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Mrs. Kausalya Nayak
Age - 34/F

BP - 110/70
P - 60/mt
H - 156 c.m
Wt - 61 kg

No h/o
DM. HTN. COPD

Dr. Dolly - 8319143052

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EXAMINATION OF EYES :-(BY OPHTALMOLOGIST)

Patient Name Mrs. Kausalya Date 7/10/23

Sex/Age 34/F MR No .... Employee Id ....

EXTERNAL EXAMINATION			
SQUINT	- NO		
NYSTAGMUS	- NO		
COLOUR VISION	- Normal		
FUNDUS:(RE):-	well	(LE):-	well
INDIVIDUAL COLOUR IDENTIFICATION			
DISTANT VISION:(RE):-	EPG 6/6	(LE):-	EPG 6/6
NEAR VISION:(RE):-	N/6	(LE):-	N/6
NIGHT BLINDNESS			

	SPH	CYL	AXIS	ADD
RIGHT	-0.50	-	-	
LEFT	-0.50	-	-	

REMARKS :- Fundus - well
EPG { 6/6, 6/6 }

Dr. Vikas Mishra
MBBS,MS(Ophthalmologist)
Reg. No. CGMC 321/2006

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Dr. Sweety Lath
BDS (Cosmetic Dental Surgeon)

Dr. Vivek Lath
Chief Dental Consultant
BDS, MDS, Diplomate (WCOI, Japan)
Professor, MCDRC - Durg
Reg. No. CGDC/14/PG/45

• Consult for : Digital Dentistry • Fixed Teeth • RCT • Dental Implants • Gums Diseases • Dentures • Cosmetic Filling • Tooth Jewellery • Digital OPG • Braces Treatment • Tooth Removal • Kids Dental Treatment • All Kind of Dental Surgeries

7/10/23

Kaushalya Maya
34/F

Pt has came for routine dental checkup

O/E → Stains +
Calculus +
Occlusal Caries c̄ 87/ 8

Adv → Oral Prophylaxis

(signature)

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UHID/ MR No	: 7093	OP Visit No	: OPD-UNIT-II-2
Visit Date	: 07/10/2023	Reported On	: 09/10/2023 06:48PM
Sample Collected On	: 07/10/2023 04:07PM		
Ref. Doctor	: SELF		
Sponsor Name	:		

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
HEMOGRAM			
Haemoglobin(HB) Method: CELL COUNTER	**11.8**	gm/dl	12 - 16
Erythrocyte (RBC) Count Method: CELL COUNTER	4.42	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	**35.40**	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	80.1	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	26.7	pg	26 - 34
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	15.2	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	4.53	cells/cumm	3.50 - 11.00
Neutrophils Method: CELL COUNTER	42	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	52	%	15.0 - 45.0
Eosinophils Method: CELL COUNTER	02	%	1-6%
Monocytes	04	%	4.0 - 12.0
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

End of Report

Results are to be corelated clinically

Lab Technician / Technologist

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DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY

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HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	175	lacs/cu.mm	150-400
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	20	mm /HR	0 - 20

Blood Group (ABO Typing)

Blood Group (ABO Typing)	O
RhD factor (Rh Typing)	POSITIVE

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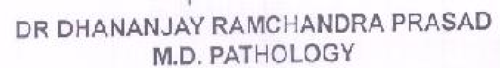

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1c (Glycosalated Haemoglobin)			
	5.5	%	Non- diabetic:<=5.6, Pre-Diabetic 5.7-6.4, Diabetic:>=6.5

1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflam

1.HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2.HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7*A1c-46.7
6. Interference of Haemoglobinopathies in HbA1c estimation.
A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
C. Heterozygous state dete

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Sponsor Name	:		

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE (FASTING)			
Glucose- Fasting	74.0	mg/dl	70 - 120
SUGAR REAGENT GRADE WATER			
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	10	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	0.76	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotomatric	3.62	mg/dL	2.6 - 7.2

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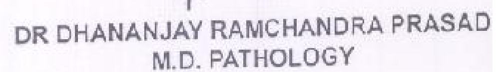

