

PATIENT NAME	: Mrs. RIYA	UHID No	: CSSH-250079217
Age / Sex	: 30 Y / Female	Visit No	: OP-2502281875
Consultant Name	: DR. SHIROBHI SHARMA	Barcode	: 1250020514
Hospital	: SUBHARTI HOSPITAL	Sample Collection	: 28/02/2025 05:48 PM
Ward / Bed	:	Sample Received	: 28/02/2025 06:01 PM
Report Status	: Final	Signed Off	: 28/02/2025 07:56 PM

Test Name	Result	Units	Biological Ref. Interval
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BIOCHEMISTRY

HBA1C

GLYCOSYLATED HEMOGLOBIN

5.4

%

Non-diabetic: < 5.7
Prediabetic range: 5.7 - 6.4
Diabetic range: ≥ 6.5
Goal of Therapy: < 7.0
Action suggested: > 8.0

Method : Hplc Method
Sample : Whole Blood

MEAN PLASMA GLUCOSE

108.3

mg/dL

< 116

Method : Calculated
Sample : Whole Blood

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. The converse is true for a diabetic previously under good control but now poorly controlled.

2. Target goals of < 7.0 % may be beneficial in patients with a short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments: HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

-----End of Report-----



R Singh

DR RAVI PRATAP SINGH
MD (BIOCHEMISTRY)

PREPARED BY:
TECHSACHIN

Home Collection Available Phone No.: 9897099801, 9897099451 E-mail: centrallab@subharti.org

PATIENT NAME	: Mrs. RIYA	UHID No	: CSSH-250079217
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Ward / Bed	:	Sample Received	: 28/02/2025 06:01 PM
Report Status	: Final	Signed Off	: 28/02/2025 06:43 PM

Test Name	Result	Units	Biological Ref. Interval
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HEMATOLOGY

ESR - ERYTHROCYTE SEDIMENTATION RATE

11

mm/1st hour

1 - 20

Method : Modified Westergren

Sample : Whole Blood

-----End of Report-----

PREPARED BY:

TECHAKSHAY



DR. ARCHITA

MD PATHOLOGY

PATIENT NAME	: Mrs. RIYA	UHID No	: CSSH-250079217
Age / Sex	: 30 Y / Female	Visit No	: OP-2502281875
Consultant Name	: DR. SHIROBHI SHARMA	Barcode	: 1250020514
Hospital	: SUBHARTI HOSPITAL	Sample Collection	: 28/02/2025 05:48 PM
Ward / Bed	:	Sample Received	: 28/02/2025 06:11 PM
Report Status	: Final	Signed Off	: 28/02/2025 08:16 PM

Test Name	Result	Units	Biological Ref. Interval
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BIOCHEMISTRY

GLUCOSE, FASTING

FASTING GLUCOSE

87

mg/dL

< 100

Method : Hexokinase
Sample : Plasma



PREPARED BY:
TECHSACHIN



DR RAVI PRATAP SINGH
MD (BIOCHEMISTRY)

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BIOCHEMISTRY

LFT; LIVER FUNCTION TEST

BILIRUBIN TOTAL <i>Method : Diazonium Salt</i> <i>Sample : Serum</i>	0.4	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT <i>Method : Diazo Reaction</i> <i>Sample : Serum</i>	0.2	mg/dL	≤ 0.3
BILIRUBIN INDIRECT <i>Method : Calculated</i> <i>Sample : Serum</i>	0.2	mg/dL	< 1.0
TOTAL PROTEIN <i>Method : Biuret</i> <i>Sample : Serum</i>	7.5	g/dL	6.4 - 8.3
ALBUMIN <i>Method : Bromocresol Green (BCG)</i> <i>Sample : Serum</i>	4.2	g/dL	3.5 - 5.2
GLOBULIN <i>Method : Calculated</i> <i>Sample : Serum</i>	3.3	g/dL	2 - 3.5
A : G RATIO <i>Method : Calculated</i> <i>Sample : Serum</i>	1.3	.	1.1 - 2.0
ASPARTATE AMINOTRANSFERASE; AST <i>Method : NADH without Pyridoxal 5 Phosphate (P5P)</i> <i>Sample : Serum</i>	20	U/L	< 35
ALANINE AMINOTRANSFERASE; ALT <i>Method : NADH without Pyridoxal 5 Phosphate (P5P)</i> <i>Sample : Serum</i>	14	U/L	< 56
AST:ALT RATIO <i>Method : Calculated</i> <i>Sample : Serum</i>	1.4		1.1 - 2.0
ALKALINE PHOSPHATASE <i>Method : P-Nitro Phenyl Phosphate (PNPP), AMP Buffer</i> <i>Sample : Serum</i>	62	U/L	40 - 150
GAMMA GLUTAMYL TRANSFERASE <i>Method : L-Gamma Glutamyl-3-Carboxy-4-Nitranilide (GCNA)</i> <i>Sample : Serum</i>	20	U/L	9 - 36



