

28/10/2023

Ht - 161 cm
 Wt - 78 kg
 BMI - 30.1
 obese class 1

ms. Sujata Jadhav

88/F.

HR - 96/min.

Kidney HTN on Rx
 T. Betaloc 25 BD

B.P. 180/110

family H/O. Both parents
 supraventricular
 only HTN.
 menstrual cycle - normal.

ECG - T ↓ TTT
 Lvt. cells.

Vit B-12 & D3 ↓
 Post Lunch Sugar is on border line
 consult physician.

Adv

- Blood invest^m
- T3T4TSH
- CXR
- Echo

Adv

salt restricted
 diet.

exercise.

F/U

please monitor
 BP
 consult physician.

Agree reports



Diagnosis Information:
 Sinus Rhythm
 Prolonged P-wave

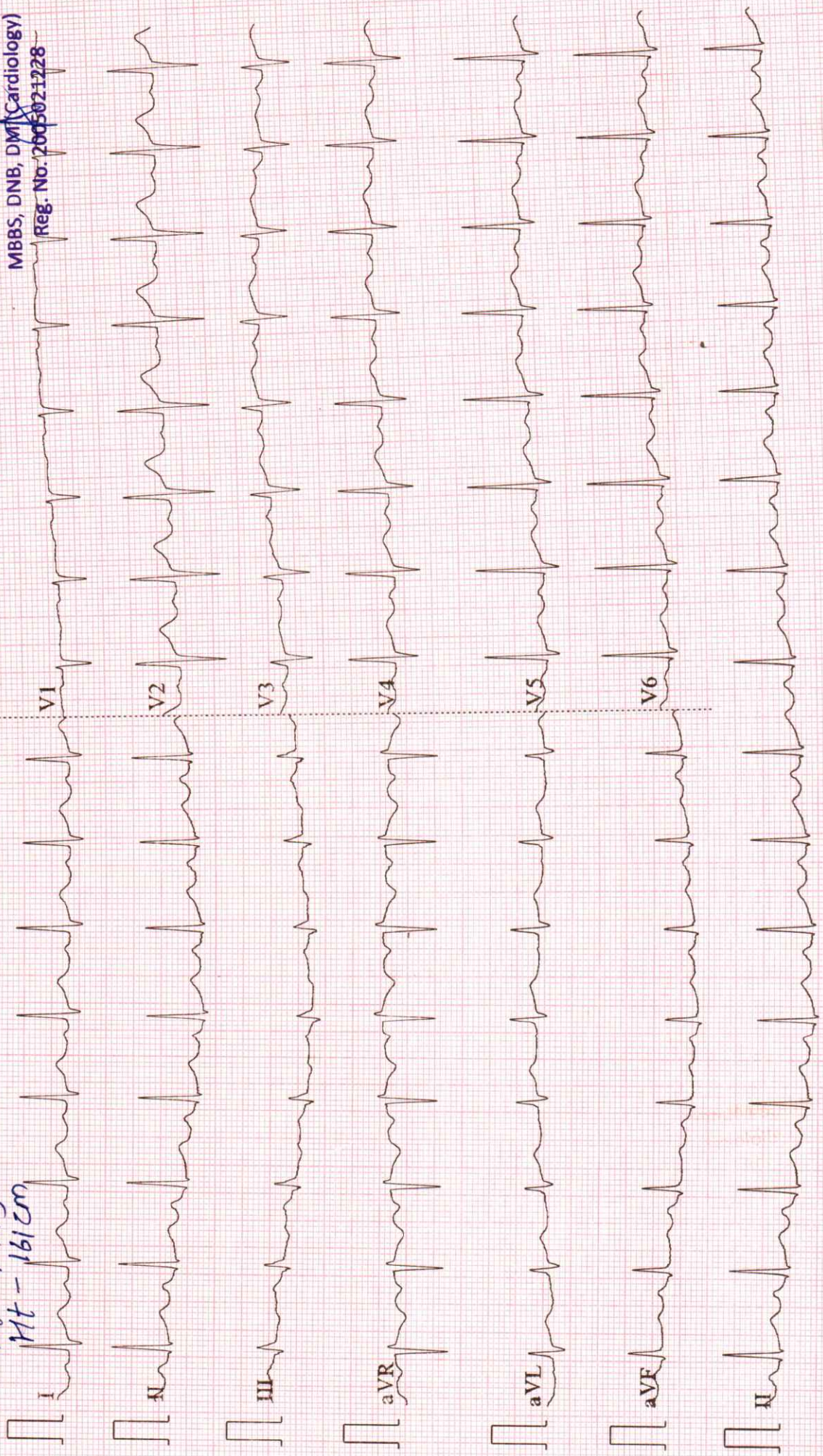
NSR
No Significant ST-T changes
Adv - No active intervention required right now

