



# PANCHMUKHI HOSPITAL

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT

Dr CP Dadhaniya

Dr RC Dadhaniya

MBBS, Dip. G.O, Diabetologist

Mo.9925333639, 8320711901

policy number : —  
 full name : Joshi Bhumika Huzdikkumar  
 identity proof : Ael Shurica  
 identity proof no : 2066  
 gender : female 125  
 height : 167  
 weight : 74  
 BP : 120/86  
 pluse : 65/min Regular  
 blood sample : yes  
 fasting mode : yes  
 non fasting mode : yes  
  
 past history : NO  
  
 Dental : Healthy  
  
 Romberg Test :  
  
 Colour vision : Normal

Vision error

Dr. CP DADHANIYA

M.B. Diabetologist

Ind. Physician (CIH)

Regd. No. G19798

Code No. 178943

Panchmukhi Hospital

Mavdi Chowki,

150 Ft. Ring Road, RAJKOT.

*Dr. Dadhaniya*

NAME : Zohi Joshi Bhumika      DIAG. DATE: 25-11-23  
AGE/GENDER: 25 / female

PATIENT'S REFRACTION DETAILS

		SPHE	CYL	AXIS	VN
R	D	N	N	N	6/9
	N	N			6/9
L	D	N	N	N	6/9
	N	N			6/9

REMARKS :

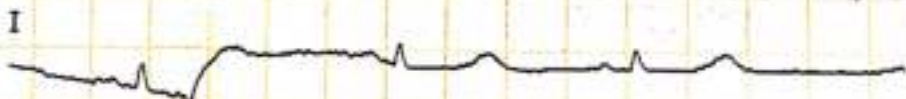
CHECKED BY : DP CP Dadhaniya

DR. C. P. DADHANIYA  
M.B. Diabetologist  
M.S. Ophthalmology (CIH)  
19798  
178943

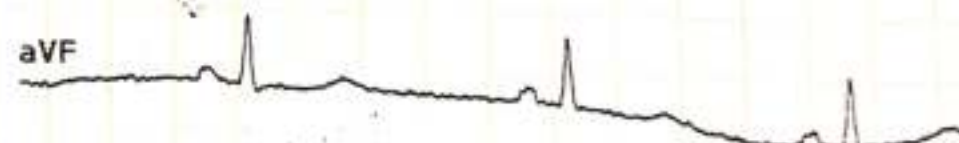
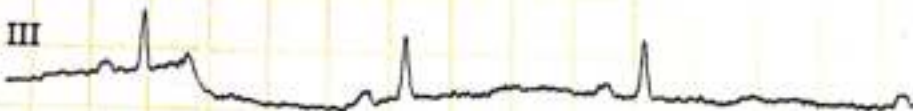
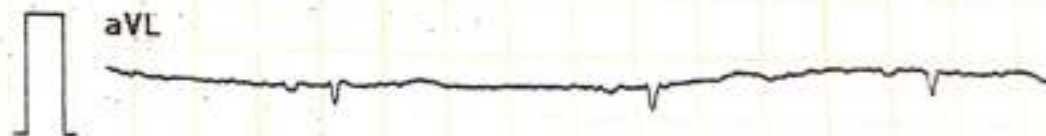
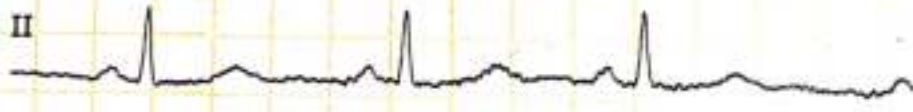
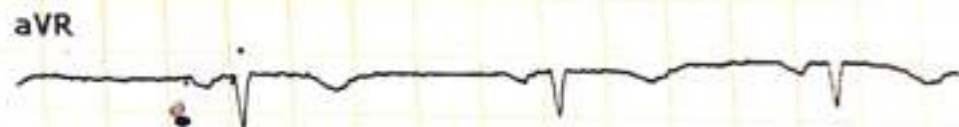
Parbhani Hospital  
Naydi Chowk,  
150 Ft. Ring Road, RAJKOT

*J. Bhumi*

10mm/mV AUTO



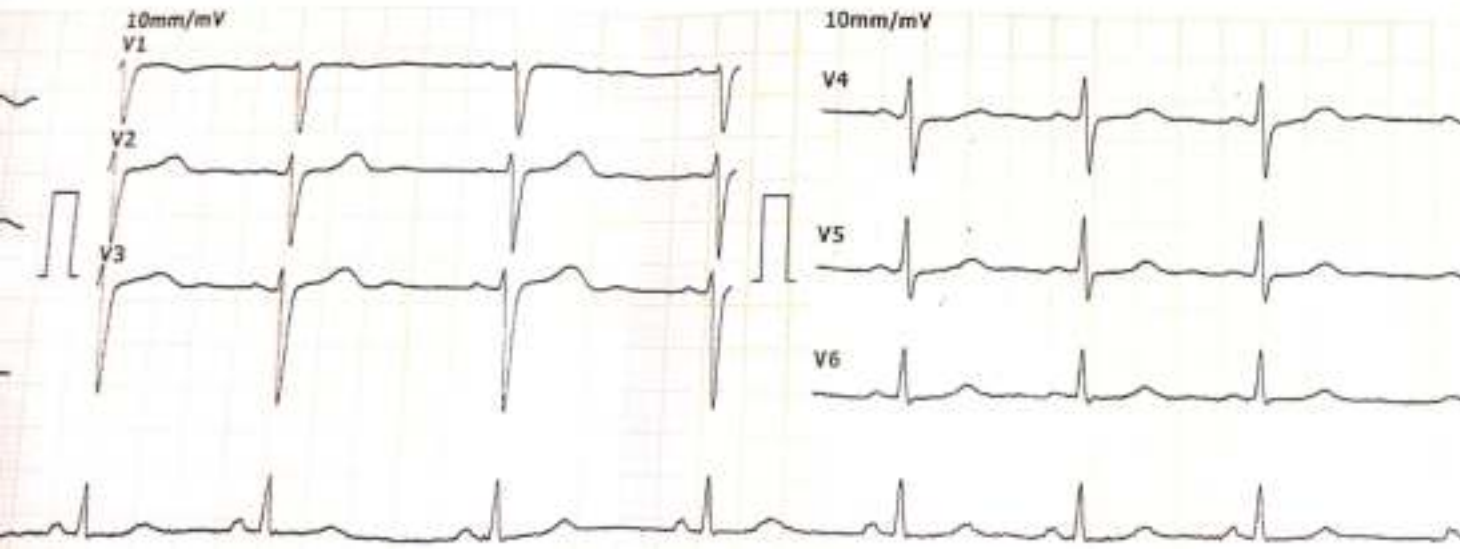
10mm/mV



II 10mm/mV

25mm/s

AC:ON 0.05-35Hz



2023-11-25 8:54:30 ID: 00003596  
 ID Card: **Bhimikl Joshi**  
 Name: **Bhimikl Joshi** Gender: **Female**  
 Age: **25** Height(cm): \_\_\_\_\_  
 Weight(Kg): \_\_\_\_\_ BP(mmHg): **1**  
**DR. C. P. DADHANIYA**  
 HR: **75** M.B. Diabetologist bpm 55  
 P-R: **120** ms 110  
 Q-R-S: **110** ms 110  
 QT/QTc: **378/443** ms 426/443  
 P/QRS/T AXES: **Chowki** deg 80/75/62  
 RV5/VI: **Chowki** mV 0.63/0.67  
 RV5+VI: **Ring Road RAJKOT** mV 1.30

\*The result must be confirmed by doctor!  
 Report Confirmed by: *Bhimikl Joshi*



# પંચમુખી હોસ્પિટલ

ડૉ. રાજેશ્રીબેન ડાહાણીયા  
ડૉ. સી. પી. ડાહાણીયા  
MBBS, Dip.G.O, Diabetologist

૧૫૦ ફુટ રીંગ રોડ, મવડી ચોકડી, શનેશ્વર આર્કેડ, રાજકોટ. ફોન : ૦૨૮૧-૨૩૭૧૬૩૨

મલ્ટી સ્પેશ્યાલિટી એન્ડ મેટરનીટી નર્સિંગ હોમ

Joshi Bhavnika H

Date :

## સુવિધાઓ

- જનરલ પ્રેક્ટીસ
- સ્ત્રીરોગ વિભાગ
- સોનોગ્રાફી
- સર્જરી વિભાગ
- મેડીસીન વિભાગ
- ઓર્થોપેડિક વિભાગ
- બાળરોગ વિભાગ
- એનોરેક્ટલ સર્જરી
- યુરોલોજી
- લેપ્રોસ્કોપી સર્જરી
- આર.એસ.બી.વાય તથા ચિરંજીવી યોજના
- દરેક જાતની રક્તી (વેક્સીન) દરરોજ આપવામાં આવે છે

I don't want to do  
stool sample.

