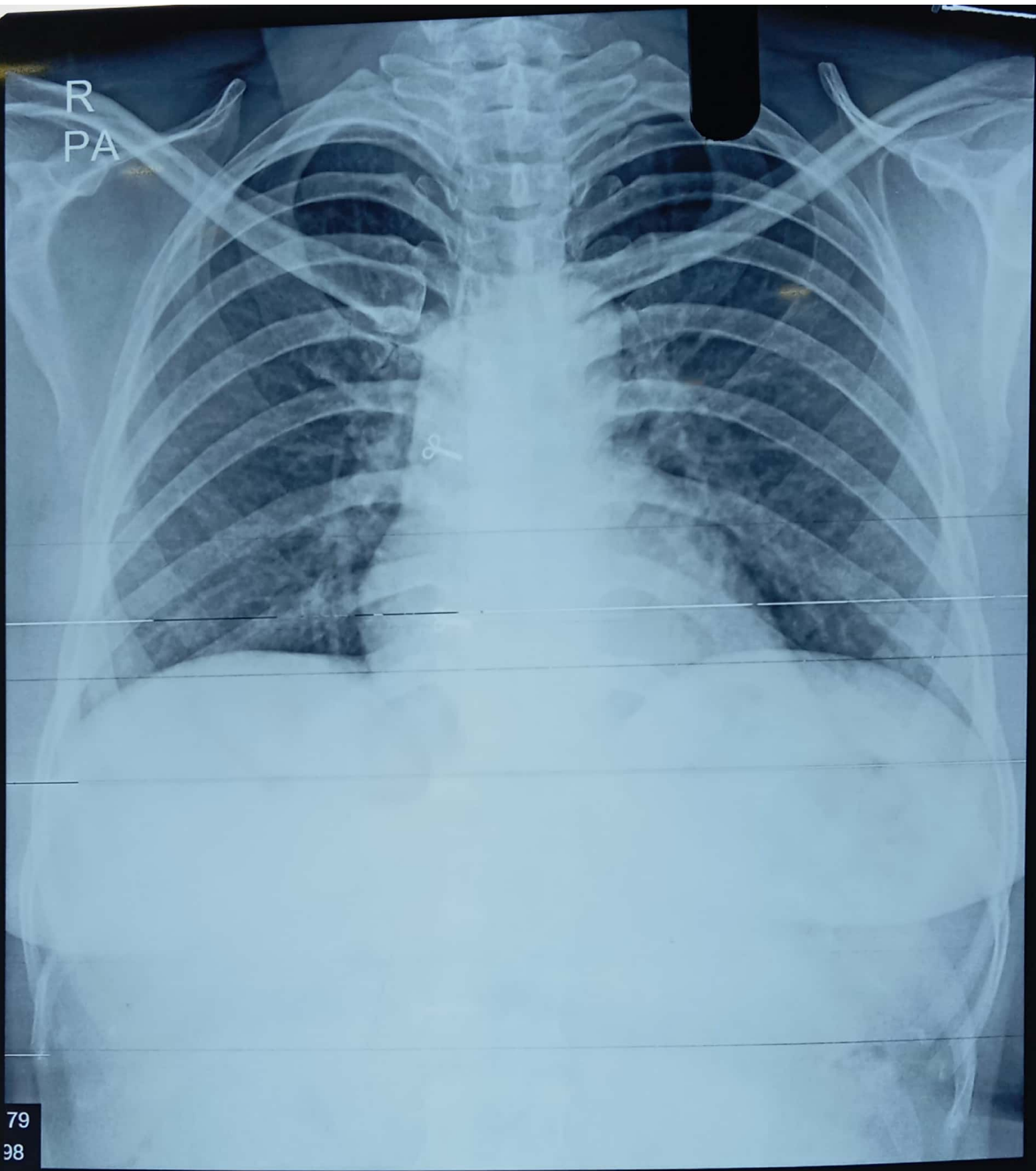


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16405 ANILA DEVI 41Y CHEST PA 26-10-24

