





PROCESSED AT : HY PATHO LAB MUMBAI

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🕓 7718962488 🛛 🗠 info@hypatholab.in

REPORT

PT Name	: YOGITA PETHE	Age : 35 Year Sex : Female
Ref By	: DR. VANDANA POWAR	Registered on : 25-11-2023 01:29 PM
Reg No	: HL5500068518 / MH145	Received on : 26-11-2023 09:50 AM
Barcode	: Y11289468	Reported on : 26-11-2023 12:00 PM
INV	: THYROID PROFILE -3 (T3 T4 TSH)	

SAMPLE COLLECTED AT :



SAMPLE : Serum

THYROID PROFILE -3 (T3 T4 TSH)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3) Method: CLIA	1.45	ng/mL	0.80 - 2.00
TOTAL THYROXINE (T4) Method: CLIA	7.33	µg/dl	5.10 - 14.10
THYROID STIMULATING HORMONE (TSH) Method: CLIA	2.05	ulU/ml	0.35 - 5.50

Reference Range

Thyroid hormone status during pregnancy:

Pregnancy	ТЗ	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: 0.7-6.0 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 thecatabolic 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~~

Thande

Dr. Khande Tejal Abasaheb (MD PATH) Consultant Pathologist



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

DATE - 25/11/2023

PATIENT NAME-YOGITA PETHE

AGE - 35Y/FEMALE

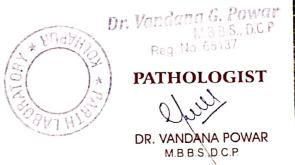
HEIGHT – 166cm

WEIGHT- 61kg

BIOOD PRESSURE - 107/72mmHg

88 / Min PULES –

FIT TO PERFORM ALL DUTIES



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Methe.



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





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

		DATE :	25/11/2023	PT.NO. : 210 25112
NAME	MRS VOGITA PEIHE			SEX : F
REF BY	: Dr. MEDIWHEEL LIFE INS	AGE :	JJ. 113.	

HAEMOGRAM WITH INDICES Histogram Normal Range **Result Units** Test 12-16 g/dl 10.8 RBC Haemoglobin 4.5 - 6.5 4.64 millions / cu-mm **RBC** Count 40 - 54 40.9 % PCV 80 - 96 fL 88.1 MCV NO/FL 27 - 33 Pq 23.3 MCH 33 - 36 gm/dl 26.4 MCHC 200 100 11.0 - 14.5 % 13.0 **RDW CV** WBC 4000 - 11000 /cumm 6500 WBC Count 55 -75 % 65 Neutrophils NO/FL 20 - 50 % 30 Lymphocytes 1-6 % 03 Eosinophils 300 100 200 2-10 % 02 Monocytes 0 - 1 % 00 Basophils PLT 150000 -450000 NO/FL /ul 311000 Platelet Count 7.4 - 10.4 fL 9.4 MPV 8-12 % 10.3 PDW 15-35 % 19.5 10 20 30 P-LCR 0-15 mm at 1hr 09 E.S.R. (By Wintrobe Method) Normochromic, Normocytic. RBC Morphology -Within Normal Limits WBC Morphology -Adequate Platelets 'A' Rh Positive Dr. Vandana G. Powar * Blood group B.B.S., D.C.P. Reg No. 68137 PATHOLOGIST

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1HX

DR. VANDANA POWAR M.B.B.S.,D.C.P.



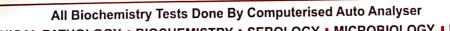
Normal Range

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PT.NAME :	MRS. YOGITA PETHE	DATE : 25/11/2023	
REF. BY :	DR. MEDIWHEEL LIFE INS	AGE : 35 Yrs.	SEX : F
		PT.NO. : 210 251123	

BIOCHEMISTRY TEST REPORT

Fasting Plasma Glucose	: 85.5	mg/dl	60-110 mg/dl
2 Hrs. Plasma Glucose	: 133.9	mg/dl	90-140 mg/dl
S. Creatinine Blood Urea	: 0.9 : 23.9	mg/dl mg/dl	0.6 - 1.4 mg/dl 12-42 mg/dl
Blood Urea Nitrogen S. Uric acid CHOLESTEROL	: 11.17 : 4.2 : 159.6	mg/dl mg/dl mg/dl	5 - 21 mg/dl 2.6 -6.0 mg/dl 0-250 mg/dl
HDL Cholesterol	: 33.0	mg/dl	30 - 70 mg/dl
S. Triglycerides	: 84.7	mg/dl	0-170 mg/dl
LDL Cholesterol	: 109.7	mg/dl	60 - 150 mg/dl
TC/HDLC Ratio	: 4.8		0 - 5
LDLC/HDLC Ratio	: 3.3		2.5 - 3.5 Dr. Vandana G. Powar M.B.B.S., D.C.P
			Reg. No. 68137



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PATHOLOGIST

DR. VANDANA POWAR M.B.B.S., D.C.P.

