


The Signature
ADVANCED SUPER SPECIALITY
H O S P I T A L



Patient Name : Mrs. SANGEETA GAHALYAN
Age / Gender : 35 Years 0 Months 0Days / Female
Referred By : Dr. CMO
Req.No : 23270883
Sample ID : 2313396
Patient Type : OPD
Bed No :
UHID : 26034
IPNO :
Bill Date : 25/03/2023
Reporting Date : 25/03/2023


BIOCHEMISTRY

PROTEINS

TOTAL PROTEIN (Biuret)	6.7	g/dl	6.0 - 8.3	SERUM
ALBUMIN (BCG- DYE)	4.1	g/dl	3.2 - 5.0	SERUM
GLOBULIN Calculated	2.6	gm/dl	1.5 - 3.6	
A/G RATIO Calculated	1.58		0.9 - 2.0	

-**** End of Report ****-

This is Provisional Report


Lab Technician

Dr.NishaTiwari
(MD.Microbiology)

Dr. Neha Gupta
MBBS,MD(Pathology)
(Consultant Pathologist)

Dr. Shreya Pradhan
MBBS,MD(Microbiology)
(Consultant Microbiologist)

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BIOCHEMISTRY

Liver Function Test (LFT)

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	SPECIMEN TYPE
TEST METHOD				
<u>BILIRUBIN TOTAL AND DIRECT</u>				
BILIRUBIN TOTAL (Diazonium Salt)	0.7	mg/dl	0.1 - 1.2	SERUM
BILIRUBIN DIRECT (Diazonium Salt)	0.3	mg/dl	00 - 0.3	SERUM
BILIRUBIN INDIRECT (CALCULATED)	0.4	md/dl	0 - 0.9	
SGOT/AST (UV-KINETIC)	27	U/l	0 - 45	SERUM
SGPT/ALT (UV-KINETIC)	17	U/l	0 - 45	SERUM
ALKALINE PHOSPHATASE (ALP) (Kinetic)	98	U/l	39 - 118	SERUM

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CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION - URINE

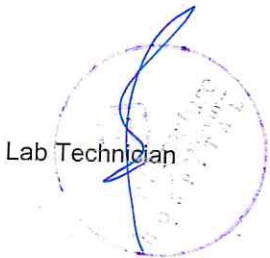
PUS CELLS (Microscopic)	6-8	/HPF	0 - 3	Urine
RBC- Urine (Per Oxidase Reaction)	12-15	/HPF	NIL	Urine
EPITHELIAL CELLS	4-6	/HPF	0 - 5	
CAST	NIL		NIL	
CRYSTALS	NIL		NIL	
BACTERIA	NIL			
OTHERS	NIL			

COMMENTS: Actual numerical values for WBCs, RBCs and Epithelial cells are not defined and must be correlated clinically.

Test Methods: Reagent strip analysis and urine sediment microscopy.
Reagent strip / chemical analysis are based on: pH-Double Indicator principle; Specific gravity Ion exchange method; Glucose Glucose oxidase-peroxidase/Benedicts; Protein Acid-base indicator/Sulfosalicylic acid; Urobilinogen Coupling reaction/Ehrlichsreaction, Bilirubin Coupling reaction, Ketones Nitroprusside method/Rotheras test.

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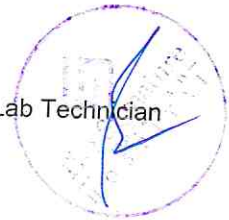
CLINICAL PATHOLOGY

CHEMICAL EXAMINATION

UROBILINOGEN (Ehrlich's Aldehyde Reaction)	NORMAL	NORMAL	Urine
PROTEIN	(+)	NIL	
BLOOD	(+)	NIL	
KETONE (Sodium Nitroprusside)	NIL	NIL	Urine
BILIRUBIN (Diazonium Salt)	NIL	NIL	SERUM
GLUCOSE (Benedict's Test)	NIL	NIL	Urine
NITRITE	NEGATIVE		

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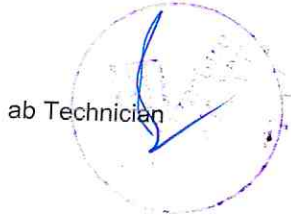
CLINICAL PATHOLOGY

Urine Routine And Microscopy.

