

JAMUNA SWAIN



LIVER: enlarged in size, shape and parenchymal echotexture. No. SOL seen. Intrahepatic biliary channels normal in caliber and contains no echogenic structure. Portal and hepatic vascular systems within normal limits. P. V. measures 9.0 mm

Gall bladder-normal cavity,

SPLEEN : Normal in size, shape and parenchymal echotexture. Spleen measures 11.9cm.

PANCREAS: Normal in size, shape and parenchymal echotexture. Pancreatic duct not dilated.

KIDNEYS: both kidney normal in size, shape and position. Renal cortical echotexture is within normal limits. Cortico medullary differentiation maintained. No evidence of my calculus or hydronephrosis on both sides. Pelvi-calyceal systems appear normal. No focal lesion seen.

- Right Kidney-9.8 x 5.0cms
- Left kidney : 9.8 x 4.0cms.

URETERS: Both ureters not visualized (normal).

Appendix- not visualized(normal)

URINARY BLADDER: Normal in outline. Lumen is clear. Walls thickness is normal .

uterus: *uterus is normal in size shape 58.75 X40.98X47.07MM size, and Normal endometrium seen in cavity.*

Ovary-both ovary normal in echopattern

Cervix-cervical canal normal , cervix normal

POD- *is free of fluid*



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Regd. No. : 1834

ZENA HEALTHCARE SERVICES

(A Unit of Zena Enterprises)

Patient Name : MRS. JAMUNA SWAIN

Age / Gender : 47 years / Female

Patient ID : 11748

Referral : MEDI WHEEL

Collection Time : 18/06/2022, 12:04 PM

Reporting Time : 18/06/2022, 01:41 PM

Sample ID :



| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

ESR, Erythrocyte Sedimentation Rate

| | | | |
|---|----|--------|-------|
| ESR - Erythrocyte Sedimentation Rate | 07 | 0 - 20 | mm/hr |
|---|----|--------|-------|

Method : EDTA Whole Blood, Manual Westergren

Interpretation:

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

END OF REPORT

Lab technician

Dr. Kundan Kumar Sahoo
CONSULTANT PATHOLOGIST /
MICROBIOLOGIST

For Home Collection Please Call at Number :

Zena Healthcare Services

Plot No. 119, Opp. Water tank Lane, Near Police Phandi, Saheed Nagar, Bhubaneswar-07
Ph. : 0674-2549902, 9692276908, 8337964922, E-mail : zenahealthcare@gmail.com

Website : www.zenacare.in

Wishing Good Health

Patient Name : MRS. JAMUNA SWAIN

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Thyroid Profile (T3, T4, TSH)

| | | | |
|-------------------------------------|------|--|--------|
| T3-Total Method : CLIA | 1.25 | 0.87 - 2.73 | ng/dL |
| T4-Total Method : CLIA | 7.89 | 6.09 - 12.23 | ug/dL |
| TSH-Ultrasensitive Method : CLIA | 2.15 | 0.45 - 4.5 First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0 | uIU/mL |

Interpretation

| TSH | T3 | T4 | Suggested Interpretation for the Thyroid Function Tests Pattern |
|------------------------|------------------------|------------------------|--|
| Raised | Within range | Within range | Raised Within Range Within Range .Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism. Intermittent 14 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness" |
| Raised | Decreased | Decreased | Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis" |
| Raised or within range | Raised | Raised or within range | Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent 14 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics. |
| Decreased | Raised or within range | Raised or within range | Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion' |
| Decreased | Decreased | Decreased | Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)" |
| Decreased | Raised | Raised | Primary Hyperthyroidism (Graves' disease) Multinodular goitre, Toxic nodule •Transient thyroiditis Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain s), Gestational thyrotoxicosis with hyperemesis gravidarum" |
| Decreased Within Rang | Raised | Within range | T3 toxicosis •Non-Thyroidal illness |
| Within range | Decreased | Within range | Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%. |

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Collection Time : 18/06/2022, 12:04 PM
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Sample ID : 
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| Test Description | Value(s) | Reference Range | Unit |
|--|----------|-----------------|------|
| <u>Blood Group ABO & Rh Typing, Blood</u> | | | |
| Blood Group (ABO typing) Method : Manual-Hemagglutination | "O" | | |
| RhD Factor (Rh Typing) Method : Manual hemagglutination | Negative | | |

