



# Nidaan Hospital

By Park Group of Hospitals

## DEPARTMENT OF PATHOLOGY

Patient Name : Mrs. PRIYANKA

MR No : 9550

Age/Sex : 31 Years / Female

Type : OPD

TPA/Corporate : MEDIWHEEL

IP No. :

Current Bed no. :

Bill Date : 15/01/2022 10.55.56 AM

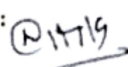
Reporting Date : 15/01/2022 11.50.20 AM

Sample ID : 37414

Bill/Req. No. : 22071558

Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
<b>BLOOD GLUCOSE FASTING AND PP</b>			
PLASMA GLUCOSE(FASTING)	89	70 - 110	mg/dl
<b>BLOOD GROUP</b>			
BLOOD GROUP	* O * RH POSITIVE		
<b>COMPLETE HAEMOGRAM (CBC ESR)</b>			
HAEMOGLOBIN	13.9	12.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT	6600	4000 - 11000	/cumm
RED BLOOD CELL COUNT	4.27	4.0 - 6.0	millions/cumm
PCV (HAEMATOCRIT)	37.5	35.0 - 47.0	%
MEAN CORPUSCULAR VOLUME	87.9	78 - 98	fL
MEAN CORPUSCULAR HAEMOGLOBIN	<b>32.6</b>	<i>H</i> 26.5 - 32.5	Picogrames
MEAN CORPUSCULAR HB CONC	<b>37.1</b>	<i>H</i> 32 - 37	g/dL
RDW-CV	12.6	11.5 - 14.5	%
PLATELET COUNT	2.05	1.50 - 4.50	Lakh/cumm
<b>DIFFERENTIAL COUNT</b>			
NEUTROPHILS	<b>80</b>	<i>H</i> 40 - 73.0	%
LYMPHOCYTES	<b>08</b>	<i>L</i> 20 - 40	%
MONOCYTES	10	2.0 - 10.0	%
EOSINOPHILS	02	0.0 - 6.0	%
BASOPHILS	00	0.0 - 1.0	%
<b>HBA1C</b>			
HBA1C	4.7		%

Checked By : 

Dr. Nisha Rana  
(Consultant Pathologist)

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Bill Date : 15/01/2022 10.55.56 AM  
 Reporting Date : 15/01/2022 2.14.49 PM  
 Sample ID : 37414  
 Bill/Req. No. : 22071558  
 Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
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Note : HBA1c result is suggestive of Diabetes/ higher than glycemic goal in a known Diabetic patient.  
 Please note, glycemic goal should be individualized based on duration of diabetes, age/life expectancy, comorbid conditions, known CVD or advanced microvascular complications, hypoglycaemia unawareness, and individual patient considerations.  
 Please Correlate Clinically.

### KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

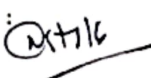
SERUM UREA	24		
SERUM CREATININE	0.8	10.0 - 50.0	mg/dL
SERUM URIC ACID	2.3	0.5 - 1.3	mg/dL
SERUM SODIUM	134	2.5 - 6.0	mg/dL
SERUM POTASSIUM	4.5	130 - 149	mmol/L
		3.5 - 5.5	mmol/L

### LFT(LIVER FUNCTION TEST)

TOTAL BILIRUBIN	0.5		
DIRECT BILIRUBIN	0.2	0 - 1.0	mg/dL
INDIRECT BILIRUBIN	0.3	0.00 - 0.30	mg/dL
SGOT (AST)	27	Adult: 0 - 0.8	mg/dL
SGPT (ALT)	16	0.0 - 50.0	IU/L
ALKALINE PHOSPHATASE	14	00 - 50.00	IU/L
TOTAL PROTEINS	7.8	Adult: 50 - 136	U/L
ALBUMIN	3.7	6.6 - 8.2	g/dL
GLOBULIN	4.1	3.20 - 5.00	g/dL
A/G RATIO	0.9	2.0 - 3.50	g/dL

### LIPID PROFILE

SERUM CHOLESTROL	165	0 - 200	mg/dl
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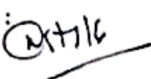
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Checked By : 

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Bill Date : 15/01/2022 10.55.56 AM  
 Reporting Date : 15/01/2022 11.50.30 AM  
 Sample ID : 37414  
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 Ref Doctor : Dr. EMO

