



Savita

Superspeciality Hospital
(A Unit of Solace Healthcare Pvt. Ltd.)

Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019

☎ 0265-2578844 / 2578849 ✉ mh@savitahospital.com 🌐 savitahospital.com

Examination By Ophthalmologist

Name :	KHUSHBOOKUMARI SHARMA	Age :	32/FEMALE
Reg.No :	20230107539	DOE :	14/04/2023
Present Complaints :	NAD		
Medical History :	NAD		
Examination Of Eye :	NAD		

External Examination :	NAD	NAD
Ati Seg Examination :	A/S: WNL	
Schiotz Tonometry IOP :	P:RRRL	
Fundus :	NILL	
Without Glass	Distant Vision :6/6	6/6
	Near Vision : N6	N6
With Glass	Distant Vision :	
	Near Vision :	
Colour Vision (With Ishihara Chart) :	WNL	
Advice :	NIL	

DR CHETAN CHAUHAN





PHYSICIAN EXAMINATION

Name :	KHUSHBOOKUMARI SHARMA	Age :	32/FEMALE
Reg.No :	20230107539	DOE :	14/04/2023

Physical Examination:

Height:	158CM	Weight:	62 KG	PULSE:	74	Temperature:	NORMAL
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BMI :	24.83	BP :	107/68	SPO2	98%
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Chief Complaint :	NO COMPLAINTS
Past History :	NO SIGNIFICANT K/C/O HYPOTHYROIDISM
General Examination :	NAD
Systemic Examination :	NAD
INVESTIGATION :	NAD
ADVICE :	CONTINUE TAB: THYROXINE 25 1--0--0

DR. SAURABH JAIN

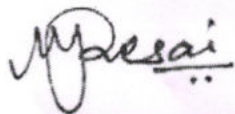




Patient Name : Khushbookumari . Sharma	Sample No. : 20230400585 
Patient ID : 20230107539	Visit No. : OPD20230401052
Age / Sex : 32y 3m/Female	Call. Date : 14/04/2023 09:37
Consultant : DR SAURABH JAIN	S. Coll. Date : 14/04/2023 10:10
Ward : -	Report Date : 14/04/2023 14:15

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	12.1 gm/dl [L]	12.5 to 16.0 gm/dl
P.C.V. :	38.3 %	37.0 to 47.0 %
M.C.V. :	83.1 fL	78 to 100 fL
M.C.H. :	26.2 pg [L]	27 to 31 pg
M.C.H.C. :	31.6 g/dl [L]	32 to 36 g/dl
RDW :	13.6 %	11.5 to 14.0 %
RBC Count :	4.61 X 10 ⁶ / cumm	4.2 to 5.4 X 10 ⁶ / cumm
Polymorphs :	69 %	38 to 70 %
Lymphocytes :	27 %	15 to 48 %
Eosinophils :	2 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	5300 /cmm	4000 to 10000 /cmm
Platelets Count :	150000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	37 mm/hr [H]	1 to 20 mm/hr



Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521




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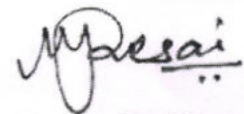
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FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	86 mg/dl	74 - 100 mg/dl
Urine Sugar (FUS) :	Nil	
Blood Sugar (PP2BS) :	78 mg/dl	70 to 120 mg/dl
Urine Sugar (PP2US) :	Nil	


HBA1C

Investigation	Result	Normal Value
Glycosylated Hb :	5.2 %	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	102.54	



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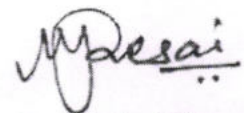
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Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	A	
Rh	Positive	

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	0.6 mg/dl	0.6 - 1.4 mg/dl
Urea :	15 mg/ dl	13 - 45 mg/dl
Uric Acid :	4.5 mg/dl	3.5 - 7.2 mg/dl
Calcium :	8.4 mg/dl	8.5 - 10.5
Phosphorus :	4.3 mg/dl	1.5 - 6.8



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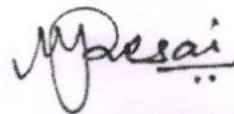
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Lipid Profile


Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	209 mg/dl [H]	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	90 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	66 mg/dl	Low risk : >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	125 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	18 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	1.89	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.17	Low Risk : 3.3 to 4.4 Average Risk : 4.4 to 7.1 Moderate Risk : 7.1 to 11.0 High Risk : > 11.0
Total Lipids :	665 mg/dl	400 to 700 mg/dl

Note :- Lipemic samples give high triglyceride value and falsely low LDL value.



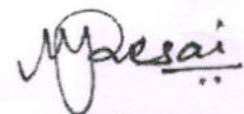
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LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.4 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.2 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.2 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	21 U/L	5 to 34 U/L
ALT (SGPT) :	25 U/L	0 to 55 U/L
Total Protein (TP) :	7.9 g/dl	6.4 to 8.3, g/dl
Albumin (ALB) :	4.2 g/dl	3.5 to 5.2 g/dl
Globulin :	3.7 g/dl [H]	2.3 to 3.5 g/dl
A/G Ratio :	1.14	
Alkaline Phosphatase (ALP) :	100 U/L	40 to 150 U/L
GAMMA GT. :	19 U/L	7 to 35 U/L



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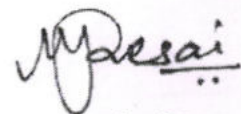
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Urine R/M

Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	6.0	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.020	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	0-1 /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	0-1 /hpf	



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TEST REPORT

Reg. No. : 30401007145	Reg. Date : 14-Apr-2023 11:20	Collected On : 14-Apr-2023 11:20
Name : Ms. KHUSHBOOKUMARI SHARMA		Approved On : 14-Apr-2023 12:12
Age : 32 Years	Gender : Female	Ref. No. :
Ref. By :		Dispatch At :
Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD		Tele No. :

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine) <i>Method:CLIA</i>	1.16	ng/mL	0.6 - 1.81
T4 (Thyroxine) <i>Method:CLIA</i>	10.60	µg/dL	4.5 - 12.6
TSH (ultra sensitive) <i>Method:CLIA</i>	4.266	µIU/mL	0.55 - 4.78
Sample Type:Serum			

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

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

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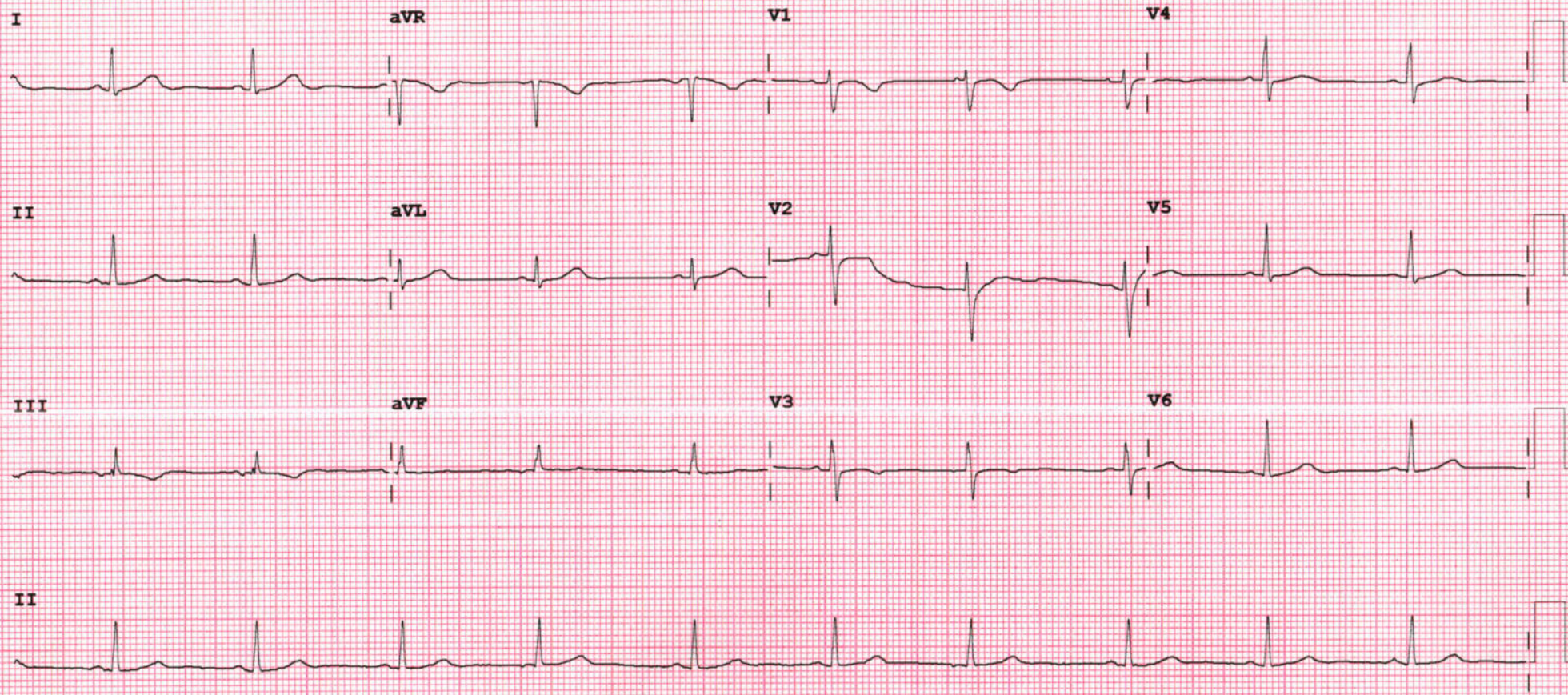
Test done from collected sample.

