



देना बैंक  
DENNA BANK

अब - बैंक ऑफ़ बड़ोदा | NOW - BANK OF BARODA



निर्मला.डी. पारधी

कर्मचारी के हस्ताक्षर  
Signature of Staff

प. पत्र संख्या /

: 03638

I Card No.

नाम / Name

: NIRMALA DHANJJI PARGHI

पिता का नाम /

: MALJI GORA BORICHA

Father's Name

पी. आर. ए. एन. /

: 110072756437

PRAN

रक्त समूह / BG

: B +ve

जारी करने की तिथि / Date Of Issue : 06/03/2014

जारीकर्ता प्राधिकारी के हस्ताक्षर  
Signature of Issuing Authority



MC-4661

Name : Mrs. NIRMALA PARGHI  
Lab ID. : 160568  
Age/Sex : 52 Years /Female  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS

Collected On : 22-Jul-2023 9:14 AM  
Received On : 22-Jul-2023 9:24 AM  
Reported On : 23-Jul-2023 11:57AM  
Report Status : INTERIM



**\*LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)</b>	140.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
<b>S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)</b>	48.0	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease : >=80 mg/dl.
<b>S. TRIGLYCERIDE (ENZYMATIC, END POINT)</b>	65.3	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
<b>VLDL CHOLESTEROL (CALCULATED VALUE)</b>	13	mg/dL	UPTO 40
<b>S.LDL CHOLESTEROL (CALCULATED VALUE)</b>	79	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
<b>LDL CHOL/HDL RATIO (CALCULATED VALUE)</b>	1.65		UPTO 3.5
<b>CHOL/HDL CHOL RATIO (CALCULATED VALUE)</b>	2.92		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By  
SHAISTA Q

DR. SMITA RANVEER.  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist



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**COMPLETE BLOOD COUNT**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	<b>11.0</b>	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	<b>33.0</b>	%	36 - 46
RBC COUNT	<b>4.01</b>	x10 <sup>6</sup> /uL	4.5 - 5.5
MCV	82	fl	80 - 96
MCH	27.4	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	14.3	%	11.5 - 14.5
<b>TOTAL LEUCOCYTE COUNT</b>	4990	/cumm	4000 - 11000
<b><u>DIFFERENTIAL COUNT</u></b>			
NEUTROPHILS	56	%	40 - 80
LYMPHOCYTES	33	%	20 - 40
EOSINOPHILS	04	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
<b>PLATELET COUNT</b>	291000	/cumm	150000 - 450000
MPV	9.1	fl	6.5 - 11.5
PDW	15.6	%	9.0 - 17.0
PCT	0.260	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

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**HEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>ESR</b>	<b>45</b>	mm/1hr.	0 - 20

METHOD - WESTERGREN

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**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>URINE ROUTINE EXAMINATION</u></b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
VOLUME	15 ml		
COLOUR	Pale Yellow		
APPEARANCE	Clear		
<b><u>CHEMICAL EXAMINATION</u></b>			
REACTION	Acidic		Acidic
(methyl red and Bromothymol blue indicator)			
SP. GRAVITY	1.010		1.005 - 1.022
(Bromothymol blue indicator)			
PROTEIN	Absent		Absent
(Protein error of PH indicator)			
BLOOD	Absent		Absent
(Peroxidase Method)			
SUGAR	Absent		Absent
(GOD/POD)			
KETONES	Absent		Absent
(Acetoacetic acid)			
BILE SALT & PIGMENT	Absent		Absent
(Diazonium Salt)			
UROBILINOGEN	Absent		Normal
(Red azodye)			
LEUKOCYTES	Absent		
(pyrrole amino acid ester diazonium salt)			
NITRITE	Absent		
(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)			
<b><u>MICROSCOPIC EXAMINATION</u></b>			
RED BLOOD CELLS	Absent		

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**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
PUS CELLS	0-2	/ HPF	0 - 5
EPITHELIAL	1-2	/ HPF	0 - 5
CASTS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent
REMARK	Result relates to sample tested. Kindly correlate with clinical findings. <b>Result relates to sample tested, Kindly correlate with clinical findings.</b> ----- END OF REPORT -----		

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\* 1 6 0 5 6 8 \*

**IMMUNO ASSAY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>TFT (THYROID FUNCTION TEST )</u></b>			
SPACE		Space	-
SPECIMEN	Serum		
T3	130.2	ng/dl	84.63 - 201.8
T4	10.41	µg/dl	5.13 - 14.06
TSH	2.68	µIU/ml	0.270 - 4.20

T3 (Triiodo Thyronine) hormone)		T4 (Thyroxine)		TSH(Thyroid stimulating
AGE RANGES	RANGES	AGE	RANGES	AGE
1-30 days	100-740	1-14 Days	11.8-22.6	0-14 Days
1.0-39				
1-11 months	105-245	1-2 weeks	9.9-16.6	2 wks -5 months
1.7-9.1				
1-5 yrs	105-269	1-4 months	7.2-14.4	6 months - 20 yrs
0.7-6.4				
6-10 yrs	94-241	4 -12 months	7.8-16.5	Pregnancy
11-15 yrs	82-213	1-5 yrs	7.3-15.0	1st Trimester
0.1-2.5				
15-20 yrs	80-210	5-10 yrs	6.4-13.3	2nd Trimester
0.20-3.0				
0.30-3.0		11-15 yrs	5.6-11.7	3rd Trimester

**Checked By**  
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**IMMUNO ASSAY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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**INTERPRETATION :**

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

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**HAEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>BLOOD GROUP</u></b>			
SPECIMEN	WHOLE BLOOD		
* ABO GROUP	'O'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (forward grouping)			
<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>			
----- END OF REPORT -----			

Checked By  
Pathologist

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**\*BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>BLOOD UREA</b> (Urease UV GLDH Kinetic)	21.5	mg/dL	21 - 43
<b>BLOOD UREA NITROGEN</b> (Calculated)	10.05	mg/dL	5 - 20
<b>S. CREATININE</b> (Enzymatic)	0.61	mg/dL	0.6 - 1.4
<b>S. URIC ACID</b> (Uricase)	4.4	mg/dL	2.6 - 6.0
<b>S. SODIUM</b> (ISE Direct Method)	142.0	mEq/L	137 - 145
<b>S. POTASSIUM</b> (ISE Direct Method)	3.73	mEq/L	3.5 - 5.1
<b>S. CHLORIDE</b> (ISE Direct Method)	106.9	mEq/L	98 - 110
<b>S. PHOSPHORUS</b> (Ammonium Molybdate)	3.55	mg/dL	2.5 - 4.5
<b>S. CALCIUM</b> (Arsenazo III)	9.60	mg/dL	8.6 - 10.2
<b>PROTEIN</b> (Biuret)	6.42	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (BGC)	3.92	g/dl	3.2 - 4.6
<b>S.GLOBULIN</b> (Calculated)	2.50	g/dl	1.9 - 3.5
<b>A/G RATIO</b> (Calculated)	1.57		0 - 2

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### Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.
	Neutrophils:56 % Lymphocytes:35 % Monocytes:05 % Eosinophils:04 % Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.
<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>	
----- END OF REPORT -----	

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**LIVER FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL BILLIRUBIN</b> (Method-Diazo)	0.76	mg/dL	0.0 - 2.0
<b>DIRECT BILLIRUBIN</b> (Method-Diazo)	0.37	mg/dL	0.0 - 0.4
<b>INDIRECT BILLIRUBIN</b> Calculated	0.39	mg/dL	0 - 0.8
<b>SGOT(AST)</b> (UV without PSP)	11.9	U/L	0 - 37
<b>SGPT(ALT)</b> UV Kinetic Without PLP (P-L-P)	16.1	U/L	UP to 40
<b>ALKALINE PHOSPHATASE</b> (Method-ALP-AMP)	52.0	U/L	42 - 98
<b>S. PROTIEN</b> (Method-Biuret)	6.42	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (Method-BCG)	3.92	g/dl	3.5 - 5.2
<b>S. GLOBULIN</b> Calculated	2.50	g/dl	1.90 - 3.50
<b>A/G RATIO</b> Calculated	1.57		0 - 2

METHOD - EM200 Fully Automatic

**Result relates to sample tested, Kindly correlate with clinical findings.**

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**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GAMMA GT	16.4	U/L	5 - 55
<b><u>BLOOD GLUCOSE FASTING &amp; PP</u></b>			
BLOOD GLUCOSE FASTING	88.8	mg/dL	70 - 110
BLOOD GLUCOSE PP	112.2	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water ) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

**INTERPRETATION**

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl

**POSTPRANDIAL/POST GLUCOSE (75 grams)**

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl

**CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS**

- Fasting plasma glucose  $\geq 126$  mg/dl
- Classical symptoms +Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$

\*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.