*Bhavnika H*

Dr. C. P. DADHANIYA  
M.B.B.S., C.I.H.  
Regd. No. G19798  
PANCHMUKHI HOSPITAL  
MAVADI CHOKADI.  
150' RING ROAD RAJKOT

Issue Date : 29/07/2015



ભારત સરકાર

Government of India



જોષી ભુમિકા હાર્દિકુમાર  
Joshi Bhumika Hardikumar  
જન્મ તારીખ / DOB : 21/03/1998  
સ્ત્રી / Female

2839 9544 2066

મારી આધાર, મારી ઓળખ

Z

ef, M

linic

ECG

2D Echo

TMT (Computerised Stress Test)

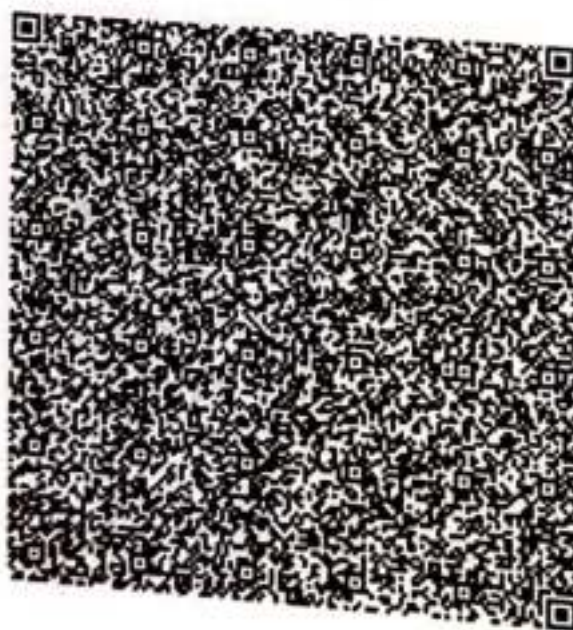


ભારતીય વિશિષ્ટ ઓળખ પ્રાધિકરણ  
Unique Identification Authority of India



સરનામું: ના દ્વારા: જીષી હાર્દિકુમાર મુકેશભાઈ,  
સ્મિત, શેરી નં - 6, અલખ ચબૂતરા ની પાસે,  
રાધા કૃષ્ણ નગર, ગોંડલ, રાજકોટ, ગુજરાત,  
360311

Address: C/O: Joshi Hardikkumar  
Mukeshbhai, smit, street no - 6, near alakh  
chabutara, radha krushna nagar, Gondal,  
Rajkot, Gujarat, 360311



Print Date : 22/01/2021

2839 9544 2066



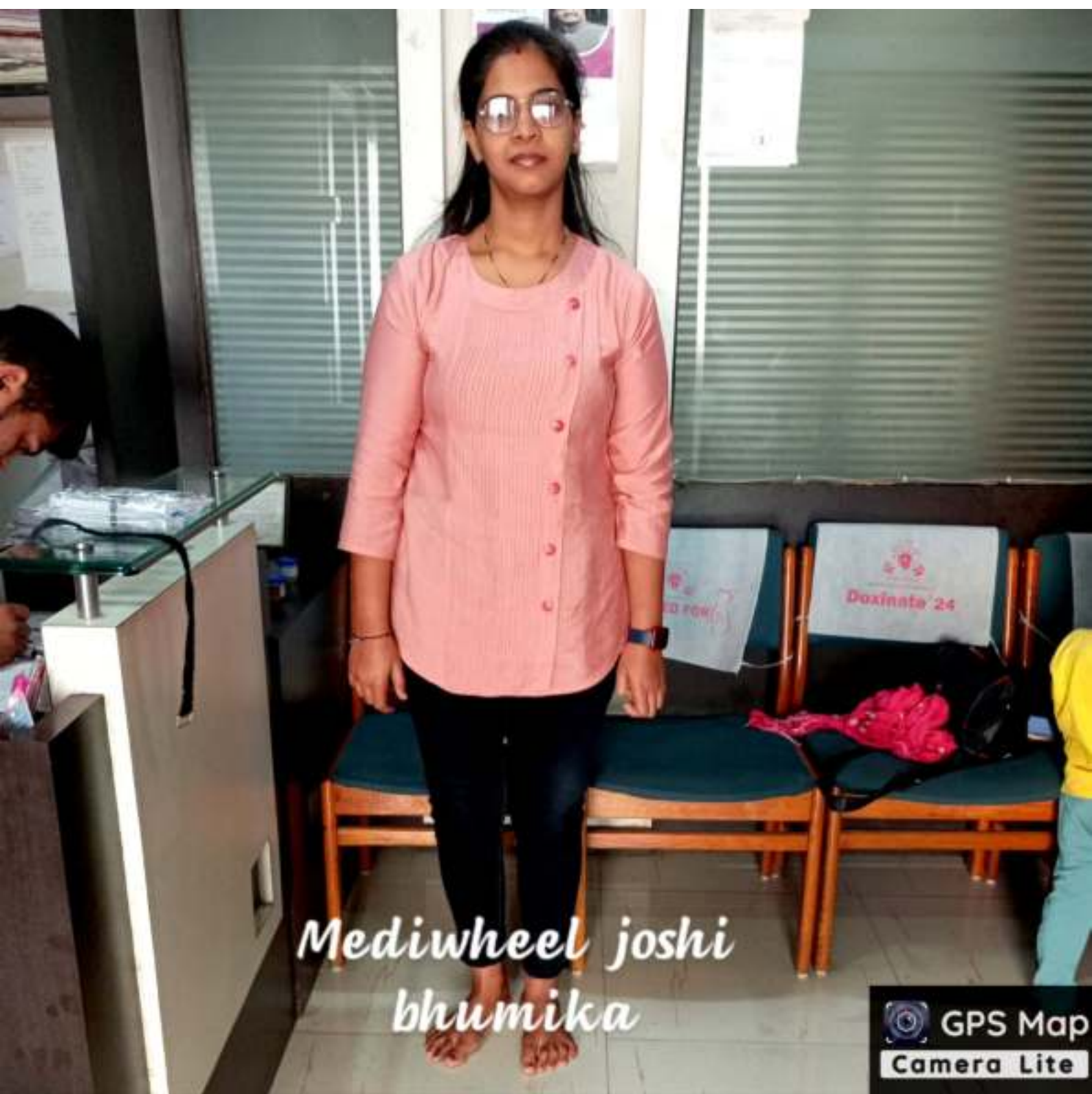
1947



help@uidai.gov.in



www.uidai.gov.in



*Mediwheel joshi  
bhumika*

 GPS Map  
Camera Lite

7Q8M+5PP, Poonam Society, Mavdi, Rajkot, Gujarat  
360004, India

Latitude

22.2654072°

Longitude

70.7843032°

Local 09:09:58 AM

GMT 03:39:58 AM

Altitude 145 meters

Saturday, 25.11.2023





## Tread Mill Test

Patient Name	: Bhumika Joshi	Age	: 25yrs/F
OPD/IPD	: OPD	ID. No.	: 1798
Ref. By	: Dr. C.P.Dodhaniya	Resting BP	: 120/80
Report Date	: 25/11/2023	Max. BP	: 150/80

Patient Reaches exercise limit at 6.10 METS.

No signs of ischemia at the exercise level and during recovery phase.

Adequate increase of HR & BP.

No significant Arrhythmia.

The stress test was terminated after 5:00 minutes as patient complained of Fatigue.  
Patient achieved 97% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

**Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.**

  
**DR. MAULIK HANSALIA**  
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

**DR. NISHANT SIRODARIYA**  
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

# CURE CARDIOLOGY CLINIC

2nd floor, Kansagra Hospital, Astron Chowk, Sardarnagar main road, RAJKOT - 360 001. Ph. 0281-2483799, M. 93 13 12 19 87

# CURE CARDIOLOGY CLINIC

456227 / BHUMIKA JOSHI

25 Yrs / Female

25-Nov-2023 11:17:58 AM

Protocol : BRUCE

Objective :

History :

Medication :

Ref By : DR C.P.DADHANIA

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	77	120/80	92	-	
Standing					1.0	80	120/80	96	-	
HV					1.0	75	120/80	90	-	
ExStart					1.0	76	120/80	91	-	
Stage 1	3:00	3:01	4.3	10.0	4.6	170	130/80	221	6	
PeakEx	2:00	5:00	0.0	0.0	6.1	151	130/80	196	-	
Recovery	1:00		2.9	0.0	6.1	121	150/80	181	-	
Recovery	2:00		2.9	0.0	6.1	91	140/80	127	3	
Recovery	3:00		2.9	0.0	6.1	112	140/80	156	4	
Recovery	4:00		2.9	0.0	6.1	77	130/80	100	2	
Recovery	5:00		2.9	0.0	6.1	92	130/80	119	-	
Recovery	5:01		2.9	0.0	6.1	89	130/80	115	-	

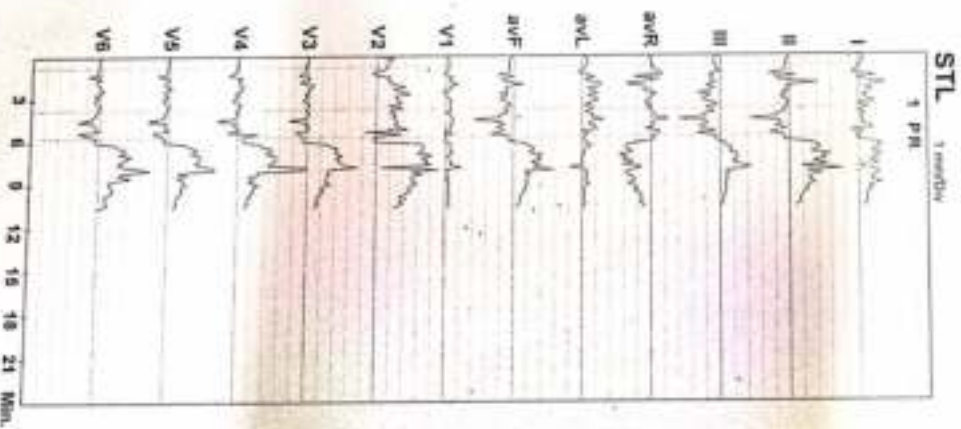
## Findings :

Exercise Time : 5:00 minutes  
 Max HR attained : 190 bpm 97% of Target 195  
 Max BP : 130/80(mmHg)  
 Max Workload attained : 6.1 (Fair Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Anginal/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia

Advice/Comments:

