

NABH ACCREDITED

PRAKASH

EYE HOSPITAL & LASER CENTRE

Dr. AMIT GARG

M.B.B.S., D.N.B. (Oph.)

I-Lasik (Femto) Bladeless Topical Micro Phaco

& Medical Retina Specialist

Ex. Micro Phaco Surgeon

Venu Eye Institute & Research Centre, New Delhi

Name Poonam Age/Sex 41 / F C/o Date 27/Jan/23

Go routine eye checkup

Dr. AMIT GARG
M.B.B.S., D.N.B.
Garg Pathology, Meerut



Accredited Eye Hospital Western U.P.

First NABH ECO

प्रकाश आँखों का अस्पताल एवं लेजर सेंटर



Website: www.prakasheyehospital.in
Facebook: <http://www.prakasheyehospital.in>

Counsellor 9837066186
7535832832
Manager 7895517715
OT 730222373
TPA 9837897788
(एवर्न सायन टिल तक सायल है)

Timings Morning : 9:30 am to 1:30 pm.
Evening : 5:00 pm to 7:00 pm.
Sunday : 9:30 am to 1:30 pm.
Near Nai Sarak, Garh Road, Meerut
E-mail : prakasheyehosp@gmail.com



भारत सरकार
GOVERNMENT OF INDIA



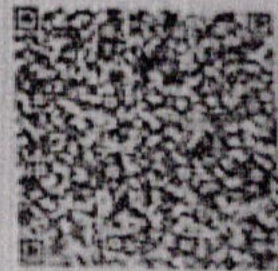
पूनम

Poonam

जन्म तिथि/ DOB: 01/05/1981

महिला / FEMALE

Dr. MONIKA GARG
M.B.B.S., M.D.
GARG PATHOLOGY



पूनम

4051 1944 0808

आधार-आम आदमी का अधिकार

Vn
 R 6/6
 L 6/6

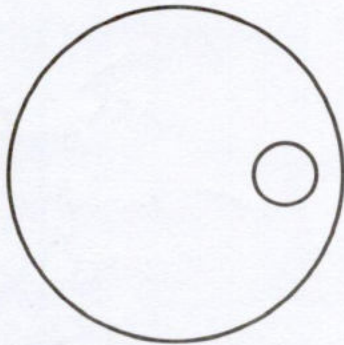
PH
 R 6/6
 L 6/6

IOP
 R 12
 L 15

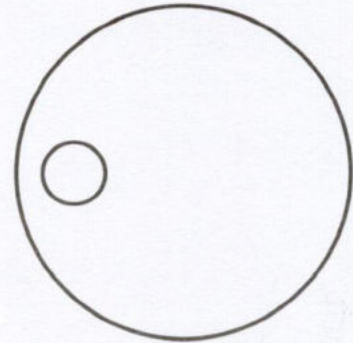
mmHg

Colour vision
 NORMAL
 NORMAL


	RIGHT EYE				LEFT EYE			
	Sph.	Cyl.	Axis	Vision	Sph.	Cyl.	Axis	Vision
Distance		Plano		6/6		Plano		6/6
Near		—	—	14/6		—	—	14/6
Add	+1.25	—	—		+1.25	—	—	



