

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. SINGH NAMRATA
EC NO.	102667
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	PIMPRI CHINCHWAD, PIMPRI CHINCH
BIRTHDATE	18-06-1990
PROPOSED DATE OF HEALTH CHECKUP	11-06-2022
BOOKING REFERENCE NO.	22J102667100020088E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **09-06-2022** till **31-03-2023**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

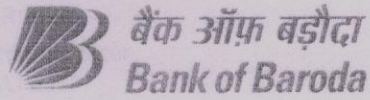
**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

RECEIPT

Issue Date: 20/07/2020  
Patient Name: Mrs. Namrata Singh  
Patient Type: Cash  
Consultation Doctor: Dr. Namrata Singh  
Referral (Ref): Dr. Namrata Singh

Department: HRM  
E.C.No.: 102667



नाम : **Namrata Singh**  
कर्मचारी कूट क्र. : **102667**  
E.C.No. : **102667**



जारीकर्ता प्राधिकारी *N. Singh*  
Issuing Authority  
Chief Manager (HRM)  
Pune Zone

*N. Singh*  
धारक के हस्ताक्षर  
Signature of Holder

- 0001 CREDIT CARD
- 0002 CREDIT CARD
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- 0100 CREDIT CARD

Net Amount: ₹ 0.00

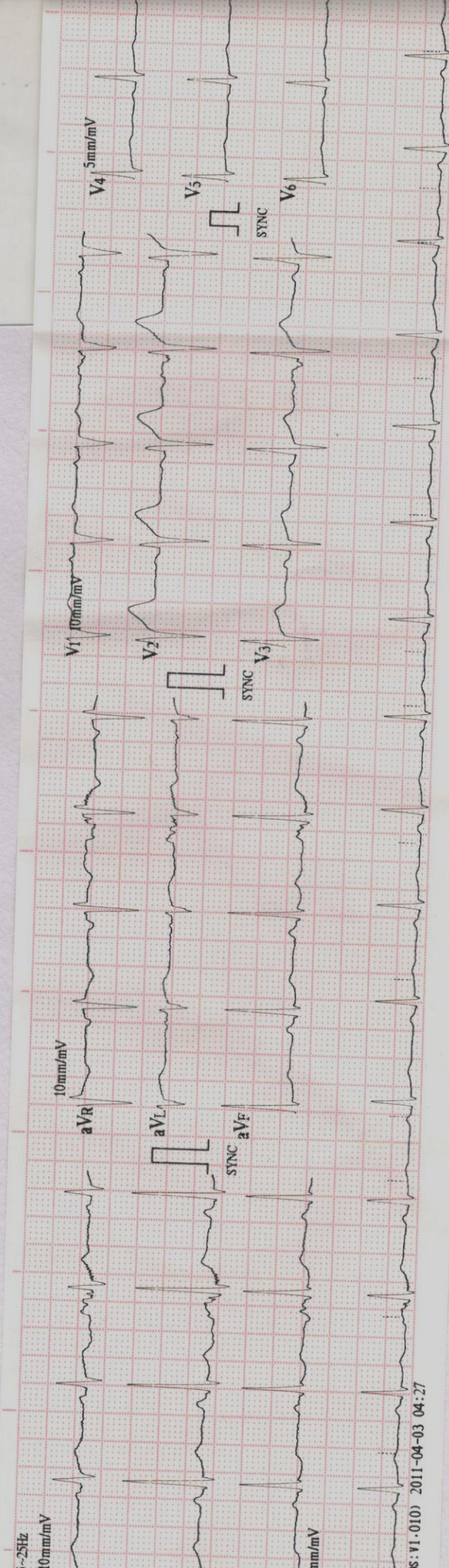
Credit Amount: ₹ 1500.00  
Amount in Words: One Thousand Five Hundred Only

