



33927 100325

Registration ID : 33927      Sample Collection : 10/03/2025 08:49:40  
Name : MRS. HARSHADA GANPAT LOHAKARE      Sample Received : 10/03/2025 08:49:40  
Age/Sex : 29 Yrs. / F      Printed : 13/03/2025 17:45:31      Report Released : 13/03/2025 16:30:49  
Ref. By : BANK OF BARODA      Sent By : Arcofemi Healthcare Pvt Ltd

**Vitals (Height, Weight, BMI & BP)**

Test	Result	Unit	Biological Ref. Range
Height	: 152	cm	
Weight	: 50.50	Kg	
BMI	: 21.86		Underweight = <18.5 Normal weight = 18.5-24.9 Overweight = 25-29.9 Obesity = BMI of 30 or greater

Blood Pressure : 100/60 mmhg  
Pulse Rate : 70 beats per minute

(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 13/03/2025 16:30:49)



NABL M(ELT)-00683





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**COMPLETE BLOOD COUNT \***

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 12.3	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 4.42	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 37.6	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 85.1	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 27.8	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.7	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 14.30	%	12-15 %
Total Leucocytes Count (Light Scattering)	: <b>11360</b>	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 64	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 04	%	1-6 %
Lymphocyte Percentage (Calculated)	: 28	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 04	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Leucocytosis		
Platelet Count (Electrical Impedence)	: 332000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 15	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

Note: Tests marked with \* are included in NABL scope.

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 11/03/2025 15:13:43)



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### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.50	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 111.15	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

**Interpretation:**

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$ .
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 81	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 114	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl

Method: GOD-POD

Test Done on - Automated Biochemistry Analyzer (EM 200)

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 11/03/2025 15:11:54)



*Dr. Santosh Khairnar*  
**Dr. Santosh Khairnar**  
 M.D. (Pathologist)  
 Reg. No.-  
 2000/08/2926





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**BLOOD GROUP**


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'B' Rh POSITIVE		

Slide and Tube Agglutination Test

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**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: <b>226</b>	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 76	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 65	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 145.80	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 15.2	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.2		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 3.5		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

*Test Done on - Automated Biochemistry Analyzer (EM 200).*

**Interpretation**

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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**LIVER FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.39	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.16	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.23	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 18	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 10	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 72	IU/L	42-98 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 7.5	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.5	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 3.0	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.50		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: <b>54</b>	U/L	0-38 U/L

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**SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.66	mg/dl	0.60-1.1 mg/dl

*Serum, Method: Enzymatic*

Test Done on - Automated Biochemistry Analyzer (EM 200).

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*(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 11/03/2025 15:13:18)*
**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 13.05	mg/dl	13-40 mg/dl

*Serum, Method: Urease - GLDH*

Blood Urea Nitrogen : 6.10 mg/dl      5-18 mg/dl


*Test Done on - Automated Biochemistry Analyzer (EM 200)*
*\*All Samples Processed At Excellas Clinics Mulund Centre*
*(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 11/03/2025 15:13:07)*
**SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 4.10	mg/dl	2.6-6.0 mg/dl

*Serum, Method: Uricase - POD*

Test Done on - Automated Biochemistry Analyzer (EM 200).

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**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 9.24		5-20


*Serum, Method: Calculated***NOTE:**

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 11/03/2025 15:13:28)

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**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 0.9	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 10.32	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 1.32	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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*Santosh*  
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### EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity :	20	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	6.5		4.5 - 8.0
Specific Gravity :	1.010		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells :	1 - 2	/ hpf	
Pus cells :	2 - 3	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

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**X RAY CHEST PA VIEW**

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Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

**IMPRESSION:**

**No significant abnormality detected.**



**Dr. Reshma Gokran**  
MD (Radiologist)  
Reg. No-  
2009/09/3296





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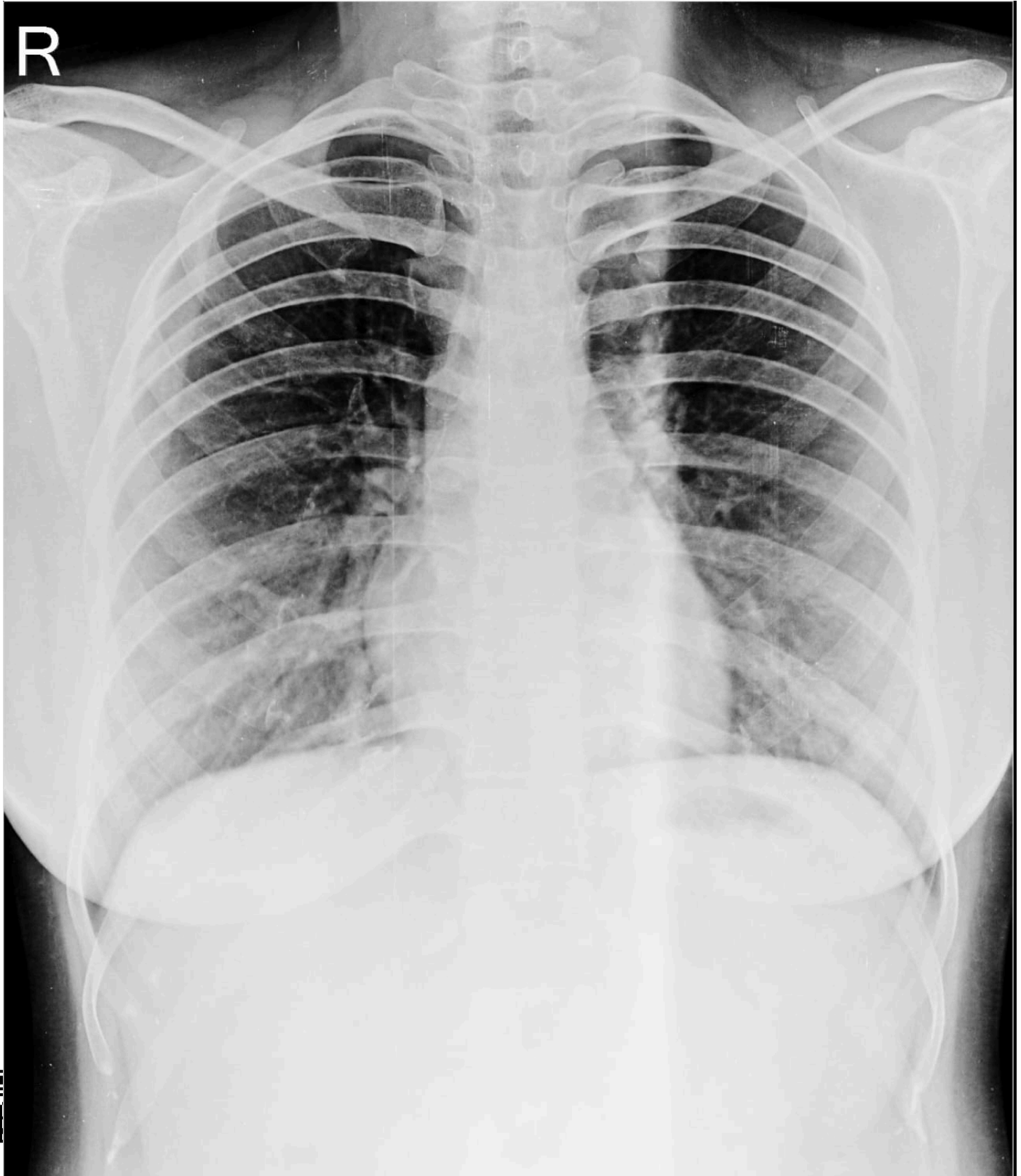
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MS. HARSHADA LOHAKARE. AGE:-29YRS/FEMALE. R07 CHEST PA 10-Mar-25 10:15

