MEERUT HISTO-PATHOLOGY CENTRE MEERUT

Dr.Medha Jain

302 Western Kutcheri

M.D (Path)

Estable oboundates

(Opp Tyagi Hostel)

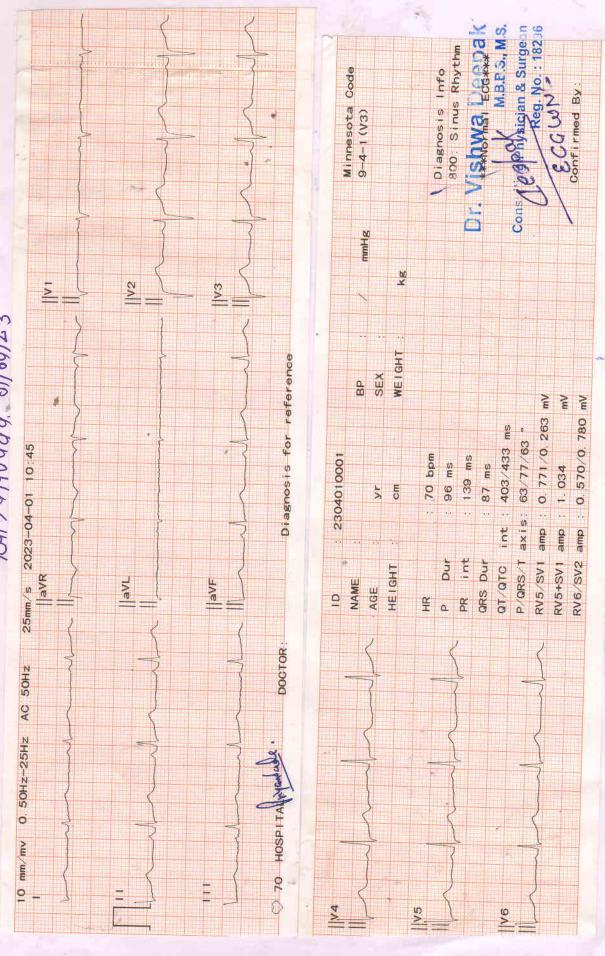
PATHOLOGIST

Ph-0121-4009679,9927286318

	PHYSICAL ASSESSMEST FORMAT		
Date of Examination	01/04/23. R41° Ya MVada.		
NAME			
DOB			
HEIGHT (cm)	161	Gender FEM 9/8 WEIGHT (Kg) 55	
CHEST (cm)	84.	ABDOMEN (cm) 92	
B.P	120/74.		
Present Ailments (if any)	Nic		
Details of Past ailments any surgery or hospitalization or Blood transfusion	Nic		
Details On Medications (if any)	Nic		
HABITS (Tobacco /Alcohol ect.)	Nig		
BMI	21.2	Dr. Vishwa Deelaal	
^ ^		108069	

Consulting Physician & Surgeon Boctors Sign: 18296

PHIOYOHUADO. 01/04/23





Quality Management Services ISO-9001:2015 Certified Lab

Laboratory Test-Report

MEERUT HISTOPATHOLOGY CENTRE

NAME

: Mrs. Priya Mvada

REFERRED BY **SAMPLE**

: Dr.BOB : Blood, urine

DATE : 01/04/2023

AGE

SEX : Female

TEST NAME RESULTS

UNITS

REF.-RANGE

HAEMATOLOGY

	*	
12.3	GM%	10 - 16
6.700 cells		4,500-11,000
7, 50 55	/ Cu mm	7,300-11,000
63	0/2	50-70
		25-40
		1-4
		3-8
		0-1
		35 - 54
	fL	76-98
	pg	27 - 32
32.5	g/dl	31-35
		0-20
12	mm in 1st Hr	
	12.3 6,700 cells 63 28 04 05 00 4.8 230 37.8 78.7 25.6 32.5	6,700 cells /Cu mm 63 %. 28 %. 04 %. 05 %. 00 %. 4.8 million/cu mm 230 thousand/cum 37.8 %. 78.7 fL 25.6 pg g/dl

BLOOD GROUP:

Major Blood Group: Rh Blood Group:

Positive (Comment)

Forward grouping by SLIDE METHOD.

All NEGATIVE blood groups to be confirmed at an authorized blood - bank.

