



एक एहशासि क्षुपनेपन का Sparsh Multispecialty Hospital

(A Unit of Sparsh Multispecialty Hospital Private Limited)
(Formerly known as Paedia Health Private Limited)
CIN : U85110CT2005PTC017751



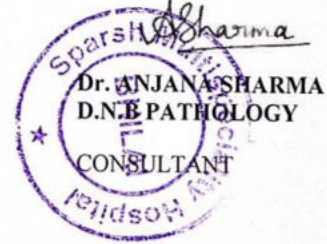
UHID : 155152 VISITID : O000288901
PATIENT NAME : MRS. KANTI SINGHARE ORDER DATE : 01/10/2022 9:25:00AM
AGE/SEX : 47Y/FEMALE SAMP. DATE : 01/10/2022 10:30:00AM
CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10394321
RESULT DATE : 01/10/2022 2:04:00PM
TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	55 mm at end of 1 hr	High	0 - 20

TECHNICIAN



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AGE/SEX	: 47Y/FEMALE	SAMP. DATE	: 01/10/2022 10:29:00AM
CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10394311
		RESULT DATE	: 01/10/2022 4:12:00PM
		TPA	: MEDIWHEEL

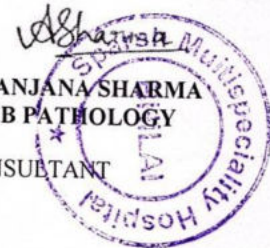
DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.56 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.32 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.24 mg / dl	Normal	0.1 - 0.4
ALKALINE PHOSPHATASE	105 U / L	Normal	0 - 240
SGOT	39 U / L	Normal	0 - 46
SGPT	37 U / L	Normal	0 - 40
TOTAL PROTEIN	7.39 g / dl	Normal	6 - 8
ALBUMIN	4.40 g/dl	Normal	4.1 - 5.3
GLOBULIN	2.99 g / dl	Normal	2 - 3.5
A.G.RATIO	1.47:1		1 - 2.5

TECHNICIAN

Dr. ANJANA SHARMA
D.N.B PATHOLOGY
CONSULTANT



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		RESULT DATE	: 01/10/2022 4:00:00PM
		TPA	: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICROSCOPY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
PHYSICAL EXAMINATION			
QUANTITY	10 ml	-	-
COLOUR	Pale Yellow	-	-
APPEARANCE	Hazy	-	-
REACTION	Acidic	-	-
CHEMICAL EXAMINATION			
ALBUMIN	Trace	-	-
SUGAR	Nil	-	-
MICROSCOPIC EXAMINATION			
EPITHELIAL CELLS	6-8 /hpf		0 - 5
PUS CELLS	Plenty /hpf		1 - 2
RBC	20-25 /hpf		-
CAST	Nil /lpf		-
CRYSTAL	Nil		-
AMORPHOUS MATERIAL DEPOSIT	Nil		-
OTHERS	Bacteria (+)		-

TECHNICIAN

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Dr. ANJANA SHARMA
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CONSULTANT
SPARSH MULTISPECIALTY HOSPITAL
BHILAI

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DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HBA1 C (GLYCOSYLATED HEAMOGLOBIN)	8.7 %	High	4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group - HbA1c In%
 Non diabetic >= 18 years - 4.0 - 6.0
 At risk (Prediabetes) - >= 6.0 to < = 6.5
 Diagnosing diabetes - >=6.5

Therapeutic goals for glycemic control

- Age > 19 years
- Goal of therapy: <7.0
- Action suggested: >8.0
- Age < 19 years
- goal of therapy: < 7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c. converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10394312
		RESULT DATE	: 01/10/2022 3:10:00PM
		TPA	: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

T3,T4 TSH

PARAMETER	VALUE	RESULT	REFERENCE RANGE
T3 (TRIIODOTHYRONINE)	1.59 ng/ml	Normal	0.69 - 2.15
T4 (THYROXINE)	80.07 ng/ml	Normal	52 - 127
TSH (THYROID STIMULATING HORMONE)	5.30 uIU/ml	High	0.3 - 4.5

REFERENCE GROUP REFERENCE RANGE in uIU/mL
As per American Thyroid Association

Adult Females (> 20 years)	0.30- 4.5
Pregnancy	
1st Trimester	0.10- 2.50
2nd Trimester	0.20 - 3.00
3rd Trimester	0.30 - 3.00

Note:

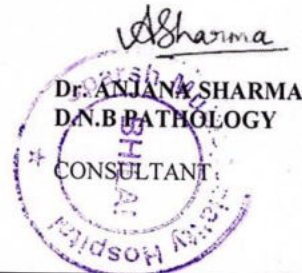
TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.

