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Date 24/02/2024 11:46:10 AM
Name Mrs. KIRAN MEHRA
Ref. By Dr. SAURABH MAYANK

Srl No. 1018
Age 32 Yrs.
Sex F

UHID No. OPD-40751
Printed on 20/03/2024 04:00 PM

Test Name	Value	Unit	Normal Value
<u>COMPLETE HAEMOGRAM</u>			
Erba Mannheim Elite 580			
HAEMOGLOBIN (Hb)	13.3	gm / dL	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	7,340	cells / cu mm	4000 - 11000
<u>DIFFERENTIAL LEUCOCYTE COUNT (DLC)</u>			
NEUTROPHIL	50	%	40 - 75
LYMPHOCYTE	38	%	20 - 40
EOSINOPHIL	05	%	01 - 06
MONOCYTE	07	%	02 - 10
BASOPHIL	00	%	0 - 0
RBC COUNT	4.49	million / cu mm	3.8 - 4.8
P.C.V / HAEMATOCRIT	39.9	%	35 - 45
M C V	88.864	fl.	80 - 100
M C H	29.621	Picogram	27.0 - 31.0
M C H C	33.33	gm / dL	32 - 36
PLATELET COUNT	1,87,000	Lakh / cu mm	150000 - 400000
ESR	60	mm / 1st hr	0 - 20
VESMATIC EASY - AUTOMATED			

HAEMATOLOGY

BLOOD GROUP ABO "O"
RH TYPING POSITIVE

LIVER FUNCTION TEST (LFT)

Roche cobas c 311

BILIRUBIN TOTAL	1.29	mg / dL	0 - 1.2
DPD			
CONJUGATED (D. Bilirubin)	0.48	mg / dL	0.00 - 0.30
Jendrassik-Grof			
UNCONJUGATED (I.D. Bilirubin)	0.81	mg / dL	0.00 - 0.70

LAB TECHNICIAN

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Test Name	Value	Unit	Normal Value
TOTAL PROTEIN Biuret	6.0	gm / dL	6.6 - 8.3
ALBUMIN BCP	4.2	gm / dL	3.5 - 5.5
GLOBULIN	1.8	gm / dL	2.5 - 4.0
A/G RATIO	2.333	%	0.8 - 2.0
SGOT IFCC	53.2	IU / L	5.0 - 45.0
SGPT IFCC	71.3	IU / L	5.0 - 49.0
ALKALINE PHOSPHATASE IFCC	83.0	U / L	60.0 - 170.0
GAMMA GT IFCC	48.8	IU / L	6.0 - 42.0

BIOCHEMISTRY

BLOOD SUGAR FASTING HEXOKINASE	85.7	mg / dL	60.0 - 110.0
SERUM L.D.H	299.0	U / L	0.0 - 250
<u>THYROID PROFILE</u> MINI VIDAS : BIOMERIEUX			
T3 ELFA Method	1.74	ng / mL	0.60 - 1.81
T4 ELFA Method	8.01	ug / dL	4.5 - 10.9
TSH ELFA Method	0.61	uIU / mL	0.35 - 5.50

REFERENCE RANGE

PAEDIATRIC AGE GROUP

0-3 DAYS	1.0 - 20	uIU / mL
3-30 DAYS	0.5 - 6.5	uIU / mL
1 MONTH -5 MONTHS	0.5 - 6.0	uIU / mL
6 MONTHS- 18 YEARS	0.5 - 4.5	uIU / mL

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Test Name	Value	Unit	Normal Value
<u>ADULTS</u>	0.35 - 5.50	uIU / mL	

Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates $\pm 50\%$, hence time of the day has influence on the measured serum TSH concentration.

Assay performed on enhanced chemi luminescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

URINE EXAMINATION TEST

CHEMICAL EXAMINATION

SUGAR

NIL

KIDNEY FUNCTION TEST (KFT)

Roche cobas c 311

BLOOD UREA

20.6

mg / dL

15.0 - 40.0

Urease / GLDH

SERUM CREATININE

0.71

mg / dL

0.6 - 1.2

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SERUM URIC ACID Enzymatic	4.7	mg / dL	2.4 - 6.0
SODIUM ISE	141.2	mEq / L	135.0 - 145.0
POTASSIUM ISE	4.69	mEq / L	3.5 - 5.0
CALCIUM o-cresolphthaleine complexone	8.4	mg / dL	8.6 - 10.0
INORGANIC PHOSPHORUS molybdate UV	2.6	mg / dL	2.5 - 5.0
TOTAL CHOLESTEROL CHOD-PAP	166.0	mg / dL	0.0 - 200.0

**** End Of Report ****

LAB TECHNICIAN



DR. ANAMIKA YADAV
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DEPARTMENT OF RADIOLOGY & IMAGING

PT.NAME: MRS. KIRAN MEHRA

AGE/SEX-32Y/F

UHID NO-40751

DATE: 24/FEB/2024

REF.BY- DR. (MAJ) SAURABH MAYANK

USG WHOLE ABDOMEN

LIVER: is borderline enlarged in size, measures approx 15.4 cms with increased echotexture. **PORTAL VEIN:** is not dilated.

Focal hypoechoic area is seen adjacent to the gall bladder fossa---? Focal fatty sparing.

GALL BLADDER: is partially distended with normal wall thickness.

CBD: is not dilated with clear lumen. No calculus is seen.

PANCREAS: Visualized part of pancreas is normal in size, shape with normal homogeneous echotexture. **MPD:** is not dilated.

SPLEEN: is normal in size (~9.9 cms) and has a normal homogeneous echotexture.

RIGHT KIDNEY: is normal in size and echotexture.

- o Cortical echogenicity is normal.
- o Cortico-medullary demarcation is maintained.
- o Parenchymal thickness appears normal.
- o Pelvicalyceal system is not dilated.

LEFT KIDNEY: is normal in size and echotexture.

- o Cortical echogenicity is normal.
- o Cortico-medullary demarcation is maintained.
- o Parenchymal thickness appears normal.
- o Pelvicalyceal system is not dilated.



URETERS:

- The upper parts of both the ureters are not dilated.
- Bilateral vesico-ureteric junctions are not dilated.


URINARY BLADDER: is partially distended.

No free fluid is seen in the Morrison's pouch, perihepatic space, perisplenic space, para colic gutter and pelvic cavity.

IMPRESSION: *USG appearances are suggestive of -*

➤ ***Borderline hepatomegaly with grade II fatty liver.***

(Adv-Clinico-pathological correlation)



DR. (MAJ) RAVINDER SINGH
MBBS, MD.
Consultant Radiologist

Number of images-04

Note-This is a professional report based on imaging findings only and should always be correlated clinically and with other relevant investigations. This report is not for medico-legal purpose. In case of any discrepancy due to machine error or typing error kindly get it rectified immediately.
