



भारत सरकार

GOVERNMENT OF INDIA

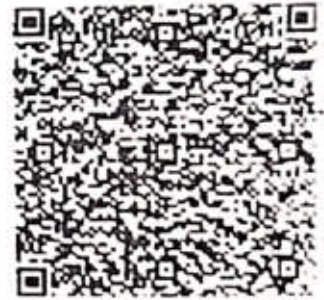


प्रिया रानी

Priya Rani

जन्म तिथि / DOB : 09-08-1989

महिला / FEMALE



3824 7196 5871

मेरा आधार, मेरी पहचान



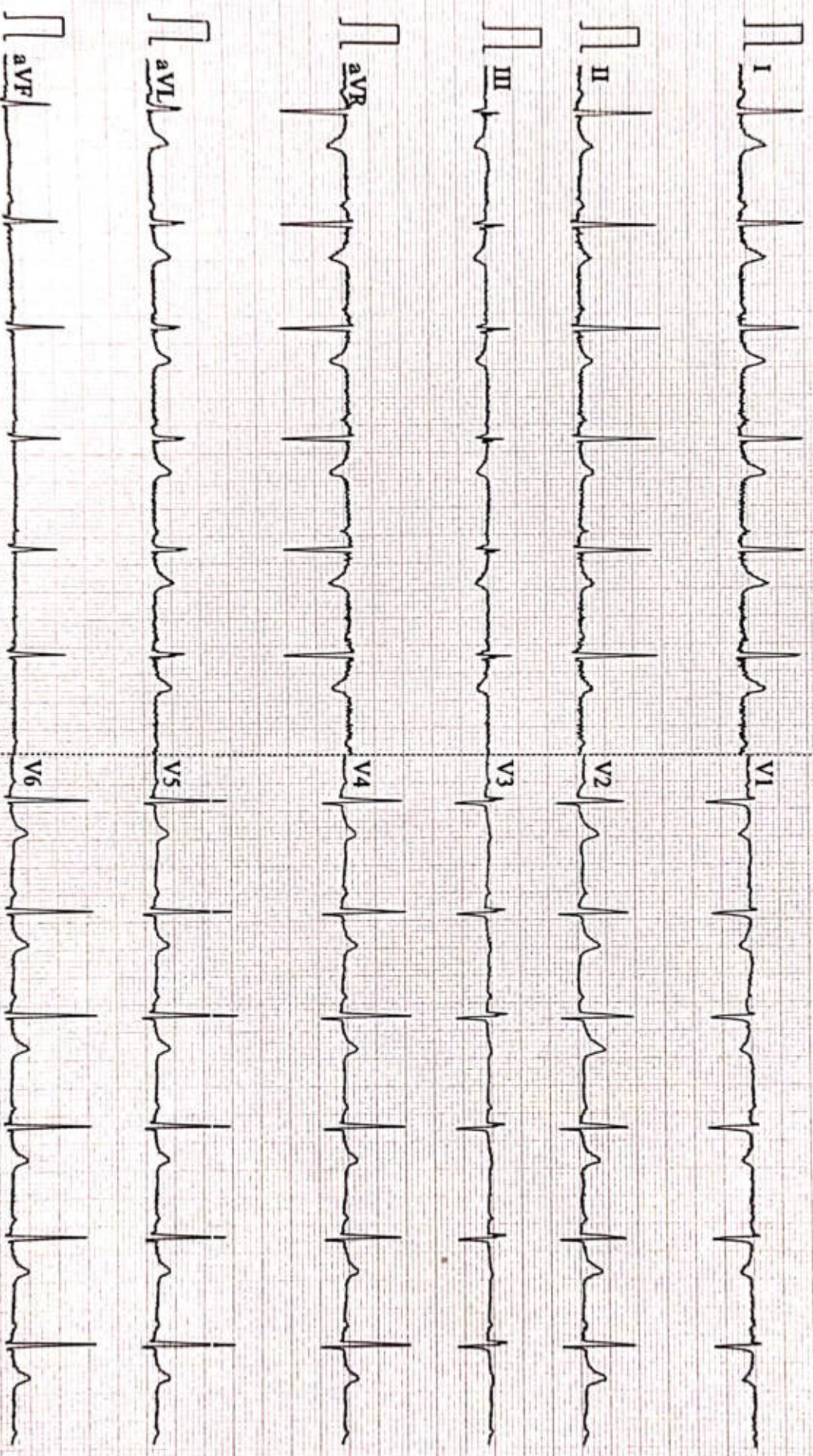
ID: 89
PRIYA RANI
Female 35Ycars

09-11-2024 11:18:27 AM

HR : 75 bpm
P : 89 ms
PR : 140 ms
QRS : 81 ms
QT/QTc : 351/393 ms
P/QRS/T : 83/1/5 °
RV5/SV1 : 1.332/0.674 mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Ref-Phys: **RAJMAN**
KBS, MD
Report Confirmed: 38940
Reed



Patient Name	PRIYA RANI	Date	09-11-2024
Age/Sex	35/F	Ref. Dr.	CORPORATE

CHEST X-ray(PA)

FINDINGS:

Normal bronchovascular markings in bilateral lung fields

Bilateral hila are normal.

Trachea appears normal.

Visualized bones are grossly normal.

Cardiac shadow is within normal limits

Bilateral costophrenic angles are clear.

Impression :

- *No significant abnormality detected.*



Dr. Sandip Maheshwari

MD Radio diagnosis





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AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT.LTD.)

F-41, P.C. Colony, Opp. Madhuban Complex,
Near Malahi Pakari Chowk, Kankarbagh, Patna-20
9065875700
info@aarogyamdiagnostics.com
www.aarogyamdiagnostics.com

Name :- Priya Rani
Pt's ID :- 18/39884
Refd by :- Dr. Corp.

