





poonam tyagi

57 years

Female

Caucasian

ID:

10-Dec-2022

11:41:07

Manipal Hospitals, Chaziabad

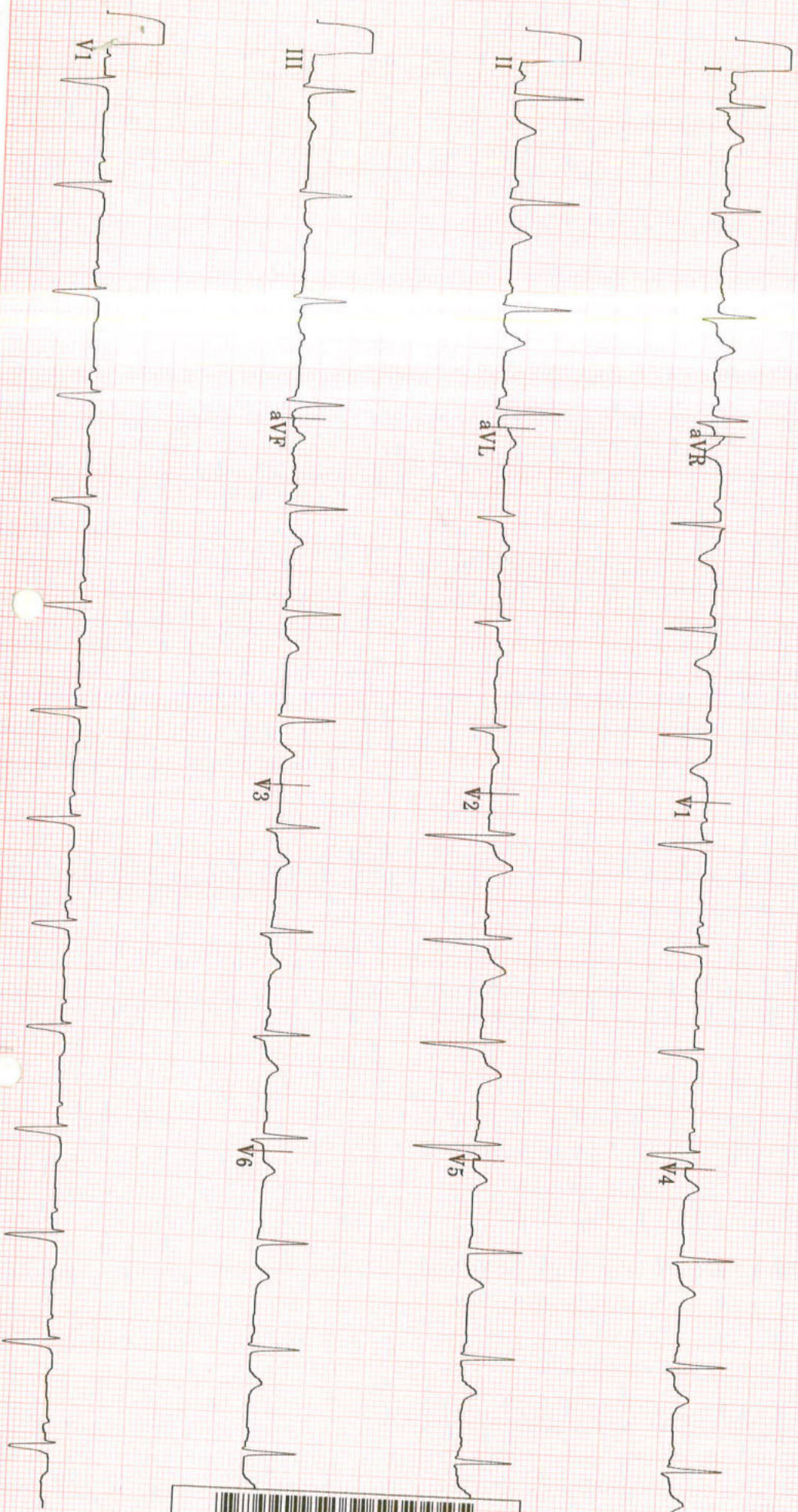
Vent. rate	84 bpm
PR interval	158 ms
QRS duration	84 ms
QT/QTc	352/415 ms
P-R-T axes	42 73 51

Technician:  
Test ind:

Normal sinus rhythm  
Normal ECG

Referred by:

