

Health Check up Booking Confirmed Request(bob548344),Package Code-PKG10000241,  
Beneficiary Code-7909

Mediwheel <wellness@mediwheel.in>

Tue 10/17/2023 5:28 AM

To:Sandeep Kumar Singh <Sandeep.Singh7@bankofbaroda.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>

को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.  
OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS

011-41195959

Email:wellness@mediwheel.in

Dear PREETI Singh,

Please find the confirmation for following request.

**Booking Date** : 14-10-2023  
**Package Name** : Medi-Wheel Metro Full Body Health Checkup Female Below 40  
**Name of Diagnostic/Hospital** : Aashka Multispeciality Hospital  
**Address of Diagnostic/Hospital** : Between Sargasan & Reliance Cross Road  
**Contact Details** : 9879752777/7577500900  
**City** : Gandhi Nagar  
**State** : Gujarat  
**Pincode** : 382315  
**Appointment Date** : 28-10-2023  
**Confirmation Status** : Confirmed  
**Preferred Time** : 8:00am-8:30am  
**Comment** : APPOINTMENT TIME 8:30AM

**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

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AO 2023-2024, Acofemi Healthcare Limited



बैंक ऑफ बरोडा  
Bank of Baroda



नाम : संदीप कुमार सिंह

Name : MR. SANDEEP KUMAR SINGH

कर्मचारी कूट नं.  
Employee Code No. : 74528

पारितोषक प्राधिकारी  
Issuing Authority

धारक के हस्ताक्षर  
Signature of Holder

मिलने पर निम्नलिखित को सौंपने  
उप महासंचालक  
बैंक ऑफ बरोडा, राष्ट्रीय सहा सेवा केंद्र,  
24वीं मंजिल, गिर टॉवर 1, गिर सिटी,  
गण्डhinगर - 382355, गुजरात, भारत।  
फोन : +91 079 66734085

If found, please return to  
Dy. General Manager,  
Bank of Baroda, National Shared Services Centre,  
24th Floor, GR Tower 1, GR City,  
Gandhinagar - 382355, Gujarat, India.  
Phone : +91 079 66734085

रक्त समूह Blood Group : A+  
← बायाँ तिर Identification Mark: Mark on Left Hand Finger

**DR. TAPAS RAVAL**  
**MBBS . D.O**  
**(FELLOW IN PHACO & MEDICAL**  
**RATINA)**  
**REG.NO.G-21350**

<b>UHID:</b>	<b>Date:</b> 22/6/23	<b>Time:</b> 12.4
<b>Patient Name:</b> Poochi	<b>Age /Sex:</b>	<b>Height:</b>
	<b>Weight:</b>	
<b>History:</b>	Compw Health check	
<b>Allergy History:</b>		
<b>Nutritional Screening:</b>	Well-Nourished / Malnourished / Obese	
<b>Examination:</b>	Vn 26/6 6/6 2/6 Co 10/28 Vbinal - normal	
<b>Diagnosis:</b>		

DR. TRUPTI PANDIT.

28/10/23

Preeti Singh  
Age: 28y.

Adv

Pap's smear - Tab Doxy - 1 (25)  
9-8

Tab. - Tab Metrogyl (25)  
9-8 (15)

Pls  
white discharge - Tab RBE-D  
with  
9-8

- vaginal tablet (1)  
Padu.

Sus Pandit.



Name: Preeti singh

Age: 28 yrs

Complaints:

None

No of deliveries:

Last Delivery:

3 / FTD / 4 yrs

History of abortion:

H/O medical conditions associated:

Last abortions:

no

sp. Abortion 1/2  
accid-

DM

HTN

Thyroid

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MH:

Reg:

LMP:

5/10/23

P/A:

SpA

P/S:

P/V:

Cx (M) Discharge (P)

Sample:-

Vagina

Cervix

<input type="checkbox"/>
<input checked="" type="checkbox"/>

Doctors Sign:-

P. Singh

**PATIENT NAME:PREETI SINGH**

**GENDER/AGE:Female / 28 Years**

**DATE:28/10/23**

**DOCTOR:**

**OPDNO:OSP31517**

**X-RAY CHEST PA**

Both lung fields show increased broncho-vascular markings.

