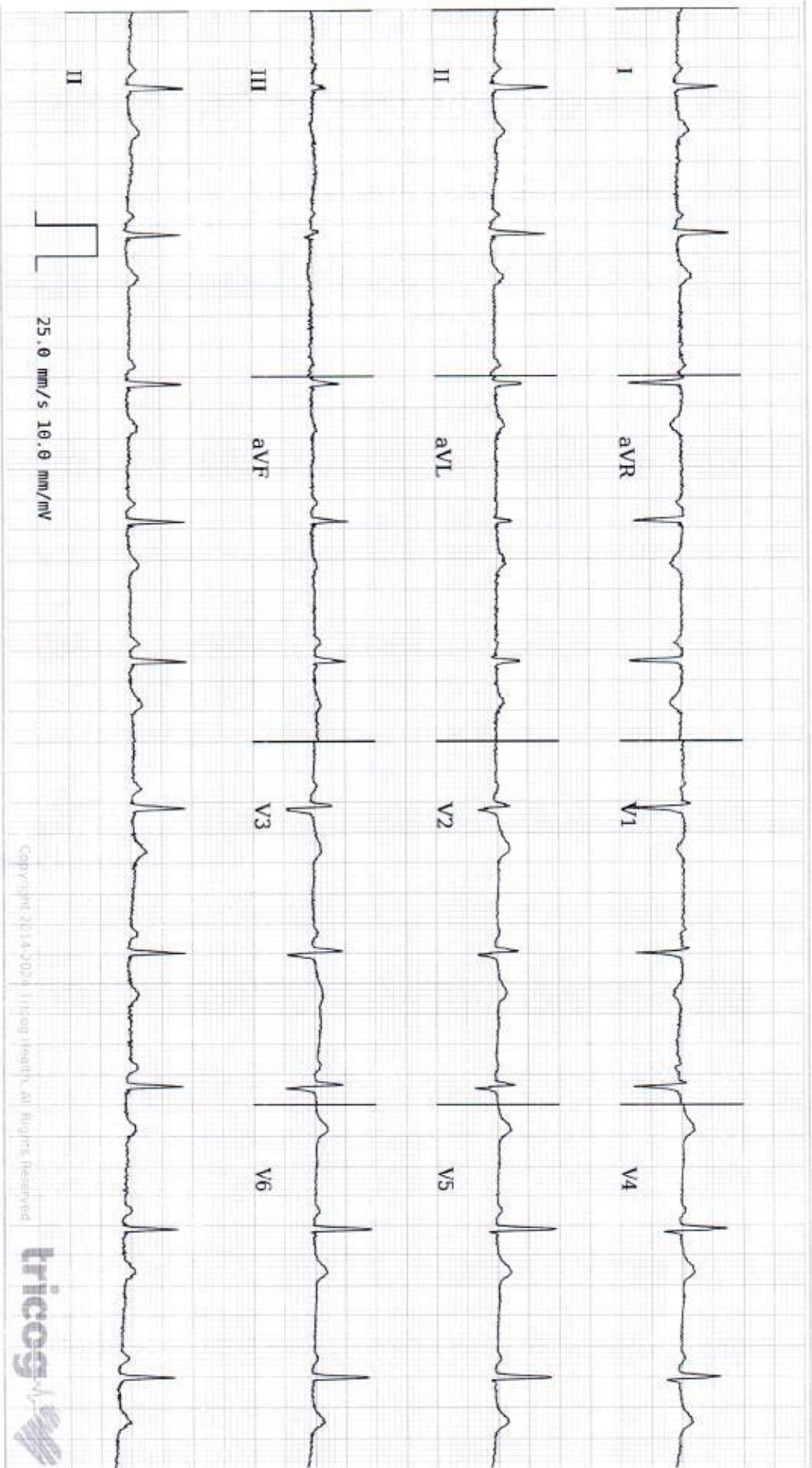


Patient Name: HIMANI SONI  
Patient ID: 2431212482

**SUBURBAN DIAGNOSTICS - KANDIVALI EAST**

Date and Time: 7th Nov 24 9:29 AM



Age 37 NA NA  
years months days

Gender **Female**

Heart Rate **64bpm**

**Patient Vitals**

BP: 90/70 mmHg

Weight: 90 kg

Height: 155 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

**Measurements**

QRSD: 78ms

QT: 410ms

QTcB: 422ms

PR: 126ms

P-R-T: 46° 36' 19°

REPORTED BY

DR AKHIL PARULEKAR  
MBBS, MD, MEDICINE, DNB-Cardiology  
Cardiologist  
2012082483

