

(A Unit of Sparsh Multispecialty Hospital Private Limited) (Formerly known as Paedia Health Private Limited ) CIN: U85110CT2005PTC017751



: 39392 UHID

Visit ID

: 0000197304

Patient Name : MS. LAXMI MESHRAM

Spec No.

Age / Sex Consultant : 56Y / FEMALE

Order Date

: 09/08/2022 9:46AM

Ref. By

: DR. HOSPITAL CASE

: DR. HOSPITAL CASE

Samp.Date

Category

: MEDIWHEEL

Report Date

: 09/08/22 01:31PM

# **SONOGRAPHY**

# **USG BREAST/SONOMAMMOGRAPHY (BOTH SIDE)**

#### REPORT :

- Both breasts are showing normal fatty tissue and glandular structures.
- No evidence of any obvious mass lesion, solid or cystic lesions or abnormal echotexture is seen.
- Superficial planes also show no significant abnormality.

#### **IMPRESSION:**

No remarkable Abnormality detected in the current scan.

Please correlate clinically

MBBS, DNB(RADIO), MNAMS, MANBO

Fetal Ultrasound & Fetal Medicine (FGi-BFMC)

NY CECNAC 4404/2012

Please bring all your previous reports. You should preserve and bring this report for future reference.



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Report Date

: 09/08/22 04:25PM

# **SONOGRAPHY USG WHOLE ABDOMEN**

- \* LIVER: Normal in size (13.06 cm), shows diffuse fine increased echogenicity of parenchyma with no evidence of any focal lesion seen. IHBRs are not dilated.
- \*PORTO CAVAL SYSTEM: Hepatic veins and IVC appear normal and show normal respiratory variation. Splenic vein is normal. Portal vein is normal.
- \*COLLECTING DUCT & CBD:Normal in size and have echo lucent lumen.
- \*GALL BLADDER : Seen in distended state with normal wall and lumen is echofree
- \*SPLEEN: Normal in size, shape & echo texture. No focal lesions seen.
- \*PANCREAS:Pancreatic head, body & tail visualized and have ,normal size,shape & echo texture.
- \*KIDNEYS: Both kidneys are of normal shape, size and position.

Cortical thickness is normal .CMD is maintained. There is no evidence of hydronephrosis or calculus

- \*URINARY BLADDER: Seen in distended state and has normal wall architecture.Lumen is echo free.
- \*UTERUS: Post Menopausal in status.
- \*BOTH OVARIES: Bilateral Ovaries could not be visualized Distinctly ? Atrophic

No free fluid is seen in the peritoneal cavity.

There is no evidence of any retroperitoneal lymphadenopathy/mass.

#### FINAL IMPRESSION:

- Fatty Liver (Grade I)
- Please correlate clinically, followup USG is recommended.

Dr. SAMIR KATHALE MBBS, DNB(RADIO), MNAMS, MANBD Fetal Ultrasound & Fetal Medicine (FGi-BFMC)

CGMC

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UHID : 39392 VISITID : 0000197304

PATIENT NAME : MS. LAXMI MESHRAM ORDER DATE : 09/08/2022 9:46:00AM AGE/SEX : 56Y/FEMALE SAMP. DATE : 09/08/2022 11:36:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10383754

> RESULT DATE : 09/08/2022 1:52:00PM

: BANK OF BARODA

# **DEPARTMENT OF PATHOLOGY**

LIPID PROFILE				
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
CHOLESTEROL TOTAL	137 mg / dl	Low	150 - 220	
TRIGLYCERIDES - SERUM	71 mg / dl	Normal	60 - 165	
HDL	51.80 mg / dl	Normal	35 - 80	
LDL	71.0 mg/dL	Low	90 - 160	
VLDL	14.20	Low	20 - 50	
CHOL: HDL Ratio	2.64:1		3.5 - 5.5	
LDL: HDL Ratio	1.37:1		-	

**TECHNICIAN** 

NOTE: These reports are for assisting Doctors/Physicians in their treatment and not for Nedio legal purposes and should be correlated clinically.

