



**SURANA SETHIA HOSPITAL  
AND RESEARCH CENTRE  
CHARITABLE**

Chembur | Malad | Bhiwandi | Navi Mumbai

Patient Name : MS. KUMAR SRUTHI S  
Ordered Loc : Hospital clinic  
Referred By : Dr.Mediwheel  
Class : OPD  
Current Loc :  
Accession No : 23005733

IP / OP No : 1128671  
Gender : Female Age : 29 Y 7 M 24 D  
Vch No : 1372054  
Received Dt : 28-Mar-2023 13:10  
Reported On : 28-Mar-2023 14:32  
Sample No : 23014857

**COMPLETE HEAMOGRAM (C.B.C.)**

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE\UNITS</u>
Haemoglobin	11.70	11.50 - 16.00 gm/dL
R.B.C.	4.18	4.00 - 6.00 Mill/C.mm.
P.C.V.	<b>34.70</b>	37.00 - 47.00 %
M.C.V.	83.01	78.00 - 100.00 fL
M.C.H.	27.99	27.00 - 31.00 pg
M.C.H.C.	33.72	32.00 - 36.00 %
RDW	11.4	11.0 - 15.0 %
Total W.B.C. Count	5200	4000 - 11000 /C.mm
<b>DIFFERENTIAL COUNT</b>		
Neutrophils	56	40 - 75 %
Eosinophils	3	1 - 6 %
Basophils	0	0 - 1 %
Lymphocytes	38	20 - 45 %
Monocytes	3	1 - 10 %
WBC MORPHOLOGY	Normal	
RBC MORPHOLOGY	Normal	
PLATELET COUNT	369	150 - 450 10 <sup>3</sup> /ul
PLATELETS	Adequate	

\*\* END OF REPORT \*\*

Checked By

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Dr. Pragati Pote  
MB, DPB,  
(Path & Bact)

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PEH-2018-0537



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Referred By : Dr. Mediwheel	Vch No : 1372054
Class : OPD	Received Dt : 28-Mar-2023 13:10
Current Loc :	Reported On : 28-Mar-2023 14:33
Accession No : 23005733	Sample No : 23014855

**BLOOD GROUP & RH TYPE**

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE\UNITS</u>
<b><u>BLOOD GROUP &amp; RH TYPE</u></b>		
ABO Group	"O"	
Rh Factor	POSITIVE	
	** END OF REPORT **	

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Class : OPD	Received Dt : 28-Mar-2023 13:10
Current Loc :	Reported On : 28-Mar-2023 14:33
Accession No : 23005733	Sample No : 23014854

**ESR**

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE\UNITS</u>
ESR (Erythrocyte Sedimentation Rate)	50	1 - 20 mm/hr

\*\* END OF REPORT \*\*

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Gender : Female Age : 29 Y 7 M 24 D  
Vch No : 1372054  
Received Dt : 28-Mar-2023 13:10  
Reported On : 28-Mar-2023 14:34  
Sample No : 23014859

**RENAL FUNCTION TEST**

TEST DESCRIPTION	OBSERVED VALUE	REFERENCE RANGE	UNITS
BUN	11.0	8.0 - 21.0	mg/dl
Uric Acid	3.5	3.5 - 7.2	mg/dl
Sodium [Na+]	141	135 - 155	mmol/L
Potassium [K+]	4.3	3.6 - 5.5	mmol/L
Chloride [Cl-]	100	96 - 108	mmol/L
Calcium	9.5	8.4 - 10.2	mg/dl
Phosphorus	4.0	2.5 - 4.5	mg/dl
Serum Alkaline Phosphates	68.0	28.0 - 111.0	IU/L
Serum Proteins Total	7.4	6.0 - 8.2	gm%
Serum Albumin	3.9	3.0 - 5.0	gm%
Serum Globulin	3.50	1.90 - 3.50	gm%
Albumin : Globulin Ratio	1.11	0.90 - 2.00	gm%
Serum Creatinine	0.9	0.5 - 1.5	mg/dl

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Sample No : 23014859

### LIVER FUNCTION TEST

#### TEST DESCRIPTION

#### OBSERVED VALUE

#### REFERENCE RANGE UNITS

Total Bilirubin	0.4	0.1 - 1.2	mg/dl
Conjugated (Direct) Bilirubin	0.2	0.0 - 0.3	mg/dl
Unconjugated (Indirect) Bilirubin	0.2	0.1 - 1.0	mg/dL
SGOT	20.0	15.0 - 46.0	U/L
SGPT	24.0	13.0 - 69.0	U/L
Serum Alkaline Phosphates	68.0	28.0 - 111.0	IU/L
Serum Proteins Total	7.4	6.0 - 8.2	gm%
Serum Albumin	3.9	3.0 - 5.0	gm%
Serum Globulin	3.50	1.90 - 3.50	gm%
Albumin : Globulin Ratio	1.11	0.90 - 2.00	gm%
Serum Creatinine	0.9	0.5 - 1.5	mg/dl

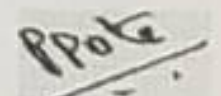
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Sample No : 23014859

### LIPID PROFILE

#### TEST DESCRIPTION

#### OBSERVED VALUE

#### REFERENCE RANGE\UNITS

Total Cholesterol	140	150 - 250 mg%
Triglycerides	69	35 - 160 mg%
HDL Cholesterol	40	30 - 70 mg%
VLDL Cholesterol	13.80	7.00 - 35.00 mg%
LDL Cholesterol	86.20	108.00 - 145.00 mg%
LDL/HDL Ratio	2.16	1.10 - 3.90
TC/HDL CHOL Ratio	3.50	3.50 - 5.00

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Accession No : 23005733	Sample No : 23014859

## BLOOD SUGAR F/PP

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE\UNITS</u>
Blood Sugar Fasting (FBS)	84	70 - 110 mg%
Urine Sugar (Fasting)	Absent	
Urine Ketone (Fasting)	Absent	

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Ordered Loc : Hospital clinic	Gender : Female Age : 29 Y 7 M 24 D
Referred By : Dr.Mediwheel	Vch No : 1372054
Class : OPD	Received Dt : 28-Mar-2023 13:10
Current Loc :	Reported On : 28-Mar-2023 14:35
Accession No : 23005733	Sample No : 23014853

**URINE ANALYSIS**

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u> UNITS
<b><u>PHYSICAL EXAMINATION</u></b>		
Quantity	20 ml	
Colour	Pale yellow	
Appearance	Clear	
Deposit	Absent	
Reaction [PH]	Acidic	
Specific Gravity	1.010	
<b><u>CHEMICAL EXAMINATION</u></b>		
Urine Albumin	Absent	
Sugar	Absent	
Ketone Bodies	Absent	
Occult Blood	Absent	
Bile Pigment	Absent	
Bile Salt	Absent	
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Red Blood Cells	Absent	00-02
Pus Cells	1 - 2	00-02 / hpf
Epithelial Cells	2 - 3	00-02 / hpf
Casts	Absent	
Crystals	Absent	
Spermatozoa	Absent	
Trichomonas Vaginalis	Absent	
Yeast Cells	Absent	
Amorphous Deposits	Absent	
Bacteria	Absent	

