

Patient Name : **MRS. KRISHNA RAIYANI**  
Patient ID : 44760  
Age / Sex : 31 years / Female  
Referred by : MEDIWHEEL  
Bill ID : 73195

Collected : Dec 10, 2022, 10:42 a.m.  
Reported : Dec 10, 2022, 04:03 p.m.  
Sample ID :



204281

Test Description	Results	Units	Biological Reference Range
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**ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)**

Sample Type : Serum

<b>Ultrasensitive Thyroid Stimulative Hormone (TSH)</b> [ CLIA ]	0.99	μIU/mL	0.3- 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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**Clinical Significance :-**

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

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\*\*END OF REPORT\*\*



**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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Test Description	Results	Units	Biological Reference Range
<b><u>FASTING BLOOD SUGAR</u></b>			
Sample Type : Flouride R			
Fasting Blood Sugar [ GOD - POD ]	92.5	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

\*\*\*END OF REPORT\*\*\*

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**POST PRANDIAL BLOOD SUGAR**

Sample Type : Flouride PP

Post Prandial Blood Sugar [ GOD - POD ]	135.5	mg/dl	110-180
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
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**LIPID PROFILE**

Sample Type : Serum

TOTAL CHOLESTEROL

183

mg/dL

Desirable : &lt;200 mg/dl

[ CHOD-PAP ]

Borderline : 200 - 239mg/dl

High : &gt;240 mg/dl

TRIGLYCERIDES

90.3

mg/dL

Desirable : &lt;150 mg/dl

[ Glycerol Phosphate Oxidase ]

Borderline : 150 - 199mg/dl

High : &gt;200mg/dl

HDL CHOLESTEROL [ Direct ]

58.6

mg/dL

Desirable : &gt;40 mg/dl

Borderline Risk : 35 mg/dl

High Risk : &lt;30 mg/dl

LDL CHOLESTEROL [ Calculated ]

**106.34**

mg/dL

Desirable : &lt;100 mg/dl

Borderline : 130 - 160mg/dl

High : &gt;160mg/dl

VLDL Cholesterol

18.06

mg/dL

Desirable : &lt;26 mg/dl

[ Calculated ]

Borderline : &gt;30 mg/dl

Total Chol / HDL Chol Ratio

3.12

mg/dL

Desirable : &lt;5 %

[ Calculated ]

LDL / HDL Ratio

1.81

1.00 - 3.55

[ Calculated ]

NON-HDL CHOLESTEROL

124.40

mg/dL

Desirable : &lt;130 mg/dl

[ Calculated ]

Borderline : 160 - 189 mg/dl

High : &gt;220 mg/dl

**Technique:**

Fully Automated Biochemistry Analyser ERBA EM-200.

**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
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<b><u>GLYCOCYLATED HAEMOGLOBIN</u></b>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [ Tosoh HPLC ]	5.9	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	122.63	mg/dL	116.89 - 154.2

\*\*END OF REPORT\*\*



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### URINE ANALYSE REPORT

Sample Type : Urine

#### PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	<b>Slightly Hazy</b>		
REACTION (PH)	6.0		5.0-7.5
SPECIFIC GRAVITY	1.020		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	<b>Present (++)</b>		
NITRITE	Absent		
UROBILINOGEN	Negative		

#### MICROSCOPY

PUS CELLS/hpf	<b>2-4</b>
RBCs/hpf	Absent
EPI.CELLS/hpf	<b>2-4</b>
CASTS	Absent
CRYSTALS	Absent
BACTERIA	Absent
Other	Absent

\*\*END OF REPORT\*\*



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**LIVER FUNCTION TEST**

Sample Type : Serum

TOTAL BILIRUBIN [ DIAZO ]	0.68	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [ DIAZO ]	0.36	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [ CALCULATED ]	0.32	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [ IFCC without Pyridoxal Phosphate ]	16.20	IU/L	5-40 IU/L
S.G.P.T.(ALT) [ IFCC without Pyridoxal Phosphate ]	9.1	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [ Amino Methyl Propanol (AMP) ]	86	IU/L	44-147 IU/L
TOTAL PROTEINS [ BIURET ]	7.23	IU/L	6.0 - 8.5 g/dL
ALBUMIN [ BROMO CRESOL GREEN (BCG) ]	3.89	g/dl	3.5-5.0 g/dl
GLOBULIN [ CALCULATED ]	3.34	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [ CALCULATED ]	1.16		
GAMMA GT	12.10	U/L	0 - 45

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

\*\*END OF REPORT\*\*



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**SR. URIC ACID**

Sample Type : Serum

<b>Uric Acid</b> [ Uricase - POD ]	3.8	mg/dl	2.5 - 6.8
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

