

3 BoB



भारतीय विशिष्ट पहचान प्राधिकरण  
भारत सरकार  
Unique Identification Authority of India  
Government of India

नामांकन क्रम / Enrollment No. : 2017/95114/03491

To  
Shalini  
शालिनी  
D/O: Amit Kumar  
F-48, P C COLONY  
KANARBAGH  
Sampatchak  
Lohia Nagar, Patna  
Bihar - 800020  
9472286991

01/09/2014



KL999574735FT

99957473



आपका आधार क्रमांक / Your Aadhaar No. :

5241 5237 0047

आधार - आम आदमी का अधिकार



भारत सरकार

Government of India



शालिनी  
Shalini

जन्म तिथि / DOB: 15/01/1990  
लिंग / Gender: महिला / Female

5241 5237 0047



आधार - आम आदमी का अधिकार

90/70

KL999574735FT + PP  
Usha  
ECL  
p-lay  
TMT  
US4-WA



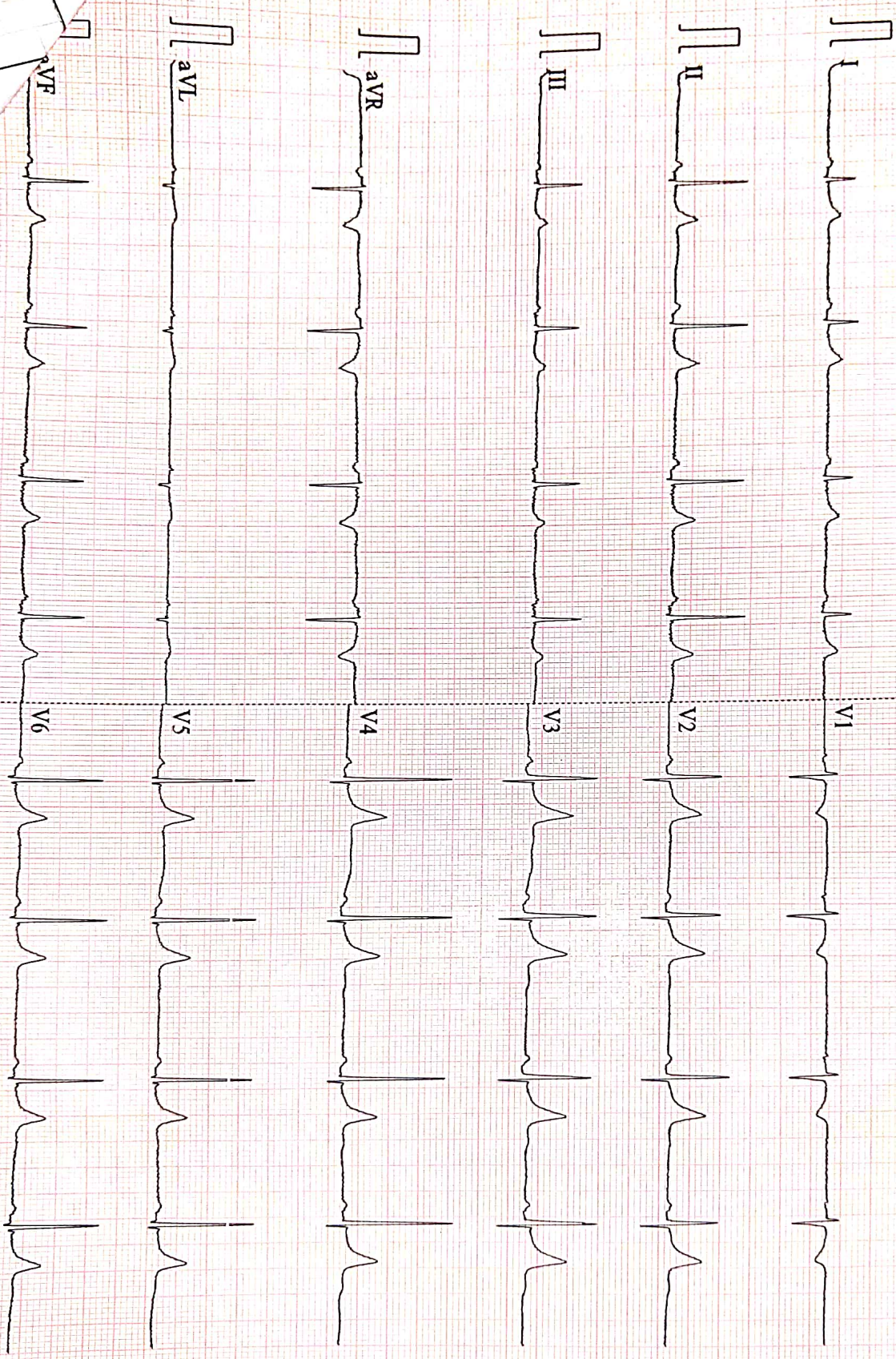
ID: 892  
SHALINI  
Female 33Years

25-05-2023 09:10:21 AM

HR : 51 bpm  
P : 89 ms  
PR : 149 ms  
QRS : 77 ms  
QT/QTc : 408/378 ms  
PQRS/T : 54/68/53 °  
RV5/SV1 : 1.622/0.607 mV

