

Okhla Road, New Delhi - 110025 INDIA Phones 682 5000, 682 5001 Fax 6825013 e-mail ehirc@vsnl.com Website www.ehirc.com

VISO 9001 INSTITUTA

# DISCHARGE SUMMARY

Name of the Patient : MR SAHAB SINGH

Age: 57 Yrs

Sex : Male

Regn No.: 167065

IPD No.: 106665

Date of Admission: 27.03.2002

Date of Discharge: 15.04.2002

DIAGNOSIS

PULMONARY EMBOLISM

PROCEDURE(S)

IVC Filter Placement done on 12.1 - 206

# RESUME OF HISTORY

Mr Sahab Singh, a 57 years old genticinan is normotensive, nondiabetic, nonsmoker and has family history of ischaemic heart disease. He c/o chest pain since last 4 days precordial which has been increased since 26.3.2002. He also have h/o weakness, profine sweating. CART done in Nov 2001 revealed normal coronaries. He also c/o breathlessness and pain in legs. He was admitted this hospital for evaluation.

On admission, his pulse was 70 /min, and BP was 120/80mmHg. There was no pallor, no cyanosis, no clubbing, no oedema. JVP was not raised and lungs were clear. Precordial auscultation and other systemic examination was =4.emarkable

# COURSE IN THE HOSPITAL

The patient was presented with complaint of chest pain with breathlessness. He was investigated and diagnosed as a case of pulmonary embelism. He underwent IVC filter deployment on 12.04.2002. His subsequent stay in the hospital was une central. He is being discharged in a stable condition.

# INVESTIGATION(S):

2D DOPPLER COLOUR done on 30.03.2002 (Provisional Report) revealed hypermobile multiple clots seen in RA prolapsing into RV inflow. Mild TR. PASP 56mmHg.

PERIPHERAL done on 30.03.2002 (Provisional Report) revealed no evidence of DVT in the lower limbs.

2D DOPPLER COLOUR done on 08,04,2002 (Provisional Report) revealed no evidence of any RA clot. Mild TR. PASP 50mmHg, No LV RWMA. EF 55%

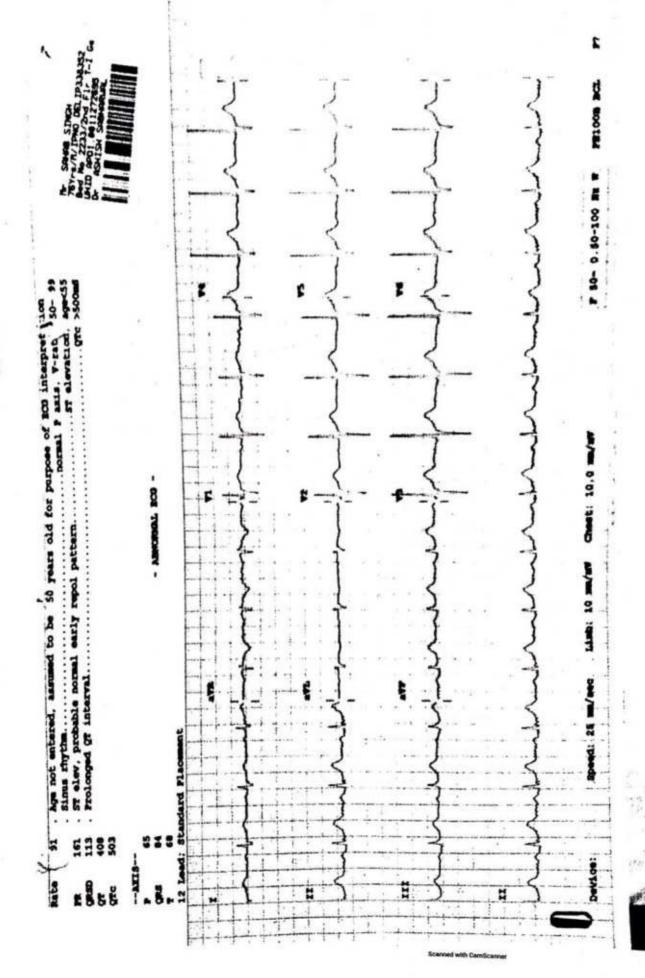
VASCULAR DOPPLER(ABDMN) done on 13.04.2002 (Provisional Report) revealed Filter in IVC seen in position with good a negrade flow across it.

TEE -TRANS ESOPHAGEAL ECHO done on (Provisional Report) revealed RA,RV dilated.No MR.No AR.No RWA, no thrombus in MPA. No PE.

CT CHEST DIRECT CONTRAST dame on (Provisional Report) revealed / CT angio for pulmonary arterial tree done on 28:03.2(a)2 Report to be collected from OPD

Invest

Page: 1



Sec. 11



Name of the Patient MR SAHAB SINGH

**HEART INSTITUTE &** 

RESEARCH CENTRE Regn No.: 167065 IPD No 106665

AN ISO 9001 INSTITUTE

ACTIVITY:

Symptom Limited

ADVICE:

To review with Dr. Anil Saxena on 23.4.2002 in OPD.

MEDICATION(S)

Tab. Pantodac 40 mg twice daily

Tab. Acitrom 2 mg (According to PT and INR)

Naturalax 3 tsf at bed time

Inj. Clexane 40 mg S/C twice daily x 3 days

ACITROM PROTOCOL: PT TO BE DONE AFTER ONE WEEK.

See DR. ANIL SAXENA in OPD II on 23.04.2002

TO SEE DIETICIAN BEFORE DISCHARGE.

ADMITTING DOCTOR:

DR. ANIL SAXENA

DR. PRAVESH JAGURI (Resident Doctor)

DR. ANIL SAXENA (Consultant Incharge)

MR. SAHAB SINGH to attend Follow-up Clinic of DR. ANIL SAXENA with prior appointment.

All appointments may be taken from the appointment section (Direct 6825004 and 6825005) IN CASE OF EMERGENCY CALL IN EMERGENCY - 6825002, INFORMATION 6825000, 6825001. Fax No. 6825013

DR. ANIL SAXENA or his team member may be contacted on 6825000, 6825001

A Life Style Management Program, designed to keep further progress of Coronary Artery Disease in check and to improve the functional capacity of a patient, is being conducted at EHIRC (Rehabilitation Centre - Upper Basement).

For booking, contact appointment desk (Contact No. 6825000/1, Extn. 3905).



Escorts Heart Institute and Research Centre Limited
Okhia Road, New Delhi - 110 025 India
Phones: 6825000-01 Fax: (11) 6825013
Grams: ESHEARTINS
E-mail: ehirc@vsnl.com
AN ISO 9001 INSTITUTE

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**45CO** 

# DEPARTMENT OF RADIO DIAGNOSIS AND IMAGING

# C. T. SCAN REPORT

Img.No.: 3993 EHIRC. No.: 167065
Name: Mr. Sahab Singh Age/Sex: 57yrs/M

Ref. : EM.09 Date : 29/03/02

CONTRST ENHANCED C.T SCAN CHEST WITH C.T. ANGIIO FOR ARTERIAL TREE

Helical scan of chest was done before & after administration of I/V contrast from apex to the level of adrenals. No complications encountered during the procedure.

Study reveals :-

- A thin inverted 'Y" shaped thrombus in the main pulmonary artery with extension into the right pulmonary artery & left pulmonary artery.
- Multiple focal thrombi noted in right & left pulmonary arteries extending upto the level of the tertiary branches.
- Maximum luminal compromise (~ 75-80%) is noted on the left side in the secondary branch of left pulmonary artery.
- A small wedge shaped soft tissue opacity suggestive of an infarct is noted at the periphery of left mid zone.
- No obvious clot seen in the LV cavity.
- Fibro parenchymal opacity is seen in the right apex.
- No evidence of pleural/ pericardial effusions.

Dr. Jyotiko Gulati (M.D) Junior Consultant.

Scanned with ComScanner

32 48

47

# Fortis Escorts

ART INSTITUTE

MR SAHAB SINGH PATIENT NAME : IP00313905 IPD NO: REGISTRATION NO 00167065

CONDITION ON DISCHARGE:

Stable.

# MEDICATION ADVISED ON DISCHARGE:

SNo.	Formulation	Dose	Route	Directions/time	Duration
					X5DAYS COMO
1	TAB. LEVOFLOX	500 MG	Oral	ONCE DAILY	
2	TAB. PANTOCID	40 MG	Oral	ONCE DAILY	Tom
- 1	TAB. VOVERAN SR	100 MG	Oral	TWICE DAILY	X 5 DAYS 10000 Jop
4	TAB. ACITROM		Oral	ONCE DAILY	ACCORDING TO PT/INR
		ONE TAB	Oral	ONCE DAILY	X IMONTIL TOPM
5	TAB. DUTAS D	ONE TAB	0.0.0		The second of th

Date of Revisit:

Other Advice:

REVIEW WITH DR. ASHISH SABIJARWAL IN OPD

AFTER ONE WEEK WITH PRIOR APPOINTMENT.

PLENTY OF FLUID ORALLY

RESIDENTIO

DR. ASHISH SABHARWAL







IENT NAME: MR SAHAB SINGH

GISTRATION NO 00167065 IPD NO: IP00313905

# NERAL INSTRUCTIONS:

gent Care: Please inform emergency department if you have chest pain, breathlessness, palpitations, sweating, king, giddiness, fainting, itching, skin rash, bleeding from any site, discharge from the wound or any other optom. You should contact emergency department of Fortis Escorts Heart Institute at following number:

47134000, 47134001 or 011-41628428(Direct Line).

comprehensive Cardiac Checkup: Three months after cardiac surgery, a Comprehensive Cardiac Check-up (C) is conducted at ground floor of the Rehabilitation Center (OPD block). You should make a prior booking for C on a mutually convenient date by contacting the appointment section telephonically (see below). On the cointed day, please come in fasting state (WATER MAY BE TAKEN) and report at 08:30 a.m.

or OPD appointments and general enquiries	For EMERGENCY Department	Fax:/Ambulance
01 11 1710 5000	+91-11-4713-4000 +91-11-4713-4001	+91-11-2685013/ 105010

# General Lifestyle-Related Advice:

Diet: Restrict salt, free sugar, refined carbohydrates, and excess of dietary fat. Avoid hydrogenated fat and ull cream milk and milk products. Ensure regular and adequate intake of fresh fruits, nuts, and green leafy regetables. Prefer whole grains, whole pulses and low fat milk and milk products. Non-vegetarians should avoid red meat, organ meats, and egg yellow. Consult dietitian for further details and advice according to individual needs.

Physical Activity: 30 to 45 minutes of brisk physical activity, preferably on all days of the week. Please discuss with your physician/cardiologist.

Substance Abuse: Smokers should quit smoking completely and abruptly. Tobacco chewing is equally harmful.

Prepared By-

Medical Transcriptionist (MT).

" FOR HOME TO HOSPITAL TELE-ECG FACILITY PLEASE CONTACT AT 011-26825006 ( DIRECT LINE)
HEART ALERT CENTRE, GROUND FLOOR ( MAIN BUILDING) " or dial 9910 968 968 so as to procure a







Escorts Heart Institute and Research Centre Limited Okhla Road, New Delhi - 110 025 India Phones: 6825000-01 Fax: (11) 6825013 Grams : ESHEARTINS E-mall : ehirc@vsnl.com AN ISO 9001 INSTITUTE

# IVC FILTER REPORT

TAME

: MR. SAHAB SINGH

AGE/SEX

: 57 Yrs / M

PDNO

: 106665

REGN No.

: 167065

YTA NO

: 1393

PTA DATE

: 12.04.02

PROCEDURE: -

IVC Filter.

DIAGNOSIS:

Pulmonary thrombo embolism.

ROUTE:

Right femoral vein.

RESULTS: -

PROCEDURAL DETAILS: -

IVC gram done through 6F pigtail catheter & 12F Greenfield IVC filter deployed in infrarenal portion of IVC through Right femoral vein.

Successful deployment of IVC [61]

DR. ATUL MATHUR

MD DM

CONSULTANT CARDIOLOGIST

RHIRC - NEW DETHI



**Escorts Heart Institute and Research Centre Limited** 

Okhlo Road, New Delhi - 110025 INDIA Phones: 26825000-01 Fax : (11) 26825013 Grams: ESHEARTINS E-mail: ehirc@vsnl.com AN ISO 9001 INSTITUTE

# OUT PATIENT TESTS RESULT REPORT

BIOCHEMISTRY

SMT. BIRMILA .

Fenale

55 Yrs 2 Mnths 5 Days

Registration No.: 222370

Lab Request No.

