MC-6135

Dr. Smita Ranveer`s

Radiance

CLINICAL DIAGNOSTIC CENTRE

COMPLETE PATHOLOGICAL SOLUTION

222680

Name : Mrs. SARASWATI NAND

Lab ID. : 222680

Age/Sex : 42Years / Female

Ref By : COMPANY PACKAGE-JINKUSHAL

Consulting Dr. : DR. MAYUR JAIN

Collected On : 7/2/2025 12:14 pm

Received On : 7/2/2025 12:24 pm

Reported On : 7/2/2025 8:34 pm

Report Status : FINAL

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDASE)	177.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	43.7	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease :>=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	133.7	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	27	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	107	mg/dL	Optimal:<100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high :>= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	2.45		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	4.05		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

Checked By
Angad_Prasad1

DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist
Regd.No.: 3401/09/2007

24 HOURS 7

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Ref By	: **COMPANY PACKAGE-JINKUSHAL**	**Report Status**	: **FINAL**
Consulting Dr.	: **DR. MAYUR JAIN**		

COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	**10.3**	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	**30.9**	%	36 - 46
RBC COUNT	**3.91**	x10^6/uL	4.5 - 5.5
MCV	**79**	fl	80 - 96
MCH	**26.3**	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	**16.7**	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	10400	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	74	%	40 - 80
LYMPHOCYTES	**19**	%	20 - 40
EOSINOPHILS	02	%	0 - 6
MONOCYTES	05	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	241000	/ cumm	150 to 410
MPV	**15.1**	fl	6.5 - 11.5
PDW	16.4	%	9.0 - 17.0
PCT	0.360	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic, Reduced red blood cells.		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TFT (THYROID FUNCTION TEST)			
SPECIMEN	Serum		
T3	179.0	ng/dl	84.63 - 201.8
T4	8.36	µg/dl	5.13 - 14.06
TSH	3.97	µIU/ml	0.270 - 4.20

DONE ON FULLY AUTOMATED ANALYSER MAGLUMI SNIBE X3

T3 (Triiodo Thyronine)

AGE	RANGE
1-30 days	100-740
1-11 months	105-245
1-5 years	105-269
6-10 years	94-241
11-15 years	82-213
15-20 years	80-210

T4 (Thyroxine)

AGE	RANGES
1-14 Days	11.8-22.6
1-2 weeks	9.9-16.6
1-4 months	7.2-14.4
4-12months	7.8-16.5
1-5 years	7.3-15.0
5-10 years	6.4-13.3
11-15 years	5.6-11.7

TSH(Thyroid stimulating hormone)

AGE	RANGES
0-14 Days	1.0-39
2 weeks -5 months	1.7-9.1
6 months-20 years	0.7-6.4
Pregnancy	
1st Trimester	0.1-2.5
2nd Trimester	0.20-3.0
3rd Trimester	0.30-3.0

INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

Checked By
Angad_Prasad1

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD GROUP			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'B'		
RH FACTOR	NEGATIVE		

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

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*RENAL FUNCTION TEST

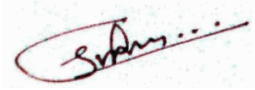
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	21.7	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	10.14	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.68	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	4.40	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	140.1	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	4.17	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	106.5	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.84	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.50	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	7.58	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	4.04	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	**3.54**	g/dl	1.9 - 3.5
A/G RATIO calculated	1.14		0 - 2

BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

Checked By
Angad_Prasad1



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LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	1.02	mg/dL	0.2 - 1.2
DIRECT BILLIRUBIN (Method-Diazo)	**0.42**	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.60	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	26.0	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	28.2	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	94.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	7.58	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	4.04	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	**3.54**	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.14		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

Checked By
SHAISTA Q

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	**70**	mm/1hr.	0 - 20

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

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Angad_Prasad1

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GLYCOCELATED HEMOGLOBIN (HBA1C)			
HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.70	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	116.9	mg/dL	65.1 - 136.3
METHOD	Particle Enhanced Immunoturbidimetry		

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.

BLOOD GLUCOSE FASTING & PP			
BLOOD GLUCOSE FASTING	**121.0**	mg/dL	70 - 110
BLOOD GLUCOSE PP	**145.3**	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE

INTERPRETATION
- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)
- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS
- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

***Any positive criteria should be tested on subsequent day with same or other criteria.

Result relates to sample tested, Kindly correlate with clinical findings.

---------- END OF REPORT ----------

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Ref By	: COMPANY PACKAGE-JINKUSHAL	**Report Status**	: FINAL
Consulting Dr.	: DR. MAYUR JAIN		

PAP SMEAR

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
SPECIMEN	Pap smear		
CYTO NUMBER	F/100/25		
CLINICAL HISTORY	Routine check up		
NO. OF SMEARS RECEIVED	One		
SPECIMEN ADEQUACY	Adequate		
CELL TYPE	Superficial, intermediate squamous epithelial cells and few endocervical cells		
ORGANISM	Absent		
EPITHELIAL CELL ABNORMALITY	Nil		
OTHER NON-NEOPLASTIC FINDINGS	Many neutrophils		
INTERPRETATION/RESULT	Inflammatory smear.		
FINAL IMPRESION	Negative for intraepithelial lesion or malignancy.		
NOTE	Cervical cytology is a screening test and has associated false negative and false positive results. Regular sampling and follow up is recommended.		

