Patient Name
 : Mrs.BENDHARI USHA
 Bill Date
 : 26-08-2023 09:10 AM

 Age / Gender
 : 53Y(s) /Female
 Collected Date
 : 26-08-2023 09:15 AM

 Lab Ref No/UHID
 : PS006030/P00000557233
 Received Date
 : 26-08-2023 09:15 AM

 Lab No/Result No
 : 2300104811/206618
 Report Date
 : 26-08-2023 11:27 AM

Referred By Dr. : HOSPITAL CASE Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi

DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation	Result	Units	Biological Reference Interval		
HAEMOGRAM/CBC/CYTO					
W.B.C.Count	:7430	/ul	4000-11000		
Method : Coulter Principle					
Neutrophils	:51.0	%	40-75		
Method : Derived from WBC Histogram					
Lymphocytes	: 40.4	%	20-40		
Monocytes	: 5.9	%	2-10		
Eosinophils	:2.0	%	1.0-6.0		
Basophils	:0.7	%	0.0-1.0		
%Immature Granulocytes	:0.1	%	0.00-0.10		
Absolute Neutrophil Count	:3.8	x10³cells/ul	2-7		
Method : Calculated					
Absolute Lymphocyte Count	:3.0	x10³cells/ul	1 - 3		
Method : Calculated					
Absolute Monocyte Count	:0.4	x10³cells/ul	0.2-1.0		
Method : Calculated	0.0	402 11 / 1	0.00.05		
Absolute Eosinophil Count	: 0.2	x10³cells/ul	0.02-0.5		
Method : Calculated Absolute Basophil Count	:0.1	x10³cells/ul	0.02-0.1		
Method : Calculated	.0.1	X10°Cells/ul	0.02-0.1		
R.B.C Count	: 4.43	million/ul	3.8 - 5.8		
Method : Coulter Principle					
Haemoglobin	:12.8	g/dl	12 - 15.0		
Method : Cyanmethemoglobin Photometry					
Haematocrit	:41.2	%	36-46		
Method : Calculated					
MCV	:93.0	fl	83 - 99		
Method : Coulter Principle					
MCH	: 28.9	pg	27-32		
Method : Calculated	- 24 4	_ / - /	21 5 24 5		
MCHC	: 31.1	g/dl	31.5-34.5		
Method : Calculated RDW	: 13.9	%	11.6-14.0		
Method : Calculated From RBC Histogram	. 13.7	70	11.0 17.0		
Platelet Count	: 274.0	x10³/ul	150 - 450		
Method : Coulter Principle	-	- ,			
MPV	:10.2	fl	7.8-11		
Method : Coulter Principle					

Patient Name : Mrs.BENDHARI USHA

Age / Gender : 53Y(s) /Female

Lab Ref No/UHID : PS006030/P00000557233 Lab No/Result No : 2300104811/206618

: HOSPITAL CASE Referred By Dr.

: 26-08-2023 09:10 AM **Bill Date**

Collected Date : 26-08-2023 09:15 AM : 26-08-2023 09:15 AM **Received Date**

: 26-08-2023 11:27 AM Report Date

Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi

RBC Morphology

: Normocytic normochromic

WBC Morphology

: Within normal range

Platelet

: Adequate

*** End Of The Report ***

Verified By Ruhi S

Dr.Anjana Sanghavi

Consultant Pathologist

IOTE:

* Kindly Corelate clinically & discsuss if necessary.

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* For 'Terms and Conditions of Reporting',kindly visit our website: www.Rubyhall.com

Printed On: 28-08-2023 10:59:14 Printed By: KARAN

 Patient Name
 : Mrs.BENDHARI USHA
 Bill Date
 : 26-08-2023 09:10 AM

 Age / Gender
 : 53Y(s) /Female
 Collected Date
 : 26-08-2023 09:49 PM

 Lab Ref No/UHID
 : PS006030/P00000557233
 Received Date
 : 26-08-2023 09:15 AM

 Lab No/Result No
 : 2300104810-P/206618
 Report Date
 : 26-08-2023 10:00 PM

Referred By Dr. : HOSPITAL CASE Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval		
PPBS					
Glucose (Post Prandial)	:420	mg/dL	60-140		
Method : GOD-POD					

