

Dr. Vandana G. Powar M.B.B.S., D.C.P.
Consultant Pathologist



PARTH
PATHOLOGY LABORATORY
(Computerised)

LAB - Shop No. 7, "Diwan Towers" Mangalwar Peth, Near Mirajkar Tikti, Opp. Nutan Marathi
High School, Kolhapur. Mob. 9158529408, 9422047480, 9921285167

DATE – 23/03/2024

PATIENT NAME- AMIT DINDE

AGE – 38/MALE

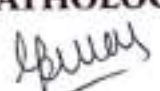
HEIGHT – 172cm

WEIGHT – 96kg

BLOOD PRESSURE - 139/ 89mmHg

PULES – 76/ Min

FIT TO PERFORM ALL DUTIES

Dr. Vandana G. Powar
M.B.B.S., D.C.P.
Reg. No. 68137
PATHOLOGIST

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भारत सरकार
GOVERNMENT OF INDIA



अमित शिवाजी दिंडे
Amit Shivaji Dinde
DOB: 31-05-1986
Gender: Male



9995 8856 6398

आधार - आम आदमी का अधिकार

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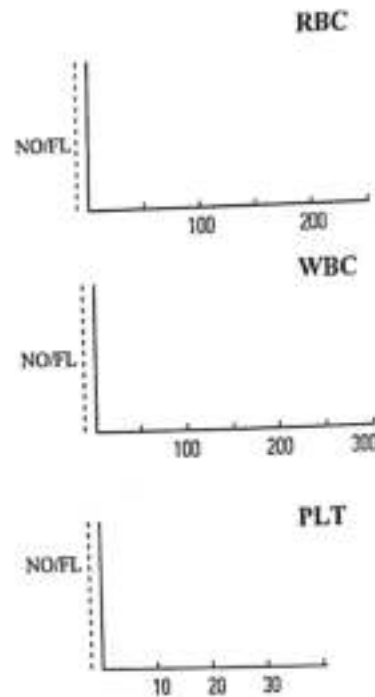
NAME : MR. AMIT DINDE
REF BY : Dr. MEDIWHEEL LIFE INS

DATE : 23/03/2024 PT.NO. : 202 23032
AGE : 38. Yrs. SEX : M

HAEMOGRAM WITH INDICES

Test	Result	Units	Normal Range
Haemoglobin	- 14.8	g/dl	14-18
RBC Count	- 5.28	millions / cu-mm	4.5 - 6.5
PCV	- 48.9	%	40 - 54
MCV	- 92.6	fL	80 - 96
MCH	- 28	Pg	27 - 33
MCHC	- 30.3	gm/dl	33 - 36
RDW CV	- 12.5	%	11.0 - 14.5
WBC Count	- 6300	/cumm	4000 - 11000
Neutrophils	- 46	%	40 - 75
Lymphocytes	- 49	%	20 - 40
Eosinophils	- 03	%	1 - 6
Monocytes	- 02	%	2-10
Basophils	- 00	%	0 - 1
Platelet Count	- 259000	/ul	150000 - 450000
MPV	- 9.8	fL	7.4 - 10.4
PDW	- 11.5	%	8-12
P-LCR	- 24.8	%	15-35
E.S.R. (By Wintrobe Method)	- 07	mm at 1hr	0-10
RBC Morphology	- Normochromic, Normocytic.		
WBC Morphology	- Within Normal Limits		
Platelets	- Adequate		

Histogram



* Blood group - 'A' Rh Positive

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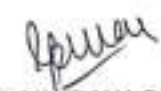
DATE : 23/03/2024
AGE : 38 Yrs. SEX : M
PT.NO. : 202 230324

BIOCHEMISTRY TEST REPORT

			<u>Normal Range</u>
Fasting Plasma Glucose	: 97.8	mg/dl	60-110 mg/dl
2 Hrs. Plasma Glucose	: 120.2	mg/dl	90-140 mg/dl
S. Creatinine	: 1.08	mg/dl	0.7 - 1.4 mg/dl
Blood Urea	: 31.3	mg/dl	12-42 mg/dl
Blood Urea Nitrogen	: 14.63	mg/dl	5 - 21 mg/dl
S. Uric acid	: 5.41	mg/dl	3.5 -7.2 mg/dl
CHOLESTEROL	: 142.1	mg/dl	0-250 mg/dl
HDL Cholesterol	: 30.4	mg/dl	30 - 70 mg/dl
S. Triglycerides	: 77.9	mg/dl	0-170 mg/dl
LDL Cholesterol	: 96.1	mg/dl	60 - 150 mg/dl
TC/HDLC Ratio	: 4.7		0 - 5
LDLC/HDLC Ratio	: 3.2		2.5 - 3.5

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BIOCHEMISTRY TEST REPORT

			<u>Normal Range</u>
S. Bilirubin (Total)	: 0.96	mg/dl	0 - 1.0 mg/dl
S. Bilirubin (Direct)	: 0.46	mg/dl	0 - 0.25 mg/dl
S. Bilirubin (Indirect)	: 0.5	mg/dl	0 - 0.75 mg/dl
S.G.O.T	: 36.1	IU/L	5-40 IU/L
S.G.P.T	: 65.1	IU/L	5-40 IU/L
S. Alkaline Phosphatase	: 80.7	IU/L	37 - 147 IU/L
Total Proteins	: 7.2	g/dl	6.6 - 8.3 g/dl
S. Albumin	: 4.0	g/dl	3.5 - 5.0 g/dl
S. Globulin	: 3.2	g/dl	1.5 - 3 g/dl
A/G Ratio	: 1.3 : 1		0.90 - 2.00



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REPORT ON % GLYCOHAEMOGLOBIN OF BLOOD

% Glycohaemoglobin of blood : 4.9 %
Estimated mean blood glucose : 94.7 mg/dl

(Reference For Guideline)

- < 6.0 - Normal
- 6.0 - 7.0 % - Good Control
- 7.0 - 8.0 % - Fair Control
- 8.0-10.0% - Unsatisfactory control
- >10.0% - Poor control



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EXAMINATION OF URINE

Normal Range

PHYSICAL EXAMINATION

Quantity	: 05 ml	
Colour	: Pale Yellow	
Appearance	: Clear	
Deposit	: Absent	
Reaction (pH)	: Acidic	
Specific Gravity	: 1.024	1.003 - 1.035

CHEMICAL EXAMINATION

Proteins	: Absent	
Glucose	: Absent	
Ketone Bodies	: --	
Bile Salts	: Absent	Absent
Bile Pigments	: Absent	Absent
Urobilinogen	: --	
Occult Blood	: Absent	

MICROSCOPIC EXAMINATION

Epithelial Cells	: 1 - 2	/hpf
Pus Cells	: 2 - 3	/hpf
Red Blood Cells	: Absent	/hpf
Casts	: Absent	
Crystals	: Absent	
Amorphous Deposits	: Absent	

OTHER FINDINGS

Yeast Cells	: Absent
Trichomonas vaginalis	: Absent
Bacteria	: Absent
Mucus Threads	: Absent
Spermatozoa	: Absent



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AGE - 38/SEX-MALE

REFERANCE :-MEDWHEEL LIFE INS.