569023

Lab Request Date : 05 APR 2004

08:33:06

Report Date :

05 APR 2004

17:51:31

ab No. Investigation	Results	Units	Normal Range
29542 SUGAR FASTING	91.00	mg/dl	70 - 100
9642 SUGAR PP	130.00	mg/dl	100 - 130
9642 UREA	23.00	mg/dl	10 - 50
9642 CREATININE	0.55	mg/dl	0.8 - 1.5
9642_URIC ACID	2.01	mg/dl	2 - 7.6
9642 LIPID PROFILE			
1642 TOTAL CHOLESTEROL	144.00	mg/dl	150 - 200
9642 TRIGLYCERIDES 9642 HDL 19642 LDL	160.00	mg/dl	10 - 140
9642 HDL	24.00	mg/dl	30 - 75
9642 LDL	99.00	mg/dl	0 - 150
29642 VLDL	21.00	mg/dl	0 - 28

DR. ARUN RAIZADA PhD (Med. Biochem.) CHIEF BIOCHEMIST

Invalid for medico-legal purposes.

Content of this report is only an opinion, not the diagnosis.

Registered Office: SCO 198-200, Sector 34-A, Chandigarh-160034, Ph.: 2665140, 2665944, 2667359, Fax no.: (0172) 2662899

NC 2012/016 /0023339 UHID-20120511328 Date 16/11/2012 Mon, Fri Name BIRMILA W/O SHAHAB SINGH Phone No.

Neurology-I Charged Rs. 10/-

Neurology

Scr

62Y /F 

Consultant Room 8 SR Room:

Registration Time: 8.30 AM - 10.30 AM

NC 2012/016/0023339 UHID-20120511326

Neurology-I

Date 16/11/2012

Consultant 8

Neurology Mon, Fri

Name BIRMILA

62Y /F

W/O SHAHAB SINGH

SR Room

Address: B-6 GANGA NAGAR MEERUT, DELH

NC 2012/016/0023339

Neurology-I

Neurology-I

Neurology-I

62Y /F

Neurology-I

6ZY /F

UHID-20120511326 Date 16/11/2012

Name BIRMILA

6ZY /F

W/O SHAHAB SINGH

Consultant 8

SR Room

Address: B-6 GANGA NAGAR MEERUT, DELH

NC 2012/016/0023339

Neurology-I

UHID-20120511326 Date 16/11/2012

Neurology

Mon, Fri

Name BIRMILA Phone No.

Consultant Room 8

62Y /F

SR

Consultant Room 8 SR Room

Mon.Fri 6ZY /F

Phone No.

Date 16/11/2012

Name BIRMILA

SR

SR Room 

NC 2012/016/0023339

UHID-20120511326

NC 2012/016/0023339

UHID-20120511326

Date 16/11/2012 Name BIRMILA

Phone No. Consultant Room 8

SR Room

NC 2012/016/0023339

UHID-20120511326

NC 2012/016/0023339

Neurology-I

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Consultant Room 8

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SR Room

Date 16/11/2012

Phone No.

Name BIRMILA

Consultant Room 8

Date 16/11/2012

Name BIRMILA Consultant Room 8 Neurology-I

NC 2012/016/0023339 UHID-20120511326

Neurology

Mon.Fri

62Y /F

NC 2012/016/0023339 UHID-20120511326

SR

Date 16/11/2012

Name BIRMILA Consultant Room 8

SR Room

Neurology-I

62Y /F

Delhi, India

ple ID

9/11/2012

Run Status 11:04:09 Mismatch

Instrument Instrument 1 LABADMIN

Operator

15513/12

Last Name 000535

First Name

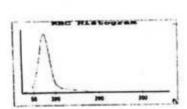
Date of Birth

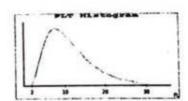
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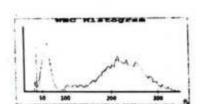
eport	Name	A11	Parameters		Last Hoo	lified:	02/11/2012	By:	LabAdmin
WBC	9.9		10^3/pL	RBC	4.37	/L	10^6/pL		
NE &	72.5			HGB	10.5	L	g/dL		
LY &	21.2		8	HCV	74.8	L	fL		
MO &	4.4	L	•	HCH	24.0	aL	pg		
EO &	1.6			мсно			g/dL		
BA 1	0.3	L	1	RDW	17.5	H	i		
NRBC	0.0		8						
NE (	7.14	H	10^3/µL						
LY	2.09		10^3/µL				35.000 0		
MO	0.44		10^3/µL	PLT			10~3/pL		
EO			10^3/µL	MPV	12.7	H	fL		
BA	T		10^3/µL						
HRB	C #0.00		10^3/µL						

Suspect/Definitive Messages: Hypochromia

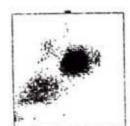
Giant Platelets







NA



End of Completed Report, Sample not validated, C NV, D AV, H NV, W NV / 370B982F



प्रयोगशाला कायचिकित्सा विभाग DEPARTMENT OF LABORATORY MEDICINE

SI L MAILE

# रूथिर विज्ञान HEMATOLOGY

अखिल भारतीय आयुर्विज्ञान संस्थान, अन्सारी नगर, नई दिल्ली-110029 All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029

TIT/Name Pormale.	आयु/Age 🗘 🗜 लिंग/Sex
C.R. No. 15523/12 CEC Ward/OPD	Consultant Unit/Bed No.
Date/Time Nature of Anticoagulant : EDTA/Citrate/Heparin/Nil Diagnosis/History	1
Previous Lab. Ref. No.	Signature of Doctor
Today's Lab. Ref. No.	Time of Receipt

INCOMPLETELY FILLED FORM IS NOT ACCEPTABLE



Investigation Advised	Treatment h /
	LT' Acitrom 3/2/1mg U
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	11/11/1
+	

Scanned with CamScanner

# RESEARCH IRESMENDED IE

# Lal PathLabs

L15 - SHRI KRISHNA DIAGNOSTIC CENTRE SHOP NO. B. KARAN PLAZA 9997480006 GANGA NAGAR MEERUT

Dr. Vandana Lal

: Mrs. BIMLA

Age: 64 Years

Collected

: 7/5/2015 9:10:00AM : 7/5/2015 12:02:01PM

Received Reported

: 7/5/2015 6:07:56PM

A/c Status : P

Ref By : Dr SUNEEL SHARMA

Report Status

: Final

Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E (Automated Strip Test, Microscopy)			
Physical Colour Specific Gravity pH	Light Yellow 1.025 5		Pale yellow 1.001 - 1.030 5.0 - 8.0
Chemical Proteins Glucose Kelones Billrubin	Nii Nii Nii Nomel		Nii Nii Nii Nii Normal

Negative

Negative

Microscopy

Nitrite

Urobilinogen

Leucocyte Esterase

R.B.C. Pus Cells **Epithelial Cells** Casts

Crystals

Others

Negative 2-3 WBC/HPF +(in small numbers) NI Negative NII

Negative 0-5 WBC / hpf

Negative

Negative

Few NII Apt Nil



BOP"

L15 - SHRI KRISHNA DIAGNOSTIC CENTRE SHOP NO. B, KARAN PLAZA 99974800 **DANGA NAGAR** MEERUT

: 7/5/2015 9:10:00AM : 7/5/2015 12:02:01PM : 7/5/2015 6:08:00PM

214883471 Ref By : Dr SUNEEL SHARMA

	120020	Units	Blo. Ref. Interval
Tost Hame	Results 97.00	mg/dL	70.00 - 100.00
GLUCOSE, FASTING (F), PLASMA (Hexokinase)		mgksL	17.00 - 43.00
UREA, SERUM (Urease UV)	14.00	mg/dL	0.60 - 1.00
CREATININE, SERUM (Compensated Jaffe's reaction, IDMS traceable)	0.63		2.60 - 6.00
URIC ACID, SERUM (Uricase)	1.90	mg/dL.	⊲5
ALT (SGPT), SERUM (IFCC with PSP)	15	UL.	
LIPID SCREEN, SERUM (Enzymatic)	150.19	mg/dL	<200.00
Cholesterol, Total Triglycerides HDL Cholesterol LDL Cholesterol, Calculated	123.00 25.20 100.39	mg/dL mg/dL mg/dL	<150.00 40.00 - 60.00 <100.00 <30.00

24.60

# Interpretation

VLDL Cholesterol, Calculated

	and the second second second second second second		
REMARKS	TOTAL CHOLESTEROL in mg/dL	TRIGLYCERIDE in mg/dL	in mg/dL
Optimal	<200	<150 ⋅	<100
Above Optimal	-	-	100-129
Borderline High	200-239	150-199	130-159
High	>=240	200-499	160-189
Very High		>=500	>=190

- 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. ATP III recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.
- 3. Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is <400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is >400 mg/dL



LIS - SHRI KRISHNA DIAGNOSTIC CENTRE SHOP NO. 8, KARAN PLAZA GANGA NAGAR EERUT

Dr. Vandana Lai M.D. (MITIG. IFCAP Chap of & Packatagy

Mrs. BINLA

Age: 64 Years

Collected Received : 7/5/2015 9:10:00AM : 7/6/2015 12:02:01PM

: 7/5/2015 6:08:00PM

A/c Statue

214683471

Ref By : Dr SUNEEL SHARMA

Reported Report Statu

Units Results **Test Name** 

Bio. Ref. Interval

TSH, SERUM (CLIA)

0.66

ulU/mL

0.35 - 5.50

Interpretation

REFERENCE GROUP	REFERENCE RANGE IN uIU/mL (As per American Thyroid Association)
PREGNANCY	
1st Trimester	0.10-2.50
2nd Trimester	0.20-3.00
3rd Trimester	0.30-3.00

- 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.
- Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some</li> individuals

# Clinical Use

- Diagnose Hypothyroldism and Hyperthyroldism
- 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

MD (PATH) Chief of Lab

End of report

	1501000		Neurology	. \ (	27)11/1/2
CA	NC 2012/016/0023339 UHID-20120511326 Date 16/11/2012 Mon,F	Neurolog rl			17/0/
अखिल भारतीय आयुर्विज्ञान A. I. I. M. S. Hospital नाम	Phone No. Consultant Room B	SR		सरे—फार्म SITION F रंग	FORM आय
Name	SR Room			7	Income
एक्स-रे नम्बर	- Mittinger			चिकित्सक विभाग	
X-Ray No.	Date			Referring Unit	1
हस्पताल क्रम नं.	वार्ड/ओ. पी. डी.			रोगी रियति	
Hosp. C.R. No.	Indoor/ Outdoor			Ambulatory/Non	
एक्सरे जांच के लिए अंग	· · · ·			<b>^</b>	
Examination Required	XV	- 1	1 2	Ar · ·	
चिकित्सक की जांच रिपोर्ट :				la	, i
Clinical Information:					
					4 4
किसी दवा का बुरा प्रमाव Any History of Allergy अन्तिम माहवारी तिथि LMP कोई पुराने एक्स-रे				रेडियोग्राफ	EDICAL OFFICER र के लिए
Any Previous X-Rays				FOR RADIOGR	RAPHERS USE
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Thumb Impression			0.0		
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रिपॉट REPORT

एक्स रे-चिकित्सक RADIOLOGIST

# RATORY REPORT

# II EEEE ROTTIS

Diagnostics

CLIENT CODE : C000021612

CLIENT'S NAME AND ADDRESS : ESCORTS HEART INSTITUTE AND RESEARCH CENTRE - OKHLA -OPD

(CASH) OKHLA ROAD - JAMIA NAGAR

01147134996

NEW DELHI NEW DELHI 110025 DELHI INDIA

RESEARCH INSTITUTE

SAL LIMITED/Formerly known as Super Respare Laboratories Unit ESCORTS HEART INSTITUTE AND RESEARCH CENTRE LTD, OKHLA ROAD

PATIENT ID :

OKHLA, 110025

NEW DELHI, INDIA TH: 47134972, 47135511, Fax: CIN - U74899DL1995PLC070603

PATIENT NAME : SMT. BIRMILA .