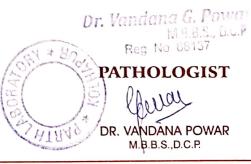


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	MRS. YOGITA PETHE	DATE : 25/11/2023
		AGE : 35 Yrs. SEX : F
REF, BY :	DR. MEDIWHEEL LIFE INS	
		PT.NO. : 210 251123

BIOCHEMISTRY TEST REPORT

			Normal Range
S. Bilirubin (Total)	: 0.29	mg/dl	0 - 1.0 mg/dl
S. Bilirubin (Direct)	: 0.14	mg/dl	0 - 0.25 mg/dl
S. Bilirubin (Indirect)	: 0.15	mg/dl	0 - 0.75 mg/dl
S.G.O.T	: 22.8	IU/L	0 - 42 IU/L
S.G.P.T	: 11.6	IU/L	0 - 42 IU/L
S. Alkaline Phosphatase	: 83.6	IU/L	37 - 147 IU/L
Total Proteins S. Albumin S. Globulin A/G Ratio	: 7.9 : 4.5 : 3.4 : 1.3 : 1	g/dl g/dl g/dl	6.6 - 8.3 g/dl 3.5 - 5.0 g/dl 1.5 - 3 g/dl 0.90 - 2.00



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PT.NAME	:	MRS. YOGITA PETHE
		THE INCOMENTATION OF THE PARTY

DATE : 25/11/2023 AGE : 35 Yrs. SEX : F

REF. BY : DR. MEDIWHEEL LIFE INS

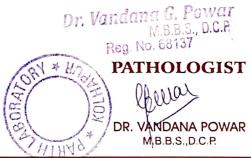
PT.NO. :	210	251	123
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REPORT ON % GLYCOHAEMOGLOBIN OF BLOOD

% Glycohaemoglobin of blood: 5.0%Estimated mean blood glucose: 97.1mg/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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SEX : F

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DATE : 25/11/2023 **MRS. YOGITA PETHE** PT.NAME : AGE : 35 Yrs. DR. MEDIWHEEL LIFE INS REF. BY : PT.NO.: 210 251123

EXAMINATION OF URINE

Normal Range

PHYSICAL EXAMINATION		
Quantity	05 ml	
Colour	Pale Yellow	
Appearance	Clear	
Deposit	Absent	
Reaction (pH)	Acidic	
Specific Gravity	1.024	
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	Dr. Vandana G. Powar M.B.B.S., D.G.P. Reg. No. 68137
Trichomonas vaginalis	Absent	M.B.B.S., D.M.
Bacteria	Absent	Reg. No. 68131
Mucus Threads	Absent	PATHOLOGIST
Spermatozoa	Absent	PATHOLOGIST
		HINN DR. VANDANA POWAR
		M.B.B.S.,D.C.P.

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PATIENT NAME: - YOGITA PETHE

AGE – 35/SEX-FEMALE

REFERANCE :- MEDWHEEL LIFE INS.

DATE - 25/11/2023

BIOCHEMISTRY

NORMAL VALUE

SRUM VLDL - 26.9 mmol/L

10-50 mmol / L

Dr. Vandana G. Powar M.B.B.S., D.C.P. Reg. No. 68137 24 PATHOLOGIST 104 11840 DR. VANDANA POWAR M.B.B.S., D.C.P.

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Dr. Vandana G. Powar м.в.в.s., D.с.р. Consultant Pathologist



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PATIENT NAME:-YOGITA PETHE

AGE – 35SEX-FEMALE

DATE - 25/11/2023

REFERANCE : - MEDWHEEL LIFE INS.

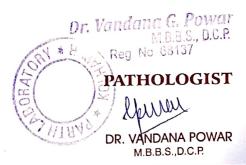
BIOCHEMISTRY

NORMAL VALUE

10-50 mmol / L

SERUM GAMMA. G. T

: 27.5 mmol/L



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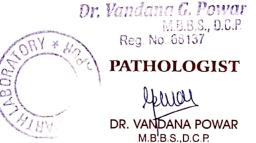
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25/11/2023

THE ECG OF THE CLIENT - YOGITA PETHE

IS WITHIN NORMAL LIMIT.

NOABNORMAL FINDINGS ARE DETECTED .