DATE - 23/03/2024

BIOCHEMISTRY

S. GAMMA G.T : 20.2.mmol/L

NORMAL RENG

10 -50 mmol/L

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AGE - 38/SEX-MALE

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DATE - 23/03/2024

BIOCHEMISTRY

SRUM VLDL - 26.0 mmol/L

NORMAL VALUE

10-50 mmol / L



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23/03/2024

**THE ECG OF THE CLIENT – AMIT DINDE
IS WITHIN NORMAL LIMIT.**

NO ABNORMAL FINDINGS ARE DETECTED .



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KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

ID: 511

Date: 22-03-2024

Time: 23:41

Chart Speed: 25 mm/sec

Filter: 35Hz

Mains Filter: ON

Amplitude: 10mm/mV



ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Lead	P(mV)	Q(mV)	R(mV)	S(mV)	T(mV)
I	0.03	0.27	-0.11	-0.03	0.05
II	0.07	0.17	0.01	-0.09	-0.01
III	0.05	-0.09	0.19	-0.07	-0.05
aVR	-0.05	-0.35	0.11	0.08	-0.04
aVL	-0.01	0.17	-0.12	0.01	0.05
aVF	0.07	0.03	0.07	-0.08	-0.03
V1	-0.05	-0.19	0.27	0.05	-0.08
V2	0	0.23	-0.68	-0.03	0.28
V3	0.04	0.07	-0.8	-0.05	0.23
V4	0.04	0.16	-0.47	-0.04	0.12
V5	0.07	0.17	0.01	-0.09	-0.01
V6	0.04	0.12	0.11	-0.04	-0.04

Intervals (ms)

P-Q	Q-R-S	Q-T	Q-TC
137	76	263	322

Axis (deg)

P	QRS	T
-79	45	-63

HR: 90 bpm

BP: 120/80 mmHg

Interpretation: **NORMAL**

DR. SHANTANU PALKAR
 MBBS, PGDCC,
 CLINICAL CARDIOLOGIST
 KUSUM HEART CARE CLINIC

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

Name: AMIT S DINDE Date: 22-03-2024 Time: 23:42
Age: 37 **Gender:** M **Height:** 172 cms **Weight:** 96 Kg **ID:** 511
Clinical History: NO MAJOR ILLNESS
Medications: NO MEDS

Test Details:
Protocol: Bruce **Predicted Max HR:** 183 **Target HR:** 155 (85% of Pr. MHR)
Exercise Time: 0:06:01 **Achieved Max HR:** 158 (86% of Pr. MHR)
Max BP: 130/70 **Max BP x HR:** 20540 **Max Mets:** 7
Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed km/h	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:07	1	0	0	101	120/80	12120	0.8 V2	0.6 V2
Standing	00:08	1	0	0	100	120/80	12000	0.9 V3	0.7 V3
HyperVentilation	00:08	1	0	0	98	120/80	11760	0.9 V3	0.6 V2
PreTest	00:13	1	1.6	0	107	120/80	12840	0.9 V2	0.7 V2
Stage 1	03:00	4.7	2.7	10	136	120/80	16320	1.2 V3	1.4 V3
Stage 2	03:00	7	4	12	158	130/80	20540	1.5 V3	1.8 V3
Peak Exercise	00:01	6.7	5.5	14	158	130/80	20540	1.5 V3	1.8 V3
Recovery1	01:00	1	0	0	122	130/70	15860	2.1 V3	2.1 V3
Recovery2	01:00	1	0	0	111	120/60	13320	1.3 V3	1.4 V3
Recovery3	00:02	1	0	0	111	120/60	13320	1.3 V3	1.4 V3

Interpretation
 The Patient Exercised according to Bruce Protocol for 0:06:01 achieving a work level of 7 METS.
 Resting Heart Rate, initially 101 bpm rose to a max. heart rate of 158bpm (86% of Predicted Maximum Heart Rate).
 Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 130/70 mmHg
 GOOD EFFORT TOLERANCE
 NORMAL INOTROPIC RESPONSE
 NORMAL CHRONOTROPIC RESPONSE
 THR ACHIEVED ; ADEQUATE METS ACHIEVED
 NO SIGNIFICANT ST SEGMENT CHANGES NOTED IN EXERCISE AND RECOVERY
 TMT IS NEGATIVE FOR STRESS INDUCIBLE ISCHAEMIA AT GIVEN WORKLOAD


DR. SHANTANU PALKAR
 MBBS, PGDCC.
 CLINICAL CARDIOLOGIST
 KUSUM HEART CARE CLINIC
(Summary Report edited by User)
 Cardioit CS-10 Version 3.4

Ref. Doctor: MEDWHEEL

SCHILLER
 The Art of Diagnostics

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Exec Time : 0:00:00

Stage Time: 00:07

HR: 101 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 155 bpm

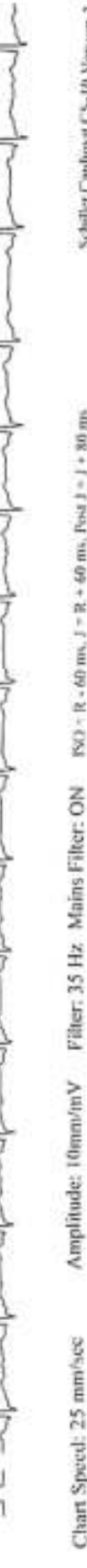
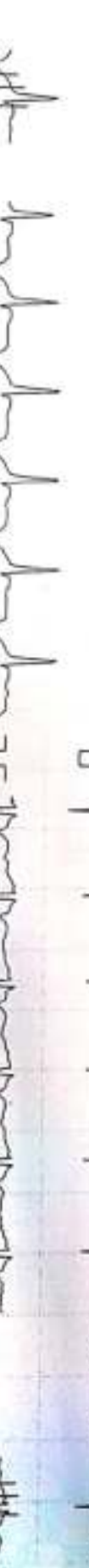


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schaller Cardiovit CS-10 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Exec Time : 0:00:00