---------- END OF REPORT ----------

Checked By
Dr@Smita

Dr.K.B. MITHILA
M.D.PATHOLOGY
REG NO:- 2016104415

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SEFRA DIGITAL X-RAY

JINKUSHAL HOSPITAL, Rosa Vista, Opp. Suraj Water Park, Waghbill, G.B. Road, Thane (W)
Mob.: 7678031047 / 9833520607 | Time : 9 am. to 9 pm. | SUNDAY ON CALL)

PORTABLE X-RAY AVAILABLE

PATIENT NAME : MRS. SARASWATI NAND	**AGE / SEX 42 YRS / F**
REF BY DR: JINKUSHAL HOSPITAL	**DATE : 07/02/2025**

X-ray Chest PA

Bilateral lung fields appear clear. No obvious pleural/parenchymal lesion noted.

Bilateral hila are normal.

Both costo-phrenic and cardio-phrenic angles appear clear.

Cardiac silhouette is within normal limits.

Both domes of diaphragm appear normal.

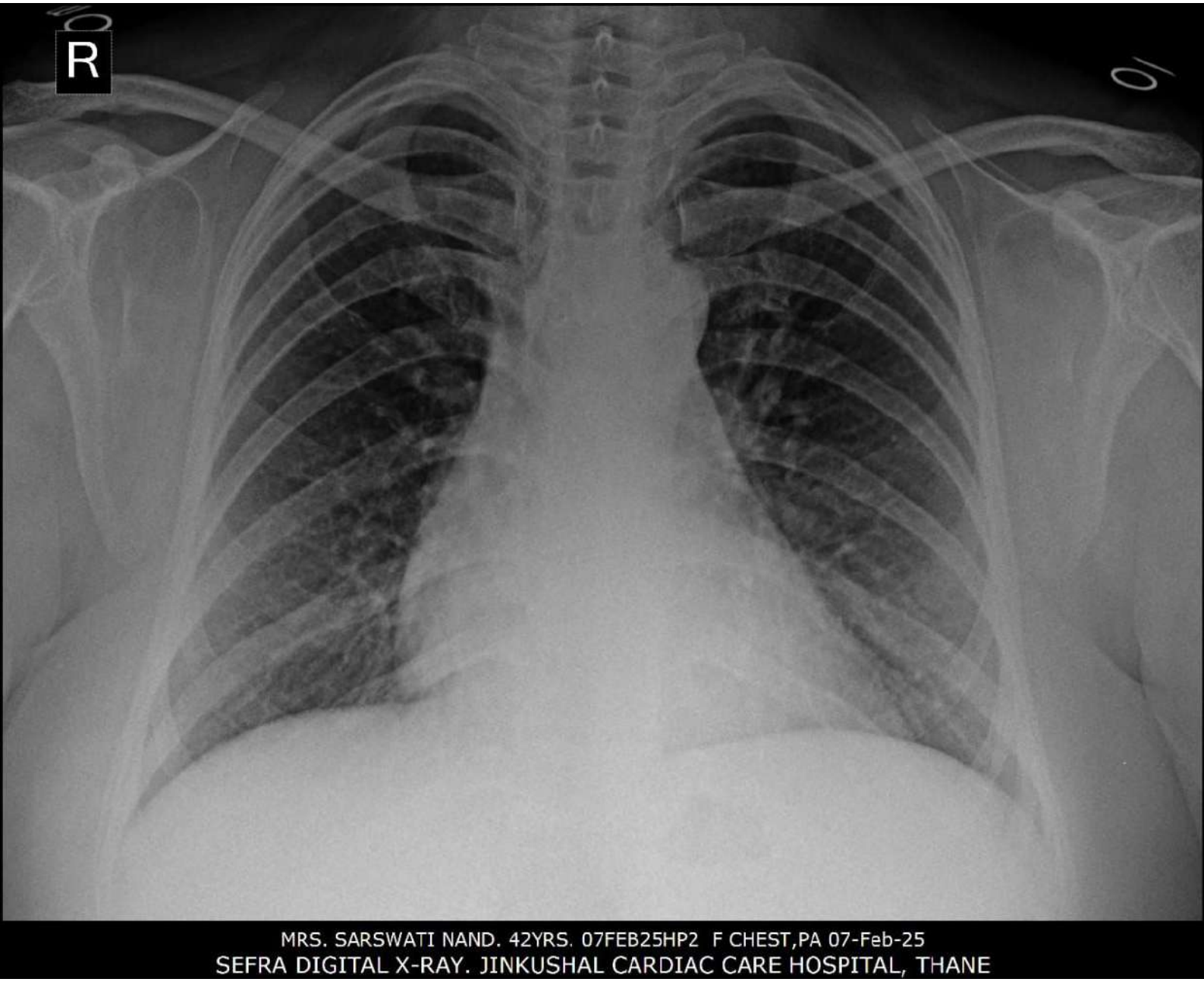
Bony thoracic cage & soft tissues appear normal.

Impression: No significant abnormality detected.

Suggest Clinical correlation and further evaluation.

Thanks for referral

Dr. Devendra Patil
MD Radiology



MRS. SARSWATI NAND. 42YRS. 07FEB25HP2 F CHEST,PA 07-Feb-25

SEFRA DIGITAL X-RAY. JINKUSHAL CARDIAC CARE HOSPITAL, THANE