ACCESSION NO: 0057NH013945 AGE: 65 Years SEX: Female

DATE OF BIRTH: 01/02/1949

EO-222370

DRAWN: 27/08/2014 02:04

RECEIVED: 27/08/2014 14:07

REPORTED: 27/08/2014 14:59

CLIENT PATIENT 10 : UHID:EO-222370

REFERRING DOCTOR: DR. HEALTH PKG. CLINICIAN

CLINICAL INFORMATION :

UHID-EO-222370 REQNO-1114150096 OPD-DL-FRONT OFFICE - REHAB OPD

DIFFERENTIAL COUNT PERFORMED ON:

Test Report Status Final

Biological Reference Interval

Units

**EDTA SMEAR** 

Requite

**BIO CHEMISTRY** 

324

TOTAL IRON BINDING CAPACITY, SERUM

IRON

METHOD FERENE

TOTAL IRON BINDING CAPACITY

METHOD PERENE

% SATURATION

HETHOD : CALCULATED PARAMETER

Lew 50 - 170

250 - 450

Low 13 - 45

µg/dL

PQ/dL

ENDOCRINOLOGY

THYROID PANEL IL SERUM

FREE TRIIODOTHYRONINE (FT3), SERUM

FREE TRIIODOTHYRONINE (FT3)

HETHOD : ELECTROCHENDLUNGNESCENCE

FREE THYROXINE (FT4), SERUM

FREE THYROXINE (FT4)

0.93 - 1.70

2.0 - 4.4

ng/dL

pg/mL

HETHOD : ELECTROCHEMILLIMINESCENCE

TSH 3RD GENERATION ULTRA( TSH3 - UL)

TSH 3RD GENERATION HETHOD : ELECTROCHEMBLEMENESCENCE 0.679

2.56

1.11

0.27 - 4.20

WNI

µIU/mL

Tost Nothod(s)
FREE TRUGOOTHYRONIME (FT3), SERUMThe guidelines for age related reference ranges for FT3.

Cord Blood

21-44

FREE THYROXDIE (FT4), SERUH-The guidlines for age related reference ranges for FT4.

w Born (1-4 days)

2.2 - 5.3 ng/dL 0.8 - 2.7 ng/dL

0.7- 2.0 mg/dL 0.5- 1.6 mg/dL

2nd & 3rd Tries

TSH 3MD GENERATION ULTRA( TSH3 - UL)-Comment: The Biological Reference Interval of TSH-3rd Generation Ultra (TSH3-UL) is not established for age less than 2 years

CLINICAL PATH

# 24 HOURS CHEMIST SHOP

Retall invoice Cash/Credit

Patient Name :

Guardian Lifecare Pvt. Ltd.
Medanta, The Medicity OPD Pharmacy,
Sec-38, Gurgaon, Haryana 122001
Phone: 0124-3201205

DL No. : 1808 B & 1808 OB

TIN No.: 06461823981

Bill No. : SATTING

31:05/2016 Bill Date :

For Guardian Lifecare Pvt. Ltd.	n Lifec	or Guardia	ד	S	Goods	etum o	ange or R	Produce Bill for Exchange or Return of Goods	Produc		ethi Jurisdiction	E & O E All disputes Subject to Dethi Jurisdiction	E & O E
	/abie	Net Amount Payable	Net y		4063	Phase-V	dyog Vihar, 52 Fax: +91	55, Sector 37, Un	la Phone: +91-	e : Guardian H 1, Haryana, Ind	Corporate Office: Guardian House: Plot No.55, Sector 37, Udyog Vihar, Phase-VI Gurgaon-122 001, Haryana, India Phone: +91-124-405 4061 / 62 Fax: +91-124-406 4063	tagistared Office: 1.258, Okhia Industrial Area, hase -I. New Delhi-110020.	A-258. O
109.6	=	Total Discount Amount	0.20 Total 5.20 Disco		Sougher M9 collecter VAT Collected on Bill	er Ay	Par South	One Hundred Pharmacisticty Three Paise Only Ougle: NO Collected on Bill	nacistikty 1	dred Rham		Number of Items : Amount in Words : Total Discount in Bill	Amou
					45	K 19							
109.63	5.00	0.0	0.0	104.16	No(s)	10	109.63	1/19	TD#R-556	105-MALTER	DROTIN M TAB BOYE/250YG 105-WALTER	DROTIN M TAB	-
Net Amt.	VAT °	Disc% Disc. Amt VAT%	Disc%	Gross Amt.	Pkg.	Qty.	MRP	Exp Dt.	Batch	cturer	lem Description-Manufacturer	ltem Descr	S. No.
				J7.			Phone/Mobile :	Pho	HA .004	Dr.SYBUTI RANJAN MISHA.DGN	Dr.SMRUTI	Address : Doctor's Name :	Address :



# NURSING ADULT OUTPATIENT ASSESSMENT

NAME: Mrs. Birmilla DOCTOR'S NAME: Dr. C.R.r	UHID: HHO	0901144 A	GE: 65 Y	w sex: f
1. Height: 1654 cm 2. Weight: 61.3 by 3. MAC (if weight is not record 4. VITAL SIGNS 5. Temp: 34°C Pulse: 90 /m PAIN ASSESSMENT	lable) :	/min BP !S	2/62 mm of H	g
PAIN SCALE  No Hunt Pain Score(0-10)  Pain Score(0-10)	Fibria Little More	under the true there	Hurts Whode Lot	TS)
FALL RISK SCREENING: (IF AN' Reason - History of fall Unsteady Ga Elderly(>65 Years)				Mental status
Fall prevention interventions foll Always have an attendant to according to the clinical staff Always have safety belt put on which the clinical staff Please carry all the helping apparation. Please be careful when lying down	mpany you.  at any time hile using wheel atus like eyeglas	ses, hearing aids,		
Social History (Tobacco / Alcohol / D Nutritional Status (weight loss / gain Psychological Assessment Functional Assessment	Orug Use)	months) Yes No De	/Ne/ i/Ne/ mgal/Abnorma pendent/Indep	



# Global Health Pvt. Ltd.

Regd. Office: E-18, Defence Colony, New Delhi -24

# BILL CUM RECEIPT

HOSPITAL BILL

: GHOPBL/17172595

Bill Date

31/05/2016 08:51

Patient Id

: MM00901144

OPD No.

: 13288769/1

Age/Sex **Patient Name** 

: 65Y 0M 0D / Female

Visit Date

: 31/05/2016 06:51

Patient Address

: Mrs. Birmila .

**Consulting Doctor** 

: Dr Smruti Mishra

: Hno B 6 Ganga Nagar, Meerut, U P : 8126684029

PAYER

: SELF

**Patient Phone** Clinic

: GE & Hepatology

Other Payers

: CASH PAYMENT

Bing Group / Corporate: Date

Admin Charges

Consult Visit Charges

ADVC000048-First Consultation Charges

31/05/2016

1.00

Qty

900.00

Total

Total

900.00 0.00

Payable By Others

900.00

**Net Payable** Receipt

900.00

GHOPRC/17132446/31-MAY-16(By Cash) Bill Outstanding

900.00 0.00

BIL NR

**BILL AMOUNT:** 

INR Nine Hundred And Paisa Zero Only

Regd. Office/National Reference Lats: Dr. Laf PathLabs Ltd., Block E, Sector-18, Rohm, New Defin - 110085 Tel: +91-11-30244-100, 3988-5050, Fax: +91-11-2788-2134, E-mail: Jalpathlabs@ialpathlabs.com Web: www.lafpathlabs.com, CIN No.: L74899DL1995PLC065388

L89 - FPSC GANGANAGAR C 1/7A, DIVIDER ROAD, NEAR SAI MANDIR GANGA NAGAR, MEERUT-250001 Mawana

Name

Lab No.

A/c Status :

: Mrs. BIRMALA

: 257788653

Age: 67 Years

Female

Collected

: 19/9/2018 5:40:00PM

Received

: 19/9/2018 5:54:24PM

Gender:

Reported

: 19/9/2018 7:55:16PM

Report Status

: Final

**Test Name** Units Results HEMOGLOBIN; Hb, BLOOD

Ref By: Dr. SELF

(SLS)

10.50

Bio. Ref. Interval

11.50 - 15.00 g/dL

MD (PATH) Chief of Lab Namente chaudh

Dr. Namrata Chaudhan MBBS, MD(Pathology) Consultant Pathologist

-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.



# Global Health Pvt. Ltd.

# Regd. Office: E-18, Defence Colony, New Delhi -24

BILL CUM RECEIPT

; G	HXTBU1	7023570
-----	--------	---------

: MM00901144

Bill Date

: 31/05/2018 08:51

Patient Name

Age/Sex

: 65Y 0M 0D / Female : Mrs. Birmila .

OPD No. Visit Date

Patient Address

Consulting Doctor

: /

Patient Phone

: Hno B 6 Ganga Nagar,Meerut,U P

PAYER

: SELF

Clinic

8126684029

Other Payers

Date

Bing Group / Corporate:

: CASH PAYMENT

Registration Charges

Registration Charges

ADVC000020-Registration Charges

31/05/2016

1.00

Qty

Total

Total

100.00

Payable By Others Net Payable

100.00 0.00

Receipt

100.00 100.00

GHXTRC/17021975/31-MAY-16(By Cash) Bill Outstanding

100.00 0.00

BILL AMOUNT:

INR One Hundred And Paisa Zero Only

1/05/2016 08:43

Medanta-The Medicity

Sector - 38, Gurgaon, Henyana - 122 001, India
 491 124 4141 414 Fax. +81 124 4834 111

Medanta Mediclinic

◆ E-18, Defence Colony, New Delhi - 110 024 ① +01 11 4411 4411 Fax: +01 11 2433 1433 Regd. Office: Global Health Private Limited, E-18, Defence Colony, New Delhi - 110 024, I

www.medente.org

Medanta Mediclinic Cybercity

IOC DU Com City Place & Co

# 0767001368064

OP Cash Bill -Bill of Supply Reference No : TIN: 07AAACI2398N1Z4 Age: 76Yr 6Mth 18Days UHID: APD1.0011272695 Mr. SAHAB SINGH Name Male : BHARATH SINGH Father Name DEL10PP3154325 : H NO B 6 MAWANA ROAD Address **GANGANAGAR Meerut Uttar Pradesh** India, CellNo 91-8126584029 BIII No : DEL-OCS-2852344 Doctor's Name : Dr. CMO ON DUTY Time: 4:42:57 Date : 19-Jul-21 Speciality : EMERGENCY MEDICINE 建氯甲基酚 医阳传机 化苯甲基甲基甲基 FOR APOLLO HOSPITALS Bill Amount: ₹. 4,500.00 Amount in words: ₹ Four Thousand Five Hundred Only Amount (INR) Quantity S,No Service Type/Service Name Department Investigations(9993)

1 Xpert CBNAAT COVID-19 (SARSCOV-2) Assay 4,500.00 Microbiology 4,500.00 Sub Total Service Amount : 4,500.00 **Total Bill Amount** 4,500.00 Final Payment (Cash:4,500.00, NonCash:0.00) 4,500.00 No Tax is Payable on Reverse Charge Basis Receipt Details: Received with thanks sum of ₹. 4,500.00 (CASH) Four Thousand Five Hundred Only From Mr. SAHAB SINGH

**Denotes Cancelled Services** 

(QR) Denotes Quick Registration Mr. MANASH PRATIM HAZARIKA

Cashier

Page 1 of 1

**Authorized Signatory** 

# DEPARTMENT OF GASTROENTROLOGY & HEPATOLOGY INDRAPRASTHA APOLLO HOSPITALS SARITA VIHAR, NEW DELHI Tel: 011-71792481/011-71792482

Patient Name: Mr. SAHAB SINGH

Registration No: 11272695-2233Age/Sex: 76 Yrs/M

Diagnosis:

Ref By:

DR ASHISH SABHARWAL

Date:

29-06-2021 01:30:32 PM

Procedure: COLONOSCOPY

# COLONOSCOPY REPORT

Sedation:

Yes

Indication:

Anemia under evaluation.

Coloniscopic Findings:

Examination done upto the caecum. Normal mucosa seen in rectum and colon. No ulcers, polyps, stricture or growth seen. No haemorrhoids seen. Multiple diverticulae seen in left colon.

