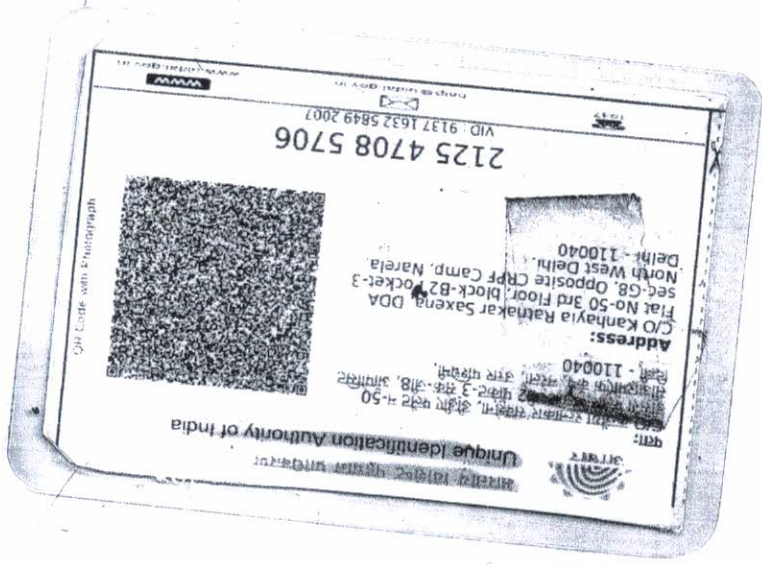




Shilpa



Pooja
Dr. POOJA GARG
M.B.B.S., D.M.R.D.
Reg. No. DMC/R/03398
Radiologist



Sri Lanka

DR. POOJA GARG
M.B.B.S., D.M.R.D
Reg No. DMC/R/03398
Radiologist

To

One Plus Ultrasound Lab
47 Harsh vihar

Sir

I am Shilpa Kumari, Due to some
breathing problem I can't able to do TMT.
Kindly consider it.

EC- 169457

mob:- 7678137667

Shilpa



DR. POOJA GARG
M.B.B.S., D.M.R.D
Reg. No. DMC/R/03398
Radiologist

To

One Plus Ultrasound Lab
Harsh vikas

Sir

'j' Shilpa Kumari, Due to some reason 'j'
Cannot able to do stool test.

Please Consider it.

{ Name Shilpa Kumari
EC- 169457
Mob: 7678137667


DR. POOJA GARG
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Reg. No. DMC/R/03398
Radiologist

ONE PLUS ULTRASOUND LAB

47, HARSH VIHAR, PITAMPURA

Ms. SHILPA KUMARI
 Age : 26/F
 Ref. by : MEDIWHEEL
 Indication1 :
 Indication2 :
 Indication3 :
 COMMENTS :

ID : 8
 Ht/Wt : 152/86
 Recorded : 28-12-2021 12:40
 Medication1 :
 Medication2 :
 Medication3 :

BPM : 99
 BP : 126/82
 P Axis : 0 deg
 QRS Axis : 0 deg
 T Axis : 0 deg

P duration : 0 msec
 PR duration : 0 msec
 QRS duration : 0 msec
 QT Interval : 0 msec
 QTc Interval : 0 msec

