



Name : Mrs. NALLAPATI SANGEETHA
 Lab ID. : 224076
 Age/Sex : 39Years / Female
 Ref By : COMPANY PACKAGE-JINKUSHAL
 Consulting Dr. : DR. MAYUR JAIN

Collected On : 19/2/2025 8:01 pm
 Received On : 19/2/2025 8:11 pm
 Reported On : 20/2/2025 1:49 pm
 Report Status : FINAL

***LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)	183.0	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)	49.1	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease : >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	163.7	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)	33	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	101	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)	2.06		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	3.73		<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
SHAISTA Q

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





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COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	12.0	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	36.0	%	36 - 46
RBC COUNT	4.4	x10 ⁶ /uL	4.5 - 5.5
MCV	82	fl	80 - 96
MCH	27.3	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	14.9	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	6270	/cumm	4000 - 11000
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	63	%	40 - 80
LYMPHOCYTES	28	%	20 - 40
EOSINOPHILS	02	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	277000	/cumm	150 to 410
MPV	10.2	fl	6.5 - 11.5
PDW	16.3	%	9.0 - 17.0
PCT	0.280	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
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.

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

Checked By
SHAISTA Q

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





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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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TFT (THYROID FUNCTION TEST)

SPECIMEN	Serum		
T3	139	ng/dl	84.63 - 201.8
T4	9.56	µg/dl	5.13 - 14.06
TSH	1.45	µIU/ml	0.270 - 4.20

DONE ON FULLY AUTOMATED ANALYSER MAGLUMI SNIBE X3

T3 (Triiodo Thyronine)		T4 (Thyroxine)	
AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 years	105-269	1-4 months	7.2-14.4
6-10 years	94-241	4-12months	7.8-16.5
11-15 years	82-213	1-5 years	7.3-15.0
15-20 years	80-210	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
 Rajashri_Dumbre

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***RENAL FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	13.5	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	6.31	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.60	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	3.9	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	137.1	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	3.77	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	99.1	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.62	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.3	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	7.38	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	4.26	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	3.12	g/dl	1.9 - 3.5
A/G RATIO calculated	1.37		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
SHAISTA Q

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LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.71	mg/dL	0.2 - 1.2
DIRECT BILLIRUBIN (Method-Diazo)	0.32	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.39	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	13.8	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	8.1	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	45.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	7.38	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	4.26	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	3.12	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.37		0 - 2

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

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

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HAEMATOLOGY

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

METHOD - WESTERGREN

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

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

Checked By
Rajashri_Dumbre

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>GLYCOCELATED HEMOGLOBIN (HBA1C)</u>			
HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.7	%	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.

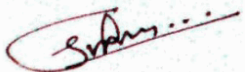
BLOOD GLUCOSE FASTING & PP

BLOOD GLUCOSE FASTING	96.6	mg/dL	70 - 110
URINE GLUCOSE FASTING	Absent		
URINE KETONE FASTING	Absent		
BLOOD GLUCOSE PP	113.5	mg/dL	70 - 140
URINE GLUCOSE PP	Absent		
URINE KETONE PP	Absent		

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

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting specimen. 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
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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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2D ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

NAME	MRS NALLAPATI SANGEETHA
DATE	19/2/2025
REF BY	HEALTH CHECK UP
DONE BY	DR MAYUR JAIN (9867280303/ 9222888070)

2D

- All cardiac chambers are normal in size.
- No concentric left ventricular hypertrophy.
- No regional wall motion abnormality.
- Normal LV systolic function. LVEF is approximately 65% visually.
- Normal RV systolic function.
- All valves are normal in structure.
- IAS and IVS are intact.
- Aortic arch normal.
- No e/o clot/ vegetation/ effusion.

M-MODE

LVIDd	36	mm	Ao	28	mm
LVIDs	24	mm	LA	28	mm
EDV	55	ml			
ESV	19	ml			
EF	65	%			
IVS(d)	10	mm			
PW(d)	9	mm			


COLOR DOPPLER

- No stenotic or regurgitant lesion at any valve
- No significant gradient across aortic valve.
- No LV diastolic dysfunction.
- No significant pulmonary hypertension.

IMPRESSION

- Essentially normal study.

