



एक एहसास श्रुपनेपन का Sparsh Multispecialty Hospital

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



| | | | |
|--------------|---------------------|-------------|---------------------|
| UHID | : 160164 | Visit ID | : O000300421 |
| Patient Name | : MRS. RUMKI DAS | Spec No. | : |
| Age / Sex | : 45Y / FEMALE | | : |
| Consultant | : DR. HOSPITAL CASE | Order Date | : 28/01/2023 9:06AM |
| Ref. By | : DR. HOSPITAL CASE | Samp.Date | : |
| Category | : MEDIWHEEL | Report Date | : 28/01/23 11:16AM |

SONOGRAPHY USG BREAST/SONOMAMMOGRAPHY (BOTH BREAST)

REPORT :

- Both breasts are showing normal fatty tissue and glandular structures.
- No evidence of any obvious mass lesion, solid or cystic lesions or abnormal echotexture is seen.
- Superficial planes also show no significant abnormality.

IMPRESSION

- **No remarkable Abnormality detected in the current scan.**

Please correlate clinically

Dr. DILIP KUMAR SONI
MBBS, DMRD
RADIOLOGIST
CGMC 102/2003

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| Age / Sex | : 45Y / FEMALE | | : |
| Consultant | : DR. HOSPITAL CASE | Order Date | : 28/01/2023 9:06AM |
| Ref. By | : DR. HOSPITAL CASE | Samp.Date | : |
| Category | : MEDIWHEEL | Report Date | : 28/01/23 11:56AM |

SONOGRAPHY USG WHOLE ABDOMEN

- * LIVER :Normal in size, shape & echo texture with smooth margins. IHBRs are not dilated. No focal lesions seen.
- *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 echofree
- *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: Anteverted normal in shape, size and echotexture. Endometrial echo is central and shows normal thickness. Myometrium shows homogenous echotexture.
- **Hypoechoic lesions of 3.00 x 2.78 cm and 2.83 x 2.32 cm are seen at Fundal area of uterus - Uterine fibroid.**
- *BOTH OVARIES: Both the ovaries are normal in shape, size & echotexture.

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

FINAL IMPRESSION :

- **Uterine fibroids.**

- Please correlate clinically , followup USG is recommended.

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X-RAY X-RAY CHEST PA. VIEW

- Cardiothoracic ratio is within normal limits.
- No significant lung lesion seen.
- Bilateral C.P. angles are clear.
- Bony cage and soft tissue normal.

IMPRESSION

- No Remarkable Abnormality Detected .

- Please correlate clinically

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

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| AGE/SEX | : 45Y/FEMALE | SAMP. DATE | : 28/01/2023 10:42:00AM |
| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10417163 |
| | | RESULT DATE | : 28/01/2023 01:50:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

LIPID PROFILE

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------|---------------|--------|-----------------|
| CHOLESTEROL TOTAL | 130 mg / dl | Low | 150 - 220 |
| TRIGLYCERIDES - SERUM | 40 mg / dl | Low | 60 - 165 |
| HDL | 61.85 mg / dl | Normal | 35 - 80 |
| LDL | 60.15 mg/dL | Low | 90 - 160 |
| VLDL | 8.0 | Low | 20 - 50 |
| CHOL : HDL Ratio | 2.10:1 | | 3.5 - 5.5 |
| LDL: HDL Ratio | 0.97:1 | | - |

TECHNICIAN

Anjana Sharma
Dr. ANJANA SHARMA
D.N.B PATHOLOGY

CONSULTANT



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| AGE/SEX | : 45Y/FEMALE | SAMP. DATE | : 28/01/2023 10:42:00AM |
| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10417173 |
| | | RESULT DATE | : 28/01/2023 12:50:00PM |
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DEPARTMENT OF PATHOLOGY

CBC (COMPLETE BLOOD COUNT)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------|-------------------|--------|-----------------|
| HAEMOGLOBIN (Hb) | 11.4 gm% | Low | 12 - 16 |
| TOTAL RBC COUNT | 3.48 Million/cumm | Low | 4.5 - 5.1 |
| HAEMATOCRIT (PCV) | 31.9 % | Low | 35.9 - 44.6 |
| RBC INDICES | | | |
| MCV | 91.5 fl | Normal | 78 - 96 |
| MCH | 32.8 pg | High | 27 - 32 |
| MCHC | 35.8 % | Normal | 33 - 37 |
| RDW | 15.2 % | Normal | 11 - 16 |
| TOTAL WBC COUNT (TLC) | 4800 /cumm | Normal | 4000 - 11000 |
| DIFFERENTIAL COUNT | | | |
| NEUTROPHILS | 68 % | Normal | 0 - 75 |
| LYMPHOCYTES | 22 % | Normal | 22 - 48 |
| EOSINOPHILS | 02 % | Normal | 0 - 6 |
| MONOCYTES | 08 % | Normal | 2 - 10 |
| BASOPHILS | 00 % | Normal | 0 - 2 |
| BANDS | 00 % | Normal | 0 - 5 |
| BLAST | 00 % | Normal | |
| PLATELET COUNT | 216000 /cumm | Normal | 150000 - 450000 |