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TECHSACHIN



DR RAVI PRATAP SINGH

MD (BIOCHEMISTRY)



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PATIENT NAME	: Mrs. RIYA	UHID No	: CSSH-250079217
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BIOCHEMISTRY

LIPID PROFILE

CHOLESTEROL TOTAL <i>Method : Enzymatic method</i> <i>Sample : Serum</i>	195		mg/dL	Desirable: <200 Borderline High: 200-239 High: > 240
HDL DIRECT <i>Method : Direct Measure (Polymer, Polyanion)</i> <i>Sample : Serum</i>	42	L	mg/dL	>50
TRIGLYCERIDE <i>Method : Glycerol Phosphate Oxidase</i> <i>Sample : Serum</i>	84		mg/dL	< 150 Normal 150 - 199 Borderline High 200 - 499 High ≥ 500 Very High
LDL <i>Method : Calculated</i> <i>Sample : Serum</i>	136.2	H	mg/dL	< 100 Optimal 100 - 129 Above Optimal 130 - 159 Borderline High 160 - 189 High ≥ 190 Very High
VLDL <i>Method : Calculated</i> <i>Sample : Serum</i>	16.8		mg/dL	<30
NON HDL CHOLESTEROL <i>Method : Calculated</i> <i>Sample : Serum</i>	153.0	H	mg/dL	< 130 Desirable 130 - 159 Above desirable 160 - 189 Borderline High 190 - 219 High ≥ 220 Very High
CHOL/HDL RATIO <i>Method : Calculated</i> <i>Sample : Serum</i>	4.6	H		3.3 - 4.4 Low risk 4.5 - 7.0 Average risk 7.1 - 11.0 Moderate risk > 11.0 High risk
LDL/HDL RATIO <i>Method : Calculated</i> <i>Sample : Serum</i>	3.2	H		0.5 - 3.0 Low risk 3.1 - 6.0 Moderate risk > 6.0 High risk

UREA

BLOOD UREA NITROGEN (BUN) <i>Method : Urease</i> <i>Sample : Serum</i>	9.0		mg/dL	7.0 - 18.7
UREA <i>Method : Calculated</i> <i>Sample : Serum</i>	19.3		mg/dL	15.0 - 40.0

-----End of Report-----

PREPARED BY:
TECHSACHIN



R Singh
DR RAVI PRATAP SINGH
MD (BIOCHEMISTRY)

PATIENT NAME	: Mrs. RIYA	UHID No	: CSSH-250079217
Age / Sex	: 30 Y / Female	Visit No	: OP-2502281875
Consultant Name	: DR. SHIROBHI SHARMA	Barcode	: 1250020514
Hospital	: SUBHARTI HOSPITAL	Sample Collection	: 28/02/2025 05:48 PM
Ward / Bed	:	Sample Received	: 28/02/2025 06:11 PM
Report Status	: Final	Signed Off	: 28/02/2025 08:22 PM

Test Name	Result	Units	Biological Ref. Interval
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IMMUNOCHEMISTRY