1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

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DEPARTMENT OF PATHOLOGY

CREATININE

PARAMETER	VALUE	RESULT	REFERENCE RANGE
CREATININE	0.74 mg / dl	Normal	0.6 - 1.2

TECHNICIAN

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CONSULTANT DOCTOR	: HOSPITAL CASE	SPEC. NO	: 10394320
		RESULT DATE	: 01/10/2022 1:52:00PM
		TPA	: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

BLOOD GROUPING AND RH TYPING

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BLOOD GROUP	"O"		-
RH FACTOR	Positive		-

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		RESULT DATE	: 01/10/2022 4:12:00PM
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DEPARTMENT OF PATHOLOGY

URIC ACID

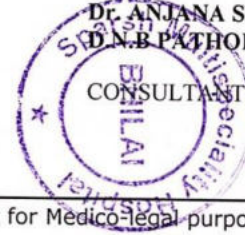
PARAMETER	VALUE	RESULT	REFERENCE RANGE
URIC ACID	7.51 mg/dL	High	2.5 - 6.8

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CONSULTANT DOCTOR : HOSPITAL CASE

VISITID : 0000288901
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SAMP. DATE : 01/10/2022 10:29:00AM
SPEC. NO : 10394310
RESULT DATE : 01/10/2022 4:12:00PM
TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BUN (BLOOD UREA NITROGEN)			
BUN (BLOOD UREA NITROGEN)	8.41 mg / dl	Normal	8 - 23
GGT (GAMMA GLUTAMYL TRANSFERASE)			
GGT (GAMMA GLUTAMYL TRANSFERASE)	18.0 U / L	Normal	5 - 36
LIPID PROFILE			
CHOLESTEROL TOTAL	271 mg./ dl	High	150 - 220
TRIGLYCERIDES - SERUM	314 mg / dl	High	60 - 165
HDL	88.91 mg / dl	High	35 - 80
LDL	119.29 mg/dL	Normal	90 - 160
VLDL	62.80	High	20 - 50
CHOL : HDL Ratio	3.05:1		3.5 - 5.5
LDL: HDL Ratio	1.34:1		-

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		RESULT DATE	: 01/10/2022 3:31:00PM
		TPA	: MEDIWHEEL

DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COUNT)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	11.1 gm%	Low	12 - 16
TOTAL RBC COUNT	4.39 Million/cumm	Low	4.5 - 5.1
HAEMATOCRIT (PCV)	32.9 %	Low	35.9 - 44.6
RBC INDICES			
MCV	75.0 fl	Low	78 - 96
MCH	25.4 pg	Low	27 - 32
MCHC	33.8 %	Normal	33 - 37
RDW	12.8 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	8400 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	63 %	Normal	0 - 75
LYMPHOCYTES	32 %	Normal	22 - 48
EOSINOPHILS	02 %	Normal	0 - 6
MONOCYTES	03 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	182000 /cumm	Normal	150000 - 450000

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Age / Sex	: 47Y / FEMALE		:
Consultant	: DR. HOSPITAL CASE	Order Date	: 01/10/2022 9:25AM
Ref. By	: DR. HOSPITAL CASE	Samp.Date	:
Category	: MEDIWHEEL	Report Date	: 01/10/22 01:23PM

SONOGRAPHY USG WHOLE ABDOMEN

- * LIVER : Enlarged in size (17.02 cm) and shows diffuse fine increased echogenicity of parenchyma with no evidence of any focal lesion seen. IHBRs are not dilated
- *PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- *COLLECTING DUCT & CBD: Normal in size and have echo lucent lumen.
- *GALL BLADDER : Seen in distended state with normal wall and lumen is echo free
- *SPLEEN: Normal in size, shape & echo texture. No focal lesions seen.
- *PANCREAS: Pancreatic head, body & tail visualized and have , normal size, shape & echo texture.
- *KIDNEYS: Both kidneys are of normal shape, size and position.
Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus
- *URINARY BLADDER : Seen in distended state and has normal wall architecture. Lumen is echo free.
- *UTERUS & BOTH OVARIES : Not visualized - Post Hysterectomy Status.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION :

- Enlarged fatty Liver (Grade I - II)
 - Please correlate clinically , followup USG is recommended.

Dr. SAMIR KATHALE
MBBS, DNB(RADIO), MNAMS, MANBD
Fetal Ultrasound & Fetal Medicine (FGI-BFMC)
Reg No: CGMC-4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference.