

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : BL0048945, BL0048945,	<b>Sample Date</b> : 08-03-2024 09:06
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 08-03-2024 10:57
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### HAEMATOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>COMPLETE BLOOD PICTURE WITH ESR</b>			
HAEMOGLOBIN(HB%)	11.8 gm%		SLS
RED BLOOD CELL COUNT(RBC)	4.34 m/uL	4.2 - 5.6	HDF
WBC COUNT (TC&DC)	8.13 Thousands/cumm	4.0 - 11.0	cytometry
PLATELET COUNT	348 Thousands/cumm	150 - 450	HDF
NEUTROPHILS	72 %	40 - 75	Calculated
LYMPHOCYTES	22 %		Calculated
EOSINOPHILS	01 %		Calculated
MONOCYTES	05 %		Calculated
BASOPHILS	00 %		Calculated
PACKED CELL VOLUME(PCV/HAEMATOCRIT)	<b>37.3 vol%*</b>	40 - 54	PHD
MCV	85.9 fl	78 - 98	Calculated
MCH	27.2 pg	27 - 35	Calculated
MCHC	31.6 %	31 - 37	Calculated
ESR 1st Hour	66 mm/hr		Westergren

### **BLOOD GROUPING & RH TYPING**

BLOOD GROUPING	AB
RH(D) TYPING	POSITIVE

\*\*\*End of the report\*\*\*

**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

<b>Name</b>	: Mrs. V S RAJESWARI S	<b>MR No</b>	: 105133584
<b>Age/Gender</b>	: 56 Y/F	<b>Visit ID</b>	: OP232436170
<b>Sample ID</b>	: SE0056084, SE0056084, SE0056084, SE0056084, SE0056084,	<b>Sample Date</b>	: 08-03-2024 09:07
<b>Consultant Dr.</b>	: Dr. Likhita Dasari	<b>Report Date</b>	: 08-03-2024 11:04
<b>Prescribing Dr.</b>	: Dr. CONSULTATION .	<b>Bill Open Date</b>	: 08-03-2024 08:56

## Laboratory Report

### BIOCHEMISTRY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>LIPID PROFILE</b>			
TOTAL CHOLESTEROL	186 mg/dl	60 - 200	CHOD-PAP
HDL-CHOLESTEROL	60 mg/dl		Direct
LDL- CHOLESTEROL	107 mg/dl		
VLDL-CHOLESTEROL	19 mg/dl	5 - 45 mg/dl	
TRIGLYCERIDES	96 mg/dl	< 150	GPO
CHOLESTEROL/HDL RATIO	3.1	Up to 4.5	
<b>RENAL FUNCTION TEST(RFT)</b>			
SERUM UREA	26 mg/dl	13 - 45	urease-GLDH
SERUM CREATININE	0.8 mg/dl	0.6-1.5	Jaffe's
SERUM SODIUM	144 mmol/L	135 - 155	ISE
SERUM POTASSIUM	4.2 mmol/L	3.5 - 5.5	ISE
SERUM CHLORIDE	105 mmol/L	98 - 107	ISE
<b>SERUM URIC ACID</b>	3.9 mg/dl	2.5 - 6.0	Trinder
<b>BLOOD UREA NITROGEN (BUN)</b>	12 mg/dl	7- 21	
<b>LIVER FUNCTION TEST(LFT)</b>			
SERUM BILIRUBIN (TOTAL)	0.5 mg/dl	0.1 to 1.2 mg/dl	DIAZO
SERUM BILIRUBIN (DIRECT)	0.2 mg/dl	0.0 - 0.3 mg/dl	DIAZO
SGOT(AST)	29 IU/L	8 - 45	IFCC
SGPT(ALT)	23 IU/L	7- 45	IFCC
SERUM ALKALINE PHOSPATASE(ALP)	97 IU/L	60 - 320	PNP-AMP
TOTAL PROTEIN	7.2 gm/dl	6.3 - 7.9	Biuret
SERUM ALBUMIN	4.0 gm/dl	3.5 - 5.0	BCG
GLOBULIN	3.2		
ALBUMIN TO GLOBULIN (A/G) RATIO	1.2		