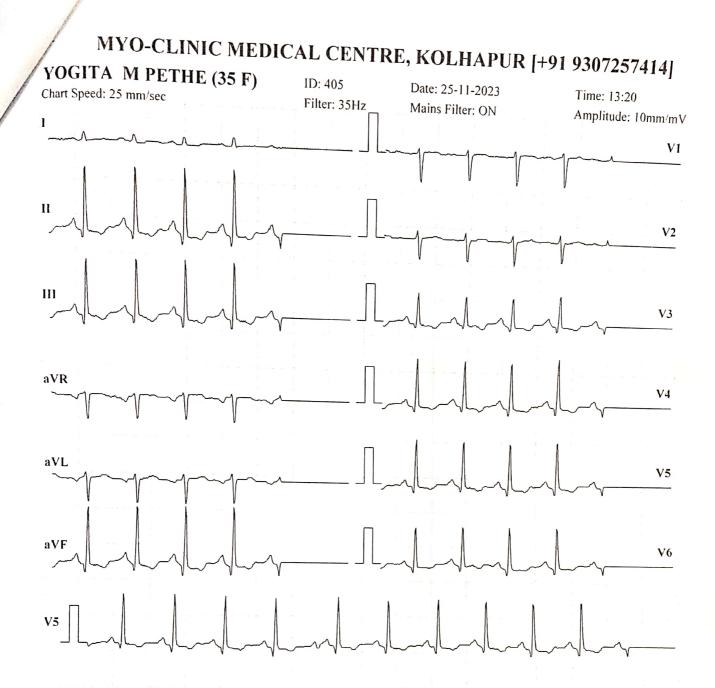


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ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Lead	P(mV)	Q(mV)	R(mV)	S(mV)	T(mV)
I	0.03	0	0.19	-0.04	0.01
11	0.25	-0.36	1.85	-0.09	-0.15
111	0.21	-0.37	1.65	-0.07	-0.19
aVR	-0.16	0.16	-1.11	0.08	0.05
aVL	-0.09	0.19	-0.75	0	0.09
aVF	0.24	-0.35	1.76	-0.07	-0.16
V1	-0.03	0.17	-0.84	0	0.01
V2	0	0.21	-0.68	-0.01	0.05
V3	0.17	-0.17	0.91	-0.05	-0.15
V4	0.16	-0.24	1.44	-0.05	-0.12
V5	0.25	-0.36	1.85	-0.09	-0.15
V6	0.13	-0.24	1.23	-0.07	-0.09
Schiller Cardiovit CS-10 Version 3.4			Ref.By M	EDI WHEEL	

 Intervals (ms)

 P-Q
 Q-R-S
 Q-T
 Q-TC

 106
 62
 246
 327

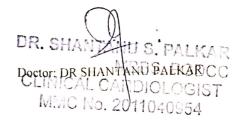
Axis (deg)