Many thanks for reference



Dr, Mayur N Jain
MD DM cardiology- gold medalist
FACC, FSCAI, ICOB- USA ; AFESC -UK.
Consultant interventional cardiologist

EKG report

Confirm and sign:

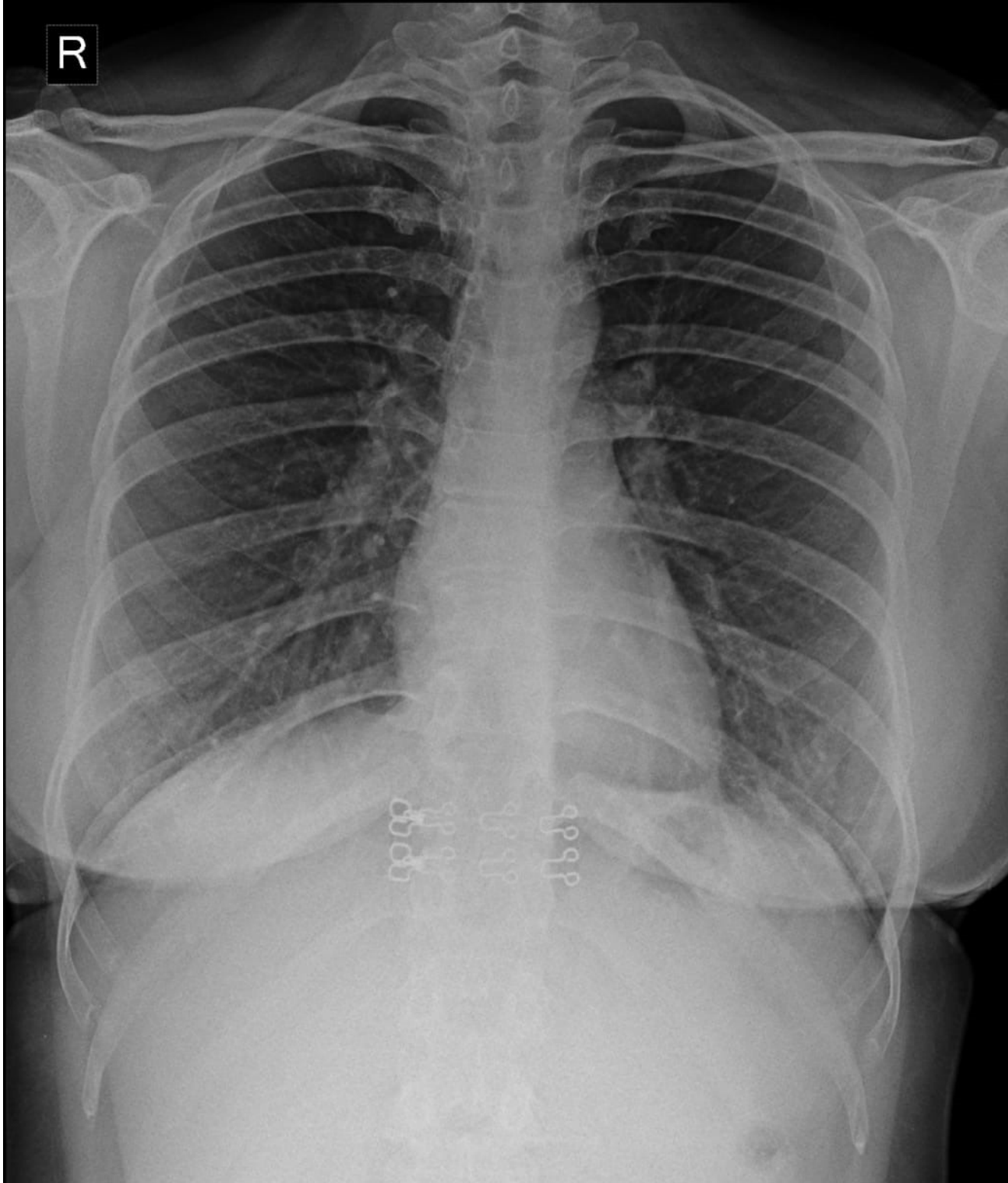
ID : 20250219105152
Name : nallapati,sangeetha
Gender : F
Age : 39 Years
Dept :
Bed No.:

HR : 92 bpm
PR : 128 ms
QRS : 88 ms
QT/QTc : 368/424 ms
P/QRS/T : 59/75/66°
RV5/SV1 : 0.918/0.843 mv
RV5+SV1 : 1.761 mv

<<Interpretation>>
Sinus rhythm
Poor R wave progression
Borderline ECG



Examination time : 2025-02-19 10:56:53



MRS. SANGEETHA NALLAPATI. 34YRS. 19FEB25HP4 F CHEST,PA 19-Feb-25
SEFRA DIGITAL X-RAY. JINKUSHAL CARDIAC CARE HOSPITAL, THANE

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. SANGEETHA NALLAPATI	AGE / SEX 34 YRS / F
REF BY DR: JINKUSHAL HOSPITAL	DATE : 19 /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. Patil

Dr. Devendra Patil
MD Radiology

Disclaimer: report is done by teleradiology after the images acquired by PACS (picture archiving and communication system) and this report is not meant for medicolegal purpose Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. Patient's identification in online reporting is not established, so in no way patient identification is possible for medico-legal cases.