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Referred By : Dr. Mediwheel	Vch No : 1372054
Class : OPD	Received Dt : 28-Mar-2023 13:10
Current Loc :	Reported On : 28-Mar-2023 14:36
Accession No : 23005733	Sample No : 23014852

**STOOL EXAMINATION**

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE\UNITS</u>
<b>STOOL EXAMINATION</b>		
Colour	Brownish	
Form & Consistency	Semi Solid	
Mucus	Absent	
Blood	Absent	
Parasites	Absent	
Reaction	Alkaline	
Occult Blood	NEGATIVE	
R.B.C Per h.p.f.	2 - 3	
Pus Cells per h.p.f.	Absent	
Macrophages Per h.p.f.	Absent	
Fat	Absent	
Starch	Absent	
Entamoeba Histolitica	Absent	
Entamoeba Coli	Absent	
Giardia Lamblia	Absent	
Tricomonas Hominis	Absent	
Epithelial Cells	Absent	
Others	Absent	

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**NAME** : SRUTHI KUMAR (29Y/F)  
**REF. BY** : SELF  
**TEST ASKED** : HbA1c

**SAMPLE COLLECTED AT :**  
(4000711424), SURANA SETHIA HOSPITAL, SION -  
TROMBAY ROAD, SUMAN NAGAR, CHEMBUR,  
MUMBAI, MAHARASHTRA 400071, 400071

TEST NAME	TECHNOLOGY	VALUE	UNITS
HbA1c - (HPLC)	H.P.L.C	5.2	%

**Reference Range :**

**Reference Range: As per ADA Guidelines**

Below 5.7% : Normal  
5.7% - 6.4% : Prediabetic  
>=6.5% : Diabetic

**Guidance For Known Diabetics**

Below 6.5% : Good Control  
6.5% - 7% : Fair Control  
7.0% - 8% : Unsatisfactory Control  
>8% : Poor Control

**Method :** Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	103	mg/dl
-----------------------------	------------	-----	-------

**Reference Range :**

90 - 120 mg/dl : Good Control  
121 - 150 mg/dl : Fair Control  
151 - 180 mg/dl : Unsatisfactory Control  
> 180 mg/dl : Poor Control

**Method :** Derived from HbA1c values

**Please correlate with clinical conditions.**

~~ End of report ~~

**Sample Collected on (SCT)** : 28 Mar 2023 12:10  
**Sample Received on (SRT)** : 28 Mar 2023 14:57  
**Report Released on (RRT)** : 28 Mar 2023 16:10

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*Dr Meha S*

*Dr Sumanta Basak*

Dr Meha S MD.DNB (Path)

Dr Sumanta Basak. DPB



**Laboratory Test Report**

Name of Patient	: Mrs. SRUTHI KUMAR	Test Request ID	: 35742303280001
Age/Gender	: 29 Yrs/Female	Specimen Drawn ON	: 28-Mar-2023 12:35PM
Collected AT	: SURANASETHIA HOSPITAL AND RESE	Specimen Received ON	: 28-Mar-2023 02:40PM
Referred BY	: Dr. MEDIWHEEL	Report DATE	: 28-Mar-2023 03:51PM
Sample Type	: Serum - A3881304		
Ref Customer	:		

Test Description	Observed Value	Biological Reference Range	Method
<b>IMMUNOASSAY</b>			
<b>THYROID PROFILE</b>			
Triiodothyronine Total (T3)	1.09	0.70-2.04 ng/mL	Electrochemiluminescence immunoassay (ECLIA)
Thyroxine Total (T4)	7.8	4.6-10.5 ug/dL	Electrochemiluminescence immunoassay (ECLIA)
TSH (4th Generation)	2.194	0.40-4.20 uIU/mL	Electrochemiluminescence immunoassay (ECLIA)

PREGNANCY	REFERENCE RANGE for TSH IN uIU/mL (As per American Thyroid Association.)
1st Trimester	0.10-2.50 uIU/mL
2nd Trimester	0.20-3.00 uIU/mL
3rd Trimester	0.30-3.00 uIU/mL

**INTERPRETATION-**

1. Primary hyperthyroidism is accompanied by elevated serum T3 & T4 values along with depressed TSH level.
2. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values & elevated serum TSH levels.
3. Normal T4 levels accompanied by high T3 levels and low TSH are seen in patients with T3 thyrotoxicosis.
4. Normal or low T3 & high T4 levels indicate T4 thyrotoxicosis ( problem is conversion of T4 to T3)
5. Normal T3 & T4 along with low TSH indicate mild / subclinical HYPERTHYROIDISM .
6. Normal T3 & low T4 along with high TSH is seen in HYPOTHYROIDISM .
7. Normal T3 & T4 levels with high TSH indicate Mild / Subclinical HYPOTHYROIDISM .
8. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness , malnutrition , renal failure and during therapy with drugs like propranolol.
9. Although elevated TSH levels are nearly always indicative of primary hypothyroidism . rarely they can result from TSH secreting pituitary tumours ( secondary hyperthyroidism )

\* TSH IS DONE BY ULTRASENSITIVE 4th GENERATION CHEMIFLEX ASSAY\*

**COMMENTS:**

Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy.

**Disclaimer-**

TSH is an important marker for the diagnosis of thyroid dysfunction. Recent studies have shown that the TSH distribution progressively shifts to a higher concentration with age, and it is debatable whether this is due to a real change with age or an increasing proportion of unrecognized thyroid disease in the elderly. TSH levels are subject to circadian variation, reaching peak levels between 2-4AM and minimum between 6-10 PM. The variation is the order of 50% hence time of the day has influence on the measures serum TSH concentration. Dose and time of drug intake also influence the test result. Reference ranges are from Teitz fundamental of clinical chemistry 7th ed.

Nabl Scope.