Dr. AMIT GARG
 M.B.B.S., D.N.B.
 Garg Pathology, Meerut



PATHOLOGY
LAB


DR. MONTIA GARG
M.B.B.S. (P) (1974)
GARG PATHOLOGY

Jan 27, 2023 9:04:48 AM

201° S

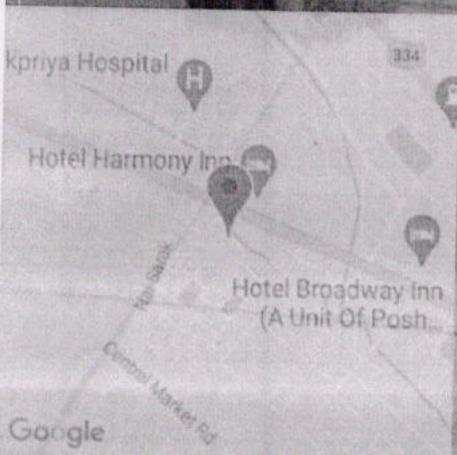
Tejgarhi

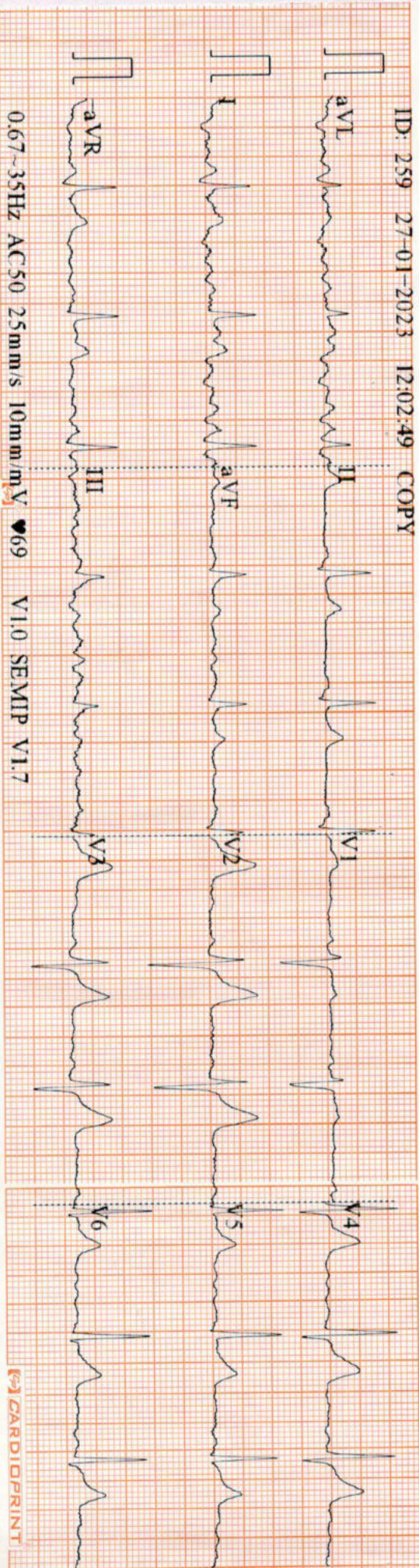
Meerut Division

Uttar Pradesh

Altitude: 169.8m

Index number: 456





CARDIOPRINT

ID: 259

Female
41 Years
cm

kg

kPa

Diagnosis Information:
Sinus Rhythm
Normal ECG

Handwritten signature

DR. MONIKA GARG
MBBS, M.D. (Pathology)
GARG PATHOLOGY

HR	: 69	bpm
P	: 115	ms
PR	: 147	ms
QRS	: 86	ms
QT/QTc	: 370/397	ms
P/ORS/T	: 35/47/33	°
RV5/SV1	: 1.148/0.876	mV

Report Confirmed by:

DEPARTMENT OF NON-INVASIVE CARDIOLOGY

DATE : 27/1/2023 REFERENCE NO. : 10905
 PATIENT NAME : POONAM AGE/SEX : 41YRS/F
 REFERRED BY : DR. MONIKA GARG ECHOGENECITY : NORMAL
 REFERRING DIAGNOSIS : To rule out structural heart disease.

ECHOCARDIOGRAPHY REPORT

DIMENSIONS	NORMAL	NORMAL
AO (ed) 2.2 cm	(2.1 - 3.7 cm)	IVS (ed) 1.0 cm (0.6 - 1.2 cm)
LA (es) 2.7 cm	(2.1 - 3.7 cm)	LVPW (ed) 1.0 cm (0.6 - 1.2 cm)
RVID (ed) 1.1 cm	(1.1 - 2.5 cm)	EF 60% (62% - 85%)
LVID (ed) 3.9 cm	(3.6 - 5.2 cm)	FS 30% (28% - 42%)
LVID (es) 2.8 cm	(2.3 - 3.9 cm)	

MORPHOLOGICAL DATA :

Mitral Valve: AML : Normal	Interatrial septum : Intact
PML : Normal	Interventricular Septum : Intact
Aortic Valve : Normal	Pulmonary Artery : Normal
Tricuspid Valve : Normal	Aorta : Normal
Pulmonary Valve : Normal	Right Atrium : Normal
Right Ventricle : Normal	Left Atrium : Normal
Left Ventricle : Normal	

Cont. Page No. 2



LOKPRIYA HOSPITAL

SAMRAT PALACE, GARH ROAD, MEERUT - 250003



:: 2 ::

2-D ECHOCARDIOGRAPHY FINDINGS :

LV normal in size with normal contractions. No LV regional wall motion abnormality seen. RV normal in size with adequate contractions. LA and RA normal. All cardiac valves are structurally normal. No chamber hypertrophy/intracardiac mass. Estimated LV ejection fraction is 60%.

