

### Shalby MD Physician Clinic

OPR NO:

Patient Name:-

Shalby Shafiq

Date: 26/10/24

Age / Sex:-

33/5

Weight:- 71.3kg

Chief Complaints:-

♀ mild back pain

Height:- 1.51cm

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Drug / Food Allergy:-

Past History:-

None  
- Father - DM

Pulse:- 76 min

BP:- 110/70

SpO2:- 99%

Family History:-

Systemic Examination:-

ok  
M  
R  
W  
A  
P. A. M.

Provisional Diagnosis:-

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CIN: L85110GJ2004PLC044667

OL 218

Lot 133

H&A 5.7

an storage as aspland

l

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Fup + 3 over

u

S Wood Rattle

H&A 1C



Pre - op

Post- op

Health Check-up

Date : 26/10/24

Patient Reg. No. : \_\_\_\_\_

Patient Name : Shalbet S. Dsouza Age / Sex : 33 / F

Address : \_\_\_\_\_

**Complaints :**

Pain : \_\_\_\_\_

Bleeding gums : \_\_\_\_\_

Sensitivity : \_\_\_\_\_

Swelling : \_\_\_\_\_

Pus Discharge : \_\_\_\_\_

**Medical History :**

Hypertension : \_\_\_\_\_ DM \_\_\_\_\_ Acidity \_\_\_\_\_ Pregnancy : \_\_\_\_\_

Bleeding Disorders : \_\_\_\_\_ Asthma : \_\_\_\_\_ Allergy : \_\_\_\_\_

Past Surgical Intervention : \_\_\_\_\_

**Any Medication :**

**On Examination :**

Abscess : \_\_\_\_\_ Food lodgement : \_\_\_\_\_

Periodontitis : \_\_\_\_\_ Gingivitis : to be treated

Missing Teeth : 5/6 Mobility : \_\_\_\_\_

**Treatment Advised :**

Scaling : Sittings 1  2  3  Deep  Perio Surgery : \_\_\_\_\_

Restoration : \_\_\_\_\_ Class V Fillings : \_\_\_\_\_

RCT : 5/6 Extraction : \_\_\_\_\_

Dentures : \_\_\_\_\_ Partial Denture : \_\_\_\_\_

Implants : 5/6 Crown & Bridge Present : \_\_\_\_\_

Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :


**Some Golden Rules :**

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv: Intentional RIT 6/

Implant 6/

*Jadav P.*

**Dr. Darshini V. Shah**  
(Consultant Dental Surgeon)

**DR. RUJUTA SHELAT**  
Consultant Ophthalmologists  
Reg. No.: - G-48712

Name:- Shallet D502w

Date:- 26-10-24

Chief Complaints:-

- N/H/O recent eye complaints.
- Came for regular checkup.



Pain Assessment:-

Past History:-

} Nil

Family History:-

Allergy:- Not aware.

Personal History:- Habits: - Alcohol: - Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP: - Pulse: - Temp: -

Systemic Examination:-

HT: - Nil WT: - Nil

Visual Acuity: -  $\left\{ \begin{array}{l} 6/6 \\ 6/6 \end{array} \right.$  NG

PH Vision:-

NCT  $\left\{ \begin{array}{l} 12 \\ 12 \end{array} \right.$

ON Examination

Ant. Segment

Both Eye

CoNL

PACO = ICT

CoNL

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CIN: L85110GJ2004PLC044667



Cornea

clear

clear Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

CONV

Media:-

Disc: -

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

- BE : Emmetropic

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counselling:-

Follow Up ON:-

1 year

Signature of the Consultant

DR. Deepika Shrivastava

**DR. HIMANI THAKER (VYAS)**

M.S (Gynec)  
Consultant Obstetrician & Gynecologist  
Laparoscopic Surgeon  
Infertility Specialist  
Email-ID:- thaker.himani@gmail.com  
Register No. G-31062

### Shalby Women's Health Clinic

Name:- *Shelley*

Chief Complaints:-

Date: *28/10/24*

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

- Obese
- Well Nourished
- Mild-Moderate Nourished
- Severely Mal-Nourished

LMP:- *22/10/24*

M/H:-

*Clonit .*  
*amp - 3-4 days R/O*  
*30*

O/H:-

*OH - malignancy*

P/H:-

F/H

Examination:-

*PLA - soft*

Provisional Diagnosis:-

*PAP not taken as pt is in menses*

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CIN: L85110GJ2004PLC044667

Treatment & Further Advices:-  
(Write in Capital Letters)

