

Anjna Hospital & Clinisearch Pvt. Ltd.

7-8-9, Urban Ville, Nr. Vadodara Cricket Academy, Opp. Turf 106, Priya Talkies-Sevasi Link Road, Vadodara. Phone: 9904402122, 9327925272, 8780620088

OPD Timing: 9 am - 2 pm and 5 pm - 8 pm 24x7 Emergency

FITNESS CERTIFICATE

Date:23/09/23

I Dr. Aman Khanna do hereby certify that I had carefully examined Mrs. Indoriya .Age /F She was fit for Join duty, No any other problem and no any skin allergy, Eye vision is good, Ear vision is good.

Height: 169, Weight: 78.0, BMI: 27.3.

Vitals: Bp: 10/70, P: 90, Spo2: 98, T: 97.4, F

Anjna Hospital & Clinisearch Pvt. Ltd. 7-8-9 Dir Amaril Khahma: Sevasi Taluka & Dis Taluka & Dis

Place: Vadodara

Date: 23/09/2023

Signature of Authorized Medical Attendant

Registration No. 28161

ANJNA HOSPITAL AND CLINISEARCH PVT LTD

Adress: 7,8,9, Urban Ville, Nr Vadodara

Cricket Acadmey, Opp Turf 106, Priya Talkies-Sevasi Link Road, vadodara 391101.

Our Servieces

- Digital Portable X-ray

- Hospital ICCU

- Bedside Portable

- Trauma Patients

Date:-23-09-2023

24/7 Emergency Services AHCPL

Mo: 7433989788

Patient Name: GARIMA INDORIYA

Sex: F

Age: 24 YRS

X-RAY CHEST PA

Both the lung fields appear clear. Both CP recess appear normal. Cardiac size is normal. Both domes of diaphragm appear unremarkable. Thoracic cage reveals no abnormality.

IMPRESSION

• No significant abnormality detected.

Wage: Sevasi, Vadodara-391101

-8-9, Urban Ville,

Dr Jay Mehta Cons. Radiologist.

Anjna Hospital & Clinisearch Pvt. Ltd.

my Lansoniya			
(msec) pRS: 88 pTc:438	tage: Sevas dara-39116		
ep:0PD Age :000 (Yrs Weight:000(K	Anjna Hospital & Glinisearch Pvt. Ltd 7-8-9, Urban Ville, Village : Sevas Talyuka & Dist. Vadodara-39110	Jav	25 mm/s 10 mm/mV
070 23/03/00 04:02 ANJNA HOSPITAL Room :118 D ID :0 Name : Gender :- Height :000 (cm)			MR:900 (V:2.18)







TEST REPORT

: 2309102615 Reg. No Name : GARIMA INDORIYA Reg. Date : 23-Sep-2023 Collected On: 23-Sep-2023

Age : 24 Years Sex: Female

Ref. By : Dr. ANJNA HOSPITAL & CLINISEARCH PVT. LTD.

Location : Hospital

Disp. At

	Result	<u>Unit</u>	Biological Reference Interval
	COMPLETE BLOOK SPECIMEN: ED		C)
Hemoglobin (SLS method)	12.1	g/dL	12.0 - 16.0
RBC Count (Electrical Impedance)	4.68	million/cmm	3.9 - 5.4
Hematrocrit- HCT (Elec. Impedance)	38.20	%	35 - 54
WBC Count (Flowcytometry)	6500	/cmm	4000 - 10500
Platelet Count (Electrical Impedance)	202000	/cmm	150000 - 450000
MCV (Calculated)	81.6	fL	80 - 96
MCH (Calculated)	25.9	Pg	27 - 33
MCHC (Calculated)	31.7	%	32 - 36
DIFFERENTIAL WBC COUNT (Ma Neutrophils (%)	nual By Microscopy)	%	45 - 75
Lymphocytes (%)	33	%	20 - 40
Monocytes (%)	5	%	1 - 10
Eosinophils (%)	2	%	1 - 4
Basophils (%)	0	%	0 - 1
ERYTHROCYTE SEDIMENTATION	N RATE		
ESR (After 1 hour)		mm/hr	0 - 20

Approved by: Dr. Tushar Sonaiya M.Ď. Reg. No. 15158

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



Hours Pathology Laboratory
18, 20, Kalpyruksh, Nr. Gotri Medical College, Gotri Main Road, Vadodara - 390 021.
0 53260 / 72288 66487

NCH: Ground Floor C-64, Nutan Maheshwar Nagar, Opp. IndusInd Bank, Subhanpura, Vadodara 390023. 7490053260 / 8511153260

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Location : Hospital

Disp. At

Parameter Result **Interval**

BLOOD GROUP & RH

SPECIMEN: EDTA AND SERUM; METHOD: HAEMAGGLUTINATION

Blood Group

'O' ABO

Rh (D) Positive

-End Of Report-

Approved by: Dr. Tushar Sonaiya

M.Ď.



