

DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID:	Date: 25/12/23	Time:
Patient Name: Neha Jain	Age / Sex: 37/F	Height:
	Weight:	
Chief Complain:		
History:	Routine dentures check up	
Allergy History:		
Nutritional Screening:	Well-Nourished / Malnourished / Obese	
Examination:		
Extra oral :		
Intra oral – Teeth Present :	Stim +	
Teeth Absent :	Carious +	
Diagnosis:		

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads

Sargasan, Gandhinagar - 382421, Gujarat, India

Phone: 079-29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



aashka
H O S P I T A L

DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	Date:	Time:
Patient Name: Neha Jain	Age/Sex: 37/F	Height: Weight:
History: Cl: Rom 9 Chew-UP. DOM in BCS.		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: V M L G 19 (P) 619 V M L G 19 (P) 619		
Diagnosis:		



શ્રીમતી નેહા જીન
Mrs. Neha Jain

75086

સભ્ય નંબર
75086

સભ્ય સંસ્થા
જાણી શિક્ષણ
મંત્રાલય

જાણી શિક્ષણ
મંત્રાલય
સભ્ય નંબર
75086



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Madhweel (Arboremi Healthcare Initiatives)
Helpline Number: 011-41195953

Dear Sir/ Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you, in terms of my agreement.

PARTICULARS		EMPLOYEE DETAILS
NAME		MRS. JAIN NEHA
EO NO.		75006
DESIGNATION		BRANCH OPERATIONS
PLACE OF WORK		GANDHINAGAR VIDHAN SABHA
BIRTH DATE		05-08-1986
PROPOSER'S DATE OF HEALTH CHECKUP		07-09-2023
BOOK NUMBER/REFERENCE NO.		23575056100056758F

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 06-09-2023 till 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 and accord your top priority and best resources in this regard. The EO 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

SGD-

Chief General Manager
HRM Department
Bank of Baroda

Note: This is a computer generated office Baroda's request. In any situation, please contact Madhweel (Arboremi Healthcare Initiatives).



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
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
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL/LDL ratio	HDL/LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (Total, direct, indirect)	Bilirubin (Total, direct, ind rect)
ALP	ALP
Protein (T, Albumin, Globulin)	Protein (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
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
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECG/TMT	2D/3D ECG/TMT
Stress Test	Stress Test
PSA Males (above 40 years)	Mammography (above 40 years) and Pap Smear (after 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	Cytopac Consultation



19.09.2020 11:18:26 AM
SANKU HOSPITAL
DANCE AP
SANCHIAGRIK

Location:1
Order Number:
Lab group:
Institution 1:
Institution 2:
Med center 1:

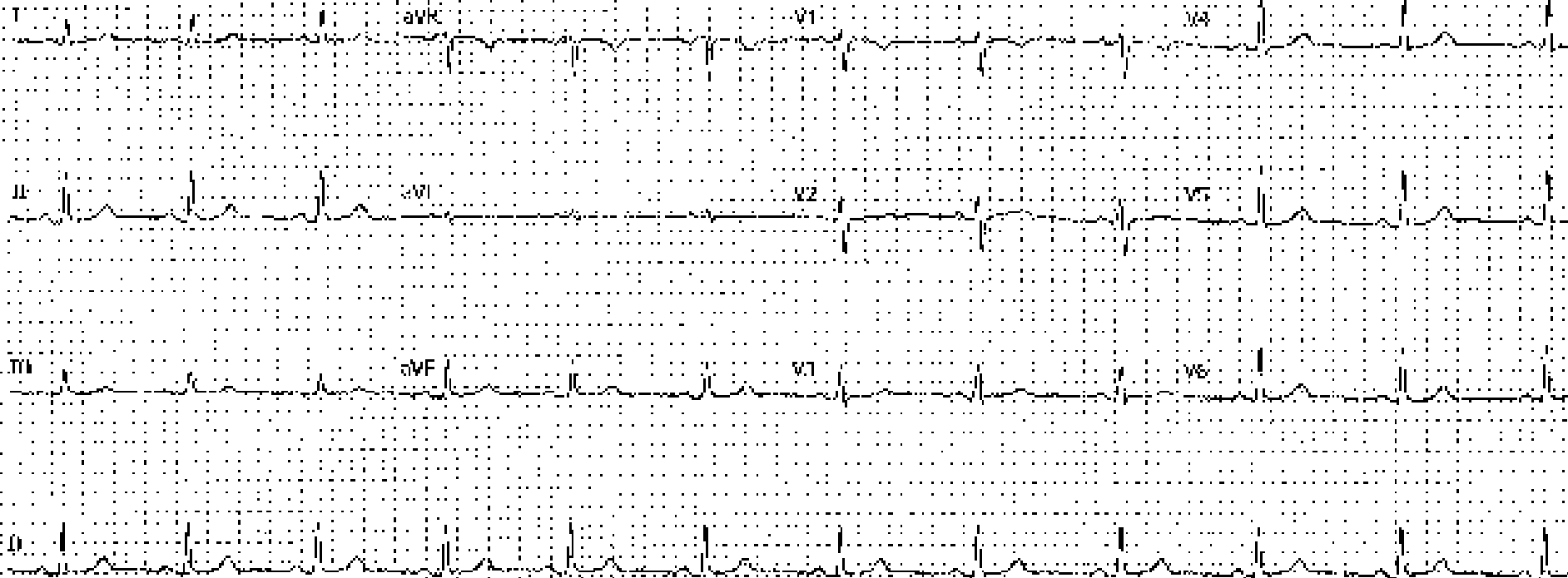
70 bpm

70 bpm
-7 -100%

Technique:
Upright/Pr:
Rise time/Fn:
Attaching Plc:

QRS: 74 ms
QT / QTc: 392 / 423 ms
PR: 130 ms
P: 78 ms
RR / RR: 800 / 857 ms
P / QRS / T: 28 / 50 / 61 degrees

Normal sinus rhythm
Normal ECG





Name: Ncha Jain

Age: 37 years

Complaints:

no go.

No of deliveries:

2 ♂ / 5 ♀ / 0 / abn.

Last Delivery:

5 years

Cap 7 day

History of abortion:

1 1/2 years

Last abortions: miscar

D&C abn.

H/O medical conditions associated:

DM	<input type="checkbox"/>
HTN	<input type="checkbox"/>
Thyroid	<input checked="" type="checkbox"/>

9 yrs. h. t. abn.

MH:

Recpt

Reg:

LMP:

23/8/23

P/A:

off

P/S:

Cx seid.

P/N:

abn seid day 7 ab

Sample:-

Vagina

Cervix

Doctors Sign:-

Tejaji Kaset

AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: JAIN, MRS. NEHA
Patient ID: O0923081
Height: 153 cm
Weight: 70.6 kg

DOB: 05.08.1986
Age: 37yrs
Gender: Female
Race: Indian

Study Date: 09.09.2023

Test Type: --

Protocol: BRUCE

Referring Physician: --

Attending Physician: DR.SANKET MATHUKIYA
Technician: --

Medications: --

Medical History: --

Reason for Exercise Test:

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:26	0.00	0.00	65	110/70	
	STANDING	00:06	0.00	0.00	65		
	HYPERV	00:02	0.00	0.00	65		
	WARM-UP	02:56	1.00	0.00	79		
EXERCISE	STAGE 1	03:00	1.70	10.00	155	130/70	
	STAGE 2	03:00	2.50	12.00	166	140/70	
	STAGE 3	00:56	3.40	14.00	179		
RECOVERY		04:04	0.00	0.00	90	120/70	

The patient exercised according to the BRUCE for 6:55 min:s, achieving a work level of Max. METS: 9.80. The resting heart rate of 67 bpm rose to a maximal heart rate of 179 bpm. This value represents 97 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 150/70 mmHg. The exercise test was stopped due to Fatigue.

Interpretation

Summary: Resting ECG: normal.

Functional Capacity: normal, above average (>20%).

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

Conclusions

STRESS TEST FOR INDUCIBLE ISCHAEMIA IS NEGATIVE

Physician

Technician

PATIENT NAME:MRS,NEHA JAIN

GENDER/AGE:Female / 37 Years

DOCTOR:

OPDNO:00923081

DATE:09/09/23

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 9.9 x 4.1 cms in size.

Left kidney measures about 10.1 x 4.3 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.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 5.4 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.