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

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• PATIENT NAME : MRS. HIMANI SONI	• SEX : FEMALE
• REFERRED BY : ARCOFEMI HEALTHCARE LIMITED	• AGE : 37 YEARS
• CID NO : 2431212482	• DATE : 07/11/2024

**2D & M-MODE ECHOCARDIOGRAM REPORT**  
**COLOR FLOW DOPPLER REPORT**

**ECHO & DOPPLER FINDINGS :**

- No diastolic dysfunction seen at present.
- No regional wall motion abnormality seen at rest at present
- No left ventricular hypertrophy seen.
- All cardiac chambers appear normal in size.
- All cardiac valves show normal structure and physiological function
- No significant stenosis nor regurgitation seen
- No defect seen in the inter ventricular and inter atrial septums.
- No evidence of aneurysm / clots / vegetations/ effusion seen.
- TAPSE and MAPSE measured to 18 mm and 16 mm respectively.
- Mild TR jet. PASP by TR jet measured to 25 mm Hg
- Visual estimation of LVEF of 60 %.

**MEASUREMENTS:**

IVS d (mm)	07	Ao (mm)	27
IVS s (mm)	10	LA (mm)	31
LVIDd (mm)	46	EPSS (mm)	01
LVIDs (mm)	28	EF SLOPE (ml/s)	150
Pwd (mm)	07	MV (mm)	16
Pws (mm)	12		

Conti . 2



• PATIENT NAME : MRS. HIMANI SONI	• SEX : FEMALE
• REFERRED BY : ARCOFEMI HEALTHCARE LIMITED	• AGE : 37 YEARS
• CID NO : 2431212482	• DATE : 07/11/2024

**DOPPLER: Mitral E / A**

Mitral (m/s)	0.7	Aortic (m/s)	1.49
Tricuspid (m/s)	0.6	Pulmonary (m/s)	0.9

**TDI**

Septal e' = 0.09 m/s

Lateral e' = 0.09 m/s

Septal a' = 0.06m/s

Lateral a' = 0.07m/s

Septal s' = 0.06 m/s

Lateral s' = 0.06 m/s

Septal E/e' = 07

**Dr. P. Bhatjiwale, M.D**

**PG cert in Clinical Cardiology,**

**Fellowship in 2 D Echo & Doppler Studies**

**Reg. No 68857**

**NOTE :2D ECHO has a poor sensitivity in cases of angina pectoris and does not rule out CAD**

**Adv: Please correlate clinically. CAG/ Further cardiac evaluation as clinically indicated.**

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

Date: - 7/11/24

CID: 243142482

Name: - Himani Soni

Sex/Age: 37/F

**EYE CHECK UP**

Chief complaints: No

Systemic Diseases: No

Past history: No

Unaided Vision:

Aided Vision:

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	-	-	-	6/6	-	-	-	6/6
Near	-	-	-	N/6	-	-	-	N/6

Colour Vision: Normal / Abnormal

Remark:

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Flow Meuse No. 3, Aangan,  
Thakur Village, Kandivali (east),  
Mumbai - 400101.  
Tel : 61700000



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CID : 2431212482  
Name : Mrs Himani Soni  
Age / Sex : 37 Years/Female  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre  
Reg. Date : 07-Nov-2024  
Reported : 07-Nov-2024 / 14:26

**X-RAY CHEST PA VIEW**

Both lung fields are clear.  
Both costo-phrenic angles are clear.  
The cardiac size and shape are within normal limits.  
The domes of diaphragm are normal in position and outlines.  
The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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

**DR. SUMIT M PATIL**  
**MD Radio diagnosis**  
**Reg no.2019/01/0135**

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024110708410851>



**CID** : 2431212482  
**Name** : Mrs Himani Soni  
**Age / Sex** : 37 Years/Female  
**Ref. Dr** :  
**Reg. Location** : Kandivali East Main Centre

**Reg. Date** : 07-Nov-2024  
**Reported** : 07-Nov-2024 / 10:24

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## USG WHOLE ABDOMEN

### LIVER:

The liver is mildly enlarged in size ( 17.1cm). It shows bright parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

### GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

### PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

### KIDNEYS:

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 10.6 x 4.5 cm. Left kidney measures 10.1 x 4.6 cm.

### SPLEEN:

The spleen is normal in size (11.5 cm) and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

### URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

### UTERUS:

The uterus is anteverted and appears normal. It measures 7.6 x 4.4 x 5.7 cm in size.

The endometrial thickness is 9.1 mm.

### OVARIES:

Both the ovaries are well visualised and appears normal.

There is no evidence of any ovarian or adnexal mass seen.