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Location : Hospital

Disp. At

<u>Parameter</u>	Result	<u>Unit</u>	Biological Reference Interval
	BIO -	CHEMISTRY	
BUN	12.89	mg/dL	7 - 20
Uric Acid	4.20	mg/dL	2.6 - 6.8

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

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<u>Parameter</u>	Result	<u>Unit</u>	Biological Reference Interval
	BIO -	CHEMISTRY	
Fasting Blood Sugar (FBS)	81.10	mg/dL	65 - 110
	En	d Of Report	

Approved by: Dr. Tushar Sonaiya M.Ď. Reg. No. 15158



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Sex: Female : Dr. ANJNA HOSPITAL & CLINISEARCH PVT. LTD.

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Ref. By

<u>Parameter</u>	Result	<u>Unit</u>	Biological Reference Interval
	THYROID FU	NCTION TEST	
T3 (Triiodothyronine)	1.10	ng/mL	0.7 - 2.04
T4 (Thyroxine)	6.20	mIU/mL	4.5 - 10.9
TSH	3.258	μIU/ml	0.4 - 4.2

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4.

Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

---End Of Report--

Approved by: Dr. Tushar Sonaiya M.D.



Reg. Date

: 23-Sep-2023

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: 24 Years Age Sex: Female

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Disp. At

<u>Parameter</u>	Result	<u>Unit</u>	Biological Reference Interval			
LIPID PROFILE SPECIMEN: SERUM SAMPLE						
Cholesterol	165.80	mg/dL	Desirable : < 200.0 Borderline High: 200-239 High : >240			
Triglyceride	89.60	mg/dL	Normal : < 15 <mark>0.0</mark> Borderline : 150-199 High : 200-499 Very High : > 500.0			
VLDL	17.92	mg/dL	7 - 40			
LDL	105.38	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: >190.0			
HDL Cholesterol	42.50	mg/dL	Low : < 40 High : > 60			
Cholesterol /HDL Ratio	3.90		0 - 5.0			
LDL / HDL RATIO	2.48		0 - 3.5			
End Of Report						

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Parameter	Result	<u>Unit</u>	Biological Reference Interval		
KIDNEY FUNCTION TEST					
UREA	27.60	mg/dL	10 - 40		
Creatinine	0.78	mg/dL	0.6 - 1.40		

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

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<u>Parameter</u>	Result	<u>Unit</u>	Biological Reference Interval			
LIVER FUNCTION TEST						
Total Protein	7.05	g/dL	6.3 - 7.8			
Albumin	3.90	g/dL	3.4 - 5.0			
Globulin	3.15	g/dL	2.3 - 3.5			
A/G Ratio	1.24		0.8 - 2.0			
SGOT	18.60	U/L	5 - 50			
SGPT	22.50	U/L	5 - 50			
Alakaline Phosphatase	101.70	U/L	42 - 141			
Total Bilirubin	0.65	mg/dL	0 - 1.4			
Direct (Conjugated) Bilirubin	0.33	mg/dL	0.0 - 0.6			
Indirect (Unconjugated) Bilirubin	0.32	mg/dL	0.0 - 1.1			

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Age

· 24 Years Sex: Female

Ref. By

: Dr. ANJNA HOSPITAL & CLINISEARCH PVT. LTD.

Location : Hospital

Disp. At **Parameter**

Result

Unit

Biological Reference Interval

HEMOGLOBIN A1 C ESTIMATION

SPECIMEN: BLOOD EDTA

Hb A1C 5.10 % of Total Hb >8: Action Suggested,

7-8: Good Control,

<7: Goal,

6-7: Near Normal Glycemia, <6: Non-diabetic Level

Mean Blood Glucose

mg/dL

Criteria for the diagnosis of diabetes

1. HbA1c > = 6.5*

Or

2. Fasting plasma glucose >/= 126 mg/dL. Fasting is defined as no caloric intake at least for 8 hrs.

- 3. Two hour plasma glucose >/= 200 mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water. Or
- 4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL.
- *In the absence of unequivocal hyperglycemia criteria 1 3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

Limitation of HbA1c

- 1) In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population.
- 2) Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC tog lucose with consequent decrease in HbA1c values.
- 3) Glycated HbF is not detected by this assay and hence specimens containing high HbF (>10%) may result in lower HbA1c values than expected.

----End Of Report--

Approved by: Dr. Tushar Sonaiya M.D.