DOPPLER STUDIES :

Valve	Regurgitation	Velocity m/sec	Gradient mmHg
Mitral Valve	No	0.92	3.2
Tricuspid Valve	No	0.86	2.6
Pulmonary Valve	No	0.77	2.3
Aortic Valve	No	0.69	2.1

IMPRESSION :

- No RWMA.
- Normal LV Systolic Function (LVEF = 60%).

DR. SANJEEV KUMAR BANSAL
MD, Dip. CARD (Cardiology) FCCS
(Non-Invasive Cardiology)
Lokpriya Heart Centre

DR. HARIOM TYAGI
MD, DM (Cardiology)
(Interventional Cardiologist)
Director, Lokpriya Heart Centre

NOTE: Echocardiography report given is that of the procedure done on that day and needs to be correlated clinically. This is not for medico legal purpose, as patient's identity is not confirmed. No record of this report is kept in the Hospital.

Services : • Ambulance  • Blood Bank 

24 घण्टे इमरजेन्सी सेवा

Not for Medico Legal Purposes

Helpline Numbers - 0121- 2792500, 2601901, (M) 8194007414

E-mail: lokpriya_hospital1@rediffmail.com

6

DATE	27.01.2023	REF. NO.	14834		
PATIENT NAME	POONAM	AGE	41 YRS	SEX	F
INVESTIGATION	X-RAY CHEST PA VIEW	REF. BY	GARG (PATHOLOGY)		

REPORT

- Trachea is central in position.
- Bilateral lung field show normal broncho vascular markings.
- Cardiac size is within normal limits.
- Both costophrenic angles are clear.
- Both domes of diaphragm are normal in contour and position.

IMPRESSION

Normal study

Dr. P.D. Sharma
 M.B.B.S., D.M.R.D. (VIMS & RC)
 Consultant Radiologist and Head

1. Impression is a professional opinion & not a diagnosis
 2. All modern machines & procedures have their limitations, if there is variance clinically this examination may be repeated or reevaluated by other investigations
 Ps. All congenital anomalies are not picked upon ultrasounds.
 3. Suspected typing errors should be informed back for correction immediately.
 4. Not for medico-legal purpose. Identity of the patient cannot be verified.

DATE	27.01.2023	REF. NO.	4529		
PATIENT NAME	POONAM	AGE	41YRS	SEX:	F
INVESTIGATION	USG WHOLE ABDOMEN	REF. BY	GARG (PATHOLOGY)		

REPORT

Liver - appears normal in size and echotexture. No mass lesion seen. Portal vein is normal.

Gall bladder - Distended & show evidence of few echogenic foci, largest measuring (12.3) mm.

Pancreas- appears normal in size and echotexture. No mass lesion seen.

Spleen- is normal in size and echotexture.

Right Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

Left Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

Urinary bladder - appears distended. Wall thickness is normal. No calculus / mass seen

Uterus - Normal in size (70 X 36 X 49) mm, shape & normal in echotexture. Endometrium appears normal and measures (3.9) mm. Myometrium appears normal.

Ovaries and adnexa are unremarkable.

IMPRESSION

Cholelithiasis.

Dr. P.D. Sharma
 M.B.B.S., D.M.R.D. (VIMS & RC)
 Consultant Radiologist and Head

1. Impression is a professional opinion & not a diagnosis
2. All modern machines & procedures have their limitations. if there is variance clinically this examination may be repeated or reevaluated by other investigations
3. Ps. All congenital anomalies are not picked upon ultrasounds.
4. Suspected typing errors should be informed back for correction immediately.
5. Not for medico-legal purpose. Identity of the patient cannot be verified.