Investigaion Advised:-

Adv  
fup next wk  
for  
PAL smear  
←

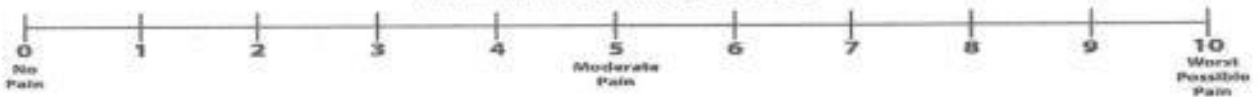
*[Handwritten mark]*

Follow Up:

Date:- \_\_\_\_\_

Incase of emergency Please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096

**Numeric Rating Scale**



**Wong-Baker FACES® Pain Rating Scale**





ID:  
Name:

Sex: M  
Birth date: / /

years

cm

kg

mmHg

medications:

symptoms:

history:

heart rate

PR int

QRS dur

QT/QTc(E) int

QT/ORS/ST axis

RV5/SV1 amp

RV5+SV1 amp

bpm

ms

ms

ms

ms

ms

ms

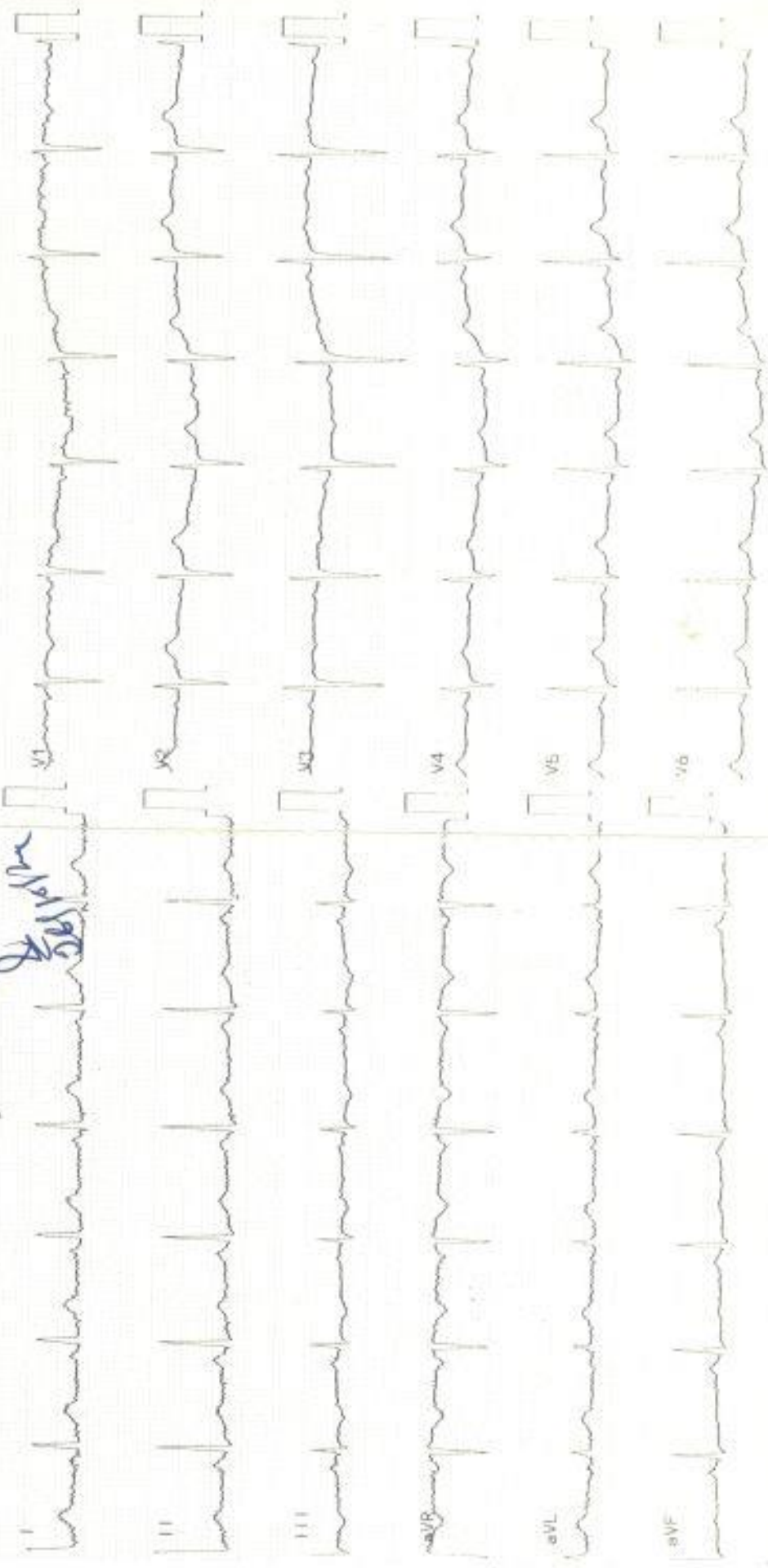
10 mm/mV 25 mm/s Filter: H60 d 100 Hz

10 mm/mV

33 female  
Shallet d50424

Unconfirmed Report  
Reviewed by:

*Shallet*



Patient's Name: Shallet Dsouza

UHID:277640

Age: 36 yrs / female

Date:26 / 10 / 2024

**ECHOCARDIOGRAPHY REPORT****Valves:-**

Mitral valve :Normal, No MR

Aortic valve :Normal, No AR

Tricuspid valve :Normal, No TR

Pulmonary valve:Normal, No PR

**Chambers:-**

Left Atrium:Normal

Right Atrium:Normal

Right Ventricle:Normal size cavity,Good RV systolic function With TAPSE:20

Left Ventricle: Normal size cardiac chambers, No Regional wall Motion abnormality.  
Normal LV systolic function  
with Ejection Fraction 60 %.  
**Normal Diastolic Flow Pattern.**

**Septae:-**

IVS: Intact. No residual VSD.

IAS :Intact.

Pericardium:Normal.

IVC:13 mm with more than 50% collapsibility.

**OTHER FINDINGS :- Bilateral lung angle clear****CONCLUSION:-**

- Normal LV Systolic function
- No RWMA
- EF 60 %

**DR.SUSHIL YADAV**

Consultant Clinical cardiologist

**Note : Normal echo study does not rule out underlying Coronary artery disease****SHALBY HOSPITAL, SURAT**

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CIN: L85110GJ2004PLC044667

Patient Name: SHALLET STAJINA DSOUZA		UHID: SUR0000348304	
Age / Sex: 33 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby hospital	Date: 26.10.2024	

**ULTRASOUND OF ABDOMEN AND PELVIS (TAS)**

**Liver** is normal in size and appearance. It shows normal parenchymal reflectivity. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. **Portal vein** appears normal.

**Gall bladder** is well distended and appears normal. No evidence of calculi seen. Wall appears normal. No pericholecystic fluid seen. **CBD** appears normal.

