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POST GRADUATE INSTITUTE OF CHILD HEALTH

Sector-30, Noida-201303, G.B. Nagar (U.P.)
(An Autonomous Institute under Government of Uttar Pradesh)

DEPARTMENT OF BIOCHEMISTRY

BLOOD BIOCHEMISTRY EXAMINATION REPORT

C.R. 0213371 OPD/IPD OPD DATE 29 JUN 2026
 NAME/ B/o Shikha AGE 5 D/Wk/M/Y, GEN M/F
 REF. BY

Parameter	Result	Unit	(Bio. Ref. Interval)
Plasma Glucose Fasting		mg/dL	(70-100 mg/dL)
Plasma Post Prandial Glucose(2hrs)		mg/dL	(<140 mg/dL)
Plasma Random Glucose		mg/dL	(70-140mg/dL)
Plasma HbA1C		%	(4-5.6%)
KFT PROFILE			
Blood Urea		mg/dL	(10-45 mg/dL)
S. Creatinine		mg/dL	(0.7-1.5 mg/dL)
S. Uric Acid		mg/dL	(2.8 mg/dL)
ELECTROLYTE PROFILE			
S. Sodium (Na ⁺)		mmol/L	(135-145mmol/L)
S. Potassium (K ⁺)		mmol/L	(3.5-5.5 mmol/L)
S. Calcium Total		mg/dL	(9.0-11.0 mg/dL)
S. Chloride (Cl ⁻)		mmol/L	(96-106 mmol/L)
S. Calcium, ionized (Ca ²⁺)		mg/dL	(4.6-5.3 mg/dL)
LFT PROFILE			
Serum Bilirubin Total	15.9	mg/dL	(0.2-1.0 mg/dL)
Conjugated (Direct)	9.2	mg/dL	(0.1-0.4 mg/dL)
Unconjugated (Indirect)	6.7	mg/dL	(0.2-0.6 mg/dL)
SGOT(AST)	652	mg/dL	(0.2-0.6 mg/dL)
SGPT(ALT)	307	U/L	(0-40 U/L)
Serum Alkaline Phosphatase	777	U/L	(0-45 U/L)
S. Total Proteins	6.1	g/dL	(Depending on age)
S. Albumin	2.7	g/dL	(6.0-8.0 gm/dL)
S. Globulin	3.4	g/dL	(3.5-5.5 gm/dL)
A.G. Ratio			(2-3.5 gm/dL)
Others			
S. CRP (Quantitative)		mg/L	(0 - 6 mg/L)
S. Phosphorus		mg/dL	(2.3-7.0 mg/dL)
S. LDH		U/L	(0-248 U/L)
S. Amylase		U/L	(28-100 U/L)
S. Lipase		U/L	(0-39 U/L)
Plasma Lactate		mg/dL	(4.5-19.8 mg/dL)
S. Magnesium		mg/dL	(1.6-2.6 mg/dL)
S. GGT	89.8	U/L	(0- 40 U/L)
S. IgA		mg/dL	(70-400 mg/dL)
S. IgG		mg/dL	(700-1600 mg/dL)
S. IgM		mg/dL	(20-200 mg/dL)
S. CPK		U/L	(<250 U/L)
S. CK-MB		U/L	(5-25 U/L)
S. Ceruloplasmin		mg/dL	(20-60 mg/dL)

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Handwritten notes:
 Kindly Contact. Along
 Children's Heart
 Inform immediately
 Kindly send Repeat sample
 for subsequent values

Verified By

29 JUN 2026

Signature
Consultant

Technical Staff

PTO



Queue No: 21

OPD CARD

981162600213371
 Patient Name: SHIVA
 S/O: VISHAL
 Address: SHIVA020326@abdm
 SHAHJAHANPUR RACER KOTHI SHAHJAHANPUR, UTTAR
 PRADESH, INDIA - 242001
 Specialty: General
 Department/Room: Paediatric Gastroenterology / 10
 Unit 1
 25-Dec-2026

Age/Sex: 5 Mth/M
 ABHA Number:
 Mobile:
 Fees: ₹100.00/-
 Visit Date: 29-Jun-2026 10:40
 OPD Days: Mon, Tue, Wed, Thu, Fri, Sat
 Payment Details/ Trans Id.: Cash/
 Prepared By: DEO ABHA 1

29/6/26
 ut-5B

(51)

GASTRO OPD

CR- 981162600213371
 Mob-

O/E -

pale stools - since birth

Diets (1)

slightly clay' mine.