• 1.5 Tesla MRI • 64 Slice CT • Ultrasound
 • Doppler • Dexa Scan / BMD • Digital X-ray

**PRENATAL DETERMINATION OF SEX IS BANNED,
 PREVENT FEMALE FOETICIDE**

Helpline Numbers : 0121-2792500 2601901



Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:49AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

HAEMATOLOGY (EDTA WHOLE BLOOD)

COMPLETE BLOOD COUNT

HAEMOGLOBIN (Colorimetry)	11.9	gm/dl	12.0-15.0
TOTAL LEUCOCYTE COUNT (Electric Impedence)	8080	*10 ⁶ /L	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (Microscopy)			
Neutrophils	70	%.	40-80
Lymphocytes	27	%.	20-40
Eosinophils	01	%.	1-6
Monocytes	02	%.	2-10
Absolute neutrophil count	5.66	x 10 ⁹ /L	2.0-7.0(40-80%)
Absolute lymphocyte count	2.18	x 10 ⁹ /L	1.0-3.0(20-40%)
Absolute eosinophil count	0.08	x 10 ⁹ /L	0.02-0.5(1-6%)
Method:-((EDTA Whole blood,Automated /			
ESR (Automated Wsetergren`s)	11	mm/1st hr	0.0 - 15.0
RBC Indices			
TOTAL R.B.C. COUNT (Electric Impedence)	4.46	Million/Cumm	4.5 - 6.5
Haematocrit Value (P.C.V.)	37.2	%	26-50
MCV (Calculated)	83.4	fL	80-94
MCH (Calculated)	26.7	pg	27-32
MCHC (Calculated)	32.0	g/dl	30-35
RDW-SD (Calculated)	44.7	fL	37-54



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।






Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606	C. NO: 606	Collection Time : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female		Receiving Time : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA		Reporting Time : 27-Jan-2023 11:49AM
Sample By :		Centre Name : Garg Pathology Lab - TPA
Organization :		

Investigation	Results	Units	Biological Ref-Interval
RDW-CV (Calculated)	12.9	%	11.5 - 14.5
Platelet Count (Electric Impedence)	2.56	/Cumm	1.50-4.50
MPV (Calculated)	11.0	%	7.5-11.5
NLR 6-9 Mild stres 7-9 Pathological cause	2.59		1-3

-NLR is a reflection of physiologic stress,perhaps tied most directly to cortisol and catecholamine levels.
 -NLR can be a useful tool to sort out patients who are sicker, compared to those who are less sick (its not specific to infection).
 -NLR has proven more useful than white blood cell count (WBC) when the two are directly compared. Ultimately, NLR may be a logical replacement for the WBC. In some situations, NLR is competitive with more expensive biomarkers (e.g. procalcitonin,lactate).
 -With specific clinical contexts (e.g. pancreatitis, pulmonary embolism), NLR may have surprisingly good prognostic value.

BLOOD GROUP * "B" POSITIVE \$ \$



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

२१ घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:49AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

GLYCATED HAEMOGLOBIN (HbA1c)*	5.4	%	4.3-6.3
ESTIMATED AVERAGE GLUCOSE	108.3	mg/dl	

EXPECTED RESULTS :

 Non diabetic patients & Stabilized diabetics : 4.3% to 6.30%
 Good Control of diabetes : 6.4% to 7.5%
 Fair Control of diabetes : 7.5% to 9.0%
 Poor Control of diabetes : 9.0 % and above

-Next due date for HBA1C test : After 3 months

-High HbF & Trig.level, iron def.anaemia result in high GHb

-Haemolytic anemia, presence of HbS, HbC and other Haemoglobinopathies may produce low values. **three months.**

INTERPRETATION: HbA1c is an indicator of glycemic control.HbA1c represents average glycemia over the past six to eight weeks.Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3) Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।






Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:44AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization : 

Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

BIOCHEMISTRY (FLORIDE)

PLASMA SUGAR FASTING (GOD/POD method)	101.0	mg/dl	70 - 110
PLASMASUGAR P.P. (GOD/POD method)	125 (3 Hr pp)	mg/dl	80-140