Stage Time: 00:08

Stage: Standing

Slope: 0 %

THR: 155 bpm

HR: 100 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Pwd J = J + 80 ms

Schiller Cardioit CS-F10 Version 3.4



KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Exec Time : 0:00:00

Stage Time: 00:08

Stage: HyperVentilation

Slope: 0 %

THR: 155 bpm

HR: 98 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

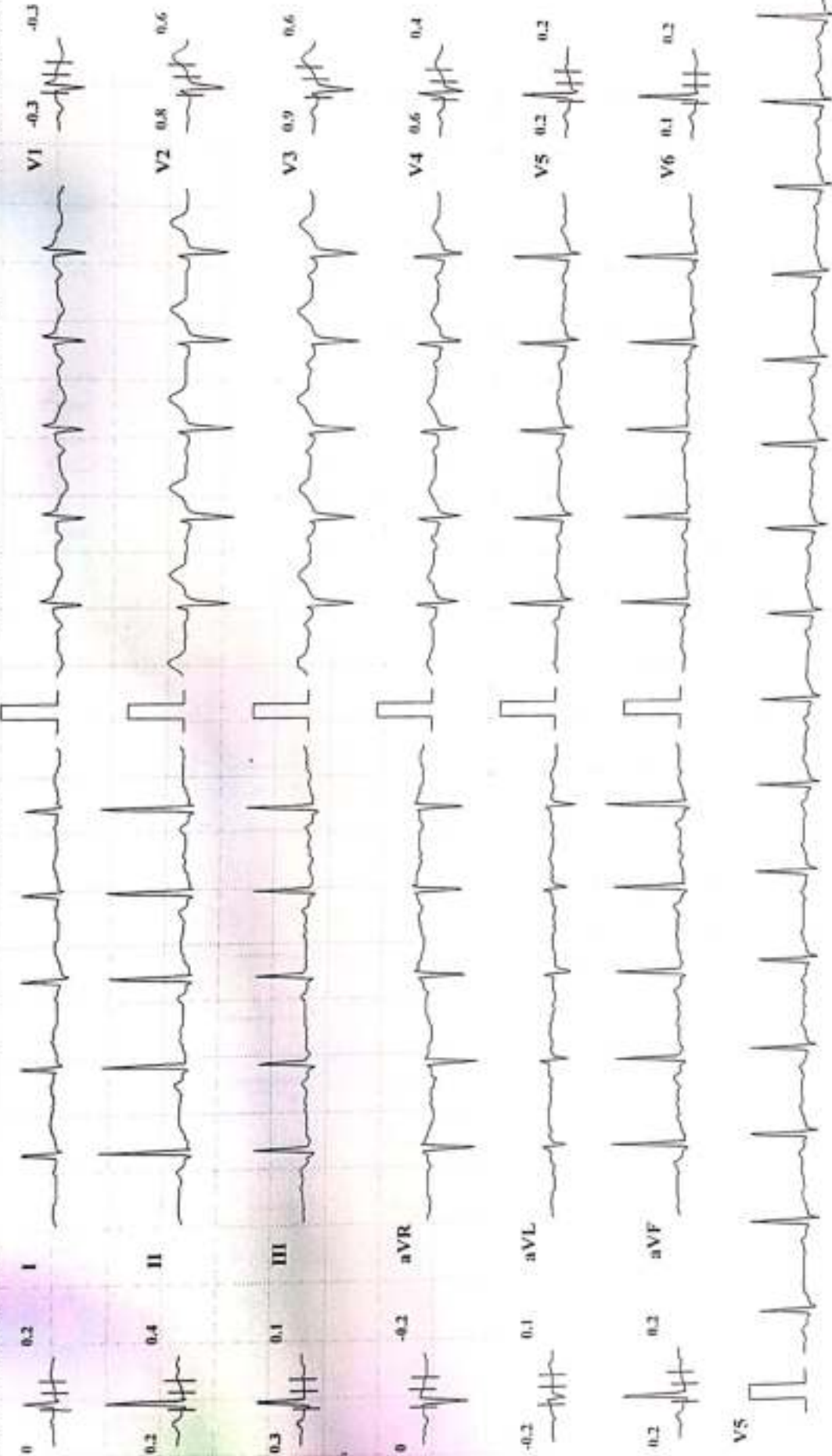


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

PSO = R - 60 ms, J = R + 60 ms, Prod J = J + 80 ms

Schiller Cardiotest CS-10 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Speed: 2.7 kmph

Exec Time : 0:03:00

Slope: 10 %

Stage Time: 03:00

THR: 155 bpm

HR: 136 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

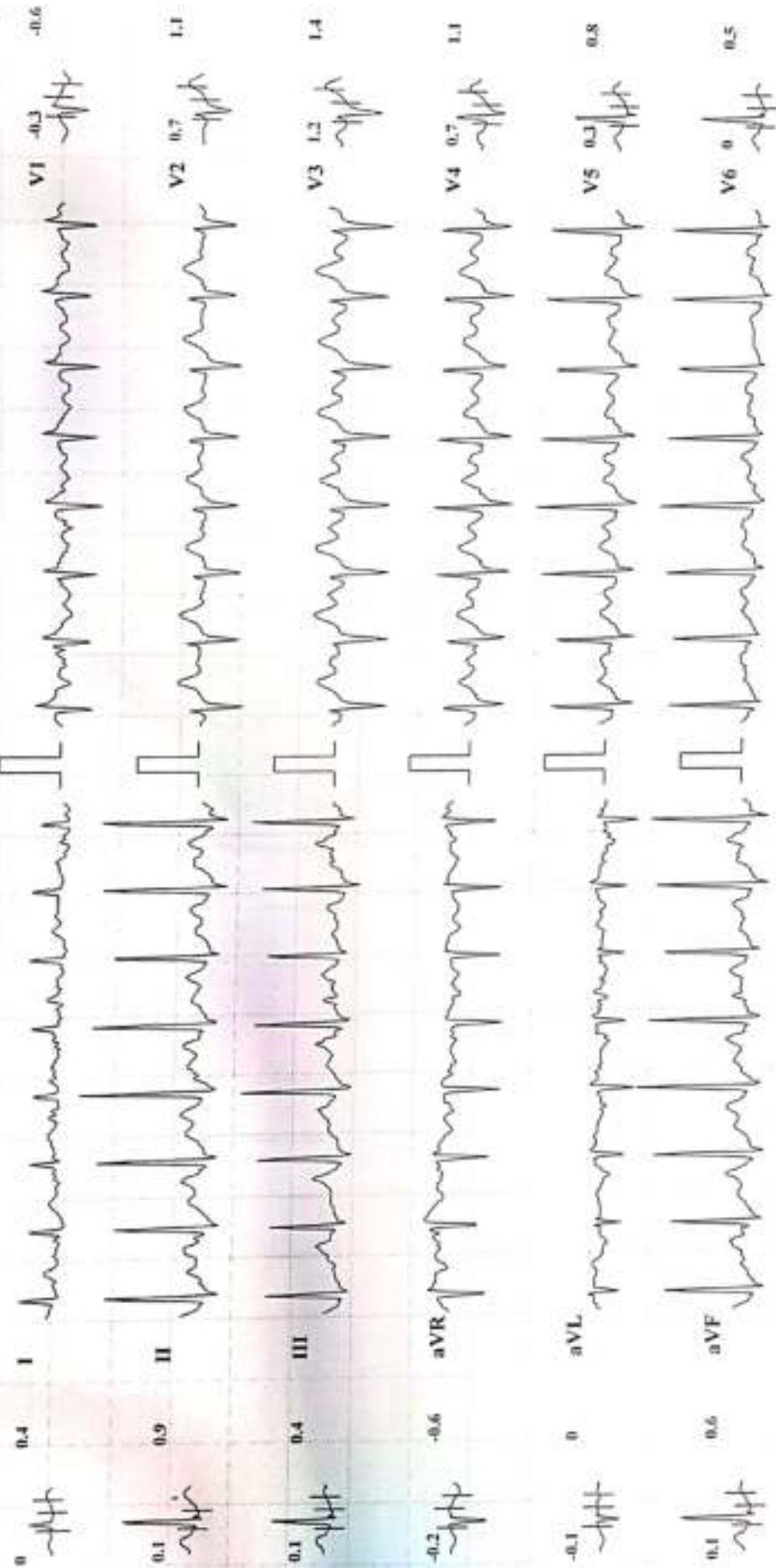


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schiffel Cardiovet CS-10 Version 3.4



KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)
Bruce Protocol
STLevel(mm) STSlope(mV/s)

HR: 158 bpm
BP: 130/80 mmHg
STLevel(mm) STSlope(mV/s)

ID: 511
Date: 22-03-2024
Speed: 4 kmph
Exec Time : 0:06:00
Slope: 12 %
Stage: 2
THR: 155 bpm

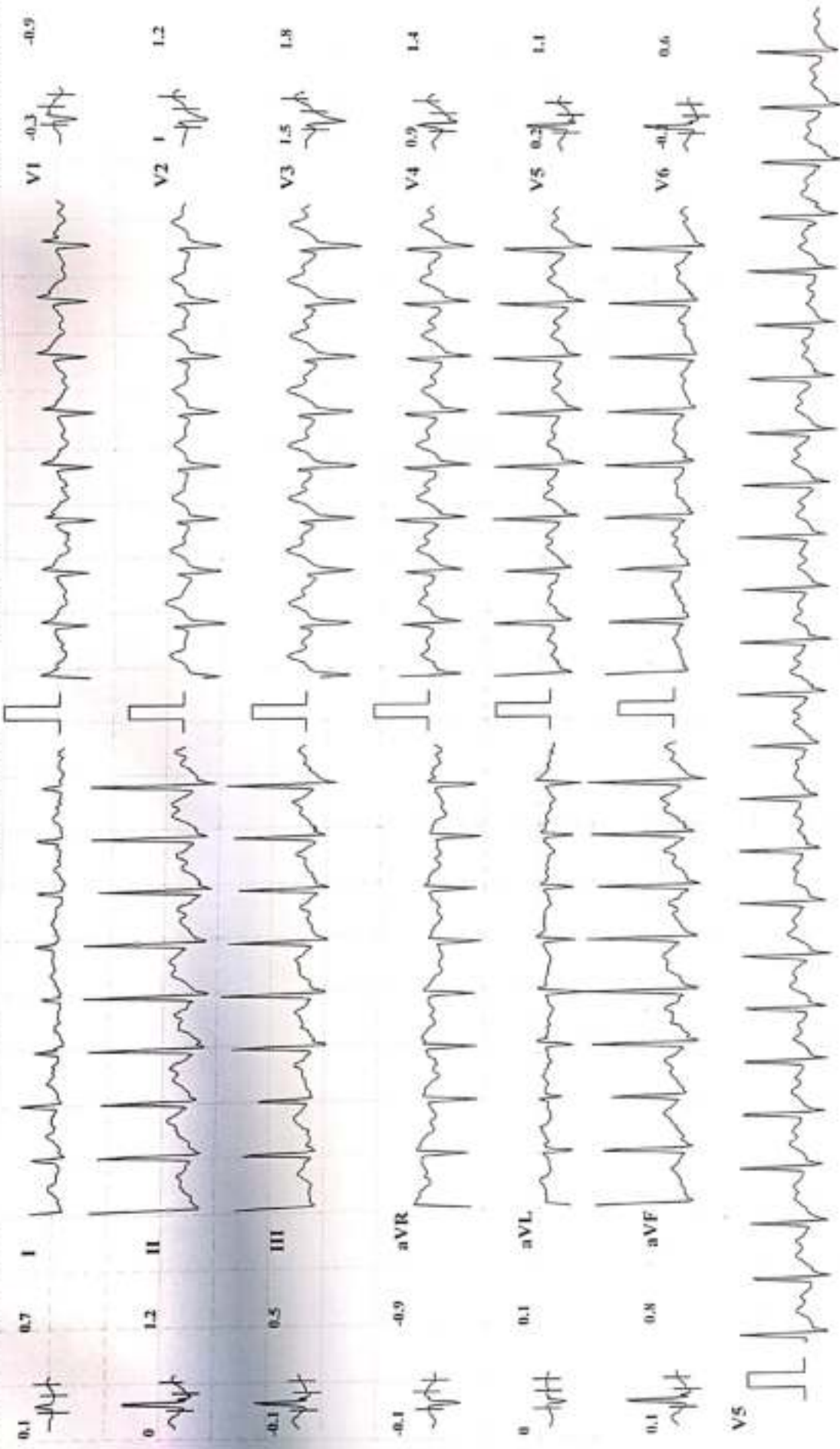


Chart Speed: 25 mm/sec
Amplitude: 10mm/mV
Filter: 35 Hz
Mains Filter: ON
ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Exec Time: 0:06:01