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
QUANTITY	20ML			
COLOUR	PALE YELLOW			
TURBIDITY	S.TURBID			
SPECIFIC GRAVITY (Bromthymol Blue)	1.030		1.003-1.030	Urine
PH (Chromatography)	5.5		4.7-7.0	Urine

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Patient Type : OPD

Bed No :

UHID : 26034

IPNO :

Bill Date : 25/03/2023

Reporting Date : 26/03/2023

BIOCHEMISTRY

Glycosylated Haemoglobin

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
HbA1C (GLYCOSYLATED HEMOGLOBIN)	6.0	%	4.6 - 6.2	

Metabolically Healthy Patients 4.5 6.0
Good Control 6.1 6.5
Fair Control 6.6 7.0
Poor Control > 7.0

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BIOCHEMISTRY

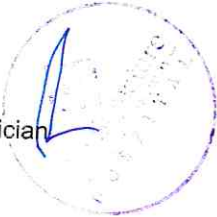
PROTEINS

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ALBUMIN (BCG- DYE)	4.1	g/dl	3.2 - 5.0	SERUM
GLOBULIN Calculated	2.6	gm/dl	1.5 - 3.6	
A/G RATIO Calculated	1.58		0.9 - 2.0	

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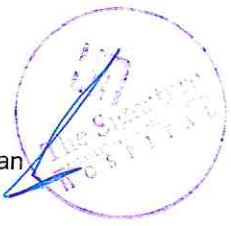
BIOCHEMISTRY

Kidney Function Test .

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
BLOOD UREA (Urease UV/GLDH)	20	mg/dl	13 - 45	SERUM
SERUM CREATININE (Jaffe Rate)	0.8	mg/dl	0.6 - 1.2	SERUM
URIC ACID (Enzymatic/Uricense)	4.7	mg/dl	2.5 - 6.8	SERUM
ELECTROLYTES				
SODIUM (ISE-Indirect)	131	mmol/L	132 - 150	SERUM
POTASSIUM (ISE-Indirect)	3.9	mmol/L	3.5 - 5.5	SERUM

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BIOCHEMISTRY

Lipid Profile

TEST NAME	RESULT	UNITS	REFERENCE INTERVAL	BIOLOGICAL SPECIMEN TYPE
TEST METHOD				
LIPID PROFILE				
CHOLESTROL (CHOD-TRINDER)	143	mg/dl	00 - 200	SERUM
TRIGLYCERIDES (GPO-Trinders)	117	mg/dl	35 - 170	SERUM
HDL- CHOL (Direct Method/ Enzymatic Colorometric)	53	mg/dl	40 - 60	SERUM
VLDL-CHOL CALCULATED	23.4	mg/dl	10 - 40	
LDL-CHOLESTROL	66.6	mg/dl	0 - 130	
LDL/HDL RATIO	1.26		0-3	
CHOLESTROL/HDL RATIO	2.7			

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Registered : 25/03/2023/ 11.23 AM
Reported on : 25/03/2023/ 4.19 PM



BIOCHEMISTRY

Blood Sugar 2 Hr. Pp

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
BLOOD SUGAR POST PRANDIAL(BSPP)	106	mg/dl	90 - 140

Method: God- Trinders

Increased In:

Diabetes Mellitus

Stress (e.g. emotion, burns, shock, anesthesia)

Acute Pancreatitis

Chronic Pancreatitis

Wernicke encephalopathy (Vitamin B1 deficiency)

Effect of drugs (e.g. corticosterogens, alcohol, phenytoin, thiazides)

Decreased in :

Pancreatitis disorders

Extrapancreatic tumors

Endocrine disorders

Malnutrition

Hypothalamic lesions

Alcoholism


Endocrine Disorders

-**** End of Report ****-

Please Correlate With Clinical Findings If Necessary Discuss
* This is an Electronically Authenticated Report *