END OF REPORT



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Referral : MEDI WHEEL

Collection Time : 18/06/2022, 12:04 PM

Reporting Time : 18/06/2022, 01:40 PM

Sample ID :



| Test Description | Value(s) | Reference Range | Unit |
|-----------------------------------|----------|-----------------|---------------------|
| Complete Blood Count | | | |
| Hemoglobin (Hb) | 11.2 | 12.0 - 15.0 | gm/dL |
| Erythrocyte (RBC) Count | 4.87 | 3.8 - 4.8 | mil/cu.mm |
| Packed Cell Volume (PCV) | 37.4 | 36 - 46 | % |
| Mean Cell Volume (MCV) | 76.80 | 83 - 101 | fL |
| Mean Cell Haemoglobin (MCH) | 23.00 | 27 - 32 | pg |
| Mean Corpuscular Hb Conc. (MCHC) | 29.95 | 31.5 - 34.5 | g/dL |
| Red Cell Distribution Width (RDW) | 12.4 | 11.6 - 14.0 | % |
| Total Leucocytes (WBC) Count | 7200 | 4000-10000 | cell/cu.mm |
| Neutrophils | 60 | 40 - 80 | % |
| Lymphocytes | 34 | 20 - 40 | % |
| Monocytes | 04 | 2 - 10 | % |
| Eosinophils | 02 | 1 - 6 | % |
| Basophils | 0 | 1-2 | % |
| Platelet Count | 207 | 150 - 410 | 10 ³ /ul |
| Mean Platelet Volume (MPV) | 12.0 | 7.2 - 11.7 | fL |
| PCT | 0.23 | 0.2 - 0.5 | % |
| PDW | 15.4 | 9.0 - 17.0 | % |

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| Test Description | Value(s) | Reference Range | Unit |
|---|----------|-----------------|-------|
| Glucose, Fasting (FBS) | | | |
| Glucose fasting Method : Fluoride Plasma-F, Hexokinase | 102.2 | 75 - 115 | mg/dL |
| Glucose, Post Prandial (PP) | | | |
| Blood Glucose-Post Prandial Method : Hexokinase | 110.0 | 70 - 140 | mg/dL |
| BUN, Serum | | | |
| BUN-Blood Urea Nitroge Method : Serum, Urease | 10.54 | 10 - 50 | mg/dL |
| Creatinine | | | |
| Creatinine Method : Serum, Jaffe | 0.70 | 0.60 - 1.30 | mg/dL |
| Uric acid, Serum | | | |
| Uric Acid Method : Uricase, Colorimetric | 5.20 | 3.4 - 7.0 | mg/dL |

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Age / Gender : 47 years / Female
Patient ID : 11748

Referral : MEDI WHEEL
Collection Time : 18/06/2022, 12:04 PM
Reporting Time : 18/06/2022, 01:36 PM
Sample ID : 
13507

| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

HbA1c, Glycosylated Hemoglobin

| | | | |
|---|--------|--|-------|
| HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD | 5.20 | | % |
| Method : (HPLC, NGSP certified) | | | |
| Estimated Average Glucose : | 102.54 | | mg/dL |

Interpretation

| As per American Diabetes Association (ADA) | |
|--|--|
| Reference Group | HbA1c in % |
| Non diabetic adults >=18 years | <5.7 |
| At risk (Prediabetes) | 5.7 - 6.4 |
| 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:

- Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
- Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, 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 term glycemic control as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

| HbA1c(%) | Mean Plasma Glucose (mg/dL) |
|----------|-----------------------------|
| 6 | 126 |
| 7 | 154 |
| 8 | 183 |
| 9 | 212 |

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Referral : MEDI WHEEL

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Reporting Time : 18/06/2022, 01:36 PM

Sample ID :



| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
| 10 | 240 | | |
| 11 | 269 | | |
| 12 | 298 | | |

END OF REPORT



Lab technician



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Collection Time : 18/06/2022, 12:04 PM

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| Test Description | Value(s) | Reference Range | Unit |
|------------------|----------|-----------------|------|
|------------------|----------|-----------------|------|

Urine(R/M) Routine Examination of Urine
General Examination

| | | | |
|---------------------------|------------|---------------|--|
| Colour | Yellow | Pale Yellow | |
| Transparency (Appearance) | CLEAR | Clear | |
| Deposit | Absent | Absent | |
| Reaction (pH) | Acidic 5.5 | 4.5 - 7.0 | |
| Specific gravity | 1.010 | 1.005 - 1.030 | |

Chemical Examination

| | | | |
|-------------------------|--------|--------|--|
| Urine Protein (Albumin) | Absent | Absent | |
| Urine Glucose (Sugar) | Absent | Absent | |

Microscopic Examination

| | | | |
|------------------|--------|--------|------|
| Red blood cells | NIL | 0-4 | /hpf |
| Pus cells (WBCs) | 1-2 | 0-9 | /hpf |
| Epithelial cells | 0-1 | 0-4 | /hpf |
| Cast | NIL | Absent | |
| Bacteria | Absent | Absent | |
| Yeast cells | Absent | Absent | |