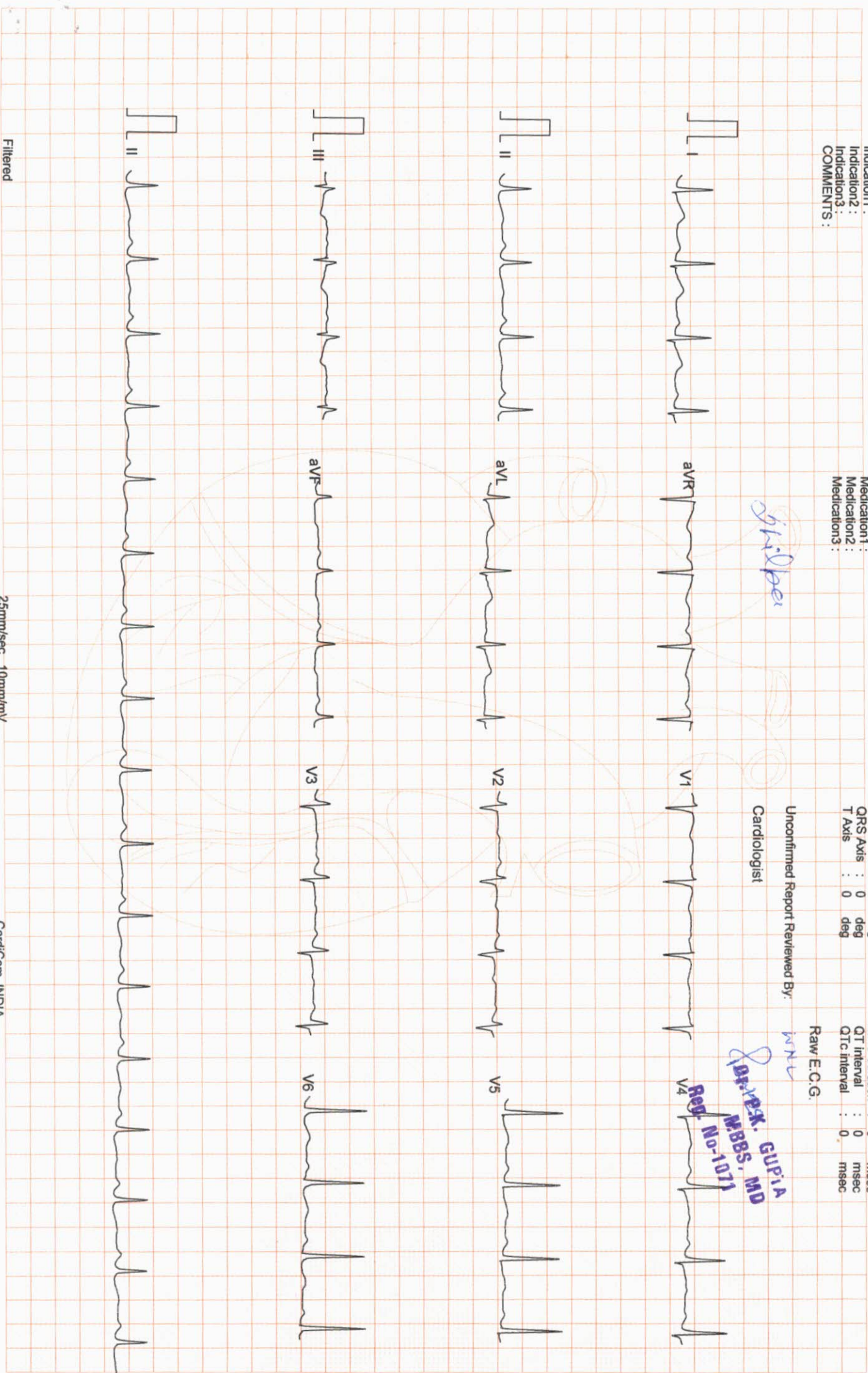
Raw E.C.G.

Unconfirmed Report Reviewed By:

Cardiologist

Shilpa

Dr. RAK. GUPTA
MBBS, MD
Reg. No-10171



Filtered

25mm/sec 10mm/mV

CardiCom, INDIA



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Dr. Pooja (Garg) Agarwal
Radiologist & Director
MAMC & Lok Nayak Hospital

Name	: Mrs. SHILPA KUMARI	Age/Sex	: 26 YRS/Female
Ref. By	: Dr. MEDIWHEEL	Lab No	: 012112280020
Date	: 28-Dec-2021	Patient ID	: LSHHI89209

X-ray-Chest PA view

Bony cage and soft tissues are normal.
Cardiothoracic ratio is normal.
Mediastinum is normal.
Both hila are normal.
Both costophrenic angles are clear.
Both domes of diaphragm are normal.
Lung fields are clear. No parenchymal lesion seen.

IMPRESSION: Normal Study.

