

## SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
<b>General Tests</b>	<b>General Tests</b>
✓ X Ray Chest	X Ray Chest
✓ ECG	✓ ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation



भारत सरकार  
Government of India



Priti Kishore  
Date of Birth/DOB: 01/03/1984  
Female/ FEMALE



6357 3002 4168

मेरा आधार, मेरी पहचान

Declaration Form

Name		MRS PRITI KISHORE		
Date of Birth		Gender	FEMALE	
Marital status	Single / Married <input checked="" type="checkbox"/>	Contact No	7908045346	
1. Are you suffering from any active disease or any abnormal health condition, infectious/communicable disease, Heart disease, Diabetes, High blood pressure, Cancer, any other chronic disease/disorder, genetic disease or disorder ?				
NO				
2. In past did you had any major illness /disease, abnormal health condition,surgery,accident,fracture ,long term treatment/medication/hospitalization for any illness, Tuberculosis, Cancer, Cerebral vascular disease/disorder?				
NIL SPECIFIC				
3. Do you have any known allergic condition like-Drug allergy, Chronic skin allergy, respiratory allergy (e.g.-Asthma etc), Allergy with any chemicals, Dust, pollens etc.				
NO				
4. Do you have any physical disability/deficiency/deformity in body? (by birth or due to any disease/accidental injury)				
NO				
5. Do you have any mental health issues at present- like Anxiety, Depression, Psychosis, Sezophrenia etc.? Have you been ever treated for any mental illness/disorder, nervous disorder and other conditions as mentioned above in past.				
NO				
6. Do you have any family history of (Parents, Siblings/grandparents) -Heart disease, Brain stroke, Diabetes ,High Blood pressure ,Cancer, any genetic disease or disorder?				
<del>NO</del> YES, MY MOTHER HAS DIABETES				
7. Do you have any family history of any mental illness/disorders as mentioned in S.N-5.				
NO				

8. Mention any other abnormal health condition/disease/disorder you had in past or present which is not mentioned in above questions.	NIL
9. Have you ever had any Surgery /operation or been advised for surgery?	No
10. Have you ever been hospitalized?	
11. Do you have to get up more than once a night to pass urine?	No
12. Have you been treated for kidney disease or kidney stone in the past?	No
13. Are you currently taking any medication for any health issues or has been advised for taking any long term medication in past.	No
14. Have you ever coughed up blood?	No
15. Any history of epileptic seizure/ Vertigo /fear of height. If yes then the date of last seizure/episode	No
16. FOR MEN ONLY - Have you ever been treated for prostate gland trouble?	-
17. FOR WOMEN ONLY - Have you noticed any bleeding between menstrual periods?	No
18. Are/were your periods irregular?	No
19. Are you pregnant now?	No
20. Have you had your change of life ( menopause)? if so have you had any discharge or bleeding since your periods stopped?	No
21. Are you taking birth control pills?	No
22. Do you have a lump in your breast?	No

If Answer to any of the above is "Yes", please furnish the details

- Declaration : 1. I the undersigned accept that all the information provided by me is true and the medical center or the company is not liable medicolegally for the same.
2. I agree to get my blood test done for HIV/HBsAg antibodies.
3. I understand that my results/reports will be shared with the concerned HR. I the undersigned give my consent for the same.

Signature of Candidate



1. Height	Cms	2. Weight	Kg	3. Build		4. Pulse	5. Blood Pressure
				Normal	Under weight		
	151		74	Over weight	<input checked="" type="checkbox"/>		

6. Visual Acuity Whether he/she falls in the category of visually impaired

Eye	Near Vision	Far Vision	Color Vision
Right	(20)	(20)	(20)
Left	(20)	(20)	(20)

7. General examination findings Including Skin:  
No active sores / lesions or pruritus.

8. Complete Blood Picture:  
Hb-11.9, Pw-36, WBC-7530, R-70, L-25, E-3, PLT-158000, SgR-11 B1. group - O+ve.  
Protein - Trace, Pns WLS-3-4, SP, WLS-2-4.

