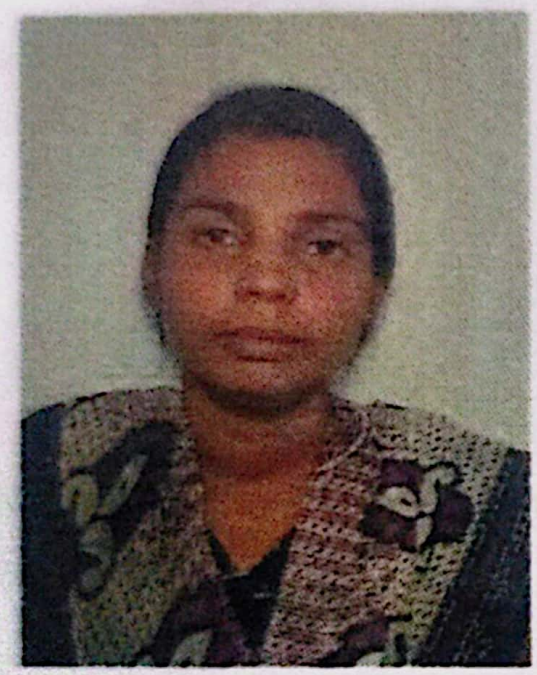


सुप्रिया सुभाषराव खरबडे

Supriya Subhashrav Khrbade

आई : रजनी खरबडे

Mother : Rajani Kharbade

जन्म वर्ष / Year of Birth : 1993

स्त्री / Female

9130 3679 1425

आधार — सामान्य माणसाचा अधिकार

25/9/23.

Mrs. Supriya. Khalbade.

- GOPO.
- LMP - 30th August.
- No known co-morbidity.
- Family Hx: DM, HTN, PTCA.

C/O Allergic cough.

- Food allergy :- allergic to sour food. (pickles, curd).

Height - 147 cm
Wt - 45 kg
BMI - 20.8 kg/m2

Opthal Check Up Without Glasses

	R	L
D	6/6	6/6
N	N18	N18

Color Normal

Vitals

PR - 60/min
BP - 120/90 mm Hg
SPO2 - 99%
Afebrile.

- Patient declared fit to carry on normal duties.

Siddhivinayak Hospital ★ Reg. No. TMC/ZONE-C/386 ★ Vartak Nagar, Thane (W.)

ECHOCARDIOGRAM

NAME	MS. SUPRIYA KHARBADE
AGE/SEX	30 YRS/F
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DOCTOR	DR. ANANT MUNDE, DNB, DM (CARDIOLOGY)
DATE OF EXAMINATION	25/09/2023

2D/M-MODE ECHOCARDIOGRAPHY

VALVES: **MITRAL VALVE:** • **AML:** Normal • **PML:** Normal • **Sub-valvular deformity:** Absent **AORTIC VALVE:** Normal • **No. of cusps:** 3 **PULMONARY VALVE:** Normal **TRICUSPID VALVE:** Normal	**CHAMBERS:** **LEFT ATRIUM:** Normal **LEFT VENTRICLE:** Normal • **RWMA:** No • **Contraction:** Normal **RIGHT ATRIUM:** Normal **RIGHT VENTRICLE:** Normal • **RWMA:** No • **Contraction:** Normal
GREAT VESSELS: • **AORTA:** Normal • **PULMONARY ARTERY:** Normal	**SEPTAE:** • **IAS:** Intact • **IVS:** Intact
CORONARIES: Proximal coronaries normal	**VENACAVAE:** • **SVC:** Normal • **IVC:** Normal and collapsing >20% with respiration
CORONARY SINUS: Normal	
PULMONARY VEINS: Normal	**PERICARDIUM:** Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	31 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	40.2 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	24.1 mm	RVEF	%
Ascending aorta	mm	IVSd	8.0 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	8.0 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	71 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	13.2 mm

ID: 1918 Supriya Kharbade 25-09-2023 08:45:59 AM

Male Years 30Y/F

Req. No. :

