

Name : Mr. DAYAKAR S

PID No. : MED110037789

SID No. : 712341547

Age / Sex : 39 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 09/12/2023 8:42 AM

Collection On : 09/12/2023 9:14 AM

Report On : 09/12/2023 6:24 PM

Printed On : 27/02/2024 12:46 PM



Investigation

Observed Value

Unit

Biological Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'B' 'Positive'

Remark: Test to be confirmed by Gel method



Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY



DR KIRAN H'S MD
Consultant Pathologist
KMC No: 86542

APPROVED BY

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Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	04	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	0	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.26	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.77	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.15	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.30	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	185	10 ³ / μ l	150 - 450
MPV (Blood/Derived)	12.6	fL	7.9 - 13.7
PCT	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	05	mm/hr	< 15


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<u>Lipid Profile</u>			
Cholesterol Total (Serum/Oxidase / Peroxidase method)	261	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	106	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the `usual_ circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	31	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	208.8	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	21.2	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	230.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220


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INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	8.4		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
---------------------------------------------------------------	-----	--	--------------------------------------------------------------------------------------------------------------------

Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	3.4		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
----------------------------------------------------------------------	-----	--	------------------------------------------------------------------------

LDL/HDL Cholesterol Ratio (Serum/Calculated)	6.7		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
-------------------------------------------------	-----	--	-----------------------------------------------------------------


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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.6	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 114.02 mg/dl
(Whole Blood)

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glyemic control as compared to blood and urinary glucose determinations.
Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.
Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.



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BIOCHEMISTRY

BUN / Creatinine Ratio	8.3		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	90	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Urine sugar, Fasting (Urine - F)	Nil		Nil
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	76	mg/dL	70 - 140

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	10.8	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	1.3	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcysteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	8.1	mg/dL	3.5 - 7.2
-----------------------------------------	-----	-------	-----------

Remark: Kindly correlate clinically.


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IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.09	ng/ml	0.7 - 2.04
-------------------------------------------------------------------------------------	------	-------	------------

INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	9.21	Microg/dl	4.2 - 12.0
------------------------------------------------------------------------------	------	-----------	------------

INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.588	μIU/mL	0.35 - 5.50
-----------------------------------------------------------------------------------------	-------	--------	-------------

INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

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CLINICAL PATHOLOGY

PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	PALE YELLOW		Yellow to Amber
Volume (Urine/Physical examination)	30		ml
Appearance (Urine)	CLEAR		

CHEMICAL EXAMINATION

pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick - Reagent strip method)	1.020		1.002 - 1.035
Protein (Urine/Dip Stick - Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Leukocytes (Urine)	NEGATIVE	leuco/uL	Negative
Nitrite (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative
Blood (Urine)	Nil		Nil



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Urobilinogen (Urine/Dip Stick - Reagent strip method)	NORMAL		Within normal limits
<u>Urine Microscopy Pictures</u>			
RBCs (Urine/Microscopy)	NIL	/hpf	NIL
Pus Cells (Urine/Microscopy)	2-3	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	1-2	/hpf	No ranges
Others (Urine)	NIL		Nil


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Sr. Lab Technician

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Consultant Pathologist
KMC No: 86542

APPROVED BY

-- End of Report --

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Age & Gender	39/MALE	Visit Date	09/12/2023
Ref Doctor Name	MediWheel		

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.9cms
LEFT ATRIUM	:	2.9cms
LEFT VENTRICLE (DIASTOLE)	:	4.5cms
(SYSTOLE)	:	2.6cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.1cms
POSTERIOR WALL (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.1cms
EDV	:	73ml
ESV	:	29ml
FRACTIONAL SHORTENING	:	37%
EJECTION FRACTION	:	62%
RVID	:	1.6cms

DOPPLER MEASUREMENTS:

MITRAL VALVE : E' - 0.81m/s A' - 0.35m/s NO MR

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AORTIC VALVE : 1.00m/s NO AR
 TRICUSPID VALVE : E' - 0.77m/s A' - 0.38m/s NO TR
 PULMONARY VALVE : 0.79m/s NO PR

2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
 No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapse.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

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- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 62 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.**



**DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST**

NB/mm

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Age & Gender	39Y/M	Visit Date	Dec 9 2023 8:41AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.