\*\*\* End Of Report \*\*\*



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DIR.-LAB  
REGD. NO. 52507

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CONSULTANT PATHOLOGIST  
DMC/R/7884

DR. ANIL GUPTA  
M.B.B.S , M.D. (PATH)  
SR. CONSULTANT PATHOLOGIST  
DMC NO. 5019

DR. MAMTA ARORA  
D.C.P , D.N.B (PATH)  
SR. CONSULTANT PATHOLOGIST  
REGD. NO. 20011

DR. PAWAN KUMAR  
Phd. BIOCHEMISTRY  
CONSULTANT BIOCHEMIST

This report has been validated by:



QR CODE

LABL CERTIFICATE

Satellite Labs :

**CRL DIAGNOSTICS PVT. LTD.**

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Head Office : Plot No. 10, Avtar Enclave, Opposite Metro Pillar No. 227, Paschim Vihar, Rohtak Road, New Delhi-110063  
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NAME	: MS. SRUTHI KUMAR	SEX	: FEMALE
AGE	: 29 YRS	ID NO.	: 1128671
REF BY	: C/O. MEDIWHEEL	DATE	: 28/03/2023

**X-RAY CHEST PA VIEW**

**Protocol :**

Computerised radiography of chest PA reveals:

**Observation:**

- Lung fields appear clear.
- Cardiac silhouette is within normal limits.
- Bilateral costophrenic angles are clear.
- Visualised bones are unremarkable.

**Impression:**

- No significant abnormality detected.

**DR. KETAN KALASKAR**  
M.D.  
Consultant Radiologist  
RG

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PEH-2018-0537



**SURANA SETHIA HOSPITAL  
AND RESEARCH CENTRE  
CHARITABLE**

Chembur | Malad | Bhiwandi | Navi Mumbai

NAME	: MS. SRUTHI KUMAR	SEX	: FEMALE
AGE	: 29 YRS	ID NO.	: 1128671
REF BY	: C/O. MEDIWHEEL	DATE	: 28/03/2023

**EXAMINATION: 2D ECHOCARDIOGRAPHY**

**Conclusion:**

1. All chambers normal sized.
2. Good LV function with LVEF = 60 %
3. Prolapse of anterior mitral leaflet.
4. No regional wall motion abnormality.
5. IAS / IVS intact.
6. No clot / vegetation / effusion.

**Doppler Study:**

- No diastolic dysfunction
- No TR. No PH.
- No other valvular regurgitation.
- No signs of high LVEDP.

**Impression:**

- **Mild mitral valve prolapse.**
- **No MR.**

**Dr. Dinesh Rajpal**  
MD, Physician  
Reg. No.82808.

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Income Exemption No. DIT (E) / MC / 80G / 524 / 2009 - 10. 12-A Registration No. TR/31324.

Sumannagar, Sion Trombay Road, Chembur, Mumbai - 400071 **Tel. : 022-3378 3378**

Email: [info@suranasethiahospital.in](mailto:info@suranasethiahospital.in) Web. : [www.suranasethiahospital.com](http://www.suranasethiahospital.com)



**Doppler Study:**

- Diastolic dysfunction: Normal
- RVOT = Normal mm of Hg.
- LVOT = Normal mm of Hg.
- AR: NO                      MR: NO                      PR: NO                      TR: NO
- Peak / Mean across MV= Normal mm of Hg.
- Peak / mean across AV = 4 mm of Hg.
- MV PHT = Normal
- MVA by PHT = Normal square cm.
- AR PHT = Normal millisecond
- CWD across TV = Normal mm of Hg.
- PASP by TR jet = 30 mm of Hg.

**Measurements:**

	Measurement	Unit
Aorta		
LA	30	mm
AO	22	mm
ACS	17	mm
Mitral Valve		
Study		
Excursion D-E		mm
EF slop		mm/s
EPSS	6	mm