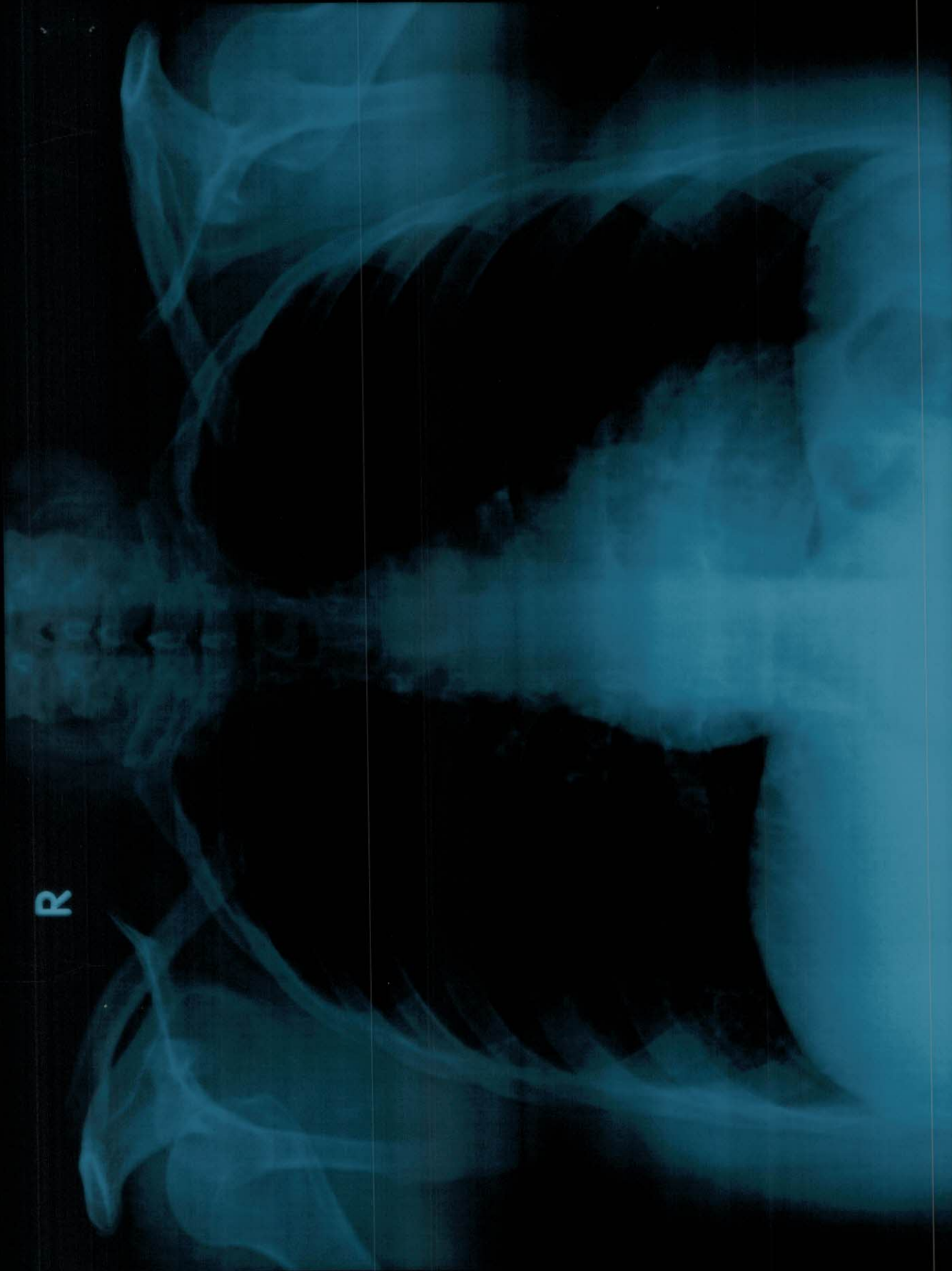

DR. POOJA GARG
RADIOLOGIST
REG NO- DMC/R/03398

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M.B.B.S., D.M.R.D
Reg No. DMC/R/03398
Radiologist

Type By : darshita

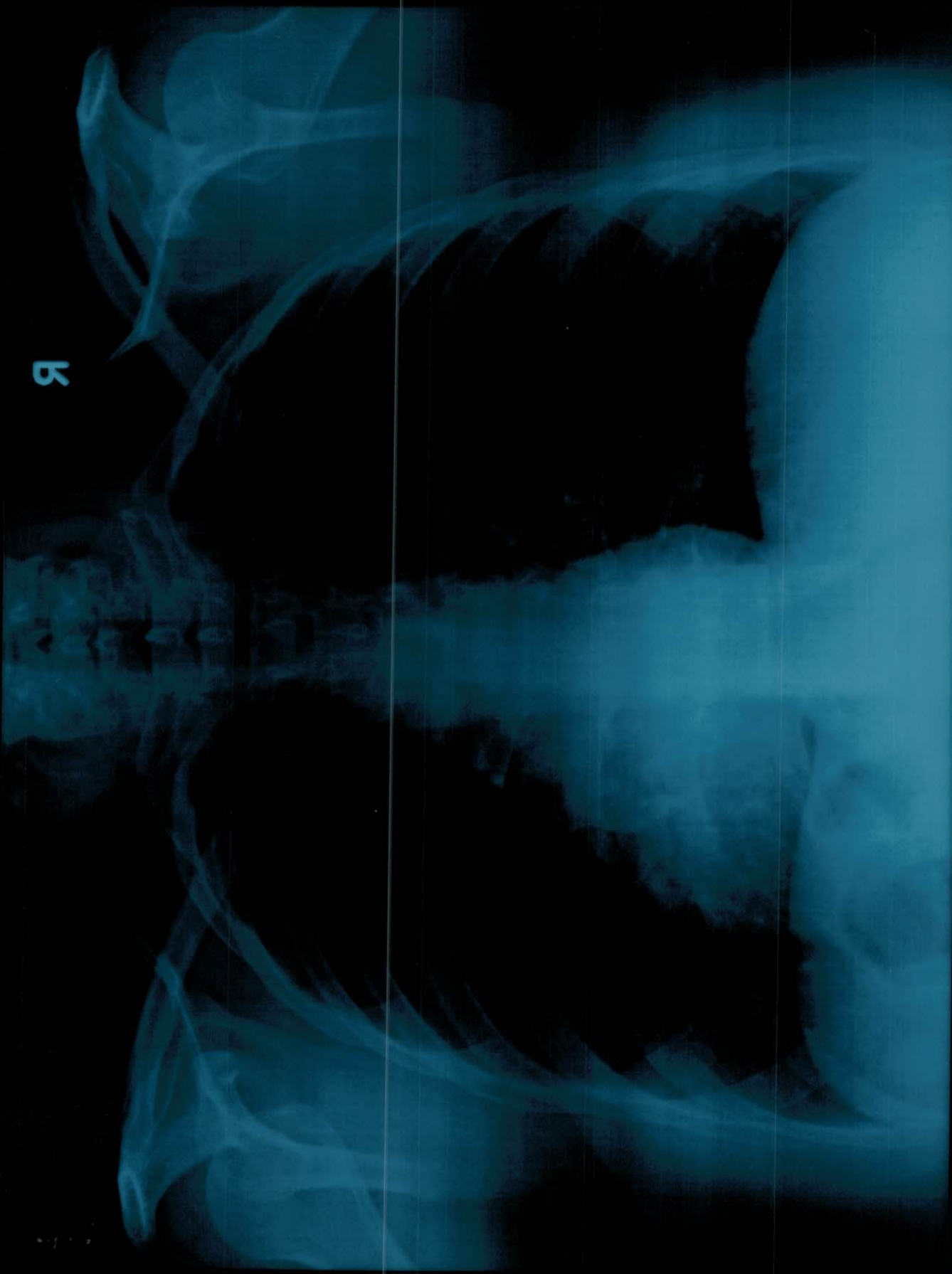
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R