Test	Result	Bio. Ref. Interval	Units
SERUM TRIGLYCERIDES	129	Up to 150	mg/dl
HDL CHOLESTEROL	52	30 - 60	mg/dl
VLDL CHOLESTEROL	25.8	*Less than 30	mg/dL
LDL CHOLESTEROL	87.2	Optimal <100, Above Opt. 100-129 -high 160-189	mg/dl
LDL CHOLESTEROL/HDL RATIO	1.68	Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0	

## URINE ROUTINE EXAMINATION

### PHYSICAL EXAMINATION

VOLUME : 20 ml  
 COLOUR : Pale Yellow  
 APPEARANCE : Clear

### CHEMICAL EXAMINATION

REACTION : Acidic  
 BLOOD : NIL  
 ALBUMIN : NIL  
 GLUCOSE : NIL

### MICROSCOPIC EXAMINATION

PUS CELL : 1-2 /HPF  
 RED BLOOD CELLS : Nil /HPF  
 EPITHELIAL CELLS : 1-2 /HPF  
 CASTS : NIL  
 CRYSTALS : NIL

**Note :** Albumin test positive by Multistrip Method is confirmed by Sulphosalicylic acid method.

Checked By D.H.S.

Dr. Nisha Rana  
 (Consultant Pathologist)



Patient Name:	Mrs. PRIYANKA	Lab No:	012201150052
Age/Sex:	31 Y/Female	Reg Date:	15/Jan/2022 06:04PM
BarcodeNo:	10075270	Sample Coll. Date:	15/Jan/2022 06:33PM
Referred By:	Self	Sample Rec. Date:	15/Jan/2022 06:33PM
Client Code/Name:	LCHR50 Park Nidaan Hospital	Report Date:	15/Jan/2022 08:00PM

**IMMUNOLOGY**

Test Name With Methodology	Value	Unit	Bio Ref.Interval
<b>Thyroid Profile-I (T3, T4, TSH)</b>			
T3 ,Serum Method:CLIA	158.00	ng/dL	60-181
T4 ,Serum Method:CLIA	9.50	ug/dL	4.5-12.6
TSH, Serum Method CLIA	0.90	uIU/mL	0.13-6.33

**Comments:**

The usual blood test done for thyroid function are TSH, T4 and rarely T3. A blood sample is taken from vein. Usually the free or active portion of T3 and T4 is measured. In pregnancy the serum TSH reference range is different from the general population and should ideally be based on reference ranges derived from healthy pregnant women in the same population.

**Reference Range**

Age	Total T3 (ng/dl)	Total T4 ( µg/dl)	TSH (µIU/ml)
1 - 6 days	73 - 288	5.04 - 18.5	0.7 - 15.0
6 days -3 months	80 - 275	5.41 - 17.0	0.72 - 11.0
4 - 12 months	86 - 265	5.67 - 16.0	0.73 - 8.35
1 - 6 years	92 - 248	5.95 - 14.7	0.70 - 5.97
7 - 11 years	93 - 231	5.99 - 13.8	0.60 - 5.84
12 - 20 years	91 - 218	5.91 - 13.2	0.51 - 6.50
>20 years	60 - 181	4.50 - 12.6	0.13 - 6.33

**NOTE :**

TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and min between 6-10 PM. The variation is the order of 50% hence time of the day has influence on the measures serum TSH concentration. Dose and time of drug intake also influence the test results.

**INTERPRETATIONS :**

- 1.If the TSH level is high and the T4 result is low this suggests an underactive thyroid (hypothyroidism) that requires treatment.
- 2.If the TSH level is low and the T4 result is high this suggests an overactive thyroid (hyperthyroidism) that requires treatment.
- 3.If the TSH level is slightly raised but the T4 level is still within the normal reference range this is called subclinical hypothyroidism or mild thyroid failure.
- 4.A low TSH with a low T4 may be a result of a failure of the pituitary gland (secondary hypothyroidism caused by hypopituitarism) or a response to a significant non-thyroid illness.

\*\*\* End Of Report \*\*\*



*Sonali*

DR. SONALI MD, PATH  
CONSULTANT PATHOLOGIST