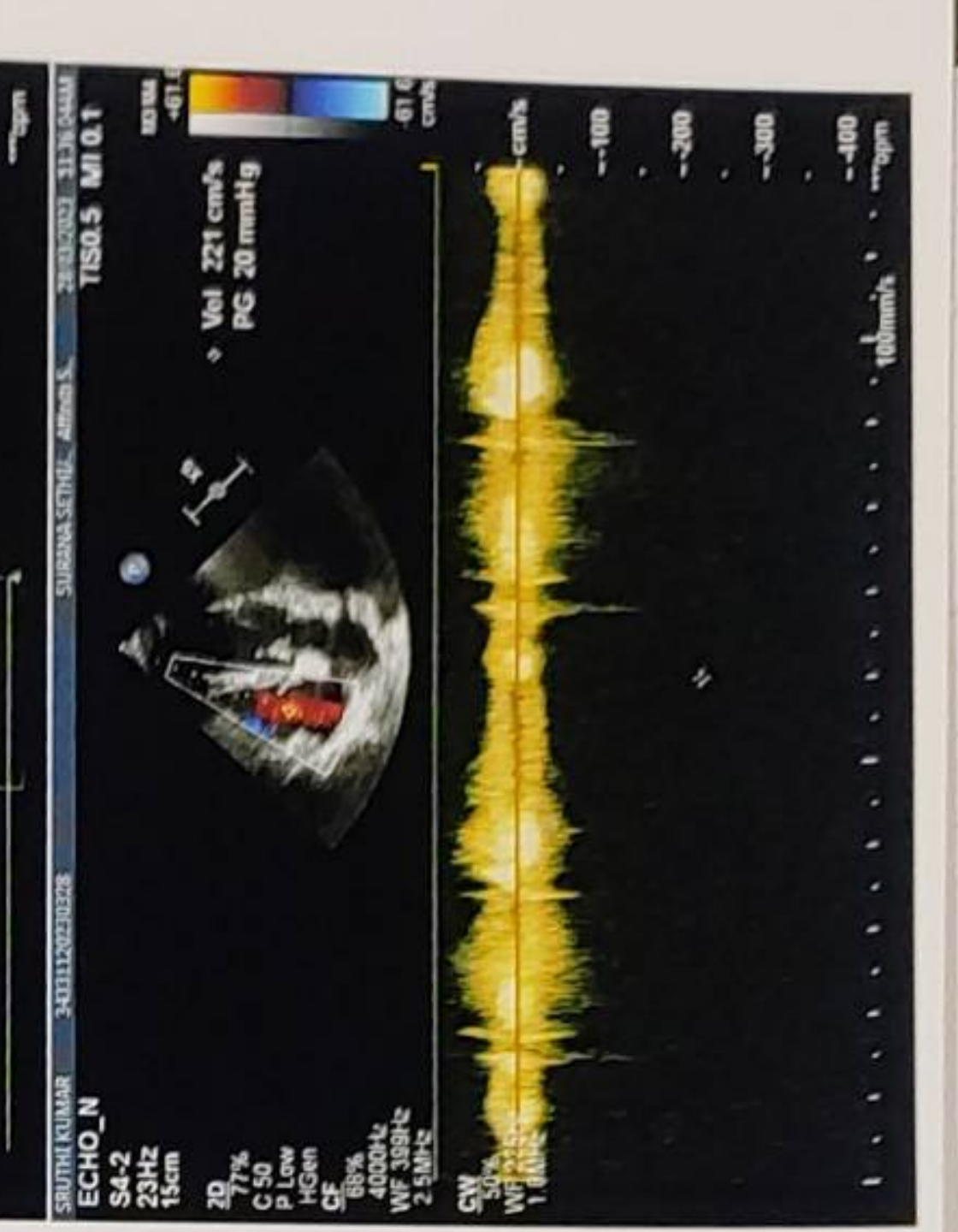
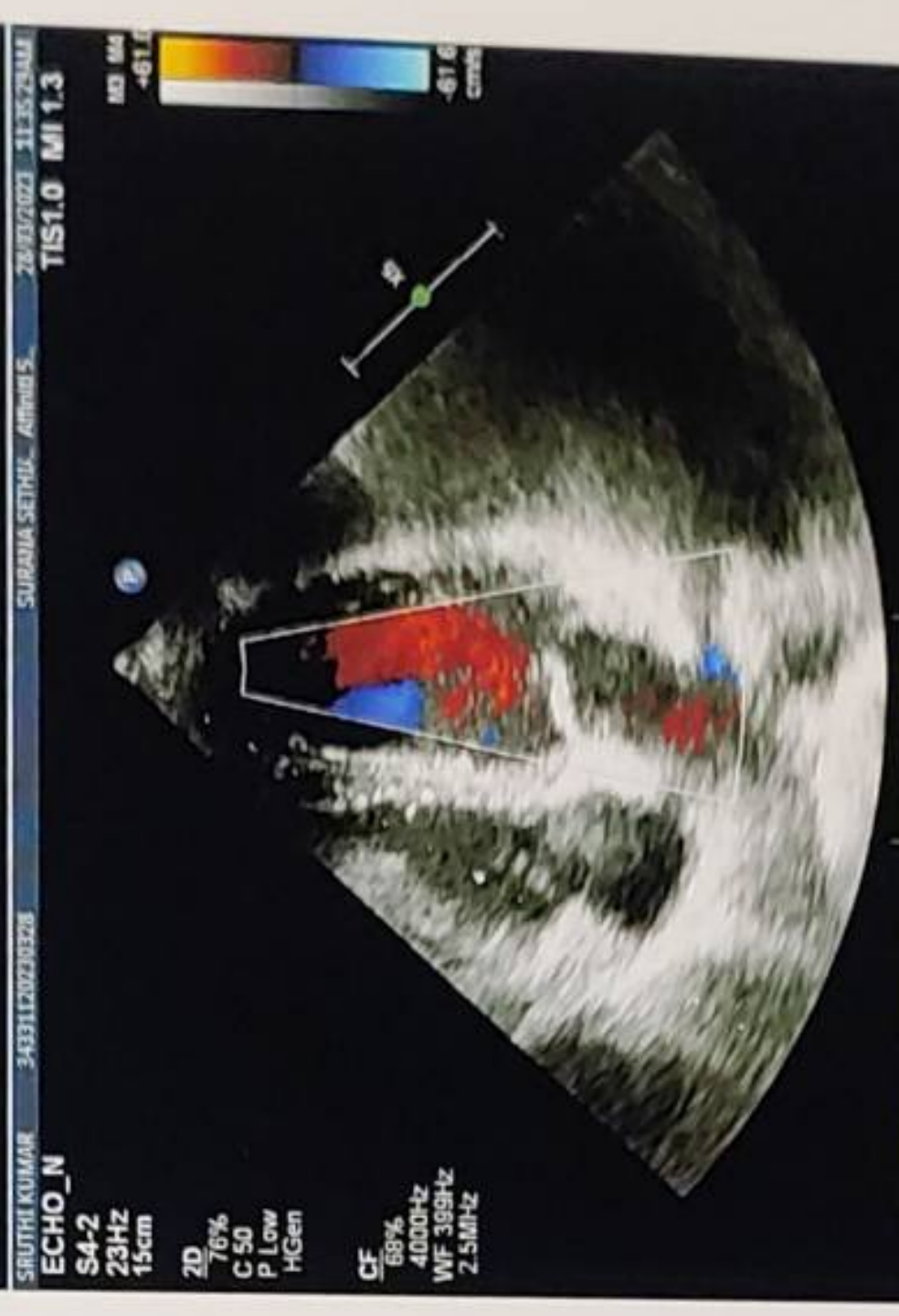
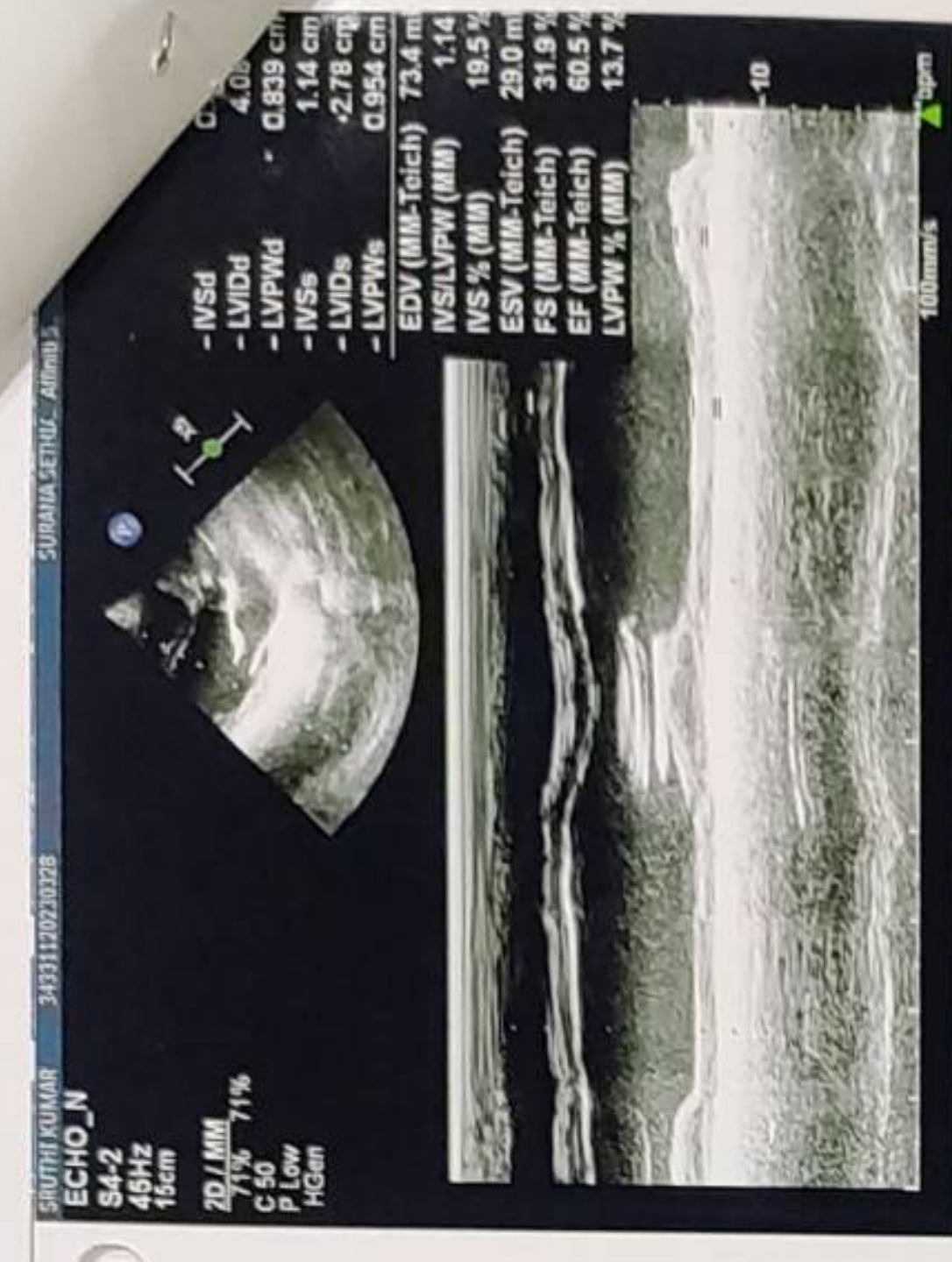
