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Name	:	**MASTER. BHARAT**	Bill Number	:	**M054**
Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**WB EDTA**	Sample Collection	:	23-Jan-2024 03:30 PM
Reff By	:		Sample Received	:	29-Feb-2024 12:49 PM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 10:49 AM

HEMATOLOGY

COMPLETE BLOOD PICTURE (CBP)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
HAEMOGRAM			
HAEMOGLOBIN (Method: Cell Counter)	**2**	g%	MALE: 13 -18 g% FEMALE: 11-13 g%
RBC Count (Method: Cell Counter)	**2**	Millions/cu.mm	4.5 - 6.5
WBC Count (Method: Cell Counter)	**2**	Cells/cumm	4,000 - 11,000
RDW (Method: Cell Counter)	**2**	%	11.0 - 16.0
DIFFERENTIAL COUNT			
NEUTROPHILS (Method: Cell Counter)	**2**	%	Adults 40 - 75% Childrens 40 - 60 %
LYMPHOCYTES (Method: Cell Counter)	**2**	%	Adults 20 - 40 % Children 30 - 40 %
EOSINOPHILS (Method: Cell Counter)	2	%	Adult 01 - 06% Children 1 - 6%
MONOCYTES (Method: Cell Counter)	2	%	Adult 02 - 10% Children 6 - 10%
BASOPHILS (Method: Cell Counter)	**2**	%	Adults 0 - 0 % Children 0 - 0 %
PCV (Haematocrit) (Method: Cell Counter)	**2**	%	35.00 - 45.00 %
MCV (Method: Cell Counter)	**2**	FL	83 - 101 fl
MCH (Method: Cell Counter)	**2**	PG	27 - 32 pg
MCHC (Method: Cell Counter)	**2**	%	32 - 35 %
PLATELET COUNT (Method: Cell Counter)	2	Lakhs/cumm	1.5 - 4.5
PERIPHERAL SMEAR			
RBCs	22		
WBCs	2		

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TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 10:49 AM

PLATELETS	2

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Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Reff By	:		Reporting Date	:	25-Apr-2024 10:49 AM
TypedBy	:	Bharat Saini			

DEPARTMENT OF RADIOLOGY

X - Ray Chest PA

X - RAY CHEST PA VIEW

Trachea is in midline.

Both hila normal in density.

Cardiac silhouette maintained.

Both CP angles are clear.

Both lung parenchyma are normal.

Bony cage and soft tissues are normal.

IMPRESSION: **NORMAL STUDY.**

For clinical correlation.

Dr.Sukumar.,MDRD
Consulatant Radiologist

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Name	:	**MASTER. BHARAT**	Bill Number	:	**M054**
Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**Citrate Blood**	Sample Collection	:	29-Feb-2024 12:49 PM
Reff By	:		Sample Received	:	29-Feb-2024 12:49 PM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 05:10 PM

ERYTHROCYTE SEDIMENTATION RATE(ESR)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
FIRST HOUR (Method: Westergrens)	asad	mm/hr	1 - 50 YRS < 10 mm/hr 51 - 60 YRS < 12 mm/hr 61 - 70 yrs < 14 mm/hr > 70 yrs < 30 mm/hr
SECOND HOUR (Method: Westergrens)	asdads	mm/hr	1 - 50 YRS < 10 mm/hr 51 - 60 YRS < 12 mm/hr 61 - 70 yrs < 14 mm/hr > 70 yrs < 30 mm/hr

Method: *Westergren*

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Name	:	**MASTER. BHARAT**	Bill Number	:	**M054**
Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**Serum**	Sample Collection	:	24-Jan-2024 05:19 AM
Reff By	:		Sample Received	:	24-Jan-2024 05:20 AM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 05:10 PM

HOREMONES

THYROID PROFILE (TFT)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3) (Method: CLIA)	asd	ng/ml	0.87 - 1.78
TOTAL THYROXINE (T4) (Method: CLIA)	asd	ug/dL	4.82 - 11.72
THYROID STIMULATING HORMONE (TSH) (Method: CLIA)	sda	uIU/mL	0.34 - 5.60

Pregnancy Reference Ranges for TSH:

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.0

3rd Trimester : 0.20 - 3.0

(Ref: Guidelines of American Association for the diagnosis and management of Thyroid Disease during pregnancy and Postpartum, Thyroid, 2011,21:1-46).

