

Consultant Physician Clinic

Patient Name:- Diphban
Age / Sex :- 37yrs / female
Chief Complaints:-

→ no any complain

Drug / Food Allergy:-

Past History :-

→ no any past h/o

Family History:-

Systemic Examination:-

c reg
eyes / nose

Provisional Diagnosis:

OPR NO:

Date: 24/6/23

Weight: 62.7kg

Height: 159 cm

BMI: 24.8

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Pulse: 78b/min

BP: 104/63mmHg

SpO2: 100%

Investigation :-

• Urt Ptz - report

Treatment and further advices:-
(Write in Capital Letters)

Rx

→ NO any thing.

Follow Up Date:- _____

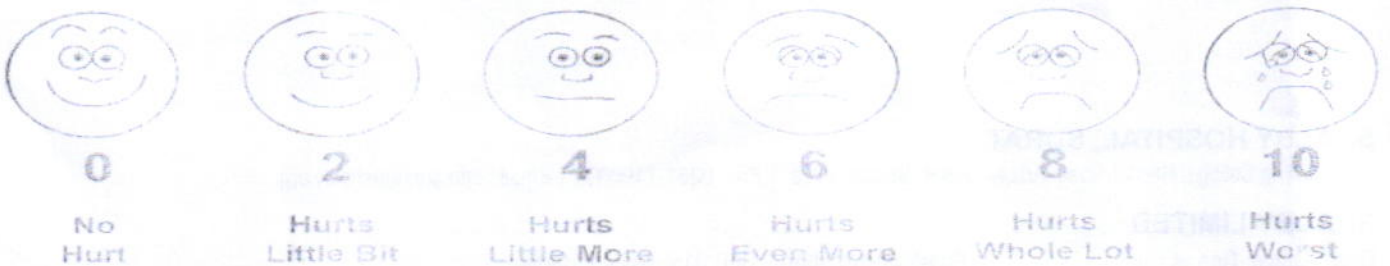
બધી દવાઓ ડોક્ટરને બતાવીને લેવી.

Incase of emergency Please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Patient ID:	SUR00007781	Patient Name:	DIPTIBEN M JAMBU
Age:	33 Years	Sex:	F
Accession Number:	7781	Referring Physician:	DHAWAL MODI
Study Date:	24-Jun-2023	Study:	CHEST PA

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

- No significant abnormality seen.

Thanks for referral.


DR. ASHUTOSH GANDHI
CONSULTANT RADIOLOGIST

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CIN: L85110GJ2004PLC044667

Patient Name: DIPTIBEN M. JAMBU		UHID:	
Age / Sex: 33 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby hospital	Date: 24/06/2023	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver is normal in size and appearance. It shows normal parenchymal reflectivity. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R.

Portal vein appears normal.

Gall bladder is well distended and appears normal. No evidence of calculi seen. Wall appears normal. No pericholecystic fluid seen. **CBD** appears normal.

Pancreas appears normal in size and echotexture.

Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Uterus appears normal in size 64 x 42 x 57 mm. IUCD seen in situ.

The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- No significant abnormality detected.

Thanks for referrals.



DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)
G-14916

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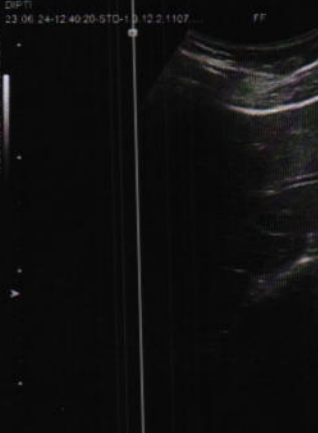
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CIN: L85110GJ2004PLC044667

DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



12:40:20 PM 24-Jun-23 DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



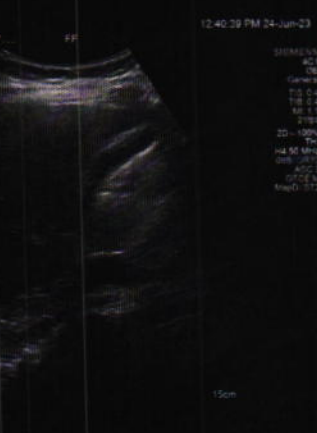
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12:40:33 PM 24-Jun-23



DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



12:40:39 PM 24-Jun-23 DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



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12:40:47 PM 24-Jun-23



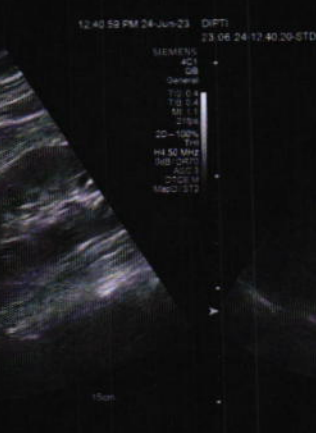
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12:40:59 PM 24-Jun-23 DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



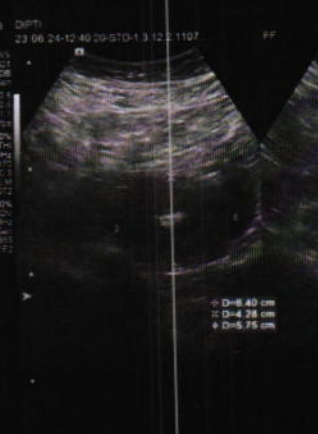
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DIP1
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12:41:05 PM 24-Jun-23 DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



12:41:04 PM 24-Jun-23 DIP1
23.06.24-12:40:20-STD-1.3.12.2.1107



12:41:01 PM 24-Jun-23



▷ D=6.40 cm
◁ D=4.78 cm
◊ D=5.75 cm

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laparoscopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- *Deepika*
Chief Complaints:-

Date: *24/6/23*

Weight:-

Height:-

OPR NO:-

Nutritional Assessment:-

- Obese
- Well Nourished
- Mild-Moderate Nourished
- Severely Mal-Nourished

LMP:- *13/5/23*

40 - irregular menses on top

M/H:- *paup - 34 days / 30*

O/H:- *O/H -*

FTUS 12/7/20/4

P/H:-
F/H
Examination:- *AH - cut insertion since 2yrs*

PLA - soft

Provisional Diagnosis:- *PLS - pt in menses 2 per day*

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CIN: L85110GJ2004PLC044667

Treatment & Further Advices:-
(Write in Capital Letters)

Investigaion Advised:-

Rx

Stop after

10 days

(4/23)

- CAP DOXY 100

⑩
100

- TAB METRO 400

⑩
400

gms

- TAB PAN-D

⑩
400

gms

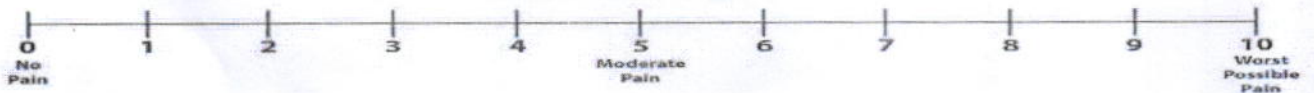
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Follow Up:

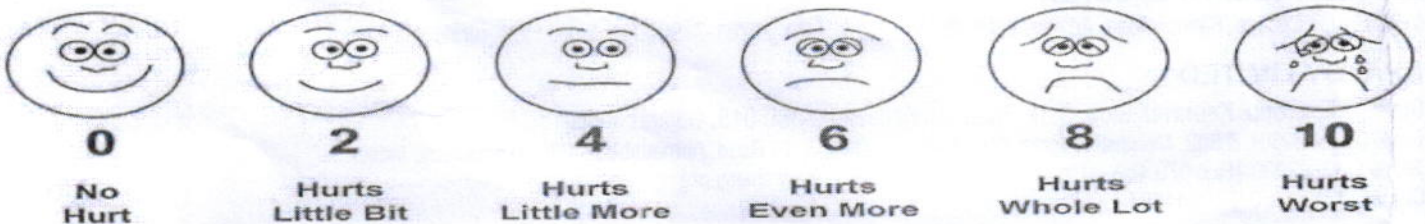
Date: _____

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Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



DR. RUJUTA SHELAT
Consultant Ophthalmologist
Reg. No.:- G-48712

Name :- *Diptiben Jamby*

Date:- *24/6/23*

Chief Complaints:-

for routine check up

BE Lasik done

Pain Assessment:-

Past History:-

Family History:-

- NAD -

Allergy:-

Personal History:- **Habits:-** Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:-