MEDIWORLD MULTYSPECIALITY HOSPITAL DARBHANGA

F



UHID No / Reg No :- UD-24250016405 / 24250016405

Print Date : 26-Oct-2024 03:00 PM

Patient Name :- Mrs ANILA DEVI Husband :-  
BANK OF BARODA

Mobile :- 7049808095

Receipt No :- 24250001254 / 26 Oct 2024

Age :- 41 Y/F

Address :- SHISO , Darbhanga

Referred By :- SELF

**Final Report**

Investigations	Observations	Biological Ref. Interval	Unit
Sample No:24256449 Type of Sample :- Blood,			
<b>HAEMATOLOGY</b>			
<b>CBC</b>			
HB	11.8	11.00 - 16.00	gm/dl
TLC	5,100	4000.00 - 11000.00	Cells/cumm.
<b>DLC DIFFERENTIAL LEUCOCYTE COUNT</b>			
NEUTROPHILS	64	40.00 - 75.00	%
LYMPHOCYTES	30	20.00 - 45.00	%
EOSINOPHILS	04	1.00 - 6.00	%
MONOCYTES	02	2.00 - 10.00	%
BASOPHILS	00	<1-2	%
BLASTS	00		%
RBC	3.98	3.50 - 4.50	million/cumm
HCT	35.3	35.00 - 50.00	%
MCV(MEAN CELL VOLUME)	88.69	83.00 - 101.00	fl
MCH(MEAN CELL HAEMOGLOBIN)	29.7	27.00 - 32.00	pg
MCHC	33.5	31.50 - 35.00	gm%
PLATELET COUNT	1.67	1.50 - 4.10	lacs /cumm

Remarks :-

*E Haque*

Dr E Haque

MBBS.MD

Pathologist

Lab Technician

\* END OF REPORT \*

Note :- \* If the result of the test is alarming or unexpected, the patient is contact the laboratory immediately  
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### Final Report

Investigations	Observations	Biological Ref. Interval	Unit
----------------	--------------	--------------------------	------

Sample No:24256449 Type of Sample :- Blood,

#### HAEMATOLOGY

HBA1C(GLYCOSYLATED HAEMOGLOBIN)

5.1

4.20 - 6.00

%

Fully Automated H.P.L.C (Biorad Variant II Turbo)

Normal - 4.2 - 6.2 %

Good diabetic control - 5.5 - 6.8 %

Fair control - 6.8 - 8.2 %

Poor control - > 8.2 %

A1C Result

%	MEAN PLASMA GLUCOSE
12.0	345 19.5
11.0	310 17.5
10.0	275 15.6
9.0	240 13.5
8.0	205 11.5
7.0	170 9.5
6.0	135 7.5
5.0	100 5.5
4.0	65 3.5

Remarks :-

Lab Technician

\* END OF REPORT \*

Dr E Haque

MBBS,MD

Pathologist

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Age :- 41 Y/F

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**Final Report**

Investigations	Observations	Biological Ref. Interval	Unit
Sample No:24256449 Type of Sample :- Blood,			
<b>HAEMATOLOGY</b>			
ESR	15	0.00 - 20.00	mm at 1 hr
<b>BLOOD GROUP</b>			
ABO BLOOD GROUP	"A"		
RH. FACTOR	POSITIVE		
<b>BIOCHEMISTRY</b>			
BLOOD SUGAR FASTING	86.0	70.00 - 110.00	mg/dl
BLOOD SUGAR PP	98.0	70.00 - 145.00	mg/dl
GAMMA-GLUTAMYL TRANSFERASE (GGT)	18.0	0.00 - 55.00	IU/L
<b>URINE EXAMINATION</b>			
URINE SUGAR	NIL		

Remarks :-

Lab Technician

Dr E Haque

MBBS.MD

Pathologist

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Final Report

Investigations	Observations	Biological Ref. Interval	Unit
----------------	--------------	--------------------------	------

Sample No:24256449 Type of Sample :- Blood,

BIOCHEMISTRY

RFT (RENAL FUNCTION TESTS)

UREA	19.0	13.00 - 43.00	mg/dl
CREATININE	0.82	0.60 - 1.10	mg/dl
URIC ACID	4.4	2.50 - 6.00	mg/dl
SERUM SODIUM NA+	138.6	135.00 - 145.00	mEq/Ltr
SERUM POTASSIUM K+	4.3	3.50 - 5.20	mEq/Ltr
SERUM CHLORIDE CL-	106.7	98.00 - 110.00	mEq/Ltr
CALCIUM	8.9	8.80 - 10.20	mg/dl
PHOSPHORUS	4.1	2.50 - 5.00	mg/dl
TOTAL PROTIENS	7.2	6.60 - 8.70	g/dl
ALBUMIN	4.0	3.50 - 5.20	gm%
GLOBULIN	3.20	1.50 - 3.60	gms/dl
ALBUMIN/GLOBULIN RATIO	1.25	1.00 - 1.80	g/dl