**GLYCOCELATED HEMOGLOBIN (HBA1C)**

HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.4	%	Hb A1c
			> 8 Action suggested
			< 7 Goal
			< 6 Non - diabetic level

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**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
AVERAGE BLOOD GLUCOSE (A. B. G. )	108.3	mg/dL	65.1 - 136.3

**METHOD**

Particle Enhanced Immunoturbidimetry

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

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Mrs. Nirmala Parghi.  
52/F.

- Sp H/O - Hysterectomy done 2021.
- Klclo ptkwrtis (chemistid) on Rx

p-78/m'u  
s-p-130/80.

~~PT~~ PT on T. ecosprin 75  
& T. Atenev 40  
OD.  
HS

- NO any allergy.

20 Echo - mild Atrial fibrillation  
family: mother suffering from HTN.

ECG - T ↓ ~~III~~, V<sub>3</sub> V<sub>4</sub>

Dental - Gum swelling.

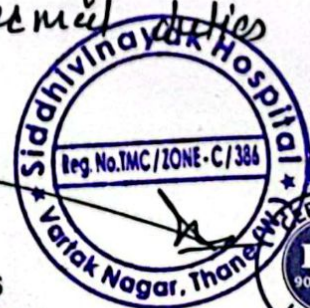
Adv

Blood invest<sup>n</sup>

- a/wktd.

- CXR.

Pt fit & can perform her  
normal duties



**HELPLINE**

022 - 2588 3531

S-1, Vedant Complex,  
Vartak Nagar, Thane (W) 400 606

[www.siddhivinayakhospitals.org](http://www.siddhivinayakhospitals.org)





COMPANY NAME : -	SR. NO.
TYPE OF MEDICAL	55

Name Of Employee	NIRMALA DHANJI PARGHI	Exam Dt.	22.07.2023
Designation :-	-	AGE :-	52
Department :-	-		
Date Of Birth :-	-		
On Roll / Contractor :-	-		

Present Complaint :-	NAD	
Addiction :-	NIL	
Employee Family / Past History :-	NAD	

**EMPLOYEE PHYSICAL EXAMINATION :-**

Height (cms) :	151	Weight :	53	BMI :	23.24
Skin :-	NAD	Pallor :-	ABSENT	Ear :-	NAD
		Nose - Tonsils :-			NAD

**CARDIOVASCULAR SYSTEM**

Pulse :-	78	BP :-	130/80	Heart Sound	: Normal
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**REAPIRATORY SYSTEM**

Trachea: Normal	RR :-	20	RS :-	NAD
-----------------	-------	----	-------	-----

<b>ALIMENTARY SYSTEM</b>			<b>OPTHAL CHECK UP</b>		
Liver - Normal	Kidney - Normal		VISION	RIGHT	LEFT
Spleen - Normal	Hernia - Hydrocele - NO		NEAR -	N/8	N/6
			DISTANT-	6/12	6/6
			Colour Vision	NORMAL	
			Spects	Without Glasses	

X-Ray :- NORMAL	Dental
ECG :- ABNORMAL	Checkup : No obvious problem seen
PFT :- NA	

**AUDIOMETRY**

	30	100	2000	4000	6000	8000
RT EAR :-	-	-	-	-	-	-
LT EAR :-	-	-	-	-	-	-

Audiometry Remark :- NA



ADVICE : -

**FIT FOR JOB :- Employee is free from any infectious contagious & communicable diseases**



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 Vartak Nagar, Thane (W) 400 606  
[www.siddhivinayakhospitals.org](http://www.siddhivinayakhospitals.org)





Name - Mrs. <del>Nirmala Ponghi</del> <sup>Sonigra</sup> Doppler   Age <sup>4D USG</sup> 52 Y/F	
Ref by Dr.- Siddhivinayak Hospital	Date - 22/07/2023

XRAY REQ: Chest- PA View.

**REPORT :**

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal.

No evidence of pleural effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

**IMP :** No significant abnormality seen.

**Adv.:** clinical and lab correlation.

DR. MOHAMMAD SOHAIB  
MBBS; DMRE  
CONSULTANT RADIOLOGIST

**Note:** The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.





ID: 1402

22-07-2023 09:02:33 AM

Age :      Years

Req. No. :

HR : 73 bpm  
 P : 116 ms  
 PR : 156 ms  
 QRS : 85 ms  
 QT/QTcBz : 392/433 ms  
 P/QRS/T : 66/10/-2 °  
 RV5/SV1 : 0.468/0.423 mV

Diagnosis Information:

Sinus Rhythm

T Wave Abnormality(V3,V4,V6)

NBR

↑↓ V3, V4

Dr. Anant Ramkishanrao Munde

MBBS, DNB, DM (Cardiology)