BIOCHEMISTRY

BLOOD SUGAR (FASTING)

89.3

mg/dL

70 - 100

BLOOD SUGAR PP(2 Hrs after Meal)

105.4

mg/dl

70-140

--{End of Report}--

M.B.B.S., M.D. Path) Consultant Pathologist Reg. No. - G-33290 Gujrat CMO. Reg. No. - MRT 869 Meerut

DR. KUMKUM DEEPAK MEMORIAL CENTRE, 302, W.K. ROAD, MEERUT

CALL: 0121-4009679, 9639688806, 09927286318, 7906584952, 9639251854 24 Hour Service, Home Visit

All Investigations have their limitation which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the specimen received by the laboratory. Isolated laboratory investigation never confirm the final diagnosis of the disease. They only help in arriving at a diagnosis in conjunction with clinical presentation and other related investigation. NOT FOR MEDICO LEGAL PURPOSE



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Laboratory Test-Report

MEERUT HISTOPATHOLOGY CENTRE

NAME : Mrs. Priya Mvada

REFERRED BY : Dr.BOB

SAMPLE : Blood,urine

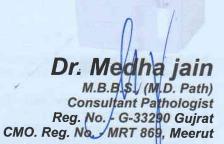
DATE : 01/04/2023

\GE

: Femal

		SEX : Female	
TEST NAME	RESULTS	UNITS REFRANGE	
LIPID PROFILE :	BIOCHEMISTRY		
SERUM TRIGYCERIDE: SERUM CHOLESTEROL: HDL CHOLESTEROL: VLDL CHOLESTEROL: LDL CHOLESTEROL:	128.6 168.5 55.4 25.7 87.4	mg/dl 50-160 mg/dL. 130 - 200 mg/dL. 30 - 70 mg/dL. 25 - 40	
CHOL/HDL CHOLESTROL RATIO	3.0	mg/dL. 85 - 150 Low Risk 0.0 - 3.5	
LDL/HDL RATIO	1.6	Mod.Risk 3.5 - 5.0 High Risk > 5.0 Normal Range 2.5 - 3.0	
BLOOD UREA NITROGEN : SERUM CREATININE :	19.6 0.9	High Risk > 3.0 mg/dL. $5 - 25$ mg/dL. $0.8 - 1.5$	
SERUM URIC ACID:	5.1	mg/dL. 2.5 - 7.0	

--{End of Report}--



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NAME : Mrs. Priya Mvada

REFERRED BY : Dr.BOB

DATE : 01/04/2023

AGE :

SAMPLE : Blood,urine		SEX	: Female	
TEST NAME	RESULTS	UNITS	REFRANGE	
	BIOCHEMISTRY			
LIVER FUNCTION TEST SERUM BILIRUBIN:	* C	*		
TOTAL:	0.88	mg/dL.	0.2 - 1.0	
DIRECT:	0.27	mg/dL.	0.1 - 0.3	
INDIRECT:	0.61	mg/dL.	0.2 - 0.7	
S.G.P.T. :	26.2	U/L	5 - 45	
S.G.O.T. :	34.5	U/L	5 - 45 5 - 45	- 19
Sicioniti	31.3	0/L	5 - 45	
G.G.T.P. :	22.1	U/L	5.0-35.0 (37 C)	
SERUM ALK, PHOSPHATASE:	102.6	IU/L.	65-160	
SERUM PROTEINS:		20/ 2.	03 100	
TOTAL PROTEINS:	6.9	Gm/dL.	5.5 - 8.5	
ALBUMIN:	4.1	Gm/dL.	3.5 - 5.5	
GLOBULIN:	2.8	Gm/dL.	2.3 - 3.5	
A : G RATIO:	1.4		2.0	
<i>y</i>				
GLYCOSYLATED HAEMOGLOBIN A1c	5.7	0/	4.2 6.4	
GETCOSTENTED TIALMOGEODIN ATC	Clinical significance :- The HbA1c	% concentration in blood is di	4.3 - 6.4	
	proportional to the mean concer previous 6-8 wks, equivalent to	ntration of glucose prevailing	in the	
	Normal Range :-	*		
	Non-Diabetics - 4.3 - 6.4%	2		
	Goal 6.5 - 7.5% Good control 7.5 - 8.5%			
	Poor control > 8.5%			
	{End of Report}			

Dr. Medha jain

M.B.B.S. (M.D. Path)

Consultant Pathologist

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CMO. Reg. No. - MRT 869, Meerut

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NAME

: Mrs. Priya Mvada

REFERRED BY

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DATE : 01/04/2023

AGE SEX

: Female

TEST NAME

SAMPLE

RESULTS

UNITS

REF.-RANGE

HORMONE

THYROID PROFILE:

Triiodothyronine (T3):

Thyroxine (T4):

THYROID STIMULATING HORMONE(TSH)

0.98

102.3

2.37

nmol/litre. nmol/litre.