9. Urine Examination:

10. Diabetes Profile (if in Package):  
FBS-106, PP-115, HbA1c-5.2

11. Lipid / Kidney / Liver Profile (if in Package):  
Creat - 0.79, Bu-28, BUN-13, LFT-⊖, Lipid-⊖.

12. Respiratory Tract (Chest X Ray/PFT):

RPC - (N)

13. Cardiac Risk Profile (ECG/TMT/2D ECHO):

ECG - WNL

14. In case of Females:

Last menstrual cycle date	18/02/23		
Any evidence of pregnancy	Yes (If yes then duration)	No	No

FITNESS

Fit ✓

Medically Fit

Recommendations (If Any)

Unfit with recommendation

Test	When to DO	Reason	Advice / Medicine
Test	When to DO	Reasons	Advice / Medicine

Place

Date

NAN MUMBAI

14-3-23

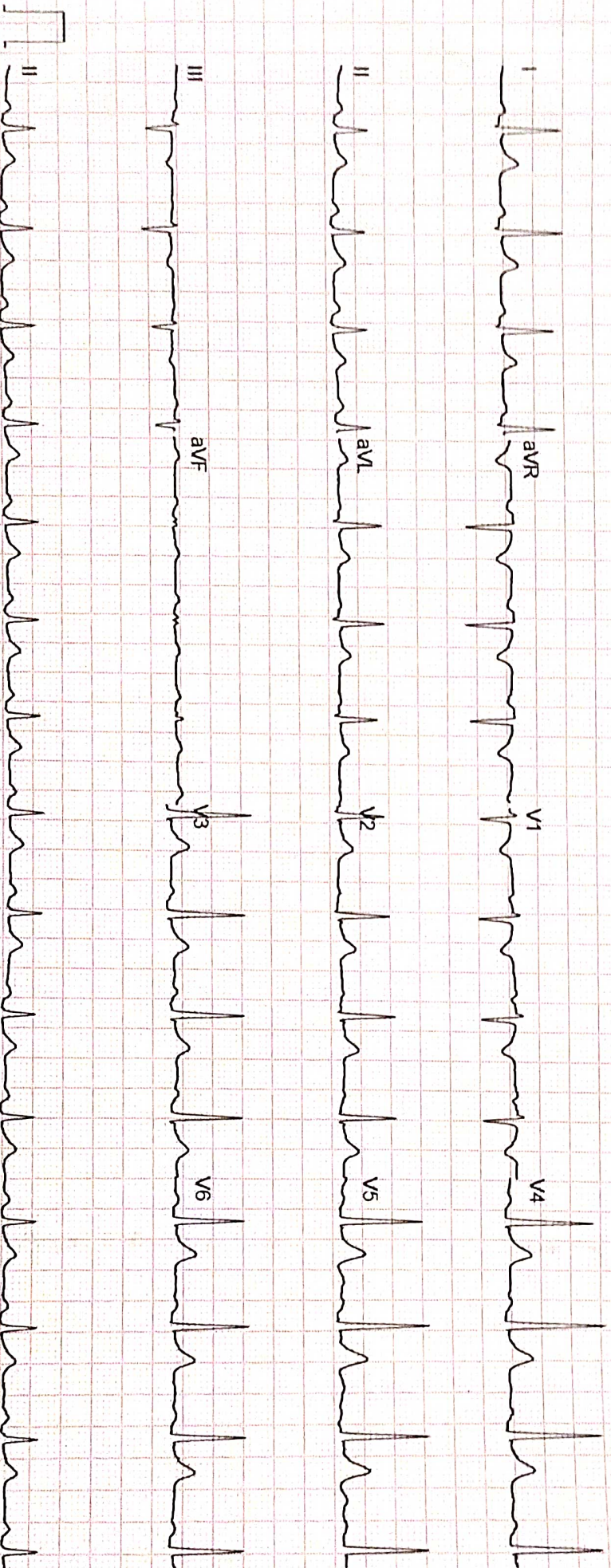
Physician's Name, Qualification & M.B.B.S. DR. ANAND PRAKASH GAUR