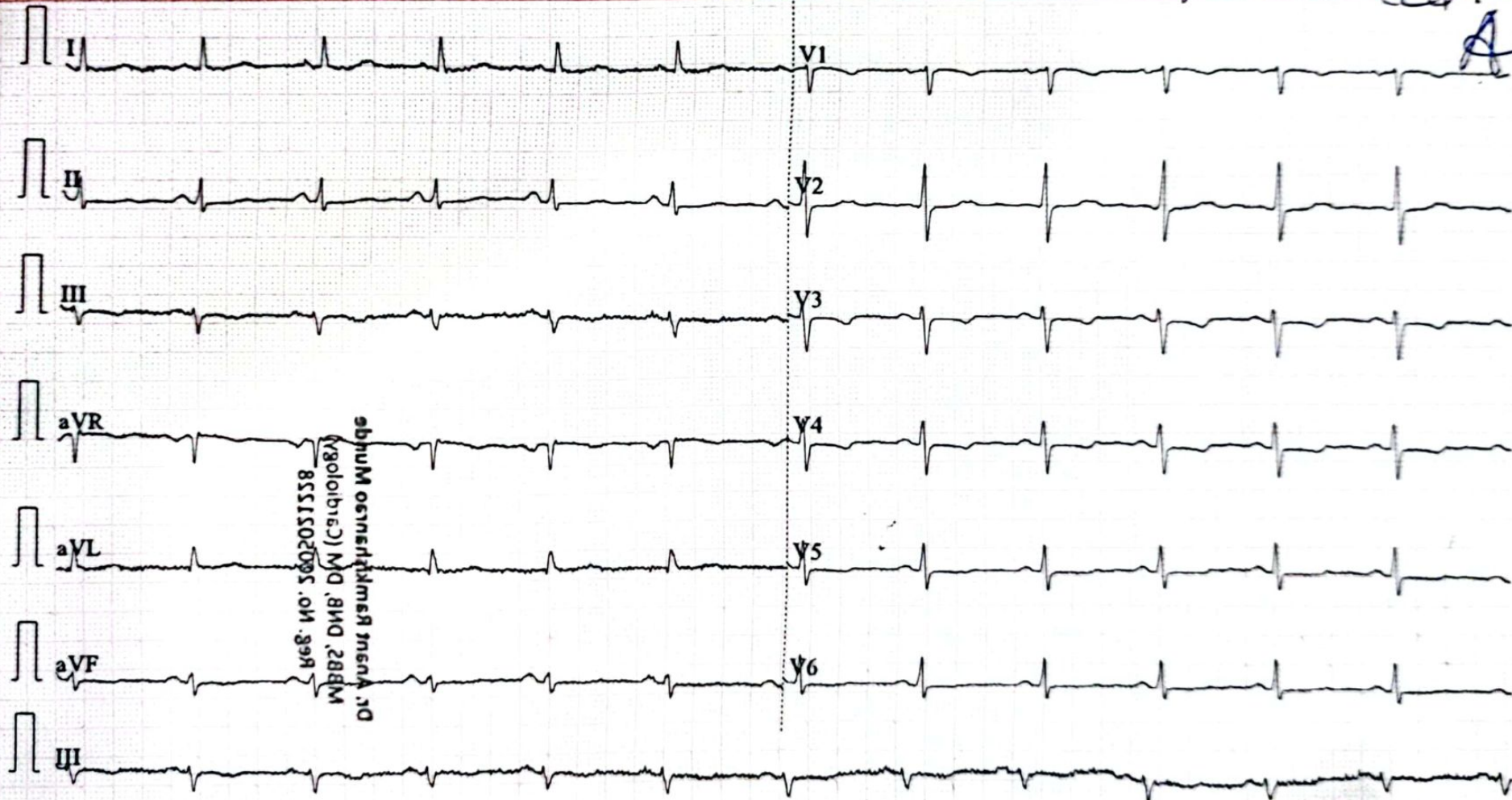
Reg. No. 2005021228

Report Confirmed by:

Adv = 20-ECGAD

Impression = Abnormal ECG.