RECORDERS AND MEDICARE SYSTEMS, CHAUDHARI

## Summary



DR. NISHANT SIRODARIYA / DR. MAULIK HANSALI

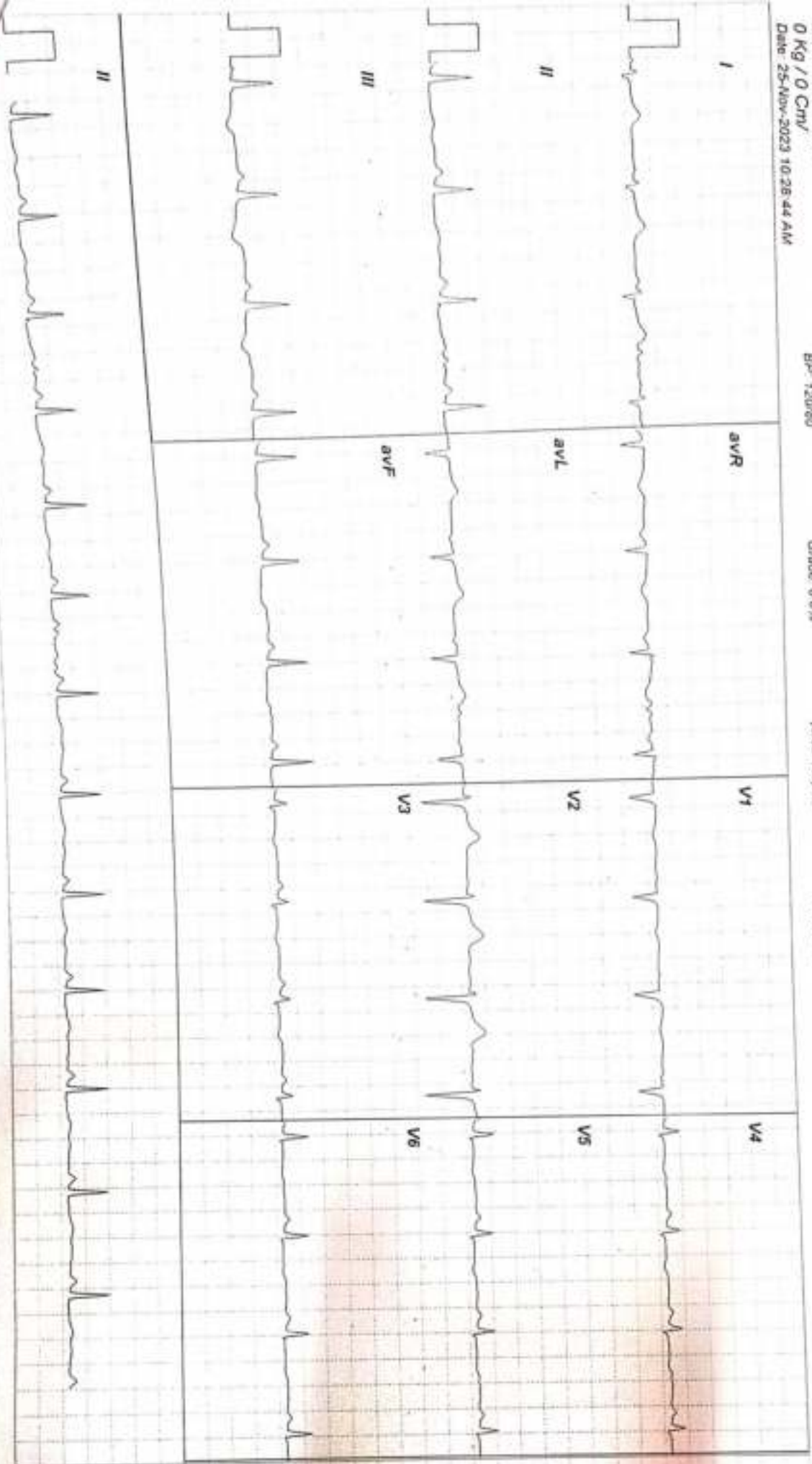
CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 CmV  
Date: 25-Nov-2023 10:26:44 AM

HR: 77 bpm  
MET'S: 1.0  
BP: 120/80  
Tgt HR 39% at 195  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
Protocol BRUCE  
10.05-100Hz

  
E.C. Time 00:31  
BLC: On  
Match: On

3x4+1 Rhythm Lead  
Supine  
1.0 Cm/mV  
25 mm/Sec



RECORDERS AND MEDICARE SYSTEMS, CHANDIGARH

CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm  
Date: 25-Nov-2023 10:28:44 AM

HR: 60 bpm  
MET'S: 1.0  
BP: 120/80

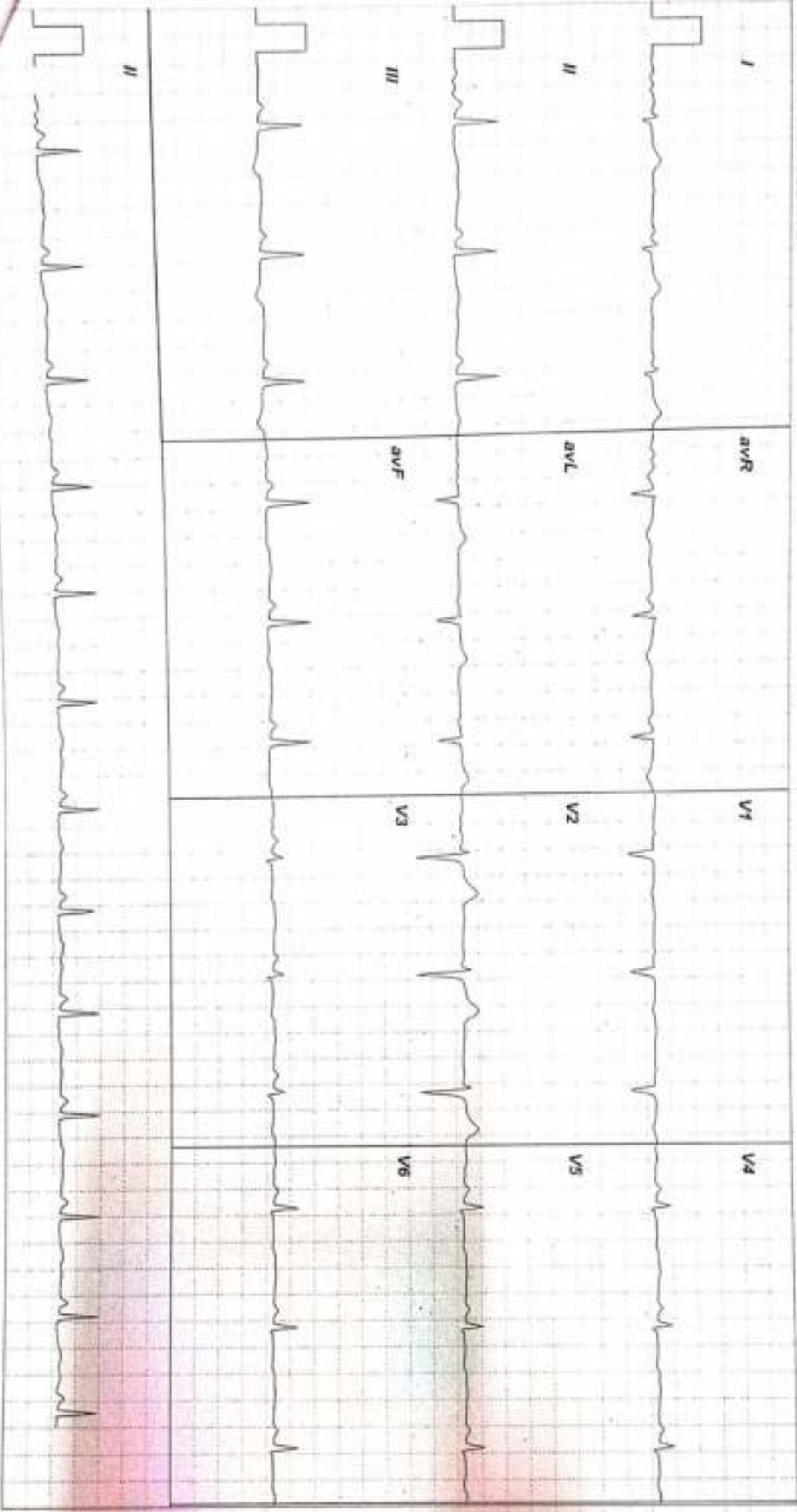
Target HR: 41% of 195  
Speed: 0.0 mmph  
Grade: 0.0%