Right ovary = 2.8 x 1.9 cm Left ovary = 2.5 x 2.7 cm. DF -1 = 20 x 15mm

[Click here to view images <<ImageLink>>](#)

Authenticity Check  
<<QRCode>>

CID : 2431212482  
Name : Mrs Himani Soni  
Age / Sex : 37 Years/Female  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre

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Reg. Date : 07-Nov-2024  
Reported : 07-Nov-2024 / 10:24

**IMPRESSION:-**

Mild hepatomegaly with grade I fatty liver.

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



DR. SUMIT M PATIL  
MD Radio diagnosis  
Reg no.2019/01/0135

Click here to view images <<ImageLink>>

Name : MRS.HIMANI SONI

Age / Gender : 37 Years/Female

Consulting Dr. :

Collected : 07-Nov-2024 / 08:40

Reg.Location : Kandivali East (Main Centre)

Reported : 08-Nov-2024 / 10:36

### PHYSICAL EXAMINATION REPORT

#### History and Complaints:

Irregular periods.

#### EXAMINATION FINDINGS:

Height (cms): 155 cms

Weight (kg): 90 kgs

Temp (0c): Afebrile

Skin: Normal

Blood Pressure (mm/hg): 90/70

Nails: Normal

Pulse: 72/min

Lymph Node: Not palpable

#### Systems

Cardiovascular: Normal

Respiratory: Normal

Genitourinary: Normal

GI System: Normal

CNS: Normal

#### IMPRESSION:

*Thyroid acid  
dyslipidemia  
ash. Gr D fatty liver*

#### ADVICE:

*low fatty diet  
medicines for thyroid acid*



REGD. HEALTHCARE PROVIDER : MRS.HIMANI SONI

Gender : 37 Years/Female

Consulting Dr. :

Collected

: 07-Nov-2024 / 08:40

Reg.Location : Kandivali East (Main Centre)

Reported

: 08-Nov-2024 / 10:36

### CHIEF COMPLAINTS:

- |  |      |
|--|------|
| 1) Hypertension:                         | No   |
| 2) IHD                                   | No   |
| 3) Arrhythmia                            | No   |
| 4) Diabetes Mellitus                     | No   |
| 5) Tuberculosis                          | No   |
| 6) Asthama                               | No   |
| 7) Pulmonary Disease                     | No   |
| 8) Thyroid/ Endocrine disorders          | No   |
| 9) Nervous disorders                     | No   |
| 10) GI system                            | No   |
| 11) Genital urinary disorder             | No   |
| 12) Rheumatic joint diseases or symptoms | No   |
| 13) Blood disease or disorder            | No   |
| 14) Cancer/lump growth/cyst              | No   |
| 15) Congenital disease                   | No   |
| 16) Surgeries                            | LSCS |
| 17) Musculoskeletal System               | No   |

### PERSONAL HISTORY:

- |               |     |
|---------------|-----|
| 1) Alcohol    | No  |
| 2) Smoking    | No  |
| 3) Diet       | Veg |
| 4) Medication | No  |

*Dr. Jagruti Dhale*  
MBBS  
Consultant Physician  
Reg. No. 69548

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

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Row House No. 2, Aangan,  
Thakur Village, Kandivali (East),  
Mumbai - 400101.  
Tel : 61700000

*Jagruti Dhale*  
Dr.JAGRUTI DHALE



CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 13:14

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	12.2	12.0-15.0 g/dL	Spectrophotometric
RBC	4.12	3.8-4.8 mil/cmm	Elect. Impedance
PCV	37.1	36-46 %	Measured
MCV	90	80-100 fl	Calculated
MCH	29.7	27-32 pg	Calculated
MCHC	33.0	31.5-34.5 g/dL	Calculated
RDW	<b>16.4</b>	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	8800	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	27.1	20-40 %	
Absolute Lymphocytes	2380.0	1000-3000 /cmm	Calculated
Monocytes	6.0	2-10 %	
Absolute Monocytes	520.0	200-1000 /cmm	Calculated
Neutrophils	62.9	40-80 %	
Absolute Neutrophils	5500.0	2000-7000 /cmm	Calculated
Eosinophils	3.7	1-6 %	
Absolute Eosinophils	330.0	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	30.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	275000	150000-400000 /cmm	Elect. Impedance
MPV	8.9	6-11 fl	Calculated
PDW	15.3	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		







CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 15:17

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	94.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP	135.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.35	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.15	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.20	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.0	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	22.4	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	21.2	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	16.1	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	<b>107.0</b>	35-105 U/L	Colorimetric
BLOOD UREA, Serum	17.3	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.57	0.51-0.95 mg/dl	Enzymatic