Sharima

SHARMA OLOGY



(A Unit of Sparsh Multispecialty Hospital Private Limited)
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AGE/SEX : 56Y/FEMALE SAMP. DATE : 09/08/2022 11:36:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10383764

RESULT DATE : 09/08/2022 12:25:00PM

TPA : BANK OF BARODA

## **DEPARTMENT OF PATHOLOGY**

CBC (COMPLETE BLOOD C	OUNT)		
PARAMETER	VALUE	RESULT	REFERENCE RANGE
HAEMOGLOBIN (Hb)	13.0 gm%	Normal	12 - 16
TOTAL RBC COUNT	4.33 Million/cumm	Low	4.5 - 5.1
HAEMATOCRIT (PCV)	38.7 %	Normal	35.9 - 44.6
RBC INDICES			
MCV	89.3 fl	Normal	78 - 96
MCH	30.0 pg	Normal	27 - 32
MCHC	33.6 %	Normal	33 - 37
RDW	14.0 %	Normal	11 - 16
TOTAL WBC COUNT (TLC)	6900 /cumm	Normal	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	72 %	Normal	0 - 75
LYMPHOCYTES	22 %	Normal	22 - 48
EOSINOPHILS	02 %	Normal	0 - 6
MONOCYTES	04 %	Normal	2 - 10
BASOPHILS	00 %	Normal	0 - 2
BANDS	00 %	Normal	0 - 5
BLAST	00 %	Normal	
PLATELET COUNT	254000 /cumm	Normal	150000 - 450000

#### **TECHNICIAN**

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13/08/2022 3:20PM



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**Sparsh Multispecialty Hospital** 

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UHID

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CONSULTANT DOCTOR

PATIENT NAME

AGE/SEX

: HOSPITAL CASE

VISITID

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ORDER DATE

: 09/08/2022 9:46:00AM

SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383753

RESULT DATE

: 09/08/2022 1:54:00PM

TPA

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### **DEPARTMENT OF PATHOLOGY**

# **BUN (BLOOD UREA NITROGEN)**

**PARAMETER** 

VALUE

RESULT

REFERENCE RANGE

BUN (BLOOD UREA NITROGEN)

8.87 mg / dl

Normal

8 - 23

**TECHNICIAN** 

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13/08/2022 3:19PM



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PATIENT NAME

: MS. LAXMI MESHRAM

AGE/SEX

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CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

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ORDER DATE

: 09/08/2022 9:46:00AM

SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO RESULT DATE : 10383757

: 09/08/2022 1:54:00PM

: BANK OF BARODA

### **DEPARTMENT OF PATHOLOGY**

### **GGT (GAMMA GLUTAMYL TRANSFERASE)**

**PARAMETER** 

**VALUE** 

RESULT

REFERENCE RANGE

GGT (GAMMA GLUTAMYL TRANSFERASE)

14 U/L

Normal

5 - 36

**TECHNICIAN** 

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PATIENT NAME

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AGE/SEX

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CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

: 0000197304

ORDER DATE SAMP. DATE

: 09/08/2022 9:46:00AM

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383755

RESULT DATE : 09/08/2022 1:53:00PM

: BANK OF BARODA

# **DEPARTMENT OF PATHOLOGY**

URIC ACID

**PARAMETER URIC ACID** 

**VALUE** 

5.70 mg/dL

RESULT

REFERENCE RANGE

Normal

2.5 - 6.8

**TECHNICIAN** 

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UHID

: 39392

PATIENT NAME

: MS. LAXMI MESHRAM

AGE/SEX

: 56Y/FEMALE

CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

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ORDER DATE

: 09/08/2022 9:46:00AM

SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383764

RESULT DATE

: 09/08/2022 2:06:00PM

TPA

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## **DEPARTMENT OF PATHOLOGY**

### **BLOOD GROUPING AND RH TYPING**

PARAMETER BLOOD GROUP

**VALUE** 

"A"

RH FACTOR

Positive

RESULT

REFERENCE RANGE

\_

TECHNICIAN

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13/08/2022

3:18PM

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UHID

: 39392

: MS. LAXMI MESHRAM

CONSULTANT DOCTOR

: 56Y/FEMALE

: HOSPITAL CASE

VISITID

: 0000197304

ORDER DATE

: 09/08/2022 9:46:00AM

: 09/08/2022 11:36:00AM

SAMP. DATE

SPEC. NO RESULT DATE

: 10383756 : 09/08/2022 1:54:00PM

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## **DEPARTMENT OF PATHOLOGY**