Signature (With Stamp) (Consulting Physician)

Med. Reg. No. 2005/02/0965

QRS : 68 ms  
QT/QTcBaz : 338/411 ms  
PR : 164 ms  
P : 118 ms  
RR/PP : 676/674 ms  
P/QRS/T : 43/9/20 degrees

Normal sinus rhythm  
Normal ECG





Name	PRITI KISHORE	Age	39Y - F
Date	11/03/2023	Patient Id	11032023200642
Referring Doctor	CREDESCENCE CARE HOSPITAL	Center	Raman ct diagnostic

**X-ray Chest PA view**

Lung fields show normal translucency and vascular markings

Hilar shadows are normal.

Domes and CP angles are normal.

Cardiac size is within normal limits.

Bony thoracic cage is normal.

**Impression:**

- Normal Study.

Dr Govind Indani  
MD Radiodiagnosis (Mumbai)




**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 02:47 PM

**THYROID FUNCTION TEST ( TFT )**

Test Description	Value(s)	Unit	Reference Range
<b>TOTAL TRIIODOTHYRONINE (T3)</b> Competitive Chemi Luminescent Immuno Assay	112.3	ng/dl	60 - 181
<b>TOTAL THYROXINE (T4)</b> Competitive Chemi Luminescent Immuno Assay	5.86	µg/dL	4.5 - 12.6
<b>THYROID STIMULATING HORMONE (TSH)</b> SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY	1.06	uIU/mL	0.3 - 5.5

**SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY**

Reference range for < 18 years

TEST	1 - 3 D	4 - 30 D	31 - 60 D	61 D - 12 M	1 - 5 Y	6 - 10 Y	11 - 14 Y	15 - 18 Y
TSH	0.1-9.2	0.2-8.5	0.2-7.8	0.30-5.9	0.4-4.8	0.5-4.7	0.5-4.6	0.6-4.5
T3	41.7-272.1	48.2-272.1	54.7-272.1	76.8-272.1	89.2-246.7	87.2-218.1	86.6-199.8	85.3-188.8
T4	4.9-15.8	5-15.3	5.2-14.8	5.7-13.3	5.7-11.7	5.4-10.7	5.2-10	5.1-9.6
FT3	1.5-5.3	1.6-5.2	1.6-5.1	1.8-4.8	2-4.5	2.1-4.4	2.3-4.4	2.3-4.3
FT4	0.84-2.08	0.85-1.98	0.85-1.89	0.89-1.62	0.89-1.48	0.85-1.46	0.84-1.45	0.84-1.45

\*\*END OF REPORT\*\*

Signature




**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:23 PM

**Complete Blood Count (CBC)**

Test Description	Value(s)	Unit	Reference Range
Hemoglobin	<b>11.9</b>	gms/dl	12 - 15
RBC Count	4.06	mil./cmm	3.8 - 5.8
Haematocrit (HCT)	<b>36.0</b>	%	37 - 47
<b>RBC Indices</b>			
MCV	88.67	fL	80 - 100
MCH	29.31	pg	27 - 34
MCHC	33.06	gm/dl	32 - 36
RDW-CV	12.9	%	11 - 16
Total WBC Count	7530	/uL	4000 - 10000
<b>DIFFERENTIAL COUNT</b>			
Neutrophil	70	%	40 - 70
Lymphocytes	25	%	20 - 40
Eosinophil	03	%	1 - 6
Monocytes	02	%	2 - 8
Basophils	00	%	0 - 1
<b>Platelet Indices</b>			
Platelet Count	158000	/cmm.	150000 - 450000
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Within Normal Limits		
Platelet	Adequate on smear		

**Done on fully Automated cell counter-ERBA H360**

**Signature**



**Dr. Disha Sorde**

MD Pathologist


Reg No. 2016/08/3416

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**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

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**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:23 PM