MRS SHILPA KUMARI AGE 26 YRS 28-12-2021 F CHEST PA VIEW 12/28/2021
ONEPLUS ULTRASOUND LAB,47-HARSH VIHAR,PITAMPURA

ONEPLUS ULTRASOUND LAB, 43-HARSH NIHAR, PITAMPURA
MRS SHILPA KUMARI AGE 58 YRS 58-15-5051 F CHEST PA VIEW 15/58/5051



R



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Name	: Mrs. SHILPA KUMARI	Age/Sex	: 26 YRS/Female
Ref. By	: Dr. MEDIWHEEL	Lab No	: 012112280020
Date	: 28-Dec-2021	Patient ID	: LSHHI89209

ULTRASOUND EXAMINATION----WHOLE ABDOMEN

Liver is borderline enlarged in size (15.3 cm) and normal in outline with altered echopattern. Diffuse increase in echogenicity of liver parenchyma is noted, suggestive of fatty infiltration (grade I). Intrahepatic biliary radicles are not dilated. No abscess or mass lesion seen. Hepatic veins, portal vein, IVC and aorta are normal. CBD is normal in caliber.

Gall bladder is partially distended. Multiple calculi are noted in the gall bladder lumen, largest measuring upto 10.5 mm. The gallbladder walls are not thickened. No Pericholecystic edema is seen. No local tenderness over gallbladder is present.

Both kidneys are normal in size, shape, position, outline and echopattern. Corticomedullary differentiation is maintained. No pelvicalyceal dilation or mass lesion is seen.

Spleen is normal in size and echotexture. No mass lesion seen.

Pancreas is normal in size, outline and echotexture .

Urinary bladder is normal in shape and position. No evidence of intravesical stone or mass seen.

Uterus is normal in size (measures 8.7 x 2.8 cm), shape, position and echopattern. No mass seen

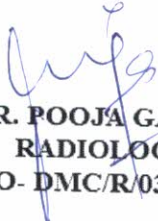
Uterine cavity is empty. Endometrial thickness is 5.8 mm.

Both ovaries appear normal in size, shape and echopattern. No tubo-ovarian mass seen.

No abnormal bowel wall thickening seen in right iliac fossa.
No free fluid seen anywhere in abdomen.

IMPRESSION:

- Fatty infiltration of liver (grade I) with borderline hepatomegaly.
- Cholelithiasis.