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Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
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eGFR, Serum	120	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation

URIC ACID, Serum	6.4	2.4-5.7 mg/dl	Enzymatic
------------------	-----	---------------	-----------

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



*Bmhasakar*

**Dr.KETAKI MHASKAR**  
M.D. (PATH)  
Pathologist



CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	114.0	mg/dl	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

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



*Bmhasakar*

**Dr.KETAKI MHASKAR**  
**M.D. (PATH)**  
**Pathologist**





CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 14:40

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	Light scattering
Transparency	Clear	Clear	Light scattering
<b><u>CHEMICAL EXAMINATION</u></b>			
Specific Gravity	1.002	1.002-1.035	Refractive index
Reaction (pH)	5.5	5-8	pH Indicator
Proteins	Absent	Absent	Protein error principle
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Negative	Negative	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
(WBC)Pus cells / hpf	2.1	0-5/hpf	
Red Blood Cells / hpf	0.0	0-2 /hpf	
Epithelial Cells / hpf	6.0	0-5/hpf	
Hyaline Casts	0.0	0-1/hpf	
Pathological cast	0.0	0-0.3/hpf	
Calcium oxalate monohydrate crystals	0.0	0-1.4/hpf	
Calcium oxalate dihydrate crystals	0.0	0-1.4/hpf	
Triple phosphate crystals	0.0	0-1.4/hpf	
Uric acid crystals	0.0	0-1.4/hpf	
Amorphous debris	Absent	Absent	
Bacteria / hpf	39.0	0-29.5/hpf	
Yeast	Absent	Absent	



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CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 14:40

Note: Microscopic examination performed by Automated Cuvette based technology. All the Abnormal results are confirmed by reagent strips and Manual method. The Microscopic examination findings are mentioned in decimal numbers as the arithmetic mean of the multiple fields scanned using microscopy. Reference: Pack Insert.

Others -

Kindly rule out contamination.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*

**Dr. TRUPTI SHETTY**  
**M. D. (PATH)**  
**Pathologist**



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CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 13:57

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**BLOOD GROUPING & Rh TYPING**

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	B
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

**Clinical significance:**

ABO system is most important of all blood group in transfusion medicine

**Limitations:**

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

**References:**

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

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



*Anupa*

**Dr.ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant Pathologist**





CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 15:17

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	186.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	210.0	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	40.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	145.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	107.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	38.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.6	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.6	0-3.5 Ratio	Calculated

Note: LDL test is performed by direct measurement.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



*J Thakker*

**Dr.JYOT THAKKER..**  
M.D. (PATH), DPB  
Pathologist & AVP( Medical Services)



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CID : 2431212482  
 Name : MRS.HIMANI SONI  
 Age / Gender : 37 Years / Female  
 Consulting Dr. : -  
 Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
 Reported : 07-Nov-2024 / 14:58

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.1	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	3.31	0.35-5.5 microU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0 microU/ml	ECLIA



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CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 14:58

**Interpretation:**

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

**Clinical Significance:**

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

**Diurnal Variation:**TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

**Reflex Tests:**Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

**Limitations:**

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

**Reference:**

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

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



*Bmhasakar*

**Dr.KETAKI MHASKAR**  
M.D. (PATH)  
Pathologist





Use a QR Code Scanner  
Application To Scan the Code

CID : 2431212482  
Name : MRS.HIMANI SONI  
Age / Gender : 37 Years / Female  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 07-Nov-2024 / 08:44  
Reported : 07-Nov-2024 / 14:40

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**FUS and KETONES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



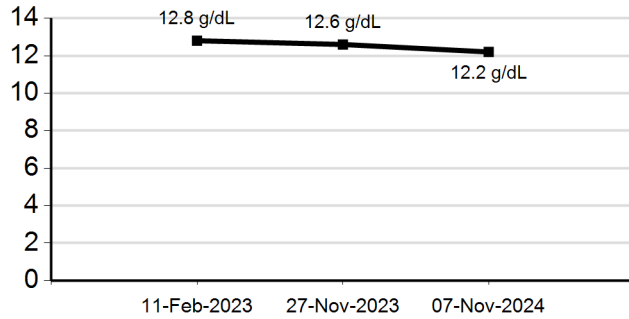
**Dr. TRUPTI SHETTY**  
**M. D. (PATH)**  
**Pathologist**