Diagnosis Information:  
Sinus Bradycardia with Sinus Arrhythmia

Ref-Phys. :  
Report Confirmed by:



Recorded by Allengers

ACC50 25mm/s 10mm/mV 255.0s 51 V2.2 SEMIP V1.81 DIAGNOSTIC  
BPL





ISO 9001 : 2015  
**AAROGYAM DIAGNOSTICS**  
 (A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, P.C. Colony, Opp. Madhuban Complex,  
 Near Malahi Pakari Chowk, Kankarbagh, Patna – 20  
 9264278360, 9065875700, 8789391403  
 info@aarogyamdiagnostics.com  
 www.aarogyamdiagnostics.com

<b>Date</b> 25/03/2023	<b>Srl No.</b> 23	<b>Patient Id</b> 2303250023
<b>Name</b> Mrs. SHALINI	<b>Age</b> 33 Yrs.	<b>Sex</b> F
<b>Ref. By</b> Dr.BOB		

Test Name	Value	Unit	Normal Value
BOB			
HB A1C	5.0	%	

**EXPECTED VALUES :-**

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

**REMARKS:-**

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

\*\*\*\* End Of Report \*\*\*\*

**Dr.R.B.RAMAN**  
**MBBS, MD**  
**CONSULTANT PATHOLOGIST**



<b>Date</b>	<b>25/03/2023</b>	<b>Srl No.</b>	<b>23</b>	<b>Patient Id</b>	<b>2303250023</b>
<b>Name</b>	<b>Mrs. SHALINI</b>	<b>Age</b>	<b>33 Yrs.</b>	<b>Sex</b>	<b>F</b>
<b>Ref. By</b>	<b>Dr.BOB</b>				

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	13.0	gm/dl	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	5,600	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	63	%	40 - 75
LYMPHOCYTE	30	%	20 - 45
EOSINOPHIL	02	%	01 - 06
MONOCYTE	05	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN's METHOD)	16	mm/1st hr.	0 - 20
R B C COUNT	4.36	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	40.01	%	35 - 45
M C V	91.77	fl.	80 - 100
M C H	29.82	Picogram	27.0 - 31.0
M C H C	<b>32.5</b>	gm/dl	33 - 37
PLATELET COUNT	2.70	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"A"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	75.9	mg/dl	70 - 110
SERUM CREATININE	0.79	mg%	0.5 - 1.3
BLOOD UREA	20.5	mg /dl	15.0 - 45.0
SERUM URIC ACID	5.2	mg%	2.5 - 6.0
<b><u>LIVER FUNCTION TEST (LFT)</u></b>			



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<b>Ref. By</b>	<b>Dr.BOB</b>				

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.70	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.25	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.45	mg/dl	0.00 - 0.70
TOTAL PROTEIN	<b>6.0</b>	gm/dl	6.6 - 8.3
ALBUMIN	3.4	gm/dl	3.4 - 5.2
GLOBULIN	2.6	gm/dl	2.3 - 3.5
A/G RATIO	<b>1.308</b>		
SGOT	17.4	IU/L	5 - 35
SGPT	19.6	IU/L	5.0 - 45.0
ALKALINE PHOSPHATASE IFCC Method	<b>105.6</b>	U/L	35.0 - 104.0
GAMMA GT	23.9	IU/L	6.0 - 42.0

#### LFT INTERPRET

#### LIPID PROFILE

TRIGLYCERIDES	87.4	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	180.1	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	52.9	mg/dL	35.1 - 88.0
V L D L	17.48	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	109.72	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	3.405		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.074		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



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<b>Name</b>	<b>Mrs. SHALINI</b>	<b>Age 33 Yrs.</b>	<b>Sex F</b>
<b>Ref. By Dr.BOB</b>			

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.010		
PH	6.5		
ALBUMIN	NIL		
SUGAR	NIL		
<b>MICROSCOPIC EXAMINATION</b>			
PUS CELLS	1-3	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	1-4	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system ( Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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<b>Ref. By</b> Dr.BOB		

Test Name	Value	Unit	Normal Value
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.			
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.			