Р	QRS	Т
83	84	-86

HR: 106 bpm

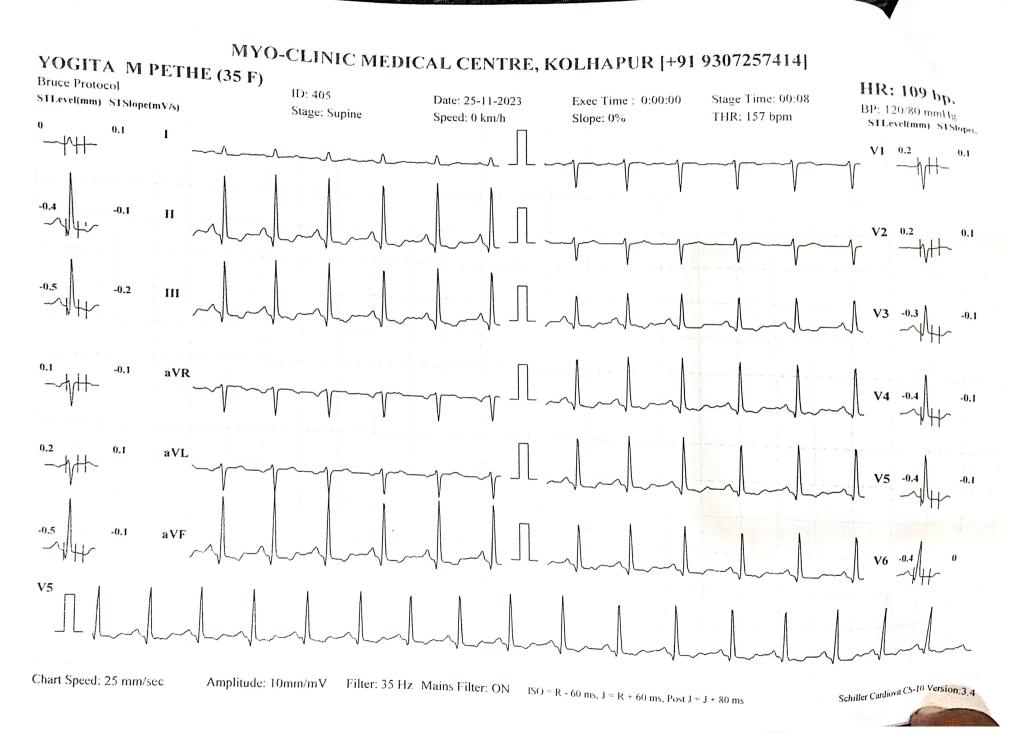
BP: 120/80 mmHg

Interpretation: NORMAL



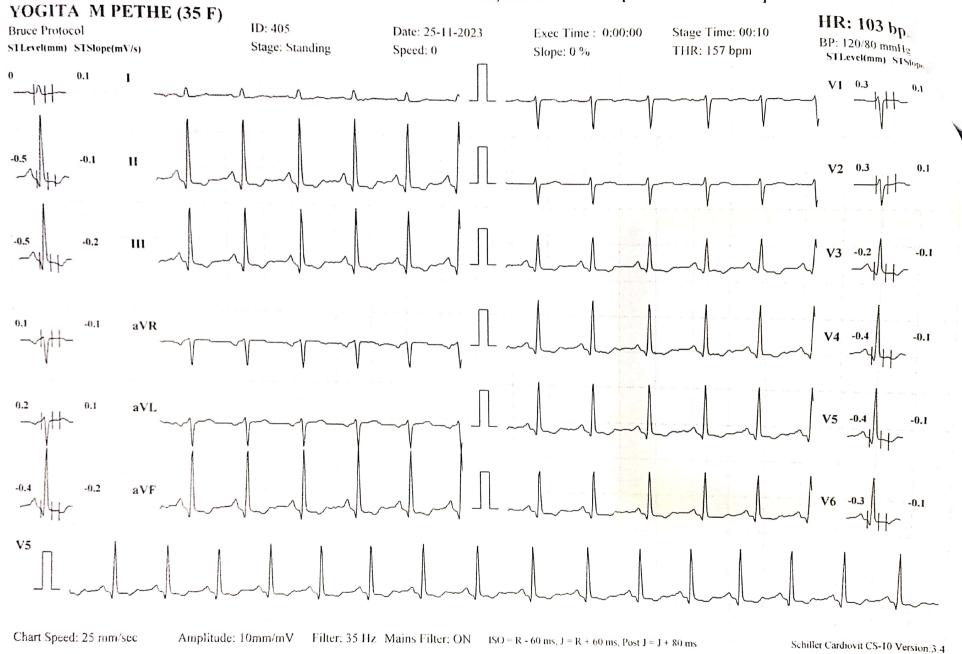
Scanned with OKEN Scanner

ame: YO	GITA M	I PETH	E				Date: 25	5-11-2023	Time: 13:21	
ge: 35	Gender:	F	Height:	166 cms	Weight:	61 Kg	ID: 4	05		
linical History	NO MA	JOR ILL	NESS			C				
edications:	NO MEI									
		20								
est Detail	s:									
rotocol: Bru	ce		Predict	ed Max HR:	185	Т	arget HR	: 157 (859	% of Pr. MHR	
xercise Time: 0:07:00		Achieve	Achieved Max HR: 185		185 (100% of Pr. MHR)					
lax BP:				Max BP x HR: 25900 Max Mets: 7.8						
est Terminatio		°			20,000			,		
Protocol D	etails:									
itage Name	Stage Time	METS	Speed	Grade	Heart Rate	BP mmHg	RPP	Max ST Le	vel Max ST Slop mV/s	
upine	00:08	1	kmph 0	% 0	bpm 107	120/80	12840	-0.5 II	0.2 V2	
itanding	00:10	1	0	0	103	120/80	12360	-0.5 II	-0.2 111	
IvperVentilation	00:09	1	0	0	106	120/80	12720	-0.4 III	-0.2 aVF	
PreTest	00:13	1	1.6	0	119	120/80	14280	-0.8 11	-0.3 III	
Stage: 1	03:00	4.7	2.7	10	160	120/80	19200	-1.1 II	0.3 V2	
tage: 2	03:00	7	4	12	174	130/70	22620	-1.6 III	0.6 V4	
Peak Exercise	01:00	7.8	5.5	14	185	140/70	25900	-1.8 II	0.4 V2	
Recoveryl	01:00	1	0	0	168	140/70	23520	0.8 V2	0.7 11	
Recovery2	01:00	1	0	0	143	130/70	18590	0.6 V2	0.9 11	
Recovery3	01:00	1	0	0	130	120/60	15600	0.5 V2	0.6 V2	
Recovery4	00:02	1	0	0	130	120/60	15600	0.4 V2	0.4 11	
Interpreta The Patient Exe Resting Heart F Resting Blood GOOD EFFOR NORMAL INC NORMAL CHI THR ACHEIV BASLINE EC NO SIGNIFIC TMT IS NEGA	ercised accor (ate, initially Pressure of 1 (T TOLERA) (T TOLE	109 bpm 20/80 mm NCE ESPONSE PIC RESPO UATE ME T WAVE	NSE TNSE TS ACHEIV INVERSIO	a maximum 1 ZED NS IN INFI	ERO- LATE	ure of 140 RAL LEA	,DS OVERY		Heart Rate).	
								A		
Ref. Doctor:	and the second second	CEL				DF	poc	101	5. PALKAR MTPNDDE MUTPNDDE MUTPNDE MUTPDE MUTPDE MUTP	
Ref. Doctor: SCHILI The Art of Diag	ER	EEL				DF C	poc	tor: DRIFH Isabiniar Be Radio2458-	5 6 6 1 by Dog	