Conclusion:

COLONIC DIVERTICULOSIS

Recommendation:

REVIEW IN PHYSICIAN OFFICE

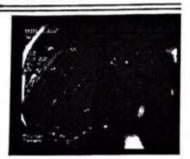
Complication

Nil

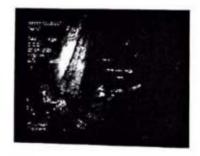
Mucosal Bx

No

DR. VISHAL GARG

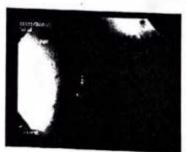












# DEPARTMENT OF GASTROENTROLOGY & HEPATOLOGY INDRAPRASTHA APOLLO HOSPITALS SARITA VIHAR, NEW DELHI Tel: 011-71792481/011-71792482

Patient Name:

Mr. SAHAB SINGH

Registration No: 11272695-2233Age/Sex: 76 Yrs/M

Diagnosis:

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DR ASHISH SABHARWAL

Date:

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Conclusion:

COLONIC DIVERTICULOSIS

Recommendation:

**REVIEW IN PHYSICIAN OFFICE** 

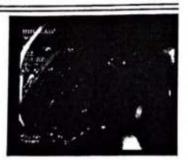
Complication

Nil

Mucosal Bx

No

DR. VISHAL GARG

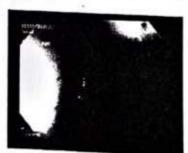












# DEPARTMENT OF GASTROENTROLOGY & HEPATOLOGY INDRAPRASTHA APOLLO HOSPITALS SARITA VIHAR, NEW DELHI Tel: 011-71792481/011-71792482

Patient Name:

Mr. SAHAB SINGH

Registration No: 11272695-2233Age/Sex: 76 Yrs/M

Diagnosis:

Ref By:

DR ASHISH SABIIAKWAL

Date:

29 06 2021 01:30:32 PM

Procedure: COLONOSCOPY

# COLONOSCOPY REPORT

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Yes

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Conclusion:

COLONIC DIVERTICULOSIS

Recommendation:

**REVIEW IN PHYSICIAN OFFICE** 

Complication

Nil

Mucosal Bx

No

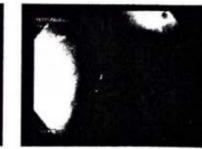
DR. VISHAL GARG













# DEPARTMENT OF GASTROENTROLOGY & HEPATOLOGY INDRAPRASTHA APOLLO HOSPITALS SARITA VIHAR, NEW DELHI Tel: 011-71792481/ 011-71792482

Patient Name: Mr. SAHAB SINGH

Registration No: 11272695-2233Age/Sex: 76 Yts/M

Diagnosis:

Ref By:

DR ASHISH SABHARWAL

Date:

29-06-2021 01:29:21 PM

Procedure: UGI ENDOSCOPY

# UPPER GASTROINTESTINAL ENDOSCOPY REPORT

Sedation:

Yes

Indication:

Anemia under evaluation

Endoscopic Findings:

Oesophagus:

Lax GE junction at 40 cms from the upper incisors. Normal mucosa seen in oesophagus.

Stomach:

Normal mucosa seen in fundus, body and antrum.

Duodenum:

Normal mucosa seen in D1 & D2.

Conclusion:

NORMAL UGI ENDOSCOPY

Complication

Nil

RUT for H.pylori

No

Mucosal Bx

No

DR. VISHAL GARG













Information Management of Endo Clinic By, www.endoclinic.co.in

*	DEPARTMENT OF F	PATHOLOGY	Age	76Yr	Gender Male
ne	Mr. SAHAB SINGH	Lab No ADL1		LRN	3348859
	APD1.0011272695	Received on	02-JUL-202	1 09 39 56	5 AM
No/RefNo	Discharged	DELIP338352			
finted on	07-JUL-2021 12:16:13 PM	UHID	MARIN		MENGIL
Reported on	06-JUL-2021 10:58:19 AM	Unio			
Ref Doctor	Dr.ASHISH SABHARWAL				

# Comments:

Lamina propria and deep muscle not included in biopsy, no comment can be made regarding

# Conclusion

- 1. Prostate chips
- \*BENIGN PROSTATIC HYPERPLASIA
- 2. Bladder tumor
- \*LOW GRADE PAPILLARY UROTHELIAL CARCINOMA SEE COMMENTS

· END OF REPORT ·

Denie William

DR. SEEMA SINGHAL CONSULTANT

Typed By:

112604

First Report Printed On:

07-JUL-2021 12:16:12 PM

Page 2 of 2

Keep the records carefully and bring them along during your next visit to our hospita



For enquiry & appointments contact 011-26925801 / 26925858

# DEPARTMENT OF HAEMATOLOGY

atientName	Mr. SAHAB SINGH		Age 76Yr 6Mth 3Days	Gender Male
UHID	APD1.0011272695	SIN \LRN	7710308 \ 3351183	
W/BNo/RefNo	Discharged	Specimen	Whole Blood ( EDTA )	
Printed on	19-JUL-2021 04:43:33 AM	Received on 04-JUL-2021 04:56:14 AM		
Reported on	04-JUL-2021 05:43:57 AM	PatSer No. DELIP338352		
Ref Doctor	Dr.ASHISH SABHARWAL	•		
JHID			V-12	

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
CBC (HB,PCV,TLC,DLC,PLT)			
: (Impedence/VCSn/Flowcytomet	try/Photometry/Microscopy)		g/dl
Hemoglobin	8.7 *	13.0 - 17.0	%
Haematocrit	27.7 *	40.0 - 50.0	10³/mm³
WBC Count	10.05 *	4.0 - 10.0	Million/ul
RBC Count	2.50 *	4.5 - 5.5	
MCV	110.6 *	83.0 - 101.0	fl
MCH	34.8 *	27.0 - 32.0	Pg
MCHC	31.4 *	31.5 - 35	g/dl
RDW .	23.8 *	11.5 - 14.5	%
Platelet Count	193	150 - 410	10³/mm³
Differential Count		*	
Neutrophils	76.5	40 - 80	%
Lymphocytes	9.4 *	20 - 40	%
Monocytes	7.7	2 - 10	%
Eosinophils	6.1 *	1-6	%
Basophils	0.2	0 - 1	%
bsolute Leucocyte Count			
autrophil	7.69 *	2.0 - 7.0	10³/mm³
ymphocyte	0.95 *	1.0 - 3.0	103/mm3
Monocyte	0.77	0.2 - 1.0	10°/mm²
Eosinophil	0.61 *	0.02 - 0.5	10 <sup>3</sup> /mm <sup>3</sup>
Basophils-	0.02	0 - 0.1	10°/mm°

# Clinical Examination

On Examination

Conscious, oriented

Afebrile

Pulse Rate: 80/minute

Blood Pressure: 120/80 mmHg Respiratory Rate: 20/minute

No clubbing / cyanosis / pedal edema / icterus / pallor / lymphadenopathy

Chest: Bilateral clear

Cardiovascular system: S1, S2 Normal / No murmur / rub / gallop

Per Abdomen: Soft, No tenderness, No distension Central nervous system: No focal neurological deficit

# Course In The Hospital & Discussion

Patient admitted under Dr. Ashish Sabharwal (Sr. Consultant Urology). After admission catheterization with flexible cystoscopy attempted but failed. Planned for cystoscopy and catheterization in operation theater under general anesthesia. After pre anesthetic checkup and written informed consent was taken up for procedure.

Procedure: Cystoscopy + urethral dilatation with catheterization done under general anesthesia on 19.07.2021.

# Findings:

Meatus normal urethra, false passage in bulbar urethra Bladder neck wide open guide wire placed. Urethral dilatation done. 20 F Silicon catheter placed over guide wire.

Post operative period was uneventful. Patient is now being discharged under satisfactory condition with following advice and Foley's catheter in situ.

# ADVICE ON DISCHARGE

Diet

As advised

Physical Activity

As tolerated

Discharge

TAB Levofloxacin 500 mg per orally once daily X 7 days

Medication

TAB Pantop 40 mg per orally once daily X 7 days
TAB Ultracet 1 TAB per orally as and when required for pain

TAB Acitrom 1 and 2 mg per orally 1 TAB alternative day x

TAB Folvite 1 TAB per orally once daily

Injection Neksium 2 MU intramuscularly in morning

to con

Follow Up

Review in physician office with Dr. Ashish Sabharwal with prior appointment. Please confirm

your appointment on +911126925858 / 26925801 / 29871050/1051.

Pending Reports

Kindly bring a copy of your bill to collect the pending reports from gate no-4(from respective



India's First Internationally Accredited Morpital
Indirepreseth A RPBITO Mospitals
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Sel. 51-11-26825558, 26825608, Fan 191-15-2682629, Emergency Telephone No.: 1066
Emel : sashsance 4-spokhonepitaludebi.com, Website : worus spokhospidebi.com
For Online spokhonepit : www.sabapolio.com

# Dr. Ashish Sabharwal

MBBS, MS, DNB (Urology)
Sr. Consultant - Urologist and Prostate Specialist
Fellowship in Endourology and Robotic Surgery
Jackson Health System, Miami, USA





26/6/2021 pm Sahaco 31.
26/6/2021 pm Sahaco 31.
Hb (6/gm))

APD1.0011272695 MR. SAHAB SINGH Age: 76Year(s) Year(s)/Male 26 Jun, 2021 11:03:35 AM

URDFLOWMETRY

Golds COVID 19 RTPCR Test

Seene Expert testing

Admit for evaluation of Aremia.

Scanned with CamScanner



# dr. akshat's pathology labs 🗳



Patient Name

: Mrs. BIRMALA

Age/Sex

: 72 Yrs. / Female

Clinician-In-Charge

: Dr.SELF

Centre

: ARJUN

Log No.

: 41

Date

:27/Aug/2021

Sample

: BLOOD

Taken From

Investigation

HAEMATOLOGY HAEMOGLOBIN Result

**Units** 

Normal-Range

10.2

GM%

12.5 - 16.5

----{END OF REPORT}----

Dr.Pradeep Tyagi M.B.B.S , M.D **डा० अक्षत पैथोलॉ**जी लेब्स

Dr.Akshat Tyagi M.B.B.S,Ph.D(Biochem),M Reg.No.14193

Scanned with CamScanner

BIII No : INT1229639

# Draft not Final

	471,818.00
Total Interim Bill Amount Till Date	0.00
Authorization Amount(1) IFFCO TOKIO GENERAL INSURANCE CO LTD	0.00
То Рау	414,957.00
Discount ( Co-Payment : 0.00 ,Supplementary : 0.00 )	56,861.00
Deposit (10287972,10298297,10300962,1030098 Cash:20,000.00, NonCash:120,000.00	140,000.00
Payment Details:	•
interim bill amount in words: ₹ Fourishts Seventy-One Thousand Eight Hundred Eighteen Only	
No Tax is Payable on Reverse Charge Basis	
Amount Paid	140,000.00
Outstanding Amount	274,957.00
Mr. Harish Chander	Mr. Harish Chander
Generated By	Cashier/Manager

Disclaimer: "All the above dates indicated as Date & Time of the entry only

Page 2 of 24



India's First Internationally Accredited Hospital
Indrapraetha Apollo Hospitals
Sarita Viher, Delin - Maihura Road, New Delhi - 110 076 (INDIA)
Tel. :91-11-26925858, 26972801, Fax: 91-11-26813619, Emergency Telephone No. 1 1068
Email: assistance@apollohospitalsdelhi.com, Website: www.spollohospdelhi.com
For Online appointment: www.sakapollo.com



26-Jun-2021 GSTIN: 07AAACI2396N1Z4 From Date : Final Interim BIII BIII of Supply 4-Jul-2021 ToDate: BIN To(1): ---Age: 76Yr 6Mth 3Days UHID: APD1.0011272895 Name: Mr. SAHAB SINGH Sex: Male Father Name : BHARATH SINGH : H NO B 6 MAWANA ROAD GANGANAGAR Meerut Uttar IP Number: DELIP338352 Pradesh India, Cell No:91-8126684029 Doctor Name: Dr. ASHISH SABHARWAL BIII No : INT1229639 Speciality : UROLOGY : 04-Jul-2021 Time: 11:42:55 Date Ward Name : 2nd Fir T-I General Ward Bed No : 2249 (A/C MULTI BED UNIT)
Billing Type : CREDIT Authorization No: Admission Date : 26-Jun-2021 03:38:32 pm TPA/Corporate(1): IFFCO TOKIO GENERAL INSURANCE CO LTD Discharge Date : 04-Jul-2021 10:30:46 am Employer Name :

	Service	Amount(*
1 Consultation(9993) 2 Investigations(9993) 3 Investigations(9993) 4 Medical Administration(9993) 5 Medical Services(9993) 6 Non Invasive Procedure(9993) 7 Nursing and Hospitals Utilities 8 Nutritional and Functional Ass 9 OT Charges(9993) 10 OT Consumables(9993) 11 OT Phermacy(9993) 12 Professional Charges(9993) 13 Profile(9993) 14 Room Rent(9993) 15 Ward Consumables(9993) 16 Ward Phermacy(9993)	n(9993)	52,400.0 88,600.0 52,720.0 370.0 950.0 2,800.0 4,530.0 88,600.0 2,071.9 10,013.7 51,800.0 5,780.0 58,700.0 70.0

Mr. SAHAB SINGH

APD1.0011272695

DELIP338352

# ULTRASOUND - WHOLE ABDOMEN

# IMPRESSION:

PROSTATOMEGALY.

FOCAL IRREGULAR THICKENING OF POSTERIOR AND RIGHT POSTERO-LATERAL WALL OF URINARY BLADDER WALL - SUGGEST CYSTOSCOPY CORRELATION.

Findings should be clinically corelated

- END OF THE REPORT -

Dr. Absar Ahmed

REGISTRAR

GSTIN: 075AACI2398N1Z4

Reference No:





#### CASH RECEIPT

Receipt No: DRC4097057

UHID: APD1.0011272695

Date: 28-07-2021 10:53:33 AM Visit Type: Follow Up CS

Received From: Mr. SAHAB SINGH( Mob. 91-8126684029 ) a sum of Rupees One Thousand Five Hundred Only towards

professional fee of Dr. ASHISH SABHARWAL.

