeep
MD, Pathology
Chief of Laboratory
Dr. Lal PathLabs Ltd

End of report



LABORATORY INVESTIGATION REPORT

Patient Name	Mr. Sudhir Kumar	Bill Date	25/08/2019 9:11AM
Age/Gender	62 Yrs 6 Mths 26 Days/Male	Sample Date	25/08/2019 9:19AM
Reg No.	377498	Ack. Date	25/08/2019 10:25AM
Bed No / Ward	OPD	Finalize Date	25/08/2019 12:30PM
Doctor		Lab No.	797895

Test	Value	IMMUNOLOGY Unit	Reference Range
TSH			
TSH serum	0.2447	uIU/ml	
		Age	uIU/ml
		New born screen	<20
		21 wk - 20 yrs	0.7 - 6.4
		21 - 54 yrs	0.4 - 4.2
		55 - 87 rs	0.5 - 8.9

METHOD : CMIA

CHANGES IN TSH SECRETION

- *Glucocorticoids, severe non-thyroid illness, Dopaminergics may lead to reduced TSH
- *Metoclopramide, noradrenaline, antidopaminergics, antidepressants may lead to Increased TSH
- *Depression : In certain major depressions, Low TSH associated with normal T3 and T4 Levels is sometimes observed in the absence of endocrinopathy
- *Patient not receiving treatment

Results are to be correlated with clinical findings of the patients.

-----End of Report-----

Nalini Singh

Dr. NALINI SINGH
Consultant-Pathologist Reg No. DMG-52374
M.D. PATHOLOGY

* This Report is not for Medico Legal Purpose

Diagnosis :

Investigations Advised:

ECG now NSR, Severe Biventricular

T₃, T₄ TSH
LFT / KFT] WNL

Holter test after 10 days of no prazosin / amblyopia in view of prolonged use of CORDARONE
Reducing Nibi level Ophthalmology evaluation

Treatment Advised:

- ① Reduce TMS NEMOCARD 2.5 mg once daily] (M)
 - ② TMS TAZLOC 40 mg once daily] (E)
 - ③ TMS S-NUMNULO 5 mg once daily] (E)
 - ④ TAB ΔATOLGATRAN 150 mg Twice a day.
 - ⑤ TMS CORDARONE 100 mg OD
- all regularly

Follow Up:

Review with reports / Review annually or 10d


Dr. (Col.) Sunil Sofat
Director

Date & Time: 22/6/2021

Consultant Sign
Electrophysiology & Pacing
Jaypee Hospital, Sec-128, Noida

9971711744

APD1 0011202381
MR SUDHIR KUMAR
Age 66 Year(s) Year(s) Male
6 Mar 2021 1:59:49 PM

Dr. Vipul N' Roy

M.D., M.R.C.P (U.K.)
Senior Consultant
Interventional Cardiology
Apollo Cardiac Centre



Dr. Arif Wahab

M.D., (Med) D.M (Cardiology)
Consultant Interventional Cardiology
Apollo Hospital Cardiac Centre, New Delhi-76
drarifwahab@gmail.com

Date..... Patient..... Age..... Reg. No.....

Δ HTF

Atrial fibrillation

06/03/21

giddiness mainly
postural

LA 5-6 cm.
Hofler phase < 2 sec.

On Nelsicard, Tazlor, Dabigatran, Amlod, S Nuunlo

B L D

Rx

Dabigatran (Dabigatran) 110g BD

Metoprolol (~~Setoken~~ Betaloc) 25g BD

Telmis 40g OD

Cordarone 100g OD

S Nuunlo 5g OD



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P-1 P-2 P-3

Name	MR. SUDHIR KUMAR		Age/Sex	64.4 YRS/MALE
UHID.	159316	Pt Mobile NO	07897460460	
Issue Date	08-Sep-2020 11:38		Doctor's Name	Dr. SANJAY KR. SHARMA
Doctor's Dept	CARDIOLOGY	Doctor's Timing	9am to 11am & 5pm to 6pm (Mon to Sat)	
Height :	(cm)	Weight : 52 (kg)	Temp :	Pulse: 60/min
Pain Score(0-10):	0/10	Allergies If Any :	N/A	Bmi: BP: 110/60 (mmHg)

SpO₂: 99.1

(SpO₂ - 99.0)
 HR - 64 bpm

→ INT - Trach
 → HR⁺ → HR⁺
 → Dilated LA
 → AF

OT Rx

→ RP - 120 of Somogy
 → Chem: - Bilum (+)
 → Cr: - S - 5.0
 → P. oedema.
 → JVP.
 → Rales

LID

2 tabs - Nebicard - 2.5mg (R)
 tabs - TAZLOC - 40mg (R)
 tabs - S. Numlo - 5mg (R)
 tabs - Dabigatran 150mg (R)
 tabs - Losartame - 100mg (R)