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CIN: L85110GJ2012PLCC072647




PATIENT NAME: MRS. NEHA JAIN
GENDER/AGE: Female / 37 Years
DOCTOR:
OPDNO: 00923081

DATE: 09/09/23

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST



LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

Pt. ID : 2933389

Pt. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type :

Sample Date and Time : 09-Sep-2023 11:27

Sample Coll. By :

Mobile No : 7354473447

Report Date and Time :

Ref Id1 : O0823081

Acc. Remarks : Normal

Ref Id2 : O23244781

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	100.2	mg/dL	70 - 100
Blood Urea Nitrogen (BUN)			
BUN (Blood Urea Nitrogen)	6.8	mg/dL	7.00 - 18.70
Haemogram (CBC)			
Haemoglobin	10.6	G%	12.0 - 15.0
PCV(Calc)	32.31	%	36.00 - 46.00
MCV (RBC histogram)	79.0	fL	83.00 - 101.00
MCH (Calc)	25.9	pg	27.00 - 32.00
Lipid Profile			
HDL Cholesterol	34.7	mg/dL	48 - 77
Chol/HDL	5.14	0 - 4.1	
LDL Cholesterol	124.96	mg/dL	65 - 100
Thyroid Function Test			
Triiodothyronine (T3)	67.29	ng/dL	70 - 204
ESR	32	mm after 1hr	3 - 20

Abnormal Result(s) Summary End

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

CONDITIONS OF REPORTING

1. All laboratory investigations have their limitations which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the quality of the specimen received by the laboratory. Isolated laboratory investigations cannot confirm the final diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with clinical observation and other related investigations.
2. The results relate only to the samples received.
3. The test report shall not be reproduced except in full, without written approval of the Heuberg Supratash Reference Laboratory (HSLR).
4. For any such, in the report, it is suggested to contact the concerned laboratory personnel as suggested in the table to the left. For follow-up action (re-testing, repeat testing, reflex confirmatory testing, etc.), Heuberg Supratash Reference Laboratories (HSLR) follows a protocol of retaining & preserving samples after testing for stipulated period, allowing re-test period of the sample, a fresh specimen is requested.
5. Report results are for the information of the referring doctor only.
6. For any specimen or specimens received from non - Heuberg Supratash Reference Laboratory (HSLR) locations (within and outside Ahmedabad) it is presumed that the specimen belongs to the patient named or identified, such verification having been carried out either at the point of generation of the said specimen.
7. A test requested - high yield - INCOMPLETE RESULTS for various technical reasons and this response will appear upon the test come followed by detailed comment at the end of the report. It is expected that a fresh specimen will be sent for the success of re-testing at the same laboratory.
8. Heuberg Supratash Reference Laboratories (HSLR) Ahmedabad is certified by ICMR and NABL for COVID-19 testing.

Job Reports & Advisory Services	Contact Numbers
Immunology & Immunology	079-40408120
Microbiology	079-40408145
Parasitology & Cytology	079-40408132
Hematology & Clinical Pathology	079-40408114
Bio Chemistry, Coagulation & Electrolytes	079-40405117
Genetics	079-40408161
Other Services	Contact Numbers
Marketing, Clinical Trials & Corporate Affairs : Dr. Amee Shukla	7698009812
Marketing & Laboratories : Mr. Sunil Parthol	9824002011
Billing & Accounts : Mr. Pravin Patel	9824728315
HR, HRMS / Recruit for Sample Collection & General Information : Mrs. Sandi Shah	9824408721
Sample Transport, Pickup & Return Dispatch : Mr. Suchis Chouhan	7698009900

Any query may also be directed online on contact@supratashlabs.com with attention to the concerned personnel.

Heuberg Supratash Branches In Ahmedabad

Shukh, Eho-cho + Ph : 079-61618111, 6357244307, Bopalnagar - 635576001/22,
 Alkapuragar - 079-40408152, 25450902, Bopal - 02717-233881/82, Gola - 6357244305
 Shyongdev - 9879224254

Heuberg Supratash Collection Centers In Ahmedabad
 Shukh-cho - 079-25530134, Shyongdev - 079-26742434, Faldar - 6359900406

Heuberg Supratash Reference Laboratories
 "Kiteball" Opposite Krupa Petrol Pump,
 Near Permat's Garden, Ahmedabad - 380006
 Phone : 079-40408181 / 41618181
 Email : contact@supratashlabs.com
 Website : www.heubergsupratashlabs.com

Head Office :
 Heuberg Supratash Reference Laboratories Private Limited
 Heuberg's Road at Suburban Bopalnagar & Shyongdev Phase
 Trivikram Sapthagiri Bhawan, 13, IV Street
 Abhiramapuram, Chennai - 600018, Tamil Nadu
 CIN : U85195TN2012PTC121947



LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200336

PL ID : 2993389

Pt. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Whole Blood EDTA

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Report Date and Time : 09-Sep-2023 10:24

Acc. Remarks : Normal

Mobile No : 7354473447

Ref Id1 : C0523081

Ref Id2 : C23244761

TEST

RESULTS

UNIT

BIOLOGICAL REF. INTERVAL

REMARKS

HAEMOGRAM REPORT

HB AND INDICES

Hsemoglobin	L	10.6	G%	12.0 - 15.0
RBC (Electrical Impedance)		4.09	millions/cumm	3.80 - 4.80
PCV(Calc)	L	32.31	%	36.00 - 46.00
MCV (RBC histogram)	L	79.0	fL	83.00 - 101.00
MCH (Calc)	L	25.9	pg	27.00 - 32.00
MCHC (Calc)		32.8	gm/dL	31.50 - 34.50
RDW (RBC histogram)		13.40	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count		7160	/µL	4000.00 - 10000.00
Neutrophil	L	83.0	%	40.00 - 70.00
Lymphocyte		30.0	%	20.00 - 40.00
Eosinophil		2.0	%	1.00 - 6.00
Monocytes		4.0	%	2.00 - 10.00
Basophil		1.0	%	0.00 - 2.00

PLATELET COUNT (Optical)

Platelet Count		249000	/µL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)		2.10		0.78 - 3.53

SMEAR STUDY

RBC Morphology : Normocytic Normochromic anemia.
 WBC Morphology : Total WBC count within normal limits.
 Platelet : Platelets are adequate in number.
 Parasite : Malarial Parasite not seen on smear.

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

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 2 of 15

Printed On : 10-Sep-2023 16:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

Pt. ID : 2963389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Date and Time : 09-Sep-2023 10:02

Report Date and Time : 09-Sep-2023 12:08

Sample Type : Whole Blood EDTA

Sample Coll. By :

Acc. Remarks : Normal

Mobile No : 7354473447

Ref Id1 : O0923081

Ref Id2 : O23244781

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

ESR

Westergren Method

H 32

mm after 1hr 3 - 20

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

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 3 of 15

Printed On : 10-Sep-2023 18:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashika hospital

Sex/Age : Female/ 37 Years

Cese ID : 30902200335

Dis. At :

Pl. ID : 2953389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Whole Blood EDTA

Mobile No : 7354473447

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Ref Id1 : O0923081

Report Date and Time : 09-Sep-2023 10:39

Acc. Remarks : Normal

Ref Id2 : O23244781

TEST

RESULTS

UNIT

REMARKS

REMARKS

HAEMATOLOGY INVESTIGATIONS

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

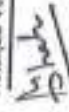
ABO Type

AB

Rh Type

NEGATIVE

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



Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 10-Sep-2023 16:00

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LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

PL ID : 2963389

PL Loc :

Reg Date and Time : 09-Sep-2023 10:02 Sample Type : Spot Urine

Sample Date and Time : 09-Sep-2023 10:02 Sample Coll. By :

Report Date and Time : 09-Sep-2023 11:26 Acc. Remarks : Normal

Mobile No : 7354473447

Ref Id1 : 00923081

RefId2 : 023244781

TEST

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 : 1.005
 pH : 6.50
 Leucocytes (ESTERASE) : Negative
 Protein : Negative
 Glucose : Negative
 Ketone Bodies Urine : Negative
 Urobilinogen : Negative
 Bilirubin : Negative
 Blood : Negative
 Nitrite : 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:(L-VeryLow,L-Low,M-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah

Dr. Manoj Shah
 M.D. (Path. & Bact.)

Printed On : 10-Sep-2023 16:00

Page 5 of 15





LABORATORY REPORT

Name : NEHA JAIN
 Ref.By : HOSPITAL
 Bill. Loc. : Aashka hospital
 Sex/Age : Female/ 37 Years
 Dis. At :
 Case ID : 30902200335
 Pl. ID : 2983389
 Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02
 Sample Date and Time : 09-Sep-2023 10:02
 Report Date and Time : 09-Sep-2023 11:26
 Sample Type : Spot Urine
 Sample Coll. By :
 Acc. Remarks : Normal

Mobile No : 7354473447
 Ref Id1 : 00923081
 Ref Id2 : 023244781

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
Glucose	mg/dL	Negative (<30)	30	50	100	300
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	5
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
Pus cells (Microscopic)	/hpf	<5	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-

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

Dr. Manoj Shah

Dr. Manoj Shah
 M.D. (Path. & Bact.)