**CREATININE** 

PATIENT NAME

AGE/SEX

**PARAMETER CREATININE** 

VALUE

0.76 mg / dl

RESULT

REFERENCE RANGE

Normal 0.6 - 1.2

**TECHNICIAN** 

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AGE/SEX

: 56Y/FEMALE

CONSULTANT DOCTOR

PATIENT NAME

: HOSPITAL CASE

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ORDER DATE

: 09/08/2022 9:46:00AM

SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383761

RESULT DATE

: 09/08/2022 12:05:00PM

TPA

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### **DEPARTMENT OF PATHOLOGY**

### **URINE SUGAR FASTING**

**PARAMETER** 

URINE FOR SUGAR

VALUE

Nil

RESULT

REFERENCE RANGE

**TECHNICIAN** 

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: 39392

PATIENT NAME

: MS. LAXMI MESHRAM

AGE/SEX

: 56Y/FEMALE

CONSULTANT DOCTOR

**BLOOD SUGAR FASTING** 

: HOSPITAL CASE

**VISITID** 

: 0000197304

ORDER DATE

: 09/08/2022 9:46:00AM

SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383758

RESULT DATE

: 09/08/2022 1:53:00PM

TPA

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## **DEPARTMENT OF PATHOLOGY**

# **BLOOD SUGAR - FASTING AND PP**

**PARAMETER** 

**BLOOD SUGAR PP** 

**VALUE** 

116 mg/dL

148 mg/dL

RESULT

REFERENCE RANGE

Normal High

80 - 120 120 - 140

Dr. ANJANA SHARMA D.N.B PATHOLOGY

**TECHNICIAN** 

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PATIENT NAME : MS. LAXMI MESHRAM ORDER DATE : 09/08/2022 9:46:00AM

AGE/SEX : 56Y/FEMALE SAMP. DATE : 09/08/2022 11:36:00AM

CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10383753

RESULT DATE : 09/08/2022 2:24:00PM

TPA : BANK OF BARODA

### **DEPARTMENT OF PATHOLOGY**

**T3,T4 TSH** 

PARAMETER VALUE RESULT REFERENCE RANGE

 T3 (TRIIODOTHYRONINE)
 1.558 ng/ml
 Normal
 0.69 - 2.15

 T4 (THYROXINE)
 73.41 ng/ml
 Normal
 52 - 127

 TSH (THYROID STIMULATING HORMONE)
 2.918 uIU/ml
 Normal
 0.3 - 4.5

REFERENCE GROUP REFERENCE RANGE in uIU/mL

As per American Thyroid Association

Adult Females (> 20 years)

Pregnancy

0.30- 4.5

 1st Trimester
 0.10- 2.50

 2nd Trimester
 0.20 - 3.00

 3rd Trimester
 0.30 - 3.00

#### Note:

TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between  $6-10 \ pm$ . The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.

- 1. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- 1. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
  - Thyroid dysfunction in infancy and early childhood

Dr. ANJANA SHARMA
D. N. B. PATHOLOGY,
CONSUL MANT 1818

#### **TECHNICIAN**

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13/08/2022 3:17PM



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PATIENT NAME

: MS. LAXMI MESHRAM

AGE/SEX

: 56Y/FEMALE

CONSULTANT DOCTOR

: HOSPITAL CASE

VISITID

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ORDER DATE

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SAMP. DATE

: 09/08/2022 11:36:00AM

SPEC. NO

: 10383765

**RESULT DATE** 

: 09/08/2022 1:54:00PM

: BANK OF BARODA

## **DEPARTMENT OF PATHOLOGY**

### HBA1c (GLYCOSYLATED HAEMOGLOBIN)

**PARAMETER** 

VALUE

RESULT

REFERENCE RANGE

BPATHOLOGY

HBA1 C (GLYCOSYLATED

HEAMOGLOBIN)

5.8 %

Normal

4 - 6

Interpretation

As per American diabetes Association (ADA)

Reference Group

- HbA1c In%

Non diabetic >= 18 years - 4.0 - 6.0 At risk (Prediabetes)

->=6.0 to <=6.5

Diagnosing diabetes

- >=6.5

Therapeutic goals for glycemic control

- Age> 19 years

Goal of therapy: <7.0</li>

- Action suggested: >8.0

- Age< 19 years

- goal of therapy: < 7.5

#### Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient is recently under good control may still have a high concentration of HbA1c.converse is true for a diabetic previously under good control now poorly controlled.

