



PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003.

Tel : +91 40-42038139, 2784 5852, 7995421787, 7093445852,

Email parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited
Certificate No.MC-2566

MEDICAL EXAMINATION REPORT

Name	Ms : P. Bhavani	Date : 29/6/23
Company	c/o. Mediwheel	Reg. No. : 3225316
Contact No.	9866584811	Sex <input type="checkbox"/> F <input type="checkbox"/> M Age : <input type="checkbox"/> 43 <input type="checkbox"/> 44
Type	Pre-Emp	Emp. No.: Spouse
	Overseas	Height 165cm
	Annual <input checked="" type="checkbox"/>	Weight 105 kg.
Remarks	<p>- Hyperglycemia \oplus \bar{c} HbA_{1c} - 8.4%</p> <p>- Advice follow up \bar{c} Diabetologist.</p> <p>- Rest all physical and lab parameters within \textcircled{N} limits.</p> <p>- Advised to reduce body wt by diet modification and regular walking.</p> <p>- Continue oral medication for hypertension and DM-II.</p>	
Fitness Status	Medically Fit / Unfit	Dr. PRIYANKA SANNIDHI MBBS Phys No. 1351 Signature

COMPREHENSIVE MEDICAL EXAMINATION REPORT



NAME Ms. P. Bhavani

AGE 43 yr / Female

MARITAL STATUS Married CHILDREN : M F

IDENTIFICATION (IF ANY) A mole on the Nose

PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Both parents Mother

Any personal H/o Major illness like : Typhoid.....2012.....Jaundice.....NIL.....Etc.

Any H/o STD.....Skin infection.....NIL

H/o Blood Transfusion.....Recent Vaccination.....COVISHIELD x 2 Doses.

H/o Epilepsy.....NIL.....Giddiness.....NIL

H/o Surgery.....Fracture in the past.....NIL

Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

x yrs

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication T. AZULIX M, , T. ROSUVASTATIN, T. OLICEM-H

GENERAL EXAMINATION

Conjunctiva :

Bone, Joints : (N)

Skin :

Nutritional Status : well Nourished

Ears :

NAD

Lymph Nodes : NPD

Nose :

Edema Feet : NIL

Throat & Oral Cavity :

Varicose Veins : NIL

DR. PRYANKA SANNIDHI
Regd. No. 11351

Distant Vision : Near Vision :

Right Eye: 6/6

Right Eye: N8 + 1.25 sph N6

With glasses / Without glasses

With glasses / Without glasses

left Eye : 6/6

left Eye : N8 + 1.25 sph N6

with glasses / without glasses

with glasses / without glasses

Colour Vision : BE normal

Ophthalmologist's Signature

Regd: 8901 (AMC)

Right Ear

Left Ear

Hearing : (N)

(N)

Rinee's Test ;

Weber Test :

Discharge : NIL

NIL

SYSTEMIC EXAMINATION

Pulse : 84 bpm

B.P. : 110/80 mmHg

Lungs : A. Shape of Chest R/L symmetrical
B. Breath Sounds R/L clear ⊕
C. Adventitious Sounds No

Heart : A. Sounds S1 S2 ⊕
B. Murmurs NO

Nervous System

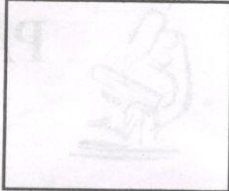
Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles NO
D. Any Lump NO

A. Higher Function :
B. Cranial Nerves :
C. Sensory System : (N)
D. Motor System :
E. Jerks :

General : A. Hernia
B. Hydrocele NAD
C. Varicocele

COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Ms. P. Bhavani
 AGE 43 yr / Female
 MARITAL STATUS Married CHILDREN : M F
 IDENTIFICATION (IF ANY) A mole on the Nose



PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Both parents Mother

Any personal H/o Major illness like : Typhoid..... 2012 Jaundice..... NIL Etc.

Any H/o STD..... Skin infection..... NIL

H/o Blood Transfusion..... Recent Vaccination..... COVISHIELD x 2 Doses.