Page 6 of 15

Printed On : 10-Sep-2023 18:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Asshka hospital

Sex/Age : Female/ 37 Years

Case ID : 30902200335

Dis. At :

PL ID : 2983389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Mobile No : 7354473447

Sample Type : Plasma Fluoride F, Plasma Fluoride PP

Sample Coll. By :

Sample Date and Time : 09-Sep-2023 10:02

Report Date and Time : 10-Sep-2023 15:50

Ref Id1 : 00923061

TEST Acc. Remarks : Normal

Ref Id2 : 023244781

RESULTS UNIT BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F Photometric,Hexokinase	H	100.2	mg/dL	70 - 100
Plasma Glucose - PP Photometric,Hexokinase		94.81	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 glucose guidelines

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

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

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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Printed On : 10-Sep-2023 15:00





LABORATORY REPORT

Name : NEHA JAIN

Ref. By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

Pl. ID : 2963389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Serum

Mobile No : 7354473447

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Ref Id1 : 00923081

Report Date and Time : 09-Sep-2023 13:11

Acc. Remarks : Normal

Ref Id2 : 023244761

TEST

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

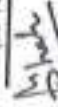
Cholesterol Colorimetric, CHOD-PAP	178.4	mg/dL	110 - 200	
HDL Cholesterol	L 34.7	mg/dL	48 - 77	
Triglyceride Glycerol Phosphate Oxidase	93.7	mg/dL	<150	
VLDL Calculated	18.74	mg/dL	10 - 40	
Chol/HDL Calculated	H 5.14		0 - 4.1	
LDL Cholesterol Calculated	H 124.96	mg/dL	65 - 100	

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

- 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-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)



Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 10-Sep-2023 16:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Case ID : 30902200335

Dis. At :

Pl. ID : 2963389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Serum

Mobile No : 7354473447

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Ref Id1 : O0923081

Report Date and Time : 09-Sep-2023 13:11

Acc. Remarks : Normal

Ref Id2 : O23244781

TEST

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with PSp</i>	19.9	U/L	14 - 59	
S.G.O.T. <i>UV with PSp</i>	20.0	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PiPP-AMP</i>	100.5	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	10.6	U/L	0 - 38	
Proteins (Total) <i>Cobimetric, Biuret</i>	7.46	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.33	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.13	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.4		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.68	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.15	mg/dL	0 - 0.60	
Bilirubin Unconjugated <i>Calculated</i>	0.53	mg/dL	0 - 0.8	

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

Shreya

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Dr. Shreya Shah
M.D. (Pathologist)

Printed On: 10-Sep-2023 16:30





LABORATORY REPORT

Name : MEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

PL ID : 2983389

PL Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Serum

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Report Date and Time : 09-Sep-2023 13:11

Acc. Remarks : Normal

Mobile No : 7354473447

Ref Id1 : O0923081

Ref Id2 : O23244781

TEST

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) GLDH	L 6.8	mg/dL	7.00 - 18.70	
Creatinine	0.76	mg/dL	0.50 - 1.50	
Uric Acid Uricase	4.72	mg/dL	2.6 - 6.2	

Note: (L-Very Low, L-Low, H-High, H-High, H-High, A-Abnormal)

Manoj

Dr. Manoj Shah
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Dr. Shreya Shah
M.D. (Pathology)

Printed On : 10-Sep-2023 18:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashika hospital

Sex/Age : Female/ 37 Years

Dis. At :

Case ID : 30902200335

Pt. ID : 2953389

Pt. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Whole Blood EDTA

Mobile No : 7354473447

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Ref Id1 : O0923081

Report Date and Time : 09-Sep-2023 11:45

Acc. Remarks : Normal

Ref Id2 : O23244781

TEST

RESULTS

UNIT BIOLOGICAL REF RANGE REMARKS

Glycated Haemoglobin Estimation

HbA1C 5.67

% of total Hb <5.7: Normal

5.7-6.4: Prediabetes

>=6.5: Diabetes

116.03

mg/dL

Not available

Estimated Avg Glucose (3 Mths)
Calculated

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 glycaemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

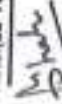
Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(ICT,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycaemic 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. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 10-Sep-2023 18:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Female/ 37 Years

Case ID : 30902200335

Dis. At :