Stage Time: 00:01

HR: 158 bpm

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

Stage: 3 Peak Exercise

Speed: 5.5 kmph

Slope: 14 %

THR: 155 bpm

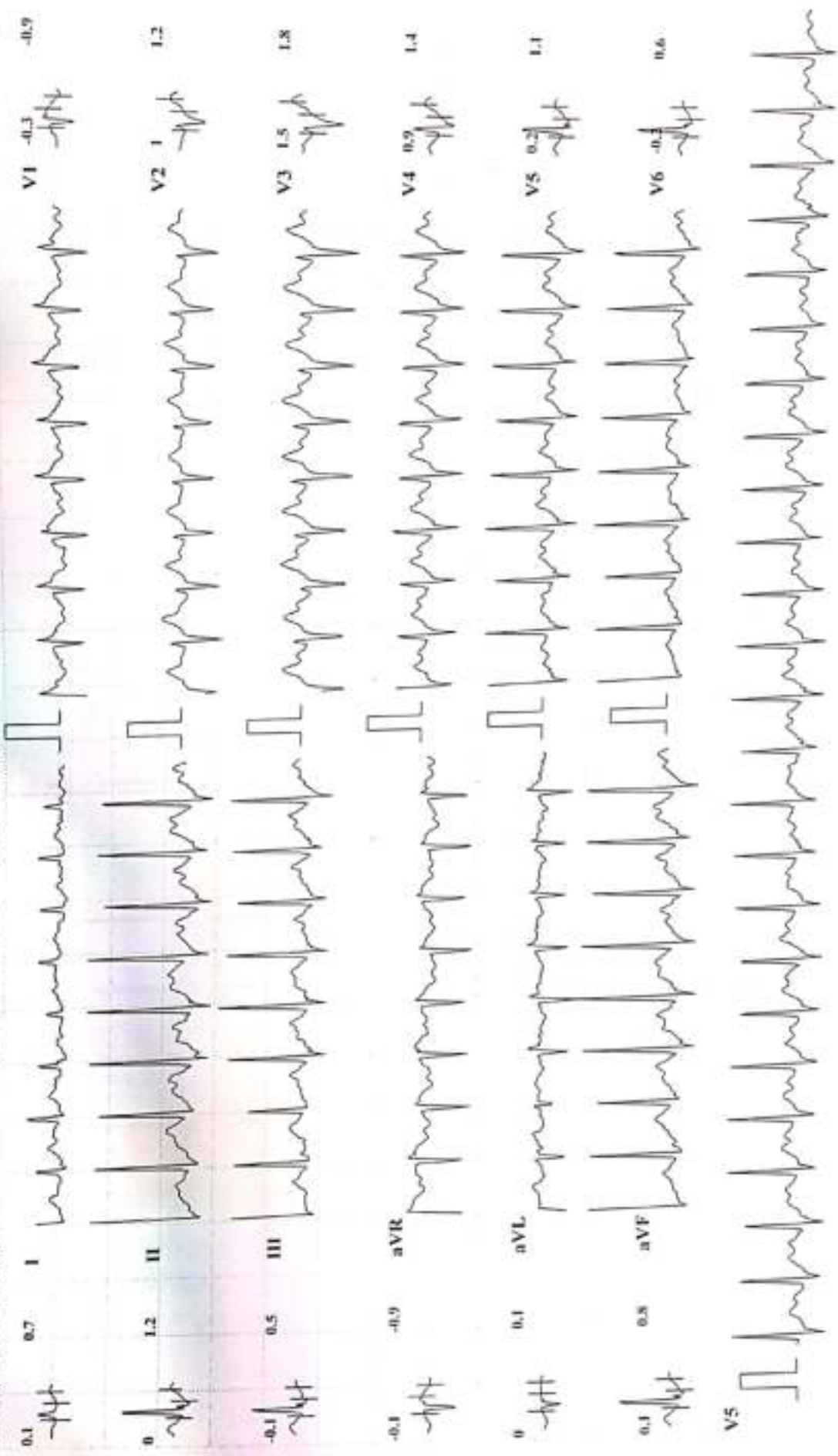


Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO - R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schiffel Cardiovit CS-10 Version 3.4

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AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Stage: Recovery1

Exec Time : 00:00

Slope: 0 %

Stage Time: 01:00

THR: 155 bpm

HR: 122 bpm

BP: 130/70 mmHg

STLevel(mm) STSlope(mV/s)

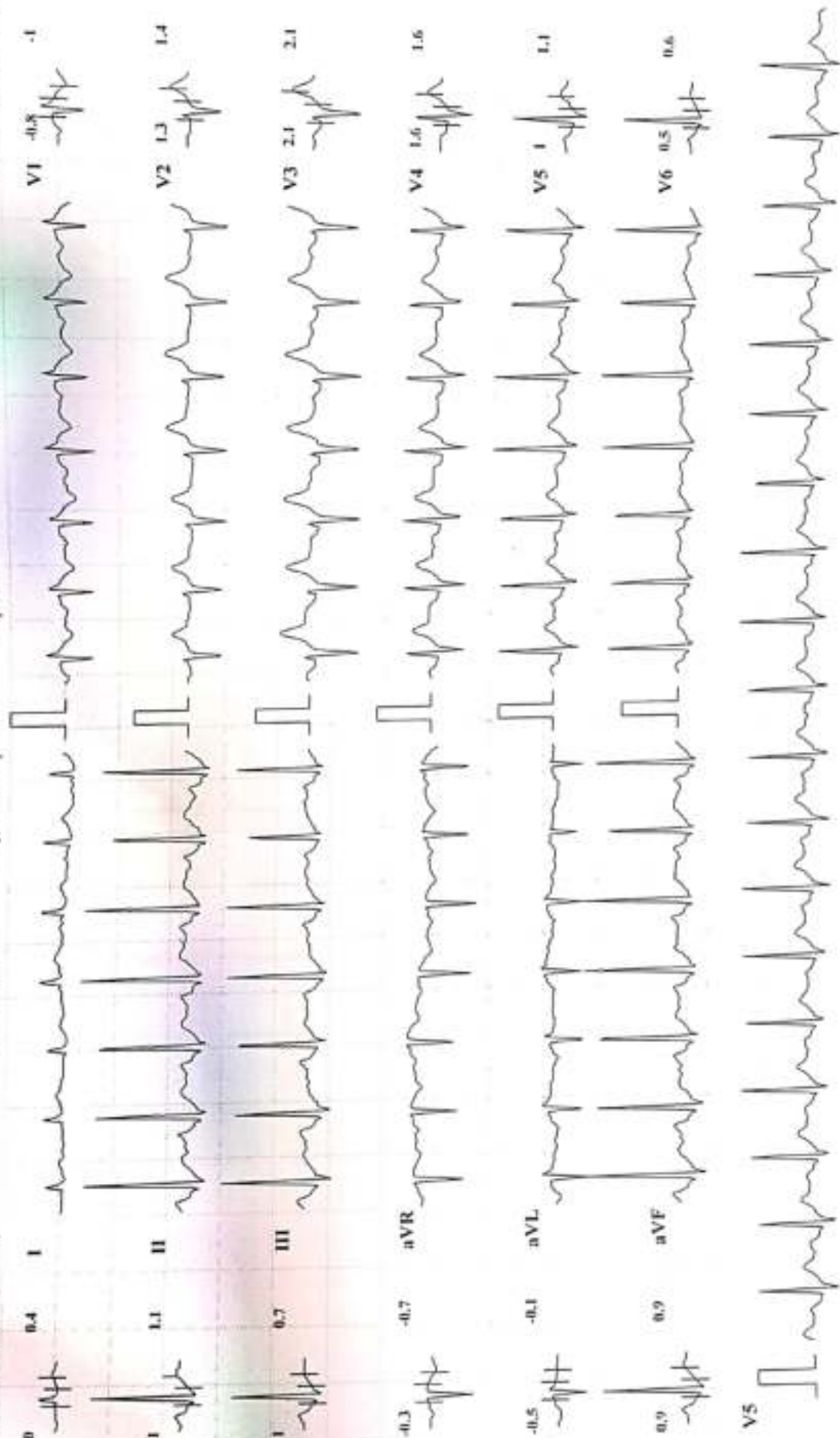


Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO - R - 60 ms, J - R + 60 ms, Post J - J + 30 ms

Schiller Cardiofit CN-10 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

AMIT S DINDE (37 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 511

Date: 22-03-2024

Stage: Recovery2

Exec Time : 00:00

Slope: 0 %

Stage Time: 01:00

THR: 155 bpm

HR: 111 bpm

BP: 120/60 mmHg

STLevel(mm) STSlope(mV/s)

