

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



DR. PRAKASH D MAKWANA  
 M.D.  
 REG.NO.G-29078  
 MO.NO-9722116164

UHID: 06123103		Date: 28/1/23	Time:
Patient Name: ROCHA		Height: 152 cm	Weight: 64.6 kg
Age / Sex: 30 Y / F		LMP:	
History: C/C/O: NO ANY COMPLAINT		History: H/O A MIA family cardiac	
Allergy History: NKDA		Addiction: -	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:			
Temperature: Afebrile			
Pulse: 78/min			
BP: 120/90 mmHg			
SPO2: 99% on Room Air			
Provisional Diagnosis:			



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CIN: L85110GJ2012PLC072647



DR. TAPAS RAVAL

MBBS . D.O

(FELLOW IN PHACO & MEDICAL  
RATINA)

REG.NO.G-21350

UHID: 00123133	Date: 22/5/23	Time:
Patient Name: RUCHIKA	Age / Sex: 30	Height: 152 cm
	Weight: 64.6 kg	
History: C10 Ruchika Chauhan		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: D.V. L G16 G16 M.V L G16 G16 color vision normal		
Diagnosis:		

28.01.2023 10:07:08 AM  
AASHKA HOSPITAL LTD,  
SARGASAN  
GANDHINAGAR

Location: 1  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

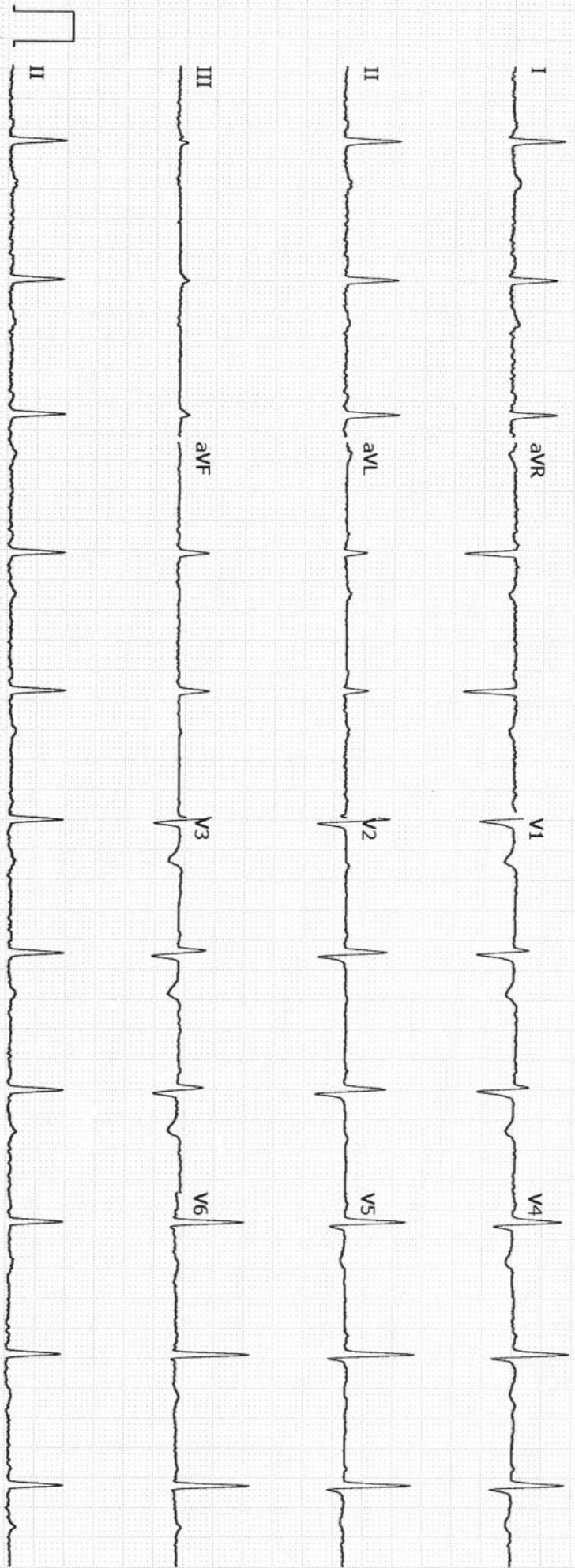
Room:

67 bpm  
-- / -- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 80 ms  
QT / QTcBaz : 390 / 412 ms  
PR : 120 ms  
P : 80 ms  
RR / PP : 896 / 895 ms  
P / QRS / T : 22 / 41 / 12 degrees

Normal sinus rhythm  
T wave abnormality, consider anterior ischemia  
Abnormal ECG



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**PATIENT NAME: RUCHI GOYAL**

**GENDER/AGE: Female / 30 Years**

**DATE: 28/01/23**

**DOCTOR:**

**OPDNO: 00123133**

**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.

**IMPRESSION:**

**No evident significant abnormality detected.**

  
**DR. SNEHAL PRAJAPATI**  
**CONSULTANT RADIOLOGIST**

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**PATIENT NAME: RUCHI GOYAL**

**GENDER/AGE: Female / 30 Years**

**DATE: 28/01/23**

**DOCTOR:**

**OPDNO: 00123133**

**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 10.1 x 4.6 cms in size.

Left kidney measures about 10.6 x 4.8 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 190 cc.

**UTERUS:** Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 4 mm. No evidence of uterine mass lesion is seen.

Simple subcentimeter size follicular cysts are seen in right ovary.

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

Dr. SNEHA B. PRAJAPATI, G-0064



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www.aashkahospital.com (9825012235)

CIN: L85110GJ2012PLC072647



PATIENT NAME: RUCHI GOYAL

GENDER/AGE: Female / 30 Years

DATE: 28/01/23

DOCTOR: DR. HASIT JOSHI

OPDNO: O0123133

### 2D-ECHO

MITRAL VALVE	: MILD MVP	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 29mm	
LEFT ATRIUM	: 34mm	
LV Dd / Ds	: 45/27mm	EF 63%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/0.7m/s	
AORTIC	: 1.4m/s	
PULMONARY	: 1.2m/s	
COLOUR DOPPLER	: MILD MR/TR	
RVSP	: 30mmHg	
CONCLUSION	: MILD MVP / MILD MR; NORMAL LV SIZE / SYSTOLIC FUNCTION; MILD TR, NO PAH; IAS FLOPPY.	

CARDIOLOGIST

DR. HASIT JOSHI (9825012235)



## LABORATORY REPORT



Name : RUCHI GOYAL	Sex/Age : Female/ 30 Years	Case ID : 30102200837
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527028
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Jan-2023 08:47	Sample Type :	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : O0123133
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22238519

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Haemogram (CBC)</b>			
Haemoglobin (Colorimetric)	11.2	G%	12.00 - 15.00
PCV(Calc)	34.31	%	36.00 - 46.00
Lymphocyte	47.0	%	20.00 - 40.00
Monocyte	190	/ $\mu$ L	200.00 - 1000.00
<b>Lipid Profile</b>			
VLDL	8.55	mg/dL	10 - 40
LDL Cholesterol	57.71	mg/dL	65 - 100
<b>Thyroid Function Test</b>			
Thyroxine (T4)	5.0	ng/dL	5.5 - 11.0

Abnormal Result(s) Summary End

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

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## LABORATORY REPORT



Name : RUCHI GOYAL	Sex/Age : Female/ 30 Years	Case ID : 30102200837
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527028
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : O0123133
Report Date and Time : 28-Jan-2023 11:29	Acc. Remarks : Normal	Ref Id2 : O22238519