DR. POOJA GARG
RADIOLOGIST
REG NO- DMC/R/03398

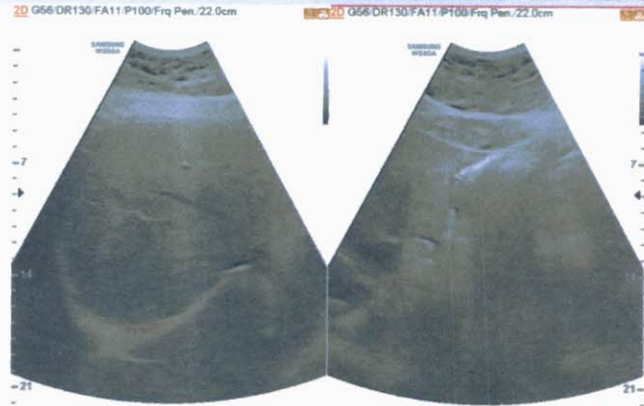
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Type By : darshita

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WSS0A MRS SHILPA 26/F
OnePlus Ultrasound Lab MI 1.5 28-12-2021
CA1-7A / Abdomen / FR 19Hz Tib0.1 11:52:07 AM



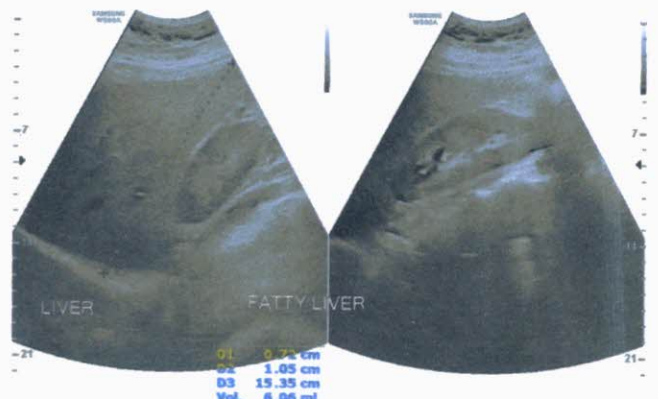
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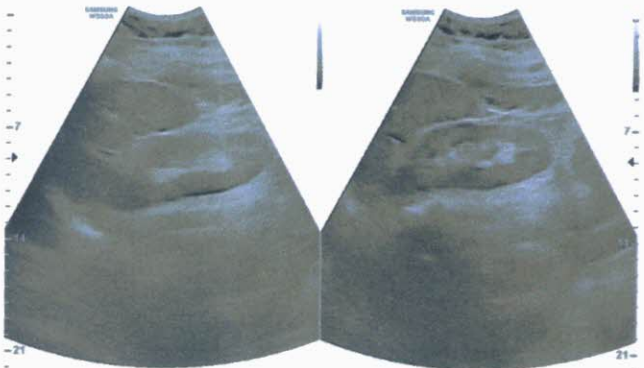
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CA1-7A / Abdomen / FR 19Hz Tib0.1 11:52:30 AM



