

Patient Name	: Mrs. APRANA MISHRA	Age/Gender	: 47 Y/F
UHID/MR No.	: SKAN.0000124729	OP Visit No	: SKANOPV143599
Sample Collected on	: 31-03-2023 11:31	Reported on	: 31-03-2023 21:30
LRN#	: LAB12862588	Specimen	: Plasma(Flouride)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 2548		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE, FASTING			
FASTING SUGAR Method: GOD-PAP	85	70 - 110	mg/dl
GAMMA GLUTAMYL TRANFERASE (GGT)			
GAMMA GT Method: Kinetic Photometric	19	< 38	U/L
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL Method: Azobilirubin/dyphylline	2.06*	0.2 - 1.3	mg/dL
BILIRUBIN (DIRECT) Method: Dual Wavelength Spectrophotometric	0.50	Adults: 0.0 - 0.3 Neonates: 0.0 - 0.6	mg/dL
BILIRUBIN UNCONJUGATED(INDIRECT) Method: Dual Wavelength Spectrophotometric	1.56*	0.0 - 1.1	mg/dL
ALBUMIN Method: Bromocresol Green dye binding	3.7	3.0 - 5.0	g/dL
PROTEIN TOTAL Method: Biuret Reaction	6.5	6.0 - 8.2	g/dL
AST (SGOT) Method: Kinetic (Leuco dye) with P 5 P	23	14 - 36	U/L
GLOBULINN Method: Calculation	2.8	2.8 - 4.5	g/dL
ALT(SGPT)	25	9 - 52	U/L
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA Method: Jaffe's Kinetic	0.8	0.55 - 1.02	mg/dl
URIC ACID - SERUM Method: Modified Uricase	5.5	2.6 - 6.0	mg/dl
UREA - SERUM/PLASMA Method: Urease with indicator dye	26	Female: 15 - 36	mg/dl
CALCIUM Method: O-Cresolphthalein complexone	8.00*	8.5 - 10.1	mg/dl
BUN Method: Urease with indicator dye	12.12	7-17	mg/dl
ELECTROLYTES (Na) Method: ISE-Direct	143	135 - 145	meq/L
ELECTROLYTES (K) Method: ISE-Direct	4.0	3.5 - 5.1	meq/L
LIPID PROFILE			
CHOLESTEROL Method: CHOD-End Point POD (Enzymatic)	195	<200 - Desirable 200-239 - Borderline High >=240 - High	mg/dL
HDL Method: Direct Measure PEG	57	<40 - Low >=60 - High	mg/dL
LDL Method: Calculation Friedewald's Formula	114.4	< 100 - Optimal 100-129 - Near Optimal & Above Optimal	
TRIGLYCERIDES Method: Enzymatic GPO/POD/End Point	118	Normal : <150 Border High : 150 - 199	mg/dl

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VLDL
Method: Calculated

23.6

High : 200 - 499
Very High : \geq 500
Note: Overnight fasting of 10-12hrs is recommended to avoid fluctuations in Lipid Profile.

10-40

mg/dL

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)

GLUCOSE - SERUM / PLASMA (POST PRANDIAL)
Method: Glucose Oxidase-Peroxidase

106

70 - 140

mg/dl

---End Of Report---

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Sample Collected on	: 31-03-2023 11:31	Reported on	: 31-03-2023 21:16
LRN#	: LAB12862588	Specimen	: Serum(Spl)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 2548		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)			
TOTAL T3: TRI IODOTHYRONINE - SERUM Method: CLIA	1.34	0.6 - 1.81 ng/mL	ng/mL
TOTAL T4: THYROXINE - SERUM Method: CLIA	7.83	3.2 - 12.6	µg/dL
TSH: THYROID STIMULATING HORMONE - SERUM Method: CLIA	2.24	0.35 - 5.5 Pregnancy 1st Trimester 0.30 - 4.50 2nd Trimester 0.5 - 4.60 3rd Trimester 0.80 - 5.20	µIU/mL
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method: HPLC	5.4	<=5.6: Non-Diabetic 5.7-6.4: Prediabetic (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	108.28		mg/dL

---End Of Report---

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Sample Collected on	: 31-03-2023 11:31	Reported on	: 31-03-2023 13:43
LRN#	: LAB12862588	Specimen	: Urine
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324		
Emp/Auth/TPA ID	: 2548		
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.020	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	1-2	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	2-4	2-3	/hpf
RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

---End Of Report---

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UHID/MR No. : SKAN.0000124729

OP Visit No : SKANOPV143599

Sample Collected on : 31-03-2023 11:31

Reported on : 31-03-2023 13:42

LRN# : LAB12862588

Specimen : Blood(EDTA)

Ref Doctor : SELF

Emp/Auth/TPA ID : 2548

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : Normocytic Normochromic
WBC : Normal in number, morphology and distribution. No abnormal cells seen
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically

---End Of Report---

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Sample Collected on	: 31-03-2023 11:31	Reported on	: 31-03-2023 13:41
LRN#	: LAB12862588	Specimen	: Blood(EDTA)
Ref Doctor	: SELF		
Package Name	: ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324		
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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	12.9	11.5 - 15	g/dL
RBC Count Method: Electrical Impedance	4.54	3.8 - 4.8	millions/cu mm
Haematocrit Method: Calculated	39.3	36 - 46	%
MCV Method: Calculated	86.6	83 - 101	fl
MCH Method: Calculated	28.4	27 - 32	pg
MCHC Method: Calculated	32.8	31.5 - 34.5	g/dl
RDW	13.5	11.6 - 14	%
Platelet Count Method: Electrical Impedance	1.64	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	5900	4000 - 11000	cells/cumm
Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)			
Neutrophils	65	40 - 80	%
Lymphocytes	30	20 - 40	%
Monocytes	03	2 - 10	%
Eosinophils	02	1-6	%
Basophils	00	0-2	%

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BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	B		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

---End Of Report---

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Sample Collected on	:	Reported on	: 31-03-2023 12:33
LRN#	: RAD1965124	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 2548		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

ULTRASOUND - WHOLE ABDOMEN

Liver- normal in size shape & echogenecity. **Segment VII liver calcification measuring 11.3 mm.** Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion.
CBD normal in course, caliber & clear in visualized region.

Pancreas - Normal in size, shape and echogenecity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenecity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum -No sizeable retroperitoneal lymphadenopathy in visualized region. Visualized segment of aorta and IVC normal.

Bilateral Kidney -Normal in size, shape, position and echogenecity. Corticomedullary differentiation preserved. Pelvicalyceal system not dilated.No calculus or mass lesion. Bilateral ureter not dilated.

Urinary Bladder -Normal in size, shape & distention. No calculus or mass lesion.

Uterus -Normal in size (8.3 x 4.1 cm) . endometrial thickness is normal (7mm). Cervix unremarkable. **Small posterior wall uterine fibroid measuring 1.2 x 1.0 cm**

Bilateral ovaries are normal in size, shape and echogenicity. No sizeable adnexal mass lesion
No evidence of ascites.

IMPRESSION:

Patient Name : Mrs. APRANA MISHRA

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- *small uterine fibroid*

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. DUSHYANT KUMAR VARSHNEY

MD, DNB

Radiology