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin (Colorimetric)	L 11.2	G%	12.00 - 15.00
RBC (Electrical Impedance)	3.98	millions/cumm	3.80 - 4.80
PCV(Calc)	L 34.31	%	36.00 - 46.00
MCV (RBC histogram)	86.2	fL	83.00 - 101.00
MCH (Calc)	28.1	pg	27.00 - 32.00
MCHC (Calc)	32.6	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.80	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	4740	/μL	4000.00 - 10000.00
	[ % ]	EXPECTED VALUES	[ Abs ]
Neutrophil	46.0	% 40.00 - 70.00	2180 /μL 2000.00 - 7000.00
Lymphocyte	H 47.0	% 20.00 - 40.00	2228 /μL 1000.00 - 3000.00
Eosinophil	3.0	% 1.00 - 6.00	142 /μL 20.00 - 500.00
Monocytes	4.0	% 2.00 - 10.00	L 190 /μL 200.00 - 1000.00
Basophil	0.0	% 0.00 - 2.00	0 /μL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	330000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	0.98		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Lymphocytosis.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

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

*Shah*

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

Dr. Shreya Shah  
M.D. (Pathologist)

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## LABORATORY REPORT



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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527028
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : 00123133
Report Date and Time : 28-Jan-2023 11:29	Acc. Remarks : Normal	Ref Id2 : 022238519

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

*Shah*

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M.D. (Path. & Bact.)

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

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Ref.By : HOSPITAL Dis. At : Pt. ID : 2527028  
Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : 00123133
Report Date and Time : 28-Jan-2023 11:29	Acc. Remarks : Normal	Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	16	mm after 1hr 3 - 20		

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

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M.D. (Path. & Bact.)

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

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## LABORATORY REPORT



Name : **RUCHI GOYAL** Sex/Age : **Female/ 30 Years** Case ID : **30102200837**  
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527028**  
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : 00123133
Report Date and Time : 28-Jan-2023 09:05	Acc. Remarks : Normal	Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### HAEMATOLOGY INVESTIGATIONS

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

ABO Type	<b>B</b>
Rh Type	<b>POSITIVE</b>

Note:(LL-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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## LABORATORY REPORT



Name : **RUCHI GOYAL** Sex/Age : **Female/ 30 Years** Case ID : **30102200837**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527028**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Spot Urine	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : 00123133
Report Date and Time : 28-Jan-2023 09:14	Acc. Remarks : Normal	Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour **Pale yellow**

Transparency **Clear**

Chemical Examination By Sysmex UC-3500

Sp.Gravity **1.025** 1.005 - 1.030

pH **5.5** 5 - 8

Leucocytes (ESTERASE) **Negative** Negative

Protein **Negative** Negative

Glucose **Negative** Negative

Ketone Bodies Urine **Negative** Negative

Urobilinogen **Negative** Negative

Bilirubin **Negative** Negative

Blood **Negative** Negative

Nitrite **Negative** 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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : RUCHI GOYAL Sex/Age : Female/ 30 Years Case ID : 30102200837  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2527028  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 28-Jan-2023 08:47 Sample Type : Spot Urine Mobile No : 8347441869  
 Sample Date and Time : 28-Jan-2023 08:47 Sample Coll. By : Ref Id1 : 00123133  
 Report Date and Time : 28-Jan-2023 09:14 Acc. Remarks : Normal Ref Id2 : 022238519

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	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
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	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

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

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## LABORATORY REPORT



Name : **RUCHI GOYAL** Sex/Age : **Female/ 30 Years** Case ID : **30102200837**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527028**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47 Sample Type : Plasma Fluoride F, Plasma Fluoride PP Mobile No : 8347441869  
 Sample Date and Time : 28-Jan-2023 08:47 Sample Coll. By : Ref Id1 : 00123133  
 Report Date and Time : 28-Jan-2023 15:49 Acc. Remarks : Normal Ref Id2 : 022238519  
**TEST** **RESULTS** **UNIT** **BIOLOGICAL REF RANGE** **REMARKS**

### BIOCHEMICAL INVESTIGATIONS

#### Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F	97.22	mg/dL	70.0 - 100
Plasma Glucose - PP	105	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 glucoseer guidelines  
 >=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