B.P 120/90

SPO2 - 99

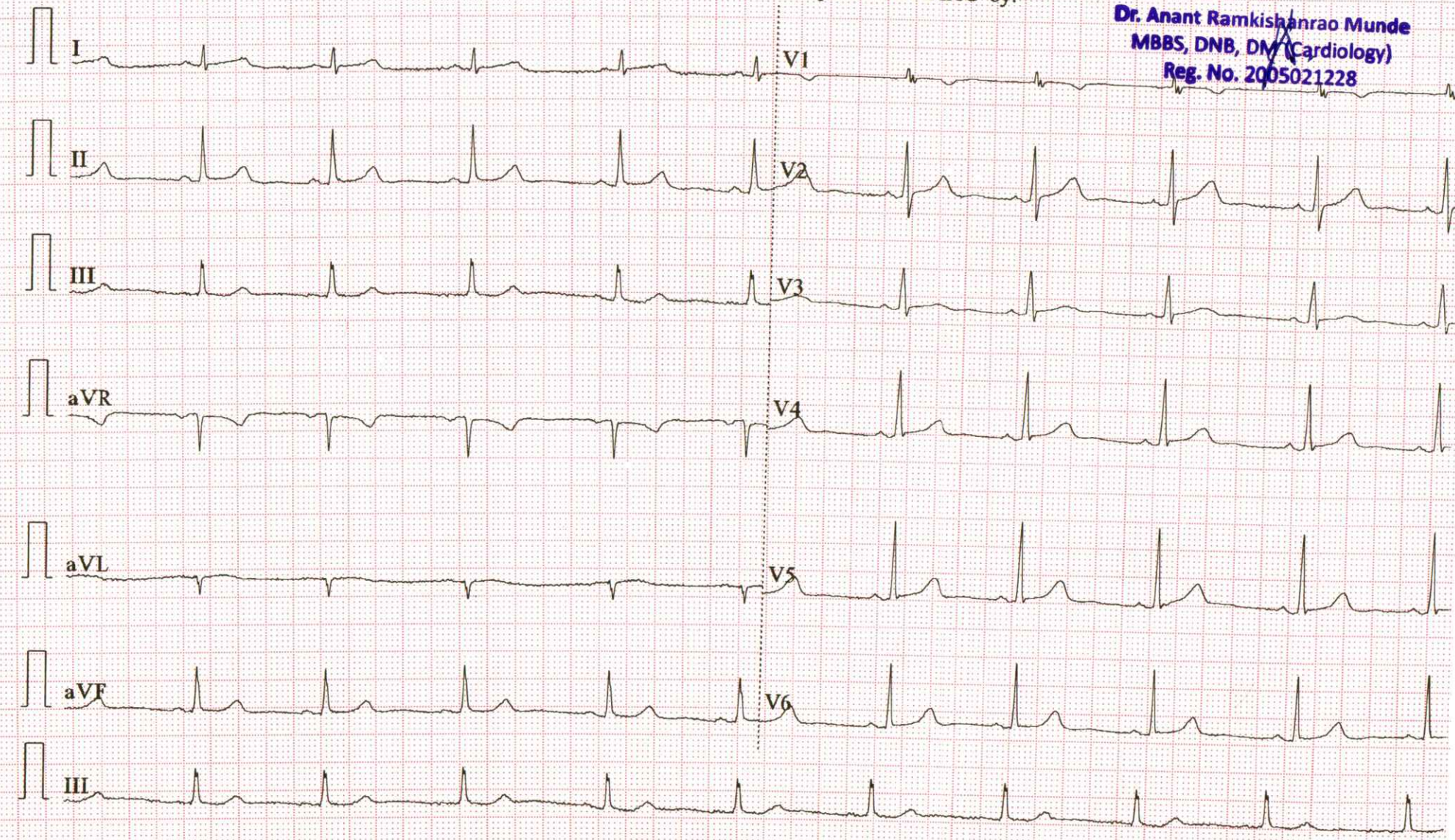
PR - 60

HR	: 61	bpm
P	: 89	ms
PR	: 136	ms
QRS	: 85	ms
QT/QTcBz	: 409/413	ms
P/QRS/T	: 48/72/61	°
RV5/SV1	: 1.430/0.098	mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Report Confirmed by:

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



0.25~35Hz AC50 25mm/s 10mm/mV 2*5.0s+1r V2.21 SEMIP V1.92 Siddhivinayak Hospital

Name–Mrs. Supriya Kharbade	**Age - 30 Y/F**
Ref by Dr.- Siddhivinayak Hospital	**Date– 25/09/2023**

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

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.

Name – Mrs. Supriya Kharbade	Age – 30 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date – 25/09/2023

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 well distended & appears normal. No calculi or filling defects are seen.
No evidence of Pericholecystic collection. The wall thickness is normal.

Right Kidney measures 9.4 x 4.1 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

Left Kidney measures 9.3 x 4.3 cm & appears normal in shape and position. A calculus measuring 11.5 mm noted at lower pole .There is no evidence of hydronephrosis. 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 (10.0 cm) 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 anteverted & measures approximately 6.4 x 3.3 x 3.7 cms with normal homogenous echotexture. The uterine outline is smooth and normal. No abnormal focal lesion noted. Endometrial thickness is normal.
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:

- **Left renal calculus.**

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.