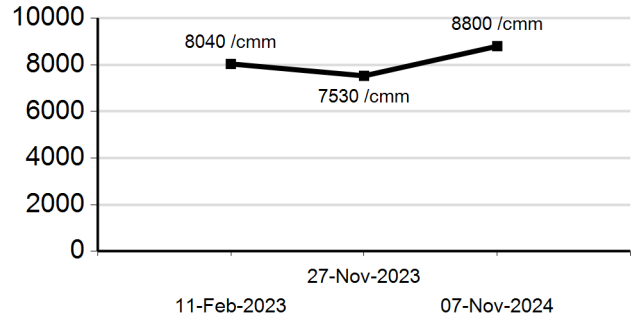
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Reg. Location : Kandivali East (Main Centre)

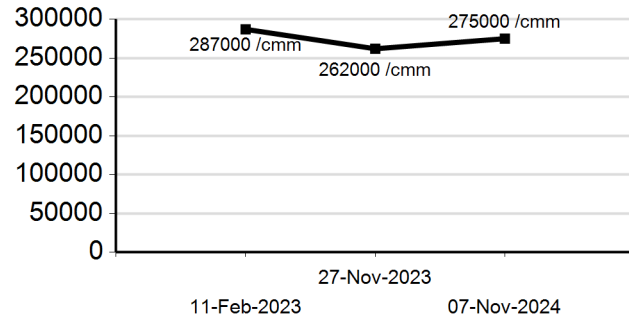
**Haemoglobin**



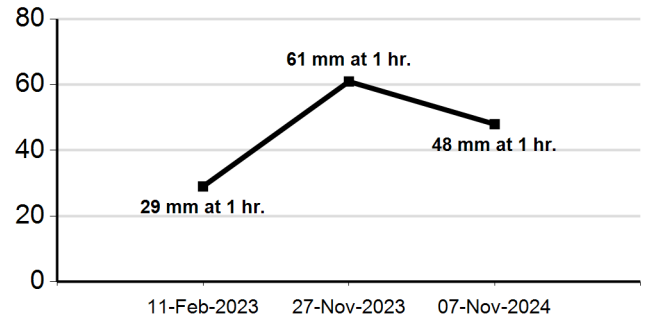
**WBC Total Count**



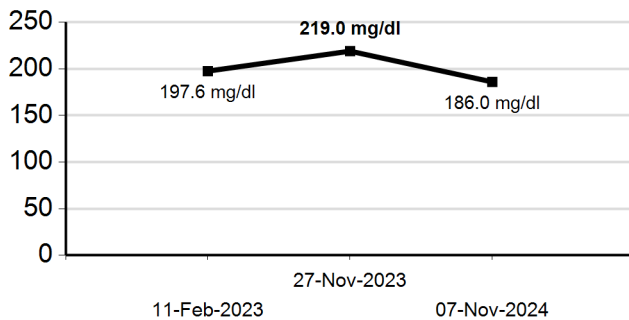
**Platelet Count**



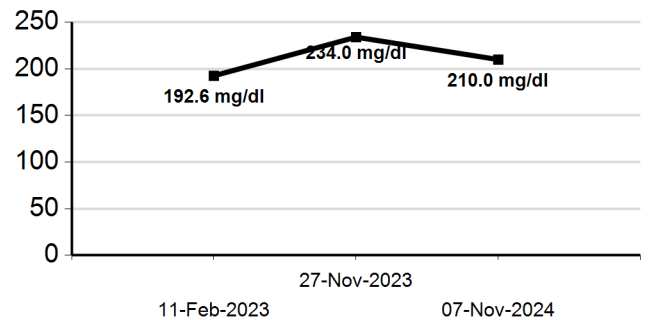
**ESR**



**CHOLESTEROL**



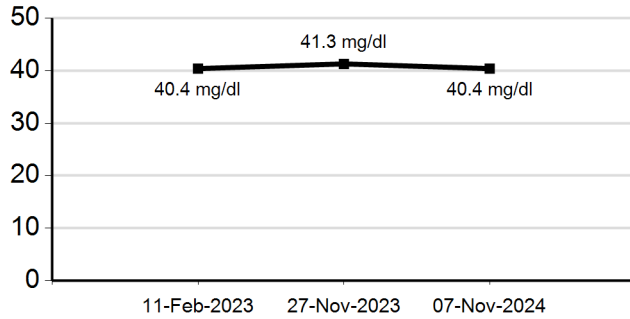
**TRIGLYCERIDES**



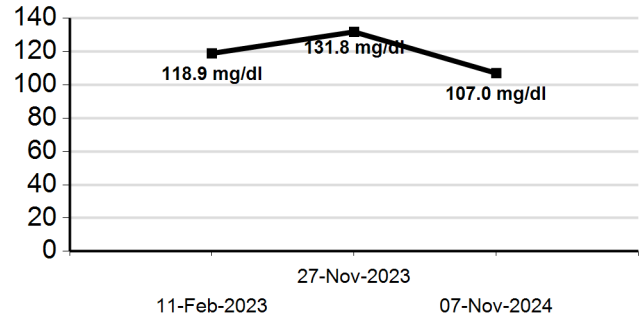


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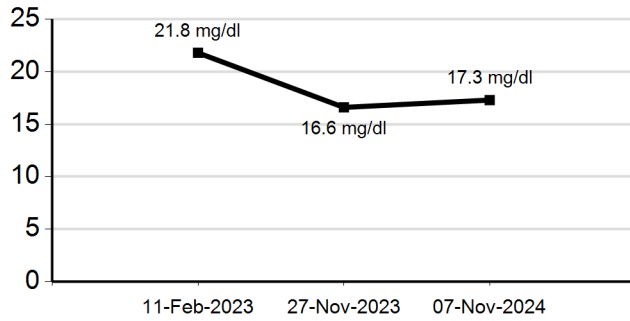
**HDL CHOLESTEROL**