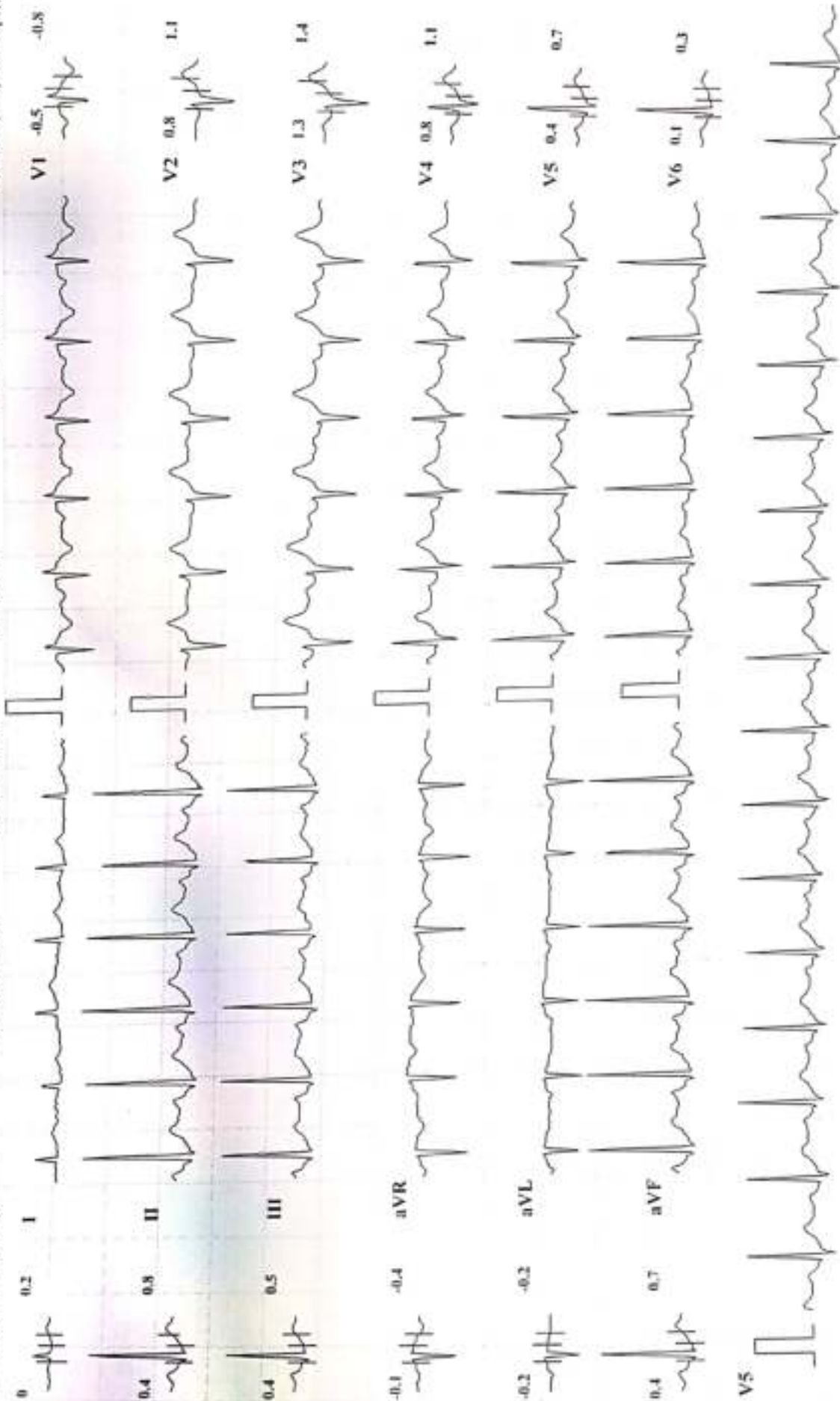


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Mains Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schiller Cardiovit CS-10 Version 3.4





GPS Map Camera



Kolhapur, Maharashtra, India
Rajghat Rd, Mangalwar Peth, C Ward, Kolhapur, Maharashtra 416002, India
Lat 16.692866°
Long 74.224274°
23/03/24 09:34 AM GMT +05:30

Patient Name : MR. AMIT DINDE
Referred By : Dr. VANDANA POWAR

Date : 23 Mar 2024
Age : 38 YEARS Sex : M

Clinically -FOR HEALTH CHECK UP.

Abdomen Sonography

LIVER: is normal in size, shape, position and shows increased echogenicity. The contours are smooth. The parenchyma shows homogeneous echotexture. The intra - hepatic portal and venous system appears normal. The portal vein is normal and show hepatopetal flow. The intra-hepatic biliary radicals are not dilated. There is no focal mass lesion.

GALL BLADDER: is physiologically distended, normal in size and echotexture. There is no evidence of echoreflexive calculus in gall bladder. There is no abnormal biliary tree dilation noted. The portal vein & C.B.D appear normal. Wall thickness is normal. No e/o cholecystitis/calculus seen. PV measures -11 mm, CBD measures - 3 mm.

PANCREAS: is normal size, position & echotexture. The contours are smooth. There is no focal mass lesion seen. No pancreatitis or calcification.

SPLEEN: is normal in size, shape and echopattern. The contours are smooth. The splenic vein and portal vein are normal in calibre.

KIDNEYS: Both the kidneys are normal in size, shape and position and contours. There is no echoreflexive obstructing calculus seen on either sides nor hydronephrosis. Both visualized ureters appear to be normal. Parenchymal/cortical thickness is normal. Cortico -medullary differentiation is well maintained. Overlying bowel gases does not show further course of ureter. **Right kidney** measures- 103 X 56 mm. **Left kidney** measures -98 x 59 mm.

Urinary bladder is physiologically distended, appears normal. No intraluminal abnormality.

PROSTATE: is normal size and uniform echotexture, measures 32 X 38 X 35 mm (weight- 22 gms). The gland bulges urinary bladder base.

Aorta and IVC are normal. No e/o free fluid in peritoneal cavity. No ascites. No significant lymphadenopathy. **Bowel loops** appear normal in size with good peristalsis.

Appendix is not appreciated in today's study. Terminal ileum is well seen. No probe tenderness in right iliac fossa or anywhere in abdomen.

IMPRESSION : < FATTY LIVER - GRADE 2.

ADVICE - Clinical correlation and follow up if clinically needed.

