

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Collected On : 11/04/2023 11:21 AM Received On : 11/04/2023 11:40 AM Reported On : 11/04/2023 02:44 PM

Barcode : D72304110099 Specimen : Whole Blood Consultant : Dr. Alex Mathew(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9582203408

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
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COMPLETE BLOOD COUNT (CBC)

Haemoglobin (Hb%) (Spectrophotometry)	12.5	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.58	10 ⁶ /mm ³	4.5-6.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.1	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	85	µm ³	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.1	g/dL	32.0-36.0
Red Cell Distribution Width (RDW) (Calculated)	13.7	%	11.5-14.0
Platelet Count (Electrical Impedance)	275	10 ³ /mm ³	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	8.0	10 ³ /mm ³	4.0-11.0

DIFFERENTIAL COUNT (DC)

Neutrophils (DHSS)	63.6	%	40.0-80.0
Lymphocytes (DHSS)	29.7	%	20.0-40.0
Monocytes (DHSS)	3.4	%	2.0-10.0
Eosinophils (DHSS)	3.0	%	1.0-6.0
Basophils (DHSS)	0.3	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	5.09	10 ³ /mm ³	2.0-7.5

Page 1 of 5

Dharamshila Narayana Superspecialty Hospital

(A Unit of Dharamshila Cancer Foundation and Research Centre)
(Hospital Reg. No.: DHS/NH/144 | PAN No.: AAATD0451G | GST No.: 07AAATD0451G1Z7)

Hospital Address: Vasundhara Enclave, Near New Ashok Nagar Metro Station, Delhi 110 096

Tel +91 11 6904-5555 | www.narayanahealth.org | info.dnsh@narayanahealth.org

Appointments

1800-309-0309

Emergencies

73700-73700

Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Absolute Lymphocyte Count (Calculated)	2.38	$\times 10^3$ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.28	$\times 10^3$ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.24	$\times 10^3$ cells/ μ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	$\times 10^3$ cells/ μ l	0.02-0.1

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	22 H	mm/hr	0.0-20.0
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Prachi

Dr. Prachi
 MBBS, MD Pathology
 MBBS, MD Pathology, JUNIOR CONSULTANT, Reg no DMC - 70512

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (GOD/POD)	87	mg/dL	74.0-106.0
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Non LDL Selective Elimination, CHOD/POD)	178.5	mg/dL	<200.0
Triglycerides (LIPASE/GK/GPO/POD)	214.7 H	mg/dL	<150.0
HDL Cholesterol (HDLC) (Colorimetric (Phosphotungstic Acid Method))	31.2 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	147.3 H	mg/dL	<130.0
LDL Cholesterol (Turbidometric /Microtip)	114.57 H	mg/dL	<100.0
VLDL Cholesterol (Calculated)	42.9 H	mg/dL	0.0-40.0

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Cholesterol /HDL Ratio (Calculated) **5.8 H** - <4.5

THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (ECLIA/ ELFA) 2.53 nmol/L 1.49-2.6
 Thyroxine (T4) (ECLIA/ ELFA) 109 nmol/L 71.2-141.0
 TSH (Thyroid Stimulating Hormone) (Electrochemiluminescence (ECLIA)) **6.37 H** uIU/ml 0.465-4.68

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Azobilirubin Dyphylline) 0.38 mg/dL 0.2-1.3
 Conjugated Bilirubin (Direct) (Dual Wavelength Reflectance) 0.08 mg/dL 0.0-0.4
 Unconjugated Bilirubin (Indirect) (Calculated) 0.29 mg/dL 0.1-1.0
 Total Protein (Biuret Method) 8.10 gm/dL 6.3-8.2
 Serum Albumin (Bromcresol Green (BCG)) 4.51 gm/dL 3.5-5.0
 Serum Globulin (Calculated) **3.60 H** gm/dL 2.3-3.5
 Albumin To Globulin (A/G)Ratio (Calculated) 1.25 - 0.9-2.0
 SGOT (AST) (P - Phosphate) 32.9 U/L 14.0-36.0
 SGPT (ALT) (P - Phosphate) **40.0 H** U/L <35.0
 Alkaline Phosphatase (ALP) (PNPP With Amp Buffer) 63.2 U/L 38.0-126.0
 Gamma Glutamyl Transferase (GGT) (GCNA) 29.9 U/L 12.0-43.0



Dr. Amit Samadhiya
 MBBS, MD Biochemistry
 JUNIOR CONSULTANT, MBBS, MD Biochemistry, DMC - 14287

Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

CLINICAL PATHOLOGY			
Test	Result	Unit	Biological Reference Interval
STOOL ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Absent	-	-
Blood	Absent	-	-
CHEMICAL EXAMINATION			
Reaction	Alkaline	-	-
MICROSCOPE EXAMINATION			
Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Red Blood Cells (Stool)	Not Seen	-	-
Pus Cells	0-1	/hpf	1-2

--End of Report--

Prachi

Dr. Prachi
 MBBS, MD Pathology
 MBBS, MD Pathology, JUNIOR CONSULTANT, Reg no DMC - 70512

Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



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Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Collected On : 11/04/2023 11:21 AM Received On : 11/04/2023 11:43 AM Reported On : 11/04/2023 02:36 PM

Barcode : D62304110141 Specimen : Serum Consultant : Dr. Alex Mathew(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9582203408

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HbA1C			
HbA1c (Enzymatic Method)	5.4	%	Normal: 4.0-5.6 Pre Diabetes: 5.7-6.4 Diabetes: => 6.5 ADA Recommendation 2017
Estimated Average Glucose	108.28	-	-

Interpretation:

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

Interpretation Notes

- 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. Target goals of < 7.0 % may be beneficial in patients. Please co-relate with Blood Sugar Fasting.

RENAL PACKAGE - 2 (RFT FASTING)

Fasting Blood Sugar (FBS) (GOD/POD)	85.6	mg/dL	74.0-106.0
Blood Urea Nitrogen (BUN) (Urease, UV)	9.6	mg/dL	7.0-17.0
SERUM CREATININE			
Serum Creatinine (Enzymatic Two Point Rate - Creatinine Amidohydrolase)	0.62	mg/dL	0.5-1.04
eGFR (Calculated)	113.9	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.

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Serum Sodium (ISE Direct)	140.9	mmol/L	137.0-145.0
Serum Potassium (ISE Direct)	4.42	mmol/L	3.5-5.1
Serum Chloride (ISE Direct)	105.9	mmol/L	98.0-107.0
Serum Bicarbonate Level (Phosphoenolpyruvate Carboxylase /Mdh Enzymatic End Piont Assay)	24.5	mmol/L	22.0-30.0
Serum Calcium (Arsezano III Dye Binding Method)	9.16	mg/dL	8.4-10.2
Serum Magnesium (Formazan Dye)	2.06	mg/dL	1.6-2.3
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	6.25	mg/dL	3.5-8.5
Serum Phosphorus (Phosphomolybdate Reduction)	3.15	mg/dL	2.5-4.5



Dr. Amit Samadhiya
 MBBS, MD Biochemistry
 JUNIOR CONSULTANT, MBBS, MD Biochemistry, DMC - 14287

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	Pale Yellow	-	-
Appearance	S. Turbid	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Double Indicator Method)	6.5	-	4.8-7.5
Sp. Gravity (PKa Change Ionic Concentration Method)	1.030	-	1.002-1.030



Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Protein (Protein Error Method)	Negative	-	-
Urine Glucose (GOD/POD)	Negative	-	Nil
Ketone Bodies	Negative	-	-
Blood Urine (Pseudo Peroxidase Method)	Present +	-	Negative

MICROSCOPIC EXAMINATION

Pus Cells	2-3	/hpf	1-2
RBC	4-5	/hpf	0 - 3
Epithelial Cells	1-2/hpf	/hpf	2-3
Urine For Sugar (Fasting)	Negative	-	-

Prachi

Dr. Prachi
MBBS, MD Pathology
MBBS, MD Pathology, JUNIOR CONSULTANT, Reg no DMC - 70512

BLOOD BANK LAB

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	"B"	-
RH Typing	Positive	-

--End of Report--



Patient Name : Ms Vidita Jain MRN : 15050000150120 Gender/Age : FEMALE , 29y (12/08/1993)

Dr. Manoj Rawat
Consultant & HOD, Blood Bank Center
Consultant & HOD Blood Center, DMC - 38026

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Transthoracic Echo color Doppler Report

Patient's Name	Ms. Vidita Jain	Age/Sex	29Years/Female
Ref By:	Dr. Alex Mathew	Date:	11/04/2023
MRN No.	15050000150120	PVT/MRD/IPD	Mediwheel full body Health Check Up

Final Interpretation

1. Normal sized cardiac chamber dimensions.
2. No Regional wall motion abnormality, LVEF =60-65%.
3. MIP - Normal
4. LVEDP – Normal
5. Normal RV systolic function. TAPSE - 2.6cm.
6. Trace MR, No AR, No PR, Trace TR (PASP - 15mmHg).
7. No clot/vegetation/pericardial effusion.
8. IVC normal with >50% collapsibility with respiration.
9. No coarctation of aorta.