Remarks :-

SPIRIT TO HEAL

*E Haque*

Lab Technician

Dr E Haque

MBBS.MD

Pathologist

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Mobile :- 7049808095

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Address :- SHISO , Darbhanga

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### Final Report

Investigations	Observations	Biological Ref. Interval	Unit
----------------	--------------	--------------------------	------

Sample No:24256449 Type of Sample :- Blood,

#### BIOCHEMISTRY

##### LFT (LIVER FUNCTION TESTS)

TOTAL BILIRUBIN	1.02	0.00 - 1.20	mg/dl
DIRECT BILIRUBIN	0.26	0.00 - 0.30	mg/dl
INDIRECT BILIRUBIN	0.76	0.20 - 0.70	mg/dl
SGOT	13.0	2.00 - 31.00	U/L
SGPT	14.0	0.00 - 45.00	U/L
ALKALINE PHOSPHATASE	96.0	56.00-119.00	U/L
TOTAL PROTIENS	7.2	6.60 - 8.70	g/dl
ALBUMIN	4.0	3.50 - 5.20	gm%
GLOBULIN	3.20	1.50 - 3.60	gms/dl
A/G RATIO	1.25	2:1	RATIO

Remarks :-

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SPIRIT TO

*E Haque*

Lab Technician

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MBBS.MD

Pathologist

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Address :- SHISO , Darbhanga

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**Final Report**

Investigations	Observations	Biological Ref. Interval	Unit
Sample No:24256449 Type of Sample :- Blood,			
<b>BIOCHEMISTRY</b>			
<b>LIPID PROFILE</b>			
TOTAL CHOLESTROL	201.0	Desirable : - < 200 mg/dL Borderline: - 200 - 239 mg/dL High : - > 240mg/dL	mg/dl
TRIGLYCERIDES	115.0	35.00 - 160.00	mg/dl
HDL CHOLESTROL	52.0	42.00 - 88.00	mg/dl
LDL CHOLESTROL	126.00	<130	mg/dl
VLDL	23.00	<40	mg/dl
CHOLESTROL/ HDL RATIO	3.87	<3.0 LOW RISK, 3.0-5.0 AVG RISK, >5.0 HIGH RISK	ratio
LDL/HDL RATIO	2.42	<3	ratio

Remarks :-

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SPIRIT TO HEAL

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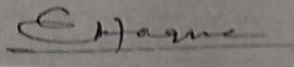
### Final Report

Investigations	Observations	Biological Ref. Interval	Unit
<b>Sample No:24256450 Type of Sample :- Urine,</b>			
<b>URINE EXAMINATION</b>			
<b>URINE ROUTINE EXAMINATION</b>			
<b>PHYSICAL EXAMINATION</b>			
QUANTITY	20		ml
COLOR	STRAW	CLEAR YELLOW	
APPEARANCE	CLEAR	CLEAR	
<b>CHEMICAL EXAMINATION</b>			
SPECIFIC GRAVITY	1.005	1.01 - 1.03	
PH	5.0	4.60 - 7.50	
GLUCOSE	NIL		
PROTEIN-	NIL		
<b>MICROSCOPIC EXAMINATION</b>			
PUS CELLS	1-2	2.00 - 3.00	/HPF
RBCS ( RED BLOOD CELLS)	NIL	3.50 - 4.50	/HPF
EPITHELIAL CELLS	2-3		/HPF
CASTS	ABSENT	ABSENT	
CRYSTALS	ABSENT	ABSENT	
BACTERIA	ABSENT	ABSENT	
YEAST CELLS	ABSENT	ABSENT	
OTHERS	NIL		

Remarks :-

Lab Technician

\* END OF REPORT \*



Dr E Haque

MBBS.MD

Pathologist

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BANK OF BARODA

Receipt No :- 24250001254 / 26 Oct 2024

Age :- 41 Y/F

Address :- SHISO, Darbhanga

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### Final Report

Investigations	Observations	Biological Ref. Interval	Unit
Sample No:24256449 Type of Sample :- Blood,			
<b>IMMUNOLOGY</b>			
<b>THYROID PROFILE (T3,T4,TSH)</b>			
T3	1.3	0.69 - 2.15	ng/ml
T4	10.4	5.20 - 12.70	ug/dl
TSH	0.98	0.30 - 4.50	μIU/ml