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Patient ID : 11748

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Collection Time : 18/06/2022, 12:04 PM
Reporting Time : 18/06/2022, 01:37 PM
Sample ID : 
13507

| Test Description | Value(s) | Reference Range | Unit |
|--|--------------|---|-------|
| Lipid Profile | | | |
| Cholesterol-Total Method : Spectrophotometry | 138.0 | Desirable level < 200 Borderline High 200-239 High >or = 240 | mg/dL |
| Triglycerides Method : Serum, Enzymatic, endpoint | 99.20 | Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500 | mg/dL |
| HDL Cholesterol Method : Serum, Direct measure-PEG | 32.40 | Normal: > 40 Major Risk for Heart: < 40 | mg/dL |
| LDL Cholesterol Method : Enzymatic selective protection | 85.76 | Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190 | mg/dL |
| VLDL Cholesterol Method : Serum, Enzymatic | 19.84 | 6 - 38 | mg/dL |
| CHOL/HDL Ratio Method : Serum, Enzymatic | 4.26 | 3.5 - 5.0 | |
| LDL/HDL Ratio Method : Serum, Enzymatic | 2.65 | 2.5 - 3.5 | |

Note:
8-10 hours fasting sample is required.

END OF REPORT


Lab technician


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Age / Gender : 47 years / Female
Patient ID : 11748

Referral : MEDI WHEEL
Collection Time : 18/06/2022, 12:04 PM
Reporting Time : 18/06/2022, 01:38 PM
Sample ID : 
13507

| Test Description | Value(s) | Reference Range | Unit |
|---|----------|-----------------|-------|
| LFT, Liver Function Test | | | |
| Total Protein | 7.00 | 6.60 - 8.70 | g/dL |
| Method : Serum, Biuret, reagent blank end point | | | |
| Albumin | 4.20 | 3.50 - 5.30 | g/dL |
| Method : Serum, Bromocresol green | | | |
| Globulin | 2.80 | 2.00-3.50 | g/dL |
| Method : Serum, EIA | | | |
| A/G Ratio | 1.50 | 1.2 - 2.2 | mg/dL |
| Method : Serum, EIA | | | |
| Bilirubin - Total | 0.80 | 0.00 - 1.00 | mg/dL |
| Method : Serum, Jendrassik Grof | | | |
| Bilirubin - Direct | 0.20 | 0.00 - 0.20 | mg/dL |
| Method : Serum, Diazotization | | | |
| Bilirubin - Indirect | 0.60 | 0.10 - 0.80 | mg/dL |
| Method : Serum, Calculated | | | |
| SGOT | 22.40 | 8 - 33 | U/L |
| Method : Serum, UV with P5P, IFCC 37 degree | | | |
| SGPT | 18.45 | 3 - 35 | U/L |
| Method : Serum, UV with P5P, IFCC 37 degree | | | |
| Alkaline Phosphatase | 102.22 | 80 - 306 | U/L |
| Method : PNPP-AMP Buffer/Kinetic | | | |
| GGT-Gamma Glutamyl Transpeptidase | 15.55 | < 38 | U/L |
| Method : Serum, G-glutamyl-carboxy-nitroanilide | | | |

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|------------------|----------|-----------------|------|


Routine Examination of Stool

Routine Examination of Stool

| PHYSICAL EXAMINATION | |
|-------------------------|-----------|
| COLOUR | Brown |
| CONSISTENCY | Semisolid |
| BLOOD | Nil |
| MUCUS | Absent |
| pH | 7.0 |
| MICROSCOPIC EXAMINATION | |
| OVA | Absent |
| CYSTS | Nil |
| RED BLOOD CELLS | Nil |
| PUS CELLS | 0-1 |
| VEGETABLE CELLS | ++ |
| BACTERIA | + |
| Fat | Absent |

END OF REPORT


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Regd. No. : 1834

ZENA HEALTHCARE SERVICES

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NAME:-JAMUNA SWAIN
AGE:-47YRS
Patient ID:-1

REFERRAL:-MEDI-WHEEL
DATE:-18.06.2022
SEX:-FEMALE

CHEST X-RAY PA VIEW SHOWS.

- Both side lung fields are clear.
- Trachea within normal limit.
- Both costophrenic cardiophrenic angle are clear.
- Cardiac shadow within normal limit.
- Media stinum in position

IMPRESSION:-NORMAL STUDY.