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P-1 P-2 P-3

Name	MR. SUDHIR KUMAR	Age/Sex	64.1 YRS/MALE
UHID.	159316	Pt Mobile NO	07897460460
Issue Date	23-Jun-2020 10:10	Doctor's Name	Dr. SANJAY KR. SHARMA
Doctor's Dept	CARDIOLOGY	Doctor's Timing	9am to 11am & 5pm to 6pm (Mon to Sat)
Height : _____ (cm) Weight : 83 (kg) Temp : 98.77 Pulse : 94/Min		Pain Score(0-10): 0/10 Allergies If Any : Nil Bmi: _____ BP: 130/90 (mmHg)	

SpO₂ 97.1

→ HHT⁺ → HHT⁺

→ Diastolic LA

→ INT - Psed

→ AF

et/Rw

→ RL - 130/90 mmHg

2

Pa. Nebicard - 2.5 (3RD)

Pa. TAZLOC - 40 (3RD)

→ Cholesterol - 180 (4)

Pa. S. Nalmelo 5 (3RD)

→ Cholesterol - 5 - 30

Pa. Dabigatran 150 (3RD)

→ Proedemo

Holter Study

→ Int'l Patient

Note : Marked Parameters are NABL Accredited

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email : info@neohospital.com, w-site : www.neohospital.com



P-1 P-2 P-3

Name : Mr. SUDHIR KUMAR	Age/Sex : 63.7 YRS / Male
UHID : 159316	Contact No. : 7897460460
Date : 27-Feb-2021 11:23 AM	Doctor's Name : Dr. SANJAY KR. SHARMA
Doctor Dept : CARDIOLOGY	Doctor's Timing : 9am to 11am & 5pm to 6pm (Mon to Sat)
Height: _____ (cm) Weight: _____ (kg) Temp: _____ Pulse: _____	
Pain Score(0-10): _____ Allergies If Any: _____ BMI: _____ BP: _____ (mmHG)	

SpO₂ - 97%
HR - 72 bpm

→ 1hr - Ased

→ HRT^f → HRT^f

Dilated - LA

→ AF.

→ During Echo.

→ Significant

sin Pause | → Actv: - PPI

at 1hr

→ BP - 110/80 mmHg

→ Chew: - Bism (P)

→ Dns: - 2-3 @

→ P. oedema P

→ Jwri Patter

2

Ps - Nebicard - 2.5mg QD

Ps - TAZLOC - 40mg d

Ps - Dabigatran 150mg QD

Ps - Cardasme - 100mg d

Ps - PATRIL - MD - 0.25mg 1hr

A: - TRAIT

HO

HO

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P-1 P-2 P-3

Name	MR. SUDHIR KUMAR	Age/Sex	64 YRS/MALE
UHID.	159316	Pt Mobile NO	07897460460
Issue Date	02-May-2020 11:05	Doctor's Name	Dr. SANJAY K. SHARMA
Doctor's Dept	CARDIOLOGY	Doctor's Timing	9am to 11am & 5pm to 6pm (Mon to Sat)
Height :	_____ (cm)	Weight :	_____ (kg)
Pain Score(0-10):	_____	Allergies If Any :	_____
		Temp :	_____
		Pulse :	_____
		Brai :	_____
		BP :	_____ (mmHg)

(SpO2 - 98%)
HR - 74 BPM

→ LTN → HHD

Dilated LA

- Int - used

- Recurr - AF

ET

→ PR - 12 of 80P

2

PR - Nebicard - 2.5mg PR

PR - TAZLOC - 40 mg

PR - S-Nunlo - 5mg mg

+ PR - Kardamul

200 PR mg - 100mg

PR - Dabigatran - 100 PR mg

+ PR - PATRIL - 100 - 0.25 PR mg

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- * Psychiatry & De-addiction
- * Paediatrics & Neonatology
- * ENT (Ear, Nose, Throat)
- * Cardiology & Cardiothoracic Surgery
- * Pulmonary & Critical Care Sleep Medicine
- * Trauma Center
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- * Plastic Surgery (Burns, Cosmetic & Reconstructive Surgery)
- * Advanced Physiotherapy
- * Advanced Pain Clinic
- * Aesthetic Dermatology & Hair Transplant Surgery
- * Gastroenterology & Hepatology
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- * Vascular Surgery
- * Endocrinology
- * Haematology
- * Medical Nutrition Therapy
- * Diagnostics
- * CT Scan with 128 Slice
- * Digital X-Ray and OPG, CEPH & TMJ
- * Ultrasound
- * Echo
- * TMT
- * BMD
- * Mammography
- * Path Lab.

Consultant Dr. Sajay Krishna Speciality Cardiology
 Patient's Name: Mr. Snehil Kumar Patient's ID : 46541
 Age : 64y/m Date and Time : 23/08/19
 Sex : Male Ref

(SpO2 - 98%)
HR - 68b/m)

→ HTN⁺ - 4HD

→ IMT - 1.5cm
Minor Plaque
Pr. C. B. B.

→ Giddiness → vertigo
off & on ? Cr. Sp. B. B.