#### Total T3 (Triiodothyronine)

##### Clinical Significance :

Thyroid hormones, T3 and T4, which are secreted by the thyroid gland, regulate a number of developmental, metabolic, and neural activities throughout the body. The thyroid gland synthesizes 2 hormones - T3 and T4. T3 production in the thyroid gland constitutes approximately 20% of the total circulating T3, 80% being produced by peripheral conversion from T4. T3 is more potent biologically. Total T3 comprises of Free T3 and bound T3. Bound T3 remains bound to carrier proteins like thyroid-binding globulin, prealbumin, and albumin). Only the free forms are metabolically active. In hyperthyroidism, both T4 and T3 levels are usually elevated, but in some rare cases, only T3 elevation is also seen. In hypothyroidism T4 and T3 levels are both low. T3 levels are frequently low in sick or hospitalized euthyroid patients.

#### Total T4 (Thyroxine)

##### Clinical Significance :

Total T4 is synthesized in the thyroid gland. About 0.05% of circulating T4 is in the free or biologically active form. The remainder is bound to thyroxine-binding globulin (TBG), prealbumin, and albumin. High levels of T4 (and FT4) causes hyperthyroidism and low levels lead to hypothyroidism.

#### TSH 3rd Generation

##### Clinical Significance :

TSH levels are elevated in primary hypothyroidism and low in primary hyperthyroidism. Evaluation of TSH is useful in the differential diagnosis of primary from secondary and tertiary hypothyroidism. In primary hypothyroidism, TSH levels are elevated, while secondary and tertiary hypothyroidism, TSH levels are low or normal. High TSH level in the presence of normal FT4 is subclinical hypothyroidism and low TSH with normal FT4 is called subclinical hyperthyroidism. Sick, hospitalized patients may have falsely low or transiently elevated TSH. Significant diurnal variation is also seen in TSH levels

#### Remarks :-

Lab Technician

\* END OF REPORT \*

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Pathologist

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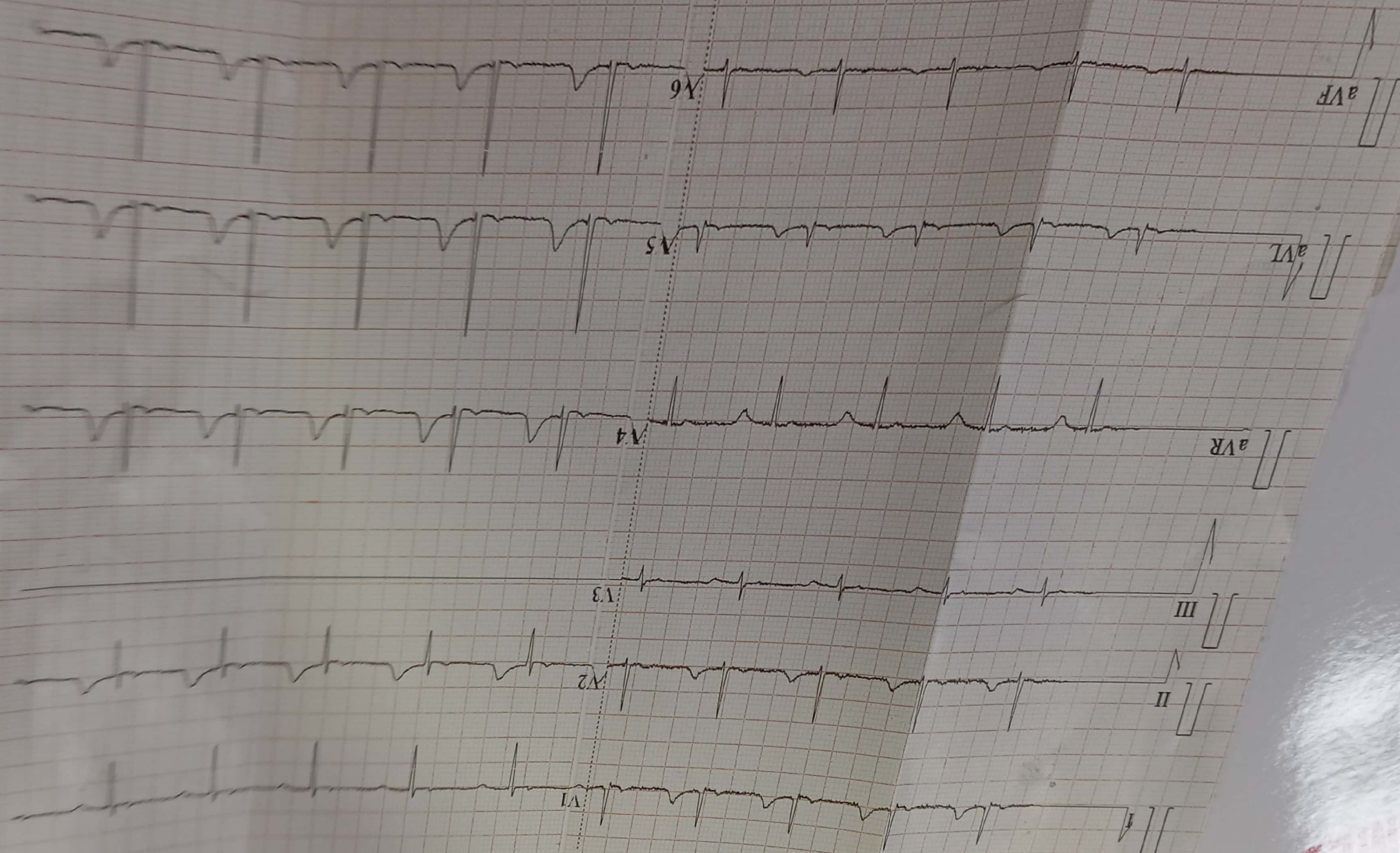
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care@mediworldmultispeciality.com

