

Patient Name : **MRS. MANISHA KUMARI**
Patient ID : 48743
Age / Sex : 29 years / Female
Referred by : MEDIWHEEL
Bill ID : 79223

Collected : Apr 08, 2023, 10:03 a.m.
Reported : Apr 08, 2023, 05:09 p.m.
Sample ID :



220972

Test Description	Results	Units	Biological Reference Range
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ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)

Sample Type : Serum

Ultrasensitive Thyroid Stimulative Hormone (TSH) [CLIA]	1.66	μIU/mL	0.3- 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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Clinical Significance :-

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

END OF REPORT



Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<u>FASTING BLOOD SUGAR</u>			
Sample Type : Flouride R			
Fasting Blood Sugar [GOD - POD]	92.3	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

END OF REPORT



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POST PRANDIAL BLOOD SUGAR

Sample Type : Flouride PP

Post Prandial Blood Sugar [GOD - POD]	110.4	mg/dl	110-180
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

END OF REPORT



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BLOOD GROUP

Sample Type : EDTA / Whole Blood

ABO Grouping

"O"

Rh Grouping

- POSITIVE

Note:

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

END OF REPORT



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LIPID PROFILE

Sample Type : Serum

TOTAL CHOLESTEROL

[CHOD-PAP]

164.9

mg/dL

Desirable : <200 mg/dl

Borderline : 200 - 239mg/dl

High : >240 mg/dl

TRIGLYCERIDES

[Glycerol Phosphate Oxidase]

102.6

mg/dL

Desirable : <150 mg/dl

Borderline : 150 - 199mg/dl

High : >200mg/dl

HDL CHOLESTEROL [Direct]

40.8

mg/dL

Desirable : >40 mg/dl

Borderline Risk : 35 mg/dl

High Risk : <30 mg/dl

LDL CHOLESTEROL [Calculated]

103.58

mg/dL

Desirable : <100 mg/dl

Borderline : 130 - 160mg/dl

High : >160mg/dl

VLDL Cholesterol

[Calculated]

20.52

mg/dL

Desirable : <26 mg/dl

Borderline : >30 mg/dl

Total Chol / HDL Chol Ratio

[Calculated]

4.04

mg/dL

Desirable : <5 %

LDL / HDL Ratio

[Calculated]

2.54

1.00 - 3.55

NON-HDL CHOLESTEROL

[Calculated]

124.10

mg/dL

Desirable : <130 mg/dl

Borderline : 160 - 189 mg/dl

High : >220 mg/dl

Technique:

Fully Automated Biochemistry Analyser ERBA EM-200.

END OF REPORT



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Test Description	Results	Units	Biological Reference Range
<u>GLYCOCYLATED HAEMOGLOBIN</u>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [Tosoh HPLC]	5.2	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	102.54	mg/dL	116.89 - 154.2

END OF REPORT



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URINE ANALYSE REPORT

Sample Type : Urine

PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	6.0		5.0-7.5
SPECIFIC GRAVITY	1.000		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

MICROSCOPY

PUS CELLS/hpf	1-2
RBCs/hpf	Absent
EPI.CELLS/hpf	1-2
CASTS	Absent
CRYSTALS	Absent
BACTERIA	Absent
Other	Absent

****END OF REPORT****

Dr. Sudhamani S. MD
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LIVER FUNCTION TEST

Sample Type : Serum

TOTAL BILIRUBIN [DIAZO]	0.82	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [DIAZO]	0.35	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [CALCULATED]	0.47	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [IFCC without Pyridoxal Phosphate]	11.6	IU/L	5-40 IU/L
S.G.P.T.(ALT) [IFCC without Pyridoxal Phosphate]	12	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [Amino Methyl Propanol (AMP)]	77	IU/L	44-147 IU/L
TOTAL PROTEINS [BIURET]	6.82	IU/L	6.0 - 8.5 g/dL
ALBUMIN [BROMO CRESOL GREEN (BCG)]	3.69	g/dl	3.5-5.0 g/dl
GLOBULIN [CALCULATED]	3.13	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [CALCULATED]	1.18		
GAMMA GT	15.0	U/L	0 - 45

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

END OF REPORT



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SR. URIC ACID

Sample Type : Serum

Uric Acid [Uricase - POD]	3.2	mg/dl	2.5 - 6.8
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****

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CREATININE

Sample Type : Serum

Creatinine	0.58	mg/dl	0.40 - 1.40
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[Enzymatic]