THYROID PROFILE, TOTAL

T3 TOTAL (TRIIODOTHYRONINE) <i>Method : Chemiluminescence Microparticle Immunoassay</i> <i>Sample : Serum</i>	1.50	nmol/L	0.54 - 2.96
T4 TOTAL (THYROXINE) <i>Method : Chemiluminescence Microparticle Immunoassay</i> <i>Sample : Serum</i>	89.44	nmol/L	62.7 - 150.9
TSH (THYROID STIMULATING HORMONE) <i>Method : Chemiluminescence Microparticle Immunoassay</i> <i>Sample : Serum</i>	2.949	μIU/mL	0.35 - 4.94

Note: 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 influences the measured serum TSH concentrations.

Clinical Use

- Diagnose Hypothyroidism and Hyperthyroidism
- 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

-----End of Report-----

PREPARED BY:
TECHSACHIN



R Singh
DR RAVI PRATAP SINGH
MD (BIOCHEMISTRY)

PATIENT NAME : Mrs. RIYA	UHD No : CSSH-250079217
Age / Sex : 30 Y / Female	Visit No : OP-2502281875
Consultant Name : DR. SHIROBHI SHARMA	Barcode : 1250020514
Hospital : SUBHARTI HOSPITAL	Sample Collection : 28/02/2025 05:48 PM
Ward / Bed :	Sample Received : 28/02/2025 06:01 PM
Report Status : Final	Signed Off : 28/02/2025 08:33 PM

Test Name	Result	Units	Biological Ref. Interval
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HEMATOLOGY

CBC (COMPLETE BLOOD COUNT)

RBC COUNT <i>Method : Electrical Impedence</i> <i>Sample : Whole Blood</i>	4.75	x10 ⁹ /mm ³	3.8-4.8
HEMOGLOBIN <i>Method : Photometry</i> <i>Sample : Whole Blood</i>	13.5	gm/dL	12-15
HEMATOCRIT <i>Method : Average Of Rbc Pulse Height</i> <i>Sample : Whole Blood</i>	40.5	%	36 - 46
MCV <i>Method : Calculated</i> <i>Sample : Whole Blood</i>	85	fl	83 - 101
MCH <i>Method : Calculated</i> <i>Sample : Whole Blood</i>	28.5	pg	27 - 32
MCHC <i>Method : Calculated</i> <i>Sample : Whole Blood</i>	33.4	gm/dL	31.5 - 34.5
RDW-CV <i>Method : Calculated</i> <i>Sample : Whole Blood</i>	13.0	%	11.6 - 14
PLATELET COUNT <i>Method : Electrical Impedence</i> <i>Sample : Whole Blood</i>	415	H x10 ⁹ /mm ³	150 - 410
WBC COUNT <i>Method : Electrical Impedence</i> <i>Sample : Whole Blood</i>	5.1	x10 ⁹ /mm ³	4 - 10
NEUTROPHIL <i>Method : Dhss, (Impedence, Cytometry)</i> <i>Sample : Whole Blood</i>	54	%	40 - 80
LYMPHOCYTE <i>Method : Dhss, (Impedence, Cytometry)</i> <i>Sample : Whole Blood</i>	40	%	20 - 40
MONOCYTE <i>Method : Dhss, (Impedence, Cytometry)</i> <i>Sample : Whole Blood</i>	01	L %	2 - 10
EOSINOPHIL <i>Method : Dhss, (Impedence, Cytometry)</i> <i>Sample : Whole Blood</i>	05	%	1 - 6
BASOPHIL <i>Method : Electrical Impedence</i> <i>Sample : Whole Blood</i>	0.0	%	<1 - 2

-----End of Report-----

PREPARED BY:
TECHSACHIN




DR. ARCHITA
MD. PATHOLOGY

PATIENT NAME : Mrs. RIYA	UHD No : CSSH-250079217
Age / Sex : 30 Y / Female	Visit No : OP-2502281875
Consultant Name : DR. SHIROBHI SHARMA	Barcode : 1250020514
Hospital : SUBHARTI HOSPITAL	Sample Collection : 28/02/2025 05:48 PM
Ward / Bed :	Sample Received : 28/02/2025 08:42 PM
Report Status : Final	Signed Off : 28/02/2025 10:19 PM