Primary malfunction of the thyroid gland may result in excessive (Hyper) or below normal (Hypo) release of T3 or T4. In Addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an exellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good. It is expecially useful in the differential diagnosis of primary (Thyroid) from secondary (Pituitary) and tertiary (Hypothalamus)hypothyroidism. In primary Hypothyroidism, TSH levels are significantly elevated, While in secondary and tertiary hypothyroidism, TSH levels are low. A TSH level between 6-12 miu/L with normal T4 may represent sbclinical or compensated Hypothyroidis. Supressed TSH may be seen in elderly patients who do not have thyrotoxcosis (Since the T3 is low or normal). TSH may also be suppressed in depression.

*A synchronous diurnal rhythm is found in serum TSH with low levels in the day time and higher levels at night. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH Concentrations.

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Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**Serum**	Sample Collection	:	24-Jan-2024 05:19 AM
Reff By	:		Sample Received	:	24-Jan-2024 05:20 AM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 05:10 PM

CLINICAL BIOCHEMISTRY

RENAL FUNCTION TEST (RFT)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
Blood Urea (Method: Urease-GLDH)	**485**	mg/dl	13-45
Serum Creatinine (Method: Alkaline Picrate)	**445**	mg/dl	Male : 0.9 - 1.4 Female : 0.9 - 1.3
Serum Calcium (Method: Arsenazo)	**45**	mg/dl	8.6-10.3
Serum Uric Acid (Method: Uricase)	**45**	mg/dl	Male : 3.6 - 7.7 Female : 2.5 - 6.8
Serum Electrolytes			
Sodium (Na) (Method: Alkaline Picrate)	**4**	mmol/L	135 - 145
Potassium (K) (Method: I S E-Direct)	**45**	mmol/L	3.5-5.3
Chloride (CL) (Method: I S E)	**44**	mmol/L	98 - 107

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Name	:	**MASTER. BHARAT**	Bill Number	:	**M054**
Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**Serum**	Sample Collection	:	24-Jan-2024 05:19 AM
Reff By	:		Sample Received	:	24-Jan-2024 05:20 AM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 05:11 PM

Hepatitis B surface antigen

INVESTIGATION	RESULT	NORMAL RANGE
HBsAg (Method: immuno chromatography)	NEGATIVE	NEGATIVE

NEGATIVE : Presumed not currently infected or if infected antigens have not yet reached detectable levels.

POSITIVE : Indicative of acute or chronic Hepatitis B virus infection or chronic HBV carrier state.

NOTE : The test is a screening assay, it should not be used as a sole criterion for diagnosis of Hepatitis B infection. Positive results should be confirmed by HBV DNA PCR.

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Name	:	**MASTER. BHARAT**	Bill Number	:	**M054**
Age/Gender	:	**21YEARS/MALE**	Bill Date	:	23-Jan-2024 02:39 PM
Sample Type	:	**Fluoride Plasma**	Sample Collection	:	23-Jan-2024 03:30 PM
Reff By	:		Sample Received	:	23-Jan-2024 03:31 PM
TypedBy	:	Bharat Saini	Reporting Date	:	25-Apr-2024 05:11 PM

CLINICAL BIOCHEMISTRY

FASTING BLOOD SUGAR (FBS)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
FASTING BLOOD SUGAR (Method: GOD/POD)	80	mg/dl	70 - 110
POST LUNCH BLOOD SUGAR (Method: GOD/POD)	120	mg/dl	80 - 160

NOTE:

The discordant post prandial blood glucose levels are observed in some of the conditions related to defective absorption,insufficient dietery intake,endocrine disorders,hypoglycemic drug overdose and reactive hypoglycemia etc...

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