Amount : ₹ 1500

Discount : ₹ 0

Net Amount : ₹ 1500

On behalf of ASHISH SABHARWAL

Cashier : NEHA VERMA

Employee Code: 1145343

Discount Reason . no sym

Print Datetime's 28-07-2021 10:53:34 AM

## "KINDLY LEAVE A COPY OF YOUR PRESCRIPTION AT RECEPTION FOR HOSPITAL RECORD"

Keep the records carefully and bring them along during your next visit to our hospital

For enquires, appointments & Telemedicine consultations contact, 011 - 29872159



## Immuno Diagnostics Pvt. Ltd.

Leading Immuno Assays Laboratory of Northern India NABL ACCREDITED & ISO 9001:2015 CERTIFIED LABORATORY CIN No. U74899DL1979PTC009991



Reference No.

: - 2109153744

Pr's Name

: Mrs. BRIMILA

Referred By

Sample Collection Date/Time apple Receiving Date/Time : 24-Sep-2021

Sample From

: NA

: 25-Sep-2021 01:08AM

: S.D.S

Age: Gender

Approved Date

:72 Yrs/Female

MRT-SD

24-Sep-2021

Report Print Time

25-Sep-2021 04:06AM :25-Sep-2021 08:54AM

**Test Description** 

**Observed Value** 

Biological Reference Interval

HbA1c (Glycated Haemoglobin)

High Pressure Liquid Chromatograpy

4.5-6.4 %

In vitra quantitative determination of HbAte in whole blood is utilized in long term monitoring of glycema. The HbAle level correlates with the mean glucuse conventation prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycenia monitoring than do determination of blood glucose or urmany glucose. It is recommended that the determination of HbAle be performed at intervals of 4-6 weeks during Duabetes Mellitus therapy. Results of HbAle should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Mean Plasma Glucose

REMARKS

136.98

ma/dL

Mean Plasma Citicose is based on estimated Average Glucose (eAG) value calculated according to National Glycohomoglobin Standardization Program (NGSP) criteria.

Reference Range (HBA1c) :

Good control

: 4.5 - 6.4 %

Fair control

: 6.5 - 7.4 %

Poor control

: Above - 7.5 %

Reference Range (Average Blood Sugar):

Excellent control : 90 - 120 mg/dl

Good control

: 121 - 150 mg/dl

Average control : 151 - 180 mg/dl

Action suggested: 181 - 210 mg/dl Panic value

: >211 mg/dl

[Note: Average blood sugar-values is calculated from bhale value and it indicates average blood sugar level over past three months.]

Laboratory is NABL Accredited

\*\*\* End Of Report \*\*\*



Dr. Ajay Kumar

Dr. Rohini Bhatia MBBS, MD (Pathology)

Dr. Malti Goya

109, Pocket D&E Shopping Complex, Sarita Vihar, New Delhi 110 076

All results should be co-releated clinically; if results are alarming or unexpected, contact the laboratory immediately. Not valid for Medico-Legal, Result pertain to the specimen submitted. The Tests with an \* are not accredited by NABL.

Name: MR	Sand sings	0	Address:	0	Age: 76
Father name:	- mg 0		B-6, Janga nagar		Male/Female
contact no	3/266 84029	Passpor	t no		

History of present complaints: (please tick the applicable and then write the required details)

Fever / cough/sneezing/Runny nose / Sore throat / Dyspnoea/fatigue/myalgia

ASUM Homotic

Past History	Diabetes Mellitus:	Hypertension:	Cardio vascular Disease:	Any other	Pregnancy?	Any immunocompromised state (any disease/medication etc.)
Duration	~	1	×	c	*	4
		-				

History of travel abroad / COVID a	ffected area	Non Yes: Where & when:	
History of coming in contact with a suspected/confirmed case	No	Yes: Details	

Advice:

get (0010-19 RT PLR gen extend









## Immuno Diagnostics Pvt. Ltd.

Leading Immuno Assays Laboratory of Northern India

NABL ACCREDITED & ISO 9001:2015 CERTIFIED LABORATORY CIN No. U74899DL1979PTC009991

Reference No.

:- 2010150261

Age/Gender

: 72 Yrs/Female

Pt's Name Referred By

: Mrs. URMILA

**MRT-MAS** 

: Dr. S.MAHESHWARI MD

Sample Collection Date/Time

: 02-Oct-2020

Date

\$2-Oct-2020

Sample Receiving Dute/Time

: 03-Oct-2020 12:19AM

Approved Date

#3-Oct-2828 05:29AM

Sample From

: MASTER PATH LAB

Report Print Time

:03-Oct-2020 08:10AM

st Description

**Observed Value** 

Biological Reference Interval

-00

#### HAEMATOLOGY

HbA1c (Glycated Haemoglobin) High Pressure Liquid Ouromatograpy

5.9

4.5-6.4 %

REMARKS

In vitro quantitative determination of HbAIc in whole blood is utilized in long term monitoring of glycomia. The HbAIc level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycomia monitoring than do determination of blood glucose or urinary glucose. It is recommended that the determination of libAIc be performed at intervals of 4-6 weeks during Diabetes Mellinas therapy. Results of libAIc should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

Mean Plasma Glucose

122.63

ma/dL

Mean Plasma Gitreote is based on estimated Average Gitreote (eAG) value calculated according to National Glycobensoglobin Standardization Program (NGSP) criteria.

Reference Range (HBA1c) :

Good control

: 4.5 - 6.4 %

Fair control

: 6.5 - 7.4%

Poor control

: Above - 7.5 %

Reference Range (Average Blood Sugar):

Excellent control: 90 - 120 mg/dl

Good control

: 121 - 150 mg/dl

grage control : 151 - 180 mg/dl

Panic value

Action suggested: 181 - 210 mg/dl : > 211 mg/dl

[Note: Average blood sugar values is calculated from hball value and it indicates average blood sugar level over past three months.]

Laboratory is NABL Accredited

\*\*\* End Of Report \*\*\*



Dr. Ajay Kumar

Dr. Rohini Bhatia M.B.B.S., M.D. (Pathology) Hony Consultant Pathologist

Dr. Malti Goyal

109, Pocket D&E Shopping Complex, Sarita Vihar, New Delhi-110 076

All results should be co-releated clinically; if results are alarming or unexpected, contact the laboratory immediately. Not valid for Medico-Legal. Result pertain to the specimen submitted. The Tests with an \* are not accredited by NABL.

## YASH POLY CLINIC

J-1/2, Sanjay Nagar, Sec-23, Raj Nagar, Ghaziabad Ph.: 0120-4305447

Dr. K.S. Sisodia Sahab Singh M.B.B.S.

Ex. CMO (N.P.C.C. Ltd.)

Subset and

Date: .04/.8/21

Talosoft down

S. Lenocold zue

Page 2 of Indraprastha Apollo

14 am



Mr. SAHAB SINGH -	Range	Unit	26-Jun-21	27-Jun-21	28-Jun-21	29-Jun-21
DELIP338352	Lange		19:04 0.2			04:54 0.22
Monocyte	0.2-1	10°/mm³	1.0.0	-		04.54 2.14
Neutrophil	2-7	10°/mm°	19.04 6.1			1-11-1

Mr. SAHAB SINGH -	P	ange	T	Unit	3	0-1	un-21	01	Jul-2	21	02-Ju	11-21	1	04-Ju		1	
DELIP338352	"	ang.	+-		+	06	7.8	04:36	8.	2	05:11	8.2	04	:54	8.7	1	
emoglobin	13 - 17	1	gldl		-	_	1.96		_		05:11	2.17	0	1:54	2.50	1	
BC Count	4.5 - 5	5.5	Millie	ontul	-	:06	115.6	$\vdash$	_		05:11	116	.1 0	4:54	110.6	5	
ACV	83 - 1	101	n		_	1:06		$\vdash$	_		05:11	37.	5 0	4:54	34.8		
MCH	27 -	32	99		_	8:06		╁	_	_	05:11	32.	3 0	04:54	31.4		
MCHC	31.5	5 - 35	9/0	si .	-	8:06		+		24.5	05:11	25.	2	04:54	27.7		
Haematocrit	40	- 50	76		_	15:0		04:	36	24.0	05:11	22	.9	04:54	23.1	8	
RDW	11.	5 - 14.5	×		_	18:0	_	+		4.37	05:11	5.6	63	04:54	10.	05	
WBC Count	4.	- 10	1	04mm*		18:0		+	36	4.31	05:11	_		04:54		5	
Neutrophils	40	0 - 60		%		18:		-	_	_	05:1	_	0.1	04:54	9.4		
parametric National Confession	- 6	20 - 40		%		18:		-		_	-	-	0.4	04:54		7	
Lymphocyles	$\rightarrow$	2-10		%		18	:06 11.2	1	_	_	05:1	-	.7	04:5		_	1
Monocytes	$\neg$	1-6		%		10	:06 4.7	1	_	_	05:1	_	0.1	04:5	-	_	١
Eosinophils		0-1		7%		11	8:06 0.4	1	_		05:1	-	_	04:5		93	1
Basophils	_	150 - 410		10º/mm		1	8:08 13	7	04:36	137	05:	11 '	129	100.5	- "	_	1
Platelets	_	0.2-2		%		T					-	_	_	╀	_	_	1
Reticulocytes	_	1		Secon	ds	7	04:46 14	.5			_		_	+	_	_	1
PT Patient Mean Normal PT	_	+		Secon	ds	7	04:46 1	1.2			-		_	+	_	_	H
	_	+	_	1		٦	04:46 1	.3			-	_	_	+	_	_	4
URINE - colour	_	1 - 15		$\top$							-		_	+	-	_	4
URINE - specific gn	evity.	1.001	- 1.03	$\top$					_		-		_	+	_	_	$\dashv$
URINE - pH	,	5-8		1					1		-		_	+	_	_	_
URINE - protein		1 - 15		$\neg$					1		-		_	+	_		_
URINE - glucose		1 - 15	5						1		-		_	-	_	_	_
URINE - ketones	_	1-1	5						1		_	_	_	-	_	_	_
URINE - bile pign	nents	1-1	5						1		- 1	_	_	-		_	_
URINE - urobiline		1-1	15						1			1	_		_	_	_
URINE - nitrite	-	1-	15						1			1	_		_	_	_
URINE - RBC		0-	2						1			1	_		⊢	_	_
URINE - WBC		1-	15						$\perp$			1			+	_	_
URINE - crysta	is .	0	- 10								_	1	_	_	+-	_	
URINE - epithe		. 0	- 10									1	_	_	+	_	_
URINE - casts	_	_	-10							_		1		_	+	_	_
STOOLS - 00	cult bloc	M	U.							_		4			+		_
Basophils-			0-0.1		10°imm	*	18:0	6 (	0.0	1		0	5:11	0.01	04:	54	0.
Biological Re	rierence	Interval			Second	da	04:	46	10.0-	12.4		1					
Eceinophi	_		0.02 -	0.6	10°/mr	nª	18:	06	0.2	1		1	05:11	0.1	0 0	154	0
Lymphocyt	•		1-3		10*/m	m*	18	:00	0.8	1			05:11	0.5	6 0	4:54	0
Monocyte			0.2-		10*fm		1	:06	0.5	_		$\neg$	05:11	0.5	S 10	4:54	-

18/6/2021 1:( 8/6/2021 1:3 V8/2021 4:53 erim

Bio. Rei

(90%) en four yroidism



GSTIN: 07AAACI239BN1Z4

Final Interim Bill Bill of Supply

From Date : ToDate:

26-Jun-2021 4-Jul-2021

Bill To(1): IFFCO Tokio General Insurance

Age: 76Yr 6Mth 3Days

UHID: APD1.0011272695

Name : Mr. SAHAB SINGH

Sex: Male

Father Name : BHARATH SINGH

IP Number: DELIP338352

Address

: H NO B 6 MAWANA ROAD GANGANAGAR Meerut Uttar Pradesh India, Cell No:91-8126684029

BIII No : INT1229727

Speciality : UROLOGY

Doctor Name : Dr. ASHISH SABHARWAL

Date : 04-Jul-2021

Time: 17:46:09

Amount(\*)

Ward Name : 2nd Fir T-I General Ward Bed No : 2249 (A/C MULTI BED UNIT)

Billing Type : CREDIT Authorization No: 2021062

TPACOrporate(1): IFFCO TOKIO GENERAL INSURANCE CO LTD

Admission Date : 26-Jun-2021 03:38:32 pm

Discharge Date : 04-Jul-2021 11:43:25 am

Employer Name:

		Patriouning
SI. No	Service	52,400.00
1	Consultation(9993)	88,600.00
2	Invasive Procedures(9993)	52,720.00
3	Investigations(9993)	370.00
4	Medical Administration(9993)	950.00
5	Medical Services(9993)	33,550.00
6	Non invasive Procedure(9993)	2,800.00
7	Nursing and Hospitals Utilities(9993)	4,530.00
8	Nutritional and Functional Assessment Charges(9993)	88,600.00
	OT Charges(9993)	2,071.92
10	ot Consumables (9993) ot Pharmacy (9993) Draft not Final	10,013.70
11	OT Pharmacy(9993) Drall [IOL FIIId]	51,800.00
12	Professional Charges(9993)	5,780.00
13	Profile(9993)	58,700.00
14	Room Rent(9993)	70.04
15	Ward Consumables(9993) Ward Pharmacy(9993)	18,862.77





# dr. akshat's pathology labs

Patient Name

: Mrs. BIRMALA

Age/Sex

: 72 Yrs. / Female

Clinician-In-Charge

: Dr.SELF : ARJUN

Centre

Log No.