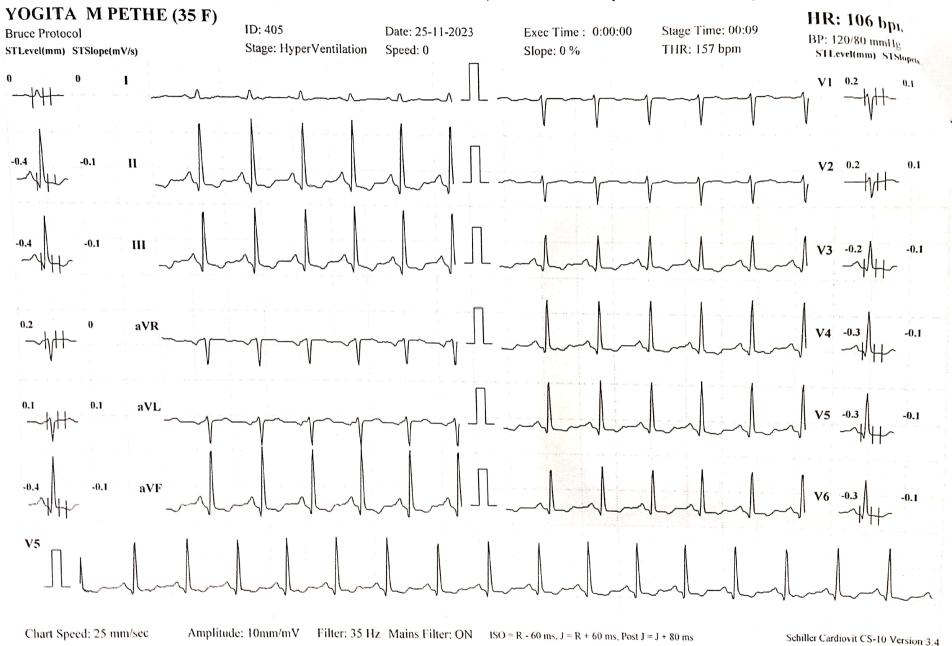




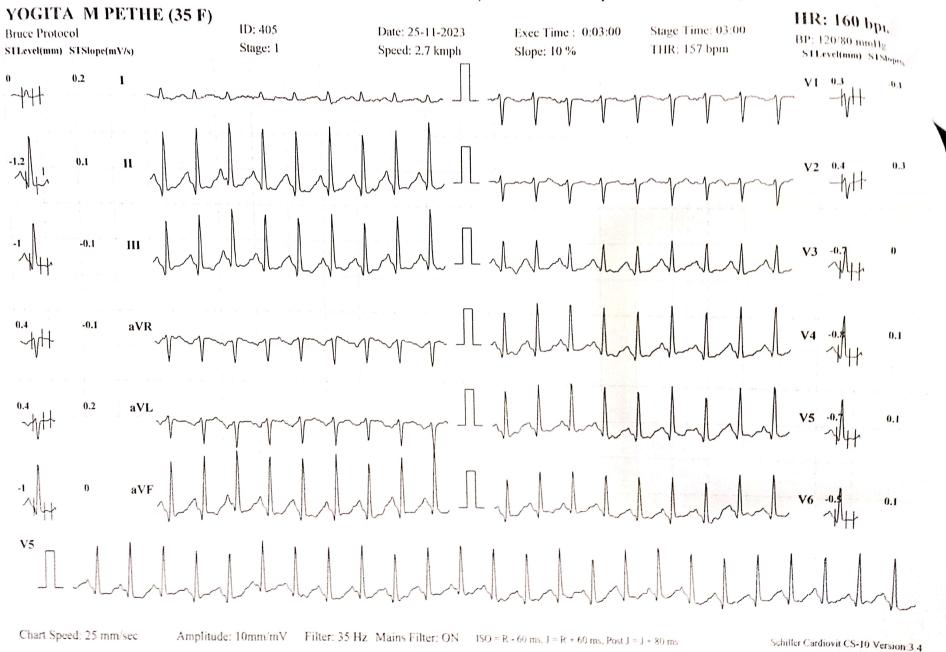
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