Dr. Vishal Jhaveri

Rate 64
PR 132
QRSD 82
QT 404
QTc 417

--AXIS--
P 4
QRS 50
T 4

12 Lead; Standard Placement



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W

PH09

P?



2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: KHUSHBOOKUMARI SHARMA

AGE/SEX: 32 YRS/FEMALE

DATE : 14/04/2023

REF BY: DIRECT

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60 % (VISUAL).
- NO RWMA AT REST.
- NO MR. NO MS.
- NO AR. NO AS.
- NO TR. NO PAH.
- NORMAL SIZED LA, RV & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

LA: 28 MM AO: 22 MM IVS: 09/13 MM LVPW: 08/12 MM LVID: 44/28 MM

CONCLUSION:

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

DR.NIRAV BHALANI
[CARDIOLOGIST]

DR.ARVIND SHARMA
[CARDIOLOGIST]

DR. DARSHAN THAKKAR
[CARDIOLOGIST]





Patient name	KHUSHBOOKUMARI SHARMA
Age / Sex	32 Y/F
Date	14/04/2023

ULTRASOUND OF ABDOMEN

LIVER appears normal in size (14.2 cm) and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No evidence of abnormal wall thickening or any significant calculus within.

PANCREAS appears normal. MPD is WNL

SPLEEN appears normal in size (9.4 cm) and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size (RK: 10.9 cm & LK: 10.6 cm), shape and position. Show normal cortical echogenicity. Corticomedullary differentiation is maintained. No evidence of calculus or hydronephrosis on either side.

URINARY BLADDER is partially full. No evidence of abnormal wall thickening or any significant calculus within.

UTERUS appears normal in size and retroverted in position. CET is WNL. No evidence of focal lesion noted. No evidence of focal or obvious adnexal mass lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis. No evidence of LYMPHADENOPATHY noted. No evidence of ASCITES noted.

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY AT PRESENT SCAN.

DR SHARAD RUNGTA
MD RADIOLOGY

Not all pathologies can be detected on radiograph. Further radiographic evaluation is suggested if required.



NAME: KHUSHBOO KUMARI SHARMA	AGE/SEX: 32 YRS/F
DATE: 14/04/2023	

CHEST XRAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY NOTED IN LUNG FIELDS**
- **NORMAL CARDIAC SHADOW**

DR SHARAD RUNGTA

MD RADIOLOGY

Not all pathologies can be detected on radiograph. Further radiographic evaluation is suggested if required.