: 29

Date

:08/Mar/2021

Sample

: BLOOD

Taken From

Investigation

HAEMATOLOGY HAEMOGLOBIN

Result

Units

Normal-Range

10.1

GM%

12.5 - 16.5

----(END OF REPORT)----

Dr.Pradeep Tyagi M.B.B.S , M.D Reg.No.23868 -{Checked By}-

Dr.Akshat Tyagi M.B.B.S,Ph.D(Biochem),MD Reg.No.14193

डा० अक्षत पैथोलोजी लेब्स

An ISO 9001 : 2015 Certified Lab 24 Hrs Open

कृ.पृ.स. P.T.O.

## MRS BIRMILA

## MORPHOLOGY & DYNAMIC OBSERVATIONS

## MITRAL VALVE

Normal in opening area and leaflets morphology. AML & PML motion is normal in diastole, Systolic motion is also normal MR-GRI

## LEFT VENTRICLE

Cavity size is normal in Diastole. End -systolic size is also normal. Wall thickness normal.

RWMA - not significant AT REST. No LV mass.

#### **FUNCTIONS**

Systolic functions ( contractility) is normal Diastolic functions is normal.

## RT VENTRICLE,

Is normal in cavity size. Free wall thickness is normal.

#### LT ATRIUM

Normal in size. No clot / myxoma present

#### RT ATRIUM

Normal in size & position.

IAS & IVS is normal.

#### **AORTIC**

Root size is normal. Aorto-septal continuity is maintained. All 3 leaflets are normal in morphology & motion.

### PULMONARY

MPA is normal. Leaflets appear to be morphologically normal.

#### TRICUSPID

Leaflets morphology is unremarkable.

PERICARDIUM normal .no effusion seen.



Investigation Report Laboratory

Patient Name

: Mr.Napendra Kumar

Age/Gender MaxID/Lab ID 35 Y 3 M 26 D /M

Ref Doctor

BLKH.1101115/1298042315085

: Deep Goel/Ravindra Vats/ Amir

Centre

OP/IP No/UHID

Collection Date/Time

Reporting Date/Time

: 1566 - BLK Superspeciality Hospital : IP/103458/BLK-NS C BLOCK (3F)/340 -A/

: 10/Apr/2023 10:55AM

: 14/Apr/2023 05:44PM

Histopathology

Histo Biopsy Medium Specimens

Histopathology Number: - S-4153/23

Clinical History:-Cholelithiasis and post biliary pancreatitis Preoperative Diagnosis - Acute

cholelithiasis cholecystectomy

Specimen Type: - Gall bladder

Gross Description:

Specimen received in container labeled as "NAPENDRA KUMAR"

Received partially cut opened specimen of gall bladder measuring 9 cm in length. Outer surface smooth and shiny and focally congested. Mucosa is velvety and bile stained. Wall thickness varies from 0.3 to 0.6 cm. No calculus seen.

Representative section submitted in cassettes A-B.

A: Neck

B: Body and fundus

Microscopic Description:

Sections show inflamed gall bladder wall with foci of ulceration of mucosal epithelial lining with underlying inflammatory granulation tissue, focal areas of flattening of mucosa, with edema, congestion and few of the hyperplastic mucosal papillary formations identified filled with foamy macrophages. Transmural acute on chronic inflammation identtified comprising of neutrophils, lymphocytes and plasma cells extending to perimuscular tissue. Mucosal outpouchings through the muscle wall is prominent. No granuloma seen. No dysplasia / evidence of malignancy.

Final Diagnosis: - Gall bladder:

Acute on chronic cholecystitis with cholesterolosis.

\*\* Slides & blocks for second opinion will be issued to the patient / attendant after 48 hours of submitting a formal request, slides are chargeable (Time between 9 AM to 5 PM)

\*\*\* End Of Report \*\*\*







Test Name :	Amylase, Serum	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Amylase	264*	28 - 100
Test Name :	SGOT - Aspartate Amino Transferase, Serum	20 - 100
Date	08-04-2023	Reference
Time	09:34:AM	Range
SGOT- Aspartate Tran	saminase (AST)7.6	0 - 40
Test Name :	Bilirubin Total and Direct	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Bilirubin (Total)	0.8	0 - 0.3
Bilirubin (Direct)	0.5	0.0 - 0.9
Bilirubin (Indirect)	0.3	0.0 - 0.9
Test Name :	GGTP (Gamma GT), Serum	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Gamma Glutamyl Tran	sferase 200*	1 - 60
Test Name :	Lipase	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Lipase	444.6*	13 - 60
Test Name :	Total Proteins with Albumin, Globulin, A/G, Serum	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Total Protein	6.7*	3.97 - 4.9
Albumin	3.9*	3.0 - 3.7
Globulin	2.8*	1.0 - 2.0
A.G. ratio	1.39*	1.0 - 2.0
Test Name :	Alkaline Phosphatase	
Date	08-04-2023	Reference
Time	09:34:AM	Range
Alkaline Phosphatase	142 ·	40 - 130
Test Name :	SGPT - Alanine Amino Transferase, Serum	
Date	08-04-2023	Reference
Time	09:34:AM	Range
SGPT- Alanine Transa	minase (ALT) 110.8	10 - 50

Dr. Deep Goel/Ravindra Vats/ Amir Mushtaq Parray/ /Mohammad Riyaz Senior Director & HOD

Capture Date/Time: 11-04-2023 09:17:59

User Name: Himanshu





QT/QTGB 386 / 435 ms aVR / App 134 ms aVR / App 104 ms av	90 II 0 I		111211	/Sex: 3 /Sex: 3 /Sex: 3 /Sex: 3 /Vats/	P No: 103458 *671101115* IMAR Ph.No: 9868844764 Age/Sex: 35 Years 3 Months/Male F) DOA/6/4/2023 8:36:51PM Ilth & Allied Insu / TPA Indra Vats/ Amir Mushtaq Parray/ /Mic Goel Dept: Surgical Gastroen
	\{\bar{\}}	)   g		\ \ \ \	
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AUF		\ \ \ \ \		\ -\{ -\}	
			{	{ }	\ \ \ \



Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID Ref Doctor

: BLKH.1101115/1298042309581

: Dr.Cmo

Centre

OP/IP No/UHID

Collection Date/Time

Reporting Date/Time

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

: 06/Apr/2023 09:21PM

: 07/Apr/2023 09:08AM

**Clinical Biochemistry** 

Liver and Kidney Function Combined Panel

Urea, Serum

Date

06/Apr/2023

09:21PM

Urea

19.2

Urease, Kinetic

Unit

Bio Ref Interval

10.0 - 48.5 mg/dl

Creatinine, Serum

Date

06/Apr/2023

09:21PM

Creatinine

Jaffe, Kinetic

eGFR MORD 0.9

95.86

Unit

Bio Ref

Interval

mg/dl

0.7 - 1.3

mL/minute/1.73 < 60

m2

Uric Acid, Serum

Date

06/Apr/2023

09:21PM

Uric Acid

Uricase

3.4

9.3

Bio Ref Interval

Bio Ref Interval

mg/dl

Unit

3.4 - 7.0

Calcium, Serum

06/Apr/2023 09:21PM

Calcium (Total)

BAPTA

Unit

mg/dl

8.6 - 10.0





Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

OP/IP No/UHID

71.71.717

Temp-12A/ : 06/Apr/2023 09:21PM

Collection Date/Time Reporting Date/Time

: 07/Apr/2023 09:08AM

**Clinical Biochemistry** 

Liver and Kidney Function Combined Panel

Inorganic Phosphorus, Serum\*

Date

06/Apr/2023

09:21PM

Phosphorus(inorg) Phosphomolybdate 3.3

Unit

**Bio Ref Interval** 

mg/dl

2.4 - 4.5

Page 2 of 4



Patient Name Age/Gender

: Mr. Napendra Kumar

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-OP/IP No/UHID

Temp-12A/

Collection Date/Time Reporting Date/Time

: 06/Apr/2023 09:21PM : 07/Apr/2023 09:08AM

Clinical Blochemistry

Liver and Kidney Function Combined Panel

Sodium, Serum

Date

06/Apr/2023

09:21PM

Sodium

ISE Indirect

139.0

Unit

Bio Ref Interval

mmol/L 136 - 145

Potassium, Serum

Date

Date

06/Apr/2023

09:21PM

Potassium ISE Indirect

4.3

Unit

Unit

g/dL

g/dL

g/dL

Ratio

**Bio Ref Interval** 

Bio Ref Interval

6.0 - 8.3

3.0 - 3.7

1.0 - 2.0

3.97 - 4.95

3.5 - 5.1mmol/L

Total Proteins with Albumin, Globulin, A/G, Serum

**Total Protein** 

Biuret Method Albumin

BCG Globulin

Calculated A.G. ratio

Ratio

06/Apr/2023

7.60

Bilirubin Total and Direct, Serum

1.5

09:21PM

06/Apr/2023

4.6

3.0

Unit

Bio Ref Interval

Bilirubin (Total) Diazo

Diazo

Date

09:21PM 0.5

0.2

Bilirubin (Indirect) Calculated

Bilirubin (Direct)

0.30

mg/dl

mg/dl

mg/dl

0-0.3 0.0 - 0.9

0.0 - 1.2

SGOT - Aspartate Amino Transferase, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Page 3 of 4

SGOT- Aspartate

UV without P5P

Transaminase (AST)

73.5

U/L

0-40

Test Performed at: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi

Booking Centre: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi, 01130403040

The authenticity of the report can be verified by scanning the Q R Code on top of the page





Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

OP/IP No/UHID

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time

Reporting Date/Time

: 06/Apr/2023 09:21PM : 07/Apr/2023 09:08AM

**Clinical Blochemistry** 

Liver and Kidney Function Combined Panel

SGPT - Alanine Amino Transferase, Serum

Date

06/Apr/2023

09:21PM

82

Unit

Bio Ref Interval

SGPT- Alanine

Transaminase (ALT) UV without PSP

U/L

10 - 50

Alkaline Phosphatase, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Alkaline Phosphatase

PNP-AMP Buffer

135

U/L

40 - 130

GGTP (Gamma GT), Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Gamma Glutamyl

Transferase

Gama-G-carboxy anitide

U/L

1-40

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Results to follow:

Globulin: Sample not yet received

Principal Consultant & HOD (DMC Reg No.44935)

Page 4 of 4





Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time Reporting Date/Time

: 06/Apr/2023 09:21PM : 07/Apr/2023 09:08AM

Clinical Blochemistry

Lipase, Serum

Date

06/Apr/2023

09:21PM

Lipase

Enzymatic method

41230

Unit

Bio Ref Interval

U/L

13 - 60

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Results to follow:

Globulin: Sample not yet received

Principal Consultant & HOD (DMC Reg No.44935)





Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

06/04/2023

Ref. Doctor:

CMO

ReportDate:

07/04/2023

#### USG Whole Abdomen

Clinical history: Abdominal pain and dyspepsia.

Findings:

Large bowel gases (+ + +).

Left and caudate lobe of liver and retroperitoneum are obscured by gases.

er is normal in size (span is 126mm) and shows increased parenchymal echogenicity - suggestive of grade II fatty liver. Few confluent fat spared areas are noted in segment V of right lobe of liver. Hepatic veins are normal. IHBR not dilated. Portal vein is normal.

Gall Bladder is distended and packed with thick, inspissated heteroechoic sludge within. Gall bladder wall vascularity visualized. No obvious calculus was noted in the neck; however, the same cannot be ruled out. No evidence of pericholecystic collection. Adv:- Further evaluation with CECT whole abdomen.

Proximal CBD is not dilated.

Visualized pancreas is normal in outline and showing mild fatty infiltration. No evidence of any focal lesion or calcification is seen.

Spleen is normal in size (span is 88mm) and shows normal echopattern. No focal lesion is noted.