A:



REG. NO. 500205338  
 MBBS, DNB, DM (Cardiology)  
 Dr. Anant Ramkishanrao Munde



### ECHOCARDIOGRAM

NAME	MRS. NIRMALA PARGHI
AGE/SEX	52 YRS/F
DATE OF EXAMINATION	22/07/2023
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DOCTOR	DR. ANANT MUNDE (CARDIOLOGIST)

### 2D/M-MODE ECHOCARDIOGRAPHY

<b>VALVES:</b> <b>MITRAL VALVE:</b> <ul style="list-style-type: none"><li>• AML: Normal</li><li>• PML: Normal</li><li>• Sub-valvular deformity: Absent</li></ul> <b>AORTIC VALVE:</b> Normal <ul style="list-style-type: none"><li>• No. of cusps: 3</li></ul> <b>PULMONARY VALVE:</b> Normal <b>TRICUSPID VALVE:</b> Normal	<b>CHAMBERS:</b> <b>LEFT ATRIUM:</b> Normal <b>LEFT VENTRICLE:</b> Normal <ul style="list-style-type: none"><li>• RWMA: No</li><li>• Contraction: Normal</li></ul> <b>RIGHT ATRIUM:</b> Normal <b>RIGHT VENTRICLE:</b> Normal <ul style="list-style-type: none"><li>• RWMA: No</li><li>• Contraction: Normal</li></ul>
<b>GREAT VESSELS:</b> <ul style="list-style-type: none"><li>• AORTA: Normal</li><li>• PULMONARY ARTERY: Normal</li></ul>	<b>SEPTAE:</b> <ul style="list-style-type: none"><li>• IAS: Intact</li><li>• IVS: Intact</li></ul>
<b>CORONARIES:</b> Proximal coronaries normal	<b>VENACAVAE:</b> <ul style="list-style-type: none"><li>• SVC: Normal</li><li>• IVC: Normal and collapsing &gt;20% with respiration</li></ul>
<b>CORONARY SINUS:</b> Normal	
<b>PULMONARY VEINS:</b> Normal	<b>PERICARDIUM:</b> Normal

### MEASUREMENTS:

PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	32 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	47.7 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	30.2 mm	RVEF	%
Ascending aorta	mm	IVSd	8.8 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	8.8 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	66 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	14 mm





**COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY**

NAME	MRS. NIRMALA PARGHI
AGE/SEX	52YRS/F
DATE OF EXAMINATION	22/07/2023
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DOCTOR	DR. ANANT MUNDE (CARDIOLOGIST)

	MITRAL	TRICUSPID	AORTIC	PULMONARY
FLOW VELOCITY (m/s)			1.42	0.87
PPG (mmHg)				
MPG (mmHg)				
VALVE AREA (cm <sup>2</sup> )				
PRE END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/ DECELERATION TIME (ms)				
PHT (ms)				
VENA CONTRACTA (mm)	2.2			
REGURGITATION	++	TRJV= m/s PASP= mmHg		
E/A	E<A			
E/E'				

**FINAL IMPRESSION: MILD MITRAL REGURGITATION**

- No RWMA
- Normal LV systolic function (LVEF: 66 %)
- Good RV systolic function
- Grade I diastolic dysfunction
- All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

**ADVICE:** Nil

**ECHOCARDIOGRAPHER:**

Dr. ANANT MUNDE

INTERVENTIONAL CARDIOLOGIST  
**Dr. Anant Ramkishanrao Munde**  
MBBS, DNB, DM (Cardiology)  
Reg. No. 2005021228



Name - Mrs- Nirmala Parghi	Age - 52 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date - 22/07/2023

### USG ABDOMEN & PELVIS

#### Clinical details: - Routine

The Liver is normal in size and shows normal echogenicity. There is no obvious abnormal focal lesion seen. There is no IHBR dilatation seen in both the lobes of the liver.

The CBD and the Portal vein appear normal.

The Gall bladder is contracted? Post meal.

Right Kidney measures 9.7 x 3.7cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

Left Kidney measures 8.5 x 4.1cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

The Pancreas is normal in size & shows homogenous echopattern. It shows no focal lesion.

The Spleen is normal in size (9.6cm) with homogenous echotexture.

The urinary bladder is adequately distended and appears normal. There is no evidence of any obvious calculi or any mass lesion seen. Both Uretero-vesical junctions appear clear. No abnormal intraluminal lesion noted.

The Uterus is H/O surgery.

Endometrial thickness measures normal in size.

Both ovaries are normal in size and echotexture.

Bilateral adnexae appear normal. No focal lesion noted.

No free fluid or obvious lymphadenopathy is seen in abdomen and pelvis.

#### IMPRESSION:

- No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. MOHAMMAD SOHAIB

MBBS; DMRE

CONSULTANT RADIOLOGIST

**Note:** The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis. Second opinion is always advisable.







Name - Mrs. Nirmala Parthi	Age - 45 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date - 22/07/2023

### USG -BOTH BREAST

Real time sonography of both breasts was performed with high frequency probe.