Raw ECG  
Physical BRUCE  
(0.05-100)/hr

Ex Time 00:35  
BLC: On  
Avalch: On

Standing  
1.0 Cm/mV  
25 mmv/Sec

3x4+1 Rhythm Lead



ZIPRECORDERS AND MEDICARE SYSTEMS, CHANDIGARH

CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28:44 AM

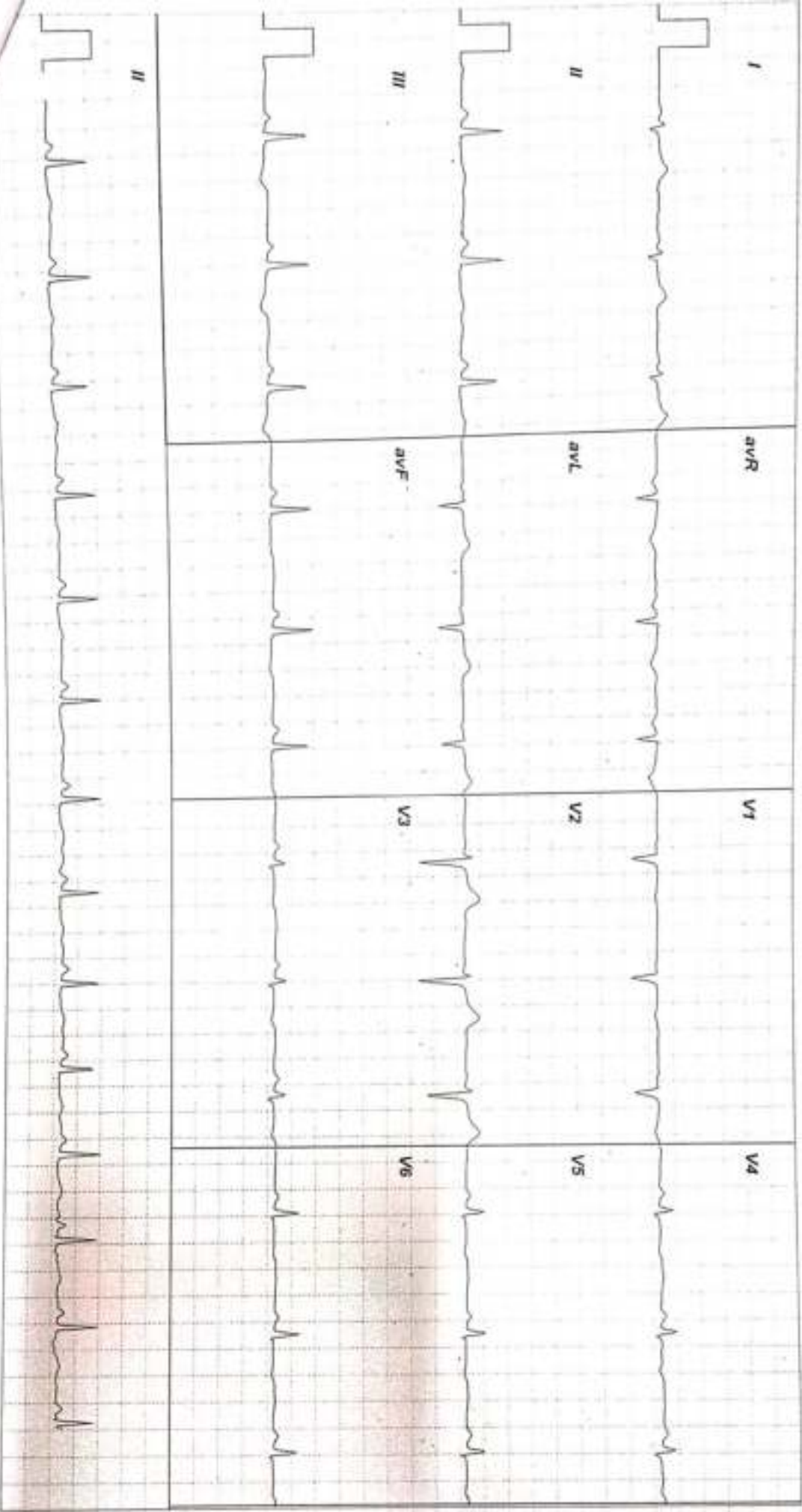
HR: 75 bpm  
METs: 1.0  
BP: 120/80

Trg HR: 38% of 195  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
Protocol: BRUCE  
(0.05-100)Hz

Es Time: 00:39  
R/C: On  
Motion: On

3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28:44 AM

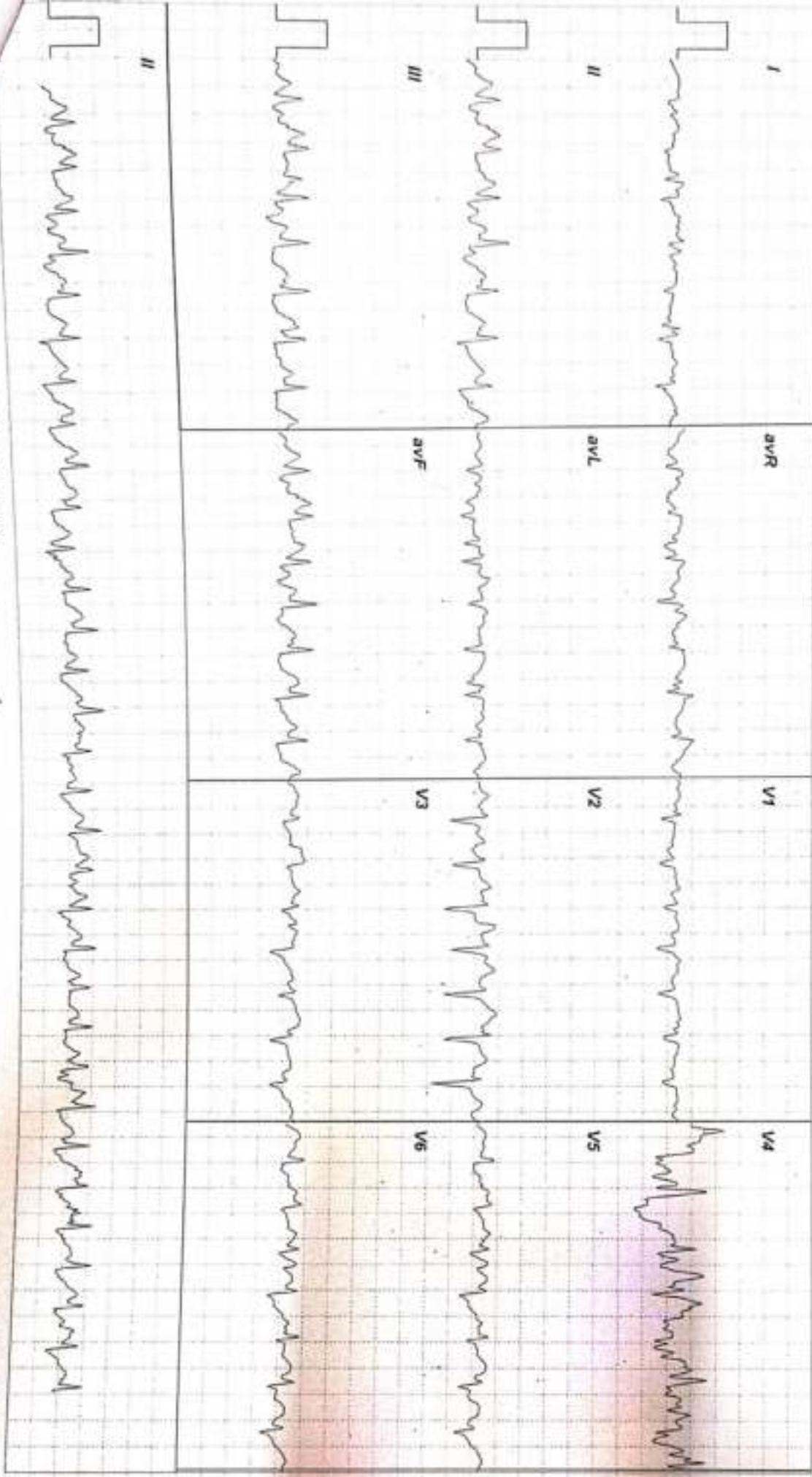
Ht: 169 cm  
Wt: 67  
METs: 6.7  
BP: 130/80

Target HR: 95% of 195  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
Protocol BRUCE  
10:05-10:09:42

Ex Time 04:56  
BLC: On  
Watch: On

3x4+1 Rhythm Lead  
Stage 2 ( 01:56 )  
1.0 Cm/Div  
25 mm/Sec



RECORDERS AND MEDICARE SYSTEMS, CHANDIGARH

CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm  
Date: 25-Nov-2023 10:28:44 AM

HR: 170 bpm  
METs: 6.1  
BP: 130/80

Tgt HR: 97% of 195  
Speed: 0.0 m/s  
Grade: 0.0%

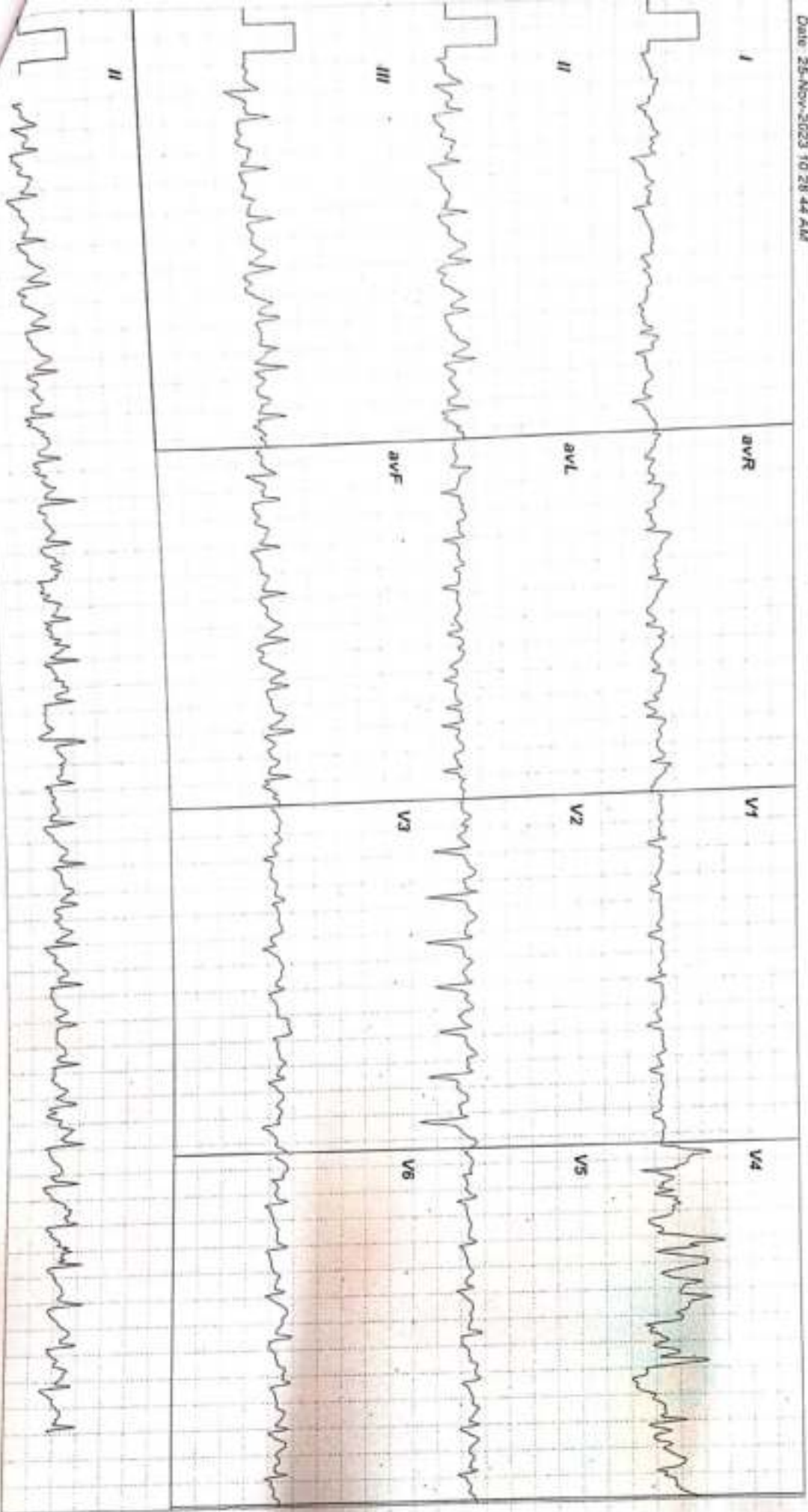
Raw ECG  
Protocol: BRUCE  
10:05-10:01/42