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71



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**USG ABDOMEN & PELVIS - FEMALE**

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**Liver:-** is normal in size, shape and echotexture. No focal or diffuse lesion is seen.  
The portal and hepatic veins are normal. There is no IHBR dilatation seen.

**Gall Bladder:-** is normally distended. No calculus or mass lesion is seen.  
No GB wall thickening or pericholecystic fluid is seen.  
CBD is normal.

**Pancreas:-** is normal in size, shape and echotexture. There is no focal lesion seen.

**Spleen:-** is normal in size (7.7 cms) and echotexture. No focal lesion is seen.

**Kidneys:-** Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 9.3 x 3.8 cms.

Left kidney – 9.7 x 3.4 cms.

**Urinary Bladder:-** is well distended and shows normal wall thickness.  
There is no intraluminal lesion within.

**Uterus:-** is anteverted, normal in size and measures 4.7 x 4.0 x 4.7 cms  
Myometrium shows homogenous echo pattern. No focal lesion is seen.

ET : 4 mm

**Ovaries:-** appear bulky in size.

Right ovary measures – 3.0 x 2.8 x 3.0 cms (Volume: 13.7 cc).

Left ovary measures – 2.8 x 3.0 x 2.7 cms (Volume: 12.6 cc).

Both adnexae appear normal. No e/o of free fluid noted in POD.

No ascites is seen. No significant lymphadenopathy is seen.

**IMPRESSION:**

- **Bilateral bulky ovaries.**

*Thanks for the Referral*

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**OPHTHALMIC EVALUATION**

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<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision With Glass	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

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**CERVICAL CYTOLOGY REPORT**

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**PAPANICOLAOU SMEAR (CONVENTIONAL)**

Specimen :-

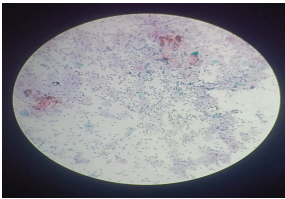
1. 2 unstained air dried smear received.
2. Stained with papanicolaou method and examined.

Smear shows :

- Many superficial squamous, intermediate squamous and few squamous metaplastic cells.
- Background shows few endocervical cells alongwith mild inflammatory infiltrate.
- No cellular atypia or malignancy noted.

**Impression : Essentially Normal Pap smear.**


**Comments:** The smears are reported using bethesda system for cervical cytology(2014) Interpretation(s).



(Collected At: 10/03/2025 08:49:40, Received At: 10/03/2025 08:49:40, Reported At: 10/03/2025 17:58:54)

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



  
**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
Reg. No.-  
2000/08/2926



Ref.By : BOJ

Protocol : BRUCE

Medication : NIL

History : NIL

Stage	Stage Time (Min:Sec)	Phase Time (Min:Sec)	Speed (mph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	87	100/60	87	-	
Standing					1.0	93	100/60	93	-	
HV					1.0	91	100/60	91	-	
ExStart					1.0	92	100/60	92	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	129	110/70	141	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	159	120/80	190	-	
PeakEx	1:00	7:01	3.4	14.0	8.2	174	120/80	208	-	
Recovery	1:00		0.0	0.0	1.2	147	130/80	191	-	
Recovery	2:00		0.0	0.0	1.0	124	130/80	161	-	
Recovery	3:00		0.0	0.0	1.0	111	120/80	133	-	
Recovery	3:04		0.0	0.0	1.0	88	120/80	105	-	

**Findings :**

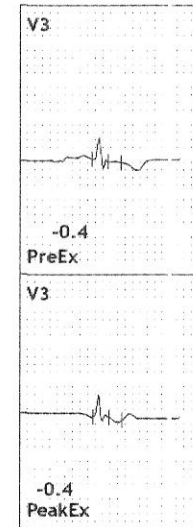
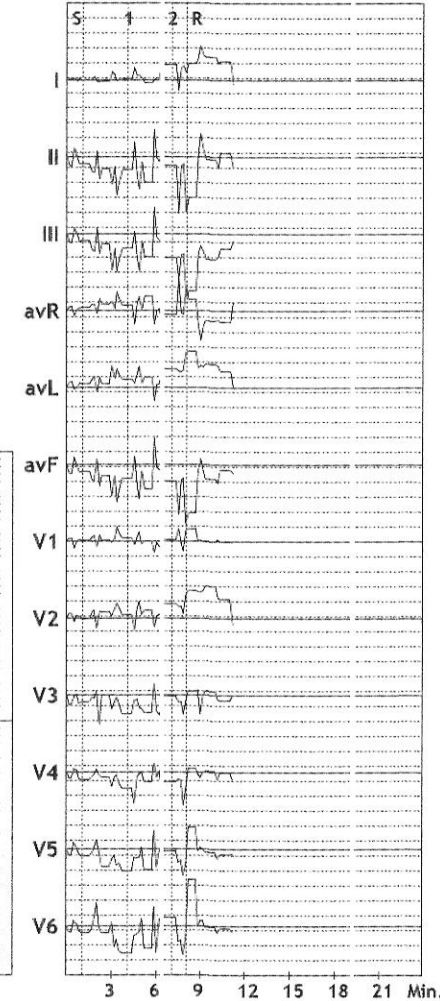
Exercise Time : 7:01 minutes  
 Max HR attained : 174 bpm 91% of Max Predictable HR 191  
 Max BP : 120/80(mmHg)  
 WorkLoad attained : 8.2 (Fair Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maximum Depression: 6:57