**Pancreas** appears normal in size and echotexture.

**Spleen** appears normal in size and appearance. No focal lesion seen.

**Right kidney** it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

**Left kidney** it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

**Urinary bladder** well distended and appears normal. No evidence of any intraluminal mass or calculi.

**Uterus** appears normal in size. The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

**IMPRESSION:**

- **No significant abnormality detected.**

*Thanks for referrals.*

**DR. NITIN DESAI**  
CONSULTANT RADIOLOGIST

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Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email: pathology.surat@shalby.in | Web: www.shalby.org

PID : SUR0000348304 OP-001

REPORT STATUS : Interim



Patient Name : **Mrs. Shallet Stajina Dsouza** / Registered On : 26-Oct-2024 09:08 AM  
 Lab ID : 410901997 Collected On : 26-Oct-2024 08:28 AM  
 Gender/Age : Female / 33 Years DOB : 11-Jan-1991 Received On : 26-Oct-2024 09:39 AM  
 Ref. By : Health Check Up Shalby Sample Type : Fluoride F, Urine (PP),  
 Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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## PLASMA GLUCOSE LEVEL

## FASTING PLASMA GLUCOSE

<b>Plasma Glucose (F)</b>	92	mg/dL	74 - 106
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (F)</b>	ABSENT	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

## POST PRANDIAL PLASMA GLUCOSE

<b>Plasma Glucose (PP)</b>	74	mg/dL	Normal: 100-140 Impaired: 140-199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

<b>Urine Sugar (PP)</b>	ABSENT	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

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

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Approved On : 26-Oct-2024 01:03 PM

**Dr Pankaj Agrawal**M.B., D.C.P.  
Consulting Pathologist



<b>Patient ID:</b>	SUR0000348304	<b>Patient Name:</b>	SHALLET S DSOUZA
<b>Age:</b>	33 Years	<b>Sex:</b>	F
<b>Accession Number:</b>	10654 MHC	<b>Modality:</b>	DX
<b>Referring Physician:</b>	DR SHALBY	<b>Study:</b>	CHEST PA
<b>Study Date:</b>	26-Oct-2024		

**CHEST X-RAY (PA)**

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

**IMPRESSION:**

- No significant abnormality seen.