B. Pradhan

**Dr. Bhagaban Pradhan
M.D. (Radio diagnosis)
Consultant Radiologist**

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Wishing Good Health

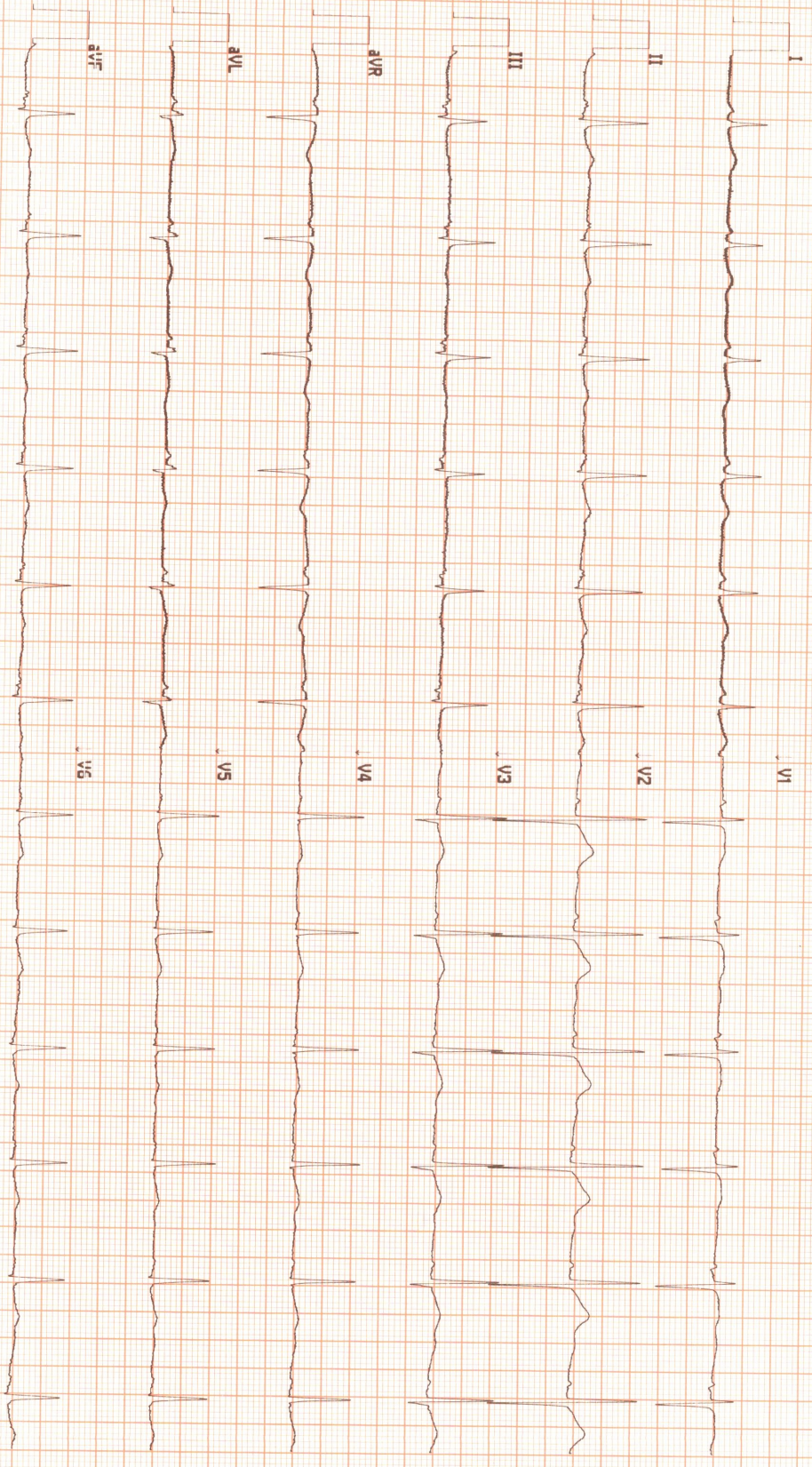
Swain, Jomuna
ID:
DOB:
47yr Female

15-Jun-2022 12:12:12

Vent rate: 72 BPM
PR int: 128 ms
QRS dur: 82 ms
QT/QTc: 385/409 ms
P-R-T axes: 10 59 41

SINUS RHYTHM
NORMAL ECG

Reviewed by -----



113460183951

ZENA HEALTHCARE_BBSR

MICRO ME

Site # 0 Cart #

Version 2.00.10 Sequence #04627 25mm/s 10mm/mV 0.05-150 Hz



भारत सरकार
Government of India



जमुना स्वाइन
Jamuna Swain
जन्म वर्ष / Year of Birth : 1974
महिला / Female



8836 5497 0381

आधार - आम आदमी का अधिकार

↑ Jamuna Swain



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EYE REPORT

NAME : JAMUNA SWAIN

DATE : 18.06.2022

AGE : 47 YRS

SEX : FEMALE

WITH GLASSES

| | RT EYE | LT EYE |
|--------|--------|--------|
| COLOUR | NORMAL | NORMAL |
| NEAR | 6/6 | 6/6 |
| FAR | 6/6 | 6/6 |

Dr. M.K. HOTA
M.B.B.S. (E.N.T)
REGD No.-6993
SIGNATURE

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