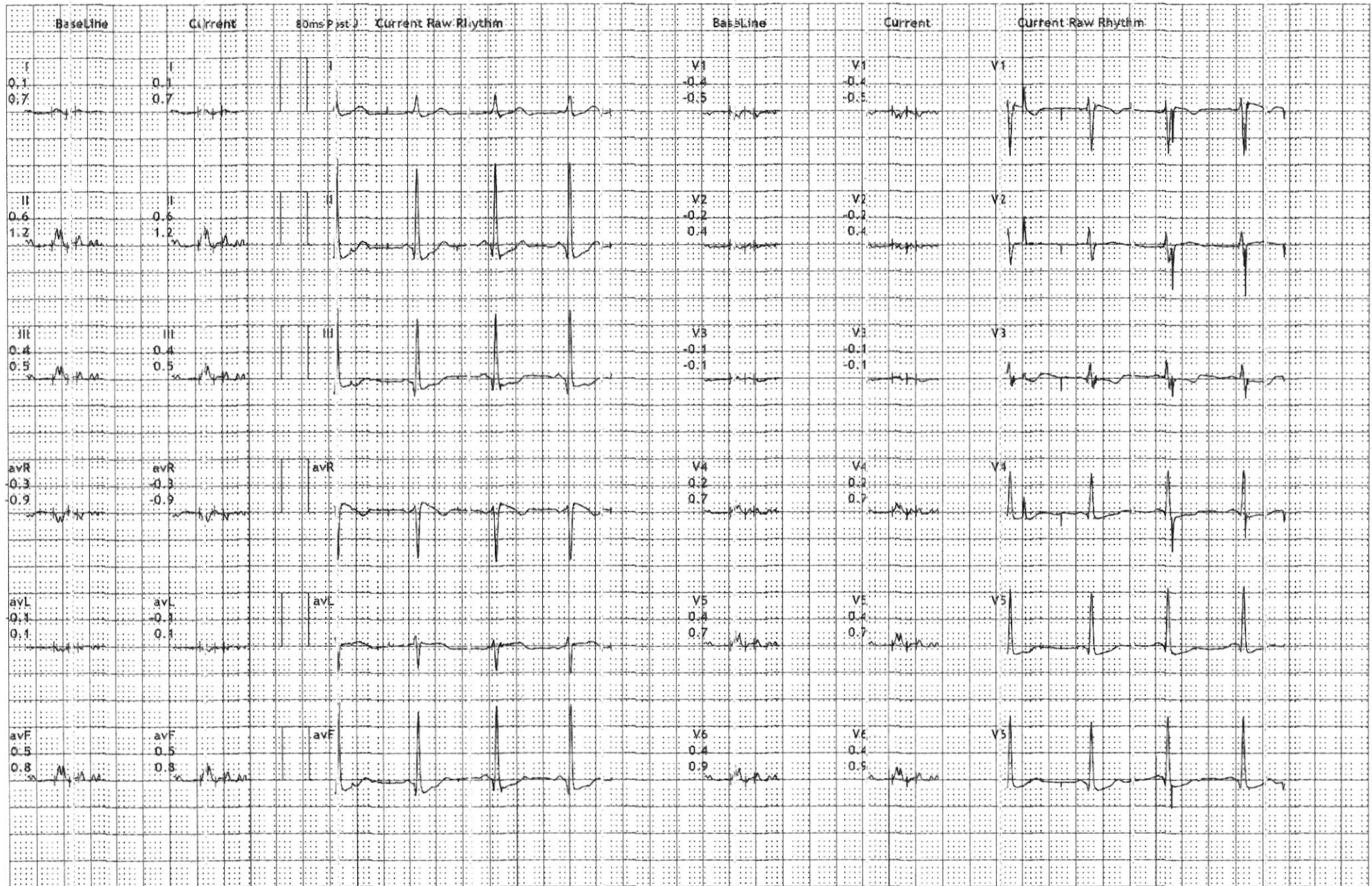
*Mau*

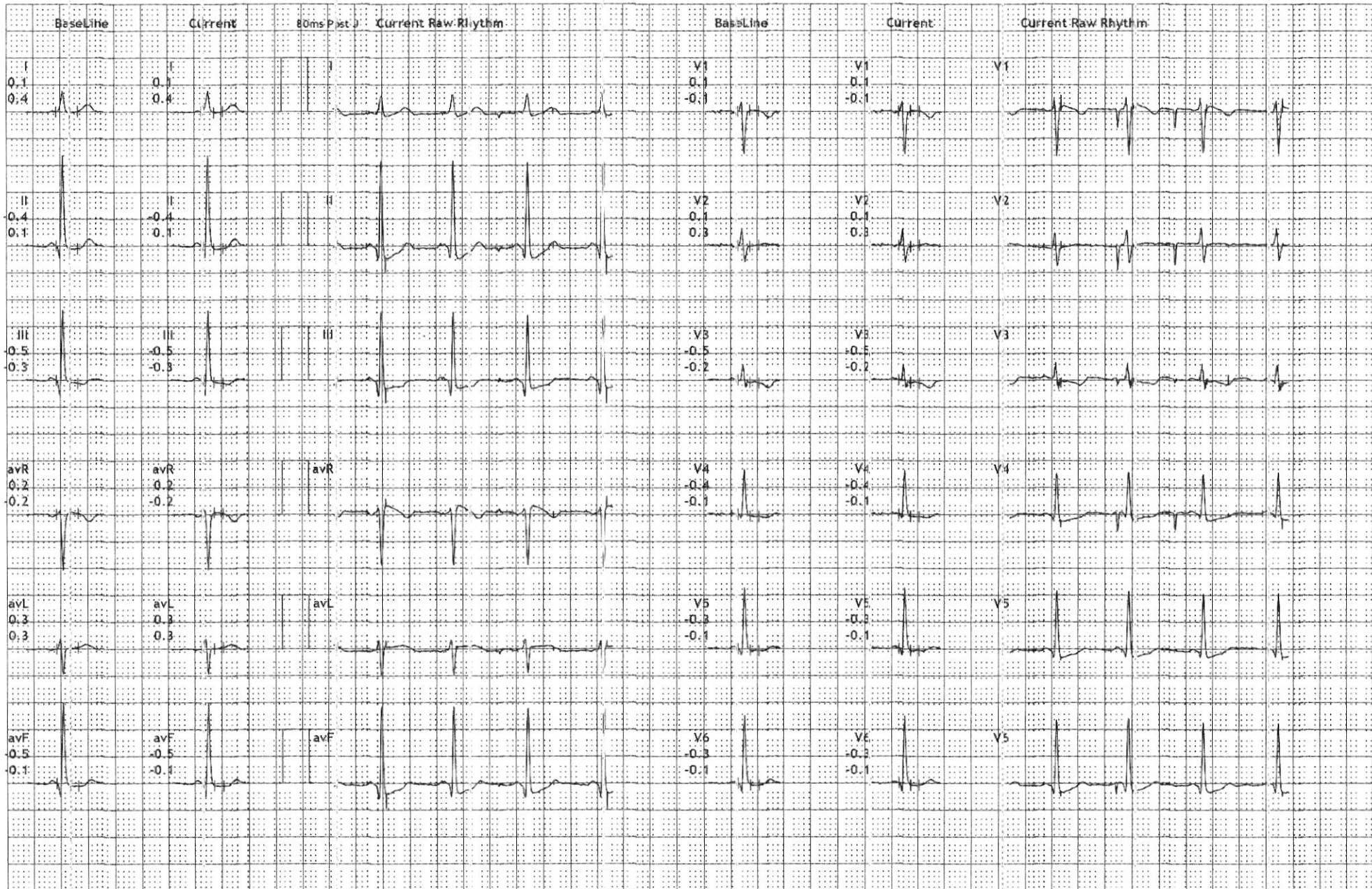
Advice/Comments:

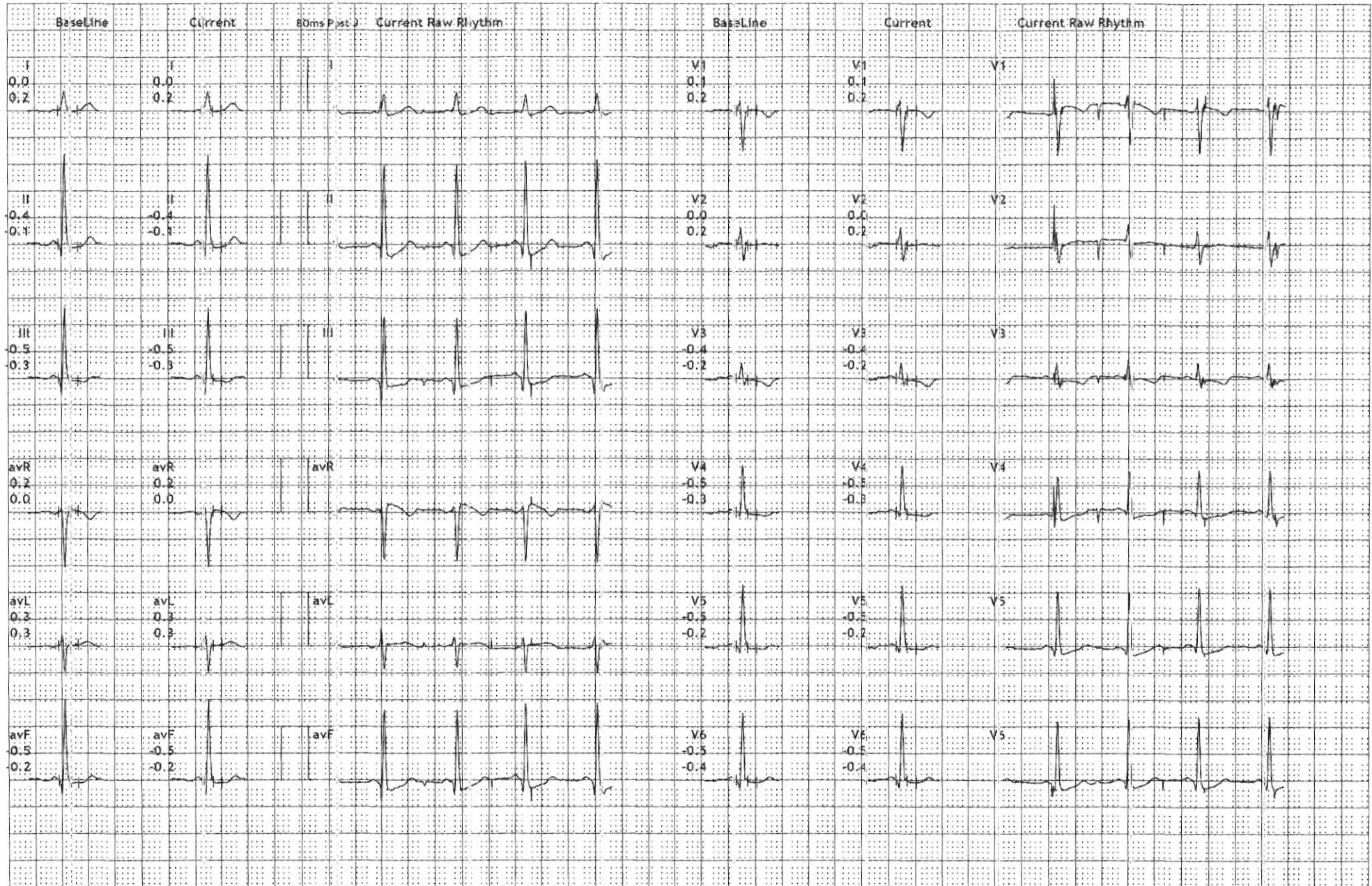
**STL**

1 mm/Div









Excellas Clinics Pvt Ltd

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

764/HARSHADA LOHAKARE

29 Yrs/Female

50 Kg/152 Cins

Date: 10-Mar-2025 11:12:46 AM

HR: 76 bpm