HR : 96 bpm
P : 121 ms
PR : 183 ms
QRS : 95 ms
QT/QTcBz : 366/464 ms
PQRST : 52/40/26 °
RV5/SV1 : 1.147/0.551 mV

Req. No. : 389/F
BP - 180/110 mmHg
SpO2 - 99%
PR - 87.1m
Wt - 77kg
Ht - 161cm

Report Confirmed by:

Dr. Anant Ramkisantrao Munde
 MBBS, DNB, DM (Cardiology)
 Reg. No. 2005021228





ECHOCARDIOGRAM

NAME	MRS. RUJUTA KARMARKAR
AGE/SEX	38 YRS/F
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DOCTOR	DR. ANANT MUNDE, DNB, DM (CARDIOLOGY)
DATE OF EXAMINATION	28/10/2023

2D/M-MODE ECHOCARDIOGRAPHY

VALVES: MITRAL VALVE: <ul style="list-style-type: none"> • AML: Normal • PML: Normal • Sub-valvular deformity: Absent AORTIC VALVE: Normal <ul style="list-style-type: none"> • No. of cusps: 3 PULMONARY VALVE: Normal TRICUSPID VALVE: Normal	CHAMBERS: LEFT ATRIUM: Normal LEFT VENTRICLE: Mild concentric LV hypertrophy <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal RIGHT ATRIUM: Normal RIGHT VENTRICLE: Normal <ul style="list-style-type: none"> • RWMA: No • Contraction: Normal
GREAT VESSELS: <ul style="list-style-type: none"> • AORTA: Normal • PULMONARY ARTERY: Normal 	SEPTAE: <ul style="list-style-type: none"> • IAS: Intact • IVS: Intact
CORONARIES: Proximal coronaries normal CORONARY SINUS: Normal	VENACAVAE: <ul style="list-style-type: none"> • SVC: Normal • IVC: Normal and collapsing >20% with respiration
PULMONARY VEINS: Normal	PERICARDIUM: Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	36 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	47.7 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	31.0 mm	RVEF	%
Ascending aorta	mm	IVSd	10.3 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	10.3 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	64 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	15.1 mm





Name-Mrs. Rujuta Karmarkar	Age - 38 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date- 28/10/2023

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.


Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

- No significant abnormality seen.

Adv.: Clinical and lab correlation.


DR. MOHAMMAD SOHAIB
MBBS; DMRE
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.





Name - Mrs. Rujuta Karmarkar	Age - 38 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date - 28/10/2023

USG ABDOMEN & PELVIS

Clinical details:- Routine

The Liver is normal in size and shows raised echogenicity. There is no obvious abnormal focal lesion seen. There is no IHBR dilatation seen in both the lobes of the liver.

The CBD and the Portal vein appear normal.

The Gall bladder is well distended & appears normal. Few gall bladder polyps (3-4 in no) are seen largest measuring 5-6 mm. No calculi or filling defects are seen. No evidence of Pericholecystic collection. The wall thickness is normal.

Right Kidney measures 8.4 x 3.7 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

Left Kidney measures 9.7 x 4.6 cm & appears normal in shape and position. There is no evidence of hydronephrosis or any calculi seen. Cortico-medullary differentiation is maintained.

The Pancreas is normal in size & shows homogenous echopattern. It shows no focal lesion.

The Spleen is normal in size (9.6 cm) with homogenous echotexture.

The urinary bladder is adequately distended and appears normal. There is no evidence of any obvious calculi or any mass lesion seen. Both Uretero-vesical junctions appear clear. No abnormal intraluminal lesion noted.

The Uterus is anteverted & measures approximately 6.4 x 3.7 x 5.0 cms with normal homogenous echotexture. The uterine outline is smooth and normal. No abnormal focal lesion noted. Endometrial thickness is normal

Both ovaries are normal in size and echotexture.