H/o Epilepsy..... NIL Giddiness..... NIL

H/o Surgery..... Fracture in the past..... NIL

Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

x 1 yr 1 yr

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication T. AZULIX M, T. ROSUVASTATIN, T. OLICEM-H 40

GENERAL EXAMINATION

Conjunctiva : Bone, Joints : (N)
 Skin : Nutritional Status : well Nourished
 Ears : NAD Lymph Nodes : NPD
 Nose : Edema Feet : NIL
 Throat & Oral Cavity : Varicose Veins : NIL

DR. PRIYANKA SANNIDHI
 Regn. No. 11351

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :



Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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Certificate No. M-0862

ENT CONSULTATION

S.No. 3225316

Emp.No. Spoux

Date 29/6/23

Name Ms. P. Bhavani

Age 43 Yrs

Sex M/F

EARS :

Right

Left

EAC	:	patent. no Cerumen.	- do.
TM	:	Intact, pearly white. Cone of light (+)	- do.
TFT	:	Rinne's +ve Weber's - central	Rinne's +ve

NOSE

: Septa : (N) Bil. Symmetrical (N) Pass - (N) mottled

THROAT

: Oropharynx : (N) Bil. Vesic (N) moving
Arytenoids bil.

NECK

: (N)

IMPRESSION

: ENT clinically NAD

Consultant ENT

Dr. D. Hari Krishna Reddy
MS (ENT)
Head & Neck Surgeon
Reg. No: 88379



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TEST REPORT

Name : Ms . P BHAVANI [SPOUSE]
Age / Gender : 43 Years / Female
Ref.By :
Req. No : BIL3225316

TID : UMR1151225
Registered on : 29-Jun-2023 07:36 AM
Reported On : 29-Jun-2023 09:43 AM
Reference : Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and increased echotexture. No focal lesions.

No IHBD /CBD dilatation. Portal vein is normal.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder - Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 9.6 x 5.0 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

LEFT KIDNEY : 11.4 x 5.3 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended.Normal in contour.
Wall thickness is normal. No calculus / sol.

UTERUS : Anteverted measuring 9.5 x 5.5 x 4.3 cms - Normal in size and echotexture.
No space occupying lesion is seen.
Cervix is normal in size and echopattern.

ENDOMETRIUM : Normal.

OVARIES : Right ovary : 2.9 x 1.8 cms - Normal in size and echotexture.
Left ovary : Poor window.
No adnexal mass seen.
No fluid in POD.

IMPRESSION : Grade I fatty liver.

Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist



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TID : UMR1151225
Registered on : 29-Jun-2023 07:36 AM
Reported On : 29-Jun-2023 09:48 AM
Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

IMPRESSION : NORMAL CHEST X-RAY

12
Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist

CASE HISTORY

MEDICATION

OBJECT OF TEST

Routine Check Up.

RISK FACTOR

Hypertension. Diabetes.

ACTIVITY

Very Active.

OTHER INVESTIGATION

E C G

REASON FOR TERMINATION

Dyspnea.

EXERCISE TOLERANCE

Moderate (< 10 METS).

EXERCISE INDUCED ARRHYTHMIAS

No.

HAEMO RESPONSE

Normal.

CHRONO RESPONSE

Normal.

FINAL IMPRESSION

EXTRA COMMENTS

TMT
Negative
for inducible
ischaemia

Confirmed By : _____

Dr. P. PRASHANT MARUTI
DM., Cardiology
Consultant Interventional Cardiologist
Reg. No. TSMC/FMR/25860

ID: 3225316
M.S.P BHAVANI
Female 43Years

29-06-2023 08:19:18 AM

CARDIART

HR : 84 bpm
P : 93 ms
PR : 140 ms
QRS : 95 ms
QT/QTc : 367/436 ms
P/QRS/T : 58/47/15 °
RV5/SV1 : 1.120/0.823 mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Wal

P
Dr. P. PRASHANT MARUTI
DM., Cardiology
Consultant Interventional Cardiologist
Reg. No. TSMC/FMR/25860