Test Name	Result	Units	Biological Ref. Interval
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CLINICAL PATHOLOGY

URINE ROUTINE AND MICROSCOPY

QUANTITY <i>Method : Direct</i> <i>Sample : Urine</i>	25	mL	
COLOUR <i>Method : Direct</i> <i>Sample : Urine</i>	Yellow	-	Straw
APPEARANCE <i>Method : Direct</i> <i>Sample : Urine</i>	Clear	-	Clear
pH. <i>Method : Double Indicator System</i> <i>Sample : Urine</i>	5.5	-	4.6 - 7.5
SPECIFIC GRAVITY <i>Method : Pka Change Of Polyelectrolytes</i> <i>Sample : Urine</i>	1.020	-	1.003 - 1.035
PROTEIN. <i>Method : Protien Error Of Ph Indicator</i> <i>Sample : Urine</i>	Negative	-	Not Detected
GLUCOSE. <i>Method : Enzymatic Reaction Between Glucose Oxidase,Peroxidase And Chromogen</i> <i>Sample : Urine</i>	Negative	-	Not Detected
KETONE <i>Method : Reaction With Nitroprusside And Acetoacetic Acid</i> <i>Sample : Urine</i>	Negative	-	Not Detected
BLOOD <i>Method : Peroxidas Activity Of Hemaglobin Catalyzes The Reaction</i> <i>Sample : Urine</i>	Negative	-	Not Detected
Bilirubin <i>Method : Coupling Reaction of Bilirubin with Diazonium Salts</i> <i>Sample : Urine</i>	Negative	-	Not Detected
URINE UROBILINOGEN <i>Method : Multistix Strip</i> <i>Sample : Urine</i>	0.1	mL	
PUS CELLS <i>Method : Microscopy</i> <i>Sample : Urine</i>	2-4	/HPF	0 - 5
RBCs <i>Method : Microscopy</i> <i>Sample : Urine</i>	Nil	/HPF	0 - 1
EPITHELIAL CELLS <i>Method : Microscopy</i> <i>Sample : Urine</i>	1-3	/HPF	1 - 5
CASTS <i>Method : Microscopy</i> <i>Sample : Urine</i>	Negative	-	Not Detected
CRYSTALS <i>Method : Microscopy</i> <i>Sample : Urine</i>	Negative	-	Not Detected

-----End of Report-----

PREPARED BY:
TECHSACHIN




DR. ARCHITA

79217

RIYA

3/8/2025 11:29:16 AM

Born 2/12/1995 30 Years

Female

Rate 71 . Sinus rhythm.....normal P axis, V-rate 50- 99
 . RSR' in V1 or V2, right VCD or RVH.....QRS area positive & R' V1/V2
 PR 148
 QRSD 100
 QT 405
 QTc 441