DR. MOHAN. B
(DMRD, DNB, EDIR, FELLOW IN CARDIAC
MRI)
CONSULTANT RADIOLOGIST

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Ref Doctor Name	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern.
No evidence of focal lesion or intrahepatic biliary ductal dilatation.
Hepatic and portal vein radicals are normal.

GALL BLADDER is partially distended.
PANCREAS has normal shape, size and uniform echopattern.
No evidence of ductal dilatation or calcification.

SPLEEN show normal shape, size and echopattern.
KIDNEYS move well with respiration and have normal shape, size and echopattern.
Cortico- medullary differentiations are well madeout.

No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	10.1	1.8
Left Kidney	9.7	1.8

URINARY BLADDER is partially distended.
PROSTATE shows normal shape, size and echopattern.
No evidence of ascites.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH
MB/MS

DR. MOHAN B

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NABH PRE ACCREDITATION
ENTRY LEVEL HOSPITAL
PEH-2018-0537



**SURANA SETHIA HOSPITAL
AND RESEARCH CENTRE
CHARITABLE**

Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31 Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:40
Accession No : 24003704	Sample No : 24008957

COMPLETE HEAMOGRAM (C.B.C.)

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u>	<u>UNITS</u>
Haemoglobin	11.10	11.50 - 16.00	gm/dL
R.B.C.	4.00	4.00 - 6.00	Mill/C.mm.
P.C.V.	33.20	37.00 - 47.00	%
M.C.V.	83.00	78.00 - 100.00	fL
M.C.H.	27.75	27.00 - 31.00	pg
M.C.H.C.	33.43	32.00 - 36.00	%
RDW	13.4	11.0 - 15.0	%
Total W.B.C. Count	7600	4000 - 11000	/C.mm
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	60	40 - 75	%
Eosinophils	3	1 - 8	%
Basophils	0	0 - 1	%
Lymphocytes	35	20 - 45	%
Monocytes	2	1 - 10	%
WBC MORPHOLOGY	Normal		
RBC MORPHOLOGY	Normal		
PLATELET COUNT	259	150 - 450	10 ³ /ul
PLATELETS	Adequate		

** END OF REPORT **

Checked By

Provisional

Authorized By Technician

Printed By : SSSL on 24/02/2024 07:40:42PM

Pragati

Dr. Pragati Pote
MB, DPB,
(Path & Bact)

A Social Venture of

SURANA CHARITABLE TRUST

Regd. No. E 15635 With Charity Commissioner Mumbai

Income Exemption No. DIT (E) / MC / 80G / 524 / 2009 - 10. 12-A Registration No. TR/31324.

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NABH PRE ACCREDITATION
ENTRY LEVEL HOSPITAL
PEH-2018-0537



**SURANA SETHIA HOSPITAL
AND RESEARCH CENTRE
CHARITABLE**

Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31 Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:40
Accession No : 24003704	Sample No : 24008954

ESR

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u>	<u>UNITS</u>
ESR (Erythrocyte Sedimentation Rate)	15	1 - 20	mm/hr

** END OF REPORT **

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Dr. Pragati Pote
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(Path & Bact)

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**SURANA SETHIA HOSPITAL
AND RESEARCH CENTRE
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Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age :31 Y 0 M 1 D
Referred By : Dr. bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:41
Accession No : 24003704	Sample No : 24008955

BLOOD GROUP & RH TYPE

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGEUNITS</u>
--------------------------------	------------------------------	------------------------------------

BLOOD GROUP & RH TYPE

ABO Group	"B"
Rh Factor	POSITIVE
	** END OF REPORT **

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Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:42
Accession No : 24003704	Sample No : 24008959

RENAL FUNCTION TEST

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u>	<u>UNITS</u>
BUN	12.0	8.0 - 21.0	mg/dl
Uric Acid	5.8	3.5 - 7.2	mg/dl
Sodium [Na+]	142	135 - 155	mmol/L
Potassium [K+]	4.0	3.6 - 5.5	mmol/L
Chloride [Cl-]	101	96 - 108	mmol/L
Calcium	9.4	8.4 - 10.2	mg/dl
Phosphorus	3.4	2.5 - 4.5	mg/dl
Serum Alkaline Phosphates	62.0	28.0 - 111.0	IU/L
Serum Proteins Total	7.0	6.0 - 8.2	gm%
Serum Albumin	4.5	3.0 - 5.0	gm%
Serum Globulin	2.50	1.90 - 3.50	gm%
Albumin : Globulin Ratio	1.80	0.90 - 2.00	gm%
Serum Creatinine	0.9	0.5 - 1.5	mg/dl