*** Some of the test is performed in PARK HOSPITAL GROUP SUPER SPECIALITY HOSPITAL

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BIOCHEMISTRY

Blood Group And Rh Factor

TEST NAME	RESULT	UNITS	BIOLOGICAL
TEST METHOD			REFERENCE INTERVAL SPECIMEN TYPE
BLOOD GROUP(ABORh)	`A` POSITIVE		

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BIOCHEMISTRY

Blood Sugar Fasting

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	SPECIMEN TYPE
TEST METHOD BLOOD SUGAR FASTING (God- Trinders)	89	mg/dl	75 - 115	Flouride Plasma

Increased In:

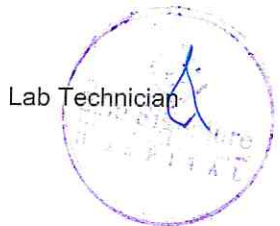
- Diabetes Mellitus
- Stress (e.g, emotion, burns, shock, anesthesia)
- Acute Pancreatitis
- Chronic Pancreatitis
- Wernicke encephalopathy (Vitamin B1 deficiency)
- Effect of drugs (e.g. corticosterogens, alcohol, phenytoin, thiazides)

Decreased in :

- Pancreatitis disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine Disorders

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HEMATOLOGY

Complete Blood Count -CBC(HB\TLC\PCV\RBC\Platelet)

TEST NAME	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	SPECIMEN TYPE
TEST METHOD				
Hemoglobin (Hb) (Colorimetry)	11.1	gm/dl	11.5 - 15.0	WHOLE BLOOD
TLC (Electrical Impedence)	7470	cell/cumm	4500 - 11000	EDTA WHOLE
DIFFERENTIAL COUNT				
Neutrophils (Flow Cytometry)	60	%	40 - 75	EDTA WHOLE
Lymphocytes (Flow Cytometry)	34	%	20 - 45	EDTA WHOLE
Monocytes (Flow Cytometry)	04	%	1 - 10	EDTA WHOLE
Eosinophil (Flow Cytometry)	02	%	1 - 6	EDTA WHOLE
Basophil	00	%	0 - 1	
RBC (Electrical Impedence)	4.0	millions/cumm	4.2 - 5.4	EDTA WHOLE

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HEMATOLOGY

PCV (Electrical Impedence Calculation)	33.7	%	36 - 46	EDTA WHOLE
MCV (Electrical Impedence Calculation)	82.9	fl	76 - 96	EDTA WHOLE
MCH (Electrical Impedence Calculation)	27.3	pg	27 - 34	EDTA WHOLE
MCHC (Electrical Impedence Calculation)	32.9	gm/dl	30 - 36	EDTA WHOLE
RDW	15.0	%	11 - 16	
PLATELETE COUNT (Electrical Impedence)	385	1000/microLit	150 - 450	EDTA WHOLE

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TRANSTHORACIC ECHO- DOPPLER REPORT

NAME - MRS SANGEETA GAHAL YAN	AGE/SEX 35/F
MR. NO. - 26034	DATE 25/03/2023

M-MODE / 2-D DESCRIPTION

- ❖ **Left Ventricle:** No Regional Wall Motion Abnormality. LVEF 60%
- ❖ **Left Atrium:** Normal.
- ❖ **Right atrium:** It is Normal Sized.
- ❖ **Right ventricle:** It is Normal Sized. RV Systolic Function is Normal.
- ❖ **Aortic valve:** Aortic Cusps are Normal.
- ❖ **Mitral valve:** It Appears Normal.
- ❖ **Tricuspid valve:** It Appears Normal.
- ❖ **Pulmonic valve:** It Appears Normal.
- ❖ **Main pulmonary artery & its branches:** Appear Normal.
- ❖ **Pericardium:** No Pericardial Effusion Seen
- ❖ **Inter atrial septum:** It is Intact.
- ❖ **Inter ventricular septum:** It is Intact.
- ❖ **IVC:** It is Normal in Size, collapsing & Respiratory Variability.
- ❖ **Clot / Vegetation:** No Intracardiac Clot, Vegetation.

