शौचालय का करें प्रयोग, मिटे गंदगी भागे रोग छोटा परिवार, सुख का आधार लड़का लड़की एक समान तभी बनेगा देश महान



संयुक्त जिला चिकित्सालय



	•	कासगंज (उ०प्र०)	(Ud	क रूपया केवल)
ओ.पी.डी. टिकट	क्रम की 12029	दिनांक	······································	
रोगी का नाम	TE0020	दिनांक माता/पिता का नाम	उम्र-पु०/म	0.7
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आयुष्पान भारत	के पात्र है : हाँ/नहीं (रजि.	नं)
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आयुष्मान लामार्थी (हाँ/नहीं)

चिकित्सालय (पुरूष) १रपुर-माती, कानपुर देहात

वाह्य रोगी टिकट

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कानाम	रिया (Reyasth) कमरा एमर रिया
दिनांक	Prov. Diagnosis
	Presenting Complaints
CB(Dry cough.
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Scanned by CamScanner

DISTRICT COMBINED HOSPITAL (MALE)

PATHOLOGY DEPARTMENT AKBARPUR - MATI, KANPUR DEHAT "AN ISO 9001:2015 CERTIFIED LABORATORY"

Date

: 19-Apr-2022

Reg/Ref: 39440 / 113382

Collected At : DMH

Name

: MASTER REYARTH

Age/Gender: 14 Yrs./Male

Ref.By: Dr. ARADHNA SINGH(23) Phone:

Ward

: OPD

Receipt: NA

Requested Test : CBC

Coll Time: 19-Apr-2022 09:59 AM

Validate : 19-Apr-2022 10:04 AM

Prn. Time: 19-Apr-2022 10:04 AM

Investigation

Observed Values

Units

Biological Ref. Interval

HAEMATOLOGY

Complete Blood Count

1 learne alabin
Haemoglobin
PCV (Packed Cell Volume)
Total Leucocyte Count (TLC)
Total RBCs
MCV (Mean Cell Volume)
MCH (Mean Corpus. Haemoglobin)
MCHC (Mean Corpus. Hb Conc.)
Platelet Count
Differential % Leucocyte Counts:
 Neutrophils
Lymphocytes
Eosinophils
Monocytes
Basophils
Abs. Lymphocytes

12.8	
36.5	
V-11/90	
8800	
4.77	
76.5	
100000	
26.9	
35.1	
100	
2.93	

g/dL cells/mm3 million cells/mm3 fl.

thous/mm3

13 - 17 36 - 46 4000-11000 3.8 - 4.8

20 - 40 1 - 6 2 - 10

< 2 ,

Checked By

शीव्र स्वास्थ्य ताभ की कामना

126638 User: KAMLESH (REGISTRATION-PC) Printed: 19-Apr-2022 10:04:15 AM

Page 1 of 1

1-All test result are dependent on the quality of sample received by the laboratory. 2-Test result may show interlaboratory variations.

3-Test result are not valid for medicolegal purpose.

³⁻Test result are not valid for medicolegal purpose.

3-Test result are not valid for medicolegal purpose.

4-This is only a technical and analytical report of the samples(s), Its clinical correlation, diagnosis and medical report is re by the referring Physician/Surgeon.



1.5 Tesla M.R.I.

MR Spectroscopy/MRCP

4D Colour USG./Doppler

Investigation

Fetal Echo

DEXA (BMD)

E.E.G./ECG

• 128 Slice Spiral C.T.

• 360° Open M.R.I.

Digital X-Rays

Digital O.P.G.

Pathology

Whole Body Angiography

111/75 & 82, Ashok Nagar (Near Shanti Niketan Sweet House), Kanpur

Ph.: 0512-2540938 Mob.: 9935861112, 9935861113, 7753861112, 9415042672, 7753861113

Patient Name : Reyansh Mangal

Ref. By Dr. Name: Dr. Sanjay Tripathi

: HRCT Thorax

17 April 2022

Age / Sex 12 Yr. / M

OBSERVATION

> Bilateral lung fields are unremarkable. No focal lesion.

> Tracheo bronchial tree is normal in course caliber and branching pattern.

No suggestion of bronchieactasis.

No pleural effusion on either side.

No sizable mediastinal / hilar lymphadenopathy (scan is non contrast one).

Visualized bones including both scapula are unremarkable. No lytic / sclerotic lesion.

> Visualized abdominal cut shows mild hepatomegaly.

Please correlate clinically

Kindly Note

- * Due to inherent property of C.T., beam hardening artifacts leads to sub-optimal visualisation of medulla & brain stem in most of the brain CT's.
- ❖ Hyperacute / Acute infarct may usually taken > 24 Hrs to be apparent on CT.
- Please Intimate us for any typing mistakes and send the report for correction within 7 days.
- The science of Radiological diagnosis is based on the interpretation of various shadows produced by both the normal and abnormal tissues and are not always conclusive. Further biochemical and radiological investigation & clinical correlation is required to enable the clinician to reach the final diagnosis. The report and films are not valid for medico legal purpose.

Dr. Vikram Singh M.D.(Radiodiagnosis) KGMU, Lucknow

Dr. Vikas Gupta
M.D.(Radiodiagnosis,
A.I.I.M.S

Ex. Chief Resident (Radiodiagnosis,
A.I.I.M.S

(Consultant Radiologist,