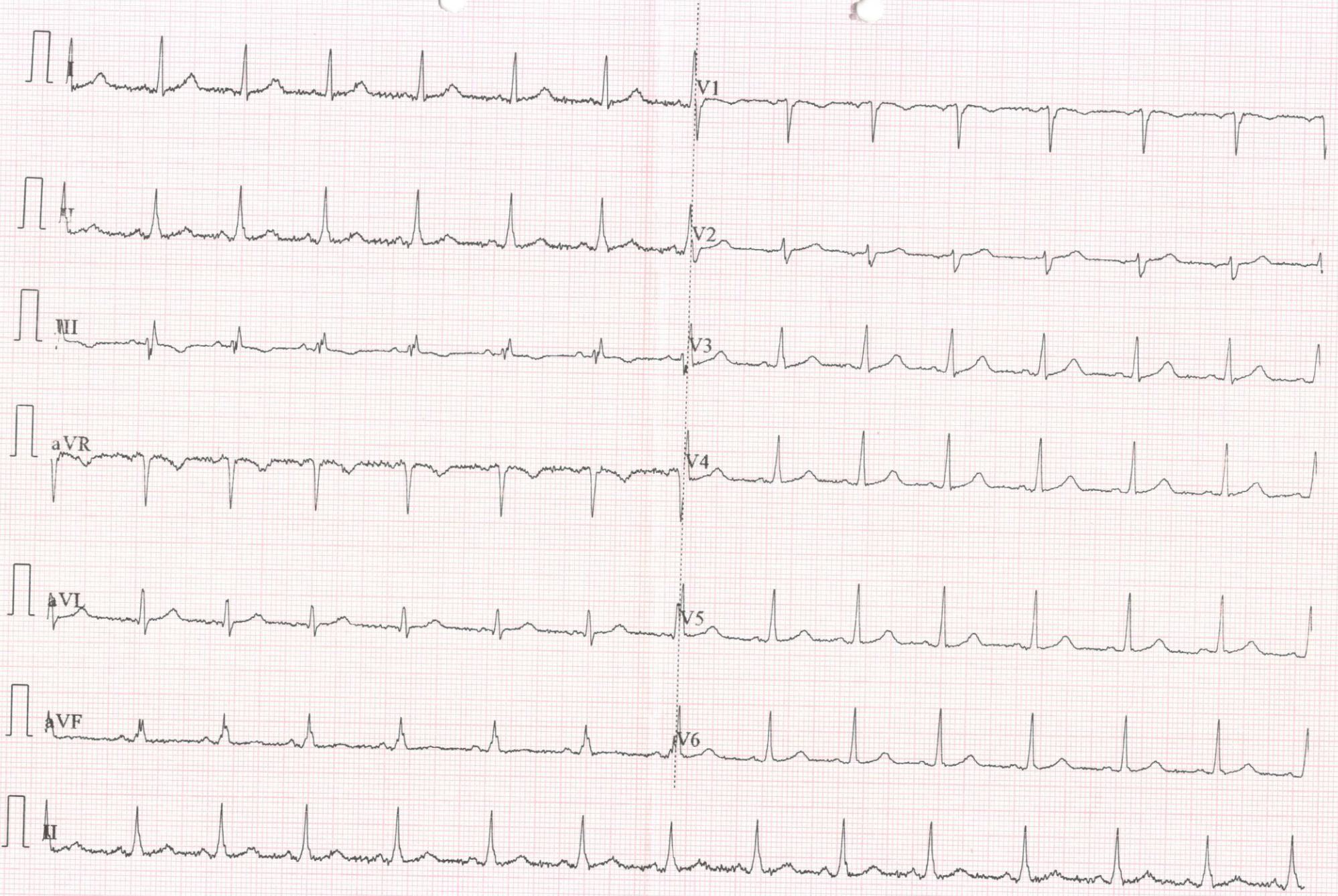
Report Confirmed by:

ID: 3225316

M.S.P BHAVANI Female 43Years

29-06-2023 08:19:18 AM

CARDIART






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TEST REPORT

Name	: MS.P BHAVANI [SPOUSE]	TID/SID	: UMR1151225/ 25735313
Age / Gender	: 43 Years / Female	Registered on	: 29-Jun-2023 / 07:36 AM
Ref.By	: -	Collected on	: 29-Jun-2023 / 07:46 AM
Req.No	:  BIL3225316	Reported on	: 29-Jun-2023 / 12:14 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	6.0		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	2 - 3	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
Regd. No: 52272
MD PATHOLOGY






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Age / Gender	: 43 Years / Female	Registered on	: 29-Jun-2023 / 07:36 AM
Ref.By	: -	Collected on	: 29-Jun-2023 / 07:46 AM
Req.No	:  BIL3225316	Reported on	: 29-Jun-2023 / 11:14 AM
		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	A
Rh Typing (D)	POSITIVE -
Method:Agglutination	