Morphology :-

- ❖ Left Ventricle: It is normal sized.
- ❖ Left Atrium: It is normal sized.
- ❖ Right Atrium: It is normal sized.
- ❖ Right Ventricle: It is normal sized. RV systolic function is normal.
- ❖ Aortic Valve: Aortic valve appears tricuspid & cusps are normal.
- ❖ Mitral Valve: open normally, Subvalvular apparatus appears normal.
- ❖ Tricuspid valve: It appears normal.
- ❖ Pulmonic Valve: It appears normal.
- ❖ Main Pulmonary artery & its branches: Appear normal.
- ❖ Pericardium: There is no pericardial effusion.

DOPPLER/COLOUR FLOW

<u>VALVE</u>	<u>MAX. VELOCITY cm/sec</u>	<u>PG/MG mmHg</u>	<u>REGURGITATION</u>
MITRAL	E- 107cm/sec, A- 79cm/sec		Trace MR
AORTIC	109		No AR
TRICUSPID	159	(PASP – 15mmHg)	Trace TR
PULMONARY	106		No PR

Contd.....



M MODE & 2D Measurements

	Observed values	Normal values
Aortic root diameter	27	20-34(mm)
Left atrium size	24	19-40(mm)
Left Ventricular Size diastole	41	ED 37-56(mm)
Left Ventricular Size systole	28	ES 22-40 (mm)
Inter ventricular Septum diastole	07	ED 6-10(mm)
Posterior Wall thickness diastole	07	ED 6-10(mm)
End Diastolic Volume	77	
End Systolic Volume	30	
LV Ejection Fraction (%)	60-65%	55%-75%

2D EXAMINATION DESCRIPTION

2D and M Mode examination done in multiple views revealed fair movement of both mitral leaflets. Aortic valve has three cusps & cusps are normal. Tricuspid valve leaflets move normally. Pulmonary valve is normal. Ascending Aorta is normal. Interatrial septum and interventricular septum are intact.

Dimension of left atrium and left ventricle are normal. No regional wall motion abnormality seen. Global LVEF is 60-65%. No intracardiac mass or thrombus seen.

Dr. Anand Kumar Pandey
Director & Senior Consultant
Interventional Cardiology

Dr. Amrendra Kumar Pandey
Consultant Cardiology


Dr. Sejal Gupta
Consultant Cardiologist

Dr. Rakesh Bachloo
Consultant - Cardiology

Note:- This is a professional opinion based on imaging finding and not the diagnosis. Not valid for medico-legal purposes. In case of any discrepancy due to machine error or typing error, please get it rectified immediately.