Ex Time: 04:58  
BLC: On  
Watch: On

3x4+1 Rhythm Lead

Stage 2 ( 02:00 )

1.0 Cm/mV  
25 mm/Sec



SCORES AND MEDICARE SYSTEMS, CHANDIGARH

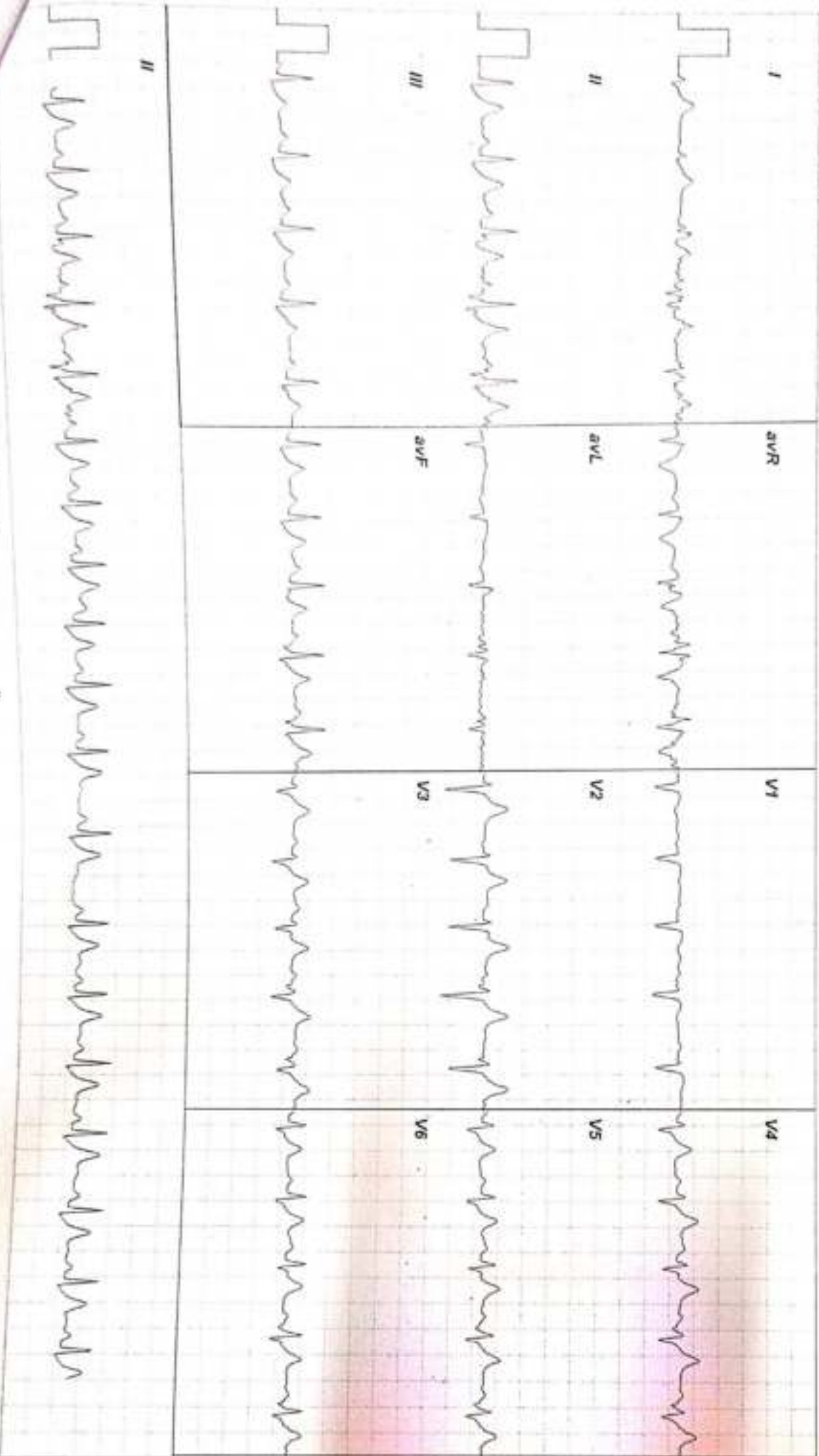


CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28 AM

HR: 121 bpm  
METs: 6.1  
BP: 150/80  
Tgt HR 62% of 185  
Speed 1.8 mph,  
Grade 0.0%