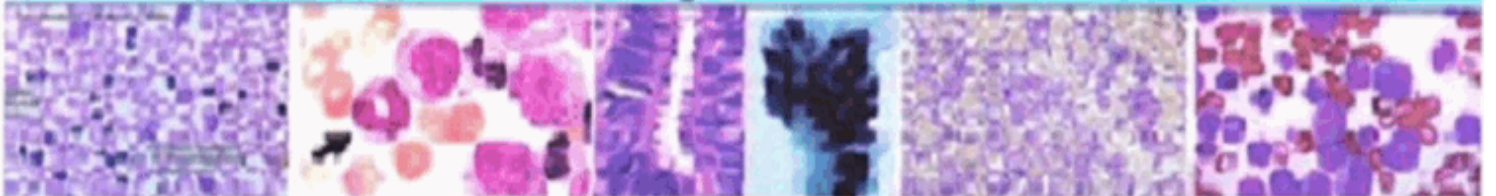


*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:44AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

BIOCHEMISTRY (SERUM)

SERUM CREATININE (Enzymatic)	0.7	mg/dl	0.6-1.4
URIC ACID	4.1	mg/dL.	2.5-6.8
BLOOD UREA NITROGEN	25.00	mg/dL.	8-23



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Page 5 of 10

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:44AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

LIVER FUNCTION TEST

SERUM BILIRUBIN

TOTAL (Diazo)	0.6	mg/dl	0.1-1.2
DIRECT (Diazo)	0.3	mg/dl	<0.3
INDIRECT (Calculated)	0.3	mg/dl	0.1-1.0
S.G.P.T. (IFCC method)	26.0	U/L	8-40
S.G.O.T. (IFCC method)	28.1	U/L	6-37
SERUM ALKALINE PHOSPHATASE (IFCC KINETIC)	89.4	IU/L.	37-103
SERUM PROTEINS			
TOTAL PROTEINS (Biuret)	6.9	Gm/dL.	6-8
ALBUMIN (Bromocresol green Dye)	4.1	Gm/dL.	3.5-5.0
GLOBULIN (Calculated)	2.8	Gm/dL.	2.5-3.5
A : G RATIO (Calculated)	1.5		1.5-2.5



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

२१ घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:44AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

LIPID PROFILE

SERUM CHOLESTEROL (CHOD - PAP)	195.0	mg/dl	150-250
SERUM TRIGLYCERIDE (GPO-PAP)	228.0	mg/dl	70-150
HDL CHOLESTEROL * (PRECIPITATION METHOD)	46.8	mg/dl	30-60
VLDL CHOLESTEROL * (Calculated)	45.6	mg/dl	10-30
LDL CHOLESTEROL * (Calculated)	102.6	mg/dL.	0-100
LDL/HDL RATIO * (Calculated)	02.2	ratio	<3.55
CHOL/HDL CHOLESTROL RATIO* (Calculated)	4.2	ratio	3.8-5.9

Interpretation :

Paitient Should be Fast overnight For Minimum 12 hours and normal diet for one week

NOTE :

Lipid Profile Ranges As PER NCEP-ATP III :

SERUM CHOESTEROL : Desirable : < 200 Borderline : 200 - 239 Elevated :> 240 mg/dl
HDLCHOLESTEROL : Desirable : > 60 Borderline : 40- 60 Decreased :< 40 mg/dl
LDL CHOLESTEROL : Desirable : 100 mg/dl, Borderline : 100- 159 Elevated : >160 mg/dl
Triglycerides : Desirable : 150 Borderline : 150- 199 High : 200 - 499 Very High :>500

Friedwald Equation, VLDL & LDL values are not applicable for triglyceride > 400 mg/dl.

SERUM SODIUM (Na) * 140.0 mEq/litre 135 - 155
(ISE method)
(ISE)



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

२१ घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:44AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

THYRIOD PROFILE*

Triiodothyronine (T3) * (ECLIA)	1.032	ng/dl	0.79-1.58
Thyroxine (T4) * (ECLIA)	9.540	ug/dl	4.9-11.0
THYROID STIMULATING HORMONE (TSH) (ECLIA)	3.437	uIU/ml	0.38-5.30
Normal Range:-			
1 TO 4 DAYS	2.7-26.5		
4 TO 30 DAYS	1.2-13.1		