**No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.**

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

  
**DR. SNEHAL PRAJAPATI**  
**CONSULTANT RADIOLOGIST**

**PATIENT NAME:PREETI SINGH**

**GENDER/AGE:Female / 28 Years**

**DATE:28/10/23**

**DOCTOR:**

**OPDNO:OSP31517**

### SONOGRAPHY OF ABDOMEN AND PELVIS

**LIVER:** Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

**GALL BLADDER:** Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

**PANCREAS:** Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

**SPLEEN:** Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

**KIDNEYS:** Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.1 x 4.3 cms in size.  
Left kidney measures about 10.1 x 4.2 cms in size.

No evidence of suprarenal mass lesion is seen on either side.


**Aorta, IVC and para aortic region** appears normal.  
No evidence of ascites is seen.

**BLADDER:** Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 166 cc.

**UTERUS:** Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

**COMMENT:** Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

  
**DR. SNEHAL PRAJAPATI**  
CONSULTANT RADIOLOGIST



**PATIENT NAME:PREETI SINGH**  
**GENDER/AGE:Female / 28 Years**  
**DOCTOR:DR.HASIT JOSHI**  
**OPDNO:OSP31517**

**DATE:28/10/23**

**2D-ECHO**

**MITRAL VALVE : AML LONG REDUDANT**  
**AORTIC VALVE : NORMAL**  
**TRICUSPID VALVE : NORMAL**  
**PULMONARY VALVE : NORMAL**  
**AORTA : 33mm**  
**LEFT ATRIUM : 30mm**  
**LV Dd / Ds : 40/24mm EF 65%**  
**IVS / LVPW / D : 9/8mm**  
**IVS : INTACT**  
**IAS : INTACT**  
**RA : NORMAL**  
**RV : NORMAL**  
**PA : NORMAL**  
**PERICARDIUM : NORMAL**  
**VEL : PEAK MEAN**  
**M/S : Gradient mm Hg Gradient mm Hg**  
**MITRAL : 1/0.7m/s**  
**AORTIC : 1.4m/s**  
**PULMONARY : 1.2m/s**  
**COLOUR DOPPLER : TRIVIAL MR, MILD TR**  
**RVSP : 26mmHg**  
**CONCLUSION : NORMAL LV SIZE / SYSTOLIC FUNCTION.**

**CARDIOLOGIST**  
**DR.HASIT JOSHI (9825012235)**





## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type :	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23246219

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Haemogram (CBC)</b>			
Lymphocyte	42.0	%	20.00 - 40.00
<b>Liver Function Test</b>			
Alkaline Phosphatase	124.43	U/L	46 - 116

Abnormal Result(s) Summary End

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 09:56	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin	12.9	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.71	millions/cumm	3.80 - 4.80
PCV(Calc)	39.47	%	36.00 - 46.00
MCV (RBC histogram)	83.8	fL	83.00 - 101.00
MCH (Calc)	27.4	pg	27.00 - 32.00
MCHC (Calc)	32.7	gm/dL	31.50 - 34.50
RDW (RBC histogram)	13.30	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5270	/μL	4000.00 - 10000.00
Neutrophil	L% 50.0	%	EXPECTED VALUES 40.00 - 70.00
Lymphocyte	H 42.0	%	20.00 - 40.00
Eosinophil	4.0	%	1.00 - 6.00
Monocytes	4.0	%	2.00 - 10.00
Basophil	0.0	%	0.00 - 2.00

#### PLATELET COUNT (Optical)

Platelet Count	186000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.19		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Lymphocytosis
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