*** End Of The Report ***

Verified By Anand

Dr.POOJA PATHAK
Associate Consultant

NOTE:

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Patient Name : Mrs.BENDHARI USHA

Age / Gender : 53Y(s) /Female

Lab No/Result No : PS006030/P00000557233 **Lab No/Result No** : 2300104810/206618

Referred By Dr. : HOSPITAL CASE

 Bill Date
 : 26-08-2023 09:10 AM

 Collected Date
 : 26-08-2023 09:15 AM

 Received Date
 : 26-08-2023 09:15 AM

Report Date : 26-08-2023 12:18 PM

Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
CREATININE			
Creatinine	:0.6	mg/dL	0.5 - 1.2
Method : Enzymatic			
BUN			
Urea Nitrogen(BUN)	:9.35	mg/dL	6.0 - 20.0
Method : Calculated			
Urea	:20	mg/dL	17.1-49.2
Method : Urease			
CALCIUM			
Calcium	: 9.2	mg/dL	8.6 - 10.2
Method : Arsenazo			
PHOSPHOROUS			
Phosphorus	: 3.7	mg/dL	3.1-4.8
Method : Phospho Molybdate			
URIC ACID			
Uric Acid	: 4.7	mg/dL	2.6 - 6.0
Method : Uricase			
LFT			
Total Bilirubin	: 0.5	mg/dL	0.3 - 1.2
Method : Diazo			
Direct Bilirubin	:0.2	mg/dL	0-0.4
Method : Diazo			
Indirect Bilirubin	:0.3	mg/dL	0.0 - 0.8
Method : Diazo	- 25.0	11.0	.25
Alanine Transaminase (ALT)	:35.0	U/L	<35
Method : Kinetic Aspartate Transaminase (AST)	: 40.0	U/L	10.0 - 40.0
Method : Kinetic	. 10.0	∪, ∟	10.0 10.0
Alkaline Phosphatase	:106.0	U/L	30.0 - 115.0
Method : 4NPP/AMP BUFFER			
Total Protein	: 7.6	g/dl	6.0 - 8.0
Method : Biuret			
Albumin	: 4.2	g/dl	3.5-4.8
Method : BCG			
Globulin	: 3.4	gm/dL	2.3-3.5
Method : Calculated			

Patient Name : Mrs.BENDHARI USHA

Age / Gender : 53Y(s) /Female

Lab Ref No/UHID : PS006030/P00000557233
Lab No/Result No : 2300104810/206618

Referred By Dr. : HOSPITAL CASE

 00104810/206618
 Report Date
 : 26-08-2023 12:33 PM

 DSPITAL CASE
 Specimen
 : SERUM

Processing Loc : RHC Hinjawadi

Bill Date

Collected Date

Received Date

: 26-08-2023 09:10 AM

: 26-08-2023 09:15 AM : 26-08-2023 09:15 AM

A/G Ratio : 1.24

Method : Calculated

T3-T4-TSH -

Tri-Iodothyronine, (Total T3) :1.93 ng/ml 0.97-1.69

Method : Enhanced Chemiluminiscence

Thyroxine (T4), Total :17.7 ug/dl 5.53-11.01

 ${\it Method: Enhanced\ Chemiluminiscence}$

Thyroid Stimulating Hormone :2.054 uIU/mL 0.58-6.88

(Ultra).

Method : Enhanced Chemiluminiscence

1.The TSH levels are subject io diurnal/circadian variation. reaching to peak leve between 2 to 4 am. and at a minimum between 6 to 10 pm. The variation is to the order of 50%, hence the time when sample is collected has influence on the levels of TSH 2.Many substances produced in central nervous system, even in healthy euthyroid individuals, may enhance or suppress TSH production in addition to the feedback effect of thyroid hormone .