**ESR (ERYTHROCYTE SEDIMENTATION RATE)**

Test Description	Value(s)	Unit	Reference Range
<b>Erythrocyte Sedimentation Rate</b> Wintrobe method	11.0	mm/hr	< 20

**Interpretation:** It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

**Signature**




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MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**BLOOD GROUP (BG)**

Test Description	Value(s)	Unit	Reference Range
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**Sample Type :** WHOLE BLOOD EDTA

**Blood Group :** O Rh Positive

**METHOD :** Monoclonal blood grouping (Agglutination test) by slide method

**KIT :** Span diagnostics.

**Signature**




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MD Pathologist  
Reg No. 2016/08/3416

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**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:37 PM

**BLOOD GLUCOSE LEVEL ( FASTING & POST PRANDIAL )**

Test Description	Value(s)	Unit	Reference Range
Glucose Fasting (Plasma)	106.0	mg/dl	70 - 110
Glucose Urine	Absent		
Glucose PP (Plasma)	115.0	mg/dl	90 - 150
Glucose Urine	Absent		

Interpretation : Fasting Blood Sugar more than 126 mg/dl on more than one occasion can indicate Diabetes Mellitus.

**Signature**




**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/  10743

**Reporting Date :** 11/03/2023 01:24 PM

**LIPID PROFILE**

Test Description	Value(s)	Unit	Reference Range
<b>Total Cholesterol</b>	198.4	mg/dl	Low < 125 Desirable : < 200 Borderline High : 201 - 240 High : > 240
<b>Triglycerides</b>	151.0	mg/dl	Low < 25 Normal : < 150 Borderline High : 151 - 199 High : > 200
<b>HDL Cholesterol</b>	52.0	mg/dl	< 35 Low >80 High
<b>Non HDL Cholesterol</b>	146.40	mg/dl	Desirable : < 130 Boderline high : 130 - 159 High : > 160
<b>LDL Cholesterol</b>	116.20	mg/dl	Low < 85 Optimal : <100 Near/Above Optimal : 101 - 129 Borderline High : 130 - 159 High : >160
<b>VLDL Cholesterol</b>	30.20	mg/dl	Below 40
<b>TOTAL CHOL/HDL Ratio</b>	3.82	-	Desirable/Low Risk : 3.3 - 4.4 Borderline/Middle Risk : 4.5 - 7.1 Elevated/High Risk : 7.2 - 11.0
<b>LDL/HDL Ratio</b>	2.23	-	Desirable/Low Risk : 0.5 - 3.0 Borderline/Middle Risk : 3.1 - 6.0 Elevated/High Risk : >6.1
<b>Appearance of Serum</b>	Clear		

**Signature**


**Dr. Disha Sorde**  
 MD Pathologist  
 Reg No. 2016/08/3416

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**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**LIVER FUNCTION TEST ( LFT )**

Test Description	Value(s)	Unit	Reference Range
Bilirubin Total	0.64	mg/dL	0.3 - 1.5
Bilirubin Direct	0.22	mg/dL	0.0 - 0.5
Bilirubin Indirect	0.42	mg/dL	0.2 - 0.9
SGOT (AST)	22.9	U/L	0 - 45
SGPT (ALT)	28.6	U/L	0 - 45
Alkaline Phosphatase	187.0	U/L	80 - 306
Protein Total	6.4	g/dL	6 - 8
Albumin	3.4	g/dL	3.2 - 5.0
Globulin	3.0	g/dL	2.5 - 3.3
A/G Ratio	1.13	-	1.0 - 2.1

Signature




**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**CREATININE**

Test Description	Value(s)	Unit	Reference Range
CREATININE Jaffe IDMS	0.79	mg/dl	0.6 - 1.4

**Signature**



**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416




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**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**BLOOD UREA NITROGEN**

Test Description	Value(s)	Unit	Reference Range
Blood Urea Serum,Urease	28.0	mg/dl	17 - 45
BUN* Serum,Calculated	13.0	mg/dL	7 - 18.0

**Signature**




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**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**URIC ACID**