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

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Name : RUCHI GOYAL      Sex/Age : Female/ 30 Years      Case ID : 30102200837  
 Ref.By : HOSPITAL      Dis. At :      Pt. ID : 2527028  
 Bill. Loc. : Aashka hospital      Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47      Sample Type : Serum      Mobile No : 8347441869  
 Sample Date and Time : 28-Jan-2023 08:47      Sample Coll. By :      Ref Id1 : 00123133  
 Report Date and Time : 28-Jan-2023 10:48      Acc. Remarks : Normal      Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b>	<b>116.96</b>	mg/dL	110 - 200
<b>HDL Cholesterol</b>	<b>50.7</b>	mg/dL	48 - 77
<b>Triglyceride</b>	<b>42.77</b>	mg/dL	40 - 200
<b>VLDL</b> <i>Calculated</i>	L <b>8.55</b>	mg/dL	10 - 40
<b>Chol/HDL</b> <i>Calculated</i>	<b>2.31</b>		0 - 4.1
<b>LDL Cholesterol</b> <i>Calculated</i>	L <b>57.71</b>	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
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- 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 assesment

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Reg Date and Time : 28-Jan-2023 08:47 Sample Type : Serum Mobile No : 8347441869  
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TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

<b>S.G.P.T.</b>	<b>23.14</b>	U/L	0 - 31	
<b>S.G.O.T.</b>	<b>20.18</b>	U/L	15 - 37	
<b>Alkaline Phosphatase</b>	<b>70.12</b>	U/L	35 - 105	
<b>Gamma Glutamyl Transferase</b>	<b>28.01</b>	U/L	5 - 36	
<b>Proteins (Total)</b>	<b>7.35</b>	gm/dL	6.4 - 8.2	
<b>Albumin</b>	<b>4.58</b>	gm/dL	3.4 - 5	
<b>Globulin</b> <i>Calculated</i>	<b>2.77</b>	gm/dL	2 - 4.1	
<b>A/G Ratio</b> <i>Calculated</i>	<b>1.7</b>		1.0 - 2.1	
<b>Bilirubin Total</b>	<b>0.30</b>	mg/dL	0.2 - 1.0	
<b>Bilirubin Conjugated</b>	<b>0.16</b>	mg/dL		
<b>Bilirubin Unconjugated</b> <i>Calculated</i>	<b>0.14</b>	mg/dL	0 - 0.8	

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Sex/Age : Female/ 30 Years  
Dis. At :  
Case ID : 30102200837  
Pt. ID : 2527028  
Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47  
Sample Date and Time : 28-Jan-2023 08:47  
Report Date and Time : 28-Jan-2023 10:49  
Sample Type : Serum  
Sample Coll. By :  
Acc. Remarks : Normal  
Mobile No : 8347441869  
Ref Id1 : 00123133  
Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDH</small>	13.0	mg/dL	6.00 - 20.00	
Creatinine	0.56	mg/dL	0.50 - 1.50	
Uric Acid	3.68	mg/dL	2.6 - 6.2	

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

*Shah*

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M.D. (Path. & Bact.)

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

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## LABORATORY REPORT



Name : **RUCHI GOYAL** Sex/Age : **Female/ 30 Years** Case ID : **30102200837**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2527028**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Whole Blood EDTA	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : 00123133
Report Date and Time : 28-Jan-2023 11:00	Acc. Remarks : Normal	Ref Id2 : 022238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### Glycated Haemoglobin Estimation

<b>HbA1C</b>	<b>5.62</b>		% of total Hb <5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
<b>Estimated Avg Glucose (3 Mths)</b> <i>Calculated</i>	<b>114.59</b>	mg/dL		

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 glycemc 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(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.  
 In such circumstances glycemc 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)