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	136.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	67.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : >=500
Method: Spectrophotomatric HDL Cholesterol	42.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease :>60
Method: Spectrophotomatric LDL Cholesterol	80.60	mg/dl	Optimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very HiOptimal:< 100 Near Optimal :100 – 129 Borderline High : 130-159 High : 160-189 Very High : >=1
Method: Spectrophotomatric VLDL Cholesterol	13.40	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	**3.24**		3.5 - 5
Methode: Spectrophotometric			

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Lab Technician / Technologist

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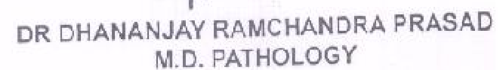

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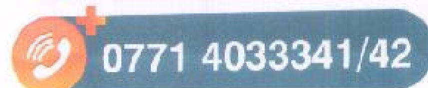

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BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	1.0	mg/dl	0.1-1.2
Bilirubin - Direct Method: Spectrophotometric	0.2	mg/dl	0.05-0.3
Bilirubin (Indirect) Mathod: Calculated	0.80	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	30	U/L	0 - 32
SGPT (ALT) Method: Spectrophotometric	35	U/L	0 - 33
ALKALINE PHOSPHATASE	82	U/L	25-147
Total Proteins Method: Spectrophotometric	6.5	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.0	mg/dl	3.4 - 5.0
Globulin Mathod: Calculated	2.5	g/dl	1.8 - 3.6
A/G Ratio Mathod: Calculated	1.6	%	1.1 - 2.2

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IMMUNO ASSAY

Investigation	Observed Value	Unit	Biological Reference Interval
T3, T4, TSH			
T3 (Total) by CLIA,serum	1.11	ng/mL	0.87-1.78
T4(Total) by CLIA,serum	6.30	mcg/dl	6.09-12.23
TSH (Ultrasensitive) CLIA Serum	**6.33**	mIU/ml	0.34- 6.0

T3 (Total) by CLIA,serum

Clinical Use
- Diagnose and monitor treatment of Hyperthyroidism
Increased Levels: Pregnancy, Graves disease, T3 thyrotoxicosis, TSH dependent Hyperthyroidism, Increased TBG
Decreased Levels: Nonthyroidal illness, Hypothyroidism , Nutritional deficiency, Systemic illness, Decreased TBG

T4(Total) by CLIA,serum

Clinical Use
- Diagnose Hypothyroidism and Hyperthyroidism when overt and / or due to pituitary or hypothalamic disease.
Increased Levels: Hyperthyroidism, Increased TBG, Familial dysalbuminemic hyperthyroxinemia, Increased Transthyretin, Estrogen therapy, Pregnancy
Decreased Levels: Primary hypothyroidism, Pituitary TSH deficiency, Hypothalamic TRH deficiency, Non thyroidal illness, Decreased TBG.

TSH (Ultrasensitive) CLIA Serum

Initial test of thyroid function in patients with suspected thyroid dysfunction
- Assess thyroid status in patients with abnormal total T4 concentrations
- Distinguish Euthyroid hyperthyroxinemias from hypothyroidism.
Increased Levels: Thyroid hormone resistance, Hyperthyroidism
Decreased Levels: Primary hypothyroidism, Secondary hypothyroidism
Clinical Use
- Initial test of thyroid function in patients with suspected thyroid dysfunction

Note: Total T3 & T4 levels measure the hormone which is in the bound form and is not available to most tissues. In addition severe systemic illness which affects the thyroid binding proteins can falsely alter Total T4 levels in the absence of a primary thyroid disease. Hence Free T3 & T4 levels are recommended for accurate assessment of thyroid dysfunction.

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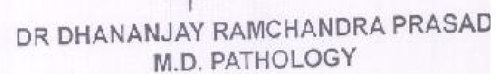

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CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
URINE ROUTINE EXAMINATION			
Physical Examination			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.015		1.001 - 1.030
Reaction (pH)	6.5		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	0-1	/hpf	0 - 2
Pus cells	2 - 4	/hpf	0 - 5
Epithelial Cell	2 - 4	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

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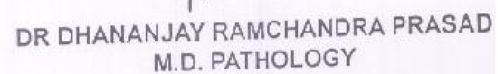

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