Both breast show normal, medium level, homogeneous echotexture. No evidence of any solid or cystic focal mass lesion.

No evidence of calcification noted.

The pectorallis major muscles appear normal.

No evidence of axillary lymphadenopathy seen.

### IMPRESSION:

- No significant abnormality is noted.

*Thanks for the referral.....*

DR. MOHAMMAD SOHAIB  
MBBS; DMRE  
CONSULTANT RADIOLOGIST

**Note:** The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be correlated clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.



S-1, Vedant Complex,  
Vartak Nagar, Thane (W) 400 606  
[www.siddhivinayakhospitals.org](http://www.siddhivinayakhospitals.org)



Name : Mrs. NIRMALA PARGHI  
Lab ID. : 160568  
Age/Sex : 52 Years /Female  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS ,

Collected On : 22-Jul-2023 9:14 AM  
Received On : 22-Jul-2023 9:24 AM  
Reported On : 25-Jul-2023 6:59 PM  
Report Status : FINAL



**PAP SMEAR REPORT1**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CYTO NUMBER	F/115/23		
CLINICAL HISTORY	Routine check up		
NO. OF SMEARS RECEIVED	One		
SPECIMEN ADEQUACY	Adequate		
CELL TYPE	Superficial, intermediate and few parabasal cells are seen.		
BACKGROUND	Mildly inflammatory		
ORGANISM	Absent		
EPITHELIAL CELL ABNORMALITY	Nil		
OTHER NON-NEOPLASTIC FINDINGS	Few neutrophils		
FINAL IMPRESION	Negative for intraepithelial lesion or malignancy.		

END OF REPORT

Checked By  
Dr\_smita.ranveer

DR. SMITA RANVEER.  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist







MC-4661

Name : Mrs. NIRMALA PARGHI  
Lab ID. : 160568  
Age/Sex : 52 Years /Female  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS

Collected On : 22-Jul-2023 9:14 AM  
Received On : 22-Jul-2023 9:24 AM  
Reported On : 23-Jul-2023 11:57AM  
Report Status : INTERIM



**\*LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)</b>	140.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
<b>S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)</b>	48.0	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease : >=80 mg/dl.
<b>S. TRIGLYCERIDE (ENZYMATIC, END POINT)</b>	65.3	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
<b>VLDL CHOLESTEROL (CALCULATED VALUE)</b>	13	mg/dL	UPTO 40
<b>S.LDL CHOLESTEROL (CALCULATED VALUE)</b>	79	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
<b>LDL CHOL/HDL RATIO (CALCULATED VALUE)</b>	1.65		UPTO 3.5
<b>CHOL/HDL CHOL RATIO (CALCULATED VALUE)</b>	2.92		<5.0

Above reference ranges are as per **ADULT TREATMENT PANEL III** recommendation by **NCEP (May 2015)**.

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By  
SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**



MC-4661

Name : Mrs. NIRMALA PARGHI Collected On : 22-Jul-2023 9:14 AM  
Lab ID. : 160568 Received On : 22-Jul-2023 9:24 AM  
Age/Sex : 52 Years /Female Reported On : 23-Jul-2023 11:57AM  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : INTERIM



**COMPLETE BLOOD COUNT**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	<b>11.0</b>	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	<b>33.0</b>	%	36 - 46
RBC COUNT	<b>4.01</b>	x10 <sup>6</sup> /uL	4.5 - 5.5
MCV	82	fl	80 - 96
MCH	27.4	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	14.3	%	11.5 - 14.5
<b>TOTAL LEUCOCYTE COUNT</b>	4990	/cumm	4000 - 11000
<b><u>DIFFERENTIAL COUNT</u></b>			
NEUTROPHILS	56	%	40 - 80
LYMPHOCYTES	33	%	20 - 40
EOSINOPHILS	04	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
<b>PLATELET COUNT</b>	291000	/cumm	150000 - 450000
MPV	9.1	fl	6.5 - 11.5
PDW	15.6	%	9.0 - 17.0
PCT	0.260	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

Checked By  
SHAISTA Q

**DR. SMITA RANVEER.**  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist

Name : Mrs. NIRMALA PARGHI  
Lab ID. : 160568  
Age/Sex : 52 Years /Female  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS

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**HEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>ESR</b>	<b>45</b>	mm/1hr.	0 - 20