Signature: CHASHIRANI CHOUGALE

*Namrata Singh*

102667/20/07/2020





10mm/mV  
-25Hz

10mm/mV

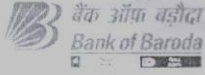
10mm/mV

5mm/mV

mm/mV

S: V1.010 2011-04-03 04:27





To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	CHARU CHANDAN
DATE OF BIRTH	08-12-1987
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	11-06-2022
BOOKING REFERENCE NO.	22J102667100020090S
<b>SPOUSE DETAILS</b>	
EMPLOYEE NAME	MRS. SINGH NAMRATA
EMPLOYEE EC NO.	102667
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	PIMPRI CHINCHWAD,PIMPRI CHINCH
EMPLOYEE BIRTHDATE	18-06-1990

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **09-06-2022** till **31-03-2023**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



**2D ECHO / COLOUR DOPPLER**

**NAME : MR. CHARU CHANDAN**  
**RF BY : DR. HOSPITAL PATIENT**

**35yrs/M**

**OPD**  
**23-Jul-22**

**M - Mode values**

**Doppler Values**

AORTIC ROOT (mm)	23	PULMONARY VEL (m/sec)	
LEFT ATRIUM (mm)	29	PG (mmHg)	
RV (mm)		AORTIC VEL (m/sec)	1.2
LVID - D (mm)	39	PG (mmHg)	6
LVID - S (mm)	21	MITRAL E VEL (m/sec)	0.5
IVS - D (mm)	10	A VEL (m/sec)	0.7
LVPW -D (mm)	10	TRICUSPID VEL. (m/sec)	
EJECTION FRACTION (%)	60%	PG (mmHg)	

**REPORT**

Normal LV size & wall thickness.  
No regional wall motion abnormality  
Normal LV systolic function, LVEF 60%  
Normal sized cardiac chambers.

Pliable mitral valve., no Mitral regurgitation.  
Altered mitral diastolic flows.


Trileaflet aortic valve. No aortic stenosis / regurgitation.

Normal Tricuspid & pulmonary valve  
Trivial tricuspid regurgitation,  
PA pressure = 20 mmHg - normal

Intact IAS & IVS  
No PDA, coarctation of aorta.  
No clots, vegetations, pericardial effusion noted.

**IMPRESSION :**

**No regional wall motion abnormality.**  
**Normal LV systolic function, LVEF 60%**  
**Grade I diastolic dysfunction.**  
**Normal PA pressure.**

  
**DR. RAJDATT DEORE.**  
**MD, DM-CARDIOLOGIST**  
**MMC 2005/03/1520**

*(NORMAL 2D-ECHO & COLOR DOPPLER DOESN'T RULE OUT ISCHAEMIC HEART DISEASE)*



**CHARU, CHANDAN**  
 Patient ID 88708  
 23.07.2022  
 14:36:29

Tabular Summary

BRUCE: Total Exercise Time 07:09  
 Max HR: 190 bpm 102% of max predicted 186 bpm HR at rest: 98  
 Max BP: 150/95 mmHg BP at rest: 110/75 Max RPP: 25060 mmHg\*bpm  
 Maximum Workload: 10.10 METS

Test Reason: Screening for CAD  
 Medical History: NO HISTORY.

Ref. MD: Ordering MD:

Technician: RUPALI Test Type: Treadmill Stress Test  
 Comment:

Max. ST: -0.23 mV, 0.00 mV/s in V6; EXERCISE STAGE 3 07:10  
 Arrhythmia: A:66, VBI:1, PVC:23, PSVC:2  
 ST/HR index: 2.87  $\mu$ V/bpm

Reasons for Termination: Target heart rate achieved

Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: Depression upsloping. Overall impression: Normal stress test.

Conclusion: GOOD EFFORT TOLERANCE  
 ACHIEVED 102 % THR ON RX.

NORMAL BP RESPONSE

SIGNIFICANT ST-T CHANGES NOTED FOR THE GIVEN WORKLOAD  
 UPSLOPING ST-T CHANGES.

STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

DR. RAJDATT DEORE  
 MD, DM-CARDIOLOGIST  
 MMC 2005/03/1520

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (V6 mV)	Comment
PRETEST	SUPINE	00:53	0.00	0.00	1.0	99	110/75	10890	0	0.07	
	STANDING	00:15	0.00	0.00	1.0	98			0	0.08	
	HYPERV.	01:01	0.50	0.00	1.3	110	110/75	12100	1	0.08	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	139	110/75	15290	5	-0.04	
	STAGE 2	03:00	2.50	12.00	7.0	166	125/80	20750	4	-0.05	
	STAGE 3	01:10	3.40	14.00	10.1	190	140/88	26600	1	-0.23	
RECOVERY		03:02	0.00	0.00	1.0	121	150/95	18150	0	-0.01	



Linked Medians

BRUCE  
0.0 mph  
0.0 %

RECOVERY

122 bpm  
150/95 mmHg

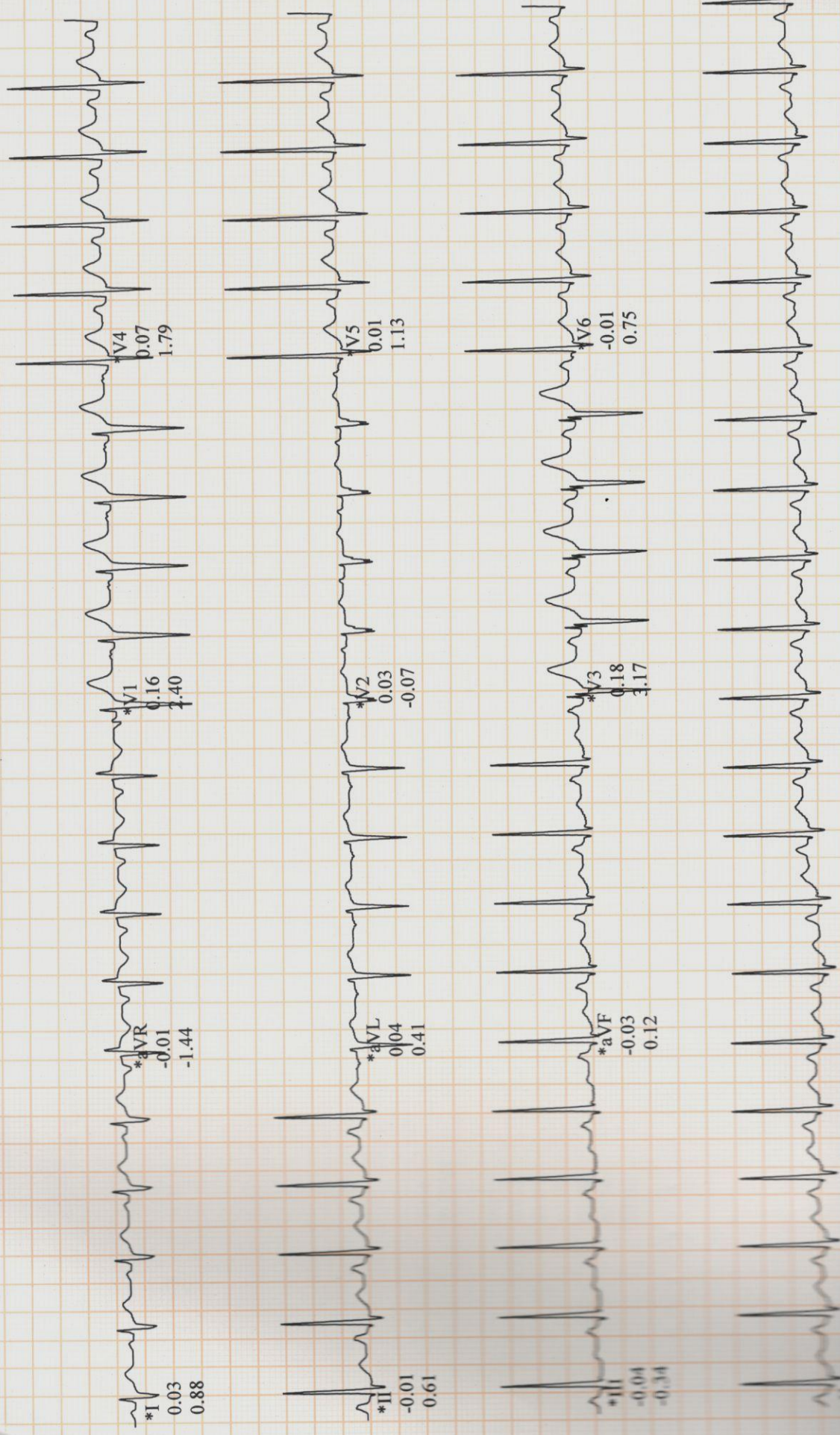
#1  
02:50

ANDAN  
08

Lead

ST Level (mV)