HT:- WT:-

Visual Acuity:- *6/9*

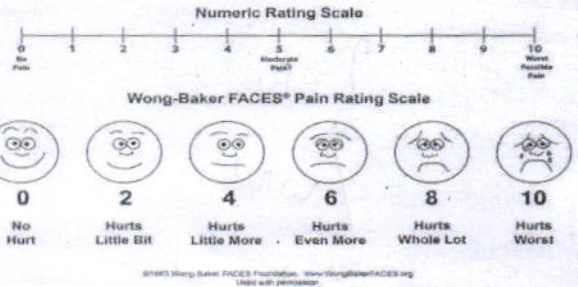
PH Vision:-

NCT *11 mm OD Rg*

ON Examination Ant. Segmenet

Both Eye

- CNL -



Cornea

Anterior Chamber

Lens

Fundus

Rt. EYE

Lt. EYE

Media:-

Disc:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

} BE
WNL

Investigation:-

Treatment:-

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:- 2 2 month

RPS

Signature of the Consultant

Patient's Name: Diptiben Jambu

Age: 33 yrs/ Female

Date: 24 / 06 / 2023

ECHOCARDIOGRAPHY REPORT

Valves

Mitral valve :Normal, No MR

Aortic valve :Normal, No AR

Tricuspid valve :Normal, No TR

Pulmonary valve:Normal, No PR

Chambers

Left Atrium:Normal

Right Atrium:Normal

Right Ventricle:Normal size cavity,Good RV systolic function With TAPSE:20

Left Ventricle: **Normal size cardiac chambers**, No Regional wall Motion abnormality.
Normal LV systolic function
with Ejection Fraction 60 %.
Normal Diastolic Flow Pattern.

Septae

IVS: Intact. No residual VSD.

IAS :Intact.

Pericardium:Normal.

IVC:13 mm with more than 50% collapsibility.

OTHER FINDINGS : Bilateral lung angle clear

CONCLUSION:

- Normal LV Systolic function
- No RWMA
- EF 60 %



DR.SUSHIL YADAV
Consultant Clinical cardiologist

Note : Normal echo study does not rule out underlying Coronary artery disease

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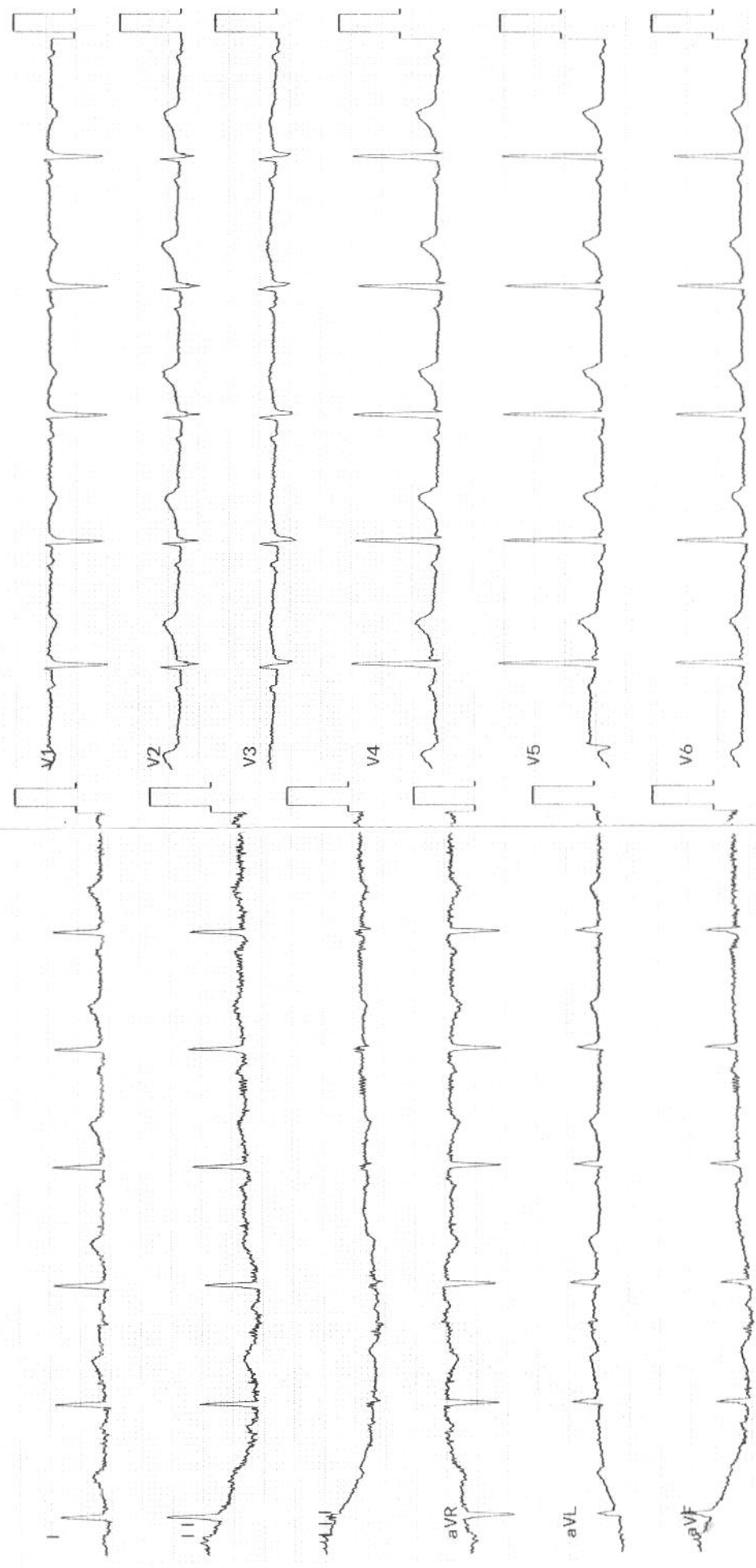
1100 Sinus rhythm
9110 ** normal ECG **