Age/Sex:-35Yrs/F
Date :09/11/24

Thanks for referral.

REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Mild enlarged in size(14.8cm) with raised echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (9.0cm)with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.
Right Kidney measures 9.1cm and Left Kidney measures 9.4cm.
- Ureters** :- Ureters are not dilated.
- U. Bladder:-** It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Uterus** :- Normal in size (7.6cm x 4.3cm) and anteverted in position with normal myometrial echotexture and endometrial thickness.
- Ovaries** :- Both ovaries show normal echotexture and follicular pattern. Right ovary measures 28mm x 19mm and Left ovary measures 28mm x 20mm.
No pelvic (POD) collection is seen.
- Others** :- No ascites or abdominal adenopathy is seen.
No free subphrenic / basal pleural space collection is seen.

IMPRESSION:- *Mild Hepatomegaly with Grade I Fatty Liver.
Otherwise Normal Scan.*

Dr. Arun Kumar
MBBS, DMRD(Radio-Diagnosis)
Consultant Radiologist



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 www.aarogyamdiagnostics.com

Date	09/11/2024	Srl No.	8	Patient Id	2411090008
Name	Mrs. PRIYA RANI	Age	35 Yrs.	Sex	F
Ref. By	Dr.MEDIWHEEL				

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.3	%	

EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

Dr.R.B.RAMAN
MBBS, MD
CONSULTANT PATHOLOGIST



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Date 09/11/2024

Sri No. 8

Patient Id 2411090008

Name Mrs. PRIYA RANI

Age 35 Yrs.

Sex F

Ref. By Dr.MEDIWHEEL

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	12.2	gm/dl	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	6,700	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	59	%	40 - 75
LYMPHOCYTE	33	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	06	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	18	mm/1st hr.	0 - 20
R B C COUNT	4.08	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	36.6	%	35 - 45
M C V	89.71	fl.	80 - 100
M C H	29.9	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.18	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"O"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	91.5	mg/dl	70 - 110
SERUM CREATININE	0.77	mg%	0.5 - 1.3
BLOOD UREA	16.1	mg /dl	15.0 - 45.0
SERUM URIC ACID	5.46	mg%	2.5 - 6.0

LIVER FUNCTION TEST (LFT)



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Date	09/11/2024	Sri No. 8	Patient Id 2411090008
Name	Mrs. PRIYA RANI	Age 35 Yrs.	Sex F
Ref. By	Dr.MEDIWHEEL		

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.81	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.36	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.45	mg/dl	0.00 - 0.70
TOTAL PROTEIN	7.24	gm/dl	6.6 - 8.3
ALBUMIN	4.18	gm/dl	3.4 - 5.2
GLOBULIN	3.06	gm/dl	2.3 - 3.5
A/G RATIO	1.366		
SGOT	39.1	IU/L	5 - 35
SGPT	41.2	IU/L	5.0 - 45.0
ALKALINE PHOSPHATASE IFCC Method	81.4	U/L	35.0 - 104.0
GAMMA GT	23.6	IU/L	6.0 - 42.0
LFT INTERPRET			
<u>LIPID PROFILE</u>			
TRIGLYCERIDES	175.9	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	238.2	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	66.9	mg/dL	35.1 - 88.0
V L D L	35.18	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	136.12	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.561		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.035		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



Date	09/11/2024	Sri No.	8	Patient Id	2411090008
Name	Mrs. PRIYA RANI	Age	35 Yrs.	Sex	F
Ref. By	Dr.MEDIWHEEL				

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.030		
PH	6.5		
ALBUMIN	NIL		
SUGAR	NIL		
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	2-3	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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Sri No. 8

Patient Id 2411090008

Name Mrs. PRIYA RANI

Age 35 Yrs.

Sex F

Ref. By Dr.MEDIWHEEL

Test Name	Value	Unit	Normal Value
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4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.

5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

**** End Of Report ****

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Name	Mrs. PRIYA RANI	Age	35 Yrs.	Sex	F
Ref. By	Dr.MEDIWHEEL				

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR PP	117.1	mg/dl	80 - 160
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**** End Of Report ****

Dr.R.B.RAMAN
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CONSULTANT PATHOLOGIST



Lab Facility : Unipath House, Besides Sahjanand College, Opp. Kamdhenu Complex, Panjarapole, Ambawadi, Ahmedabad-380015 Gujarat
 Phone: +91-79-49006800 | WhatsApp: 6356005900 | Email: info@unipath.in | Website: www.unipath.in
 Regd. Of- ce : 5th Floor, Doctor House, Nr. Parimal Garden, Ahmedabad-380006 Gujarat
 CIN: U85195GJ2009PLC057059



41104100118

TEST REPORT

Reg.No : 41104100118	Reg.Date : 10-Nov-2024 16:12	Collection : 10-Nov-2024 16:12
Name : PRIYA RANI		Received : 10-Nov-2024 16:12
Age : 35 Years	Sex : Female	Report : 10-Nov-2024 17:35
Referred By : AAROGYAM DIAGNOSTICS @ PATNA		Dispatch : 10-Nov-2024 17:55
Referral Dr : <input type="checkbox"/>	Status : Final	Location : 41 - PATNA

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <small>CMIA</small>	0.89	ng/mL	0.70 - 2.04
T4 (Thyroxine), Total <small>CMIA</small>	9.35	µg/dL	5.5 - 11.0
TSH (Thyroid stimulating hormone) <small>CMIA</small>	3.439	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate 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.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

----- End Of Report -----

Dr. Rina Prajapati
 D.C.P. DNB (Path)
 G-21793

Dr. Chandani Dangarasia

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 Page 1 of 1 Reg. No.:- G- 1060