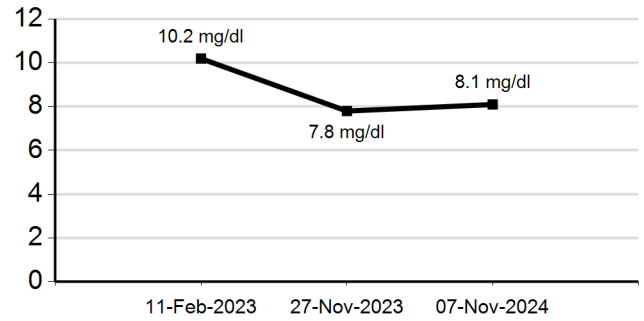
**LDL CHOLESTEROL**



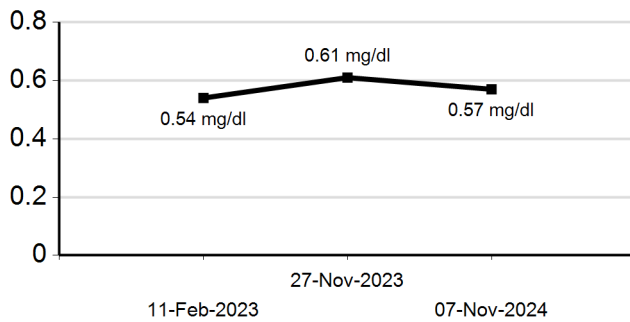
**BLOOD UREA**



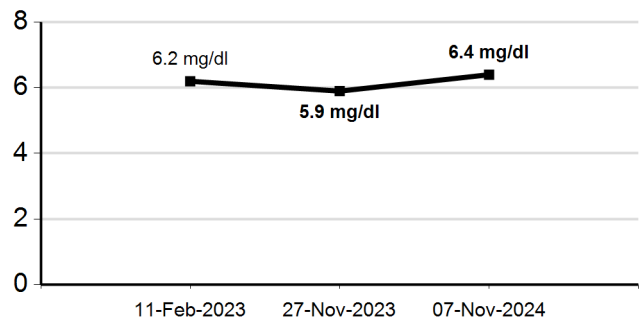
**BUN**



**CREATININE**



**URIC ACID**

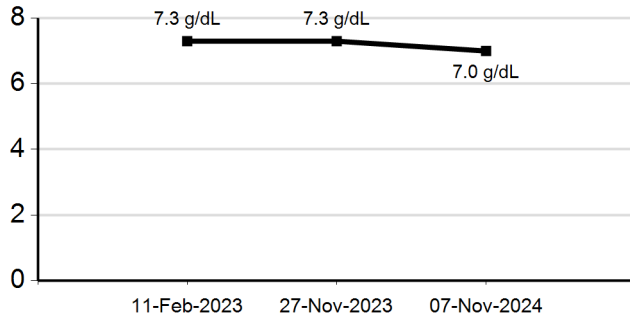




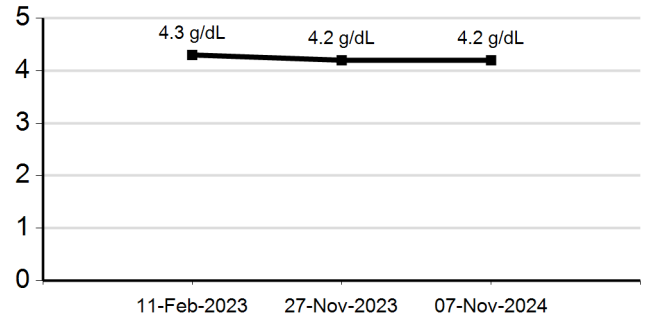


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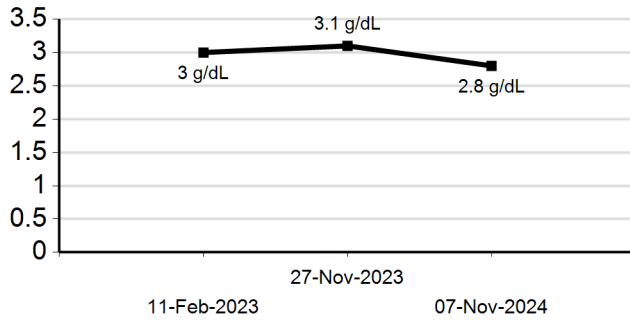