METS: 1.0

BP: 100/60

MpHR: 39% of 191

Speed: 0.0 mph

Grade: 0.0%

12 Lead + Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:00

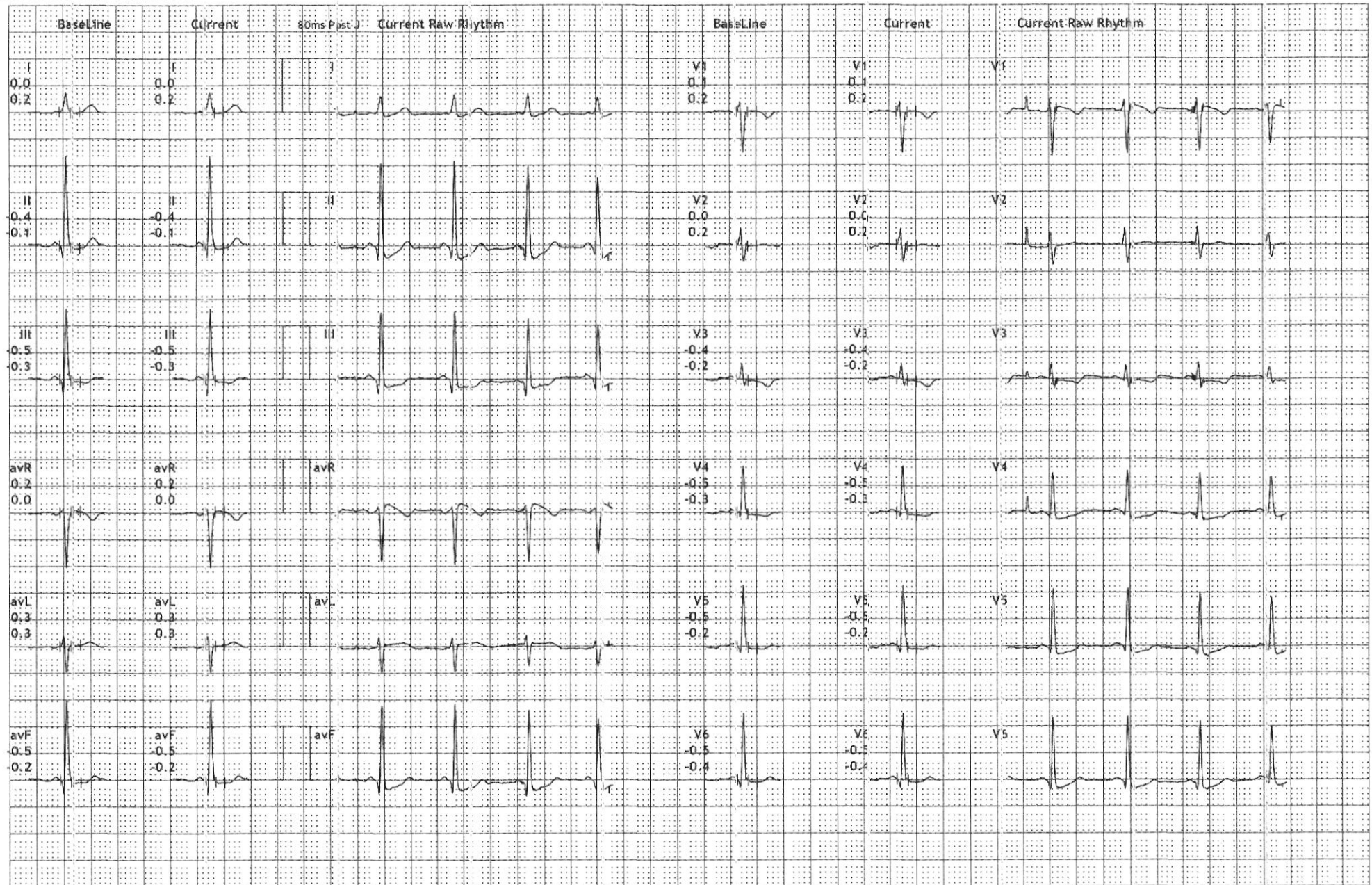
BLC :On

Notch :On

ExStrt

10.0 mm/mV

25 mm/Sec.