Raw ECG  
Protocol BRUCE  
(0.05-100)Hz  
Ex Time 05:00  
BLC On  
Motion On

3x4+1 Rhythm Lead  
Recovery(1:00)  
1.0 Cm/v  
25 mm/Sec



CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28:44 AM

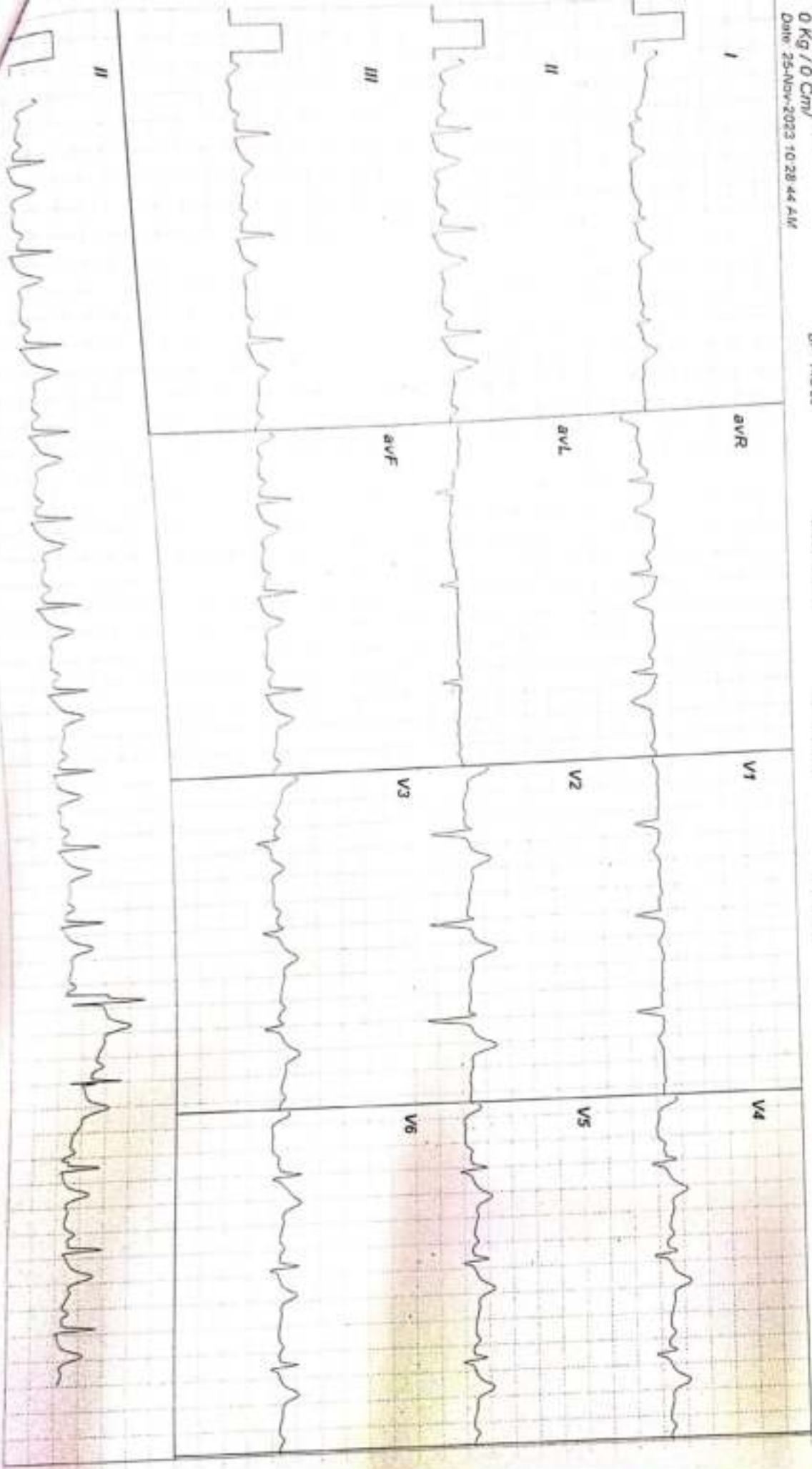
HR: 91 bpm  
METs: 6.1  
BP: 140/80

Target HR: 45% of 195  
Speed: 1.8 mph  
Grade: 0.0%

Raw ECG  
Protocol: BRUCE  
(0:05-10:00)Hz

Ex Time: 05:00  
ELC: On  
Monitor: On

3x4+1 Rhythm Lead



**CURE CARDIOLOGY CLINIC**  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm  
Date: 25-Nov-2023 10:28:44 AM

HR: 112 bpm  
METs: 6.1  
BP: 140/80

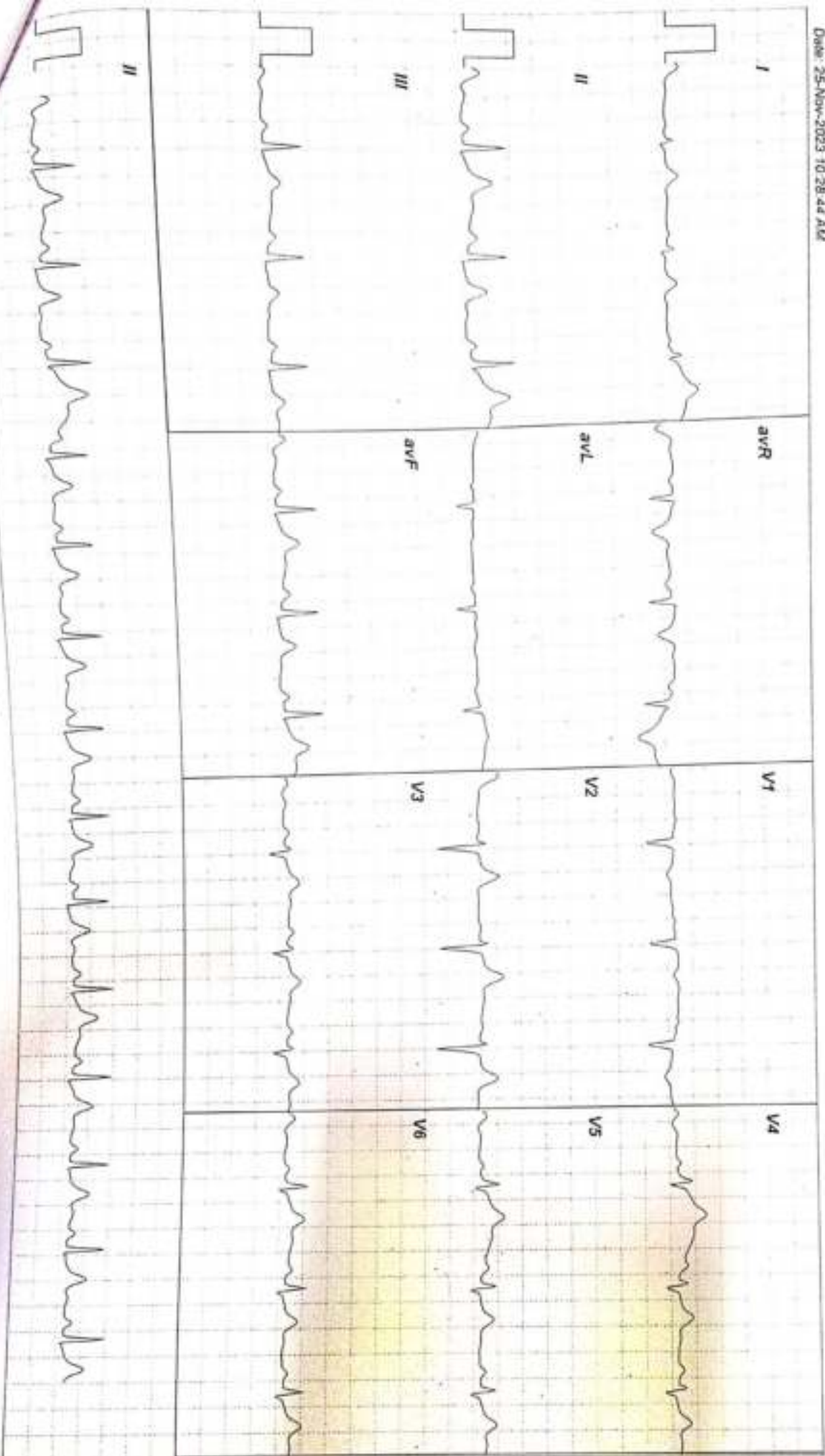
Tgt HR 57% of 155  
Speed 1.8 mph  
Grade: 0.0%

Raw ECG  
Protocol BRUCE  
10:05-10:09Hr

Ex Time 05:00  
B/C On  
Rehol: On

Recovery(3:00)  
1.0 Cm/1v  
25 mmv/Sec

3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 YRS / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28:44 AM

HR: 77 bpm  
METs: 6.1  
BP: 120/80

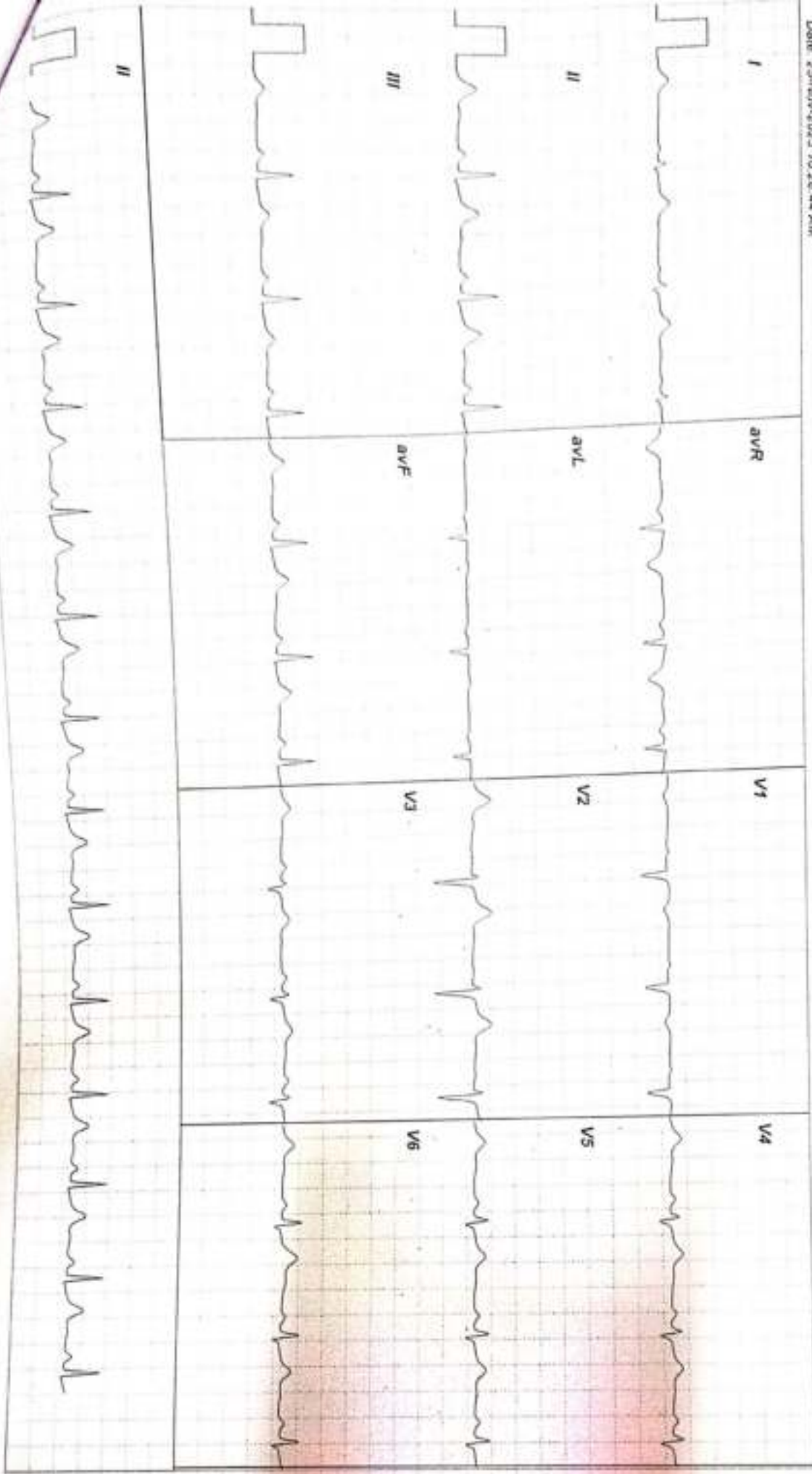
Raw ECG  
Tgt HR 39% of 195  
Speed 1.8 mph  
Grade 0.0%

Protocol: BRUCE  
(0.05-100)/Hz

EC Time 05:00  
BLC On  
Notch On

Recovery(4:00)  
1.0 Cm/s  
25 mm/Sec

3x4+1 Rhythm Lead



CURE CARDIOLOGY CLINIC  
2ND FLOOR, KANSAGRA HOSPITAL, ASTRON CHOWK, RAJKOT.  
456227 / BHUMIKA JOSHI  
25 Yrs / Female  
0 Kg / 0 Cm/  
Date: 25-Nov-2023 10:28:44 AM