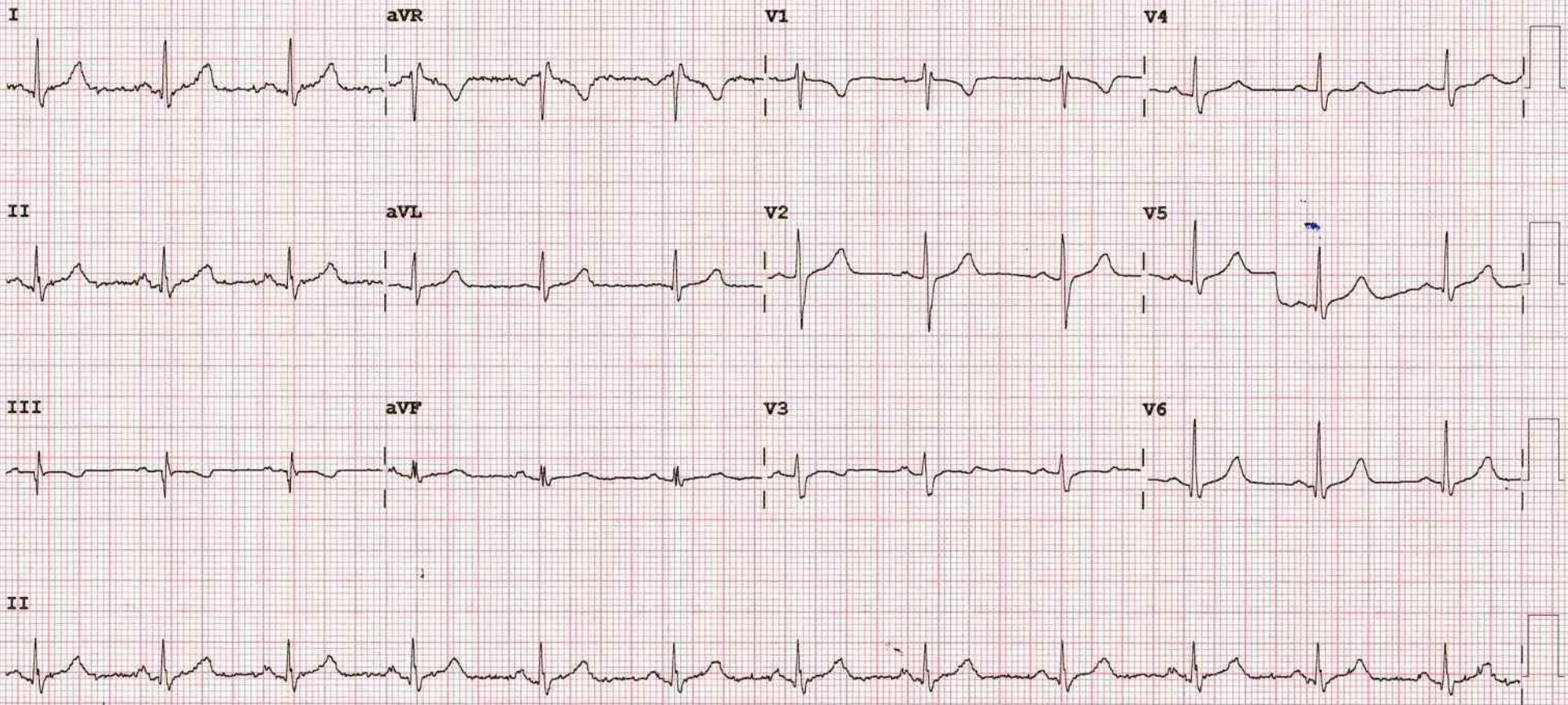
--AXIS--

P 38
 QRS 11
 T 16

- OTHERWISE NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz PH100B CL? P?



Patient Name	: RIYA	Age/Gender	: 30/Y/Female
UHID No	: CSSH-250079217	Visit ID	: OP-2502281875
Doctor	: DR. SHIROBHI SHARMA	Department	: Laboratory And Radiology
Acknowledge Date	: 08-Mar-2025 11:37:27 AM	Report Date	: 08-Mar-2025 12:24:25 PM
Address	: MRT	Ref. Doc No.	: OPDB/122374/24

Part Examined: Abdominal Sonography: Whole Abdomen: with film

LIVER: is normal in shape, size and echogenicity. No focal lesion / IHBRD seen.

GALL BLADDER: is well distended with anechoic lumen. Wall is normal in thickness. No obvious mass/calculus seen. No pericholecystic fluid seen.

COMMON BILE DUCT: is normal in caliber.

PORTAL VEIN: is normal in caliber.

PANCREAS: is normal in shape, size and echogenicity with no peripancreatic collection or parenchymal calcification seen. Pancreatic duct is not dilated.

SPLEEN: is normal in shape, size and echogenicity. No focal lesion seen. Splenic vein is normal in caliber.

RIGHT KIDNEY: is normal in shape, size, position and echogenicity with maintained cortico-medullary differentiation. No mass / calculus or hydronephrosis is seen.

LEFT KIDNEY: is normal in shape, size, position and echogenicity with maintained cortico-medullary differentiation. No mass / calculus or hydronephrosis is seen.