THANKS FOR REFERRAL FEEDBACK IS WELCOME

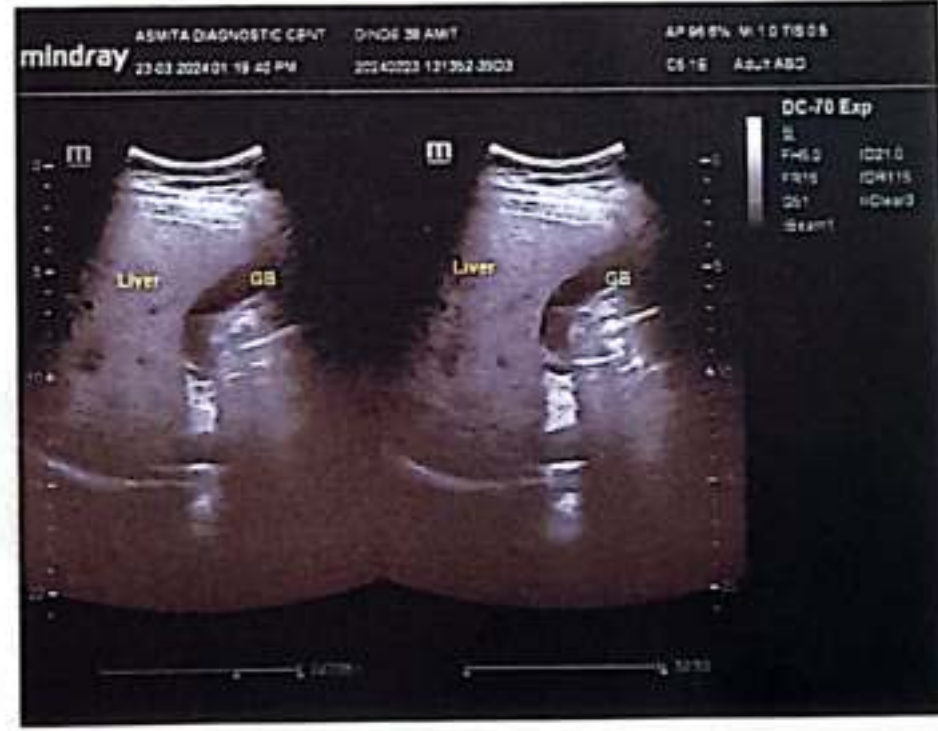
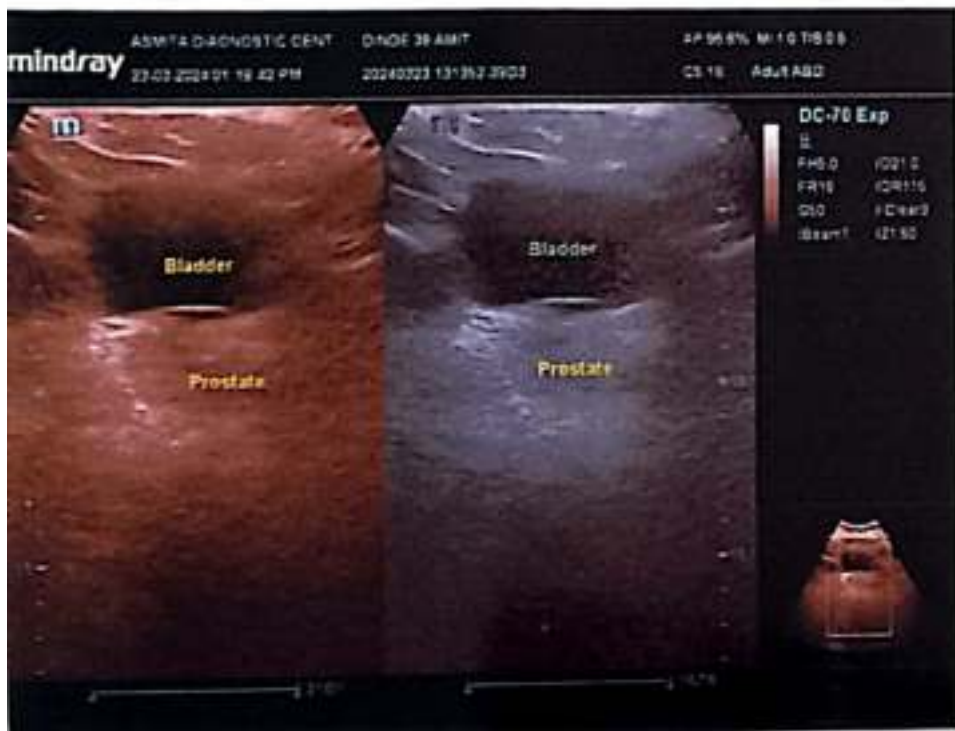
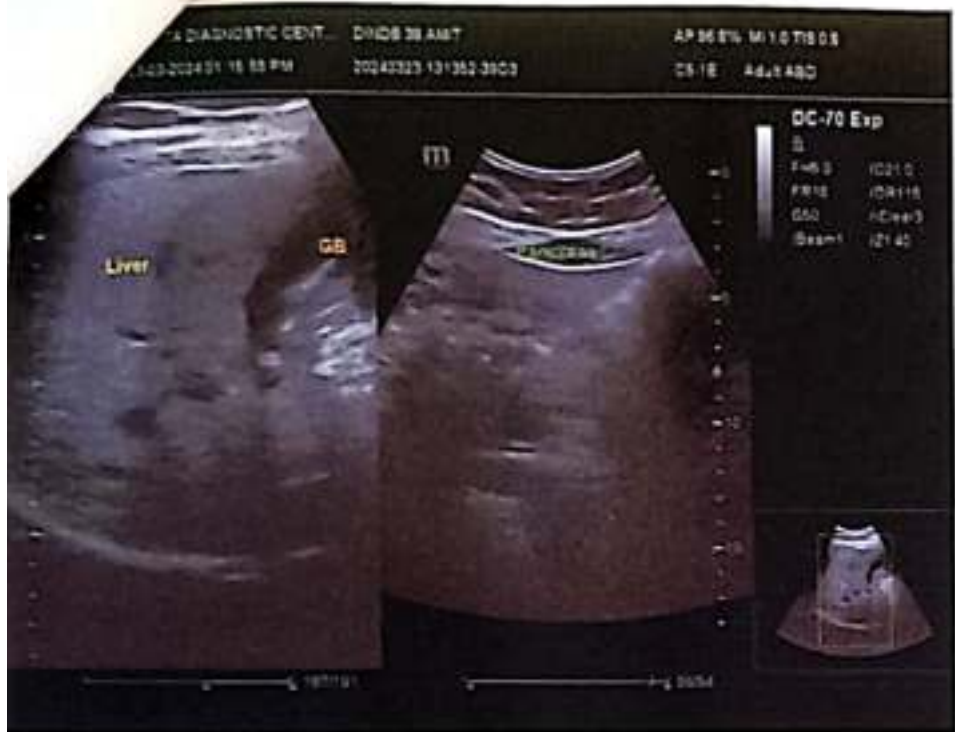
Neha