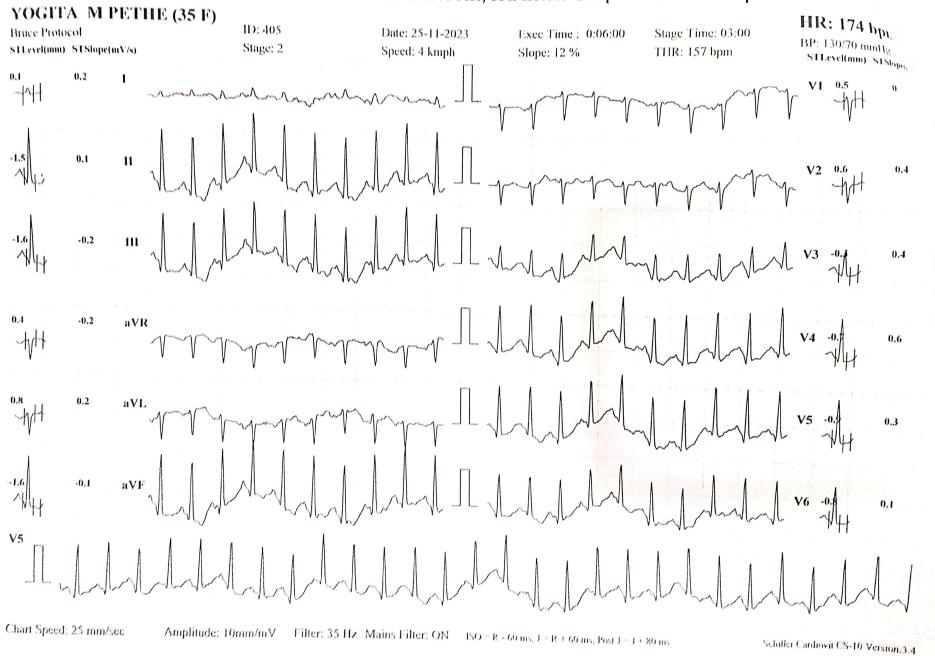
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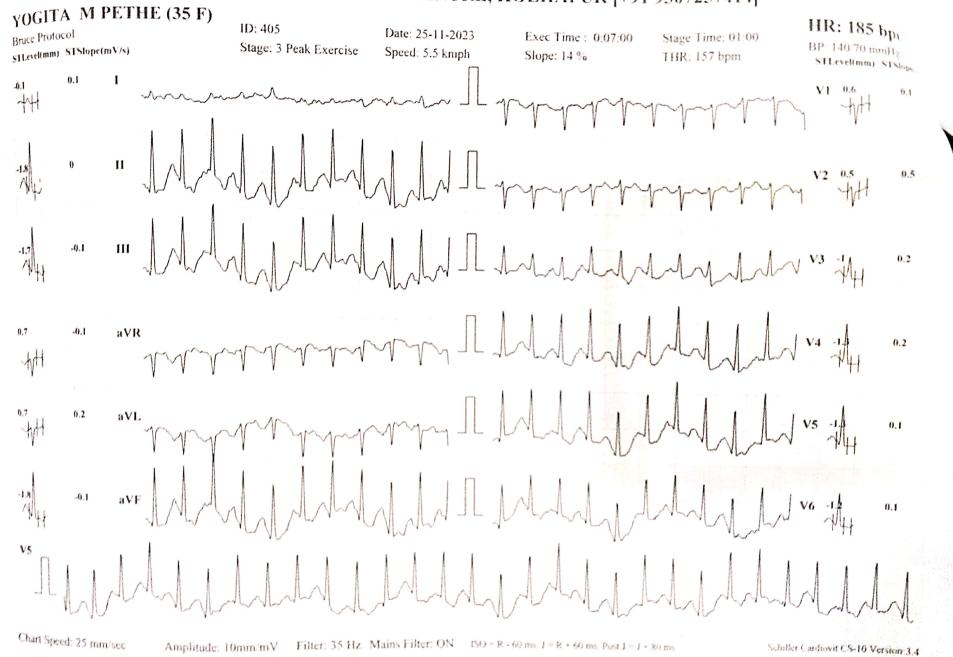