METHOD - WESTERGREIN

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

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SHAISTA Q

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MC-4661

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**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>URINE ROUTINE EXAMINATION</u></b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
VOLUME	15 ml		
COLOUR	Pale Yellow		
APPEARANCE	Clear		
<b><u>CHEMICAL EXAMINATION</u></b>			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.010		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Absent		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Absent		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent		
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		
<b><u>MICROSCOPIC EXAMINATION</u></b>			
RED BLOOD CELLS	Absent		

Checked By  
SHAISTA Q

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Consultant Histocytopathologist



MC-4661

**Name** : Mrs. NIRMALA PARGHI **Collected On** : 22-Jul-2023 9:14 AM  
**Lab ID.** : 160568 **Received On** : 22-Jul-2023 9:24 AM  
**Age/Sex** : 52 Years /Female **Reported On** : 23-Jul-2023 11:57AM  
**Ref By** : SIDDHIVINAYAK HOSPITAL CGHS /ESIS **Report Status** : INTERIM



**URINE ROUTINE EXAMINATION**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
PUS CELLS	0-2	/ HPF	0 - 5
EPITHELIAL	1-2	/ HPF	0 - 5
CASTS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		
	<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>		
	----- END OF REPORT -----		

**Checked By**  
SHAISTA Q

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**Consultant Histocytopathologist**

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**Report Status** : INTERIM



**IMMUNO ASSAY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>TFT (THYROID FUNCTION TEST )</u></b>			
SPACE		Space	-
SPECIMEN	Serum		
T3	130.2	ng/dl	84.63 - 201.8
T4	10.41	µg/dl	5.13 - 14.06
TSH	2.68	µIU/ml	0.270 - 4.20

T3 (Triiodo Thyronine) hormone)

T4 (Thyroxine)

TSH(Thyroid stimulating

AGE RANGES

AGE RANGES

AGE

1-30 days 100-740  
 1.0-39  
 1-11 months 105-245  
 1.7-9.1  
 1-5 yrs 105-269  
 0.7-6.4  
 6-10 yrs 94-241  
 11-15 yrs 82-213  
 0.1-2.5  
 15-20 yrs 80-210  
 0.20-3.0  
 0.30-3.0

1-14 Days 11.8-22.6  
 1-2 weeks 9.9-16.6  
 1-4 months 7.2-14.4  
 4 -12 months 7.8-16.5  
 1-5 yrs 7.3-15.0  
 5-10 yrs 6.4-13.3  
 11-15 yrs 5.6-11.7

0-14 Days  
 2 wks -5 months  
 6 months - 20 yrs  
 Pregnancy  
 1st Trimester  
 2nd Trimester  
 3rd Trimester

**Checked By**  
 SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**

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**IMMUNO ASSAY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
-----------	---------	------	-----------------

**INTERPRETATION :**

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

Checked By  
SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**



MC-4661

Name : Mrs. NIRMALA PARGHI  
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**HAEMATOLOGY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b><u>BLOOD GROUP</u></b>			
SPECIMEN	WHOLE BLOOD		
* ABO GROUP	'O'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (forward grouping)			
<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>			
----- END OF REPORT -----			

Checked By  
Pathologist

DR. SMITA RANVEER.  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist





MC-4661

Name : Mrs. NIRMALA PARGHI Collected On : 22-Jul-2023 9:14 AM  
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Age/Sex : 52 Years /Female Reported On : 23-Jul-2023 11:57AM  
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : INTERIM



**\*BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>BLOOD UREA</b> (Urease UV GLDH Kinetic)	21.5	mg/dL	21 - 43
<b>BLOOD UREA NITROGEN</b> (Calculated)	10.05	mg/dL	5 - 20
<b>S. CREATININE</b> (Enzymatic)	0.61	mg/dL	0.6 - 1.4
<b>S. URIC ACID</b> (Uricase)	4.4	mg/dL	2.6 - 6.0
<b>S. SODIUM</b> (ISE Direct Method)	142.0	mEq/L	137 - 145
<b>S. POTASSIUM</b> (ISE Direct Method)	3.73	mEq/L	3.5 - 5.1
<b>S. CHLORIDE</b> (ISE Direct Method)	106.9	mEq/L	98 - 110
<b>S. PHOSPHORUS</b> (Ammonium Molybdate)	3.55	mg/dL	2.5 - 4.5
<b>S. CALCIUM</b> (Arsenazo III)	9.60	mg/dL	8.6 - 10.2
<b>PROTEIN</b> (Biuret)	6.42	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (BGC)	3.92	g/dl	3.2 - 4.6
<b>S.GLOBULIN</b> (Calculated)	2.50	g/dl	1.9 - 3.5
<b>A/G RATIO</b> (Calculated)	1.57		0 - 2

Checked By  
SHAISTA Q

**DR. SMITA RANVEER.**  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist



MC-4661

<b>Name</b>	: Mrs. NIRMALA PARGHI	<b>Collected On</b>	: 22-Jul-2023 9:14 AM
<b>Lab ID.</b>	: 160568	<b>Received On</b>	: 22-Jul-2023 9:24 AM
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<b>Ref By</b>	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	<b>Report Status</b>	: INTERIM



Result relates to sample tested, Kindly correlate with clinical findings.