0.95 - 2.5

micro Iu/ml

60 - 120 0.20 - 5.0

Low Levels of T3 & T4 are seen in

Non-Thyroidal illness

High Levels of T3 & T4 are found in

- Primary, Secondary & Tertiary Hypothyroidism and some

- Grave's Disease, Hyperthyroidism, Thyroid hormone resistance

and T3 Thyrotoxicosis

TSH Levels are raised in

- Primary Hypothyroidism

ml

TSH Levels are Low in

- Hyperthyroidism, Secondary Hypothyroidism.

CLINICAL PATHOLOGY

URINE EXAMINATION REPORT:

PHYSICAL EXAMINATION:

Volume:

Colour:

Appearance:

Odour:

Sediments:

Sp. Gravity:

BIOCHEMICAL EXAMINATION:

Sugar:

Albumin:

Reaction:

MICROSCOPIC EXAMINATION:

Red Blood Cells:

Pus Cells:

Epithelial Cells:

20

Pale Yellow

Clear

Aromatic

Nil

1010

Nil

Nil

Acidic

Nil

1-2 3-5

/H.P.F.

/H.P.F.

/H.P.F.

--{End of Report}--

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UPMCI 35779 ◆CMO Reg. No. 1921◆ MRT/PNDT/GC/2006/206

Dr. Tanuj Garg

M.D. (Radiodiagnosis)

ADDRESS : INDIRA CHOWK, HAPUR ROAD, MEERUT

TEL.: 0121-4050050 MOB.: 9837072571

Patient's Name	Mrs. PRIYAMVADA	Age /Sex	33 Y/F
Referred By	*	Dated	01 APR 2023

WHOLE ABDOMEN SONOGRAPHY

<u>LIVER</u> is normal in size. No focal lesion is seen. Intrahepatic biliary radicles are normal. Liver margins are normal.

GALL BLADDER is well filled. Wall thickness is normal. No pericholecystic fluid is seen.

Multiple calculi of 6-8 mm are seen in lumen.

<u>CBD</u> is appears to be normal in caliber. No calculus is seen. <u>PORTAL VEIN</u> appears to be normal in course and caliber.

PANCREAS is normal in shape, size and echotexture. MPD is normal.

SPLEEN is normal in shape, size and echotexture.

RIGHT KIDNEY is normal in size, shape and position and echotexture. Pelvicalyceal system is normal. No evidence of hydronephrosis or calculus is seen. Cortico medullary differentiation is maintained. Renal cortical thickness is normal. Renal margins are normal. LEFT KIDNEY is normal in size, shape and position and echotexture. Pelvicalyceal system is normal. No evidence of hydronephrosis or calculus is seen. Cortico medullary differentiation is maintained. Renal cortical thickness is normal. Renal margins are normal

<u>UTERUS</u> is normal in size. Measuring 72x43x40 mm. Myometrial echotexture is normal. Endometrium is 4.9 mm.

Right ovary is normal in shape and size and echotexture.

Left ovary is normal in shape and size and echotexture.

<u>URINARY BLADDER</u> is well filled, appears to be normal. No calculus is seen in the lumen. No significant residual urine volume is seen.

No evidence of retroperitoneal lymphadenopathy, bilateral pleural effusion or ascites is seen.

IMPRESSION:

GALL STONES

DR. TANUJ GARG, MD CONSULTANT RADIOLOGIST



Dr. Tanuj Garg

M.D. (Radiodiagnosis)

ADDRESS: INDIRA CHOWK, HAPUR ROAD, MEERUT. TEL.: 0121-4050050 MOB.: 9837072571

Patient's Name	Mrs. PRIYAMVADA	Age /Sex	33 Y/F
Referred By	4)	Dated	01 APR 2023

X- RAY CHEST PÅ VIEW

Soft tissue and bony thorax is normal.

Trachea is normal.

Both domes of diaphragm are normal.

Both C. P. angles are normal.

Both hila are normal.

Vascular marking are normal.

C.T. ratio is normal.

<u>IMPRESSION</u>

NO OBVIOUS ABNORMALITY DETECTED