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Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .
Ordered Loc : Hospital clinic
Referred By : Dr.bank of baroda
Class : OPD
Current Loc :
Accession No : 24003704

IP / OP No : 1141623
Gender : Female Age : 31Y 0 M 1 D
Vch No : 1406795
Received Dt : 24-Feb-2024 15:28
Reported On : 24-Feb-2024 19:42
Sample No : 24008959

LIVER FUNCTION TEST

TEST DESCRIPTION	OBSERVED VALUE	REFERENCE RANGE	UNITS
Total Bilirubin	0.4	0.1 - 1.2	mg/dl
Conjugated (Direct) Bilirubin	0.2	0.0 - 0.3	mg/dl
Unconjugated (Indirect) Bilirubin	0.2	0.1 - 1.0	mg/dL
SGOT	24.0	15.0 - 46.0	U/L
SGPT	20.0	13.0 - 69.0	U/L
Serum Alkaline Phosphates	62.0	28.0 - 111.0	IU/L
Serum Proteins Total	7.0	6.0 - 8.2	gm%
Serum Albumin	4.5	3.0 - 5.0	gm%
Serum Globulin	2.50	1.90 - 3.50	gm%
Albumin : Globulin Ratio	1.80	0.90 - 2.00	gm%
Serum Creatinine	0.9	0.5 - 1.5	mg/dl

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Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31 Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:42
Accession No : 24003704	Sample No : 24008959

LIPID PROFILE

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u>	<u>UNITS</u>
Total Cholesterol	190	150 - 250	mg%
Triglycerides	130	35 - 160	mg%
HDL Cholesterol	38	30 - 70	mg%
VLDL Cholesterol	26.00	7.00 - 35.00	mg%
LDL Cholesterol	126.00	108.00 - 145.00	mg%
LDL/HDL Ratio	3.32	1.10 - 3.90	
TC/HDL CHOL Ratio	5.00	3.50 - 5.00	

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Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31 Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:42
Accession No : 24003704	Sample No : 24008959

BLOOD SUGAR F/PP

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u> UNITS
Blood Sugar Fasting (FBS)	92	70 - 110 mg%
Urine Sugar (Fasting)	Absent	
Urine Ketone (Fasting)	Absent	

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Patient Name : MRS. LILA HIMANI .
Ordered Loc : Hospital clinic
Referred By : Dr.bank of baroda
Class : OPD
Current Loc :
Accession No : 24003704

IP / OP No : 1141623
Gender : Female Age : 31 Y 0 M 1 D
Vch No : 1406795
Received Dt : 24-Feb-2024 15:28
Reported On : 24-Feb-2024 19:42
Sample No : 24008958

BLOOD SUGAR F/PP

TEST DESCRIPTION

OBSERVED VALUE

REFERENCE RANGEUNITS

Blood Sugar Post Prandial (PPBS)
Urine Sugar (PP)
Urine Ketone (PP)
METHOD GLUCOSE OXIDASE PEROXIDASE (GOD /POD)

98
Absent
Absent

70 - 140 mg/dl

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Patient Name : MRS. LILA HIMANI .	IP / OP No : 1141623
Ordered Loc : Hospital clinic	Gender : Female Age : 31Y 0 M 1 D
Referred By : Dr.bank of baroda	Vch No : 1406795
Class : OPD	Received Dt : 24-Feb-2024 15:28
Current Loc :	Reported On : 24-Feb-2024 19:43
Accession No : 24003704	Sample No : 24008953

URINE ANALYSIS

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE/UNITS</u>
-------------------------	-----------------------	------------------------------

PHYSICAL EXAMINATION

Quantity	20 ml	
Colour	Pale yellow	
Appearance	Clear	
Deposit	Absent	
Reaction [PH]	Acidic	
Specific Gravity	1.020	

CHEMICAL EXAMINATION

Urine Albumin	Absent	
Sugar	Absent	
Ketone Bodies	Absent	
Occult Blood	Absent	
Bile Pigment	Absent	
Bile Salt	Absent	