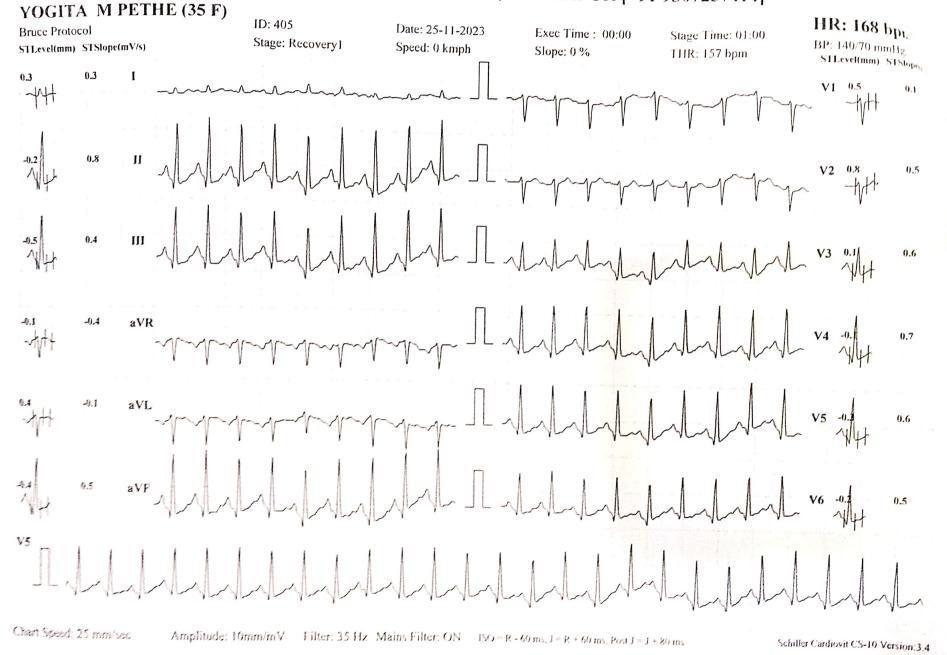




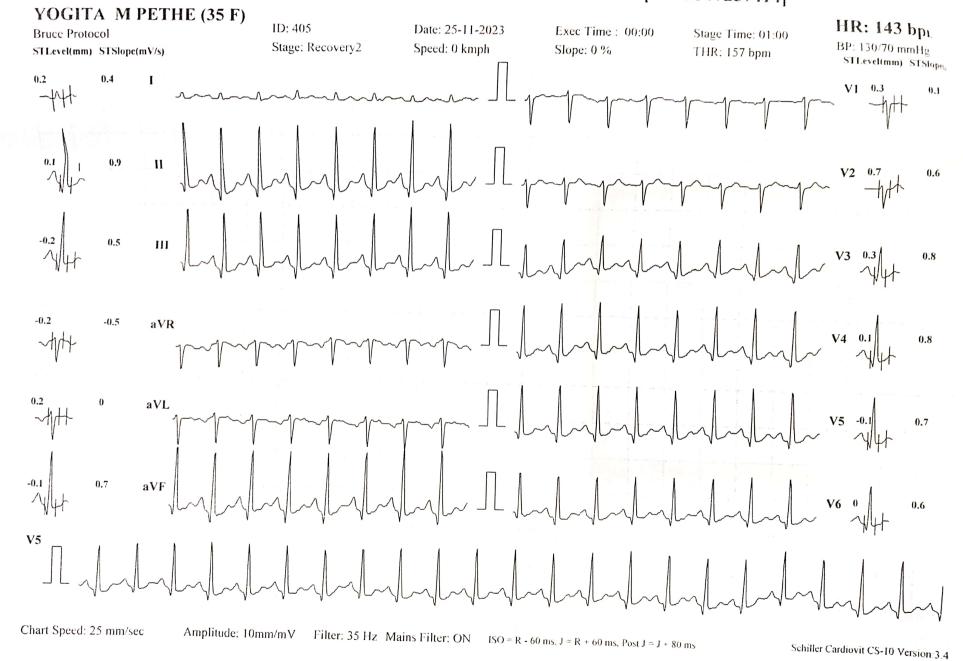




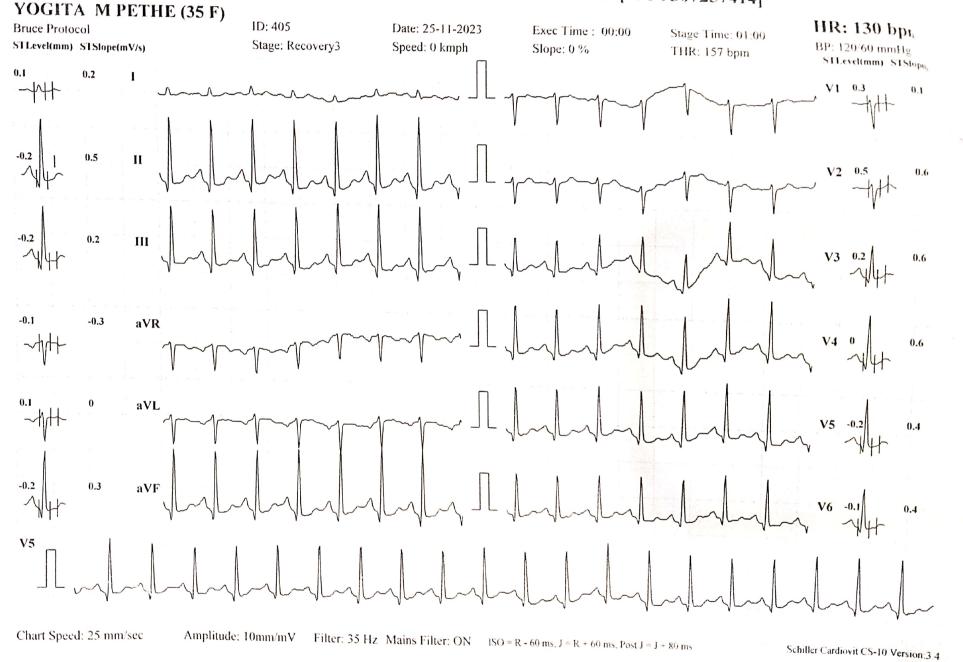
















Patient Name

: MRS. YOGITA PETHE

Referred By

: Dr. VANDANA POWAR

Date : 25 Nov 2023 Age: 36 YEARS Sex: F

LMP: 16 Nov 2023 CLINICALLY : For health check up.