**\*\*END OF REPORT\*\***



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Reg. No. : 90461



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**CREATININE**

Sample Type : Serum

<b>Creatinine</b>	0.43	mg/dl	0.40 - 1.40
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[ Enzymatic ]

Formula

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
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**BLOOD UREA LEVEL ( BUL )**

Sample Type : Serum

<b>Urea</b>	14	mg/dl	10 - 40
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[ Urease - GLDH ]

<b>Bun</b>	6.54	mg/dl	6 - 21
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[ Calculated ]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

\*\*END OF REPORT\*\*



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**COMPLETE BLOOD COUNT**

Sample Type : EDTA / Whole Blood

Hemoglobin	12	g/dl	11.5 - 15.0
RBC COUNT	<b>5.01</b>	Millions/c	3.8 - 4.8
PCV(Hematocrit)	<b>38.1</b>	%	40.0 - 50.0
Mean Cell Volume(MCV)	<b>76.2</b>	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	<b>23.9</b>	pg	27.0 - 32.0
Mean Cell Hb Conc(MCHC)	<b>31.4</b>	g/dl	32 - 36
RDW	<b>15</b>	%	11.50 - 14.50
Total Leucocytes (WBC) Count	<b>12630</b>	/cumm	4000-11000

**DIFFERENTIAL COUNT**

Neutrophils	67.6	%	40 - 70
Lymphocytes	27	%	20 - 50
Eosionphils	2.2	%	01 - 06
Monocytes	2.7	%	00 - 08
Basophils	0.5	%	00-01

**SMEAR STUDY**

RBC Morphology	Normocytic Normocromic.		
WBC Morphology	<b>Leucocytosis</b>		
Platelets On Smear	Adequate on Smear		
Platelet Count	382000	/cumm	150000 - 450000
MPV	9	fL	6.5 - 10.0

**Comments :-****Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

**Technique :-**

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

\*\*END OF REPORT\*\*



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Test Description	Results	Units	Biological Reference Range
	<b><u>ESR</u></b>		
Sample Type : EDTA / Whole Blood			
ESR	10	Mm/hr	0 - 20
Method	Westergren		

\*\*END OF REPORT\*\*



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**TOTAL THYROXINE ( T4 )**

Sample Type : Serum

Total Thyroxine ( T4 ) [ CLIA ]	96.30	ng/ml	52 - 127
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**\*\*END OF REPORT\*\***

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**TOTAL TRIIODOTHYRONINE (T3)**

Sample Type : Serum

TotalTriiodothyronine (T3) [ CLIA ]	1.20	ng/dL	0.69 - 2.15
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**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

ભારત સરકાર  
Government of India

રેયાણી ક્રિષ્ના વિનોદભાઈ  
Raiyani Krishna Vinodbhai  
જન્મ તારીખ / DOB : 09/04/1992  
સ્ત્રી / Female

8213 5898 0268

આધાર - સામાન્ય માણસનો અધિકાર

આધાર  
Unique Identification Authority of India

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*Dr. Mahesh V. Padsalge*  
MD. (Medicine)  
Consultant Physician  
Reg. No. 97424 (MMCO)

*Kov. Kalpani*

Raiyani Krishna Vinodbhai

Raiyani Krishna Vinodbhai  
30/F

10/12/22

Eye check up

Right Eye

Left Eye

VA @

6/6

@ 6/6

Color Vn

@

@

A/S

@

@

(F)