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## LABORATORY REPORT



Name : RUCHI GOYAL	Sex/Age : Female/ 30 Years	Case ID : 30102200837
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527028
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Serum	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : O0123133
Report Date and Time : 28-Jan-2023 10:45	Acc. Remarks : Normal	Ref Id2 : O22238519

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Thyroid Function Test</b>				
Triiodothyronine (T3)	113.92	ng/dL	70 - 204	
Thyroxine (T4) <small>CMIA</small>	L 5.0	ng/dL	5.5 - 11.0	
TSH <small>CMIA</small>	1.179	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 concentration (>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), PPTH 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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : RUCHI GOYAL	Sex/Age : Female/ 30 Years	Case ID : 30102200837
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2527028
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Jan-2023 08:47	Sample Type : Serum	Mobile No : 8347441869
Sample Date and Time : 28-Jan-2023 08:47	Sample Coll. By :	Ref Id1 : O0123133
Report Date and Time : 28-Jan-2023 10:45	Acc. Remarks : Normal	Ref Id2 : O22238519

**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, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal 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 triiodothyronine (T3) 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 hyperthyroid patients, hyperthyroidism 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	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	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/↑	↓

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

# 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.

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

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**Neuberg Supratech Reference Laboratories Private Limited**

"KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 | Phone : 079-40408181 / 61618181  
Email : contact@supratechlabs.com | Website : www.supratechlabs.com | CIN : U85195GJ2013PTC077365,2013-14



Mediwheel 4 days ago  
to me, mediwheelwellness ✓



Mediwheel  
Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear Ruchi goyal,

Please find the confirmation for following request.

**Booking Date** : 24-01-2023  
**Package Name** : Medi-Wheel Metro Full Body Health Checkup Female Below 40  
**Name of Diagnostic/Hospital** : Aashka Multispeciality Hospital  
**Address of Diagnostic/Hospital** : Between Sargasan & Reliance Cross Road  
**Contact Details** : 9879752777/7577500900  
**City** : Gandhi Nagar  
**State** : Gujarat  
**Pincode** : 382315  
**Appointment Date** : 28-01-2023  
**Confirmation Status** : Confirmed  
**Preferred Time** : 8:00am-8:30am  
**Comment** : APPOINTMENT TIME 8:00AM

**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

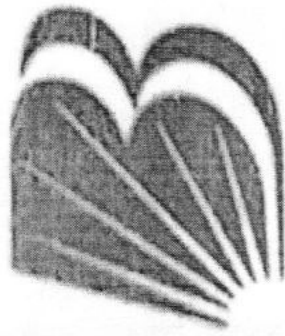
**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.





बैंक ऑफ़ बड़ोदा  
Bank of Baroda

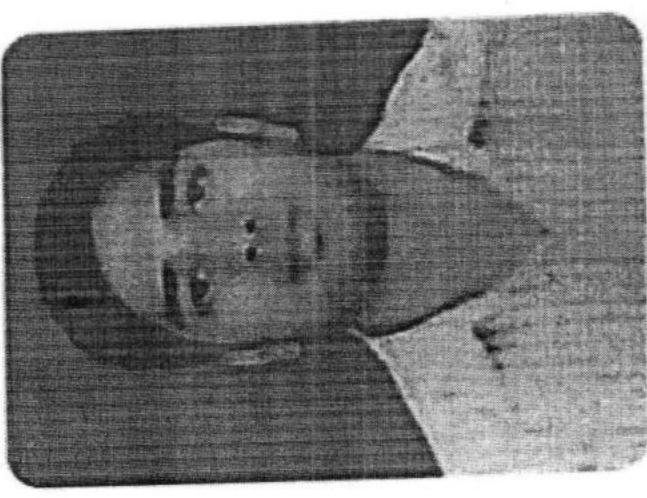
नाम : मनीष कुमार गुप्ता

Name : Manishkumar Gupta

कर्मचारी कूट क्र. : 162338

Employee Code No.

जारीकर्ता प्राधिकारी  
Issuing Authority



धारक के हस्ताक्षर  
Signature of Holder