

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	VASHNVI
DATE OF BIRTH	14-07-1990
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	06-10-2023
BOOKING REFERENCE NO.	23D120182100071294S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. TIWARI SHARVESH KUMAR
EMPLOYEE EC NO.	120182
EMPLOYEE DESIGNATION	OFFICIAL LANGUAGE
EMPLOYEE PLACE OF WORK	AHMEDABAD, BARODA APEX ACADEMY
EMPLOYEE BIRTHDATE	25-12-1984

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 **06-10-2023** til **31-03-2024**. 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))

**SUGGESTIVE LIST OF MEDICAL TESTS**

<b>FOR MALE</b>	<b>FOR FEMALE</b>
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
<b>General Tests</b>	<b>General Tests</b>
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation



बैंक ऑफ बरोडा  
Bank of Baroda

नाम

शरवेंश कुमार तिवारी

Name

SHARVESH KUMAR TIWARI

ए.सी. नं.

120182

E.C. No.



अधिकारी  
Issuing Authority

शरवेंश कुमार तिवारी

120182

Signature of Holder



**aashka**  
HOSPITAL



Cytological examination- Pap smear  
request form

Name: Vaishnavi

Age: 33 years

Complaints:

90. reger  
1 month @ 10 hr perone

No of deliveries:

1  
FTLCS 17 14 years

Last Delivery:

History of abortion:

NO

H/O medical conditions associated:

Last abortions:

NO

DM

HTN

Thyroid

—
—
—

MH:

15/9/23

Reg:

LMP:

P/A:

P/S:

P/V:

soft  
x @  
with disj @

Sample:-

Vagina

Cervix

—
—

Doctors Sign:-

PA Hazlet

ADV  
- progesterone test  
- case bels.

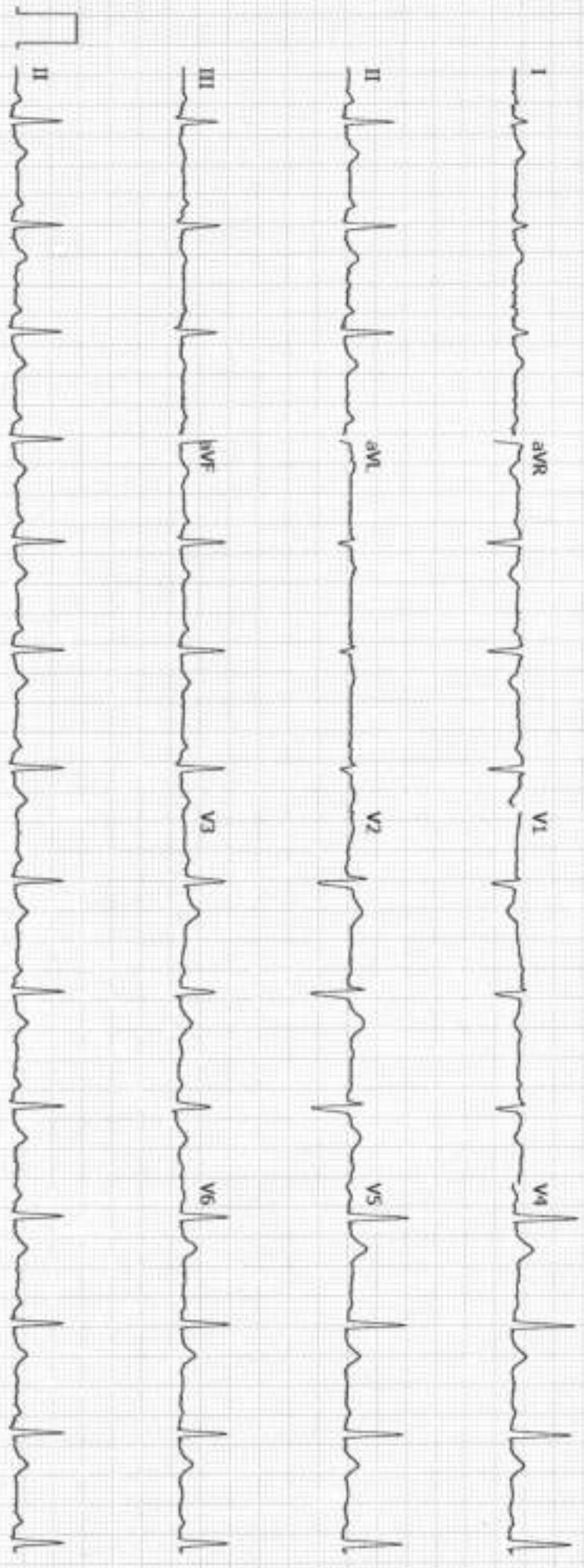
AHL/GNR/MR/56

to confirm pregnancy

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 72 ms  
QT / QTc Baz : 344 / 399 ms  
PR : 162 ms  
P : 88 ms  
RR / PP : 736 / 740 ms  
P / QRS / T : 70 / 72 / 47 degrees