LYMPH NODES: No significant lymphadenopathy seen.

URINARY BLADDER: is distended with anechoic lumen. Wall is of normal thickness. No obvious mass lesion / calculus seen.

UTERUS: measures 74x38x36 mm, is normal in shape, size and echogenicity. Myometrium is normal in echogenicity with no focal lesion seen. Endometrial thickness measures 5.9 mm, is normal.

RIGHT OVARY: is normal in shape, size and echogenicity.

LEFT OVARY: is normal in shape, size and echogenicity.

No free fluid seen in cul-de-sac.

Advice: Clinical Correlation.

Prepared By -:Deveshpal

DR. SACHIN AGRAWAL
PROFESSOR, RADIOLOGIST
 UPMC-11912



CHHATRAPATI SHIVAJI

SUBHARTI HOSPITAL

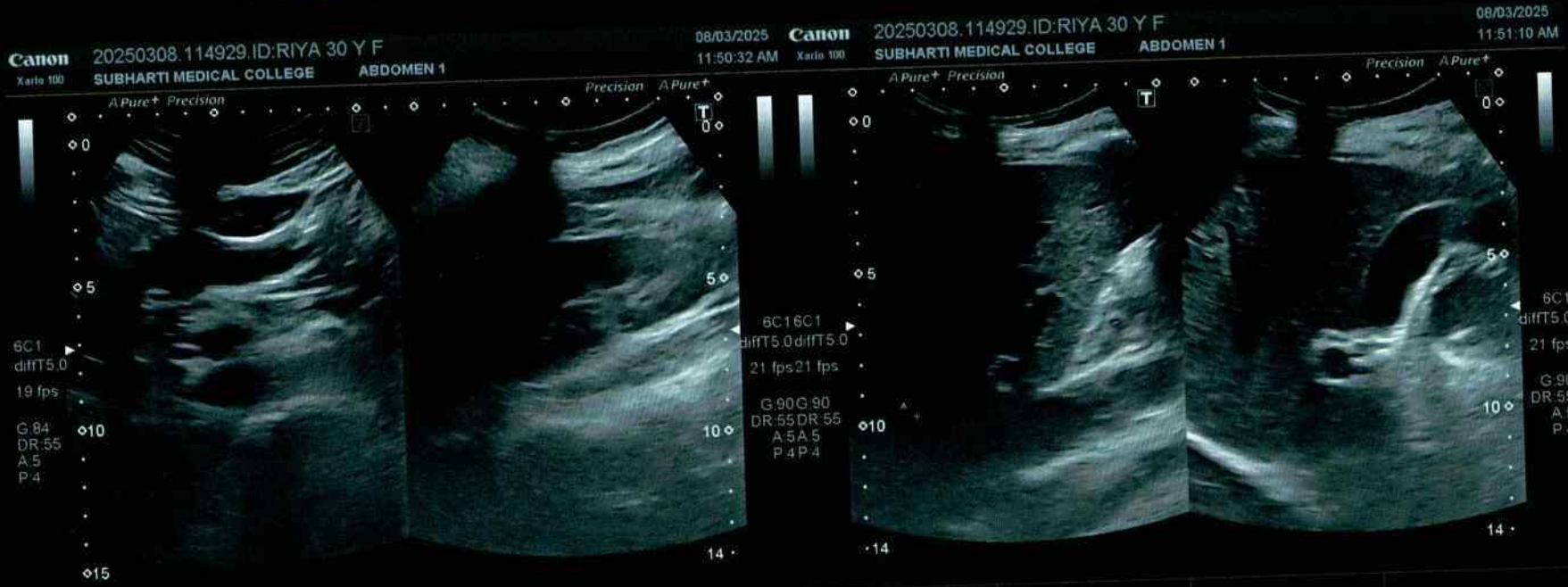


Subharti Medical College
 Subhartipuram, NH-58, Delhi-Haridwar Bypass Road, Meerut