* Sample processed at Parkline

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		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	13.5	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	4.8	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	39	%	36-46 %
MCV Method:Calculated	83	fL	83-101 fL
MCH Method:Calculated	28.0	pg	27-32 pg
MCHC Method:Calculated	33.9	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	13.1	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	10.5	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	56	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	36	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	5	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	3	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Absolute Neutrophil Count	5.88	10 ³ /μL	2.0-7.0 10 ³ /μL
Absolute Lymphocyte Count	3.78	10 ³ /μL	1.0-3.0 10 ³ /μL

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DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	0.53	10 ³ /μL	0.20-1.0 10 ³ /μL
Absolute Eosinophils Count	0.32	cells/cumm	0.02-0.5 cells/cumm
Absolute Basophil Count	00	10 ³ /μL	0.02-0.1 10 ³ /μL
Platelet Count	220	10 ³ /μL	150-410 10 ³ /μL
Method:Electrical Impedence			

Peripheral Smear

RBC	Normocytic and Normochromic
Method:Microscopy	
WBC	Mild Leucocytosis +.No abnormal cells seen.
Method:Microscopy	
Platelets	Discrete and adequate.Normal in morphology
Method:Microscopy	

* Sample processed at Parkline

--- End Of Report ---

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		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	18	mm/hour	0-20 mm/hour
Method:Westergren			

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TEST REPORT

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Ref.By : - Collected on : 29-Jun-2023 / 07:46 AM
Req.No  Reported on : 29-Jun-2023 / 14:05 PM
Reference : Medi Wheel
BIL3225316

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	10.6	mg/dL	7-23 mg/dL
Method:Calculated			

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.81	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

Glucose Urine Fasting

Investigation	Observed Value
Urine Glucose Fasting	Nil
Method:Reagent strip/Reflectance photometry	

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DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	187	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : >/=126 mg/dL

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BIL3225316 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	308	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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BIL3225316 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	8.4	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	194	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
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MD PATHOLOGY




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Certificate No.:MC-2566

TEST REPORT

Name : **MS.P BHAVANI [SPOUSE]** TID/SID : UMR1151225/ 25735312
Age / Gender : 43 Years / Female Registered on : 29-Jun-2023 / 07:36 AM
Ref.By : - Collected on : 29-Jun-2023 / 07:46 AM
Req.No  Reported on : 29-Jun-2023 / 12:29 PM
BIL3225316 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	179	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	42	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	115	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	22	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	111	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	4.26		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	2.74		

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DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.52	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.14	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.38	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	66	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	37	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	50	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	6.79	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.16	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	2.63	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.58		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	29	U/L	7.0-50.0 U/L

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TEST REPORT

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Age / Gender : 43 Years / Female Registered on : 29-Jun-2023 / 07:36 AM
Ref.By : - Collected on : 29-Jun-2023 / 07:46 AM
Req.No  Reported on : 29-Jun-2023 / 11:57 AM
Reference : Medi Wheel
BIL3225316

DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.53	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	12.3	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	3.76	µIU/mL	0.400-4.049 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3dr Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result form TSH secreting pituitary tumors(secondary).

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TEST REPORT

Name : **MS.P BHAVANI [SPOUSE]** TID/SID : UMR1151225/ 25735312
Age / Gender : 43 Years / Female Registered on : 29-Jun-2023 / 07:36 AM
Ref.By : - Collected on : 29-Jun-2023 / 07:46 AM
Req.No  Reported on : 29-Jun-2023 / 12:29 PM
Reference : Medi Wheel
BIL3225316

DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	6.02	mg/dL	1.9-7.5 mg/dL

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TEST REPORT

Name	: MS.P BHAVANI [SPOUSE]	TID/SID	: UMR1151225/ 25737050
Age / Gender	: 43 Years / Female	Registered on	: 29-Jun-2023 / 07:36 AM
Ref.By	: -	Collected on	: 29-Jun-2023 / 07:46 AM
Req.No	 BIL3225316	Reported on	: 29-Jun-2023 / 16:20 PM
		Reference	: Medi Wheel

DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Post Prandial

Urine Glucose Post Prandial	1.0 G %	NIL
Method:Reagent strip/Reflectance photometry		

* Sample processed at Parkline

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