\*\*\*End of the report\*\*\*

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<b>Age/Gender</b>	: 56 Y/F	<b>Visit ID</b>	: OP232436170
<b>Sample ID</b>	: SE0056084, SE0056084, SE0056084, SE0056084, SE0056084,	<b>Sample Date</b>	: 08-03-2024 09:07
<b>Consultant Dr.</b>	: Dr. Likhita Dasari	<b>Report Date</b>	: 08-03-2024 11:04
<b>Prescribing Dr.</b>	: Dr. CONSULTATION .	<b>Bill Open Date</b>	: 08-03-2024 08:56

**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : UR0016990,	<b>Sample Date</b> : 08-03-2024 09:07
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 08-03-2024 11:07
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### CLINICAL PATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>COMPLETE URINE EXAMINATION (CUE)</b>			
PHYSICAL EXAMINATION	-		
COLOUR	PALE YELLOW		
VOLUME	15 ML		
REACTION	ACIDIC		
SPECIFIC GRAVITY	1.010	1.005 - 1.030	
APPEARANCE	CLEAR		
CHEMICAL EXAMINATION	-		
GLUCOSE	NIL		
ALBUMIN	NIL		
BILE SALTS	ABSENT		
BILE PIGMENTS	NEGATIVE		
KETONE BODIES	NEGATIVE		
UROBILINOGEN	NEGATIVE		
NITRATES	NEGATIVE		
MICROSCOPIC EXAMINATION	-		
PUS CELLS	1 - 2 / HPF	1 - 2 /HPF	
EPITHELIAL CELLS	2 - 3 /HPF	1 - 2 / HPF	
RBC'S	NIL /HPF	0 - 1/HPF	
CASTS	NIL /HPF		
CRYSTALS	NIL /HPF		
OTHERS	NIL		

\*\*\*End of the report\*\*\*

**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : SE0056084,	<b>Sample Date</b> : 08-03-2024 09:07
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 08-03-2024 11:08
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### BIOCHEMISTRY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>THYROID PROFILE</b>			
TRI-IODOTHYRONINE(T3)	1.10 ng/ml	0.3 - 2.0	ECLIA
THYROXINE (T4)	9.03 ug/dl	0.5 - 12.0	ECLIA
THYROID STIMULATING HORMONE(TSH)	1.2 uIU/ml	0.2 - 5.0	ECLIA

\*\*\*End of the report\*\*\*

**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

<b>Name</b>	: Mrs. V S RAJESWARI S	<b>MR No</b>	: 105133584
<b>Age/Gender</b>	: 56 Y/F	<b>Visit ID</b>	: OP232436170
<b>Sample ID</b>	: SE0056084,	<b>Sample Date</b>	: 08-03-2024 09:07
<b>Consultant Dr.</b>	: Dr. Likhita Dasari	<b>Report Date</b>	: 08-03-2024 11:09
<b>Prescribing Dr.</b>	: Dr. CONSULTATION .	<b>Bill Open Date</b>	: 08-03-2024 08:56

## Laboratory Report

### BIOCHEMISTRY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
FASTING BLOOD SUGAR(FBS)	166 mg/dl*	65 - 110	GOD-POD

\*\*\*End of the report\*\*\*

D RAJEEV

Lab Executive



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

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<b>Age/Gender</b>	: 56 Y/F	<b>Visit ID</b>	: OP232436170
<b>Sample ID</b>	: BL0048945,	<b>Sample Date</b>	: 08-03-2024 09:06
<b>Consultant Dr.</b>	: Dr. Likhita Dasari	<b>Report Date</b>	: 08-03-2024 11:09
<b>Prescribing Dr.</b>	: Dr. CONSULTATION .	<b>Bill Open Date</b>	: 08-03-2024 08:56