PIA > 12mm (1)

liver enlarged 6.2cm

spleen - 2cm

no spots

fib: 8.9

Te = 7300

PC = 1.33 latu/uv3

TB/D3 = 12-8/500

Wt 4.5kg

liver enlarged 6.2cm

homogenous echotexture
 of parenchyma

CB: distended anechoic lens

Neonatal cholestasis with
 liver hepatosplenomegaly with
 persistent pale stools

likely biliary atresia

↓

- Repeat usg abdomen
 (fasting & postprandial)

GET, LFT

Paed Surgery opinion

- RU cyst

⊂



SHWETDEEP DIAGNOSTIC

Mob: 9111012295

Road Map to Your Health

Dr. Kuldeep Gupta

MBBS, DMRD (KGMU, Lucknow)

DNB Radiodiagnosis (St. Stephen's Hospital Delhi)

Sinzal, Near Kachcha Katra Petrol Pump, Opp. Saraswati Shishu Mandir School, Sinzalganj (U.P.)

Timings : ● 9:30 am to 3:30 pm

● 5:30 pm to 8:30 pm

SUNDAY 9.30 am to 2.30 pm

Patient Name:	MASTER. SHIVA	Age /Sex:	5 MONTH/M
Ref. By:	DR. SATENDRA VERMA	Date:	21.05.2026
Part Scanned	USG WHOLE ABDOMEN		

ULTRASOUND STUDY OF WHOLE ABDOMEN

- ◆ **LIVER:** It is enlarged in size [8.2 cms] and shows homogenous echotexture of parenchyma. No focal space-occupying lesion is seen. No intrahepatic biliary radicle dilatation is seen. Hepatic veins and IVC are seen normally.
- ◆ **GALL BLADDER:** It is distended and shows anechoic lumen. No calculus or mass lesion is seen. GB walls are not thickened. No pericholecystic fluid is seen.
- ◆ **CBD:** It is normal in size at porta. No obstructive lesion is seen.
- ◆ **PORTAL:** Portal vein is normal in caliber at porta.
- ◆ **PANCREAS:** It is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- ◆ **SPLEEN:** It is normal in size and shows homogenous parenchymal echotexture. No well-formed focal space-occupying lesion is seen.
- ◆ **RIGHT KIDNEY:** Right kidney is normal in size, position and show normal parenchymal echotexture. Cortico-medullary differentiation is maintained. No hydronephrosis is seen. No calculus or mass lesion is seen. Right kidney measures 50 x 19mm.
- ◆ **LEFT KIDNEY:** - Left kidney is normal in size, position and show normal parenchymal echotexture. Cortico-medullary differentiation is maintained. No hydronephrosis is seen. No calculus or mass lesion is seen. Left kidney measures 58 x 20mm.
- ◆ **URINARY BLADDER:** Urinary bladder is distended and shows anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- ◆ No retroperitoneal adenopathy is seen. No ascites is seen.
- ◆ **PROSTATE:** Is normal for age of child.
- ◆ Bowel loops are normal in caliber and peristaltic. No area of abnormal wall thickening / inflammation is noted.

OPINION:-

- Mild hepatomegaly.
Please correlate clinically.

Dr. Kuldeep Gupta
DMRD, DNB (Radiodiagnosis)
Consultant Radiologist

AVAILABLE FACILITIES

- Ultrasound
- C.T. Scan (24X7)
- Digital X-Rays
- Pathology
- FNAC
- USG/CT Guided Interventions
- Color Doppler
- ECG
- Microbiology
- Biopsy

Kindly Note :

- Please Intimate us for any typing mistakes and send the report for correction within 7 days.
- The Science of Radiological diagnosis is based on interpretation of various shadows produced by both normal & abnormal tissues and are not always conclusive. Further biochemical investigations & clinical correlation is required to enable the clinician to reach the final diagnosis.

The Report and films are not valid for medico-legal purpose.



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