3.Furthermore, although TSH levels rise and fall in response to changes in the concentration of Free T4, individuals appear to have their own setpoints and factors such as race and age also contribute to variability in TSH levels Alterations of normal pituitary response are also common in patients with a variety of illnesses which can affect the levels of TSH. 4.Interassay variations are possible on different Immunoassay platforms.

Note. : Suggested clinical correlation and follow

up

TSH - For pregnancy the referance range is as follows -

1st -trimester : 0.6 - 3.4 uIU/mL 2nd trimester : 0.37 - 3.6 uIU/mL 3rd trimester : 0.38 - 4.04 uIU/mL

*** End Of The Report ***

Verified By RaviN

> Dr.Anjana Sanghavi Consultant Pathologist

Anju A sanghavii

NOTE:

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Patient Name : Mrs.BENDHARI USHA : 26-08-2023 09:10 AM **Bill Date** Age / Gender : 53Y(s) /Female **Collected Date** : 26-08-2023 09:15 AM : 26-08-2023 09:15 AM **Received Date** Lab Ref No/UHID : PS006030/P00000557233 Lab No/Result No : 26-08-2023 01:06 PM : 2300104811/206618 Report Date

Referred By Dr. : HOSPITAL CASE Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation	Result	Units	Biological Reference Interval
ESR			

ESR At 1 Hour :28 mm/hr 0-30

Method : Modified Westergren Method

INTERPRETATION:

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to moniter course of disease or response to therapy if initially elevated.

*** End Of The Report ***

Verified By RaviN

> Dr.POOJA PATHAK Associate Consultant

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Patient Name : Mrs.BENDHARI USHA : 26-08-2023 09:10 AM **Bill Date** Age / Gender : 53Y(s) /Female Collected Date : 26-08-2023 09:15 AM : 26-08-2023 09:15 AM Lab Ref No/UHID **Received Date** : PS006030/P00000557233 Lab No/Result No : 26-08-2023 01:06 PM : 2300104810/206618 Report Date

Referred By Dr. : HOSPITAL CASE Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Result	Units	Biological Reference Interval
K)		
: 140.0	mmol/L	136.0 - 145.0
: 4.5	mmol/L	3.5 - 5.1
:103	mmol/L	98.0 - 107.0
	K) :140.0 :4.5	K) :140.0 mmol/L :4.5 mmol/L

*** End Of The Report ***

Verified By RaviN

Amu A sanghavii

Dr.Anjana Sanghavi Consultant Pathologist

NOTE:

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* For 'Terms and Conditions of Reporting',kindly visit our website : www.Rubyhall.com

Patient Name : Mrs.BENDHARI USHA : 26-08-2023 09:10 AM **Bill Date** Age / Gender : 53Y(s) /Female **Collected Date** : 26-08-2023 02:52 PM : 26-08-2023 09:15 AM **Received Date** Lab Ref No/UHID : PS006030/P00000557233 Lab No/Result No : 26-08-2023 03:51 PM : 2300105706/206618 **Report Date**

Referred By Dr. : HOSPITAL CASE Specimen : URINE

Processing Loc : RHC Hinjawadi

Absent



DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY

Investigation	Result	Units	Biological Reference Interval
URINE ROUTINE			
PHYSICAL EXAMINATION			
Colour	: Pale Yellow		
Appearance	: Clear		
CHEMICAL TEST			
Ph	: 5.5		5.0-7.0
Specific Gravity	: 1.030		1.015-1.030
Albumin	: Absent		Abset
Urine Sugar	:1+	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments/ Bilirubin	: Absent		Absent
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent

MICROSCOPIC TEST :2-3 /hpf 0 - 5 Pus Cells. /hpf 0 - 2 Red Blood Cells. : Absent Epithelial Cells. :2-3 /hpf 0-5 Bacteria : Absent /hpf Absent : Absent Absent Cast Yeast Cells : Absent Absent Absent : Absent Crystals Others : Absent Absent

: Absent

*** End Of The Report ***

Verified By Shrikant.A

Leucocytes Esterase

Dr.POOJA PATHAK Associate Consultant

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Patient Name : Mrs.BENDHARI USHA : 26-08-2023 09:10 AM **Bill Date** Age / Gender : 53Y(s) /Female Collected Date : 26-08-2023 09:15 AM : 26-08-2023 09:15 AM Lab Ref No/UHID **Received Date** : PS006030/P00000557233 Lab No/Result No : 26-08-2023 12:21 PM : 2300104810/206618 Report Date

: HOSPITAL CASE **Specimen** : SERUM Referred By Dr.