Note : (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathology)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 11:48	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR Westergren Method	05	mm after 1hr	3 - 20	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

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LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 11:01	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>HAEMATOLOGY INVESTIGATIONS</b>				
<b>BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)</b>				
<b>(Both Forward and Reverse Group )</b>				

ABO Type	O
Rh Type	POSITIVE

Note (LL-Very Low,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : <b>PREETI SINGH</b>	Sex/Age : <b>Female/ 28 Years</b>	Case ID : <b>31002201465</b>
Ref By : <b>HOSPITAL</b>	Dis. At :	Pt. ID : <b>3091472</b>
Ref Loc : <b>Aashka hospital</b>		Pt. Loc :
Reg Date and Time : <b>28-Oct-2023 09:10</b>	Sample Type : <b>Spot Urine</b>	Mobile No :
Sample Date and Time : <b>28-Oct-2023 09:10</b>	Sample Coll. By :	Ref Id1 : <b>OSP31517</b>
Report Date and Time : <b>28-Oct-2023 11:45</b>	Acc. Remarks : <b>Normal</b>	Ref Id2 : <b>O23246219</b>

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour **Pale yellow**

Transparency **Clear**

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025		1.003 - 1.035
pH	7.0		4.6 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note : (L-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH      Sex/Age : Female/ 28 Years      Case ID : 31002201465  
 Ref.By : HOSPITAL      Dis. At :      Pt. ID : 3091472  
 Bill Loc : Aashka hospital      Pt. Loc :

Reg Date and Time : 28-Oct-2023 09:10      Sample Type : Spot Urine      Mobile No :  
 Sample Date and Time : 28-Oct-2023 09:10      Sample Coll. By :      Ref Id1 : OSP31517  
 Report Date and Time : 28-Oct-2023 11:45      Acc. Remarks : Normal      Ref Id2 : O23246219

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah

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## LABORATORY REPORT



Name : **PREETI SINGH** Sex/Age : **Female/ 28 Years** Case ID : **31002201465**  
 Ref By : **HOSPITAL** Dis. At : Pt. ID : **3091472**  
 Bill Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **28-Oct-2023 09:10** Sample Type : **Plasma Fluoride F, Plasma Fluoride PP** Mobile No :  
 Sample Date and Time : **28-Oct-2023 09:10** Sample Coll. By : Ref Id1 : **OSP31517**  
 Report Date and Time : **28-Oct-2023 13:15** Acc. Remarks : **Normal** Ref Id2 : **O23246219**  
 TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

### BIOCHEMICAL INVESTIGATIONS

#### Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F	<b>95.33</b>	mg/dL	70.0 - 100
Plasma Glucose - PP <small>Photometric Hexokinase</small>	<b>108.35</b>	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

< 100 mg/dL : Normal level

100 - 126 mg/dL : Impaired fasting glucose per guidelines

> 126 mg/dL : Probability of Diabetes, Confirm as per guidelines

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH      Sex/Age : Female/ 28 Years      Case ID : 31002201465  
 Ref.By : HOSPITAL      Dis. At :      Pt. ID : 3091472  
 Bill. Loc. : Aashka hospital      Pt. Loc :

Reg Date and Time : 28-Oct-2023 09:10      Sample Type : Serum      Mobile No :  
 Sample Date and Time : 28-Oct-2023 09:10      Sample Coll. By :      Ref Id1 : OSP31517  
 Report Date and Time : 28-Oct-2023 11:12      Acc. Remarks : Normal      Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b> <small>Colorimetric, CHOD-PGD</small>	<b>154.97</b>	mg/dL	110 - 200	
<b>HDL Cholesterol</b>	<b>49.2</b>	mg/dL	48 - 77	
<b>Triglyceride</b> <small>Glycerol Phosphate Oxidase</small>	<b>68.82</b>	mg/dL	<150	
<b>VLDL</b> <small>Calculated</small>	<b>13.76</b>	mg/dL	10 - 40	
<b>Chol/HDL</b> <small>Calculated</small>	<b>3.15</b>		0 - 4.1	
<b>LDL Cholesterol</b> <small>Calculated</small>	<b>92.01</b>	mg/dL	0.00 - 100.00	

#### NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240		High 200-499
High 160-189			

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note: (L-Very Low, L-Low, H-High, HH-Very High) A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 13:14	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

<b>S.G.P.T.</b> <small>U/L with PSP</small>	<b>58.27</b>	U/L	14 - 59	
<b>S.G.O.T.</b> <small>U/L with PSP</small>	<b>31.80</b>	U/L	15 - 37	
<b>Alkaline Phosphatase</b> <small>Enzymatic, PNPP-AMP</small>	<b>H 124.43</b>	U/L	46 - 116	
<b>Gamma Glutamyl Transferase</b> <small>I-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</small>	<b>31.87</b>	U/L	0 - 38	
<b>Proteins (Total)</b> <small>Colorimetric, Biuret</small>	<b>7.85</b>	gm/dL	6.40 - 8.30	
<b>Albumin</b> <small>Bromocresol purple</small>	<b>4.99</b>	gm/dL	3.4 - 5	
<b>Globulin</b> <small>Calculated</small>	<b>2.86</b>	gm/dL	2 - 4.1	
<b>A/G Ratio</b> <small>Calculated</small>	<b>1.7</b>		1.0 - 2.1	
<b>Bilirubin Total</b> <small>Photometry</small>	<b>0.65</b>	mg/dL	0.3 - 1.2	
<b>Bilirubin Conjugated</b> <small>Diazotization reaction</small>	<b>0.28</b>	mg/dL	0 - 0.50	
<b>Bilirubin Unconjugated</b> <small>Calculated</small>	<b>0.37</b>	mg/dL	0 - 0.8	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

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M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 11:12	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLDH</small>	10.0	mg/dL	7.00 - 18.70	
Creatinine	0.61	mg/dL	0.50 - 1.50	
Uric Acid <small>urate</small>	5.26	mg/dL	2.6 - 6.2	

N=Normal, L=Very Low, LL=Low, H=High, HH=Very High, A=Abnormal

Dr. Shreya Shah

M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 11:25	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Glycated Haemoglobin Estimation</b>				
HbA1C	5.39	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated	107.99	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

**Interpretation :**

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.  
Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.  
Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.  
Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.  
In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.  
The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

**Dr. Shreya Shah**

M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Serum	Mobile No. :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 14:18	Acc. Remarks : Normal	Ref Id2 : O23246219

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>Thyroid Function Test</b>				
Triiodothyronine (T3)	84.14	ng/dL	70 - 204	
Thyroxine (T4) <small>CMA</small>	6.82	ng/dL	4.87 - 11.72	
TSH <small>CMA</small>	0.84	μIU/mL	0.4 - 4.2	

### INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 μIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 μIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTN and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

### CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

### TSH ref range in pregnancy

First trimester  
Second trimester  
Third trimester

### Reference range (microIU/ml)

0.24 - 2.00  
0.43-2.2  
0.8-2.5

Note: LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal

Dr. Shreya Shah

M.D. (Pathologist)

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## LABORATORY REPORT



Name : PREETI SINGH	Sex/Age : Female/ 28 Years	Case ID : 31002201465
Ref By : HOSPITAL	Dis. At :	Pt. ID : 3091472
Bill Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 28-Oct-2023 09:10	Sample Type : Serum	Mobile No :
Sample Date and Time : 28-Oct-2023 09:10	Sample Coll. By :	Ref Id1 : OSP31517
Report Date and Time : 28-Oct-2023 14:18	Acc. Remarks : Normal	Ref Id2 : O23246219

**Interpretation Note:**

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal method to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T4 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