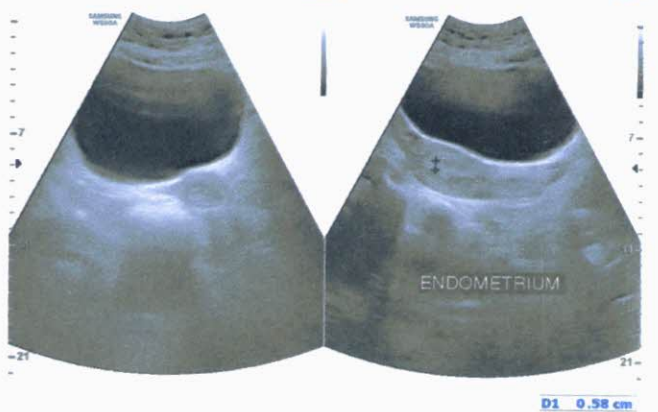
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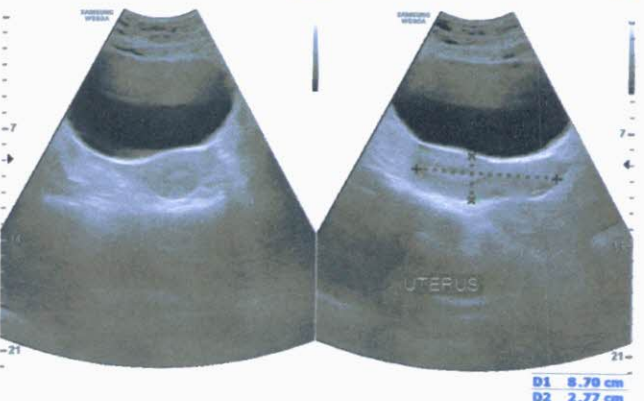
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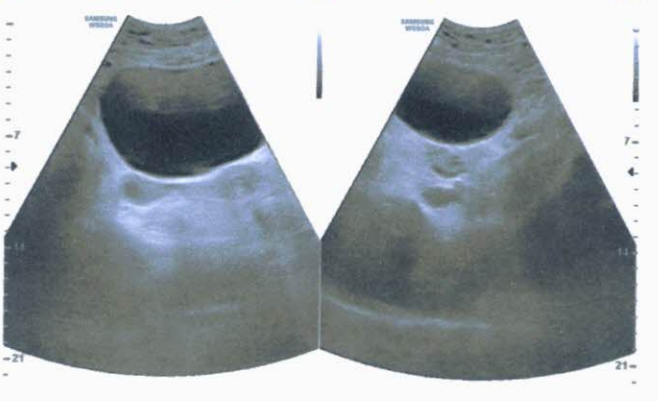
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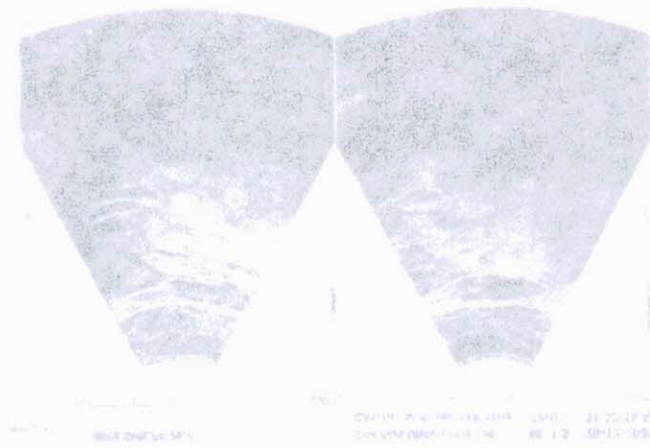
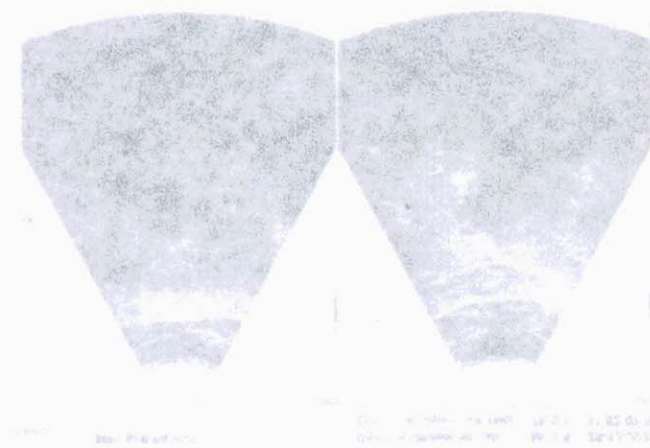
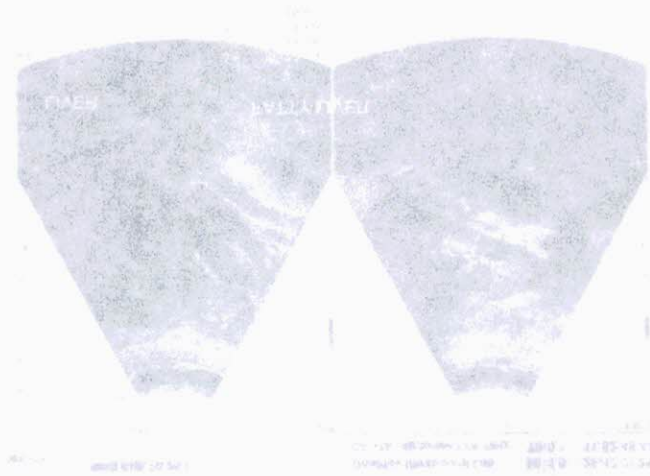
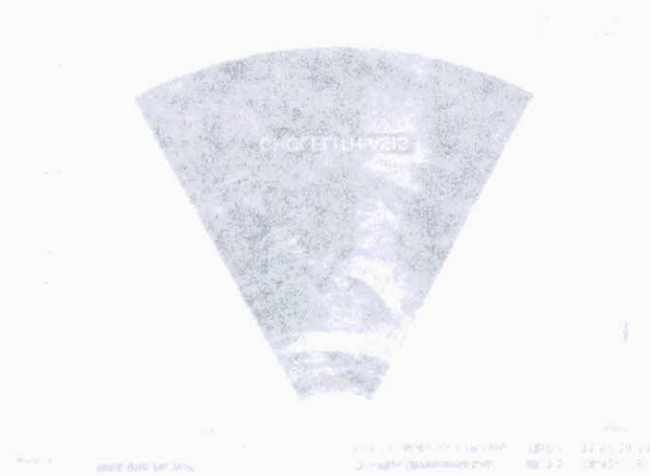
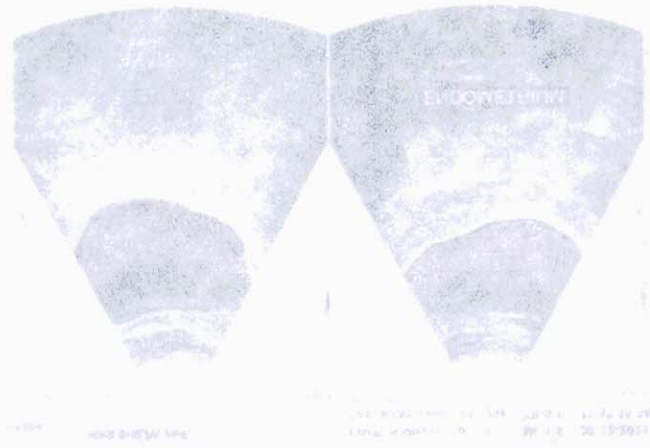
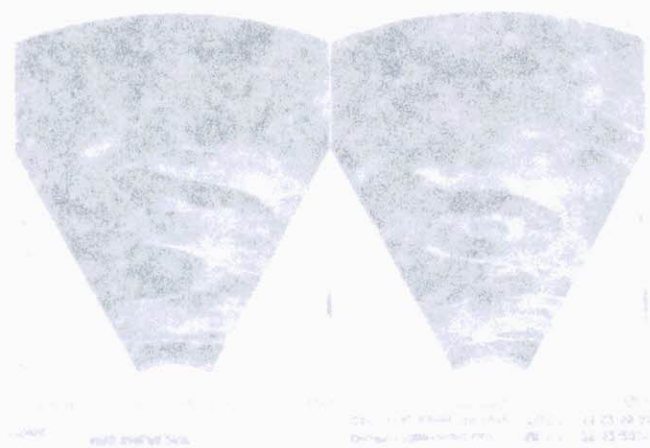
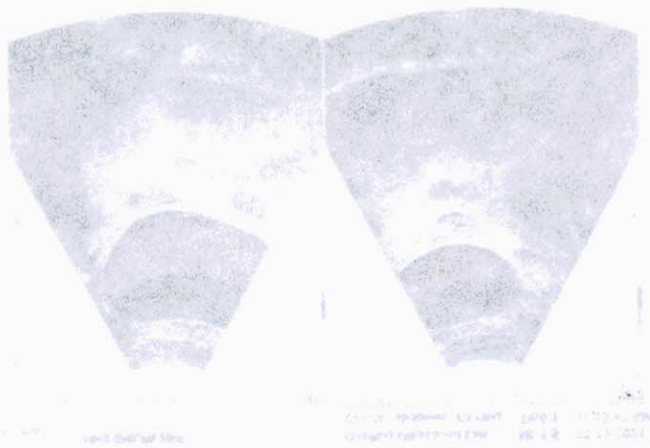
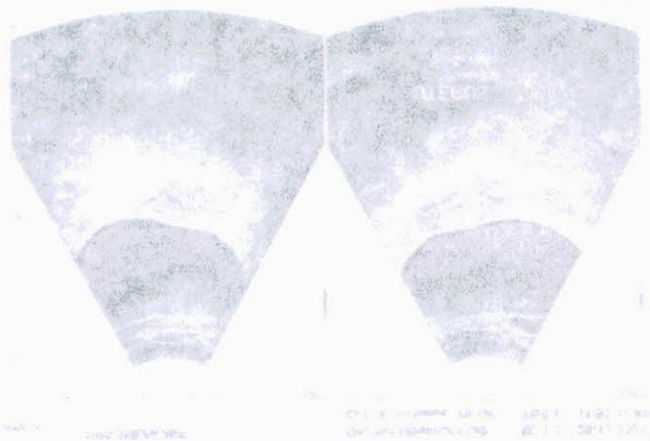