Unconfirmed



20 Hz 25.0 mm/s 10.0 mm/mV





LABORATORY REPORT

Name : MRS POONAM TYAGI Age : 57 Yr(s) Sex :Female  
 Registration No : MH010633163 Lab No : 32221203351  
 Patient Episode : H1800000010 Collection Date : 10 Dec 2022 20:30  
 Referred By : HEALTH CHECK MGD Reporting Date : 11 Dec 2022 08:04  
 Receiving Date : 10 Dec 2022 20:46

BIOCHEMISTRY

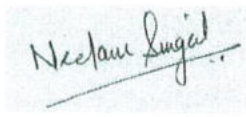
TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>THYROID PROFILE, Serum</b>			
T3 - Triiodothyronine (ECLIA)	1.03	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	6.11	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	1.600	μIU/mL	[0.340-4.250]
1st Trimester:0.6 - 3.4		micIU/mL	
2nd Trimester:0.37 - 3.6		micIU/mL	
3rd Trimester:0.38 - 4.04		micIU/mL	

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

\* References ranges recommended by the American Thyroid Association

- 1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128
- 2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

-----END OF REPORT-----



Dr. Neelam Singal  
CONSULTANT BIOCHEMISTRY

LABORATORY REPORT

Name : MRS POONAM TYAGI Age : 57 Yr(s) Sex :Female  
 Registration No : MH010633163 Lab No : 202212000595  
 Patient Episode : H18000000010 Collection Date : 10 Dec 2022 11:49  
 Referred By : HEALTH CHECK MGD Reporting Date : 10 Dec 2022 12:45  
 Receiving Date : 10 Dec 2022 11:49

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	4.28	millions/cu mm	[3.80-4.80]
HEMOGLOBIN	11.3 #	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	34.9 #	%	[36.0-46.0]
MCV (DERIVED)	81.5 #	fL	[83.0-101.0]
MCH (CALCULATED)	26.4 #	pg	[27.0-32.0]
MCHC (CALCULATED)	32.4	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	14.9 #	%	[11.6-14.0]
PLATELET COUNT (IMPEDENCE)	300	x 10 <sup>3</sup> cells/cumm	
MPV (DERIVED)	11.8		
WBC COUNT (TC) (IMPEDENCE)	9.15	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	66.0	%	[40.0-80.0]
Lymphocytes	25.0	%	[17.0-45.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	2.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	21.0 #	/1sthour	[0.0]

**LABORATORY REPORT**

<b>Name</b>	: MRS POONAM TYAGI	<b>Age</b>	: 57 Yr(s) Sex :Female
<b>Registration No</b>	: MH010633163	<b>Lab No</b>	: 202212000595
<b>Patient Episode</b>	: H1800000010	<b>Collection Date</b>	: 10 Dec 2022 12:26
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 10 Dec 2022 17:06
<b>Receiving Date</b>	: 10 Dec 2022 12:26		

**CLINICAL PATHOLOGY**

**ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine**

**MACROSCOPIC DESCRIPTION**

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction [pH]	7.0	(4.6-8.0)
Specific Gravity	1.010	(1.003-1.035)

**CHEMICAL EXAMINATION**

Protein/Albumin	Negative	(NOT DETECTED)
Glucose	Normal	(NOT DETECTED)
Ketone Bodies	Negative	(NOT DETECTED)
Urobilinogen	Normal	(NORMAL)
Bilirubin	Negative	(NOT DETECTED)
Nitrites	Negative	(NEGATIVE)
Leukocytes esterase	Negative	(NEGATIVE)

**MICROSCOPIC EXAMINATION (Automated/Manual)**

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	1-2 /hpf	(0-2/hpf)
Epithelial Cells	1-2 /hpf	
CASTS	nil	
Crystals	nil	
OTHERS	nil	

Name : MRS POONAM TYAGI  
 Registration No : MH010633163  
 Patient Episode : H1800000010  
 Referred By : HEALTH CHECK MGD  
 Receiving Date : 10 Dec 2022 13:35

Age : 57 Yr(s) Sex :Female  
 Lab No : 202212000595  
 Collection Date : 10 Dec 2022 13:33  
 Reporting Date : 10 Dec 2022 18:17

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	6.7 #	%	[0.0-5.6]
As per American Diabetes Association (ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk ) 5.7-6.4 Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	146	mg/dl	
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.			