ST Slope (mV/s)



Raw Data

\*Computer Synthesized Rhythms



**Dept. of Radiology**  
(For Report Purpose Only)



REQ. DATE : 23-JUL-2022  
NAME : MR. CHARU CHANDAN  
PATIENT CODE : 109481  
REFERRAL BY : HOSPITAL PATIENT

REP. DATE : 23-JUL-2022  
AGE/SEX : 35 YR(S) / MALE

**CHEST X-RAY PA VIEW**

**OBSERVATION :**

Both lungs appear clear.

Heart and mediastinum are normal.

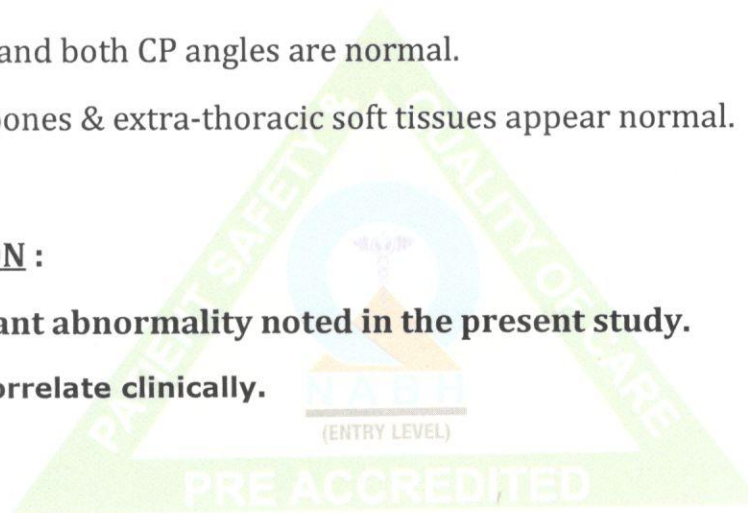
Diaphragm and both CP angles are normal.

Visualised bones & extra-thoracic soft tissues appear normal.

**IMPRESSION :**

**No significant abnormality noted in the present study.**

**-Kindly correlate clinically.**



**DR. SAURABH PATIL  
(MBBS, MD RADIOLOGY)  
CONSULTANT RADIOLOGIST**





## Dept. of Radiology

(For Report Purpose Only)



REQ. DATE : 23-JUL-2022  
NAME : MR. CHARU CHANDAN  
PATIENT CODE : 109481  
REFERRAL BY : Dr. HOSPITAL PATIENT

REP. DATE : 23-JUL-2022

AGE/SEX : 35 YR(S) / MALE

### USG ABDOMEN AND PELVIS

#### OBSERVATION :

**Liver** : Is normal in size, shape & echotexture. No focal lesion / IHBR dilatation.

**CBD & PV** : Normal in caliber.

**G.B.** : Moderately distended, Normal.

**Spleen** : Is normal in size , shape & echotexture. No focal lesion.

**Pancreas** : Normal in size, shape & echotexture.

**Both kidneys** are normal in size, shape & echotexture, CMD maintained. No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 10 x 4.2 cm.

Left kidney measures : 9.8 x 4.5 cm.

**Urinary bladder** : Moderately distended, normal.

**Prostate** : is normal in size, shape and echotexture. No focal lesion seen.

No demonstrable small bowel / RIF pathology.

No ascites / lymphadenopathy.

#### IMPRESSION :

**No significant abnormality noted in the present study.**

- Kindly correlate clinically.