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CA1-7A / Abdomen / FR 19Hz Tib0.1 11:53:37 AM



WSS0A MRS SHILPA 26/F
OnePlus Ultrasound Lab MI 1.5 28-12-2021
CA1-7A / Abdomen / FR 19Hz Tib0.1 11:53:43 AM







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Dr. Pooja (Garg) Agarwal
Radiologist & Director
MAMC & Lok Nayak Hospital



NAME	QUALITY FIRST... ALWAYS :Mrs. SHILPA KUMARI	Barcode No	:10110849
AGE/GENDER	:26 YRS/Female	SPECIMEN DATE	:28/Dec/2021 10:28AM
PATIENT ID	:89209	SPECIMEN RECEIVED	:28/Dec/2021 10:36AM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:28/Dec/2021 04:00PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012112280020

Test Name	Result	Unit	Ref. Range
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HAEMATOLOGY

Health checkup 2 Female

Glycosylated Hemoglobin (HbA1c) 5.1 % Non Diabetic adults <5.7
Prediabetic (at risk) 5.7-6.4
Diabetes >6.4

Estimated average blood glucose (eag) 100

Reference range (mg/dl):

90 - 120:Excellent control, 121 - 150:Good Control, 151 - 180:Average Control, 181 - 210:Action Suggested

>211:Panic value

BLOOD GROUP (ABO) B
Rh typing POSITIVE

NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

CBC

Haemoglobin	11.4	g/dl	11.5-15.0
Total Leucocyte Count	8890	/cumm	4000-10000
Differential leucocyte count			
Neutrophils	64.3	%	40-80
Lymphocyte	30.20	%	20-40
Monocytes	3.70	%	2-10
Eosinophils	1.5	%	1-6
Basophils	0.3	%	0-2
RBC Count	4.01	million/cumm	3.8-4.8

Checked By.