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

**Checked By**  
SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**

Name : Mrs. NIRMALA PARGHI  
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Report Status : INTERIM



### Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.  Neutrophils:56 % Lymphocytes:35 % Monocytes:05 % Eosinophils:04 % Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.
<b>Result relates to sample tested, Kindly correlate with clinical findings.</b>	
----- END OF REPORT -----	

Checked By  
SHAISTA Q

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M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist



MC-4661

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### LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<b>TOTAL BILLIRUBIN</b> (Method-Diazo)	0.76	mg/dL	0.0 - 2.0
<b>DIRECT BILLIRUBIN</b> (Method-Diazo)	0.37	mg/dL	0.0 - 0.4
<b>INDIRECT BILLIRUBIN</b> Calculated	0.39	mg/dL	0 - 0.8
<b>SGOT(AST)</b> (UV without PSP)	11.9	U/L	0 - 37
<b>SGPT(ALT)</b> UV Kinetic Without PLP (P-L-P)	16.1	U/L	UP to 40
<b>ALKALINE PHOSPHATASE</b> (Method-ALP-AMP)	52.0	U/L	42 - 98
<b>S. PROTIEN</b> (Method-Biuret)	6.42	g/dl	6.4 - 8.3
<b>S. ALBUMIN</b> (Method-BCG)	3.92	g/dl	3.5 - 5.2
<b>S. GLOBULIN</b> Calculated	2.50	g/dl	1.90 - 3.50
<b>A/G RATIO</b> Calculated	1.57		0 - 2

METHOD - EM200 Fully Automatic

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

Checked By  
SHAISTA Q

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M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist

**Name** : Mrs. NIRMALA PARGHI  
**Lab ID.** : 160568  
**Age/Sex** : 52 Years /Female  
**Ref By** : SIDDHIVINAYAK HOSPITAL CGHS /ESIS  
**Collected On** : 22-Jul-2023 9:14 AM  
**Received On** : 22-Jul-2023 9:24 AM  
**Reported On** : 23-Jul-2023 11:57AM  
**Report Status** : INTERIM



**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GAMMA GT	16.4	U/L	5 - 55
<b><u>BLOOD GLUCOSE FASTING &amp; PP</u></b>			
BLOOD GLUCOSE FASTING	88.8	mg/dL	70 - 110
BLOOD GLUCOSE PP	112.2	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water ) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

**INTERPRETATION**

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus :  $\geq 126$  mg/dl

**POSTPRANDIAL/POST GLUCOSE (75 grams)**

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus :  $\geq 200$  mg/dl

**CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS**

- Fasting plasma glucose  $\geq 126$  mg/dl
- Classical symptoms + Random plasma glucose  $\geq 200$  mg/dl
- Plasma glucose  $\geq 200$  mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin  $> 6.5\%$

\*\*\*Any positive criteria should be tested on subsequent day with same or other criteria.

**GLYCOCELATED HEMOGLOBIN (HBA1C)**

HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.4	%	Hb A1c
			> 8 Action suggested
			< 7 Goal
			< 6 Non - diabetic level

**Checked By**  
SHAISTA Q

**DR. SMITA RANVEER.**  
M.B.B.S.M.D. Pathology(Mum)  
Consultant Histocytopathologist

**Name** : Mrs. NIRMALA PARGHI  
**Lab ID.** : 160568  
**Age/Sex** : 52 Years /Female  
**Ref By** : SIDDHIVINAYAK HOSPITAL CGHS /ESIS  
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**BIOCHEMISTRY**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
AVERAGE BLOOD GLUCOSE (A. B. G. )	108.3	mg/dL	65.1 - 136.3

METHOD

Particle Enhanced Immunospectrometry

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.

**Result relates to sample tested, Kindly correlate with clinical findings.**

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

**Checked By**  
 SHAISTA Q

**DR. SMITA RANVEER.**  
**M.B.B.S.M.D. Pathology(Mum)**  
**Consultant Histocytopathologist**