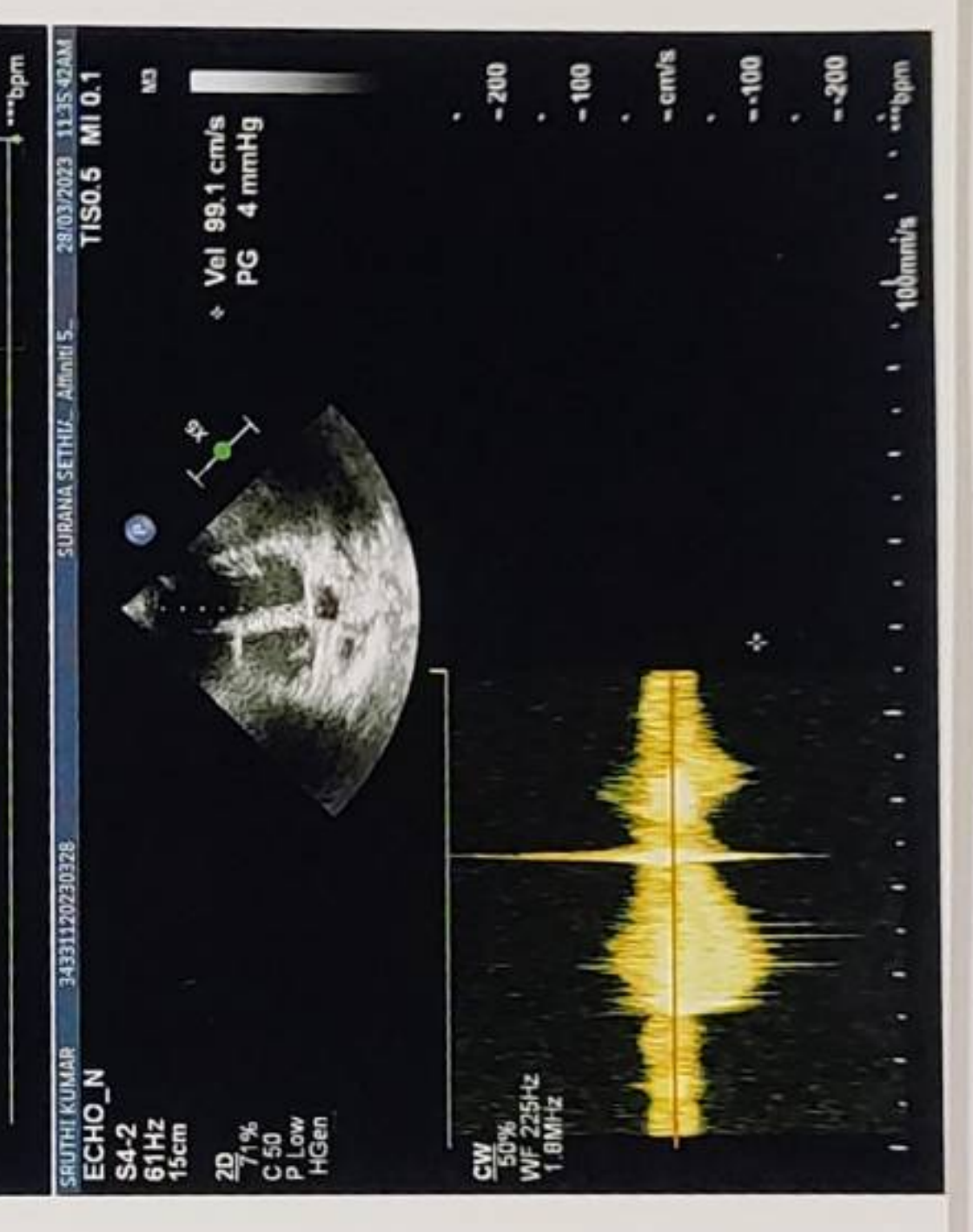
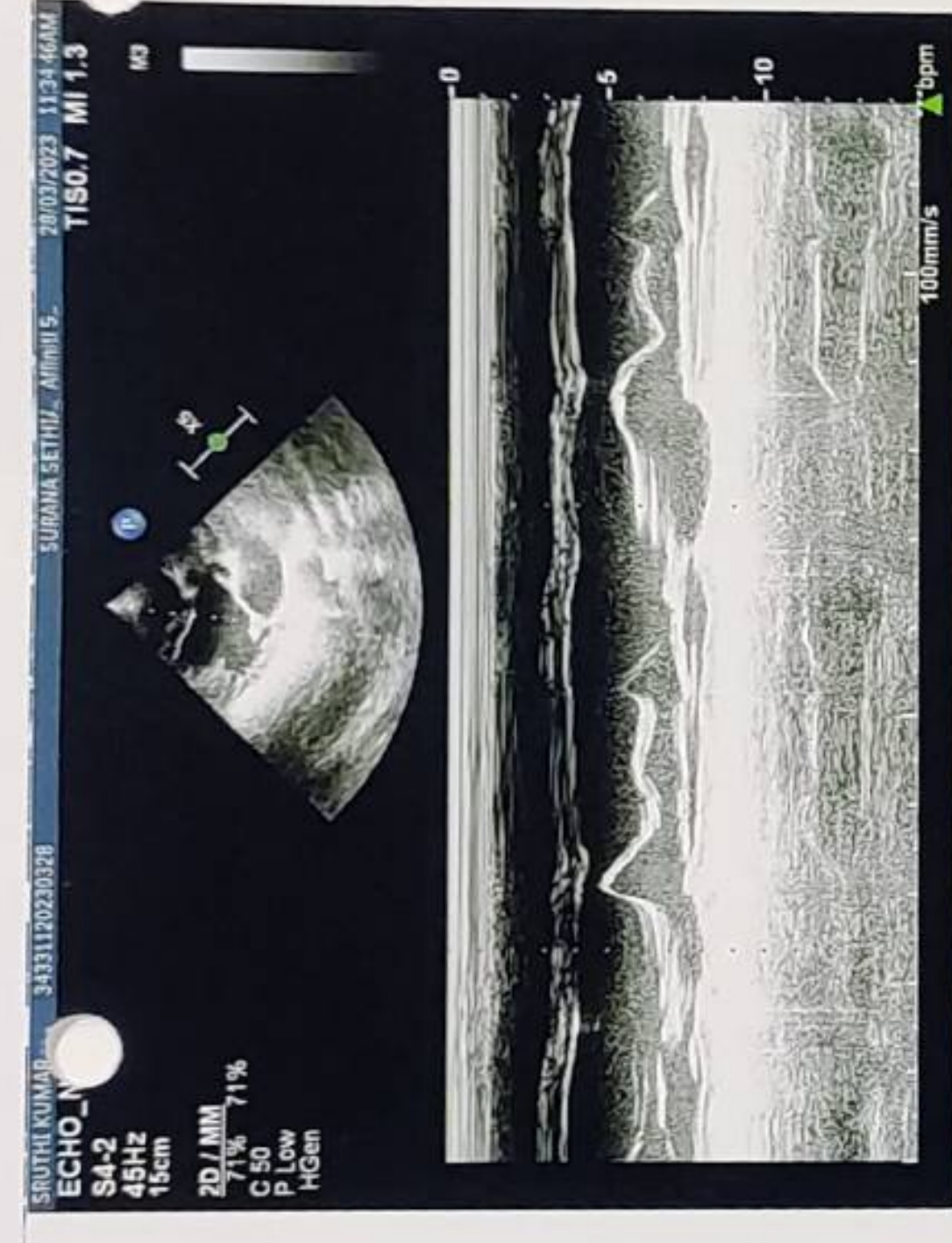
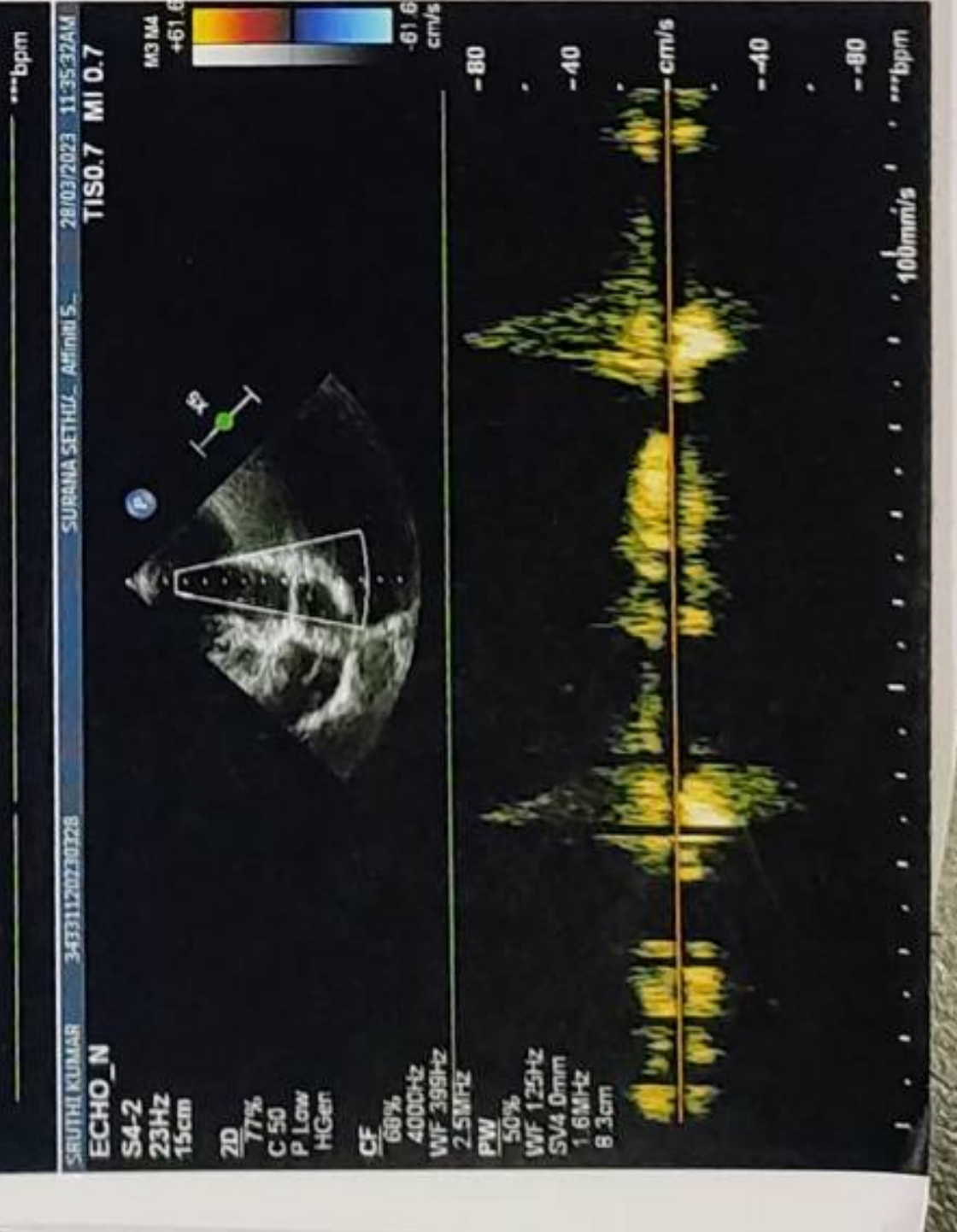
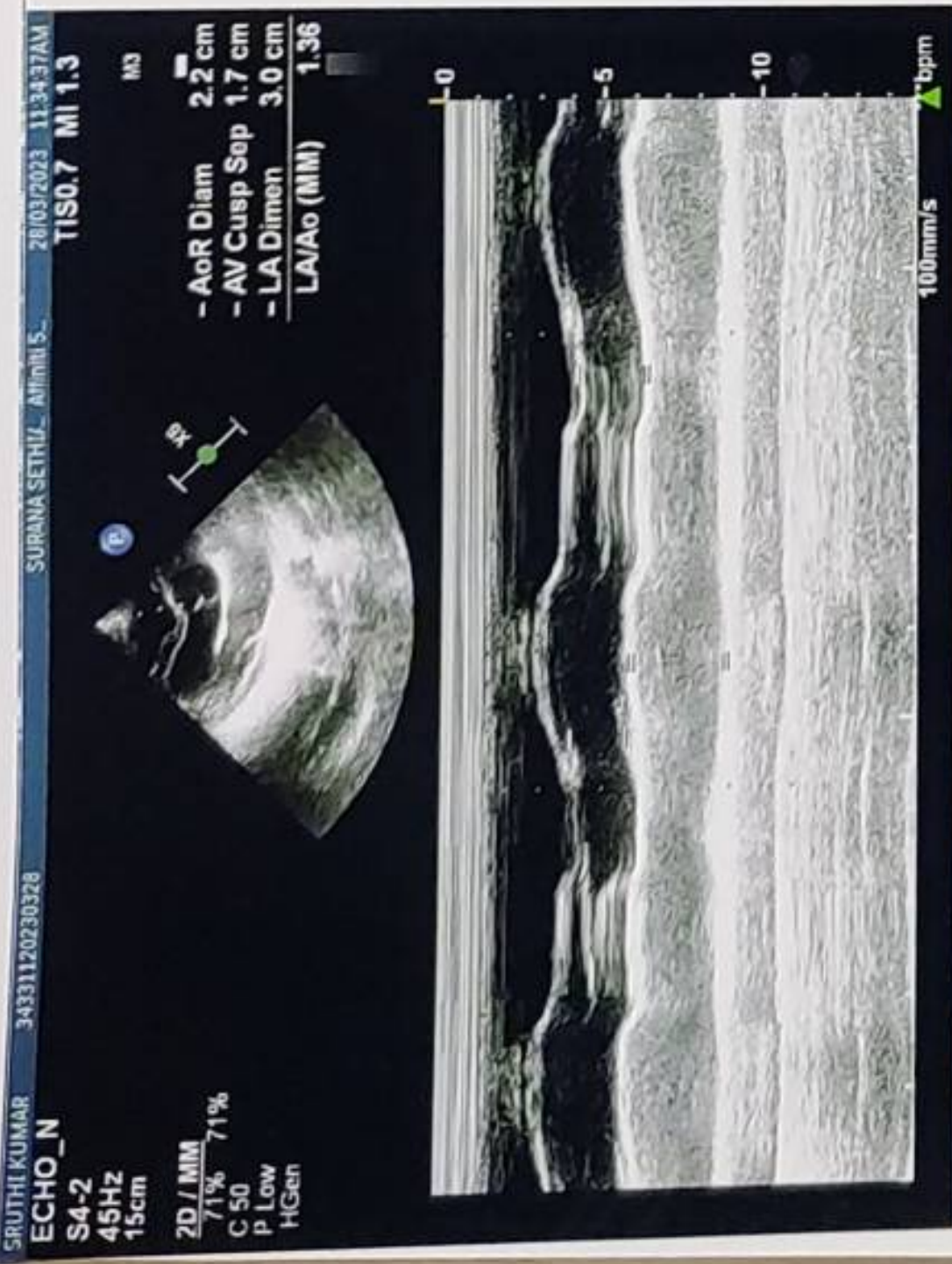
	Measurement	Unit
LV study		
IVsd	09	mm
LVIDd	40	mm
LVPWD	08	mm
IVSs	11	mm
LVIDs	27	mm
LVPWa	09	mm
EF %	60	%
% FS		%