## Laboratory Report

### BIOCHEMISTRY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
HBA1C	8.4 %	4.0 – 6.0 Normal 6.0 – 7.0 Good Control 7.0 – 8.0 Fair Control > 8.0 Poor Control	ECLIA

\*\*\*End of the report\*\*\*

**D RAJEEV**  
Lab Executive



**Dr. S.V.Ramana .**  
**(MD.PATHOLOGY)**

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : SE0056084,	<b>Sample Date</b> : 08-03-2024 09:07
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 08-03-2024 11:10
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### CLINICAL PATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
URINE FOR SUGAR	NIL		

\*\*\*End of the report\*\*\*


**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**



Patient Name	: Mrs. V S RAJESWARI S	MR No	: 105133584
Age/Sex	: 56 Y/F	Registered Date:	: 08-03-2024 08:51
Doctor	: Dr. CONSULTATION .	Report Date	: 08-03-2024 12:05
		 <small>* 1 0 5 1 3 3 5 8 4 *</small>	

### ULTRASOUND ABDOMEN

Liver is normal in size (14.7 cm) & echotexture. No evidence of any focal solid or cystic lesions. No evidence of any intrahepatic biliary dilatation.

#### **Gall Bladder - Post cholecystectomy status.**

CBD and PV are normal.

Pancreas is normal in size & echotexture. No evidence of focal lesion or calcification.

Spleen is normal in size (10.9 cm) & echotexture. No evidence of focal lesions or calcification.

Right kidney measures (9.8 x 5.1 cm). Normal in size & echotexture. CMD maintained. No evidence of any pelvicalyceal dilatation. **Hyperechoic focus measuring 4mm noted in upper pole calyx.**

Left kidney measures (10.5 x 5.4 cm). Normal in size & echotexture. CMD maintained. No evidence of any pelvicalyceal dilatation. **Hyperechoic focus measuring 4mm noted in mid pole calyx.**

IVC and Aorta - Poor window.

Urinary bladder is well distended. No calculi seen.

Uterus is normal in size measuring (7.7 x 2.8 x 3.5 cm). Endometrial thickness measuring (3mm). No evidence of focal lesions.

#### **Both ovaries - Atrophic.**

No evidence of any free fluid in peritoneal cavity and pelvis.

#### **IMPRESSION :**

\* **Bilateral renal calculi.**

#### **SUGGESTED CLINICAL CORRELATION**

**DR. HARISH  
RADIOLOGIST**

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : SE0056085,	<b>Sample Date</b> : 08-03-2024 11:03
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 08-03-2024 12:18
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### BIOCHEMISTRY


<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
POST LUNCH BLOOD SUGAR(PLBS)	292 mg/dl*	70 - 160	GOD-POD

\*\*\*End of the report\*\*\*

D RAJEEV  
Lab Executive



**Dr. S.V.Ramana .**  
**(MD.PATHOLOGY)**

Patient Name	: Mrs. V S RAJESWARI S	MR No	: 105133584
Age/Sex	: 56 Y/F	Registered Date:	: 08-03-2024 08:51
Doctor	: Dr. CONSULTATION .	Report Date	: 08-03-2024 14:09
		 <small>* 1 0 5 1 3 3 5 8 4 *</small>	

**X-RAY MAMMOGRAPHY OF BOTH BREASTS**

**The breasts show heterogeneous fibro glandular density - Category - B**

**Small well defined round opacity in upper inner quadrant of right breast.**

**Tiny unifocal calcific density noted in upper outer quadrant of left breast.**

**Prominent right axillary lymphnodes with preserved fatty hilum.**

No mass or calcification is seen in either breast.

The retro-mammary space is free.

The nipples are normal with no evidence of retraction.

The skin and subcutaneous tissues are normal.