Pl. ID : 2063389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02

Sample Type : Serum

Sample Date and Time : 09-Sep-2023 10:02

Sample Coll. By :

Report Date and Time : 09-Sep-2023 11:45

Acc. Remarks : Normal

Mobile No : 7354473447

Ref Id1 : O0923081

Ref Id2 : O23244761

TEST

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3) CMA	L	67.29	ng/dL	70 - 204
Thyroxine (T4) CMA		7.69	ng/dL	4.87 - 11.72
TSH CMA		2.95	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 concentrations (>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

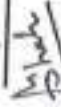
Reference range (microIU/ml)

0.24 - 2.00

0.43-2.2

0.8-2.5

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



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

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Printed On : 10-Sep-2023 16:00





LABORATORY REPORT

Name : NEHA JAIN

Ref.By : HCOSPITAL

Bill. Loc. : Aashika hospital

Sex/Age : Female/ 37 Years

Case ID : 30902200335

Dis. At :

Pl. ID : 2993389

Pl. Loc :

Reg Date and Time : 09-Sep-2023 10:02 Sample Type : Serum

Sample Date and Time : 09-Sep-2023 10:02 Sample Coll. By :

Mobile No : 7354473447

Report Date and Time : 09-Sep-2023 11:45 Acc. Remarks : Normal

Ref Id1 : O0923081

Ref Id2 : O23244761

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, a suppressed s-TSH indicates excess thyroid hormones. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, and 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 thyroxine (T4) 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, hypothyroidism 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

First trimester

Second trimester

Third trimester

Reference range (microIU/ml)

0.24 - 2.00

0.43-2.2

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/↑	↓

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

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M.D. (Pathologist)

Page 13 of 15

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LABORATORY REPORT	
Name : NEHA JAIN	Sex/Age : Female/ 37 Years H.I.D : 231C08859
Ref By : HOSPITAL	Case ID : 30902200335
Bill. Loc. : Ashka hospital	Dis.Loc. :
Registration Date & Time : 09-Sep-2023 10:02	Sample Type : PAP Smear
Sample Date & Time : 09-Sep-2023 11:27	Sample Coll. By :
Report Date & Time : 10-Sep-2023 12:30	Acc. Remarks :
	Pt. ID : 2963389
	Pt. Loc. :
	Ph # : 7354473447
	Ref Id : 00923081
	Ref Id2 : 023244781

Cytopathology Report

Specimen :

PAP smear for cytology (LBC PAP)

Clinical Data :

Not available

Macroscopic Examination :

Received one container with 20 ml LBC fixative and brush. One smear prepared.
Smear - 1 [PAP]

Microscopic Examination :

See below in diagnosis

Impression :

The Bethesda System (TBS 2014) (LBC Pap)

Specimen type: LBC Pap smear.

Specimen adequacy: Satisfactory for evaluation but limited by obscuring inflammation

Transformation zone elements: Not present

Infection associated changes: Trichomonas or Monilia are not seen.

Reactive cellular changes: Nil

Grossing By : Dr. Palak Patel

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.



Dr. Vipal Parmar

M.D. Pathologist

Page 14 of 16

Dr. Bhavna Mehta
M.D. (P.D.C.C) G-56686
(Histo & Renal pathologist)

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LABORATORY

LABORATORY REPORT

Name	: NEHA JAIN	Sex/Age	: Female/ 37 Years	H.ID	: 231C0859	Case ID	: 30902200335
Ref By	: HOSPITAL	Dis.Loc.	:	Pt. ID	: 2969389	Ph #	: 7354473447
Bill. Loc.	: Aashka hospital	Registration Date & Time	: 09-Sep-2023 10:02	Sample Type	: PAP Smear	Ref Id	: O0923081
		Sample Date & Time	: 09-Sep-2023 11:27	Sample Coll. By	:	Ref Id2	: O23244761
		Report Date & Time	: 10-Sep-2023 12:30	Acc. Remarks	:		

Epithelial cell abnormality: Nil

Other cells: Nil

Interpretation/result: Negative for intraepithelial lesion or malignancy.

Pap test is a screening test for cervical cancer with inherent false negative results.

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

Grossing By : Dr. Palak Patel

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.



Dr. Vipal Parmar

M.D. Pathologist

Dr. Bhavna Mehta

M.D. (P.D.C.C) G-56666

(Histo & Renal pathologist)

Printed On : 10-Sep-2023 16:00

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