D. P. Hiben

[Signature]

Unconfirmed Report
Reviewed by:

10 mm/mV



10 mm/mV 25 mm/s Filter: H50 d 100 Hz

ID: _____ Name: _____ Birth date: _____ / _____ / _____ years
Sex: *[M]* cm kg mmHg

Medication:

Symptoms:

History:

Heart rate: 75 bpm

PR int: 162 ms

QRS dur: 68 ms

QT/QTc(E) int: 382/410 ms

P/QRS/T axis: 46/34/18 °

RV5/SV1 amp: 1.64/0.92 mV

RV5+SV1 amp: 2.56 mV



Pre - op

Post- op

Health Check-up

Date : 28/8/23

Patient Reg. No. : _____

Patient Name : Diptiben m jumbi Age / Sex : 33/F

Address : Surat

Complaints :

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History :

Hypertension : - DM - Acidity - Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication :

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : _____

59/45
67

Crown / Bridge Replacement :	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Advised Crown / Bridge :	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Advised X - Ray / O.P.G. :	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in an well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

A

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

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Tel.: 0261 7190000 | Ext.: 851 | Mo.: 9512036046 | Email : pathology.surat@shalby.in | Web : www.shalby.org

PID : SUR0000344177 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu	/	Registered On : 24-Jun-2023 09:20 AM
Lab ID : 306901645		Collected On : 24-Jun-2023 09:20 AM
Gender/Age : Female / 33 Years	DOB : 15-Sep-1989	Received On : 24-Jun-2023 09:26 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	11.2 ✓	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.47	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	36.8	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	82.4	fL	83 - 101
MCH <i>Calculated</i>	25.1	pg	27 - 32
MCHC <i>Calculated</i>	30.4	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	15.7	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <i>Electrical Impedance</i>	5970	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <i>Flow Cytometry</i>	57	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	37	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	1	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <i>Electrical Impedance</i>	316000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	7.6	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs

WBCs

PLATELETS

MALARIAL PARASITE

Hypochromic microcytic with anisopoikilocytosis.

Total and differential leucocyte counts are within normal limit

Adequate in number and normal in morphology.

Malarial parasites are not seen on smear examination.

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference Interval: Dacie and Lewis practical haematology 11th edition.

This is an Electronically Authenticated Report.

Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

Generated On : 24-Jun-2023 01:34 PM

Approved On : 24-Jun-2023 10:28 AM

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DOB : 15-Sep-1989

Received On : 24-Jun-2023 09:26 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type

"O"

RH Type

POSITIVE

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist

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Approved On : 24-Jun-2023 12:46 PM

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	18	mm in 1 hour	0 - 20
HBA1C HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.8 ✓	%	Non-diabetic: ≤ 5.6 Pre-diabetic: 5.7-6.4 Diabetic: ≥ 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: < 7.5

Estimated Average Glucose (eAG) (mg/dL) * 120 ✓ mg/dL
Calculated

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Dr Pankaj AgrawalM.B., D.C.P
Consulting Pathologist

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PID : SUR0000344177 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu /

Registered On : 24-Jun-2023 09:20 AM

Lab ID : 306901645

Collected On : 24-Jun-2023 09:20 AM

Gender/Age : Female / 33 Years

DOB : 15-Sep-1989

Received On : 24-Jun-2023 09:24 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum, Urine (PP),
Fluoride P, Urine