Formula

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

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BLOOD UREA LEVEL (BUL)

Sample Type : Serum

Urea	9.9	mg/dl	10 - 40
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[Urease - GLDH]

Bun	4.62	mg/dl	6 - 21
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[Calculated]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

END OF REPORT



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COMPLETE BLOOD COUNT

Sample Type : EDTA / Whole Blood

Hemoglobin	12	g/dl	11.5 - 15.0
RBC COUNT	4.52	Millions/c	3.8 - 4.8
PCV(Hematocrit)	37.5	%	40.0 - 50.0
Mean Cell Volume(MCV)	83	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	26.6	pg	27.0 - 32.0
Mean Cell Hb Conc(MCHC)	32	g/dl	32 - 36
RDW	14.6	%	11.50 - 14.50
Total Leucocytes (WBC) Count	10330	/cumm	4000-11000

DIFFERENTIAL COUNT

Neutrophils	67.6	%	40 - 70
Lymphocytes	25.9	%	20 - 50
Eosionphils	2.3	%	01 - 06
Monocytes	3.4	%	00 - 08
Basophils	0.8	%	00-01

SMEAR STUDY

RBC Morphology	Normocytic Normocromic.		
WBC Morphology	No E/o Toxic granules seen		
Platelets On Smear	Adequate on Smear		
Platelet Count	328000	/cumm	150000 - 450000
MPV	10.9	fL	6.5 - 10.0

Comments :-**Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

Technique :-

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

END OF REPORT



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Test Description	Results	Units	Biological Reference Range
	<u>ESR</u>		
Sample Type : EDTA / Whole Blood			
ESR	10	Mm/hr	0 - 20
Method	Westergren		

END OF REPORT



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TOTAL THYROXINE (T4)

Sample Type : Serum

Total Thyroxine (T4) [CLIA]	112.0	ng/ml	52 - 127
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****END OF REPORT****



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TOTAL TRIIODOTHYRONINE (T3)

Sample Type : Serum

TotalTriiodothyronine (T3) [CLIA]	1.25	ng/dL	0.69 - 2.15
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****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
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VITAMIN B12

Sample Type : Serum

VITAMIN B12 [CLIA]	939.5	pg/ml	200 - 1100
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Clinical Significance

Vitamin B12 is a nutrient that helps keep the body's nerve and blood cells healthy and helps make DNA, the genetic material in all cells. Vitamin B12 also helps prevent a type of anemia called megaloblastic anemia that makes people tired and weak. Two steps are required for the body to absorb vitamin B12 from food.

****END OF REPORT****

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Consultant Pathologist
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25- HYDROXY VITAMIN D

Sample Type : Serum

25- HYDROXY VITAMIN D
[CLIA]

30.80

ng/ml

Deficiency : <10
Moderate insufficiency : 11 - 20
mild insufficiency : 21 - 25
Sufficiency : 26 - 70
Toxicity : >70

****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

ECHO Report

Date: 08/04/2023

Patient Details

Patient ID –

Name- MRS MANISHA KUMARI

Age- 29 YEARS

Gender- FEMALE

Referral BY - MEDIWHEEL

Doctor Incharge DR. MAHESH PADSALGE

Clinical Status of Patient -

Finding description -

- 1. Normal cardiac chambers dimensions .**
- 2. Normal LV systolic function.**
- 3. No RWMA.**
- 4. All cardiac valves are structurally normal.**
- 5. Trivial MR, Trivial PR, NO AR.**
- 6. No PAH.**
- 7. Normal RV systolic function.**
- 8. No clot/vegetation/pericardial effusion.**
- 9. No coarctation of aorta.**

Chamber Dimensions-M mode Findings

LVID (Diastole) 35-56(mm)	- 43.00	LVID (Systole) 24-42(mm)	- 28.00
IVS (Diastole) 8-12(mm)	- 10.00	IVS (Systole) 14-42(mm)	- 13.00
LVPWT (Diastole) 6-11(mm)	- 10.00	EPSS	- 4.00
LVEF (%)	- 66%	LVFS (%)	- 36.00

LV Volume (Diastolic)(mm³)
Meridional Wall Stress in System

LV Volume (Systolic)(mm³)
Cubed LV Volume in Diastole (mm³)

Cubed LV+ myocardial volume (mm³)

Velocity of circumferential
Shortening (mm)