Both kidneys are normal in size and show normal echopattern. The CM differentiation is maintained. No calculus or hydronephrosis is seen.

ight kidney measures 103 x 45mm. Left kidney measures 101 x 52mm.

Urinary bladder is partially distended (volume approx. 97cc) and appears normal.

Prostate is normal in size and echotexture. It measures 29 x 27 x 22mm (wt 9gms).

No obvious free fluid is seen.

IMPRESSION: USG findings are suggestive of -

- Distended gall bladder packed with thick inspissated sludge.
- Hepatic and pancreatic fatty infiltration.

Please correlate clinically.

Quital

Dr.Payal Mittal Consultant

M.D.

Dr.ROHIT SUNDEEP KARNA
DMRD Resident
MBBS,DMRD

Version: 1



Patient Name

: Mr. Napendra Kumar

: 35 Y 3 M 22 D /M

Age/Gender MaxID/Lab ID

: BLKH.1101115/1298042309589

Ref Doctor

· Dr Cmo

Centre

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time

: 06/Apr/2023 09:31PM

Reporting Date/Time

OP/IP No/UHID

: 07/Apr/2023 09:05AM

Serology

Hbsag Hcv Antibody & Hiv 1&2 Combo Screen Panel

**Test Name** 

Result

Unit

**Bio Ref Interval** 

HIV I & II, Serum

CMIA

HIV (I and II)

Nonreactive

S/CO

Non-Reactive

Interpretation

>=1.00 S/CO: Reactive. <1.00 S/CO : Nonreactive.

mment: The ARCHITECT HIV Ag/Ab Combo assay is a chemiluminescent microparticle immunoassay (CMIA) for the simultaneous qualitative detection of HIV p24 antigen and antibodies to human immunodeficiency virus type 1 and/or type 2 (HIV-1/HIV-2) in human serum or plasma. It is intended to be used as an aid in the diagnosis of HIV-1/HIV-2 infection. It does not distinguish between the detection of HIV p24 antigen, HIV-1 antibody, or HIV-2 antibody. This is a screening test. Negative result does not exclude the possibility of exposure or infection . A repeatedly reactive specimen should be investigated further with sensitive, supplemental HIV-specific tests, such as immunoblot, antigen tests, & HIV nucleic acid tests. Sensitivity is 100% and Specificity is >99.5%.

HCV antibody, Serum

**HCV Antibody** CMIA

Nonreactive

S/CO

Nonreactive .

#### Interpretation

>= 1.00 S/CO : Reactive < 1.00 S/CO : Nonreactive

#### Comment:

ti-HCV assay is a chemiluminescent microparticles immunoassay (CMIA) for the qualitative detection of antibody to hepatitis C virus (anti-HCV) in human m and plasma. This is a screening test, False positive results may occur. Reactive Screening test should be further confirmed by supplemental tests like other HCV specific immunoassays, immunoblot assay or molecular methods to detect HCV RNA or a combination thereof. Sensitivity is >99% and Specificity is >99.5%.





Patient Name

: Mr. Napendra Kumar

Centre

: 1566 - Blk Superspeciality Hospital

Age/Gender MaxID/Lab ID : 35 Y 3 M 22 D /M

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

: BLKH.1101115/1298042309589

Collection Date/Time

Temp-12A/

Ref Doctor

: Dr.Cmo

Reporting Date/Time

: 06/Apr/2023 09:31PM : 07/Apr/2023 09:05AM

Serology

Hbsag Hcv Antibody & Hiv 1&2 Combo Screen Panel

**Test Name** 

Result

Unit

Bio Ref Interval

Hepatitis B Surface Antigen, Serum

CMIA

HBsAg CMIA

Nonreactive

S/CO

Nonreactive

Interpretation

>= 1.00 S/CO: Reactive < 1.00 S/CO : Nonreactive

mment: HBsAg Qualitative II assay is a chemiluminescent microparticles immunoassay (CMIA) for the qualitative determination of hepatitis B surface antigen (HBsAg) in human serum and plasma. Samples nonreactive by ARCHITECT HBsAg Qualitative II assay are considered negative and need not be tested further. A sample which is found to be repeatedly reactive should be confirmed by a neutralizing confirmatory test utilizing human anti-HBs. HBsAg reactivity should be correlated with patient history & the presence of other hepatitis B serological markers. Sensitivity is >100.0 % & Specificity is 99.93%.

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*



Page 2 of 2



Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

06/04/2023

Ref. Doctor:

CMO

ReportDate:

07/04/2023

#### X-Ray Chest PA/AP View

Bilateral lung fields appear normal with no obvious focal pulmonary parenchymal lesion.

Bilateral CP angles are clear.

Cardiac size is normal.

crease correlate clinically.

Dr.Prem Kumar Ganesan

Director & HOD

M.D.

A

Dr.ROHIT SUNDEEP KARNA
DMRD Resident
MBBS,DMRD



**Patient Name:** 

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

06/04/2023

Ref. Doctor:

CMO

ReportDate:

07/04/2023

X-Ray Abdomen - Erect & Supine

No evidence of significant fluid levels.

No evidence of air under diaphragm.

Large bowel shows fecal and gas mottling.

and old inverted U-shaped gaseous distended loop of bowel is noted in the hypogastrium.

Few phleboliths noted in left hemipelvis.

Adv.: CT abdomen correlation.

Please correlate clinically.

Dr.Prem Kumar Ganesan

Director & HOD

M.D.

Dr.ROHIT SUNDEEP KARNA

DMRD Resident MBBS,DMRD



Centre

Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 23 D /M

MaxID/Lab ID

: BLKH.1101115/1298042311414

Ref Doctor

: Dr.Deep Goel/Ravindra Vats/ Amir

: 1566 - Blk Superspeciality Hospital

: IP/103458/BLK-NS C BLOCK (5F)/536 B/

Collection Date/Time

OP/IP No/UHID

: 08/Apr/2023 06:01AM

Reporting Date/Time

: 08/Apr/2023 09:32AM

**Clinical Blochemistry** 

Lipase, Serum

Date

08/Apr/2023

444.6

06:01AM

Lipase

Enzymatic method

Bio Ref Interval

U/L

Unit

13 - 60

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Principal Consultant & HOD (DMC Reg No.44935)



Page I of 1



Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

08/04/2023

Ref. Doctor:

Deep Goel/Ravindra Vats/ Amir Mushtaq Parray//Mohammad Riyaz ReportDate:

08/04/2023

#### CT Whole Abdomen with Contrast

The examination was conducted on spectral scanner. Pre and post contrast images were obtained. Non ionic contrast of 65 ml omnipaque given intra venously at the rate of 2 ML/sec through a injector. No contrast reaction seen.

Clinical details: Acute biliary pancreatitis.

#### Findings:

Liver is mildly enlarged in size measuring 15.6cm in supero-inferior dimension. It shows mildly reduced enuation consistent with fatty change. No focal lesion is seen within the liver. The intrahepatic biliary radicals are not dilated. Portal vein is normal in diameter.

Gall bladder is distended and appears slightly hyperdense on plain study with a mild pericholecystic edema and patchy enhancement on its walls. No intraluminal calcific densities are seen.

Pancreas shows slight fatty changes in the region of uncinate process and head. Rest of the pancreas is unremarkable. The peripancreatic fat planes are maintained.

Spleen is normal in size, outline and attenuation.

Both kidneys are normal in size, outline and attenuation. Corticomedullary differentiation is maintained. No calculus / hydronephrosis is seen.

w subcentimeter sized mesenteric and paraaortic lymphnodes are seen. Stomach and duodenum are normal. Appendix is unremarkable.

The small and large bowel loops are normal. Appendix is unremarkable.

Urinary bladder is partially distended.

Prostate is unremarkable. A speck of calcification is seen in left posterolateral margin.

No ascites or pleural effusion is seen.

Bones under view are unremarkable.

#### IMPRESSION: CT imaging reveals:

- Mild hepatomegaly with mild fatty changes in the liver.
- Distended gall bladder with sludge, mild pericholecystic edema and patchy enhancement on its walls. No intraluminal calcific densities.
- •Mild fatty change in the uncinate process and head of the pancreas. Rest of the pancreas and



**Patient Name:** 

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

08/04/2023

Ref. Doctor:

Deep Goel/Ravindra Vats/ Amir Mushtaq Parray/ /Mohammad Riyaz

ReportDate:

08/04/2023

peripancreatic region is unremarkable.

Please correlate clinically.

Dr.Kanika Sekhri Sethi

Senior Consultant

M.D,D.N.B,EDINR



Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time Reporting Date/Time

: 06/Apr/2023 09:21PM

: 07/Apr/2023 09:08AM

**Clinical Biochemistry** 

Liver and Kidney Function Combined Panel

Urea, Serum

Date

06/Apr/2023

09:21PM

Urea

Urease, Kinetic

19.2

Unit

Bio Ref Interval

mg/dl

10.0 - 48.5

C Inine, Serum

Date

06/Apr/2023

09:21PM

Jaffe, Kinetic eGFR

reatinine

MORD

0.9

95.86

Unit

Bio Ref

Interval

mg/dl

0.7 - 1.3

mL/minute/1.73 < 60

m2

Uric Acid, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Uric Acid Uricase

3.4

mg/dl

3.4 - 7.0

Calcium, Serum

Date

06/Apr/2023

09:21PM

9.3

Unit

Bio Ref Interval

mg/dl

8.6 - 10.0

Test Performed at: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi Booking Centre: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi, 01130403040 The authenticity of the report can be verified by scanning the Q R Code on top of the page





Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time

: 06/Apr/2023 09:21PM

Reporting Date/Time

: 07/Apr/2023 09:08AM

#### Clinical Biochemistry

Liver and Kidney Function Combined Panel



Sodium, Serum

Date

06/Apr/2023

09:21PM

Sodium

139.0

Unit

Bio Ref Interval

ISE Indirect

mmol/L

136 - 145

P. sium, Serum

Date

06/Apr/2023

09:21PM

Unit

Unit

g/dL

g/dL

g/dL

Ratio

**Bio Ref Interval** 

Bio Ref Interval

6.0 - 8.3

3.97 - 4.95

3.0 - 3.7

1.0 - 2.0

**∦otassium** ISE Indirect

4.3

mmol/L 3.5 - 5.1

Total Proteins with Albumin, Globulin, A/G, Serum

Date	06/Apr/202 09:21PM
Total Protein Biuret Method	7.60
Albumin BCG	4.6
Globulin Calculated	3.0
A.G. ratio	1.5

Bilirobin	Total	and	Direct,	Serum
-----------	-------	-----	---------	-------

Da	06/Apr/2023 09:21PM	Unit	Bio Ref Interval
Bilirubin (Total)	0.5	mg/dl	0.0 - 1.2
Bilirubin (Direct)	0.2	mg/dl	0 - 0.3
Bilirubin (Indirect) Calculated	0.30	mg/dl	0.0 - 0.9

#### SGOT - Aspartate Amino Transferase, Serum

Date	06/Apr/2023 09:21PM	Unit	Bio Ref Interval
SGOT- Aspartate Transaminase (AST) UV without PSP	73.5	U/L	0 - 40

Test Performed at: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi Booking Centre: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi, 01130403040 The authenticity of the report can be verified by scanning the Q R Code on top of the page



Page 3 of 4



Patient Name

: Mr. Napendra Kumar

: BLKH.1101115/1298042309581

Age/Gender MaxID/Lab ID : 35 Y 3 M 22 D /M

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time Reporting Date/Time

: 06/Apr/2023 09:21PM : 07/Apr/2023 09:08AM

**Clinical Biochemistry** 

Liver and Kidney Function Combined Panel

SGPT - Alanine Amino Transferase, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

SGPT- Alanine UV without P5P

Transaminase (ALT)

82

U/L

10 - 50

Alkaline Phosphatase, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Alkaline Phosphatase

PNP-AMP Buffer

135

U/L

40 - 130

GGTP (Gamma GT), Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Gamma Glutamyl

Transferase

Gama-G-carboxy anitide

214

U/L

1-40

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Principal Consultant & HOD

Results to follow:

Globulin: Sample not yet received

(DMC Reg No.44935)

Page 4 of 4





Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

08/04/2023

Ref. Doctor:

Deep Goel/Ravindra Vats/ Amir

ReportDate:

08/04/2023

Mushtaq Parray//Mohammad Riyaz

#### CT Whole Abdomen with Contrast

The examination was conducted on spectral scanner. Pre and post contrast images were obtained. Non ionic contrast of 65 ml omnipaque given intra venously at the rate of 2 ML/sec through a injector. No contrast reaction seen.

Clinical details: Acute biliary pancreatitis.

F'=c' : qs:

Liver is mildly enlarged in size measuring 15.6cm in supero-inferior dimension. It shows mildly reduced etanuation consistent with fatty change. No focal lesion is seen within the liver. The intrahepatic biliary radicals are not dilated. Portal vein is normal in diameter.