@

@

(750) ante

gy

K.V. taeyai



ges  
wshn personal Asmt

Female

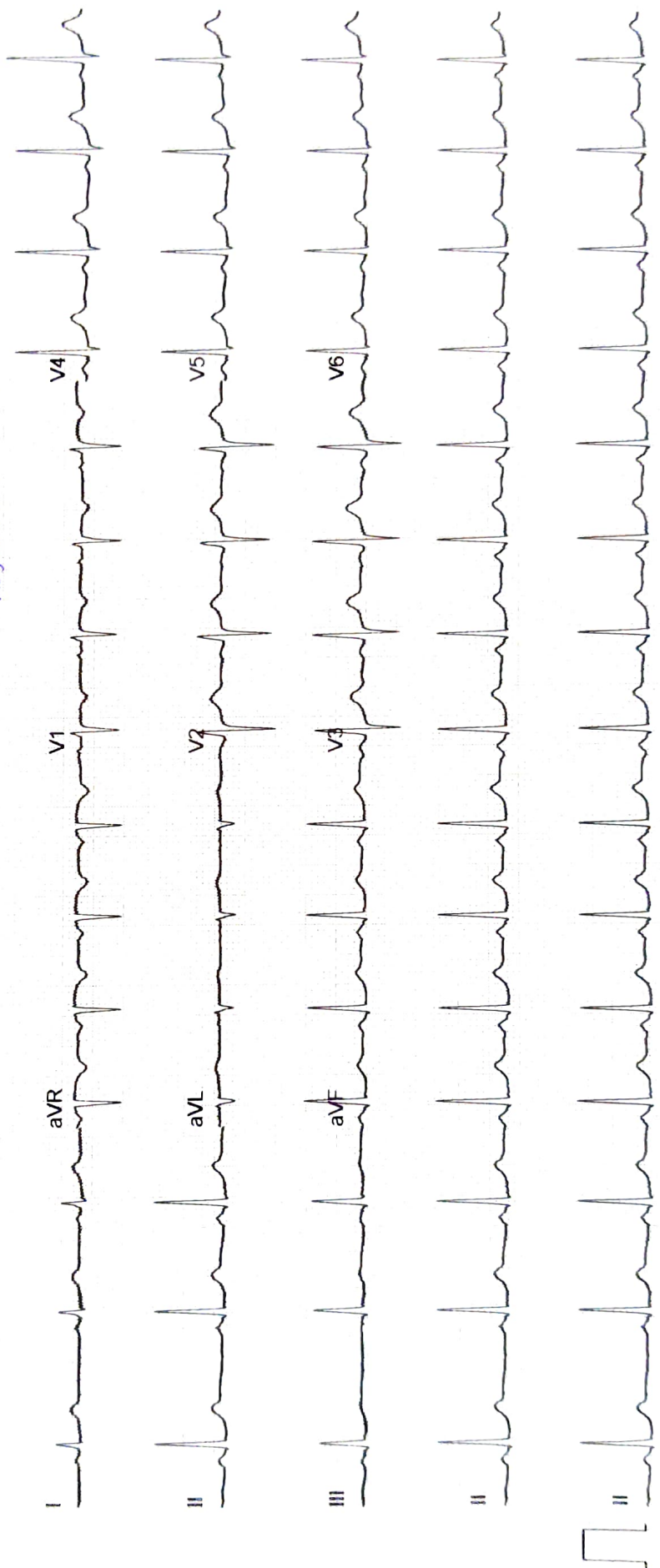
QRS : 70 ms  
QT / QTcBaz : 356 / 437 ms  
PR : 118 ms  
P : 98 ms  
RR / PP : 660 / 659 ms  
P / QRS / T : 57 / 73 / 45 degrees

Sinus rhythm with marked sinus arrhythmia  
Otherwise normal ECG

ges

Dr. Mafresh V. Padsalge

MD. (Medicine)  
Consultant Physician  
Reg. No. 91404 (MMC)



**ECHO Report**

**Date: 10/12/2022**

**Patient Details**

**Patient ID –**

**Name- MRS RAIYANI KRISHNA**

**Age- 30 YEARS**

**Gender- FEMALE**

**Referral BY - MEDIWHEEL**

**Doctor Incharge DR. MAHESH PADSALGE**

**Clinical Status of Patient -**

**Finding description -**

- 1. Normal cardiac chambers dimensions .**
- 2. Normal LV systolic function.**
- 3. No RWMA.**
- 4. All cardiac valves are structurally normal.**
- 5. Trivial MR, Trivial PR, NO AR.**
- 6. No PAH.**
- 7. Normal RV systolic function.**
- 8. No clot/vegetation/pericardial effusion.**
- 9. No coarctation of aorta.**

*K.V. Padsalge*

**Chamber Dimensions-M mode Findings**

LVID (Diastole) 35-56(mm)	- 41.00	LVID (Systole) 24-42(mm)	- 25.00
IVS (Diastole) 8-12(mm)	- 07.00	IVS (Systole) 14-42(mm)	- 10.00
LVPWT (Diastole) 6-11(mm)	- 07.00	EPSS	- 2.00
LVEF (%)	- 65%	LVFS (%)	- 38.00

LV Volume (Diastolic)(mm<sup>3</sup>)  
Meridional Wall Stress in System

LV Volume (Systolic)(mm<sup>3</sup>)  
Cubed LV Volume in Diastole (mm<sup>3</sup>)

Cubed LV+ myocardial volume (mm<sup>3</sup>)

Velocity of circumferential  
Shortening (mm)

Aortic root 22-37(mm)	- 23.00
Left Atrium Length (mm)	- 26.00
Left Atrium Volume (mm <sup>3</sup> )	
RV size	Normal
Normal	
RV volume (mm <sup>3</sup> )	
Normal	
Pericardium	Normal
Effusion	None
Resp Variation	Present
Predicted RV Systolic Pressure	

Left Atrium Width (mm)  
Left Atrium Area (mm<sup>2</sup>)  
RV Function

RA Size

IVC Size (mm) – 15mm Collapsible

**Doppler Findings- I**



**Dr. Mahesh Padsalge**

Dr. Mahesh V. Padsalge  
MBBS (Medicine)  
Consultant Physician  
Internal Medicine (MMC)

K.V. Kalyan