Measurements (mm):

LEFT HEART			RIGHT HEART		
	Observed values (mm)	Normal values		Observed values (mm)	Normal values
Aortic root	26	20-36 (22mm/M ²)	IVC size	-	17-21mm
Aortic valve opening		15-26 (mm/M ²)	IVC respiratory Variability		>50%
LA size	28	19-40 (mm/M ²)	RA size	-	<18cm ²
LA volume index (ml/M ²)		<34 ml/M ²		-	
LVID(D)	40	(ED=37-56)	RV basal		24-42mm
LVID(S)	30		RV mid cavity	-	20-35mm
IVS(D)	8	(ED=6-12)	RV longitudinal	-	56-86mm
			RVOT proximal	-	18-33mm
PW(D)	9	(ED=5-10)	TAPSE	-	>15mm
			RV free wall thickness	-	<5mm
LVEF(%)	60%	55%-70%	RVEF		>44%

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Doppler velocities (cm/sec)

Aortic valve		Pulmonary valve	
Max/ Vel	111	Max velocity	118
Max/ PG		Max PG	
Mitral valve		Tricuspid valve	
E	90	Max Velocity	
A	58	PASP	-
DT	-	E/E' (>6)	-
E/A	-	S' Velocity (>10cm2/sec)	-

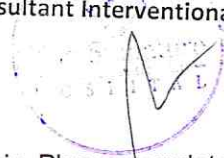
Regurgitation

MR		TR	
Severity	Nil	Severity	Nil
AR		PR	
Severity	Nil	Severity	Nil

Final Interpretation:

- No Regional Wall Motion Abnormality. LVEF 60%
- Normal Cardiac Chamber.
- No MR, No AR, No TR.
- Normal MIP.
- No Vegetation, Pericardial Effusion

Dr. AJAY DUA
 DNB (Medicine), DNB (Cardiology)
 Sr. Consultant Interventional Cardiology



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DEPARTMENT OF IMAGING & INTERVENTIONAL RADIOLOGY, THE SIGNATURE HOSPITAL

NAME: SANGEETA GAHALYAN	DATE: 25/03/2023
AGE: 35/F	MR NO.: 26034

X-RAY CHEST

Lung fields are clear.

Bilateral hilar shadows are normal.

Mediastinum and domes are normal.

Costophrenic angles appear sharp.

Cardiac silhouette appears normal.

No obvious rib fracture seen.

Adv: Clinical and lab data correlation.

Dr. Guru

Senior Consultant

Diagnostic & Interventional Radiology



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NAME: SANGEETA GAHALYAN	DATE: 25/03/2023
AGE: 35/F	MR NO.: 26034

USG WHOLE ABDOMEN

LIVER: is normal in size and **raised in echotexture**. No evidence of any focal lesion or IHBR dilation is present. Portal vein and CBD are normal in caliber at porta.

GALL BLADDER is well distended and lumen is echofree. Wall thickness is normal. No pericholecystic fluid is seen.

SPLEEN: is normal in size and echotexture. No focal lesion is seen.

PANCREAS: is normal in size and echotexture. Peripancreatic fat planes are clear. MPD is not dilated.

RIGHT KIDNEY: is normal in size and position and outline corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

LEFT KIDNEY: is normal in size and position and outline corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

URINARY BLADDER is well distended. Wall thickness is normal. No evidence of any focal lesion.

UTERUS: is normal in size, shape and position. Myometrial echotexture is normal. There is no focal lesion.

OVARIES: Both ovaries are normal.

Cul de Sac is clear.

IMPRESSION:

- **Grade I fatty liver.**

ADVICE: LFT CORRELATION IF CLINICALLY INDICATED.

Dr. Guru
Senior Consultant
Diagnostic & Interventional Radiology



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