Dr. Smita Ranveer`s

Radiance

CLINICAL DIAGNOSTIC CENTRE
COMPLETE PATHOLOGICAL SOLUTION

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Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	**Report Status**	: INTERIM

168601

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDASE)	163.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	60.9	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease :>=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	40.0	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	8	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	94	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.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	1.54		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	2.68		<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
Prasad_A

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

24 HOURS 7
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168601

COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	13.0	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	39.0	%	36 - 46
RBC COUNT	**4.00**	x10^6/uL	4.5 - 5.5
MCV	**98**	fl	80 - 96
MCH	32.5	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	13.8	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	4200	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	50	%	40 - 80
LYMPHOCYTES	**42**	%	20 - 40
EOSINOPHILS	01	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	194000	/ cumm	150000 - 450000
MPV	10.8	fl	6.5 - 11.5
PDW	16.1	%	9.0 - 17.0
PCT	0.210	%	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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168601

HEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	20	mm/1hr.	0 - 20

METHOD - WESTERGREN

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

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

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168601

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
URINE ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
VOLUME	20 ml		
COLOUR	Pale Yellow	Text	Pale Yellow
APPEARANCE	Slightly hazy		Clear
CHEMICAL EXAMINATION			
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	Present(Trace)		Absent
(Peroxidase Method)			
SUGAR	Absent		Absent
(GOD/POD)			
KETONES	Absent		Absent
(Acetoacetic acid)			
BILE SALT & PIGMENT	Absent		Absent
(Diazonium Salt)			
UROBILINOGEN	Normal		Normal
(Red azodye)			
LEUKOCYTES	Absent	Text	Absent
(pyrrole amino acid ester diazonium salt)			
NITRITE	Absent		Negative
(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)			
MICROSCOPIC EXAMINATION			
RED BLOOD CELLS	3-5/HPF		
PUS CELLS	2-3	/ HPF	0 - 5
EPITHELIAL	4-6	/ HPF	0 - 5
CASTS	Absent		

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Pathologist

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		

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

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

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168601

IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TFT (THYROID FUNCTION TEST)			
SPACE		Space	-
SPECIMEN	Serum		
T3	123.4	ng/dl	84.63 - 201.8
T4	7.47	µg/dl	5.13 - 14.06
TSH	3.41	µIU/ml	0.270 - 4.20

T3 (Triido Thyronine) hormone)

AGE	RANGE
1-30 days	100-740
1-11 months	105-245
1-5 yrs	105-269
6-10 yrs	94-241
11-15 yrs	82-213
15-20 yrs	80-210

T4 (Thyroxine)

AGE	RANGES
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

TSH(Thyroid stimulating hormone)

AGE	RANGES
0-14 Days	1.0-39
2 wks -5 months	1.7-9.1
6 months-20 yrs	0.7-6.4
Pregnancy	
1st Trimester	0.1-2.5
2nd Trimester	0.20-3.0
3rd Trimester	0.30-3.0

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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168601

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD GROUP			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'A'		
RH FACTOR	POSITIVE		

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

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

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*BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	15.0	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	7.01	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.61	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	4.20	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	138.0	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	3.83	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	107.5	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.58	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.50	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	6.65	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	3.89	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.76	g/dl	1.9 - 3.5
A/G RATIO calculated	1.41		0 - 2

NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

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

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CLINICAL DIAGNOSTIC CENTRE
COMPLETE PATHOLOGICAL SOLUTION

Name	: **Mrs. SUPRIYA KHARBADE**	**Collected On**	: **25/9/2023 11:46 am**
Lab ID.	: **168601**	**Received On**	: **25/9/2023 11:56 am**
Age/Sex	: **30 Years / Female**	**Reported On**	: **26/9/2023 11:30 am**
Ref By	: **SIDDHIVINAYAK HOSPITAL CGHS /ESIS**	**Report Status**	: **INTERIM**

168601

Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.
	Neutrophils:52 %
	Lymphocytes:40 %
	Monocytes:06 %
	Eosinophils:02 %
	Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.

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

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

Checked By
Prasad_A

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

24 HOURS 7
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168601

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.59	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	0.37	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.22	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	16.7	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	11.9	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	74.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	6.65	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	3.89	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.76	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.41		0 - 2

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

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168601

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GLYCOCELATED HEMOGLOBIN (HBA1C)			
HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.30	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	105.4	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.

BLOOD GLUCOSE FASTING & PP			
BLOOD GLUCOSE FASTING	90.1	mg/dL	70 - 110
BLOOD GLUCOSE PP	107.6	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 speciman. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

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168601

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE

INTERPRETATION
- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)
- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS
- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=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.

GAMMA GT	11.0	U/L	5 - 55

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

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

Checked By
Pathologist

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Age/Sex	: **30 Years / Female**	**Reported On**	: **26/9/2023 1:02 pm**
Ref By	: **SIDDHIVINAYAK HOSPITAL CGHS /ESIS**	**Report Status**	: **FINAL**

168601

PAP SMEAR REPORT1

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CYTO NUMBER	F/162/23		
CLINICAL HISTORY	Routine check up		
NO. OF SMEARS RECEIVED	One		
SPECIMEN ADEQUACY	Adequate		
CELL TYPE	Superficial, intermediate,squamous metaplastic and few endocervical cells		
BACKGROUND	Dense inflammation		
ORGANISM	Absent		
EPITHELIAL CELL ABNORMALITY	Nil		
OTHER NON-NEOPLASTIC FINDINGS	Dense neutrophils		
INTERPRETATION/RESULT	Inflammatory smears		
FINAL IMPRESION	Negative for intraepithelial lesion or malignancy.		

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

Checked By
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