B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

764/HARSHADA LOHAKARE

29 Yrs/Female

50 Kg/152 Cms

Date: 10-Mar-2025 11:12:46 AM

HR: 159 bpm

METS: 7.1

BP: 120/80

MHR:83% of 191

Speed: 2.5 mph

Grade: 12.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:00

BLC :On

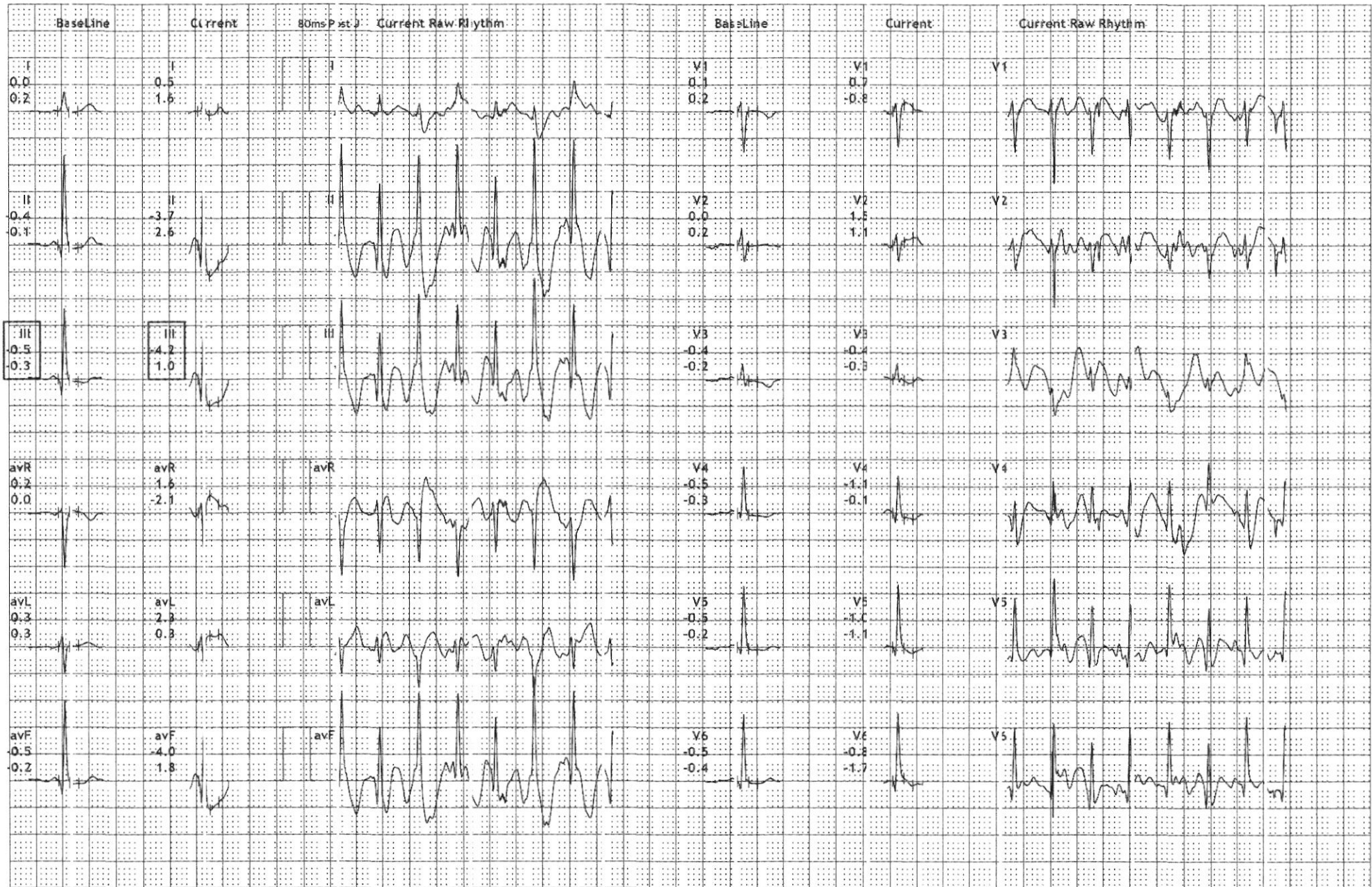
Notch :On

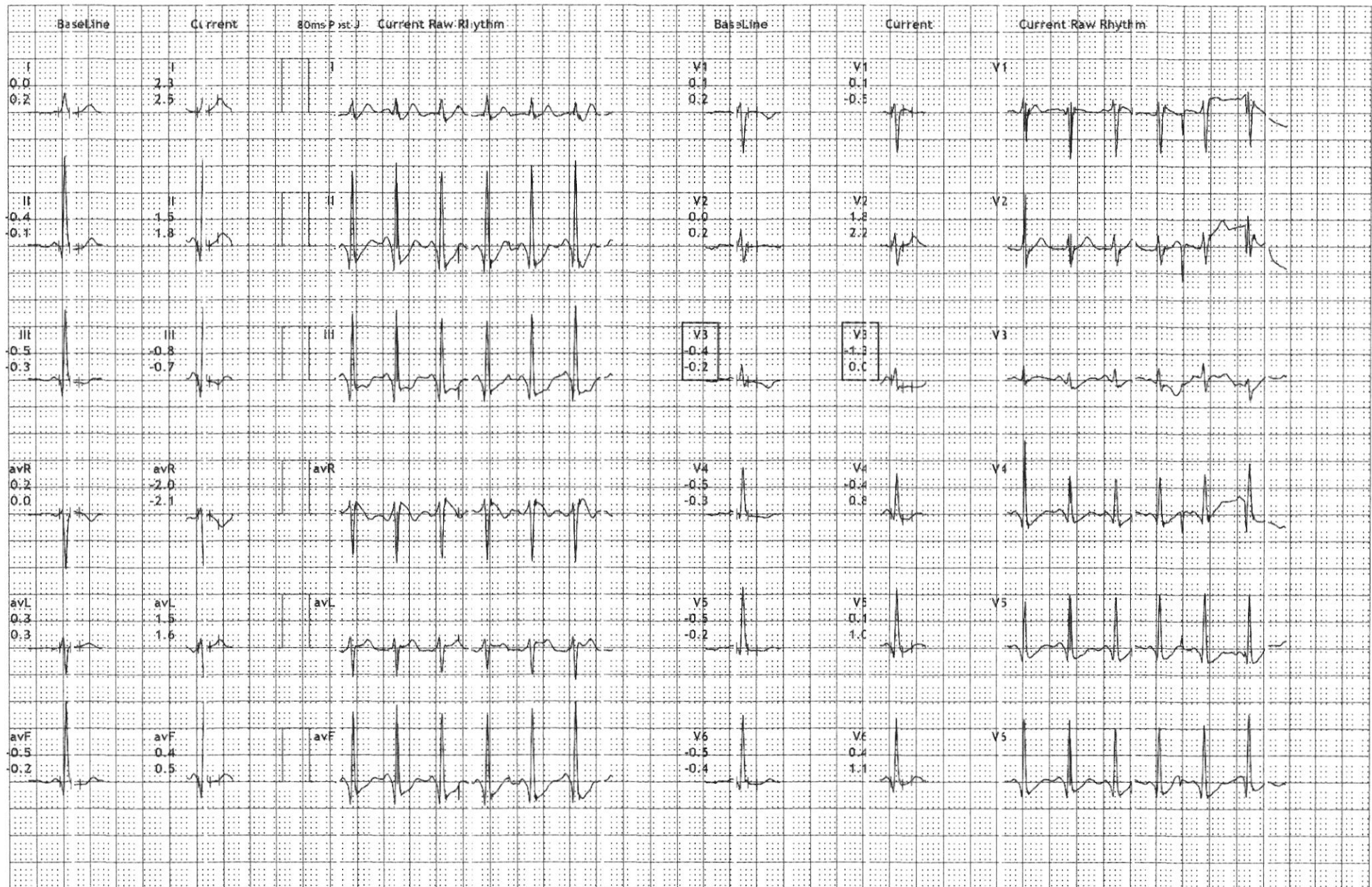
Stage 2 ( 03:00 )