Test Description	Value(s)	Unit	Reference Range
Uric Acid	4.89	mg/dl	2.6 - 6.0

**Signature**




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MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:24 PM

**GLYCOSYLATED HAEMOGLOBIN ( GHB / HBA1c )**

Test Description	Value(s)	Unit	Reference Range
HbA1c H.P.L.C	5.2	%	Below 6.0% - Normal Value 6.0% - 7.0% - Good Control 7.0% - 8.0% - Fair Control 8.0% - 10% - Unsatisfactory Control Above 10% - Poor Control

**Interpretation:** Glycosylated Haemoglobin is accurate and true index of the " Mean Blood Glucose Level in the body for the previous 2-3 months. HbA1c is an indicator of glycemic control. HbA1c represent average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs the entire 120 days life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months 2-4.

**Signature**




**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

Patient Name : MRS. PRITI KISHORE

Age / Gender : 39 Years / Female

Referral Doctor: CREDENCE CARE HOSPITAL

Collection Date : 11/03/2023 12:25 PM

Pt.Type / ID : Health camp/   
10743

Reporting Date : 11/03/2023 01:24 PM

**URINE ROUTINE REPORT**

Test Description	Value(s)	Unit	Reference Range
<b>Physical Examination</b>			
Quantity	20	ml	-
Colour	Pale Yellow		Pale yellow/Yellow
Appearance	Slightly Hazy		Clear
Specific Gravity	1.020		1.005-1.030
pH	Acidic		Acidic
Deposit	Absent		Absent
<b>Chemical Examination</b>			
Protein	Trace		Absent
Sugar	Absent		Absent
Ketones	Absent		Absent
Bile Salt	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal		Normal
<b>Microscopic Examination (/hpf)</b>			
Pus Cell	3-4		Upto 5
Epithelial Cells	2-4		Upto 5
Red Blood Cells	Absent		Absent
Casts	Absent		Absent
Crystals	Absent		Absent
Bacteria	Absent		Absent

Signature




**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

**Patient Name :** MRS. PRITI KISHORE

**Age / Gender :** 39 Years / Female

**Referral Doctor:** CREDENCE CARE HOSPITAL

**Collection Date :** 11/03/2023 12:25 PM

**Pt.Type / ID :** Health camp/   
10743

**Reporting Date :** 11/03/2023 01:30 PM

**GAMMA GT**

<b>Test Description</b>	<b>Value(s)</b>	<b>Unit</b>	<b>Reference Range</b>
<b>Gamma Glutaryl Trans Peptidase</b>	21.8	U/L	5 - 40

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

**Signature**



**Dr. Disha Sorde**  
MD Pathologist  
Reg No. 2016/08/3416

**PATIENT NAME : PRITI KISHORE**

**REF. DOCTOR : DR. CREDENCE CARE HOSPITAL**

**CODE/NAME & ADDRESS :** C000138718  
RAMAN CT SCAN & DIAGNOSTIC CENTER  
CLOUD 36, SHOP NO. 8, PLOT NO. 6, SECTOR 11,  
GHANSOLI NAVI MUMBAI,THANE  
THANE 400701  
9892876145

**ACCESSION NO :** 0040WC003646  
**PATIENT ID :** PRITF12038440  
**CLIENT PATIENT ID:**  
**ABHA NO :**

**AGE/SEX :** 39 Years Female  
**DRAWN :**  
**RECEIVED :** 12/03/2023 13:56:58  
**REPORTED :** 14/03/2023 17:59:12

Test Report Status	Final	Results	Units
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**CYTOLOGY**

**LIQUID-BASED CYTOLOGY**

**LIQUID-BASED CYTOLOGY**

TEST METHOD

LIQUID-BASED PREPARATION (SUREPATH CYTOLOGY).

SPECIMEN

CERVICAL BRUSHING RECEIVED IN SUREPATH PRESERVATIVE SOLUTION.  
TWO PAPANICOLAOU SMEAR PREPARED.

