



SHIVA HOSPITAL

287-A, Mala Road, Sector-12A,

Near Singha Chowk, Gurugram

Ph. 0124-4232320

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Email : shivahospital01@gmail.com

Website : shivahospitalggn.com

INDOOR PATIENT FILE

ALERT

Patient Is

Hypertensive

Diabetic

On High Risk Medication

Having Known Allergy

On Dialysis

Having Systemic Disease

☐☐☐☐☐☐

Hospital UHID IPD No. 01/25

Room No. / Bed No. Blood Group

Date of Admission 1/4/25 Time of Admission 10:55 AM

Date of Discharge Time of Discharge

Patient Details

Patient Name Advik Kushwaha

Age and Sex 44 / Male

S/o, W/o, D/o Ravi Kant Kushwaha

Address HNo - 1137, Gali No - 4, Near by
Prem Chowk, Kapsheera 110037

Provisional Diagnosis

Final Diagnosis

Treating Consultant DR Anurog Subhau

ADVIK KUSHWAHA.,
Sex: Male
DOB: 2020-05-18
ID: PAT000942

Acq. Date: 2025-04-01
Acq. Time: 11:37:08
Exp. Index: 1534

R

CHEST
PA
W: 3921, L: 2432
Tech ID: admin

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Patient Reg. No.:	SH006256	Booking Date :	01-04-2025
Patient Name :	Master ADVIK KUSHWAHA	Lab Ref. No. :	SH00894
Age/Gender :	M/4 Y	Doctor Name :	Dr. MONIKA(M.B.B.S M.D)
Referred By :	Dr. Anurag Sobhari	Sample Date/Time :	01-04-2025 11:01:AM
Mobile No.:		Report Date/Time :	01-04-2025 12:56 PM
Address :		Investigation:	

BIOCHEMISTRY TEST			
Parameter	Result	Unit	Reference Range
BLOOD SUGAR RANDOM	89	mg/dL	80 - 140

SEROLOGY TEST			
Parameter	Result	Unit	Reference Range
MALARIA SEROLOGY			
Malaria Anitigen Test	P.Vivax P.Falciparum	Negative Negative	Negative Negative

Summary :
Malaria is a curable disease if the patients have access to early diagnosis and prompt treatment. Antigen-based Rapid Diagnostic Tests (RDTs) have an important role at the periphery of health services capability because none of the rural clinics has the ability to diagnose malaria on-site due to a lack of microscopes and trained technicians to evaluate blood films. Furthermore, in regions where the disease is not endemic laboratory technologists have very limited experience in detecting and identifying malaria parasites. An ever increasing numbers of travelers from temperate areas each year visit tropical countries and many of them return with a malaria infection. The RDT tests are still regarded as complements to conventional microscopy but with some improvements it may well replace the microscope. The tests are simple and the procedure can be performed on the spot in field conditions. These tests use finger-stick or venous blood, the completed test takes a total of 15-20 minutes, and a laboratory is not needed. The threshold of detection by these rapid diagnostic tests is in the range of 100 parasites/μl of blood compared to 5 by thick film microscopy

TYPHIDOT (IgG & IgM)

Typhi - Check IgM	Positive	Negative
Typhi - Check IgG	Negative	Negative

Summary : A febrile condition, Typhoid fever, is a bacterial infection caused by Salmonella serotypes including S. paratyphi A, S. paratyphi B and salmonella sendi. The symptoms of the illness include high fever, headache, abdominal pain, constipation and appearance of skin rashes. Accurate diagnosis of typhoid fever at an early stage is not only important for etiological diagnosis but to identify and treat the potential carriers and prevent acute typhoid fever outbreaks. Early rising antibodies to Lipopolysaccharide (LPS) O are predominantly IgM in nature. Detection of S. typhi specific IgM antibodies instead of IgG or both IgM (as measured by the Widal test) would serve as a marker for recent infection.

CRP (QUANTITATIVE)	81.47 (High)	mg/l	0.0 - 6.0
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INTERPRETATION :-
In normal healthy individuals, CRP levels generally do not exceed 10 mgm/L. CRP plays a role in host defence and tissue repair. There is a lag time of 6-10 hrs between stimulus and rise in serum levels, as compared to a lag time of 24-72 hrs, for other acute phase reactants.

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SHIVA DIAGNOSTIC

CARING FOR YOUR...HEALTH.