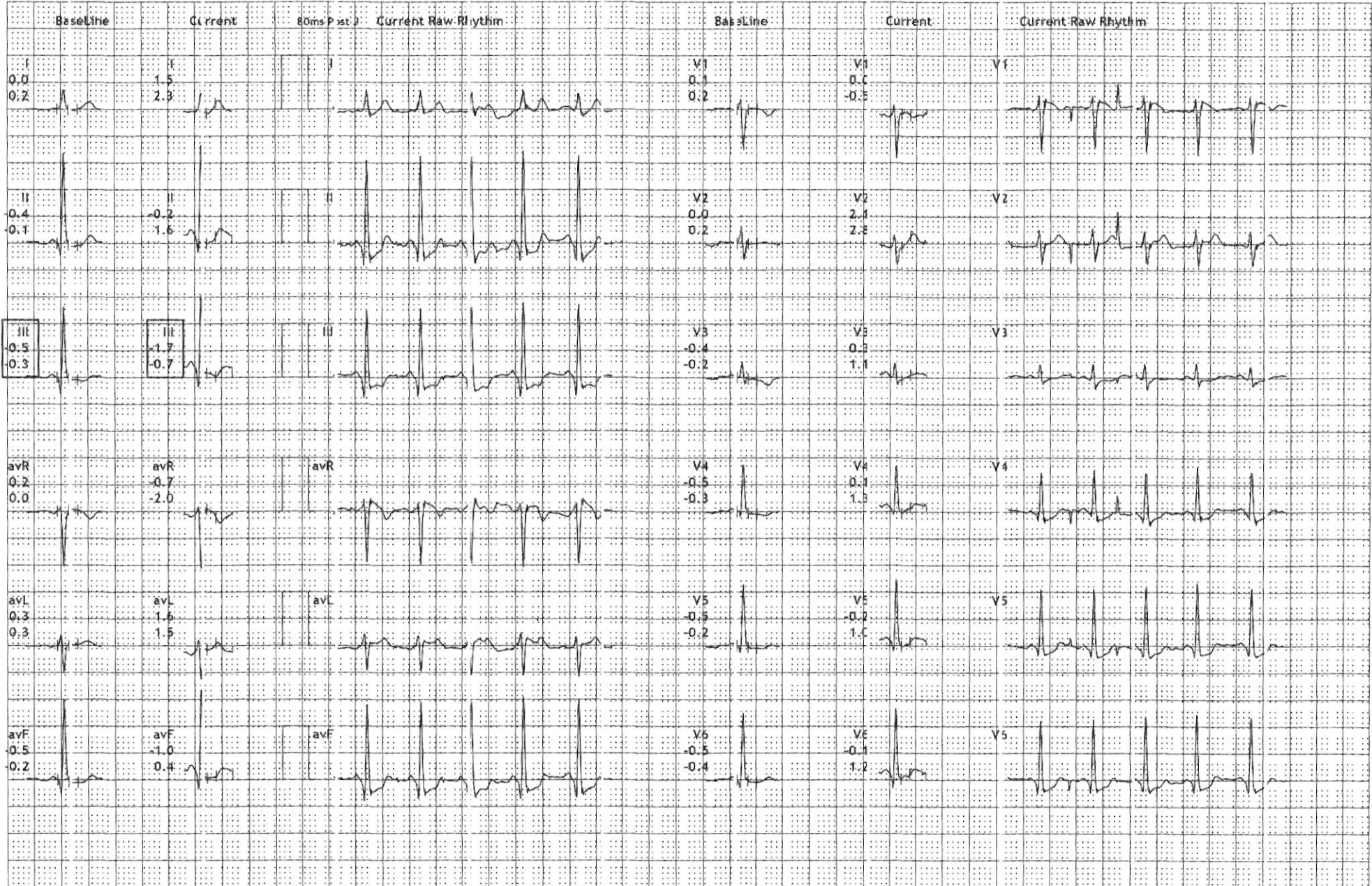
10.0 mm/mV

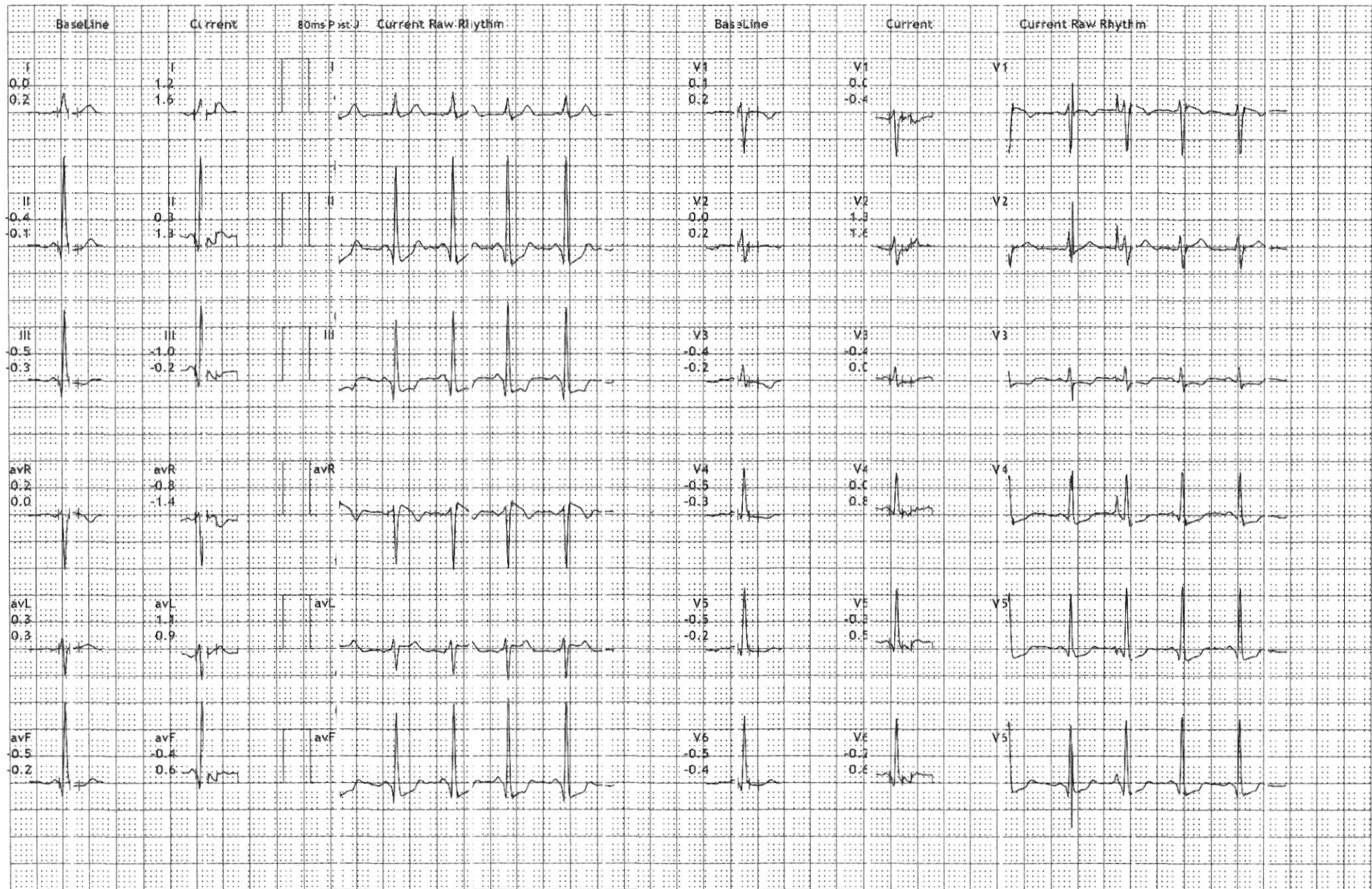
25 mm/Sec.