Gall bladder is distended and appears slightly hyperdense on plain study with a mild pericholecystic edema and patchy enhancement on its walls. No intraluminal calcific densities are seen.

Pancreas shows slight fatty changes in the region of uncinate process and head. Rest of the pancreas is unremarkable. The peripancreatic fat planes are maintained.

Spleen is normal in size, outline and attenuation.

Both kidneys are normal in size, outline and attenuation. Corticomedullary differentiation is maintained. No ulus / hydronephrosis is seen.

few subcentimeter sized mesenteric and paraaortic lymphnodes are seen. Stomach and duodenum are normal. Appendix is unremarkable.

The small and large bowel loops are normal. Appendix is unremarkable.

Urinary bladder is partially distended.

Prostate is unremarkable. A speck of calcification is seen in left posterolateral margin.

No ascites or pleural effusion is seen.

Bones under view are unremarkable.

### IMPRESSION: CT imaging reveals:

- Mild hepatomegaly with mild fatty changes in the liver.
- Distended gall bladder with sludge, mild pericholecystic edema and patchy enhancement on its walls.

No intraluminal calcific densities.

•Mild fatty change in the uncinate process and need of the pancreas. Rest of the pancreas and



Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

08/04/2023

Ref. Doctor:

Deep Goel/Ravindra Vats/ Amir Mushtaq Parray/ /Mohammad Riyaz

ReportDate:

08/04/2023

peripancreatic region is unremarkable.

Please correlate clinically.

Dr.Kanika Sekhri Sethi

Senior Consultant

M.D.D.N.B,EDINR



Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 23 D /M

MaxID/Lab ID

: BLKH.1101115/1298042311414

Ref Doctor

: Dr.Deep Goel/Ravindra Vats/ Amir

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IP/103458/BLK-NS C BLOCK (5F)/536 B/

Collection Date/Time

: 08/Apr/2023 06:01AM

Reporting Date/Time

: 08/Apr/2023 09:32AM

**Clinical Biochemistry** 

Amylase, Serum

Date

08/Apr/2023

06:01AM

264

Unit

**Bio Ref Interval** 

U/L

28 - 100

Amylase G 7 PNP, Blocked

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Frincipal Consultant & HOD (DMC Reg No.44935)





Patient Name

: Mr. Napendra Kumar

Age/Gender

: 35 Y 3 M 23 D /M

MaxID/Lab ID Ref Doctor

: BLKH.1101115/1298042311414

: Dr.Deep Goel/Ravindra Vats/ Amir

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IP/103458/BLK-NS C BLOCK (5F)/536 B/

Collection Date/Time

: 08/Apr/2023 06:01AM

Reporting Date/Time

: 08/Apr/2023 09:32AM

#### **Clinical Biochemistry**

iver Function Test (LFT), Ser				Unit	Bio Ref Interval
Date 0	08/Apr/2023				
	06:01AM			g/dL	6.0 - 8.3
Riuret Method	6.70		2	g/dL	3.97 - 4.95
Albumin BCG	3.9			g/dL	3.0 - 3.7
	2.8			Ratio	1.0 - 2.0
A.G. ratio	1.4			mg/dl	0.0 - 1.2
Bilirubin (Total)	0.8			mg/dl	0 - 0.3
Bilirubin (Direct)	0.5			mg/dl	0.0 - 0.9
Bilirubin (Indirect) Calculated	0.30			U/L	0 - 40
SGOT- Aspartate Transaminase (AST) UV without P5P	77.6			U/L	10 - 50
SGPT- Alanine Transaminase (ALT)	111			-	
UV without P5P AST/ALT Ratio	0.70			U/L	40 - 130
Alkaline Phosphatase PNP-AMP Buffer	142			U/L	1 - 60
GGTP (Gamma GT), Serum Gama-G-carboxy antitide	200.0				

\*\*\* End Of Report \*\*\*



Principal Consultant & HOD (DMC Reg No.44935)





Patient Name:

Mr.NAPENDRA KUMAR

35 Year(s)/Male

Age/Sex: UHID:

BLKH.1101115

Ref. Doctor:

Location:

**BLK Hospital** 

IPNo:

3459032

OrderDate:

06/04/2023

CMO

ReportDate:

07/04/2023

X-Ray Abdomen - Erect & Supine

No evidence of significant fluid levels.

No evidence of air under diaphragm.

Large bowel shows fecal and gas mottling.

An old inverted U-shaped gaseous distended loop of bowel is noted in the hypogastrium.

Few phleboliths noted in left hemipelvis.

Adv.: CT abdomen correlation.

Please correlate clinically.

Dr. Prem Kumar Ganesan

Director & HOD

M.D.

Dr.ROHIT SUNDEEP KARNA DMRD Resident MBBS,DMRD



Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate: ReportDate: 06/04/2023 07/04/2023

Ref. Doctor:

СМО

## X-Ray Chest PA/AP View

Bilateral lung fields appear normal with no obvious focal pulmonary parenchymal lesion.

Bilateral CP angles are clear.

Cardiac size is normal.

Dase correlate clinically.

Dr.Prem Kumar Ganesan Director & HOD

M.D.

Dr.ROHIT SUNDEEP KARNA
DMRD Resident
MBBS.DMRD



Patient Name Age/Gender

: Mr. Napendra Kumar

: 35 Y 3 M 22 D /M

MaxID/Lab ID

: BLKH.1101115/1298042309589

Ref Doctor

**Test Name** 

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

OP/IP No/UHID

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time Reporting Date/Time

: 06/Apr/2023 09:31PM : 07/Apr/2023 08:17AM

**BLOOD CENTRE** 

Result

Unit

**Bio Ref Interval** 

TYPE AND SCREEN, Whole Blood / EDTA

**BLOOD GROUP** 

BLOOD GROUP ABO RH

Technique

AB POSITIVE

Hemagglutinationmicroplate based

ANTIBODY SCREEN

ANTIBODY SCREEN

Technique

Negative

Solid phase red cell

adherence assay microplate based

Comment:

Negative antibody screen indicates the absence of allo-antibodies against red cell antigens on the cell panel used for screening or presence of antibodies in low titre/evolving phase. Negative screen may also be seen in Solid Phase Red Cell Adherence Assay (SPRCA), if salinereactive IgM allo-antibodies (anti-M, P1,Lea, Leb etc.) are present in patient's blood. SPRCA technique is designed to detect unexpected lgG antibodies to red blood cell antigens, as saline-reactive IgM allo-antibodies are usually not clinically significant.

A Positive antibody screen indicates the presence of one or more allo-antibodies against a red cell antigen/s on the cell panel. In presence of auto-antibodies against red cell antigens, antibody screen may give positive results. Once an antibody screen is positive, the exact specificity of antibody needs to be determined using an extended panel in order to identify the specificity of the antibody.

It is important to note that "NO ONE TEST METHOD IS CAPABLE OF DETECTING ALL ANTIBODIES".

oth

Conditions of Reporting:

1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient named or identified in the bill/test request form.

2. The tests results relate specifically to the sample received in the lab and are presumed to have been generated and transported as per specific instructions given by

3. The reported results are for the information and interpretation by the referring doctor only.

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

(DMC Reg. No : 46030)

Test Performed at: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi

Booking Centre: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi, 01130403040

The authenticity of the report can be verified by scanning the Q R Code on top of the page





Patient Name:

Mr.NAPENDRA KUMAR

Location:

**BLK Hospital** 

Age/Sex:

35 Year(s)/Male

IPNo:

3459032

UHID:

BLKH.1101115

OrderDate:

06/04/2023

Ref. Doctor:

CMO

ReportDate:

07/04/2023

#### USG Whole Abdomen

Clinical history: Abdominal pain and dyspepsia.

Findings:

Large bowel gases (+ + +).

eft and caudate lobe of liver and retroperitoneum are obscured by gases.

ver is normal in size (span is 126mm) and shows increased parenchymal echogenicity - suggestive of grade II fatty liver. Few confluent fat spared areas are noted in segment V of right lobe of liver. Hepatic veins are normal. IHBR not dilated. Portal vein is normal.

Gall Bladder is distended and packed with thick, inspissated heteroechoic sludge within. Gall bladder wall vascularity visualized. No obvious calculus was noted in the neck; however, the same cannot be ruled out. No evidence of pericholecystic collection. Adv:- Further evaluation with CECT whole abdomen.

Proximal CBD is not dilated.

Visualized pancreas is normal in outline and showing mild fatty infiltration. No evidence of any focal lesion or calcification is seen.

Spleen is normal in size (span is 88mm) and shows normal echopattern. No focal lesion is noted.

Both kidneys are normal in size and show normal echopattern. The CM differentiation is maintained. No calculus or hydronephrosis is

kight kidney measures 103 x 45mm. Left kidney measures 101 x 52mm.

Urinary bladder is partially distended (volume approx. 97cc) and appears normal.

Prostate is normal in size and echotexture. It measures 29 x 27 x 22mm (wt 9grns).

No obvious free fluid is seen.

IMPRESSION: USG findings are suggestive of -

- Distended gall bladder packed with thick inspissated sludge.
- Hepatic and pancreatic fatty infiltration.

Please correlate clinically.

Dr.Paval Mittal Consultant

M.D.

Dr.ROHIT SUNDEEP KARNA **DMRD** Resident MBBS,DMRD

(For Interpretation by a Registered Medical Practitioner Only)

Version: 1



Patient Name Age/Gender

: Mr. Napendra Kumar

MaxID/Lab ID

: 35 Y 3 M 22 D /M : BLKH.1101115/1298042309581

Ref Doctor

: Dr.Cmo

Centre

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time

: 06/Apr/2023 09:21PM

Reporting Date/Time

OP/IP No/UHID

: 07/Apr/2023 09:08AM

**Clinical Blochemistry** 

Amylase, Serum

Date

06/Apr/2023

09:21PM

Unit

Bio Ref Interval

Amylase G 7 PNP, Blocked

1699

U/L

28 - 100

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Results to follow:

Globulin: Sample not yet received

Principal Consultant & HOD DMC Reg No.44935)

Test Performed at :1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi Booking Centre: 1566 - BLK Superspeciality Hospital, Pusa Road Radha Swami Satsang Rajendra Place Delhi, 01130403040 The authenticity of the report can be verified by scanning the Q R Code on top of the page





Patient Name Age/Gender

: Mr. Napendra Kumar

MaxID/Lab ID

: 35 Y 3 M 22 D /M

Ref Doctor

: BLKH.1101115/1298042309581

: Dr.Cmo

OP/IP No/UHID

: 1566 - Blk Superspeciality Hospital

: IC/3459032/BLK-EMERGENCY WARD/ED-

Temp-12A/

Collection Date/Time

Reporting Date/Time

: 06/Apr/2023 09:21PM : 07/Apr/2023 09:36AM

Hematology

CBC (Complete	Blood	Count),	Whole	Blood	EDT	١
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Date	06/Apr/2023 09:21PM			Unit	Bio Ref Interval
Haemoglobin SLS HAEMOGLOBIN	14.8			g/dL	13 - 17
Packed Cell, Volume Calculated	44.1			%	40 - 50
Total Leucocyte Count (TLC) FLUORESCENCE FLOWCYTOMETRY	10		3	10^3/µL	4 - 10
RBC Count ELETRICAL IMPEDENCE	5			10^6/µL	4.5 - 5.5
MCV RBC PULSE HEIGHT	89			Ħ	82 - 97
MCH Calculated	30			Pg	27 - 33
MCHC Calculated	33.6			g/dL	32 - 36
Platelet Count ELETRICAL IMPEDENCE/OPTICAL	261	*		10^3/µL	150 - 450
RDW Calculated	14.0			%	11.5 - 14.5
Differential Cell Count FLUORESCENCE FLOWCYTOME	TRY				
Neutrophils	81			%	40 - 80
Lymphocytes	13.6			%	20 - 40
Monocytes	4.2			%	4-7
Eosinophils	1			%	2-4
Basophils	0.2			%	0 - 1
Absolute Leukocyte Count FLUORESCENCE FLOWCYTOME					
Absolute Neutrophil Count	8.1			10^3/µL	1.5 - 8
Absolute Lymphocyte Count	1.4			10^3/µL	1-3
Absolute Monocyte Count	0.42			10^3/µL	0.2 - 1
Absolute Eosinophil Count	0.1			10^3/µL	0.02 - 0.5
Absolute Basophil Count	0.02			10^3/µL	0.02 - 0.1
Kindly correlate with clinical fi	indings			359835	2020 202

\*\*\* End Of Report \*\*\*

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: 07/Apr/2023 09:36AM

Hematology



Results to follow:

Globulin: Sample not yet received

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