**TOTAL PROTEINS**



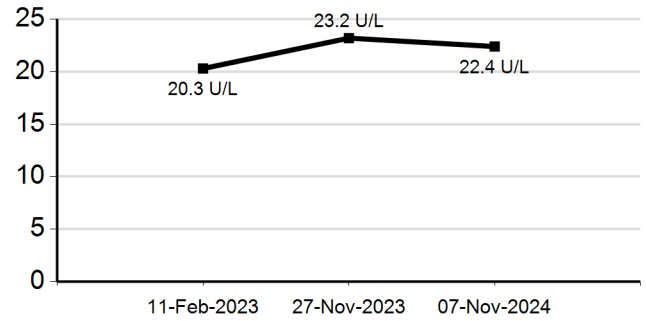
**ALBUMIN**



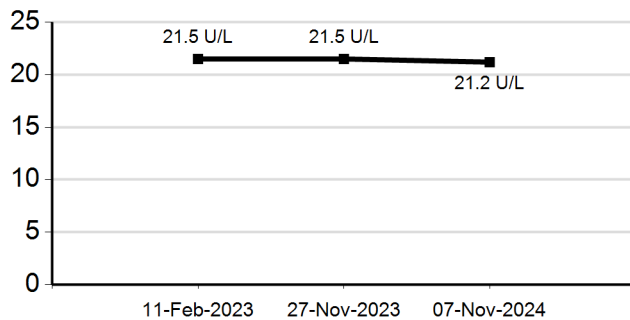
**GLOBULIN**



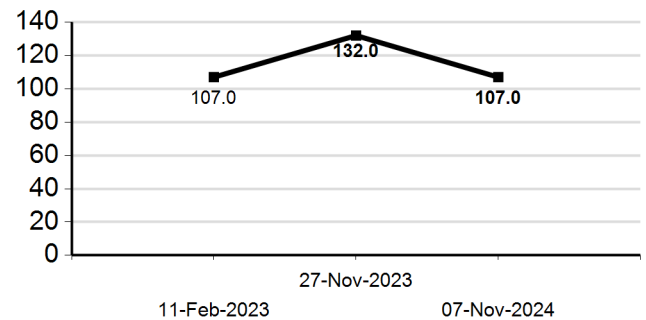
**SGOT (AST)**



**SGPT (ALT)**



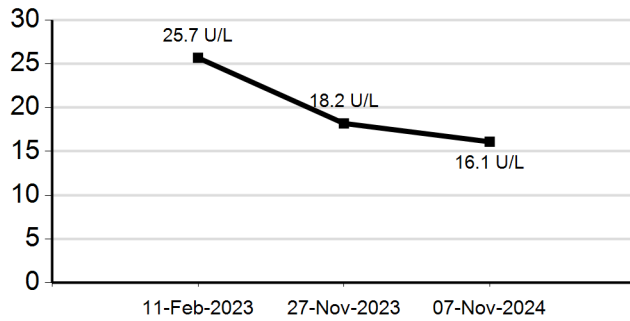
**ALKALINE PHOSPHATASE**



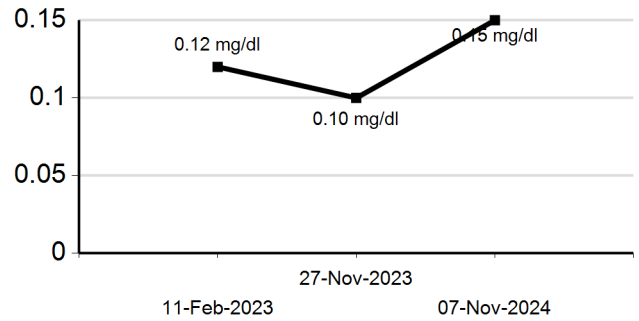


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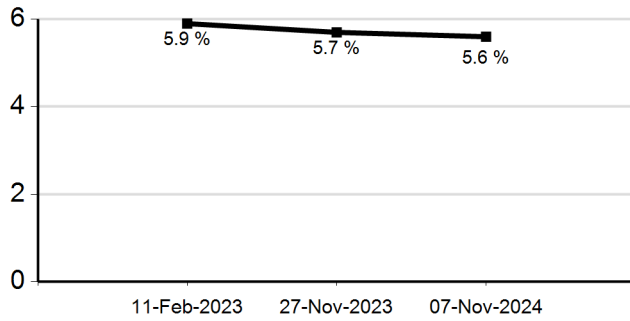
**GAMMA GT**