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	197	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	109	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL Method : Enzymatic Immunoimhibition	39.7	mg/dl	[35.0-65.0]
VLDL- CHOLESTEROL (Calculated)	22	mg/dl	[0-35]
CHOLESTEROL, LDL, DIRECT	135.8 #	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129

Name : MRS POONAM TYAGI  
 Registration No : MH010633163  
 Patient Episode : H1800000010  
 Referred By : HEALTH CHECK MGD  
 Receiving Date : 10 Dec 2022 11:49

Age : 57 Yr(s) Sex :Female  
 Lab No : 202212000595  
 Collection Date : 10 Dec 2022 11:49  
 Reporting Date : 12 Dec 2022 11:32

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	5.0		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	3.4		<3 Optimal 3-4 Borderline >6 High Risk

Note:  
 Reference ranges based on ATP III Classifications.

TEST HAS BEEN PERFORMED AT METROPOLIS LAB

LAB NUM-220108000026444

KIDNEY PROFILE

Specimen: Serum

UREA 19.5 mg/dl [15.0-40.0]  
 Method: GLDH, Kinatic assay

BUN, BLOOD UREA NITROGEN 9.1 mg/dl [8.0-20.0]  
 Method: Calculated

CREATININE, SERUM 0.58 # mg/dl [0.70-1.20]  
 Method: Jaffe rate-IDMS Standardization

URIC ACID 6.3 mg/dl [4.0-8.5]  
 Method:uricase PAP

SODIUM, SERUM 139.1 mmol/L [136.0-144.0]

POTASSIUM, SERUM 4.75 mmol/L [3.60-5.10]  
 SERUM CHLORIDE 107.8 mmol/l [101.0-111.0]  
 Method: ISE Indirect

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 Receiving Date : 10 Dec 2022 11:49

Age : 57 Yr(s) Sex :Female  
 Lab No : 202212000595  
 Collection Date : 10 Dec 2022 11:49  
 Reporting Date : 12 Dec 2022 11:32

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
eGFR (calculated)	102.6	ml/min/1.73sq.m	[>60.0]
Technical Note			
eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.			

TEST HAS BEEN PERFORMED AT METROPOLIS LAB

LAB NUM-220108000026444

**LIVER FUNCTION TEST**

<b>BILIRUBIN - TOTAL</b> Method: D P D	0.26 #	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.11	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.15	mg/dl	[0.10-0.30]
TOTAL PROTEINS (SERUM) Method: BIURET	7.05	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.66	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.39	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.95		[1.00-2.50]



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Registration No : MH010633163  
Patient Episode : H1800000010  
Referred By : HEALTH CHECK MGD  
Receiving Date : 10 Dec 2022 11:49

Age : 57 Yr(s) Sex :Female  
Lab No : 202212000595  
Collection Date : 10 Dec 2022 11:49  
Reporting Date : 12 Dec 2022 11:32

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
AST(SGOT) (SERUM) Method: IFCC W/O P5P	20.21	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	28.91	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	84.1	IU/L	[40.0-98.0]
GGT	31.6		[7.0-50.0]

TEST HAS BEEN PERFORMED AT METROPOLIS LAB

LAB NUM-220108000026444

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-----END OF REPORT-----



Dr. Charu Agarwal

Name : MRS POONAM TYAGI  
Registration No : MH010633163  
Patient Episode : H1800000010  
Referred By : HEALTH CHECK MGD  
Receiving Date : 10 Dec 2022 11:13

Age : 57 Yr(s) Sex :Female  
Lab No : 202212000596  
Collection Date : 10 Dec 2022 11:13  
Reporting Date : 12 Dec 2022 11:33

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	120.5 #	mg/dl	[70.0-110.0]

TEST HAS BEEN PERFORMED AT METROPOLIS LAB

LAB NUM-220108000026444

-----END OF REPORT-----

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Dr. Charu Agarwal

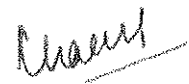
<b>Name</b>	: MRS POONAM TYAGI	<b>Age</b>	: 57 Yr(s) Sex :Female
<b>Registration No</b>	: MH010633163	<b>Lab No</b>	: 202212000597
<b>Patient Episode</b>	: H1800000010	<b>Collection Date</b>	: 10 Dec 2022 16:13
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 12 Dec 2022 11:30
<b>Receiving Date</b>	: 10 Dec 2022 16:13		

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>PLASMA GLUCOSE</b>			
Specimen:Plasma			
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS</b>	158.0 #	mg/dl	[80.0-140.0]
Method: Hexokinase			