DR. SAURABH PATIL  
(MBBS, MD RADIOLOGY)  
CONSULTANT RADIOLOGIST



# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

Lab No : 4737  
Req.No : 4737

Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 06:14 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## HAEMATOLOGY

### HAEMOGRAM


HAEMOGLOBIN (Hb)	: 14.3	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 44.5	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.68	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 95.1	cu micron	76 - 96
M.C.H.	: 30.6	pg	27 - 32
M.C.H.C	: 32.1	picograms	32 - 36
RDW-CV	: 13.1	%	11 - 16
WBC TOTAL COUNT	: 5420	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000
PLATELET COUNT	: 93000	cumm	150000 - 450000

### WBC DIFFERENTIAL COUNT

NEUTROPHILS	: 53	%	ADULT : 40 - 70 CHILD : 20 - 40
ABSOLUTE NEUTROPHILS	: 2872.60	$\mu$ L	2000 - 7000
LYMPHOCYTES	: 35	%	ADULT : 20 - 40 CHILD : 40 - 70
ABSOLUTE LYMPHOCYTES	: 1897	$\mu$ L	1000 - 3000
EOSINOPHILS	: 03	%	01 - 04
ABSOLUTE EOSINOPHILS	: 162.60	$\mu$ L	20 - 500
MONOCYTES	: 09	%	02 - 08
ABSOLUTE MONOCYTES	: 487.80	$\mu$ L	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	$\mu$ L	0 - 100

SV  
Technician

Report Type By :- PEERZADE SHOYEB

  
Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist





# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

Lab No : 4737  
Req.No : 4737

Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 03:32 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
RBC MORPHOLOGY	: Normocytic Normochromic		
WBC MORPHOLOGY	: Within Normal Limits		
PLATELETS	: Reduced on Smear, large platelets seen		
PARASITES	: Not Detected		

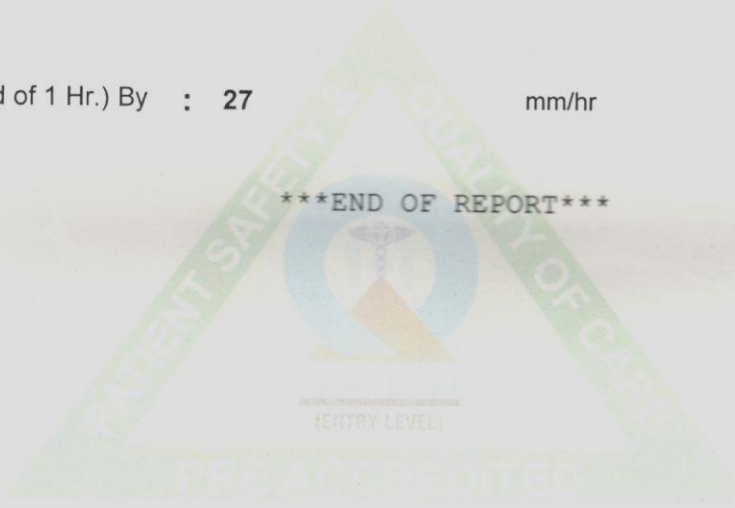
Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

### ESR

ESR MM ( AT The End of 1 Hr.) By : 27 mm/hr  
Westergren Method

Male : 0 - 15  
Female : 0 - 20

\*\*\*END OF REPORT\*\*\*



Technician

Report Type By :- SAMBHAJI SURYAWANSHI

Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist



# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

Lab No : 4737  
Req.No : 4737

Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 03:32 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## HAEMATOLOGY

### BLOOD GROUP


BLOOD GROUP : "B"  
RH FACTOR : POSITIVE

NOTE : This is for your information.No transfusion / therapeutic intervention is done without confirmation of blood group by concerned authorities.In case of infants less than 6 months,suggested to repeat Blood Group after 6 months of age for confirmation. Kindly confirm the Negative Blood Group by reverse blood grouping (Tube method).