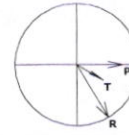
Excellas Clinics Pvt Ltd

B-1, Vikas Paradise Com, LBS Marg, Mulund W, Mumbai - 400080

44653/Harshada Lohakare 29Yrs/Female Kgs/ Cms BP: \_\_\_/\_\_\_ mmHg

Ref.: Test Date: 10-Mar-2025(09:05:39) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 70 bpm

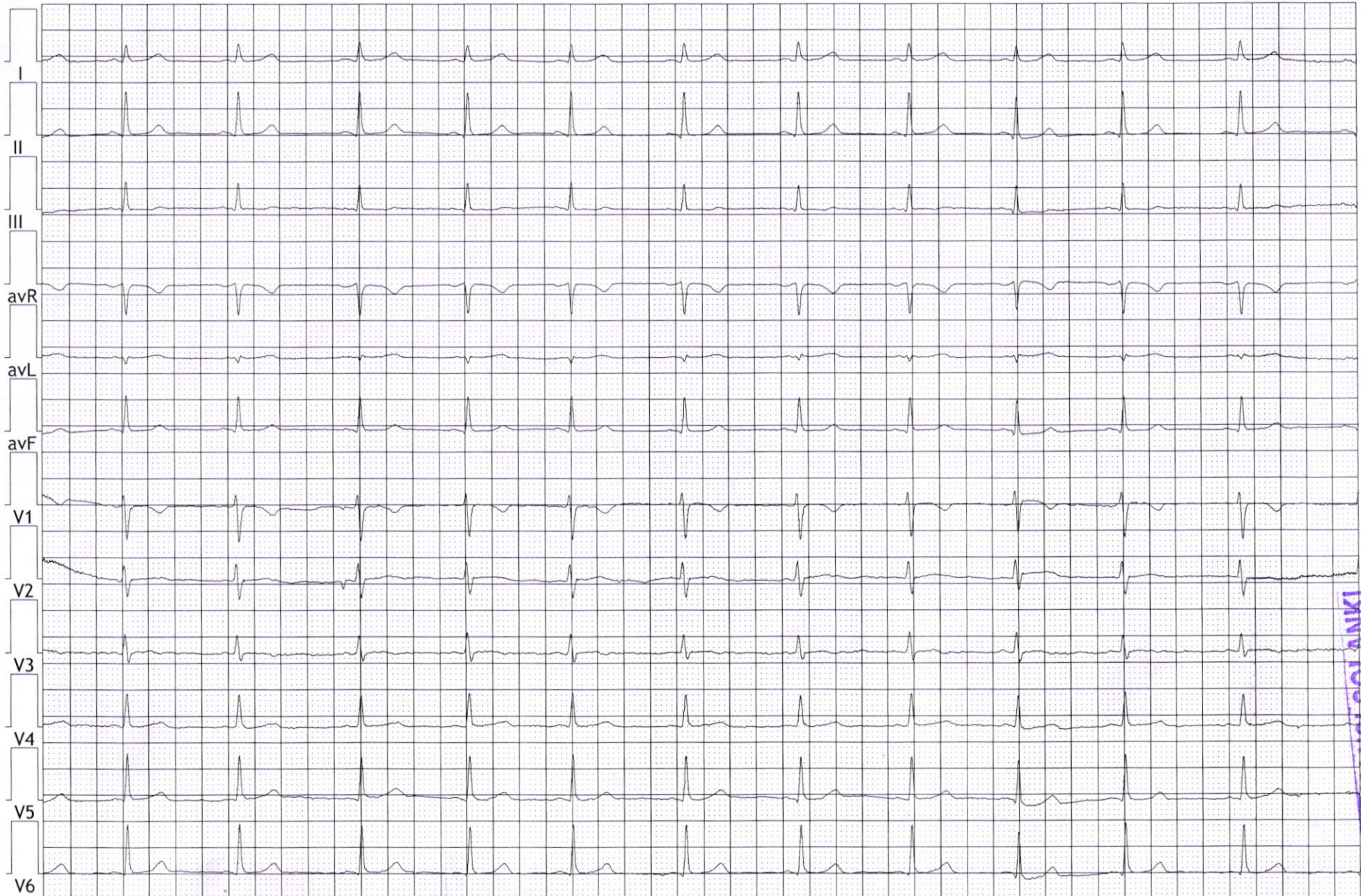


PR Interval: 160 ms

QRS Duration: 106 ms

QT/QTc: 371/403ms

P-QRS-T Axis: 0 - 59 - 30 (Deg)



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NSQCM - Need  
correlate clinic