PELVIC SONOGRAPHY

UTERUS - has smooth outlines and normal echo-appearance The endometrial echo is 6 mm thin. Uterus ante- verted, bulky measures are 89 x 44 x 53mm.

The ovaries are normal. Right ovary size is 29 x 23mm. Left ovary size is 23 x 30mm.

There is no abnormal adnexal mass.

There is no free fluid in cul de sac.

IMPRESSION : < BULKY UTERUS.

etas

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

डॉ. नेहा घोरपडे एम. बी. बी. एस., डी.एम.आर.ई (रेडीओलॉजिस्ट) रजि.नं.79916

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





Patient Name **:** MRS. YOGITA PETHE

: Dr. VANDANA POWAR

Date: 25 Nov 2023 Age: 36 YEARS Sex: F

अस्मिता क्लिनिक

आणि सोनोग्राफी सेंटर

Clinically -FOR HEALTH CHECK UP.

Referred By

Abdomen Sonography

LIVER : is normal in size, shape, position and shows normal echogenicity. The contours are smooth. The parenchyma shows homogeneous echo texture .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 echoreflective 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 echoreflective obstructing calculus seen on either sides nor hydronephrosis. Both visualized ureters appear to be normal.Parenchymal thickness and cortical thickness is normal. Cortico -medullary differenciation is well maintained.

Right kidney measures- 100 x 39 mm.Left kidney measures -110 x 40mm.

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

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 : < NO SIGNIFICANT ABNORMALITY SEEN.

ADVICE - Clinical correlation and follow up if clinically needed. THANKS FOR REFERRAL.FEEDBACK IS WELCOME.



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

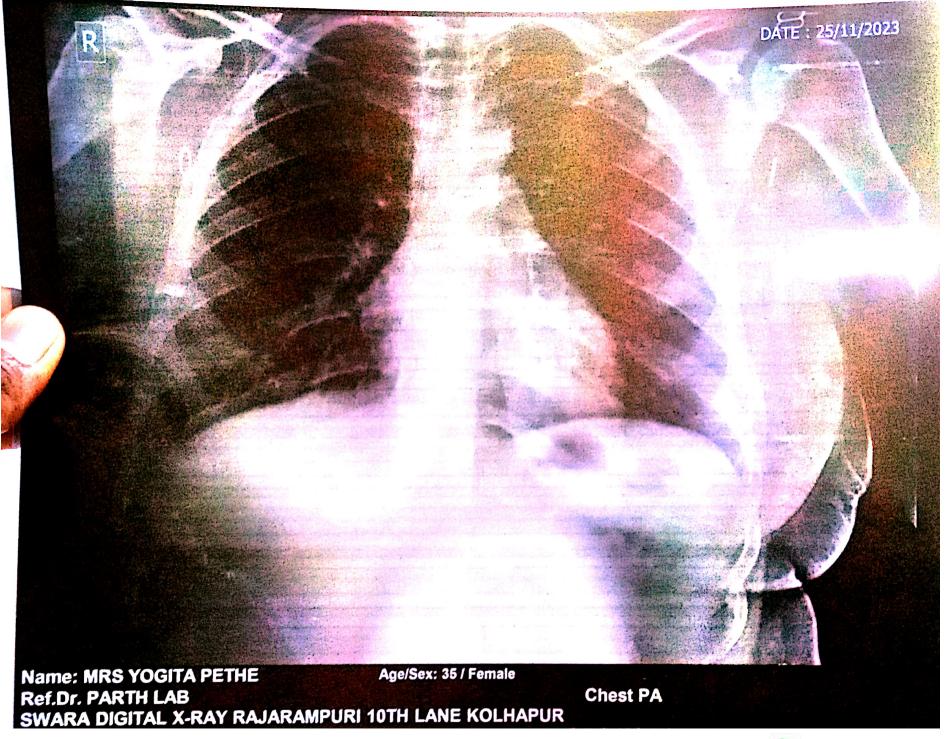
डॉ. नेहा घोरपडे एम. बी. बी. एस., डी.एम.आर.ई (रेडीओलॉजिस्ट) रजि.नं.79916

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













SWARA DIGITAL

x- RAY

All Types Of Digital, Portable X-rays And Procedural X-rays

PATEINT NAME	:	MRS YOGEETA PETHE	AGE/SE	X :	35Y/FEMALE
REF BY	:	PARTH LAB	DATE	:	25/11/2023

CHEST X-RAY PA

Both lungs fields are normal

Both costophrenic angles appear normal

The tracheal lucency is centraly placed

The mediastinal & diaphragmatic outlines appear normal.

The heart shadow is normal

NORMAL CHEST X-RAY

ADV: Clinical correlated

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

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