MICROSCOPIC EXAMINATION

Red Blood Cells	Absent	00-02
Pus Cells	1 - 2	00-02 / hpf
Epithelial Cells	1 - 2	00-02 / hpf
Casts	Absent	
Crystals	Absent	
Spermatozoa	Absent	
Trichomonas Vaginalis	Absent	
Yeast Cells	Absent	
Amorphous Deposits	Absent	
Bacteria	Absent	

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Chembur | Malad | Bhiwandi | Navi Mumbai

NAME : HIMANI LILLA (31Y/F)
REF. BY : SELF
TEST ASKED : T3-T4-U5TSH

SAMPLE COLLECTED AT :
(4000711424), SURANA SETHIA HOSPITAL, SION - TROMBAY
ROAD, SUMAN NAGAR, CHEMBUR, MUMBAI, MAHARASHTRA
400071, 400071

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TOTAL TRIIODOTHYRONINE (T3)	C.M.I.A	92	ng/dL	58-159
TOTAL THYROXINE (T4)	C.M.I.A	6.7	µg/dL	4.87-11.72
TSH - ULTRASENSITIVE	C.M.I.A	1.228	µIU/mL	0.35-4.94

The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

Method :

T3 - Fully Automated Chemi Luminescent Microparticle Immunoassay
T4 - Fully Automated Chemi Luminescent Microparticle Immunoassay
USTSH - Fully Automated Chemi Luminescent Microparticle Immunoassay

Pregnancy reference ranges for TSH/USTSH :

Trimester || T3 (ng/dl) || T4 (µg/dl) || TSH/USTSH (µIU/ml)

1st || 83.9-196.6 || 4.4-11.5 || 0.1-2.5

2nd || 86.1-217.4 || 4.9-12.2 || 0.2-3.0

3rd || 79.9-186 || 5.1-13.2 || 0.3-3.5

References :

1. Carol Devilla, C I Parhon, First Trimester Pregnancy ranges for Serum TSH and Thyroid Tumor reclassified as Benign. Acta Endocrinol. 2016; 12(2) : 242 - 243
2. Kulhari K, Negi R, Kalra DK et al. Establishing Trimester specific Reference ranges for thyroid hormones in Indian women with normal pregnancy : New light through old window. Indian Journal of Contemporary medical research. 2019; 6(4)

Disclaimer :

Results should always be interpreted using the reference range provided by the laboratory that performed the test. Different laboratories do tests using different technologies, methods and using different reagents which may cause difference in reference ranges and hence it is recommended to interpret result with assay specific reference ranges provided in the reports. To diagnose and monitor therapy doses, it is recommended to get tested every time at the same Laboratory.

Sample Collected on (SCT) : 24 Feb 2024 10:30
Sample Received on (SRT) : 24 Feb 2024 12:52
Report Released on (RRT) : 24 Feb 2024 15:43
Sample Type : SERUM
Labcode : 2402074125/A3392
Barcode : CC461988



Shruti
Dr Shruti MD (Path)

Sumanti
Dr Sumanti Basak, DPB

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Chembur | Malad | Bhiwandi | Navi Mumbai

NAME : HIMANI LILLA (31Y/F)
REF. BY : SELF
TEST ASKED : HbA1c

SAMPLE COLLECTED AT :
(4000711424), SURANA SETHIA HOSPITAL, SION -
TROMBAY ROAD, SUMAN NAGAR, CHEMBUR,
MUMBAI, MAHARASHTRA 400071, 400071

TEST NAME	TECHNOLOGY	VALUE	UNITS
HbA1c - (HPLC)	H.P.L.C	5.2	%

Bio. Ref. Interval. :

Bio. Ref. Interval.: As per ADA Guidelines	Guidance For Known Diabetics
Below 5.7% : Normal	Below 6.5% : Good Control
5.7% - 6.4% : Prediabetic	6.5% - 7% : Fair Control
>=6.5% : Diabetic	7.0% - 8% : Unsatisfactory Control
	>8% : Poor Control

Method : Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	103	mg/dL
-----------------------------	------------	-----	-------

Bio. Ref. Interval. :

90 - 120 mg/dl : Good Control
121 - 150 mg/dl : Fair Control
151 - 180 mg/dl : Unsatisfactory Control
> 180 mg/dl : Poor Control

Method : Derived from HbA1c values

Please correlate with clinical conditions.