\* For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (LL-Very Low,L-Low,H-High,HH-Very High ,A-Abnormal)

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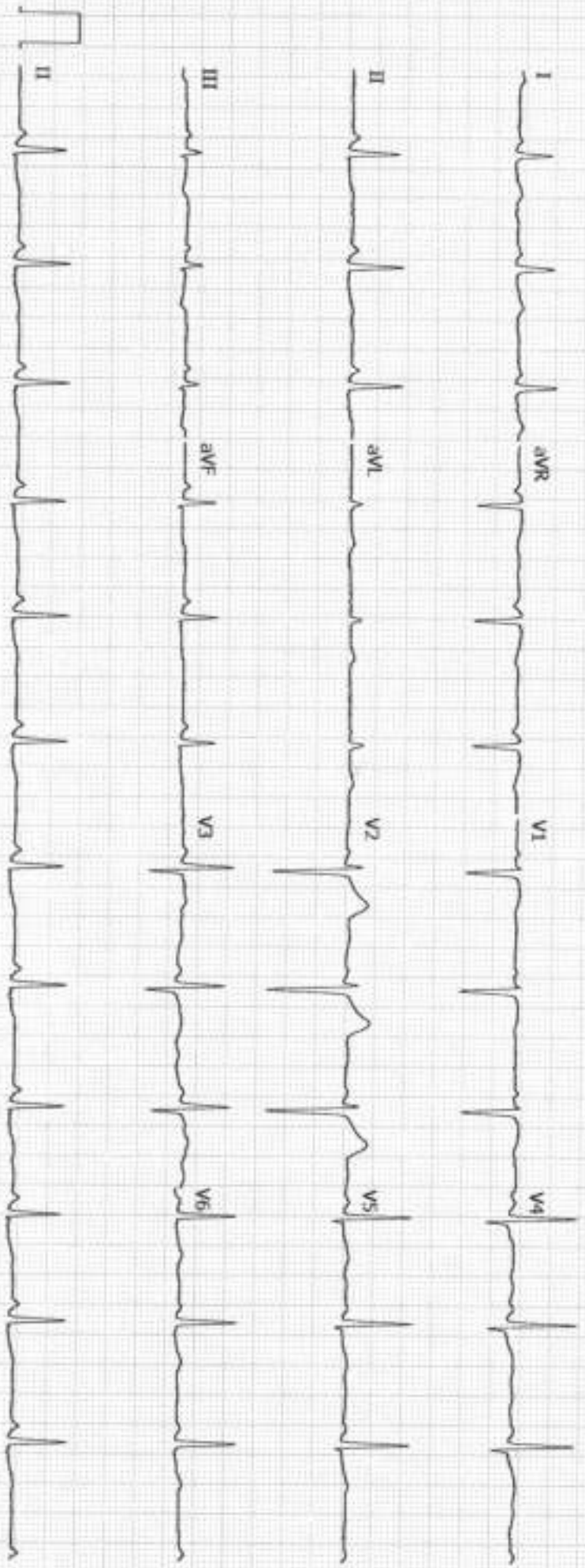




Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 74 ms  
QT / QTcBaz : 370 / 416 ms  
PR : 122 ms  
P : 100 ms  
RR / PP : 786 / 789 ms  
P / QRS / T : 59 / 41 / 18 degrees

Normal sinus rhythm  
Normal ECG



DR. PRERAK TRIVEDI  
M.D., IDCCM  
CRITICAL CARE MEDICINE  
REG.NO.G-59493

UHID:		Date: 28/10/23	Time: 5 PM
Patient Name: Preeti Singh		Height:	
Age / Sex: 45 / F	LMP:	Weight:	
History:			
C/C/O: Routine health checkup		History: None	
Allergy History: None		Addiction: None	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination: Temperature: Normal Pulse: 82/min BP: 112 / 88 mmHg SPO2: 98% on RA			
Provisional Diagnosis:			