2. Target goals of <7.0 % may be beneficial in patient with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patient with significant complication of diabetes, limited life expectancy of extensive co-morbid condition, targeting a goal of <7.0% may not be appopriate.

#### Comments

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long glycemic control as compared to blood and urinary glucose determination.

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13/08/2022 3.17PM



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UHID

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: 39392

URINE ROUTINE AND MICROSCOPY

: MS. LAXMI MESHRAM

AGE/SEX

PATIENT NAME

: 56Y/FEMALE

CONSULTANT DOCTOR

: HOSPITAL CASE

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: 09/08/2022 11:36:00AM

SPEC. NO

: 10383760

RESULT DATE

: 09/08/2022 12:05:00PM

TPA

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## **DEPARTMENT OF PATHOLOGY**

CHERT ROOTERLE AND PIECE	33001 1			
PARAMETER	VALUE	RESULT	REFERENCE RANGE	
PHYSICAL EXAMINATION				
QUANTITY	10 ml			
COLOUR	Pale Yellow		_ 5 - 5	
APPEARANCE	Clear		-	
REACTION	Acidic			
CHEMICAL EXAMINATION				
ALBUMIN	Nil			
SUGAR	Nil			
MICROSCOPIC EXAMINATION				
EPITHELIAL CELLS	8-10 /hpf		0 - 5	
PUS CELLS	6-8 /hpf		1 - 2	
RBC	Nil /hpf		-	
CAST	Nil /lpf			
CRYSTAL	Nil			
AMORPHOUS MATERIAL DEPOSIT	Nil			
OTHERS	Nil		T- 37 17 17 17 17 17 17 17 17 17 17 17 17 17	

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13/08/2022 3:17PM



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CONSULTANT DOCTOR : HOSPITAL CASE SPEC. NO : 10383756

RESULT DATE : 09/08/2022 1:53:00PM

TPA : BANK OF BARODA

### **DEPARTMENT OF PATHOLOGY**

# LFT (LIVER FUNCTION TEST)

PARAMETER	VALUE	RESULT	REFERENCE RANGE
BILIRUBIN TOTAL	0.63 mg/dL	Normal	0.1 - 1.2
BILIRUBIN DIRECT	0.20 mg / dl	Normal	0.1 - 0.6
BILIRUBIN INDIRECT	0.43 mg / dl	High	0.1 - 0.4
ALKALINE PHOSPHATASE	49 U/L	Normal	0 - 240
SGOT	26 U/L	Normal	0 - 46
SGPT	28 U/L	Normal	0 - 40
TOTAL PROTEIN	6.96 g/dl	Normal	6 - 8
ALBUMIN	4.75 g/dl	Normal	4.1 - 5.3
GLOBULIN	2.21 g/dl	Normal	2 - 3.5
A.G.RATIO	2.15:1		1 - 2.5

Washarma

Dr. ANJANASHARMA D.N.B. ATHOLOGY

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3:16PM



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AGE/SEX

: 56Y/FEMALE

SAMP. DATE

: 09/08/2022 11:36:00AM

CONSULTANT DOCTOR : HOSPITAL CASE

SPEC. NO

: 10383766

RESULT DATE : 09/08/2022 3:17:00PM

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# **DEPARTMENT OF PATHOLOGY**

# **ESR (ERYTHROCYTE SEDIMENTATION RATE)**

PARAMETER	VALUE	RESULT	REFERENCE RANGE
ESR	10 mm at end of 1 hr	Normal	0 - 30

**TECHNICIAN** 

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3:15PM

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