*Thanks for referral.*

  
**DR. NITIN DESAI**  
CONSULTANT RADIOLOGIST

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PID : SUR0000348304 OP-001

REPORT STATUS : Interim



Patient Name : **Mrs. Shallet Stajina Dsouza** / Registered On : 26-Oct-2024 09:08 AM  
 Lab ID : 410901997 Collected On : 26-Oct-2024 08:28 AM  
 Gender/Age : Female / 33 Years DOB : 11-Jan-1991 Received On : 26-Oct-2024 09:35 AM  
 Ref. By : Health Check Up Shalby Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
<b>BLOOD COUNT AND INDICIES</b>			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	13.9	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.70	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	42.2	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	89.8	fL	83 - 101
MCH <i>Calculated</i>	29.6	pg	27 - 32
MCHC <i>Calculated</i>	32.9	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	11.9	%	11.6 - 14.0

**TOTAL LEUCOCYTE COUNT**

Total WBC Count *Electrical Impedance* 8640 cells/cmm 4000 - 10000

**DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)**

NEUTROPHILS <i>Flow Cytometry</i>	66	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	27	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	2	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

**PLATELET INDICES**

PLATELET COUNT *Electrical Impedance* 332000 /cmm 150000 - 410000  
 MPV *Calculated based on PLT Histogram* 8.2 fL 7.5 - 12.0

**PERIPHERAL SMEAR EXAMINATION**

RBCs Normochromic and Normocytic.  
 WBCs Total and differential leucocyte counts are within normal limit.  
 PLATELETs Adequate in number and normal in morphology.  
 MALARIAL PARASITE Malarial parasites are not seen on smear examination.

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference Interval: Dacie and Lewis practical haematology 11th edition.

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Approved On : 26-Oct-2024 10:36 AM

*Dr Pankaj Agrawal*  
**Dr Pankaj Agrawal**  
 M.B., D.C.P.  
 Consulting Pathologist



Certificate No. : MC-208

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PID : SUR0000348304 OP-001

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Gender/Age : Female / 33 Years	DOB : 11-Jan-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:35 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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**BLOOD GROUP**

(Tube agglutination: Forward &amp; reverse)

ABO Type	"A"
RH Type	POSITIVE

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 M.B., D.C.P.  
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Parameter	Result	Unit	Biological Ref. Interval
<b>ESR 1st hour</b> <i>Modified Westergren Method</i>	26	mm in 1 hour	0 - 20
<b>HBA1C</b>			
<b>HbA1c - Glycated Haemoglobin</b> <i>Boronate Affinity Assay</i>	5.7 ✓	%	Non-diabetic: ≤ 5.6 Pre-diabetic: 5.7-6.4 Diabetic: ≥ 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5
<b>Estimated Average Glucose (eAG) (mg/dL)</b> <i>Calculated</i>	117	mg/dL	

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Gender/Age : Female / 33 Years	DOB : 11-Jan-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:38 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>LIPID PROFILE</b>			
<b>LIPID PROFILE</b>			
<b>Cholesterol</b> <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	<b>217</b>	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
<b>SERUM TRIGLYCERIDE</b> <i>Lipase/GK/GPO/POD</i>	<b>134</b>	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
<b>HDL CHOLESTEROL DIRECT</b> <i>Phosphotungstic Acid/Mgo2 - Enzymatic</i>	<b>57</b>	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
<b>Non HDL Cholesterol</b> <i>Calculated</i>	<b>160</b>	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
<b>LDL Cholesterol</b> <i>Calculated</i>	<b>133</b>	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129  Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
<b>VLDL</b> <i>Calculated</i>	<b>27</b>	mg/dL	6 - 38
<b>LDL/dHDL</b> <i>Calculated</i>	<b>2.3</b>		2.5 - 3.5
<b>Chol/dHDL</b> <i>Calculated</i>	<b>3.8</b>	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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**THYROID PROFILE (TFT)**

<b>Total T3</b> <i>Chemiluminescence immunoassay (CLIA)</i>	108	ng/dL	87 - 178
<b>Total T4</b> <i>Chemiluminescence immunoassay (CLIA)</i>	10.05	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
<b>TSH</b> <i>Chemiluminescence immunoassay (CLIA)</i>	4.097	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

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 has influence on the measured serum TSH concentrations.