> **Processing Loc** : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
LIPID PROFILE			
Cholesterol	: 175.0	mg/dL	130.0 - 220.0
Method : Enzymatic			
Triglycerides	:178	mg/dL	35.0 - 180.0
Method : Enzymatic			
HDL Cholesterol	: 42	mg/dL	35-65
Method : Enzymatic			
LDL Cholesterol	: 97.4	mg/dL	10.0 - 130.0
Method : Calculated			
VLDL Cholesterol	: 35.6	mg/dL	5.0-36.0
Method : Calculated			
Cholestrol/HDL Ratio	: 4.17		2.0-6.2
Method : Calculated			

*** End Of The Report ***

Verified By RaviN

Dr.Anjana Sanghavi **Consultant Pathologist**

NOTE:

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Printed On: 28-08-2023 10:59:14 Printed By: KARAN

Patient Name : Mrs.BENDHARI USHA : 26-08-2023 09:10 AM **Bill Date** Age / Gender : 53Y(s) /Female Collected Date : 26-08-2023 09:15 AM **Lab Ref No/UHID** : PS006030/P00000557233 : 26-08-2023 09:15 AM **Received Date** Lab No/Result No : 26-08-2023 02:02 PM : 2300104811/206618 Report Date

: HOSPITAL CASE **Specimen** : EDTA WHOLE BLC Referred By Dr.

> **Processing Loc** : RHC Hinjawadi

DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK Units

BLOOD GROUP

Investigation

Blood Group : AB RH POSITIVE

Result

*** End Of The Report ***

Verified By Ardeore

> **Dr.POOJA PATHAK Associate Consultant**

Biological Reference Interval

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Printed On: 28-08-2023 10:59:14 Printed By: KARAN

 Patient Name
 : Mrs.BENDHARI USHA
 Bill Date
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 Age / Gender
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 Collected Date
 : 26-08-2023 09:15 AM

 Lab Ref No/UHID
 : PS006030/P00000557233
 Received Date
 : 26-08-2023 09:15 AM

 Lab No/Result No
 : 2300104812-G/206618
 Report Date
 : 26-08-2023 01:51 PM

Referred By Dr. : HOSPITAL CASE Specimen : WHOLE BLOOD

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation Result Units Biological Reference Interval

GLYCOCYLATED HB% (HbAIC)

Glycosylated Haemoglobin :12.1 % 4-6.5

(HbA1C)

 $Method: Turbidometric\ Inhibition$

Immunoassay

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

Therapeutic Target : <7.0 %

REFERENCE: ADA 2015 GUIDELINES

*** End Of The Report ***

Verified By

RaviN

Dr.POOJA PATHAK
Associate Consultant

NOTE:

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2DECHO&DOPPLER REPORT

NAME: MRS. BENDHARI USHA AGE: 53Yrs/F DATE: 26 /08 /2023

MITRAL VALVE: has thin leaflets with normal subvalvar motion.

No mitral regurgitation.

AORTIC VALVE: has three thin leaflets with normal opening

No aortic regurgitation.

PULMONARY VALVE; NORMAL,

LEFT VENTRICLE: Mild concentric LVH, No RWMA at rest. Normal LV systolic

function. EF - 60%.

LEFT ATRIUM: is normal.

RIGHT ATRIUM & RIGHT VENTRICLE: normal in size.

TRICUSPID VALVE & PULMONARY VALVES: normal.

Trivial TR, No PH.

No pericardial effusion.