\*\*\*\* End Of Report \*\*\*\*

**Dr.R.B.RAMAN**  
**MBBS, MD**  
**CONSULTANT PATHOLOGIST**



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<b>Name</b> Mrs. SHALINI	<b>Age</b> 33 Yrs.	<b>Sex</b> F
<b>Ref. By</b> Dr.BOB		

<b>Test Name</b>	<b>Value</b>	<b>Unit</b>	<b>Normal Value</b>
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**BIOCHEMISTRY**

BLOOD SUGAR PP	105.8	mg/dl	80 - 160
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\*\*\*\* End Of Report \*\*\*\*

**Dr.R.B.RAMAN**  
**MBBS, MD**  
**CONSULTANT PATHOLOGIST**





Name :- Shalini  
Pt's ID :- 18/40161  
Refd by :- CORP.

Age/Sex:-33Yrs/F  
Date :-25/03/23

Thanks for referral.

**REPORT OF USG OF WHOLE ABDOMEN**

- Liver** :- Normal in size (13.2cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- **Multiple sand like calculi (Avg. Size 2-3mm) seen within G.B. lumen.**  
Wall appears normal thickness.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size (9.2cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.  
Right Kidney measures 9.1cm and Left Kidney measures 9.6cm.
- Ureters** :- Ureters are not dilated.
- U. Bladder** :- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Uterus** :- **Enlarged in size (9.9cm x 5.4cm)** and anteverted in position with normal myometrial echotexture and endometrial thickness. No any mass or cyst seen in it. ET- 7.3mm
- Ovaries** :- Both ovaries show normal echotexture and follicular pattern. Right ovary measures 3.0cm x 2.2cm and Left ovary measures 3.3cm x 1.8cm. No pelvic (POD) collection is seen.
- Others** :- No ascites or abdominal adenopathy is seen.  
No free subphrenic / basal pleural space collection is seen.

**IMPRESSION:-** *Cholelithiasis.*  
*A/V Bulky Uterus.*  
*Otherwise Normal Scan.*

*Dr. U. Kumar*  
*MBBS, MD (Radio-Diagnosis)*  
*Consultant Radiologist*



MC-3319

**Kolkata Lab** : Block DD-30, Sector-1, "Andromeda", Ground Floor, Salt lake, Kolkata-700064  
 Landline No: 033-40818800/ 8888/ 8899 | Email ID: kolkata@unipath.in | Website: www.unipath.in  
 CIN : U85195GJ2009PLC057059



30304100528

**TEST REPORT**

<b>Reg.No</b> : 30304100528	<b>Reg.Date</b> : 26-Mar-2023 11:39	<b>Collection</b> : 26-Mar-2023 11:39
<b>Name</b> : MS. SHALINI		<b>Received</b> : 26-Mar-2023 11:39
<b>Age</b> : 33 Years	<b>Sex</b> : Female	<b>Report</b> : 26-Mar-2023 13:44
<b>Referred By</b> : AAROGYAM DIAGNOSTICS @ PATNA		<b>Dispatch</b> : 26-Mar-2023 14:04
<b>Referral Dr</b> : □	<b>Status</b> : Final	<b>Location</b> : 41 - PATNA

Test Name	Results	Units	Bio. Ref. Interval
<b>THYROID PROFILE</b>			
Tri-iodothyronine (Total T3) <i>Method:CLIA</i>	1.16	ng/mL	0.60 - 1.81
Thyroxin (Total T4) <i>Method:CLIA</i>	10.50	µg/dL	4.5 - 12.6
Thyroid Stimulating Hormone (TSH.) <i>Method:CLIA</i> Ultra Sensitive	2.164	µIU/mL	0.55 - 4.78

**Sample Type:** Serum**Note:****TSH Reference Range in Pregnancy :**

- Pregnancy 1st Trimester 0.1 - 2.5 uIU/ml
- Pregnancy 2nd Trimester 0.2 - 3.0 uIU/ml
- Pregnancy 3rd Trimester 0.3 - 3.0 uIU/ml

- 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 an influence on the measured serum TSH concentrations.
- Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- The physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
- All infants with a low T4 concentration and a TSH concentration greater than 40 uU/L are considered to have congenital hypothyroidism and should have immediate confirmatory serum testing.
- If the TSH concentration is slightly elevated but less than 40 uU/L, a second screening test should be performed on a new sample. Results should be interpreted using age-appropriate normative values

**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

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

**Dr. Abhishek Mukherjee**

MBBS,MD (PATHOLOGY)  
 LABORATORY DIRECTOR  
 59390 (WBMC)