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NABH PRE ACCREDITATION  
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### ULTRASONOGRAPHY OF ABDOMEN AND PELVIS

#### LIVER

Liver is normal in size, shape and contour. It shows homogeneous echotexture. No abnormal parenchymal mass lesion is seen. Intra hepatic biliary radicles and portal radicles are normal.

#### PORTAL VEIN AND C.B.D

Portal vein and C.B.D are normal in course and caliber.

#### GALL BLADDER

Gall bladder is physiologically distended. Wall thickness is normal. No evidence of calculus or sludge or pericholecystic collection is seen.

#### SPLEEN

Spleen shows normal size, shape, contour and echogenicity. No abnormal parenchymal mass / lesion. Splenic vein is normal.

#### PANCREAS

Pancreas is normal in size, shape and position. It shows normal echogenicity. No focal mass lesion or calcification is seen. Pancreatic duct is not dilated.

#### KIDNEYS

Both kidneys are normal in size, shape, position and contour. Parenchymal echogenicity is normal. Cortico-medullary difference is well maintained. No abnormal mass lesion is seen. No evidence of calculus and hydronephrosis in both kidneys.

Right kidney measures 9.5 x 3.8 cm.

Left kidney measures 8.9 x 5.2 cm.

Contd 2/..

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:2:

### AORTA AND RETROPERITONEUM

Visualized aorta and retroperitoneal vessels are normal in course and caliber. No evidence of significant lymphadenopathy or free fluid.

### URINARY BLADDER

Urinary bladder is well distended. It shows smooth wall and mucosal thickening is normal. No obvious mass lesion or calculus is seen.

### UTERUS

Uterus is anteverted, normal in size. Myometrial echopattern is normal. No obvious focal mass lesion is seen. Uterus measures 7.1 x 3.3 x 4.5 cm. Endometrium is central, 7.2 mm in thickness.

### OVARIES

Right ovary is bulky and measures 4.5 x 2.5 x 3.9 cm (volume = 24 cc). Multiple enlarged follicles are seen; largest of size 2.8 x 2.1 cm.

Left ovary is normal in size and echopattern. It measures 2.7 x 1.8 x 2.6 cm (volume = 7 cc).

Bilateral adnexae are clear.

No free fluid is seen in Pouch of Douglas.

### IMPRESSION:

- Bulky right ovary with multiple enlarged follicles as described above.
- No other significant abnormality is detected.