Patient Reg. No.:	SH00625G	Booking Date :	01-04-2025
Patient Name :	Master ADVIK KUSHIWAHA	Lab Ref. No. :	SH00894
Age/Gender :	M/4 Y	Doctor Name :	Dr. MONIKA(M.B.B.S M.D)
Referred By :	Dr. Anurag Sobhari	Sample Date/Time :	01-04-2025 11:01:AM
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URINE EXAMINATION (URINE EXAMINATION)

Parameter	Result	Unit	Reference Range
PHYSICAL EXAMINATION			
COLOUR	YELLOW		
QUANTITY	30	ml.	
TRANSPARENCY	TURBID		
PH	6.0		
SPECIFIC GRAVITY	1.030		
CHEMICAL EXAMINATION			
ALBUMIN	(+)	NIL	
REDUCING SUGAR	NIL		
MICROSCOPIC EXAMINATION			
RBC'S	NIL	/HPF	
PUS Cells	10-15	/HPF	
EPITHELIAL CELLS	4-6	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
BACTERIA	NIL		
OTHERS	NIL		

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SHIVA DIAGNOSTIC

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Patient Reg. No.:	SH006256	Booking Date :	01-04-2025
Patient Name :	Master ADVIK KUSHWAHA	Lab Ref. No. :	SH00894
Age/Gender :	M/4 Y	Doctor Name :	Dr. MONIKA(M.B.B.S M.D)
Referred By :	Dr. Anurag Sobhari	Sample Date/Time :	01-04-2025 11:01:AM
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KIDNEY FUNCTION TEST (KIDNEY FUNCTION TEST)

Parameter	Result	Unit	Reference Range
BLOOD UREA	17.3	mg/dL	15 - 36
SERUM CREATININE	0.57	mg/dL	0.50 - 1.0
SERUM URIC ACID	3.5	mg/dL	3.5 - 7.2
SODIUM	137.0	mmol/L	136 - 149
POTASSIUM	4.27	mmol/L	3.5 - 5.5
CHLORIDE	100.1	mmol/L	98.0 - 109.0

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Patient Reg. No.:	SH006256	Booking Date :	01-04-2025
Patient Name :	Master ADVIK KUSHWAHA	Lab Ref. No. :	SH00694
Age/Gender :	M/4 Y	Doctor Name :	Dr. MONIKA(M.B.B.S.M.D)
Referred By :	Dr. Anurag Sobhani	Sample Date/Time :	01-04-2025 11:01:AM
Mobile No.:		Report Date/Time :	01-04-2025 12:56 PM
Address :		Investigation:	

LIVER FUNCTION TEST (LFT) (LIVER FUNCTION TEST (LFT))

Parameter	Result	Unit	Reference Range
TOTAL PROTEIN	6.7	mg/dL	6.5 - 8.3
ALBUMIN	3.4 (Low)	mg/dL	3.8 - 5.4
GLOBULIN	3.3	gm/dl	2.3 - 3.5
A/G RATIO	1.03 (High)		-
BILIRUBIN TOTAL	0.87	mg/dL	0.10 - 1.20
CONJUGATED (D. Bilirubin)	0.30	mg/dL	0.0 - 0.40
UNCONJUGATED (I.D. Bilirubin)	0.57	mg/dL	0.0 - 0.70
S.G.O.T	<u>214.3 (High)</u>	IU/L	5.0 - 40
S.G.P.T	<u>137.6 (High)</u>	IU/L	0.0 - 45.0
ALKALINE PHOSPHATASE	219.5	U/L	54.0 - 369.0

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SHIVA DIAGNOSTIC

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Patient Reg. No.:	SH00625G	Booking Date :	01-04-2025
Patient Name :	Master ADVIK KUSHWAHA	Lab Ref. No. :	SH00894
Age/Gender :	M/4 Y	Doctor Name :	Dr. MONIKA(M.B.B.S M.D)
Referred By :	Dr. Anurag Sobhari	Sample Date/Time :	01-04-2025 11:01:AM
Mobile No.:		Report Date/Time :	01-04-2025 12:56 PM
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COMPLETE BLOOD COUNT CBC (COMPLETE BLOOD COUNT)

Parameter	Result	Unit	Reference Range
HAEMOGLOBIN	12.7 (Low)	gm/dl	13.5 - 18.0
P.C.V/ HAEMATOCRIT	35.9 (Low)	%	40 - 54
TOTAL LEUCOCYTE COUNT(TLC)	19400 (High)	/cumm	6000 - 13500
RBC COUNT	4.67	Millions/cmm	4.0 - 5.2
M C V	76.8 (Low)	fl	80 - 100
M C H	27.1	pg	27.0 - 31.0
M C H C	35.3	gm/dl	33 - 37
PLATELET COUNT	1.08 (Low)	lakh/cmm	1.5 - 4
NEUTROPHIL	83 (High)	%	40 - 75
LYMPHOCYTES	14 (Low)	%	20 - 45
MONOCYTES	2	%	02 - 10
EOSINOPHILS	1	%	01 - 06
BASOPHILS	00	%	0 - 0
RDW-CV	16.3 (High)	fl	11.0 - 15.0

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