Hyperthyroid patient have suppressed TSH values, with the exception of those few individuals whos have hyperthyroidism caused by TSH producing pituitary tumor or other rare disorders such as pituitary resistance to thyroid hormones. Subclinical hyperthyroidism is defined as low TSH with levels of T4 and T3 within the reference interval. In most patients with hypothyroidism, serum TSH results are markedly elevated, but results are low in individuals with hypothyroidism caused by pituitary or hypothalamic disorders. An important cause of both increased and decreased TSH results is NTI. Patients with NTI tend to have low TSH results during their acute illness ,then TSH rises to within or above the reference range with resolution of the underlying illness, and finally returns to within the reference range. The situation is complicated because drugs, including glucagon and dopamine, suppress TSH . Sensitive TSH assays are helpful in evaluation of treatment with thyroid hormone both for replacement therapy and suppressive doses for malignant thyroid disease.

SERUM POTASSIUM (K) * (ISE method)	3.8	mEq/litre.	3.5 - 5.5
SERUM CALCIUM (Arsenazo)	9.8	mg/dl	9.2-11.0



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।






Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606	C. NO: 606	Collection Time : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female		Receiving Time : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA		Reporting Time : 28-Jan-2023 8:39AM
Sample By :		Centre Name : Garg Pathology Lab - TPA
Organization :		

Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

CYTOLOGY EXAMINATION

SPECIMEN

Microscopic:

MG 48/23
 SITE OF SMEAR: ECTOCERVIX AND POSTERIOR FORNIX OF VAGINA
 METHOD OF EVALUATION: BETHSEDA SYSTEM
 EVALUATION OF SMEAR : SATISFACTORY
 REPORT: CELLULAR SPREAD SHOWS DESQUAMATED EPITHELIAL CELLS PREDOMINANTLY SUPERFICIAL AND INTERMEDIATE CELLS. FEW ENDOCERVICAL CELLS SHOWING REACTIVE CHANGES ARE SEEN.
 BACKGROUND SHOWS SEVERE INFLAMMATORY REACTION. LACTOBACILLI ARE SEEN.
 ANY DYSKARYOTIC CELL IS NOT SEEN.
 ANY BUDDING SPORES OR TROPHOZOITE IS NOT SEEN.
 INFERENCE: NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY
 ADVISED REPEAT AFTER A COURSE OF ANTIBIOTICS
 NOTE: This test has its own limitations. Please interpret the findings in light of clinical picture. not for medicolegal use



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।





Garg Pathology

Certified by :
National Accreditation Board For Testing & Calibration Laboratories
ISO 9001:2008
Garden House Colony, Near Nai Sarak, Garh Road, Meerut
Ph.: 0121-2600454, 8979608687, 9837772828

DR. MONIKA GARG
M.D. (Path) Gold Medalist
Former Pathologist :
St. Stephan's Hospital, Delhi

PUID : 230127/606 **C. NO:** 606 **Collection Time** : 27-Jan-2023 9:32AM
Patient Name : Mrs. POONAM 41Y / Female **Receiving Time** : 27-Jan-2023 10:37AM
Referred By : Dr. BANK OF BARODA **Reporting Time** : 27-Jan-2023 11:48AM
Sample By : **Centre Name** : Garg Pathology Lab - TPA
Organization :



Investigation	Results	Units	Biological Ref-Interval
---------------	---------	-------	-------------------------

URINE

PHYSICAL EXAMINATION

Volume	20	ml	
Colour	Pale Yellow		
Appearance	Clear		Clear
Specific Gravity	1.010		1.000-1.030
PH (Reaction)	Acidic		

BIOCHEMICAL EXAMINATION

Protein	Nil		Nil
Sugar	Nil		Nil

MICROSCOPIC EXAMINATION

Red Blood Cells	Nil	/HPF	Nil
Pus cells	3-4	/HPF	0-2
Epithelial Cells	3-4	/HPF	1-3
Crystals	Nil		
Casts	Nil		

@ Special Examination

Bile Pigments	Absent		
Blood	Nil		
Bile Salts	Absent		

-----{END OF REPORT }-----



*THIS TEST IS NOT UNDER NABL SCOPE

Checked By Technician:

Dr. Monika Garg
MBBS, MD(Path)
(Consultant Pathologist)

24 घंटे सुविधा उपलब्ध है।