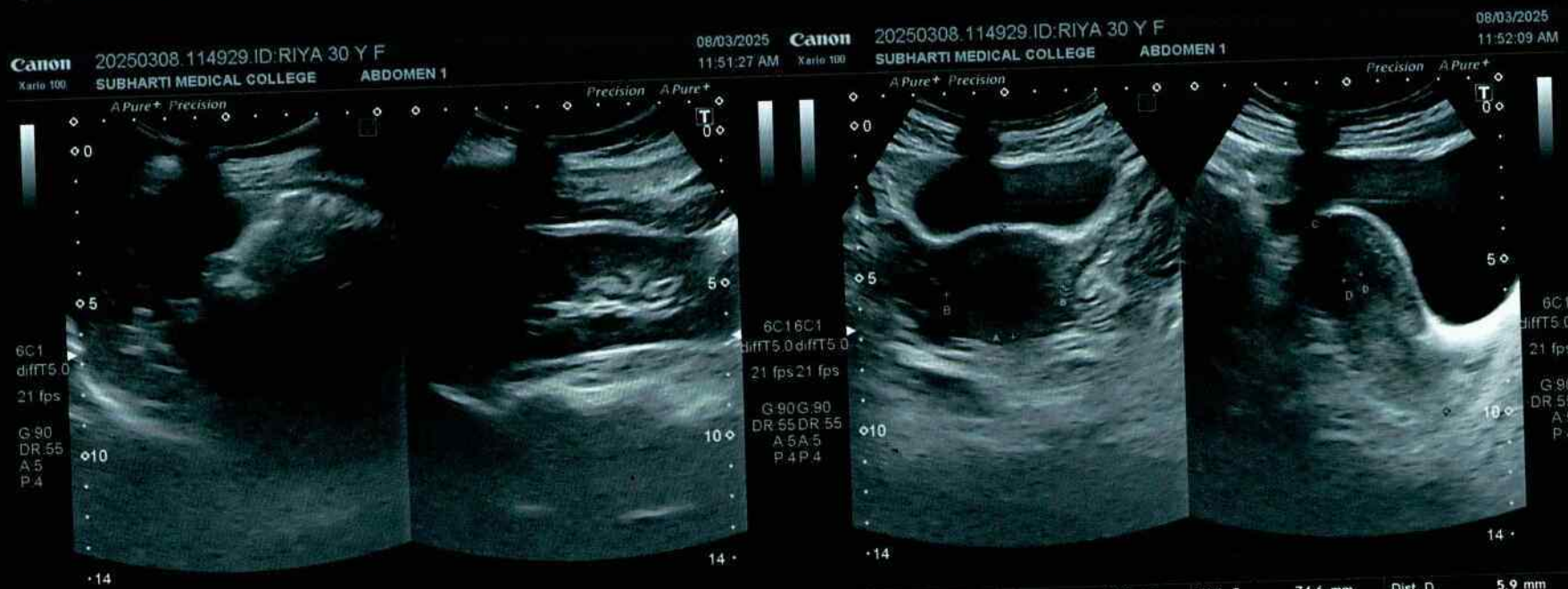


9520897844 | 9520897845

POST GRADUATE DEPARTMENT OF RADIO-DIAGNOSTIC



165 # 413 Dist A 113.7 mm



195 # 124 Dist A 36.2 mm Dist B 38.5 mm Dist C 74.6 mm Dist D 5.9 mm



Patient Name	RIYA 30 Y/F	Date of Birth	
Patient ID	250079217	Age	
Referral Dr		Sex	F
Study Date&Time	08/03/2025 11:34 AM	Report Date & Time	3/8/2025, 11:24:09 PM

Part Examined: Skiagram of Chest PA View.

REPORT

(Reported on console)

- Bony cage and soft tissue appear normal.
- The tracheal translucency is central in position.
- Aortic out-line is within the limits of normal.
- Both lung fields appear to be normal.
- The transverse diameter of the heart is within normal limits.
- Both costo-phrenic angles are clear.
- Domes of diaphragm are normal in position and contour.

Advice: Clinical Correlation.



Digital
Signature
Junior Resident