**IMPRESSION:**

**\* Small well defined round opacity in upper inner quadrant of right breast.**

**\* BIRADS III**

I. Normal.

II. Benign finding.


III. Probably benign, to be followed up after 6 months.

IV. Indeterminate lesion, biopsy necessary.

V. Highly suggestive of malignancy.

**SUGGESTED CLINICAL CORRELATION**

**DR. HARISH  
RADIOLOGIST**

Patient Name	: Mrs. V S RAJESWARI S	MR No	: 105133584
Age/Sex	: 56 Y/F	Registered Date:	: 08-03-2024 08:51
Doctor	: Dr. CONSULTATION .	Report Date	: 08-03-2024 14:14
		 * 1 0 5 1 3 3 5 8 4 *	

### CHEST X-RAY (PA VIEW)

#### **Aortic knuckle calcification.**

The cardio thoracic ratio is normal. The heart size and configuration is within normal limits. The aortic arch is normal.

The lung fields show normal broncho-vascular markings.

Both the pulmonary hila are normal in size.

The costophrenic and cardiophrenic recesses and the domes of diaphragm are normal.

The bones and soft tissues of the chest wall show no abnormality.

**IMPRESSION: Normal study.**

#### **SUGGESTED CLINICAL CORRELATION**

**DR. HARISH  
RADIOLOGIST**

<b>Name</b> : Mrs. V S RAJESWARI S	<b>MR No</b> : 105133584
<b>Age/Gender</b> : 56 Y/F	<b>Visit ID</b> : OP232436170
<b>Sample ID</b> : SO0001513,	<b>Sample Date</b> : 08-03-2024 09:11
<b>Consultant Dr.</b> : Dr. Likhita Dasari	<b>Report Date</b> : 09-03-2024 17:00
<b>Prescribing Dr.</b> : Dr. CONSULTATION .	<b>Bill Open Date</b> : 08-03-2024 08:56

## Laboratory Report

### CLINICAL PATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>STOOL ROUTINE ANALYSIS</b>			
PHYSICAL EXAMINATION	-		
COLOUR	BROWNISH		
APPEARANCE	SEMI SOLID		
MUSCUS	ABSENT		
BLOOD	ABSENT		
CHEMICAL EXAMINATION	-		
STOOL OCCULT BLOOD	NEGATIVE		
REDUSING SUBSTANCE	NIL		
PH	8.0		
STOOL FOR MICROSCOPY	-		
PUS CELLS	1 - 2 /HPF		
EPITHELIAL CELLS	2 - 3 /HPF		
RBC CELLS	NIL /HPF		
OVA	NIL		
CYST	NIL		
OTHERS	BACTERIA PRESENT		

\*\*\*End of the report\*\*\*

**D RAJEEV**

**Lab Executive**



**Dr. S.V.Ramana .  
(MD.PATHOLOGY)**

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<b>Age/Gender</b>	: 56 Y/F	<b>Visit ID</b>	: OP232436170
<b>Sample ID</b>	: TS0002158,	<b>Sample Date</b>	: 11-03-2024 12:28
<b>Consultant Dr.</b>	: Dr. Likhita Dasari	<b>Report Date</b>	: 11-03-2024 12:36
<b>Prescribing Dr.</b>	: Dr. CONSULTATION .	<b>Bill Open Date</b>	: 08-03-2024 08:56

## Laboratory Report

### HISTOPATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Ref Range</u>	<u>Methodology</u>
<b>CERVICAL SMEAR - PAP SMEAR</b>			
CERVICAL SMEAR - PAP SMEAR	-		
PAP CYTO NO	465/P		
SAMPLE TYPE	PAP SMEAR		
MICROSCOPY	Adequately cellular Smears reveals superficial squamous epithelial cells admixed with intermediate squamous cells intervened mildly by inflammatory cells with focal presence of endocervical cell background.		
IMPRESSION	Negative squamous intraepithelial Lesion or malignancy.		

\*\*\*End of the report\*\*\*

**D RAJEEV**

**Lab Executive**



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