DR. NITIN AGARWAL
MBBS,MD(PATHOLOGIST)
Dr NITIN AGARWAL
MBBS, MD (Path)
DMC/R/01436

Page 1 of 4

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Clinical correlation is essential for final diagnosis. • If test results are unsatisfactory please contact personally or on phone. • This report is for perusal of doctors only
• All disputes Subject to Delhi Jurisdiction only. • Not for medicolegal purposes. • All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound



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Test Name	Result	Unit	Ref. Range
PCV(Hematocrit)	36.5	%	36-46
MCV	90.9	fL	83-101
MCH	28.4	Pg	27-32
MCHC	31.3	G/dL	32-35
Platelet count	152000	/cumm	150000-450000
RDW-CV	14.4	%	11.4-14.0
ESR(WESTEGRENS METHOD)	12	mm/1hr	<20

BIOCHEMISTRY

<u>Blood sugar fasting</u>	90	mg/dL	70-110
<u>Blood sugar pp</u>	110	mg/dL	70.0-140.0
<u>Bun (blood urea nitrogen)</u>	12.60	mg/dl	7-18.7
<u>Uric acid, serum</u>	4.6	mg/dl	2.4-5.7
<u>Creatinine, serum</u>	0.7	mg/dl	0.50-0.9

LFT(LIVER FUNCTION TEST)

Bilirubin Total	0.65	mg/dl	0.1-1.2
Bilirubin Conjugated	0.32	mg/dl	0-0.4
Bilirubin Unconjugated	0.33	mg/dl	up to 0.7
SGOT (AST)	32	U/L	0-31
SGPT (ALT)	34	U/L	<34
Alkaline phosphatase	95	U/L	35-104
Gamma glutamyl transpeptidase	25	U/L	<39
Total Protein	6.9	gm/dl	6.60 - 8.70
Albumin	3.9	g/dL	3.8-5.1
Globulin	3.00	gm/dl	1.8-3.4
Albumin/Globulin Ratio	1.30		1.10 - 2.50

LIPID PROFILE

Cholesterol	204	mg/dl	50-200
Triglycerides	87	mg/dL	25-150

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Page 2 of 4

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Test Name	Result	Unit	Ref. Range
HDL Cholesterol	48	mg/dL	30 - 70
LDL cholesterol	139	mg/dL	< 130
VLDL cholesterol	17.4	mg/dL	5-40
Cholesterol/HDL Ratio	4.2		Low Risk 3.3-4.97 Average Risk 4.4-7.1 Moderate Risk 7.1-11.0 High Risk >11.0
LDL/HDL Ratio	2.9		0 - 3.55

According to ATP III and NCEP guidelines

Parameter	Normal	Desirable	Borderline	High
Total cholesterol	<200	200-239		240
Triglycerides	<150	150-199	200-499	500
LDL	Optimal <100 Near Optimal 100-129	130-159	160-180	190
HDL	<40 : LOW 60 : HIGH			

ENDOCRINOLOGY

THYROID PROFILE(T3,T4,TSH)

Triiodothyronine total [t3]	0.79	ng/dl	0.52-1.9
Thyroxine total [t4]	8.40	µg/dl	4.8-11.6
TSH (Thyroid Stimulating Hormone)	3.50	µIU/ml	0.25-5.0

AGE WISE VARIATION IN TSH

AGE	TSH(µIU/ml)	AGE	TSH(µIU/ml)
1-4 weeks	1.00 - 19.0	16-20 yrs	0.25 - 5.0
1-12 mths	1.70 - 9.1	21 - 80 yrs	0.25 - 5.0
1-5 yrs	0.80 - 8.2	I st trimester	0.25 - 5.0
6-10 yrs	0.25 - 5.0	II nd trimester	0.50 - 5.0
11-15 yrs	0.25 - 5.0	III rd trimester	0.4 - 6.0

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Test Name	Result	Unit	Ref. Range
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Reference ranges - Interpretation of Diagnostic tests - (Jacques Wallach)

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. 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.
4. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis

*** End Of Report ***

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DMC/R/01436 Page 4 of 4

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