The right ovary measures 3.6 x 2.6 cms.

The left ovary measures 2.6 x 2.4 cms.

Bilateral adnexae appear normal. No focal lesion noted.

No free fluid or obvious lymphadenopathy is seen in abdomen and pelvis.

IMPRESSION:

- Fatty liver
- Gall bladder polyps.

Adv.: Clinical and lab correlation.


DR. MOHAMMAD SOHAIB

MBBS; DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis. Second opinion is always advisable.



OPHTHAL CHECK UP SCREENING

NAME OF EMPLOYEE**RUJUTA SOMNATH KARMARKAR****AGE****38****DATE -****28.10.2023****Spects : Without Glasses**

	RT Eye	Lt Eye
NEAR	N/6	N/6
DISTANT	6/6	6/6
Color Blind Test	NORMAL	

**SIDDHIVINAYAK HOSPITALS****HELPLINE****022 - 2588 3531**S-1, Vedant Complex,
Vartak Nagar, Thane (W) 400 606www.siddhivinayakhospitals.org

Name	: Mrs. RUJUTA KARMARKAR	Collected On	: 28/10/2023 9:46 am
Lab ID.	: 172617	Received On	: 28/10/2023 9:56 am
Age/Sex	: 38 Years / Female	Reported On	: 28/10/2023 8:27 pm
Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	Report Status	: INTERIM



***LIPID PROFILE**

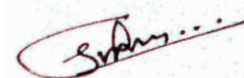
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)	138	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	45.2	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease : >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	154.1	mg/dL	Desirable level : <161 mg/dl. High : >= 161 - 199 mg/dl. Borderline High : 200 - 499 mg/dl. Very high : >499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	31	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	62	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high : >= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	1.37		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	3.05		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
Sayyed_salman



DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist



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COMPLETE BLOOD COUNT

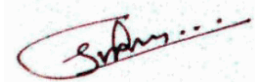
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	12.4	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	37.9	%	36 - 46
RBC COUNT	4.55	x10 ⁶ /uL	4.5 - 5.5
MCV	83	fl	80 - 96
MCH	27.3	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	15.0	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	6870	/cumm	4000 - 11000
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	62	%	40 - 80
LYMPHOCYTES	32	%	20 - 40
EOSINOPHILS	03	%	0 - 6
MONOCYTES	03	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	361000	/ cumm	150000 - 450000
MPV	8.5	fl	6.5 - 11.5
PDW	15.7	%	9.0 - 17.0
PCT	0.310	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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HEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	15	mm/1hr.	0 - 20

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
Priyanka_Deshmukh

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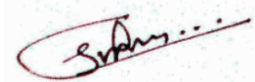
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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>URINE ROUTINE EXAMINATION</u>			
<u>PHYSICAL EXAMINATION</u>			
VOLUME	25ml		
COLOUR	Pale Yellow	Text	Pale Yellow
APPEARANCE	Clear		Clear
<u>CHEMICAL EXAMINATION</u>			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.010		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Absent		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Normal		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent	Text	Absent
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		Negative
<u>MICROSCOPIC EXAMINATION</u>			
RED BLOOD CELLS	Absent	Text	Absent
PUS CELLS	1-2	/ HPF	0 - 5
EPITHELIAL	0-2	/ HPF	0 - 5
CASTS	Absent		

Checked By
 Priyanka_Deshmukh



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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent

REMARK Result relates to sample tested. Kindly correlate with clinical findings.

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----- END OF REPORT -----

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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>TFT (THYROID FUNCTION TEST)</u>			
SPACE		Space	-
SPECIMEN	Serum		
T3	123.6	ng/dl	84.63 - 201.8
T4	7.72	µg/dl	5.13 - 14.06
TSH	1.92	µIU/ml	0.270 - 4.20
T3 (Triiodo Thyronine hormone)	T4 (Thyroxine)	TSH(Thyroid stimulating hormone)	
AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 yrs	105-269	1-4 months	7.2-14.4
6-10 yrs	94-241	4 -12 months	7.8-16.5
11-15 yrs	82-213	1-5 yrs	7.3-15.0
0.1-2.5			
15-20 yrs	80-210	5-10 yrs	6.4-13.3
0.20-3.0			
		11-15 yrs	5.6-11.7
0.30-3.0			