-- End of report --

Sample Collected on (SCT) : 24 Feb 2024 10:30
Sample Received on (SRT) : 24 Feb 2024 12:58
Report Released on (RRT) : 24 Feb 2024 14:13
Sample Type : EDTA
Labcode : 2402074567/AJ392
Barcode : 185624917



Shruti
Dr Shruti MD (Path)

Sumanta
Dr Sumanta Basak, DPB

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Chembur | Malad | Bhiwandi | Navi Mumbai

NAME	: MRS. LILA HIMANI	SEX	: FEMALE
AGE	: 31 YRS	ID NO.	: 1141623
REF BY	: C/O. BANK OF BARODA	DATE	: 24/02/2024

EXAMINATION: 2D ECHOCARDIOGRAPHY

Conclusion:

1. All chambers normal sized.
2. Good LV function with LVEF = 60 %
3. All valves structurally & functionally normal.
4. No regional wall motion abnormality.
5. IAS / IVS intact.
6. No clot / vegetation / effusion.

Doppler Study:

- No diastolic dysfunction
- No TR. No PH.
- No other valvular regurgitation.
- No signs of high LVEDP.

Impression:

- Normal study.

Dr. Dinesh Rajpal
MD, Physician
Reg. No.82808.

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Doppler Study:

- Diastolic dysfunction: Normal
- RVOT = Normal mm of Hg.
- LVOT = Normal mm of Hg.
- AR: NO MR: NO PR: NO TR: NO
- Peak / Mean across MV= Normal mm of Hg.
- Peak / mean across AV = 11 mm of Hg.
- MV PHT = Normal
- MVA by PHT = Normal square cm.
- AR PHT = Normal millisecond
- CWD across TV = Normal mm of Hg.
- PASP by TR jet = 30 mm of Hg.

Measurements:

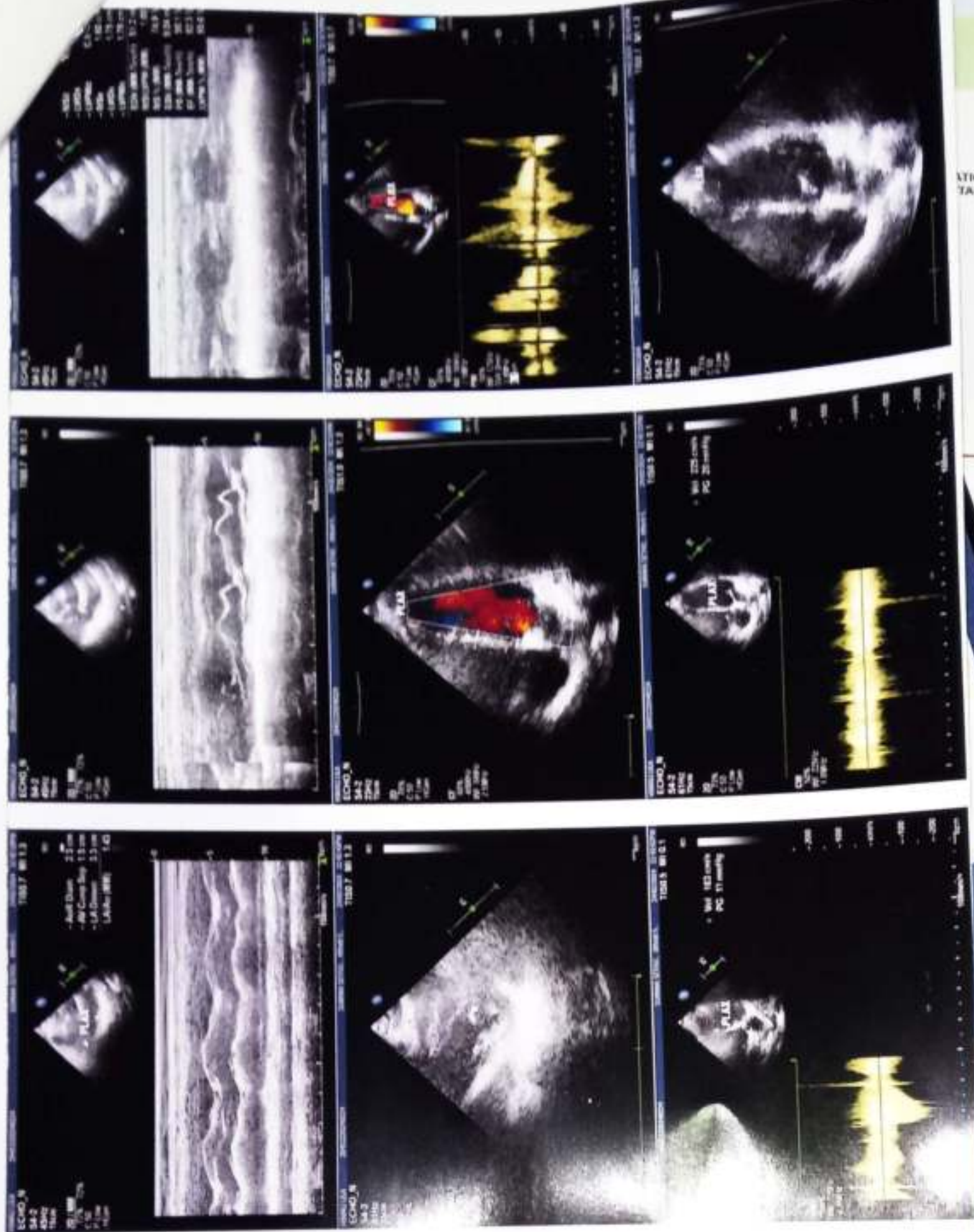
	Measurement	Unit
Aorta		
LA	33	mm
AO	23	mm
ACS	15	mm
Mitral Valve		
Study		
Excursion D-E		mm
EF slop		mm/s
EPSS		mm

	Measurement	Unit
LV study		
IVsd	09	mm
LVIDd	35	mm
LVPWD	09	mm
IVSs	16	mm
LVIDs	17	mm
LVPWa	17	mm
EF %	60	%
% FS		%

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CHARITABLE**

Chembur | Malad | Bhiwandi | Navi Mumbai

NAME	: MRS. LILA HIMANI	SEX	: FEMALE
AGE	: 31 YRS	ID NO.	: 1141623
REF BY	: C/O. BANK OF BARODA	DATE	: 24/02/2024

ULTRASONOGRAPHY OF ABDOMEN AND PELVIS

Observation:

The liver is normal in size, shape, position and shows bright echogenicity- grade 2 fatty. No focal area of altered echotexture is seen in the liver. There is no intra or extra hepatic biliary dilatation. The portal vein appears normal.

The gall bladder is well visualised and shows normal wall thickness with multiple variable sized calculi up to 16 mm within.

Spleen is normal in size, shape, position and echotexture. There is no evidence of focal lesion.

Pancreas is normal in size, shape, position and echotexture. MPD is not dilated.

The bilateral kidneys are normal in size, shape, position and echotexture and shows normal cortico-medullary differentiation. There is no evidence of focal lesion. No evidence of hydronephrosis or calculus noted. The right and left kidneys measure 88 x 41 mm and 89 x 42 mm respectively.

There is no free fluid or significant lymphadenopathy.

Urinary bladder is adequately distended and appears normal. No wall thickening or any intra luminal abnormality noted.

The uterus is normal in shape, position and echogenicity. The endometrial thickness is homogeneous and measures approximately 5.2 mm. The myometrial echogenicity is normal.

The bilateral ovaries are normal in size, shape and morphology.

Impression: USG reveals:

- **Cholelithiasis without cholecystitis.**
- **Grade 2 fatty liver.**
- **No other significant abnormality is noted.**