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

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Lab ID : 410901997	Collected On : 26-Oct-2024 08:28 AM
Gender/Age : Female / 33 Years	DOB : 11-Jan-1991
Ref. By : Health Check Up Shalby.	Received On : 26-Oct-2024 09:38 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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## BIOCHEMISTRY

<b>Phosphorus (Not in NABL Scope)</b>	3.5	mg/dL	2.5 - 4.5
<i>Phosphomolybdate reduction (PMA Phenol)</i>			

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**Dr Pankaj Agrawal**  
 M.B., D.C.P.  
 Consulting Pathologist

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 Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India.  
 Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email: pathology.surat@shalby.in | Web: www.shalby.org

PID : SUR0000348304 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Shallet Stajina Dsouza /	Registered On : 26-Oct-2024 09:08 AM
Lab ID : 410901997	Collected On : 26-Oct-2024 08:28 AM
Gender/Age : Female / 33 Years	DOB : 11-Jan-1991
Ref. By : Health Check Up Shalby	Received On : 26-Oct-2024 09:46 AM
	Sample Type : Urine

## URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
<b>Physical Examination</b>			
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
<b>Chemical Examination</b>			
Glucose	<i>Glucose-oxidase/oxidase reaction</i> Nil		Negative
Bilirubin	<i>Azo coupling Reaction with diazonium</i> Negative		Negative
Ketone	<i>Sodium Nitroprusside reaction</i> Nil		Negative
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i> 1.025	S.G. value	1.001 - 1.035
Blood	<i>Peroxidase like activity of hemoglobin</i> Trace (+/-)		Negative
pH	<i>Double Indicator principle</i> 6.0	PH value	4.6 - 8.0
Protein	<i>Protein Error of Indicator Principle</i> Negative		Negative
Urobilinogen	<i>Modified Ehrlich reaction</i> Normal	EU/dL	Upto 1.0 mg/dL (EU/dL)
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i> Negative		Negative
Leucocyte	<i>Leucocyte Esterase Test</i> Negative		Negative
<b>Microscopic Examination</b>			
Pus cells	4-5/hpf	/hpf	0-5/hpf
Red blood cells	2-3/hpf	/hpf	NIL/hpf
Epithelial cells	15-20/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Present		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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Gender/Age : Female / 33 Years DOB : 11-Jan-1991 Received On : 26-Oct-2024 09:38 AM  
Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Liver Function Test</b>			
<b>Liver Function Test</b>			
<b>SGPT (ALTV)</b> <i>Multi Point Rate with P-S-P</i>	13	U/L	9 - 52
<b>SGOT (AST)</b> <i>Multi Point Rate with P-S-P</i>	22	U/L	14 - 36
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer</i>	76	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >=51 yr : 56 - 119
<b>GGT</b> <i>L-gamma-glutamyl-4-methoxyaldolglycylglycine Kinetic</i>	19	U/L	12 - 43
<b>S. PROTEIN</b> <i>Buret (Alkaline cupric sulfate), End Point</i>	7.9	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green (BCG), Colorimetric</i>	4.0	g/dL	3.5 - 5.0
<b>S. GLOBULIN</b> <i>Calculated</i>	3.9	g/dL	2.3 - 3.6
<b>A/G Ratio</b> <i>Calculated</i>	1.0	Ratio	1.0 - 2.3
<b>Bilirubin Total</b> <i>Azobilirubin/Diphtylene/Diazonium Salt</i>	0.5	mg/dL	0-1 day (premature) 1.0 - 8.0 0-1 day (full term) : 2.0 - 6.0 1-2 day (premature) : 6.0 - 12.0 1-2 day (full term) : 6.0 - 10.0 3-5 day (premature) : 10.0 - 14.0 3-5 day (full term) : 4.0 - 8.0  Adult : 0.2 - 1.3
<b>Bilirubin Unconjugated</b> <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.2	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
<b>Bilirubin Direct</b> <i>Calculated</i>	0.3	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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

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