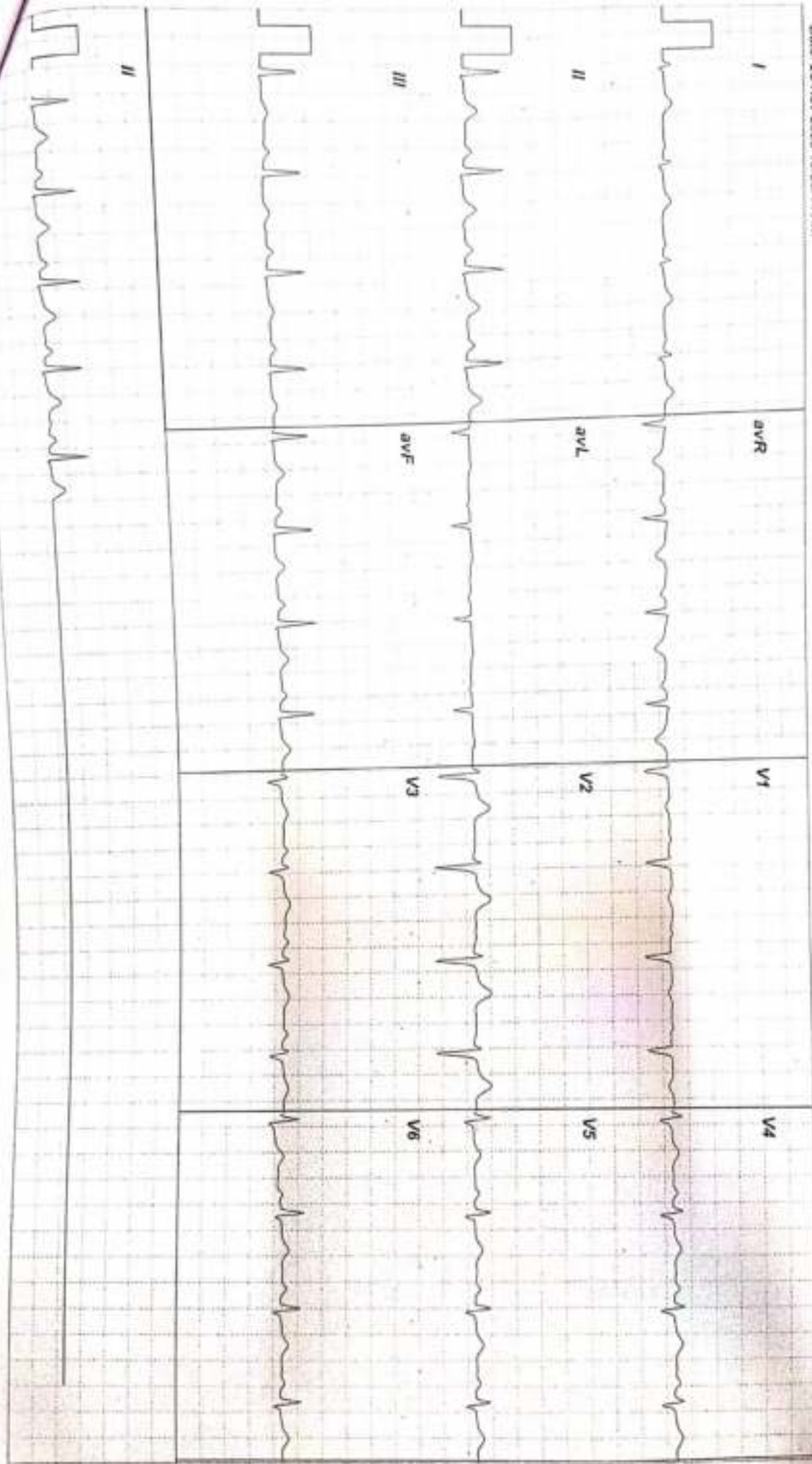
HR: 92 bpm  
METs: 6.1  
BP: 130/80

Tgt HR: 47% of 195  
Speed: 1.8 mph,  
Grade: 0.0%

Raw ECG  
Protocol BRUCE  
(0:05-100)hr

Ex Time 05:00  
BLC: On  
Modr: On  
Recovery(5:00)  
1.0 Cm/iv  
25 mm/Sec

3x4+1 Rhythm Lead



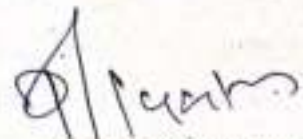
Pt.'s Name: JOSHI BHUMIKA

Date: 25 November, 2023

**Radiograph of chest (PA view)**

- Both the lung fields are clear.
- No e/o consolidation, cavitations or collapse.
- Both the hila appears normal
- Both costophrenic angles appear clear.
- Both domes of diaphragm appear normal.
- Cardiac size is within normal limit.
- Bones underview reveals no evident abnormality.

Thanks for reference.



**DR PRATIK KAGATHARA**  
MD

PATIENT NAME : JOSHI BHUMIKA

DATE: 25 November 2023

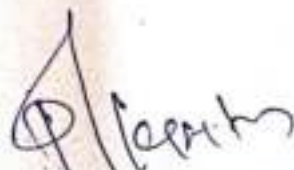
## USG ABDOMEN AND PELVIS

- **LIVER:** is normal in size and shows normal parenchymal echotexture. No focal or diffuse lesions are seen. The intra hepatic biliary and portal radicles are normal. The portal vein and CBD are normal.
- **GALL BLADDER:** Well distended and appears unremarkable. No evidence of calculus or cholecystitis is seen. Gall bladder wall thickness appears normal.
- **PANCREAS:** appears normal in size and echotexture. No focal lesion seen. No evidence of peripancreatic inflammatory changes.
- **SPLEEN:** is normal in size and echotexture. No evidence of focal or diffuse lesion seen.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No evidence of calculus or hydronephrosis on either side.
- **URINARY BLADDER:** well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **UTERUS:** is normal in size, shape and position. Endometrial thickness measures 6.0 mm. Endometrial & myometrial echotexture is normal. No focal lesion is seen.
- **BOTH OVARIES** are normal in size & echotexture. No focal solid or cystic lesions are seen. No adnexal mass is seen
- No free fluid is seen in the POD. Visualized bowel loops appears unremarkable, No evidence of necrotic lymphadenopathy is seen. RIF/ LIF clear. Bilateral C-P angel clear.

### CONCLUSION:

- No significant abnormality seen in present study.

Thanks for reference.

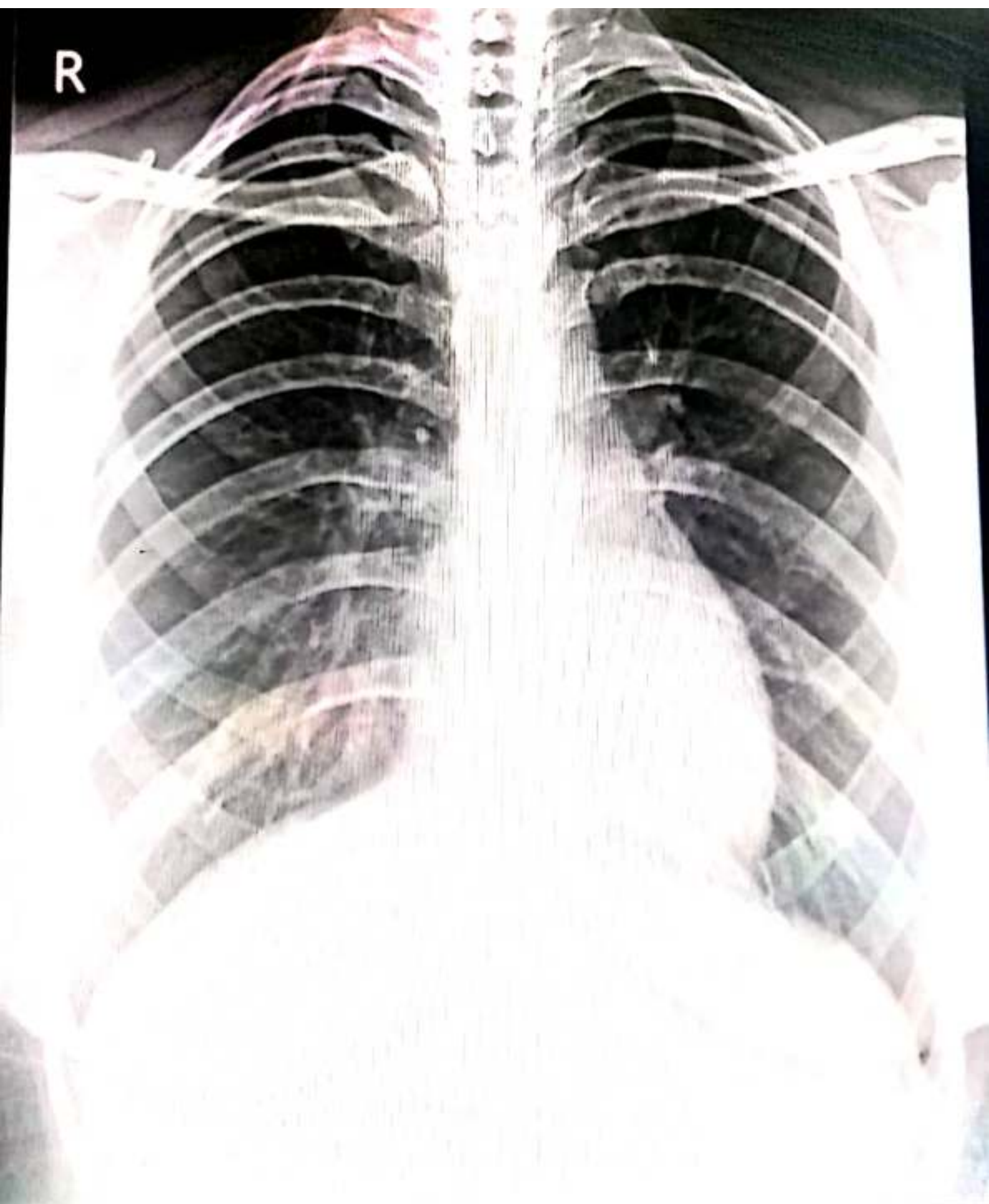


**DR PRATIK KAGATHARA**  
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS

R



**JOSHI BHUMIKA 25 Y/F CHEST PA 25-Nov-23  
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)**





TEST REPORT

<b>Name</b> : Joshi Bhumika	<b>Reg. No</b> : 311101032
<b>Age/Sex</b> : 25 Years / Female	<b>Reg. Date</b> : 25-Nov-2023 02:21 PM
<b>Ref. By</b> : Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Collected On</b> : 25-Nov-2023 02:22 PM
<b>Client Name</b> : PANCHMUKHI HOSPITAL	<b>Report Date</b> : 25-Nov-2023 05:58 PM