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| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10417162 |
| | | RESULT DATE | : 28/01/2023 01:51:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|---|--------------|--------|-----------------|
| BUN (BLOOD UREA NITROGEN) | | | |
| BUN (BLOOD UREA NITROGEN) | 6.54 mg / dl | Low | 8 - 23 |
| GGT (GAMMA GLUTAMYL TRANSFERASE) | | | |
| GGT (GAMMA GLUTAMYL TRANSFERASE) | 14 U / L | Normal | 5 - 36 |
| URIC ACID | | | |
| URIC ACID | 4.01 mg/dL | Normal | 2.5 - 6.8 |

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DEPARTMENT OF PATHOLOGY

BLOOD GROUPING AND RH TYPING

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

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DEPARTMENT OF PATHOLOGY

CREATININE

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|------------------|------------|--------|-----------------|
| SERUM CREATININE | 0.64 mg/dL | Normal | 0.3 - 1.5 |

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| | | RESULT DATE | : 28/01/2023 12:33:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

URINE SUGAR FASTING

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------|-------|--------|-----------------|
| URINE FOR SUGAR | Nil | - | - |

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| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10417167 |
| | | RESULT DATE | : 28/01/2023 03:43:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

BLOOD SUGAR - FASTING AND PP

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|---------------------|-----------|--------|-----------------|
| BLOOD SUGAR FASTING | 94 mg/dL | Normal | 80 - 120 |
| BLOOD SUGAR PP | 120 mg/dL | Normal | 120 - 140 |

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| CONSULTANT DOCTOR | : HOSPITAL CASE | SPEC. NO | : 10417172 |
| | | RESULT DATE | : 28/01/2023 02:53:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

URINE SUGAR PP

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------|-------|--------|-----------------|
| URINE FOR SUGAR | Nil | | - |

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DEPARTMENT OF PATHOLOGY

T3,T4 TSH

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------------------|--------------|--------|-----------------|
| T3 (TRIIODOTHYRONINE) | 1.576 ng/ml | Normal | 0.69 - 2.15 |
| T4 (THYROXINE) | 122.3 ng/ml | Normal | 52 - 127 |
| TSH (THYROID STIMULATING HORMONE) | 1.787 uIU/ml | Normal | 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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| | | RESULT DATE | : 28/01/2023 01:51:00PM |
| | | TPA | : MEDIWHEEL |

DEPARTMENT OF PATHOLOGY

HBA1c (GLYCOSYLATED HAEMOGLOBIN)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------------------------------|-------|--------|-----------------|
| HBA1 C (GLYCOSYLATED HEAMOGLOBIN) | 5.5 % | Normal | 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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DEPARTMENT OF PATHOLOGY

URINE ROUTINE AND MICROSCOPY

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|----------------------------|-----------------|--------|-----------------|
| PHYSICAL EXAMINATION | | | |
| QUANTITY | 10 ml | - | - |
| COLOUR | Pale Yellow | - | - |
| APPEARANCE | Clear | - | - |
| REACTION | Acidic | - | - |
| CHEMICAL EXAMINATION | | | |
| ALBUMIN | Nil | - | - |
| SUGAR | Nil | - | - |
| MICROSCOPIC EXAMINATION | | | |
| EPITHELIAL CELLS | 2-4 /hpf | - | 0 - 5 |
| PUS CELLS | 1-2 /hpf | - | 1 - 2 |
| RBC | Occasional /hpf | - | - |
| CAST | Nil /lpf | - | - |
| CRYSTAL | Nil | - | - |
| AMORPHOUS MATERIAL DEPOSIT | Nil | - | - |
| OTHERS | Nil | - | - |

TECHNICIAN

Anjana
Dr. ANJANA SHARMA
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SPARSH MULTISPECIALTY HOSPITAL

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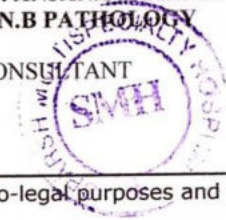
DEPARTMENT OF PATHOLOGY

LFT (LIVER FUNCTION TEST)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|----------------------|--------------|--------|-----------------|
| BILIRUBIN TOTAL | 0.45 mg/dL | Normal | 0.1 - 1.2 |
| BILIRUBIN DIRECT | 0.14 mg / dl | Normal | 0.1 - 0.6 |
| BILIRUBIN INDIRECT | 0.31 mg / dl | Normal | 0.1 - 0.4 |
| ALKALINE PHOSPHATASE | 64 U / L | Normal | 0 - 240 |
| SGOT | 24 U / L | Normal | 0 - 46 |
| SGPT | 26 U / L | Normal | 0 - 40 |
| TOTAL PROTEIN | 6.66 g / dl | Normal | 6 - 8 |
| ALBUMIN | 4.22 g/dl | Normal | 4.1 - 5.3 |
| GLOBULIN | 2.44 g / dl | Normal | 2 - 3.5 |
| A.G.RATIO | 1.73:1 | | 1 - 2.5 |

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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10417175
RESULT DATE : 28/01/2023 03:31:00PM
TPA : MEDIWHEEL

DEPARTMENT OF PATHOLOGY

ESR (ERYTHROCYTE SEDIMENTATION RATE)

| PARAMETER | VALUE | RESULT | REFERENCE RANGE |
|-----------|----------------------|--------|-----------------|
| ESR | 74 mm at end of 1 hr | High | 0 - 20 |

TECHNICIAN

Dr. Anjana Sharma
Dr. ANJANA SHARMA
D.N.B PATHOLOGY
CONSULTANT

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Medico-legal purposes and should be correlated clinically.