M- MODE:

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
26mm	35mm	47mm	24mm	11mm	11mm	60%
				3.4%		

IMP: Mild concentric LVH

Normal LV Systolic function. EF-60%.

Grade I diastolic dysfunction

No RWMA at rest

Normal Valves and Chambers

IAS & IVS Intact

No clot / vegetation / thrombus / pericardial effusion.

Bu

DR. YATIN VISAVE MBBS,DMRD(RADIOLOGY)



Name:

BENDHARI USHA.

Age:

053 Years

Gender:

F

P00000557233

PID: OPD: Exam Date :

26-Aug-2023 10:10

Accession:

107540124454

Exam:

CHEST X RAY

Physician:

HOSPITAL CASE^^^^

Health Check

Radiograph Chest PA View:

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

Impression:

No significant abnormality noted.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD Regd. No. 090812

Date: 28-Aug-2023 10:58:11



Name:

BENDHARI USHA.

Age:

053 Years

Gender:

P00000557233

PID: OPD: Exam Date:

26-Aug-2023 09:52

Accession:

107588173108

Exam:

ABDOMEN AND PELVIS

Physician:

HOSPITAL CASE^^^

ULTRASOUND OF ABDOMEN AND PELVIS

Liver is normal in size and shows increased echogenecity suggestive of grade I fatty changes. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen. Pancreas appears normal in size and echotexture. No focal lesion is seen. Spleen appears normal in size and echotexture. No focal lesion is seen.

Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Uterus and both ovaries appears menopausal atrophic status. No adnexal pathology is seen.

Visualised bowel loops are non-dilated and show normal peristalsis. There is no ascites or significant lymphadenopathy seen.

IMPRESSION:

Grade I fatty liver.

No other significant abnormality noted.

Suggest: Clinical correlation.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD

Regd. No. 090812

Date: 28-Aug-2023 11:00:53



Name:

BENDHARI USHA.

Age: Gender:

053Y

PID:

P00000557233

OPD:

Exam Date :

26-Aug-2023 17:25

Accession:

107590173321

Exam:

ULTRASOUND OF BREAST

Physician:

HOSPITAL CASE^^^^

Ultrasound of both breasts has been performed on a duplex scanner.

Both breasts show normal fibro-glandular breast tissue of normal echo pattern.

No evidence of any focal cystic or solid mass lesion noted.

Both axillary tails appear normal.

Sub-areolar area does not show any abnormal ductal dilatation.

Axilla appears clear. No evidence of axillary lymphadenopathyis seen.

IMPRESSION:

Normal ultrasound of both breasts.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD Regd. No. 090812

Date: 28-Aug-2023 11:08:14



Mrs. Usha Bendare 531 F.

26/8/23

venous oum thrombon song.

Diaming (0)

readache
_ Intermittent.
p.12- 98%.

BP-136/92.

SIE

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

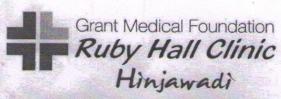


53 ym. old 9 P4 L4 Az For Roudine-1AP-test M14 -> Menopawal: 4 you. 0/14 - 19464 All 4 FTM Medity Kyo DMIHTN. SXIH- Nil FIHT Nil 0/E- 1 P-85/min B-P-128/75 Afelosile

PlAb-s Soft

Pls -> CX IF

Adv Fluc PAP-report



Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

OPHTHALMOLOGY

NAME:

Ref: PS006030- Reg: OPS0000 53.0.0/F - NH - 26/08/2023 P00000557233 -

AGE:

K	L
_unaided	6//>
1) Vision	C ₁
Junaided	
2) Near Vision c glasses 6	N6
3) Binocular Vision Norce	In the second second
4) Colour Vision Nos C	no!
5) Tension Digt Nor	
6) Anterior Segment	- WY
7) Pupils RCR	RCR
8) Lens Cloudy:	Closed.
9) Media & Fundus	
10) Remarks	
Cloudy	1 - Md
Rel to High	andi la xation chacken
	awali so setim chocky
Date: (15)	(Signature)
Date: BM: 15	yeri.
Reading G	