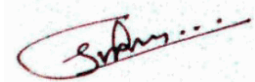
INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>BLOOD GROUP</u>			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'A'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)			
Result relates to sample tested, Kindly correlate with clinical findings.			
----- END OF REPORT -----			

Checked By
SHAISTA Q

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***BIOCHEMISTRY**

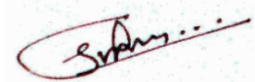
TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	15.8	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	7.38	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.65	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	5.1	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	139.4	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	3.99	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	101.0	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	2.9	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	8.8	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	6.43	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	3.79	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.64	g/dl	1.9 - 3.5
A/G RATIO calculated	1.44		0 - 2

NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
Sayed_salman



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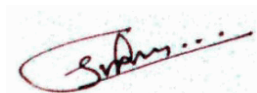
LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.73	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	0.37	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.36	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	17.7	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	10.1	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	54.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	6.43	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	3.79	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.64	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.44		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

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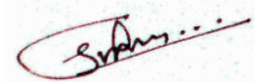
BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>GLYCOCELATED HEMOGLOBIN (HBA1C)</u>			
HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.4	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	108.3	mg/dL	65.1 - 136.3
METHOD Particle Enhanced Immunoturbidimetry			
HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.			
<u>BLOOD GLUCOSE FASTING & PP</u>			
BLOOD GLUCOSE FASTING	104.2	mg/dL	70 - 110
BLOOD GLUCOSE PP	140.1	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting specimen. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

Checked By
 Priyanka_Deshmukh



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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : ≥ 126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : ≥ 200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose ≥ 126 mg/dl
- Classical symptoms + Random plasma glucose ≥ 200 mg/dl
- Plasma glucose ≥ 200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin $> 6.5\%$

***Any positive criteria should be tested on subsequent day with same or other criteria.

GAMMA GT 25.0 U/L 5 - 55

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
SHAISTA Q

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Consultant Histocytopathologist



Name : Mrs. RUJUTA KARMARKAR
Lab ID. : 172619
Age/Sex : 38 Years / Female
Ref By : SIDDHIVINAYAK HOSPITAL

Collected On : 28/10/2023 10:03 am
Received On : 28/10/2023 10:13 am
Reported On : 28/10/2023 3:32 pm
Report Status : FINAL



IMMUNOASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>VITAMIN B12, SERUM</u>			
SPECIMEN	Serum		
VITAMIN B12	125.8	pg/ml	211 - 911

INTERPRETATION -

Decreased vitamin B12: Megaloblastic anemia, Folate deficiency, Neurological diseases, Gastric and small bowel diseases, malabsorption, strict vegetarian, Pancreatic insufficiency, Parasite-Fish tape worm. Alcoholism, Drug like PSA, anticonvulsants, metformin, Increased Vitamin B12: Acute hepatitis, Iatrogenic, Myeloproliferative diseases, Polycythemia, Oral contraceptives etc. Blood collection after vitamin B12 injections or oral supplements containing vitamin B12 may interfere with results.

ASSOCIATED TEST: SERUM FOLATE, HOMOCYSTEINE, HOLOTRANSCOBALAMIN/ACTIVE B12, INTRINSIC FACTOR.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By
SHAISTA Q

DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist



Name : Mrs. RUJUTA KARMAKAR
Lab ID. : 172619
Age/Sex : 38 Years / Female
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IMMUNOASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
25- HYDROXY VITAMIN D			
SPECIMEN	Serum		
25-HYDROXY, VITAMIN D	23.49	ng/ml	30 - 100

INTERPRETATION -

Cholicalciferol (vit D3) is synthesized in the skin from 7 dehydrocholecalciferol in response to sunlight, some part also comes from diet and supplements. Ergocalciferol (VitD2) comes essentially from diet and supplements

Both Cholicalciferol and Ergocalciferol are converted in the liver to 25 OH Vitamin D.

25 OH Vitamin D is considered best indicator of vitamin D nutritional status.

Deficiency : Secondary hyperparathyroidism, diseases related to impaired bone metabolism like rickets, osteoporosis, osteomalacia, and associated with increasing risk of many chronic illness and cardiovascular problems. Kindly correlate clinically.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

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