Normal sinus rhythm  
Normal ECG





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type :	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23246222

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Blood Urea Nitrogen (BUN)</b>			
BUN (Blood Urea Nitrogen)	5.6	mg/dL	7.00 - 18.70
<b>Haemogram (CBC)</b>			
Platelet Count	134000	/ $\mu$ L	150000.00 - 410000.00
<b>Lipid Profile</b>			
HDL Cholesterol	45.7	mg/dL	48 - 77

Abnormal Result(s) Summary End

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Printed On : 28-Oct-2023 15:11



## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 11:58	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
------	---------	------	--------------------------	---------

### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin	12.0	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.18	millions/cumm	3.80 - 4.80
PCV(Calc)	37.03	%	36.00 - 46.00
MCV (RBC histogram)	88.6	fL	83.00 - 101.00
MCH (Calc)	28.7	pg	27.00 - 32.00
MCHC (Calc)	32.3	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.90	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

		UNIT	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Total WBC Count	4670	/ $\mu$ L	4000.00 - 10000.00		
Neutrophil	65.0	%	40.00 - 70.00	3036	/ $\mu$ L 2000.00 - 7000.00
Lymphocyte	29.0	%	20.00 - 40.00	1354	/ $\mu$ L 1000.00 - 3000.00
Eosinophil	1.0	%	1.00 - 6.00	47	/ $\mu$ L 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00	234	/ $\mu$ L 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/ $\mu$ L 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	L 134000	/ $\mu$ L	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	2.24		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Thrombocytopenia .
Parasite	Malarial Parasite not seen on smear.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

MD (Pathologist)

Page 2 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 11:48	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>ESR</b> Westergren Method	<b>06</b>	mm after 1hr	3 - 20	

Note (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 3 of 13

Printed On : 28-Oct-2023 15:11

 CAP  
ACCREDITED  
COLLEGE OF AMERICAN PATHOLOGISTS

Neuberg Supratech Reference Laboratories Private Limited

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

079-40408181 / 61618181 | contact@supratechlabs.com | www.neubergsupratech.com





## LABORATORY REPORT



Name : **VASHNVI** Sex/Age : **Female/ 33 Years** Case ID : **31002201470**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3091739**  
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref id1 : OSP31520
Report Date and Time : 28-Oct-2023 11:46	Acc. Remarks : Normal	Ref id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

### HAEMATOLOGY INVESTIGATIONS

#### BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group )

ABO Type	O
Rh Type	POSITIVE

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

**Dr. Shreya Shah**

M D (Pathologist)

Page 4 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	PL ID : 3091739
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 12:10	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour **Pale yellow**  
 Transparency **Clear**

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025		1.003 - 1.035
pH	7.0		4.6 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah  
 M.D. (Pathologist)

Printed On : 28-Oct-2023 15:11



## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 12:10	Acc. Remarks : Normal	Ref Id2 : O23246222

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note: (L-Low, V-Low, H-High, VH-VeryHigh, A-Abnormal)

**Dr. Shreya Shah**  
M.D. (Pathologist)

Printed On : 28-Oct-2023 15:11

Page 6 of 13



**Neuberg Supratech Reference Laboratories Private Limited**

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

079-40408181 / 61618181 | contact@supratechlabs.com | www.neubergsupratech.com



## LABORATORY REPORT



Name : VASHNVI Sex/Age : Female/ 33 Years Case ID : 31002201470  
 Ref By : HOSPITAL Dis. At : Pt. ID : 3091739  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 28-Oct-2023 10:30 Sample Type : Plasma Fluoride F, Plasma Fluoride PP Mobile No :  
 Sample Date and Time : 28-Oct-2023 10:31 Sample Coll. By : Ref Id1 : OSP31520  
 Report Date and Time : 28-Oct-2023 13:54 Acc. Remarks : Normal Ref Id2 : O23246222  
 TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

### BIOCHEMICAL INVESTIGATIONS

#### Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F	86.64	mg/dL	70.0 - 100
Plasma Glucose - PP	95.73	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

< 100 mg/dL : Normal level

100 - < 126 mg/dL: Impaired fasting glucoseer guidelines

>= 126 mg/dL: Probability of Diabetes, Confirm as per guidelines.

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 7 of 13

Printed On : 28-Oct-2023 15:11

 CAP  
ACCREDITED  
COLLEGE OF AMERICAN PATHOLOGISTS



## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 13:34	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b> <small>Colorimetric, CHOD-PAP</small>	127.71	mg/dL	110 - 200	
<b>HDL Cholesterol</b>	L 45.7	mg/dL	48 - 77	
<b>Triglyceride</b> <small>Glycerol Phosphate Oxidase</small>	124.71	mg/dL	<150	
<b>VLDL</b> <small>Calculated</small>	24.94	mg/dL	10 - 40	
<b>Chol/HDL</b> <small>Calculated</small>	2.79		0 - 4.1	
<b>LDL Cholesterol</b> <small>Calculated</small>	57.07	mg/dL	0.00 - 100.00	

#### NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240		High 200-499
High 160-189			

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh) A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 8 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 13:54	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

<b>S.G.P.T.</b> <i>UV with PSP</i>	25.45	U/L	14 - 59	
<b>S.G.O.T.</b> <i>UV with PSP</i>	17.10	U/L	15 - 37	
<b>Alkaline Phosphatase</b> <i>Enzymatic, PNPP, AMP</i>	113.1	U/L	46 - 116	
<b>Gamma Glutamyl Transferase</b> <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	35.0	U/L	0 - 38	
<b>Proteins (Total)</b> <i>Colorimetric, Buret</i>	7.69	gm/dL	6.40 - 8.30	
<b>Albumin</b> <i>Bromocresol purple</i>	4.72	gm/dL	3.4 - 5	
<b>Globulin</b> <i>Calculated</i>	2.97	gm/dL	2 - 4.1	
<b>A/G Ratio</b> <i>Calculated</i>	1.6		1.0 - 2.1	
<b>Bilirubin Total</b> <i>Photometry</i>	0.33	mg/dL	0.3 - 1.2	
<b>Bilirubin Conjugated</b> <i>Diazotization reaction</i>	0.26	mg/dL	0 - 0.50	
<b>Bilirubin Unconjugated</b> <i>Calculated</i>	0.07	mg/dL	0 - 0.8	

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 9 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 13:34	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>BUN (Blood Urea Nitrogen)</b> <small>GLDH</small>	L 5.6	mg/dL	7.00 - 18.70	
<b>Creatinine</b>	0.60	mg/dL	0.50 - 1.50	
<b>Uric Acid</b> <small>Uricase</small>	3.48	mg/dL	2.6 - 6.2	

Note (LL-Very Low,L-Low,H-High,HH-VeryHigh A-Abnormal)

**Dr. Shreya Shah**

M D (Pathologist)

Page 10 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 11:46	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Glycated Haemoglobin Estimation</b>				
HbA1C	4.94	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <small>Calculated</small>	95.08	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

**Interpretation :**

- HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
- Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
- Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
- Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
- In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
- The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

**Dr. Shreya Shah**  
M D (Pathologist)

Page 11 of 13

Printed On : 28-Oct-2023 15:11







## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 12:14	Acc. Remarks : Normal	Ref Id2 : O23246222

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Thyroid Function Test</b>				
Triiodothyronine (T3)	126.57	ng/dL	70 - 204	
Thyroxine (T4) <small>CMA</small>	10.81	ng/dL	4.87 - 11.72	
TSH <small>CMA</small>	0.86	μIU/mL	0.4 - 4.2	

### INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 μIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 μIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

### CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

### TSH ref range in pregnancy

First trimester  
Second trimester  
Third trimester

### Reference range (microIU/ml)

0.24 - 2.00  
0.43-2.2  
0.8-2.5

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

Page 12 of 13

Printed On : 28-Oct-2023 15:11





## LABORATORY REPORT



Name : VASHNVI	Sex/Age : Female/ 33 Years	Case ID : 31002201470
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091739
Bill Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 10:30	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 10:31	Sample Coll. By :	Ref Id1 : OSP31520
Report Date and Time : 28-Oct-2023 12:14	Acc. Remarks : Normal	Ref Id2 : O23246222

**Interpretation Note:**

Thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests (T4 & free T3) levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hypothyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

# For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (L-VeryLow, LL-Low, H-High, HH-VeryHigh, A-Abnormal)

**Dr. Shreya Shah**

M.D. (Pathologist)

Page 13 of 13

Printed On : 28-Oct-2023 15:11



**PATIENT NAME: VAISHNAVI TIWARI**

**DATE: 28/10/2023**

**SONOGRAPHY OF ABDOMEN AND PELVIS**

**LIVER:** Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

**GALL BLADDER:** Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

**PANCREAS:** Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

**SPLEEN:** Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

**KIDNEYS:** Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.6 cms in size.  
Left kidney measures about 10.6 x 4.8 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

**Aorta, IVC and para aortic region** appears normal.  
No evidence of ascites is seen.

**BLADDER:** Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 160 cc.

**LMP- 15/09/2023 UTERUS IS ENLARGED AND GRAVID.**  
A NORMAL APPEARING G.SAC IS SEEN WHICH IS WELL DEFINED.  
DECIDUAL REACTION SEEN SURROUNDING THE G.SAC IS GOOD.

WELL DEFINED FOETAL POLE AND YOLK SAC IS SEEN.

**CRL: 6.7 mm                      GEST AGE 6 wks 4 days                      EDD by G. SAC : 18/6/2024**


**CERVIX - LENGTH                      (COMPETENT)**

**INTOS-                      (CLOSED)**

Bilateral adnexa appears normal.

**COMMENT: EARLY LIVE INTRA UTERINE PREGNANCY WITH A NORMAL APPEARING FOETAL POLE OF G.A 6 WEEKS 4 DAYS.**

Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

  
**DR. SNEHAL PRAJAPATI**  
CONSULTANT RADIOLOGIST