PATIENT NAME	ANILA DEVI	DATE	26 October 2024
REF. BY DR.	self	AGE/SEX	41 YEARS/FEMALE
INVESTIGATION	USG OF WHOLE ABDOMEN	UHID NO	16405

- LIVER: -** Liver is normal in size (136 mm), appearance and echo texture. No focal lesion seen. No IHBR dilatation seen.
- CBD: -** CBD (3.0 mm) and portal vein appear normal. No calculi or thrombosis seen.
- GB: -** **Not visualized (H/O cholecystectomy done).**
- SPLEEN: -** Spleen measures 93 mm in long axis and appears normal. Splenic veins appear normal. No focal lesion seen.
- PANCREAS: -** Pancreas and Para-aortic region appear normal. Pancreatic duct appears Normal. No focal lesion noted.
- R. KIDNEY: -** Right kidney is normal in size and echo texture. Cortico-medullary differentiation is well preserved. No calculi or hydronephrosis seen.  
 Rt. Kidney: - 100 x 40 mm.
- L. KIDNEY: -** Left kidney is normal in size and echo texture. Cortico-medullary differentiation is well preserved. No calculi or hydronephrosis seen.  
 Lt. Kidney: - 90 x 36 mm.
- URETERS: -** Both ureters are normal. No dilatation or calculi seen.
- UB: -** Urinary bladder is well distended and normal. Wall thickness is normal. Lumen is echo free.
- UTERUS: -** **Uterus is anteverted and enlarged in size measuring approx. 94 x 36 x 49 mm.** Endometrial and Myometrium appears normal. Endometrial thickness measuring up to 04 mm. There is no evidence of Focal lesion.
- CERVIX: -** Cervix is normal.
- ADNEXA: -** Both ovaries are normal in size and shape.  
 Right ovary measuring about 26 x 13 mm  
 Left ovary measuring about 28 x 13 mm
- OTHER: -**
- No enlarged lymph nodes are seen.
  - No free fluid seen in peritoneal cavity.
  - No free fluid collection seen in P.O.D.

**IMPRESSION**

- **Bulky uterus.**
- **All other organs are within normal limits.**
- **Excessive bowel gasses are seen.**



Report Confirmed by:

Diagnosis Information:  
Sinus rhythm  
Lead(s) unsuitable for analysis: V3  
Normal ECG based on available leads

26-10-2024 09:31:57  
HR 68 bpm  
P 102 ms  
PR 170 ms  
QRS 74 ms  
QT/QTcBz 380/405 ms  
P/QRS/T 4/30/13  
RV5/SVI 1.866/0.904 mV

Male  
Years  
Req. No. :

ID: 16074

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