**COMPLETE BLOOD COUNT (CBC)**  
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval	
<b>RBC Parameters</b>				
Hemoglobin (SLS method)	11.8	g/dL	12.5 - 16.0	
Hematocrit (Electrical Impedance)	35.10	%	37 - 47	
RBC Count (Electrical Impedance)	6.07	million/cmm	4.2 - 5.4	
MCV (Calculated)	57.8	fL	78 - 100	
MCH (Calculated)	19.4	Pg	27 - 31	
MCHC (Calculated)	33.6	%	30 - 35	
RDW (Calculated)	14.2	%	11.5 - 14.0	
<b>WBC Parameters</b>				
WBC Count (Flowcytometry)	6580	/cmm	4000 - 10500	
<b>DIFFERENTIAL WBC COUNT</b>				
Neutrophils (%)	44 %	% Range 42.02 - 75.2	Abs. Value 2895 /cmm	Abs. Range 1800 - 7700
Lymphocytes (%)	48 %	% Range 20 - 45	Abs. Value 3158 /cmm	Abs. Range 1000 - 3900
Eosinophils (%)	02 %	% Range 1 - 4	Abs. Value 132 /cmm	Abs. Range 0 - 450
Monocytes (%)	06 %	% Range 2 - 8	Abs. Value 395 /cmm	Abs. Range 200 - 1000
Basophils (%)	00 %	% Range 0 - 1	Abs. Value 0 /cmm	Abs. Range 20 - 100
<b>Platelete Parameter</b>				
Platelet Count	285000	/cmm	150000 - 450000	
MPV	9.2	fL	7.4 - 10.4	
P-LCR	19.00	%	11.9 - 66.9	
PDW	8.8	%	8.3 - 56.6	
PCT (Platelet Haematocrit)	0.26	%	0.2 - 0.5	

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**BLOOD GROUP & RH**

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	'B'		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

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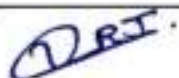
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Test	Result	Unit	Biological Ref. Interval
<b>Erythrocyte sedimentation rate Sample, EDTA whole blood</b>			
ESR (After 1 hour)	11	mm/hr	3 - 12

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FASTING PLASMA GLUCOSE

Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <small>HEXONWASE</small>	92.00	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic

Criteria for the diagnosis of diabetes :

- HbA1c  $\geq$  6.5 %Or
- Fasting plasma glucose  $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose  $\geq$  200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose  $\geq$  200 mg/dL.

\*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.  
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34: S11.

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POST PRANDIAL PLASMA GLUCOSE

Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) HEXORWASE	104.00	mg/dL	70 - 140

Criteria for the diagnosis of diabetes :

- HbA1c  $\geq$  6.5 %Or
- Fasting plasma glucose  $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose  $\geq$  200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose  $\geq$  200 mg/dL.

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LIPID PROFILE  
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Cholesterol</b> <small>Cholesterol Oxidase</small>	158.00	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
<b>Triglyceride</b> <small>Enzymatic Reaction With Glycerol Kinase</small>	121.00	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
<b>HDL Cholesterol</b> <small>Siemens AHDL</small>	50.00	mg/dL	High Risk : < 40 Low Risk : $\geq$ 60
<b>LDL Cholesterol</b> <small>Siemens ALDL</small>	83.00	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : $\geq$ 190
<b>VLDL Cholesterol</b> <small>Calculated</small>	24.20	mg/dL	15 - 35
<b>LDL / HDL RATIO</b> <small>Calculated</small>	1.66		0 - 3.5
<b>Cholesterol /HDL Ratio</b> <small>Calculated</small>	3.16		0 - 5.0

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RENAL FUNCTION TEST

Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
<b>Creatinine</b> <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small>	0.69	mg/dL	0.55 - 1.02
<b>eGFR</b>	134.52	ml/min/1.73 sq m	Normal or High: >=90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15
<b>Urea</b> <small>Calculated</small>	21.00	mg/dL	17 - 43
<b>Blood Urea Nitrogen (BUN)</b> <small>UREASE/GLDH</small>	9.81	mg/dL	7.0 - 18.0
<b>Uric Acid</b> <small>Uricase</small>	3.62	mg/dL	2.6 - 6.2
<b>Sodium</b> <small>Direct ion selective electrode</small>	138.6	mmol/L	137 - 145
<b>Potassium</b> <small>Direct ion selective electrode</small>	4.21	mmol/L	3.5 - 5.1
<b>Chloride</b> <small>Direct ion selective electrode</small>	104.0	mmol/L	98 - 107
<b>Calcium</b> <small>Cresolphthalein Complexone</small>	9.6	mg/dL	8.5 - 10.1

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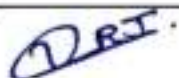
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Parameter	Result	Unit	Biological Ref. Interval
<b>GGT</b> <small>Siemens/37C</small>	35.00	U/L	5 - 55

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HEMOGLOBIN A1 C (HBA1C)

Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HbA1C <small>Siemens Dimension</small>	4.86	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 %  Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <small>Calculated</small>	92.78	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

**Explanation :**

- Total hemoglobin A1c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

**HbA1c assay Interferences :**

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1c result does not correlate with the patient's blood glucose levels.

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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
<b>Thyroid Stimulating Hormone (TSH)</b> CLM	3.260	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics, 5th Edition. Philadelphia: WB Saunders, 2012:2170

<b>Triiodothyronine (T3)</b> CLM	0.97	ng/mL	0.6 - 1.81
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Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

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**Thyroxine (T4)** 9.24 µg/dL 4.5 - 12.6  
CLM

**Clinical Significance:**

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

**Limitations:**

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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URINE ROUTINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
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**PHYSICAL EXAMINATION**

Quantity	30 cc		
Colour	Pale Yellow		
Clarity	Clear		

**CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)**

pH	6.0		4.6 - 8.0
Sp. Gravity	1.020		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

**MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)**

Leucocytes (Pus Cells)	1 - 3/hpf
Erythrocytes (Red Cells)	Absent
Epithelial Cells	2 - 3/hpf
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

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**LABORATORY REPORT**

<b>Name</b> :	Joshi Bhumika	<b>Reg. No</b> :	311101032
<b>Sex/Age</b> :	Female/25 Years	<b>Histo / Cyto No</b> :	C3H00154
<b>Ref. By</b> :	Dr. PANCHMUKHI HOSPITAL / INSURANCE	<b>Reg. Date</b> :	25-Nov-2023 02:21 PM
<b>Client Name</b> :	PANCHMUKHI HOSPITAL	<b>Collected On</b> :	25-Nov-2023 02:22 PM
		<b>Report Date</b> :	25-Nov-2023 06:24 PM

**CYTOPATHOLOGY REPORT**
**Specimen :**

Liquid Based Cervical Cytology Material.

**Grossing Description :**

C3H00154/23

**Microscopic Description :**
**Specimen Adequacy :** Satisfactory for evaluation.

**Endocervical cells (Transformation Zone Component) :** Seen.

**Partially obscuring component like inflammation :** Seen.

**General Categorization :** Negative for Intraepithelial Lesion and Malignancy.

**Squamous Cell Abnormalities :**

Squamous cell : Normal superficial &amp; Intermediate squamous cells are seen.

Few glandular normal endocervical cells present.

No evidence of malignancy in studied smear.

**Non Neoplastic cellular variation like :**

Squamous metaplasia : Not seen.

Keratotic changes : Not seen.

Tubal metaplasia : Not seen.

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Atrophic changes : Not seen.  
 Pregnancy associated changes : Not seen.

**Reactive cellular changes associated with :**

Inflammation : Absent.  
 Radiation : Absent.  
 Intrauterine Contraceptive Device (IUD) : Absent.

**Organism :**

Normal vaginal flora preserved.  
 Shift in flora suggestible of bacterial vaginosis : Not seen.  
 Trichomonas Vaginalis : Not seen.  
 Fungal organism morphologically consistent with Candida species : Not seen.  
 Bacteria morphologically consistent with Actinomyces species : Not seen.  
 Cellular changes consistent with Herpes Simplex Virus : Not seen.  
 Cellular changes consistent with Cytomegalovirus : Not seen.

**Impression :**

**Negative for Intraepithelial Lesion or Malignancy.**

Clinical and Radiological correlation and SOS further work up is advised.

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**LIVER FUNCTION TEST**

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <small>BIURET</small>	7.25	g/dL	6.4 - 8.2
Albumin <small>Dye Binding - Bromocresol Purple (BCP)</small>	4.58	g/dL	3.40 - 5.00
Globulin <small>Calculated</small>	2.67	g/dL	2.3 - 3.5
A/G Ratio <small>Calculated</small>	1.72		0.8 - 3.1
SGOT (AST) <small>Siemens/37C</small>	19.00	U/L	15 - 37
SGPT (ALT) <small>Siemens/37C</small>	28.00	U/L	14 - 59
Alakaline Phosphatase <small>Siemens/37C</small>	97.00	U/L	46 - 116
Total Bilirubin <small>Diaz-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/bilirubin</small>	0.58	mg/dL	0.2 - 1
Conjugated Bilirubin <small>Diaz-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/bilirubin</small>	0.13	mg/dL	0 - 0.20
Unconjugated Bilirubin <small>Suph acid ip/calf-benz</small>	0.45	mg/dL	0.0 - 1.1

----- End Of Report -----

*D.R.I.*

Dr. Viral Jethava

This is an Electronically Authenticated Report.

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Dr. Viral R. Jethava

M.D. (Path. PDCC)



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