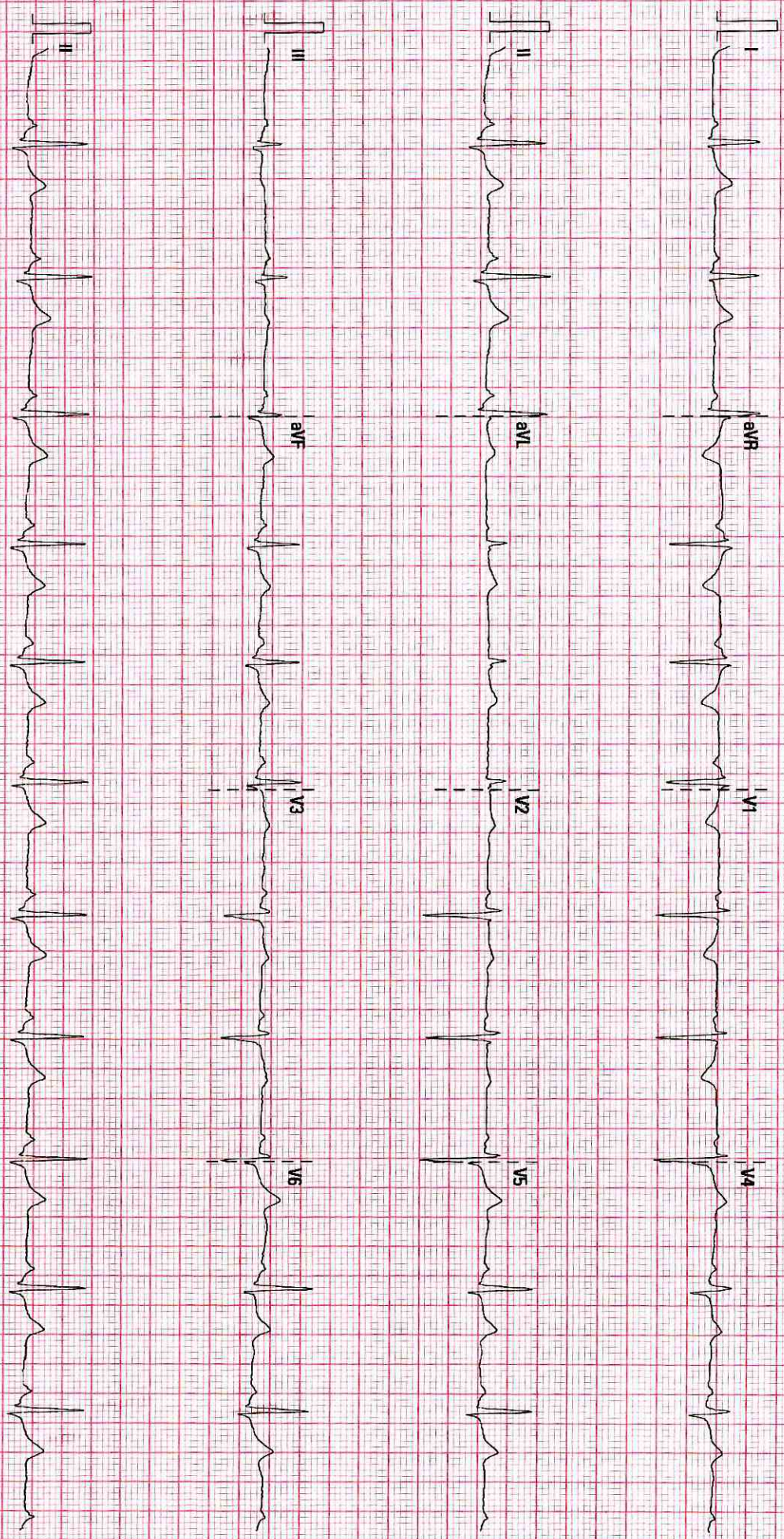
ID: 15050000150120
Name: VIDITA JAIN
Age: 29 Years
Gender: Female

2023-04-11 11:55:54

Heart Rate	70 bpm
PR Interval	136 ms
QRS Duration	94 ms
QT/QTc Interval	404/422 ms
P/QRS/T Axes	58/39/39 deg
DTc-Hodges	

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis



25 mm/s 10 mm/mV 50 Hz BDR-35 Hz

02 07 00 V28 A-1 SN:FN-91014901



Patient Name	Vidita Jain	Requested By	Dr. Alex Mathew
MRN	15050000150120	Procedure DateTime	2023-04-11 13:47:26
Age/Sex	29Y 7M/Female	Hospital	NH-Dharamshila

Inv. No.: 10099

X-RAY CHEST (PA)

- Lung fields are clear.
- Costophrenic angles are clear.
- Both domes of diaphragm are normal.
- Mediastinum and both hila are within normal limits.
- Cardiac size is normal.
- Bones under review are unremarkable.

Impression: Normal Study.

Dr. (Col.) Vikas Rastogi
MBBS, MD
SR. CONSULTANT RADIOLOGIST
DML 89340





Patient Name	Vidita Jain	Requested By	Dr. Alex Mathew
MRN	15050000150120	Procedure DateTime	2023-04-11 14:17:44
Age/Sex	29Y 7M/Female	Hospital	NH-Dharamshila

Investigation No.4169

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver : Shows grade II fatty change. Normal sized intrahepatic biliary and vascular channels are seen. No focal lesion. The common bile duct and portal vein are normal.

Gall bladder : Normal in size with normal wall thickness and contents.

The pancreas : The pancreas shows normal contour, echogenicity and size.

The spleen : is normal in size, contour and echopattern.

The right kidney : The right kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system. It measures 10.2 x 3.6 cm.

The left kidney : The left kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system. It measures 10.5 x 4.8 cm.

Urinary bladder is normal in wall & contents.

Uterus is normal in size and echogenicity of the myometrium. It measures 10.1 x 4.2 x 5.5 cm.

No ascites seen.

Impression :

- Grade II fatty liver.

Anjana

Dr. ANJANA CHANDRA
MBBS MD (Radiodiagnosis)

SR. CONSULTANT RADIOLOGIST
DMC - 26625