(Position / Standing)
BP → 6/110 - 120/80
6/110 - 130/80

OP 2
→ BP - 120/80 mmHg

PS - TAZLOC - TR10
40 mg

PS - Nebicard - 5mg
5/25 mg

Cholesterol - RL mm ⊕

→ AS - 2 - 3 (D)

Cap - Ecogmin - 25 mg

ab. oedema

200 / 100



NMC/0022



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- Ultrasound
- Echo
- TMT
- BMD
- Mammography
- Path Lab.

Consultant Dr. Sanjay K. Sharma Speciality Cardiology
 Patient's Name: Mr. Sudhis Kumar Patient's ID : 46541
 Age : _____ Date and Time : _____
 Sex : 64/M Ref : 15/06/19

(SpO₂ - 99%
HR - 60 B/min)

→ HTN⁺ - hnd.
→ JMT - local

of 2m ✓
→ Bp. 120/80 mmHg.
→ Cherr:- R/L m (+)
→ Cr:- S₁-S₂ @
→ p oedema

2
• - Feb. Tazloc-TRIO 40 d
+ As- Nebicard. 50m 5/25 d
+ Cap. Ecosprin - Ar. 75/100 d

→ Tr^o | Paltro

Use: Abdomen | PVR.
Urine for MAU
fr. PSA level

W/D
→ Feb. Urinax-D d





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- Haematology
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- Diagnostics
- CT Scan with 128 Slice
- Digital X-Ray and OPG, CEPH & TMJ
- Ultrasound
- Echo
- TMT
- BMD
- Mammography
- Path Lab.

Consultant D. Sanyal Speciality Cardiology
 Patient's Name: Mr. Sushil Kumar Patient's ID : 46541
 Age : 64 yrs Date and Time : 11/02/19
 Sex : M Ref :

(SpO2 - 99%)
HR - 62 BPM)

+ Insulin
 + IMT - Isosorbide

OTR

2. As. Tazloc - TR10

+ BB - 20/20

490sp/2.5

+ Chantix - 8/8 hrs

5Am

+ Statin

+ As. Nebivolol - 5m

5/2.5

+ Procedural

As. Dir

+ Cap - Enoxaparin - av

75/10

+ Insulin / Pallone

MD





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- Medical & Surgical Oncology
- Rheumatology & Immunology
- Vascular Surgery
- Endocrinology
- Haematology
- Medical Nutrition Therapy
- Diagnostics
- CT Scan with 128 Slice
- Digital X-Ray and OPG, CEPH & TMJ
- Ultrasound
- Echo
- TMT
- BMD
- Mammography
- Path Lab

Consultant Dr. Sanyal Anand Speciality Cardiology
 Patient's Name: Mr. Sudhir Kumar Patient's ID : 46541
 Age : 64 yrs / m Date and Time : 07/02/19
 Sex : m Ref :

(SpO2 - 99%)
HR - 60 BPM)

- + HbA1c
IMT - 1.2

of R

2

+ R₂ = 150/110 mmg
 + Anem: - R/L M₂ ⊕
 + C_{us} :- S₂ ⊕
 + P_oedema: 1cm²
Patent

- Feb TAZLOC - TRIO
4 of 12 5 d
8 Am
 + P₂ - Nebicard - 5m
12.5 cr
 + Cap - Ecospirin - 75
75/100
75/100

ENT check.

MD





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- Reproductive Medicine
- Respiratory Medicine
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- Specialized Dermatology & Transplant Surgery
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- Specialized T
- Specialized D
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Consultant Dr. Sanjay K. Sharma

Speciality Cardiology

Patient's Name : Mr. Sudhir Kumar

Patient's ID :

Age : 61 yrs / 01

Date and Time : 02/07/15

Sex : M

Doctor's Name :

Belli

+ NTRT
+ B12
+ D3 } Def

of Ren.

+ RP - 14 of 90 mg.

+ Chrt: - Rucl

+ Cus: - 5 - 10

2
- Ps. CTD - T 40 mg

8Am

- Ps. Stomlo - 5mg qd
- Cap. Rosuvastatin - 10mg

As: Stress Echo

+ Ps. NVM - m 12 05 00

+ Ps. Upriase - D3 60k

Oil x 7 days
Then - Once
m wk x 10 weeks



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Your Partner In Health Care

Consultant Dr. Sanjay K. Shasna

Specialty Cardiology

Patient's Name : Mr. Endhir Kumar

IGID :

Age : 61 yrs ♂

Date and Time : 02/07/15

Sex : m.

Doctor's Name :

→ DM T Tosed
→ LFT, BB-gr-1

→ Hb⁺ x 15455

→ Dm^o

→ Smoking^o

→ Hb^o ← Hb^o
Dm^o
Hm^o

of Bk

→ Adv → CRe with ESR
→ Bl. Sugar ← F

→ BP: 150/90 mmHg

→ Chest: - Bilcl

→ Cvs: - 8-5 ①

→ Lipid Profile (F)

→ Urice.

→ Sr. Creatine

→ Uric Acid

→ TSH

→ Scottsept

→ Urine Rm

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