Note:  
Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

-----END OF REPORT-----



Dr. Charu Agarwal



Name : MRS POONAM TYAGI  
Registration No : MH010633163  
Patient Episode : H1800000010  
Referred By : HEALTH CHECK MGD  
Receiving Date : 10 Dec 2022 13:26

Age : 57 Yr(s) Sex :Female  
Lab No : 202212000620  
Collection Date : 10 Dec 2022 13:26  
Reporting Date : 12 Dec 2022 12:10

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	B Rh(D) Positive		

Technical note:

*ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.*

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-----END OF REPORT-----



Dr. Charu Agarwal

## RADIOLOGY REPORT

<b>Name</b>	Poonam TYAGI	<b>Modality</b>	DX
<b>Patient ID</b>	MH010633163	<b>Accession No</b>	R4890078
<b>Gender/Age</b>	F / 57Y 2M 28D	<b>Scan Date</b>	10-12-2022 12:16:45
<b>Ref. Phys</b>	Dr. HEALTH CHECK MGD	<b>Report Date</b>	10-12-2022 14:58:22

## XR- CHEST PA VIEW

## FINDINGS:

LUNGS: Normal.  
TRACHEA: Normal.  
CARINA: Normal.  
RIGHT AND LEFT MAIN BRONCHI: Normal.  
PLEURA: Normal.  
HEART: Normal.  
RIGHT HEART BORDER: Normal.  
LEFT HEART BORDER: Normal.  
PULMONARY BAY: Normal.  
PULMONARY HILA: Normal.  
AORTA: Normal.  
THORACIC SPINE: Normal.  
OTHER VISUALIZED BONES: Normal.  
VISUALIZED SOFT TISSUES: Normal.  
DIAPHRAGM: Normal.  
VISUALIZED ABDOMEN: Normal.  
VISUALIZED NECK: Normal.

## IMPRESSION:

No significant abnormality seen.

*Please correlate clinically*



Dr. jaihari Agarwal, MD,  
Consultant Radiologist, Reg No 51570

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**RADIOLOGY REPORT**

<b>Name</b>	Poonam TYAGI	<b>Modality</b>	US
<b>Patient ID</b>	MH010633163	<b>Accession No</b>	R4890079
<b>Gender/Age</b>	F / 57Y 2M 28D	<b>Scan Date</b>	10-12-2022 13:06:54
<b>Ref. Phys</b>	Dr. HEALTH CHECK MGD	<b>Report Date</b>	10-12-2022 16:08:10

**USG ABDOMEN & PELVIS**

**FINDINGS**

LIVER: appears enlarged in size (measures 162 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade II fatty infiltration. Rest normal.  
 SPLEEN: Spleen is normal in size (measures 109 mm), shape and echotexture. Rest normal.  
 PORTAL VEIN: Appears normal in size and measures 10 mm.  
 COMMON BILE DUCT: Appears normal in size and measures 3.8 mm.  
 IVC, HEPATIC VEINS: Normal.  
 BILIARY SYSTEM: Normal.  
 GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.  
 PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.  
 KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.  
 Right Kidney: measures 108 x 36 mm.  
 Left Kidney: measures 99 x 45 mm.  
 PELVI-CALYCEAL SYSTEMS: Mild left sided hydronephrosis is seen due to left upper ureteric calculus measuring 6 mm. Pelvicalyceal system is compact on right side.  
 NODES: Not enlarged.  
 FLUID: Nil significant.  
 URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.  
 Uterus is anteverted and measures 46 x 43 x 21 mm. It shows postmenopausal atrophic changes.  
 Endometrial thickness measures 3 mm.  
 Cervix appears normal.  
 Both ovaries are not seen probably atrophied.  
 BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

- Hepatomegaly with diffuse grade II fatty infiltration in liver.
- Hydronephrosis with left upper ureteric calculus.

Recommend clinical correlation.

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RADIOLOGY REPORT

<b>Name</b>	Poonam TYAGI	<b>Modality</b>	US
<b>Patient ID</b>	MH010633163	<b>Accession No</b>	R4890079
<b>Gender/Age</b>	F / 57Y 2M 28D	<b>Scan Date</b>	10-12-2022 13:06:54
<b>Ref. Phys</b>	Dr. HEALTH CHECK MGD	<b>Report Date</b>	10-12-2022 16:08:10



Dr. Prabhath Prakash Gupta,  
MBBS,DNB,MNAMS,FRCCR(I)  
Consultant Radiologist, Reg no DMC/R/14242

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