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)

93 ✓

mg/dL

74 - 106

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)

ABSENT

mg/dL

ABSENT

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)

150

mg/dL

Normal: 100-140 Impaired: 140
-199 Diabetic :=>200

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)

ABSENT

mg/dL

ABSENT

Glucose-oxidase/oxidase reaction

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Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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Gender/Age : Female / 33 Years	DOB : 15-Sep-1989
Ref. By : Dr. Health Check Up . Shalby	Received On : 24-Jun-2023 09:27 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	164 ✓	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	81 ✓	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	49 ✓	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	115	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
S.LDL <i>Calculated</i>	99 ✓	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	16 ✓	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.0		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	3.3	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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PID : SUR0000344177 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu /	Registered On : 24-Jun-2023 09:20 AM
Lab ID : 306901645	Collected On : 24-Jun-2023 09:20 AM
Gender/Age : Female / 33 Years	DOB : 15-Sep-1989
Received On : 24-Jun-2023 09:27 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALT) <i>Multi Point Rate with P-5-P</i>	24	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	26	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	79	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	24	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.0	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.2	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	2.8	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.5	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.3	mg/dL	0-1 day (premature) 1.0 - 8.0 0-1 day (full term) : 2.0 - 6.0 1-2 day (premature) : 6.0 - 12.0 1-2 day (full term) : 6.0 - 10.0 3-5 day (premature) : 10.0 - 14.0 3-5 day (full term) : 4.0 - 8.0 Adult : 0.2 - 1.3
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.3	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
BILIRUBIN DIRECT <i>Calculated</i>	0.0	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu /	Registered On : 24-Jun-2023 09:20 AM
Lab ID : 306901645	Collected On : 24-Jun-2023 09:20 AM
Gender/Age : Female / 33 Years	DOB : 15-Sep-1989
Received On : 24-Jun-2023 09:27 AM	Sample Type : Serum
Ref. By : Dr. Health Check Up . Shalby	

Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
RENAL FUNCTION TEST			
Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	7	mg/dL	7 - 17
UREA <i>Calculated</i>	15	mg/dL	15 - 36
S. CREATININE <i>Enzymatic - Creatinine amidohydrolase</i>	0.56	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	3.3	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	8.4	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	140	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.52	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	107	mmol/L	98 - 107

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PID :-SUR0000344177 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu /

Registered On : 24-Jun-2023 09:20 AM

Lab ID : 306901645

Collected On : 24-Jun-2023 09:20 AM

Gender/Age : Female / 33 Years

DOB : 15-Sep-1989

Received On : 24-Jun-2023 09:27 AM

Ref. By : Dr. Health Check Up . Shalby

Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	139	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	10.73	µg/dL	6.09 - 12.23
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	1.950	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

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PID : SUR0000344177 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Dipti Madhukar Jambu	/	Registered On : 24-Jun-2023 09:20 AM
Lab ID : 306901645		Collected On : 24-Jun-2023 09:20 AM
Gender/Age : Female / 33 Years	DOB : 15-Sep-1989	Received On : 24-Jun-2023 09:24 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Urine

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour	PALE YELLOW		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Blood	<i>Peroxidase like activity of hemoglobin</i>	NIL	RBCs/ μ L
Bilirubin	<i>Azo coupling Reaction with diazonium</i>	NIL	mg/dL
Urobilinogen	<i>Modified Ehrlich reaction</i>	NORMAL	mg/dL
Ketone	<i>Sodium Nitroprusside reaction</i>	NIL	mg/dL
Protein	<i>Protein Error of Indicator Principle</i>	NIL	mg/dL
Nitrite	<i>Diazotization reaction of nitrite with an aromatic amine</i>	NEGATIVE	mg/dL
Glucose	<i>Glucose-oxidase/oxidase reaction</i>	NIL	mg/dL
pH	<i>Double Indicator principle</i>	5.5	PH value
Specific Gravity	<i>Refractometric Method - Bromthymol blue</i>	1.005	S.G. value
Leucocyte	<i>Leucocyte Esterase Test</i>	NEGATIVE	WBCs/ μ L
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	NIL	/hpf	0-2/hpf
Epithelial cells	6-8/hpf	/hpf	NA
Crystals	NIL		Nil
Cast	NIL/LPF		Nil/LPF
Bacteria	NIL		Nil
Amorphous	NIL		Nil
Yeast	NIL		Nil

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