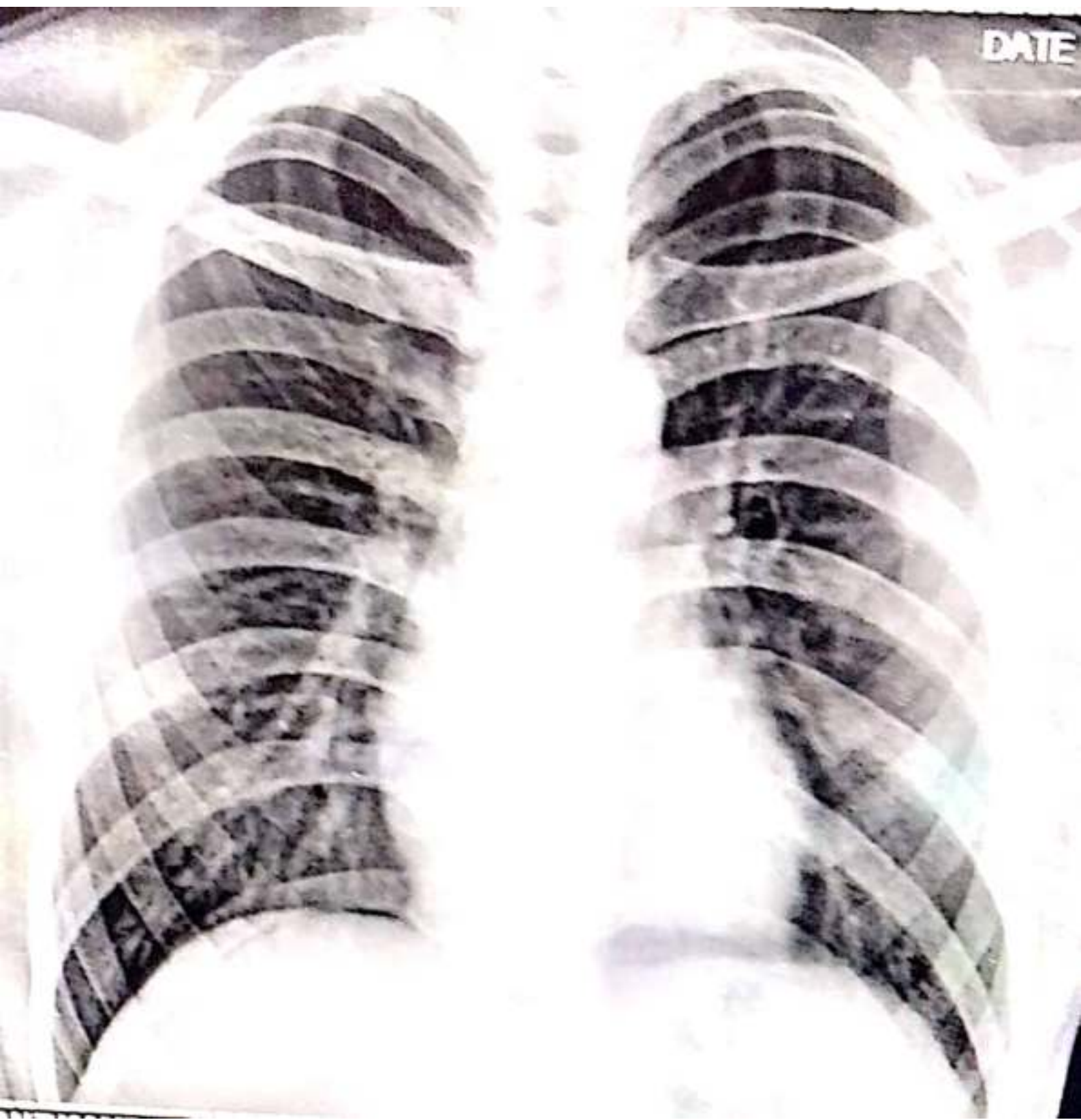
DR. NEHA S. GHORPADE
MBBS DMRE Reg. No. 79916
Consulting Radiologist

डॉ. नेहा घोरपडे

एच. बी. सी. एस., डी. एम. आर. ई (रेडिओलॉजिस्ट)
रजि. नं. 79916

परत येताना सर्व जुने रिपोर्ट्स, सोनोग्राफी रिपोर्ट्स अथवा एक्स-रे असल्यास बरोबर घेऊन येणे.







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PATEINT NAME :	MR AMIT DINDE	AGE/SEX :	38Y/MALE
REF BY :	PARTH LAB	DATE :	23/03/2024

CHEST X-RAY PA

Both lungs fields are normal

Both costophrenic angles appear normal

The tracheal lucency is centrally placed

The mediastinal & diaphragmatic outlines appear normal.

The heart shadow is normal

IMPRESSION : NORMAL CHEST X-RAY

ADV: Clinical correlated

DR SAKSHAM GUPTA
MBBS,MD Radio diagnosis FMF UK
Consultant Radiologist

Mob. 9890185675

Address : Bramhanand, Near Tawanappa Patne High School, Rajarampuri 10 Galli, Kolhapur.



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REPORT

PT Name : AMIT DINDE
Ref By : DR. VANDANA POWAR
Reg No : HL9100410238 / MH145
Barcode : B1474782
INV : PSA- Total (Prostrate Specific Antigen Total)

Age : 38 Year | Sex : Male
Registered on : 23-03-2024 03:45 PM
Received on : 24-03-2024 07:54 AM
Reported on : 24-03-2024 10:08 AM

SAMPLE COLLECTED AT :



SAMPLE : Serum

PSA- TOTAL (PROSTRATE SPECIFIC ANTIGEN TOTAL)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
PROSTATE SPECIFIC ANTIGEN (PSA) <small>Method: CLIA</small>	0.53	ng/ml	0 - 4.0

Interpretation

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

Note:

Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

Please correlate with clinical conditions.

--End of report--

Dr. PALLAV SAXENA (MD PATH)
Consultant Pathologist



REPORT

PT Name : AMIT DINDE
Ref By : DR. VANDANA POWAR
Reg No : HL9100410238 / MH145
Barcode : B1474782
INV : THYROID PROFILE -3 (T3 T4 TSH)

Age : 38 Year | Sex : Male
Registered on : 23-03-2024 03:45 PM
Received on : 24-03-2024 07:54 AM
Reported on : 24-03-2024 10:09 AM

SAMPLE COLLECTED AT :



SAMPLE : Serum

THYROID PROFILE -3 (T3 T4 TSH)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3) <small>Method: CLIA</small>	1.18	ng/mL	0.80 - 2.00
TOTAL THYROXINE (T4) <small>Method: CLIA</small>	7.25	µg/dl	5.10 - 14.10
THYROID STIMULATING HORMONE (TSH) <small>Method: CLIA</small>	2.43	uIU/ml	0.35 - 5.50

Reference Range

Thyroid hormone status during pregnancy:

Pregnancy	T3	T4	TSH
1st Trimester	0.70-1.80	6-16.5	0.37 - 3.6
2nd & 3rd Trimester	0.80-2.00	6-18.5	0.38 - 4.04

Reference ranges by Age

0-5 days: 0.7-15.2
6 days-2 months: 0.7-11.0
3-11 months: 0.7-8.4
1-5 years: 0.7-5.0
6-10 years: 0.6-4.8

Interpretation

1. Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
2. Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3. Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
4. Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
5. Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
6. In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
7. There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
8. Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Please correlate with clinical conditions

--End of report--

Dr. PALLAV SAXENA (MD PATH)
Consultant Pathologist

Dr. Vandana G. Powar M.B.B.S., D.C.P.
Consultant Pathologist



PARTH
PATHOLOGY LABORATORY
(Computerised)

LAB - Shop No. 7, "Diwan Towers" Mangalwar Peth, Near Mirajkar Tikti, Opp. Nutan Marathi
High School, Kolhapur. Mob. 9158529408, 9422047480, 9921285167

PT.NAME : MR. AMIT DINDE
REF. BY : DR. MEDIWHEEL LIFE INS

DATE : 23/03/2024
AGE : 38 Yrs. SEX : M
PT.NO. : 202 230324

EXAMINATION OF FAECES

Normal Range

PHYSICAL EXAMINATION

Appearance : Semisolid
Colour : Brown
Blood : Absent
Mucus : Absent
Parasites : Absent

Absent

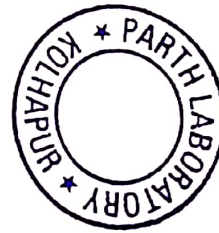
CHEMICAL EXAMINATION

Reaction (pH) : Acidic
Occult Blood : Absent
Reducing Substances : Absent

MICROSCOPIC EXAMINATION

Ova : Absent
Cysts : Absent
Macrophages : Absent
Pus Cells : Absent
Macrophages : Absent
Red Blood Cells : Absent
Undigested Material : Not in excess
Fat Globules : Not in excess

Dr. Vandana G. Powar
M.B.B.S., D.C.P.
Reg. No. 68137



PATHOLOGIST

[Signature]
DR. VANDANA POWAR
M.B.B.S., D.C.P.

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