Aortic root 22-37(mm)	- 30.00
Left Atrium Length (mm)	- 35.00
Left Atrium Volume (mm ³)	
RV size	Normal
Normal	
RV volume (mm ³)	
Normal	
Pericardium	Normal
Effusion	None
Resp Variation	Present
Predicted RV Systolic Pressure	

Left Atrium Width (mm)
Left Atrium Area (mm²)
RV Function

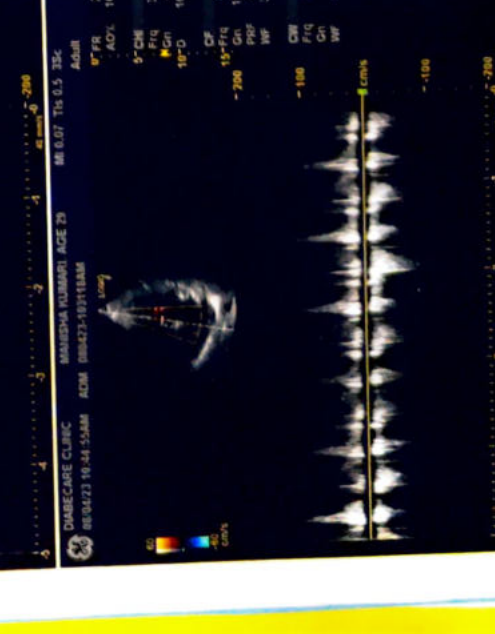
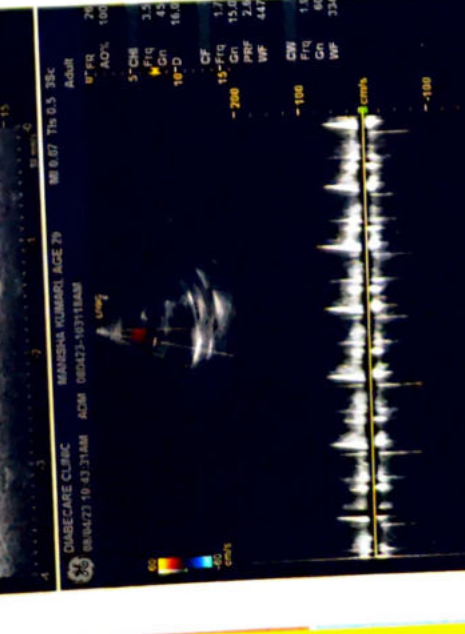
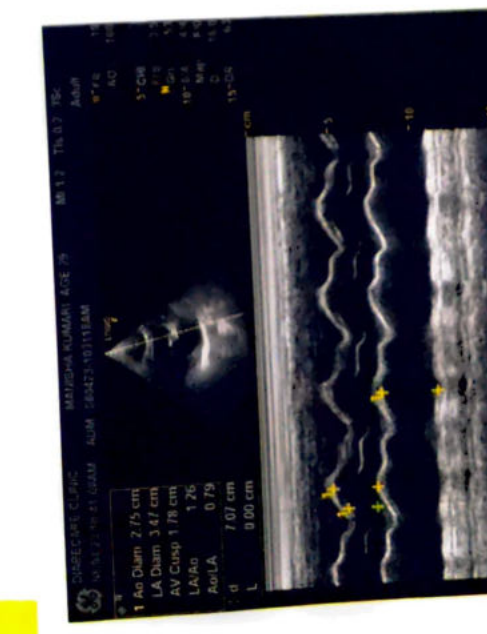
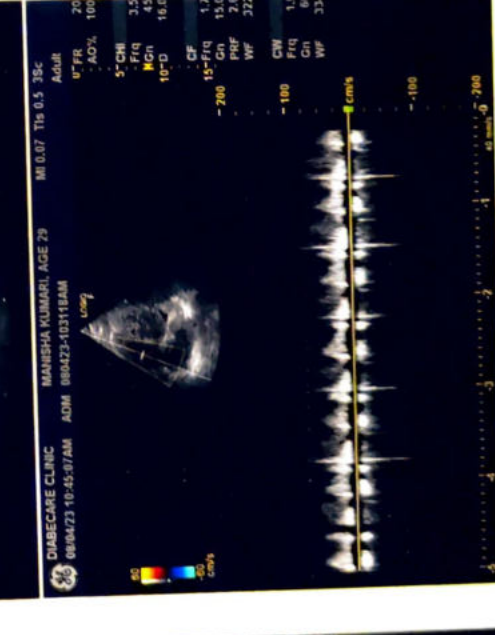
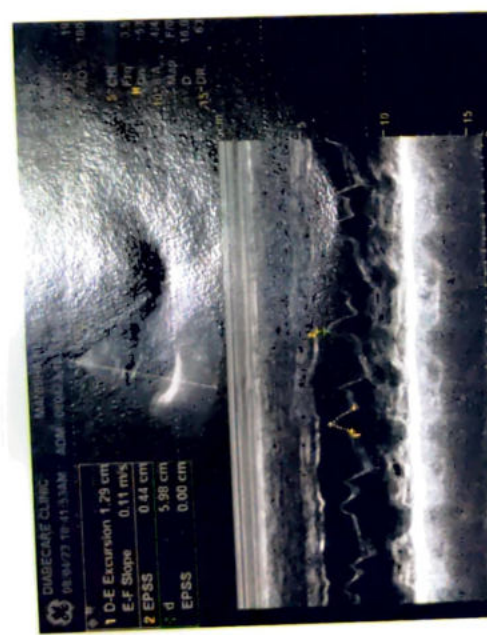
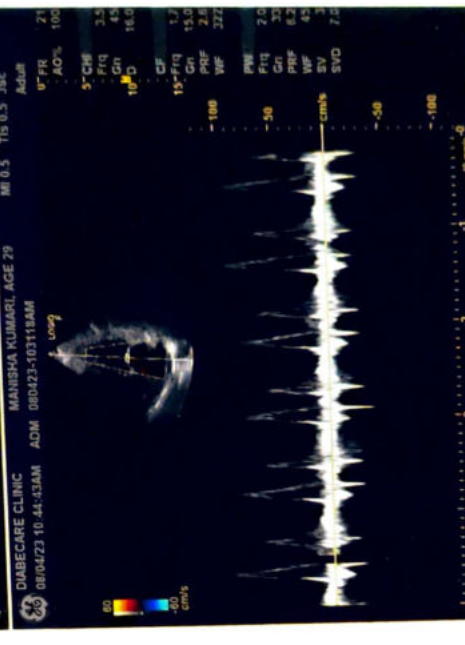
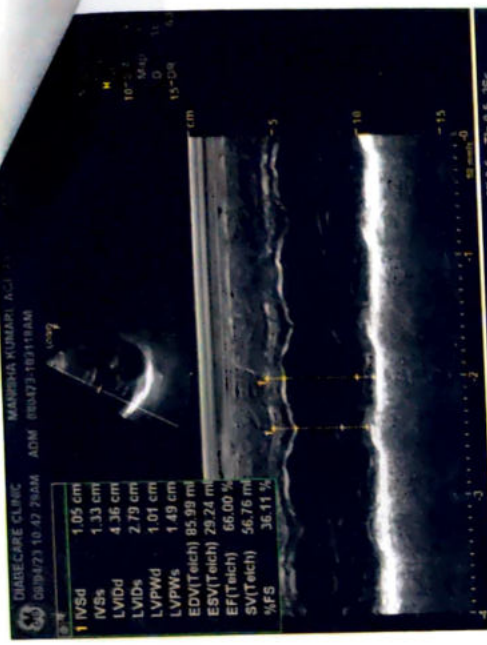
RA Size

IVC Size (mm) – 13mm Collapsible

Doppler Findings- I


Dr. Mahesh Padsalge

Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



Manisha Kumari
 Age - 29 F

08/4/23

Eye check up

	(R)	(L)
VA	6/6 N/6	6/6 N/6
Color vision	(N)	(N)
Ant seg	(N)	(N)
(F)	norm	norm
	(B) with	(S)

NAME- MANISHA KUMARI

DATE-8/4/2023

AGE- 29/F

X-RAY CHEST PA

The Soft Tissues And Bony Thorax Are Normal.

Both The Costophrenic And Cardiophrenic Angles Are Clear.

Cardiac Shape And Size Appears Normal.

The Lung Field Appears Normal.

Both The Hila Are Normal In Density And Position.

Both The Domes Of Diaphragm And Mediastinum Are Normal.

Impression: - Normal Chest X-Ray.

For > 

DR.MRUDULA BABAR
CONSULTANT RADIOLOGIST

DR. MRUDULA BABAR
MBBS, MD, DMRE (RADIOLOGY)
CPS MUMBAI 2009
REG. NO. 2005/03/2139