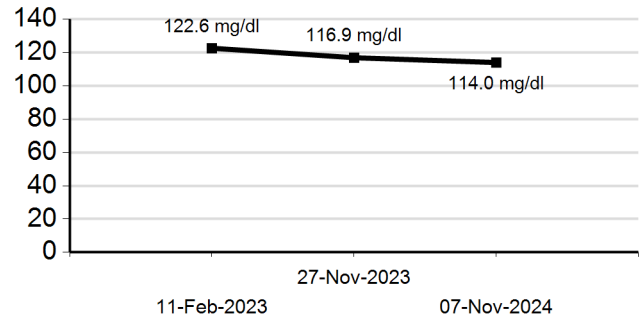
**BILIRUBIN (DIRECT)**



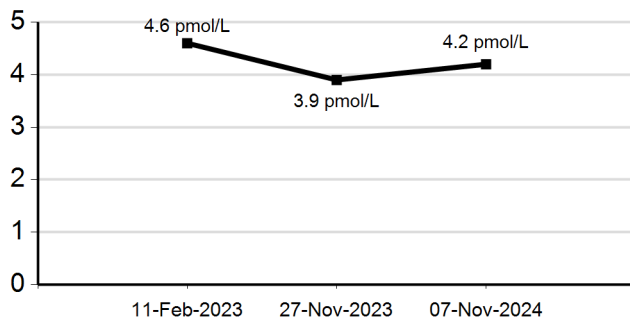
**Glycosylated Hemoglobin (HbA1c)**



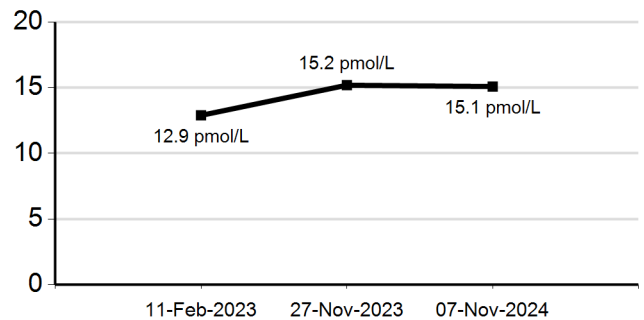
**Estimated Average Glucose (eAG)**



**Free T3**



**Free T4**

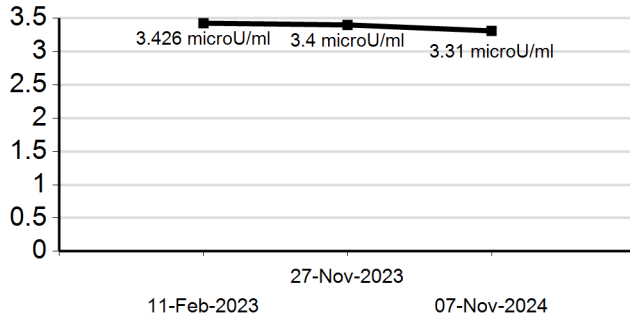




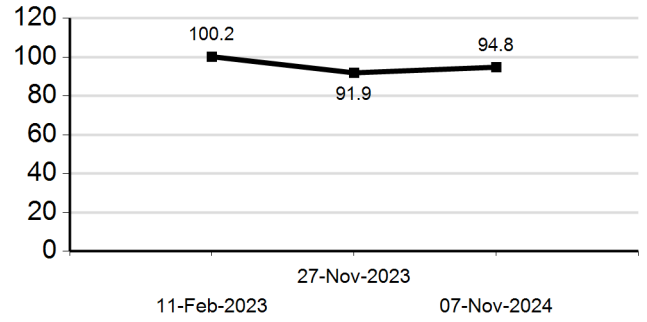
Use a QR Code Scanner Application To Scan the Code

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**Consulting Dr.** : -  
**Reg. Location** : Kandivali East (Main Centre)

**sensitiveTSH**



**GLUCOSE (SUGAR) FASTING**



**GLUCOSE (SUGAR) PP**