\*\*\*END OF REPORT\*\*\*

SV  
Technician

Report Type By :- SAMBHAJI SURYAWANSHI

  
Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist





# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

Lab No : 4737  
Req.No : 4737

Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 04:57 PM  
Print Date & Time : 23/07/2022 04:58 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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### BIOCHEMISTRY

#### BSL-F & PP

Blood Sugar Level Fasting	: 87	MG/DL	60 - 110
Blood Sugar Level PP	: 103	MG/DL	70 - 140

\*\*\*END OF REPORT\*\*\*



SV  
Technician

Report Type By :- PEERZADE SHOYEB

Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist



# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
 Patient Name : Mr. CHARU CHANDAN  
 Age/Sex : 35Yr(s)/Male

Lab No : 4737  
 Req.No : 4737

Company Name : BANK OF BARODA  
 Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
 Reporting Date & Time : 23/07/2022 03:21 PM  
 Print Date & Time : 23/07/2022 03:35 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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### BIOCHEMISTRY

#### HbA1C- GLYCOSYLATED -HB

HBA1C	: 5.22	%	Good Control :: 5.5 - 6.7 Fair Control :: 6.8 - 7.6 Poor Control :: >7.6
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#### **Instrument: COBAS C 111**

The HbA1C determination is based on turbidimetric inhibition immunoassay (TNIA) for hemolysed whole blood on Cobas c111 system.

#### NOTE :

1. The HbA1C test shows your average blood sugar for last 3 months.
2. The HbA1C test does not replace your day-to-day monitoring of blood glucose.  
Use this test result along with your daily test results to measure your overall diabetes control.

#### How does HbA1C works ?

The HbA1C test measures the amount of **sugar that attaches to protein** in your red blood cells. RBCs live for about 3 months, so this test shows your average blood sugar levels during that time. Greater the level of sugar & longer it is high, the more sugar that will attach to RBCs.

#### Why is this test so important ?

Research studies demonstrated that **the closer to normal your HbA1C level was, the less likely your risk of developing the long- term complications of diabetes.** Such problems include eye disease and kidney problems.

#### Who should have the HbA1c test done ?

Everyone with diabetes can benefit from taking this test. Knowing your HbA1C level helps you and your doctor decide if you need to change your diabetes management plan.

#### How often should you have a HbA1C test ?

You should have this test done when you are first diagnosed with diabetes. Then at least twice a year if your treatment goals are being met & blood glucose control is stable. More frequent HbA1C testing (4 times / year) is recommended if your blood glucose management goals.

\*\*\*END OF REPORT\*\*\*

sv  
 Technician

Report Type By :- SAMHAJI SURYAWANSHI

Dr. POONAM KADAM  
 MD (Microbiology), Dip.Pathology &  
 Bacteriology (MMC-2012/03/0668)  
 Pathologist





# Dept. of Pathology

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PRN : 109481  
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Age/Sex : 35Yr(s)/Male

Lab No : 4737  
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Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 03:33 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## BIOCHEMISTRY

### RFT (RENAL FUNCTION TEST)

#### BIOCHEMICAL EXAMINATION

UREA (serum)	: 17	MG/DL	0 - 45
UREA NITROGEN (serum)	: 7.94	MG/DL	7 - 21
CREATININE (serum)	: 0.9	MG/DL	0.5 - 1.5
URIC ACID (serum)	: 4.9	MG/DL	Male : 3.4 - 7.0 Female : 2.4 - 5.7

#### SERUM ELECTROLYTES


SERUM SODIUM	: 141	mEq/L	136 - 149
SERUM POTASSIUM	: 4.3	mEq/L	3.8 - 5.2
SERUM CHLORIDE	: 102	mEq/L	98 - 107

\*\*\*END OF REPORT\*\*\*

SV

Technician

Report Type By :- SAMBHAJI SURYAWANSHI

  
Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist



# Dept. of Pathology

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PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

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Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 03:33 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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### BIOCHEMISTRY

#### LIPID PROFILE

CHOLESTEROL (serum)	: 190	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 115	MG/DL	0 - 150
HDL (serum)	: 35	MG/DL	Male : 42 - 79.5 Female : 42 - 79.5
LDL (serum)	: 143	MG/DL	0 - 130
VLDL (serum)	: 23	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 5.43		Male : 1.0 - 5.0 Female : 1.0 - 4.5
LDL/HDL RATIO	: 4.09		Male : <= 3.6 Female : <=3.2

#### NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.  
Cholesterol & Triglycerides reprocessed , & confirmed.

\*\*\*END OF REPORT\*\*\*

Technician

Report Type By :- SAMBHAJI SURYAWANSHI

Dr. POONAM KADAM  
MD (Microbiology), Dip.Pathology &  
Bacteriology (MMC-2012/03/0668)  
Pathologist





# Dept. of Pathology

(For Report Purpose Only)



PRN : 109481  
Patient Name : Mr. CHARU CHANDAN  
Age/Sex : 35Yr(s)/Male

Lab No : 4737  
Req.No : 4737

Company Name : BANK OF BARODA  
Referred By : Dr.HOSPITAL PATIENT

Collection Date & Time : 23/07/2022 01:02 PM  
Reporting Date & Time : 23/07/2022 03:21 PM  
Print Date & Time : 23/07/2022 03:34 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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## BIOCHEMISTRY

### CALCIUM

CALCIUM (serum) : 10.0 MG/DL 8.4 - 10.4


### LFT ( Liver function Test )

BILIRUBIN TOTAL (serum) : 0.7 MG/DL INFANTS : 1.2 - 12.0  
ADULT : 0.1 - 1.2  
BILIRUBIN DIRECT (serum) : 0.3 MG/DL ADULT & INFANTS : 0.0 - 0.4  
BILIRUBIN INDIRECT (serum) : 0.40 MG/DL 0.0 - 1.0  
S.G.O.T (serum) : 50 IU/L 5 - 40  
S.G.P.T (serum) : 63 IU/L 5 - 40  
ALKALINE PHOSPHATASE (serum) : 162 IU/L CHILD BELOW 6 YRS : 60 - 321  
CHILD : 67 - 382  
ADULT : 36 - 113  
PROTEINS TOTAL (serum) : 8.1 GM/DL 6.4 - 8.3  
ALBUMIN (serum) : 4.4 GM/DL 3.5 - 5.7  
GLOBULIN (serum) : 3.70 GM/DL 1.8 - 3.6  
A/G RATIO : 1.19 1:2 - 2:1

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### ENDOCRINOLOGY

#### TFT (THYROID FUNCTION TEST)

T3-Total (Tri iodothyronine)	: 1.38	ng/mL	0.970 - 1.69
T4 - Total (Thyroxin)	: 10.0	µg/dL	5.53 - 11.0
Thyroid Stimulating Hormones (Ultra TSH)	: 2.60	µIU/mL	0.465 - 4.68

#### NOTE:-

Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate thyroid stimulating hormone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The third type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are taking T3 as part of their thyroid supplement need have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4, Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	6.60 - 12.4	0.30 - 4.50
2 nd Trimester	1.0 - 2.60	6.60 - 15.5	0.50 - 4.60
3 rd Trimester	1.0 - 2.60	6.60 - 15.5	0.80 - 5.20

The guidelines for age related reference ranges for T3,T4,& Ultra TSH

	Total T3	Total T4	Ultra TSH
Cord Blood	0.30 - 0.70	1-3 day 8.2-19.9	Birth- 4 day: 1.0-38.9
New Born	0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years	1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years	0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years	0.80 - 2.10	3-10 Years 5.5-12.8	

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### CLINICAL PATHOLOGY

#### URINE ROUTINE

##### PHYSICAL EXAMINATION

QUANTITY	: 30	ML
COLOUR	: PALE YELLOW	
APPEARANCE	: SLIGHTLY HAZY	
REACTION	: ACIDIC	
SPECIFIC GRAVITY	: 1.010	

##### CHEMICAL EXAMINATION

PROTEIN	: ABSENT
SUGAR	: ABSENT
KETONES	: ABSENT
BILE SALTS	: ABSENT
BILE PIGMENTS	: ABSENT
UROBILINOGEN	: NORMAL

##### MICROSCOPIC EXAMINATION

PUS CELLS	: 0-1	/hpf
RBC CELLS	: ABSENT	/ hpf
EPITHELIAL CELLS	: 0-1	/hpf
CASTS	: ABSENT	/hpf
CRYSTALS	: ABSENT	
OTHER FINDINGS	: ABSENT	
BACTERIA	: ABSENT	

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