DR. KETAN KALASKAR
M.D.
Consultant Radiologist

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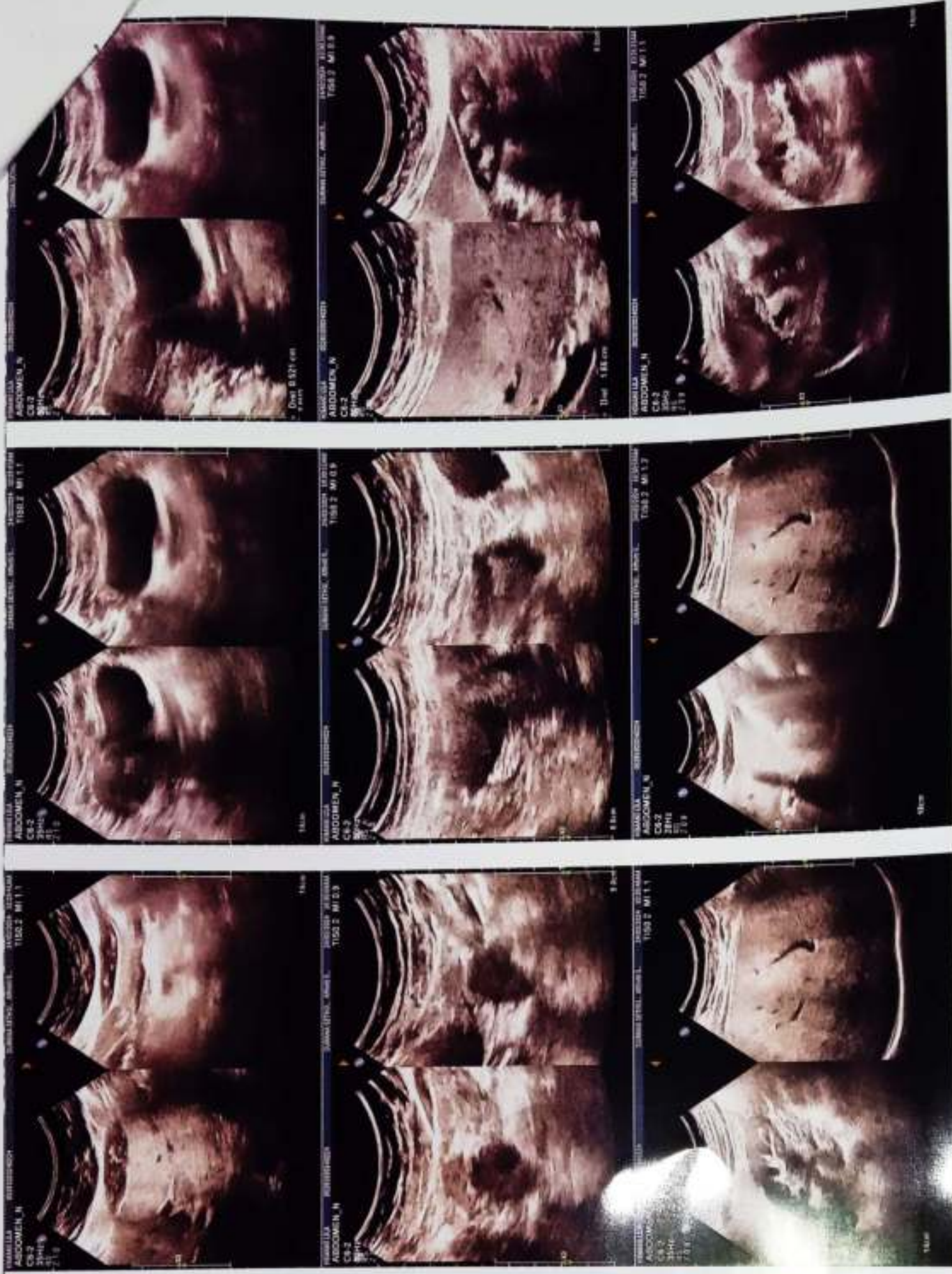
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Chembur | Malad | Bhiwandi | Navi Mumbai

NAME	: MRS. LILA HIMANI	SEX	: FEMALE
AGE	: 31 YRS	ID NO.	: 1141623
REF BY	: C/O. BANK OF BARODA	DATE	: 24/02/2024

X-RAY CHEST PA VIEW

Protocol :

Computerised radiography of chest PA reveals:

Observation:

- Lung fields appear clear.
- Cardiac silhouette is within normal limits.
- Bilateral costophrenic angles are clear.
- Visualised bones are unremarkable.

Impression:

- No significant abnormality detected.


DR. JIGAR ZOTA
DNB , FNVIR
Consultant Radiologist

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74 bpm
-- / -- mmHg

Mrs. Himani Iliya
Age: 30yrs / female
BP - 100/70 mmHg
PR - 75/min

24/02/2024 10:01:34
SURAX
CHEMBUR
MUMBAI
DEPTAL

Sinus rhythm with short PR
Otherwise normal ECG

QRS
QT / QTcBaz 378 / 419 ms
PR 110 ms
P 76 ms
RR / PP 814 / 810 ms
P / QRS / T -22 / 60 / 34 degrees