2CW- 6732

REPORTING SYSTEM

2014 BETHESDA SYSTEM FOR REPORTING CERVICAL CYTOLOGY

SPECIMEN ADEQUACY

SMEARS ARE SATISFACTORY FOR EVALUATION.

MICROSCOPY

THE SMEARS SHOW MAINLY INTERMEDIATE SQUAMOUS CELLS, FEW SUPERFICIAL SQUAMOUS CELLS AND FEW POLYMORPHS.

INTERPRETATION / RESULT

NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

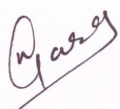
**Comments**

Suggestions / Guidelines: (REF: THE BETHESDA SYSTEM FOR REPORTING CERVICAL CYTOLOGY,2014, 3rd Edition)  
PAP RE-TESTING AT 3 YEARS

- 1) Please note papanicolaou smear study is a screening procedure for cervical cancer with inherent false negative results, hence should be interpreted with caution.
- 2) No cytologic evidence of hpv infection in the smears studied.
- 3) Primary screening of papanicolaou smears is carried out by cytotechnologist with 100% rescreening and reporting by surgical pathologist.

**\*\*End Of Report\*\***

**Please visit [www.srlworld.com](http://www.srlworld.com) for related Test Information for this accession**

  
**Dr. Nidhi Garg (Reg.No.MMC  
2009/09/3278)  
Histopathologist**



View Details



View Report

**PERFORMED AT :**

SRL Ltd  
PRIME SQUARE BUILDING,PLOT NO 1,GAIWADI INDUSTRIAL ESTATE,S.V. ROAD,GOREGAON (W)  
MUMBAI, 400062  
MAHARASHTRA, INDIA  
Tel : 9111591115, Fax : 022 - 67801212  
CIN - U74899PB1995PLC045956



**Patient Ref. No. 775000002581242**

PATIENT NAME : PRITI KISHORE

REF. DOCTOR : DR. CREDENCE CARE HOSPITAL

CODE/NAME &amp; ADDRESS : C000138718

 RAMAN CT SCAN & DIAGNOSTIC CENTER  
 CLOUD 36, SHOP NO. 8, PLOT NO. 6, SECTOR 11,  
 GHANSOLI NAVI MUMBAI,THANE  
 THANE 400701  
 9892876145

ACCESSION NO : 0040WC003646

PATIENT ID : PRITF12038440

CLIENT PATIENT ID:

ABHA NO :

AGE/SEX : 39 Years Female

DRAWN :

RECEIVED : 12/03/2023 13:56:58

REPORTED : 14/03/2023 17:59:12

Test Report Status **Final**

Results

Units


**CONDITIONS OF LABORATORY TESTING & REPORTING**

1. It is presumed that the test sample belongs to the patient named or identified in the test requisition form.
2. All tests are performed and reported as per the turnaround time stated in the SRL Directory of Services.
3. Result delays could occur due to unforeseen circumstances such as non-availability of kits / equipment breakdown / natural calamities / technical downtime or any other unforeseen event.
4. A requested test might not be performed if:
  - i. Specimen received is insufficient or inappropriate
  - ii. Specimen quality is unsatisfactory
  - iii. Incorrect specimen type
  - iv. Discrepancy between identification on specimen container label and test requisition form
5. SRL confirms that all tests have been performed or assayed with highest quality standards, clinical safety & technical integrity.
6. Laboratory results should not be interpreted in isolation; it must be correlated with clinical information and be interpreted by registered medical practitioners only to determine final diagnosis.
7. Test results may vary based on time of collection, physiological condition of the patient, current medication or nutritional and dietary changes. Please consult your doctor or call us for any clarification.
8. Test results cannot be used for Medico legal purposes.
9. In case of queries please call customer care (91115 91115) within 48 hours of the report.

**SRL Limited**

 Fortis Hospital, Sector 62, Phase VIII,  
 Mohali 160062

Page 2 Of 2



 Dr. Nidhi Garg (Reg.No.MMC  
 2009/09/3278)  
 Histopathologist


View Details



View Report

**PERFORMED AT :**

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