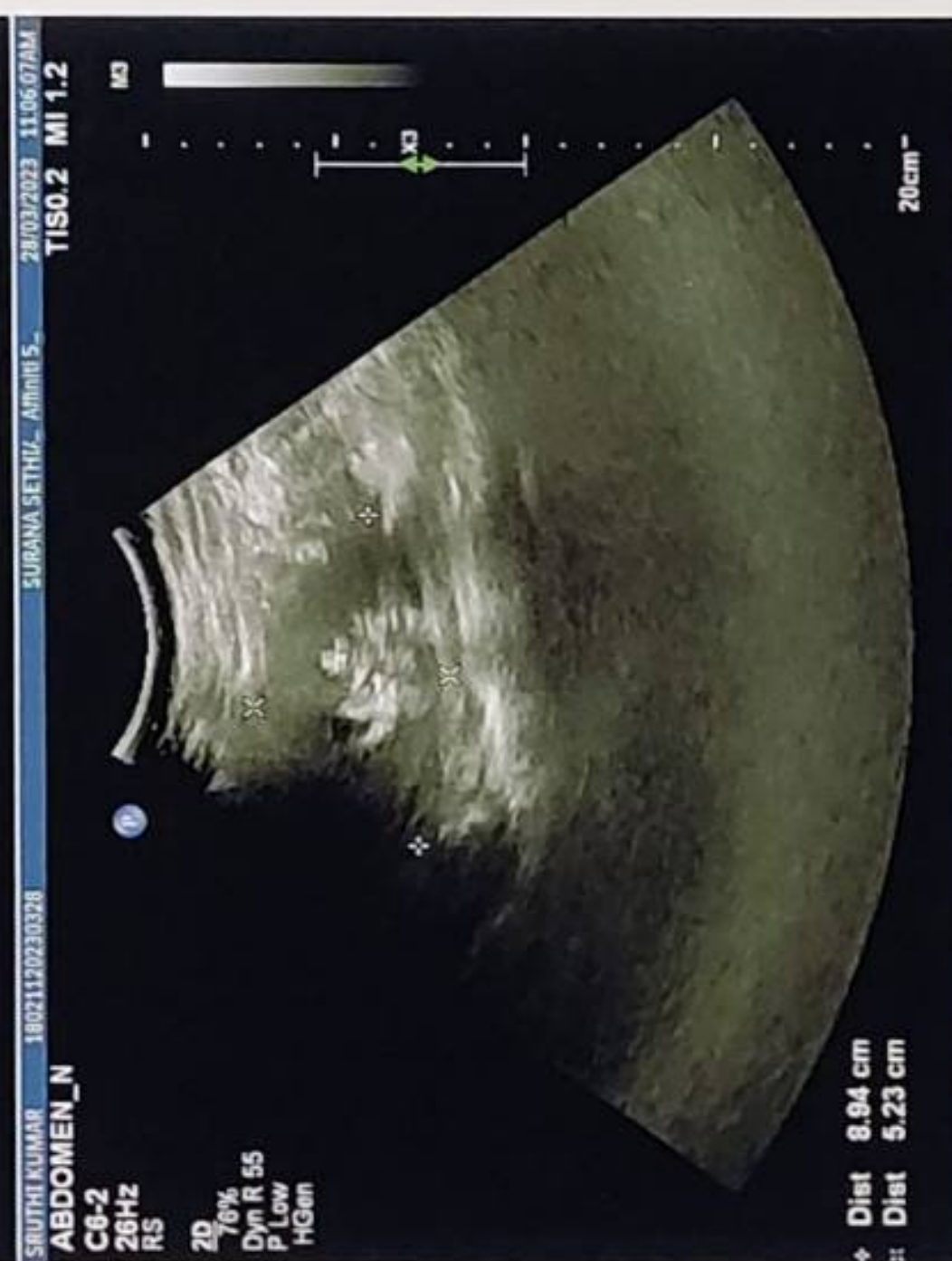
  
DR. KETAN KALASKAR  
M.D.  
Consultant Radiologist  
RG

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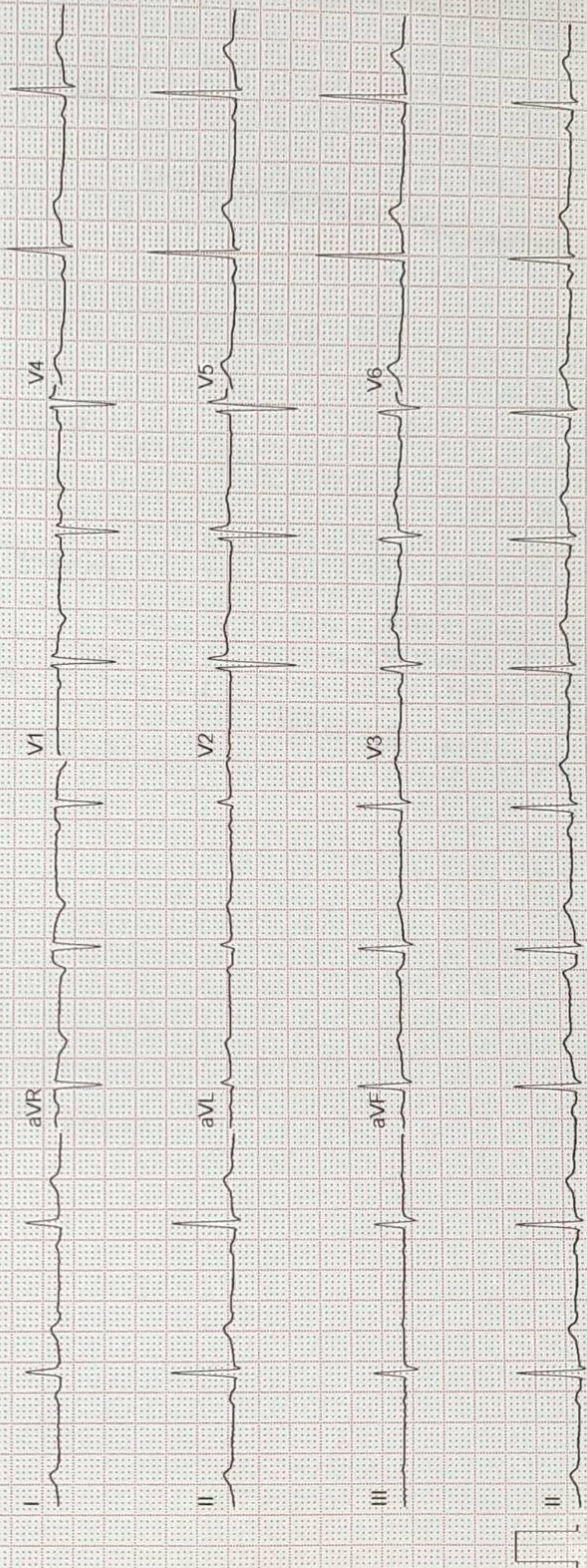
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CHEMBUR  
MUMBAI

63 bpm

63 bpm  
--/-- mmHg  
Rvs - Sruthi Kumar  
Age - 20/6  
BP - 106/60 mmHg  
P - 60/min

Normal sinus rhythm  
Normal ECG

QRS	90 ms
QT / QTcBaz	418 / 427 ms
PR	160 ms
P	92 ms
RR / PP	952 / 952 ms
P / QRS / T	42 / 54 / 33 degrees



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4x2.5x3.25 R1 Unconfirmed 1/1