

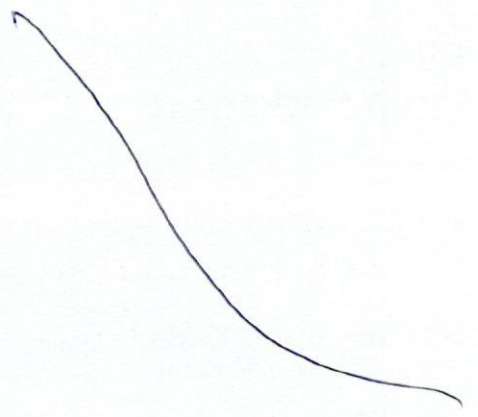
Mrs. Kavita Rajendra Thite

Hb: 11.6

USG A + P: Grade I fatty liver

EGFR: 84

Ref to primary physician



Dr. MILIND SHINDE
MBBS, DNB Medicine
Reg. No. 2011/05/1544



Date:- 23/03/2024

CID: 2408321585

Name:- Mrs. Kavita Rajendra
Thite

Sex / Age: F / 40 Years.

EYE CHECK UP

BP: 120/70

Chief complaints: NO

Systemic Diseases: NO

Past history: }

Unaided Vision: }

Aided Vision:

Refraction: Since 10 yrs

(Right Eye) corrected

(Left Eye) corrected.

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	—	—	—	6/6	—	—	—	6/6
Near	—	—	—	H/6	—	—	—	H/6

Colour Vision: Normal / Abnormal

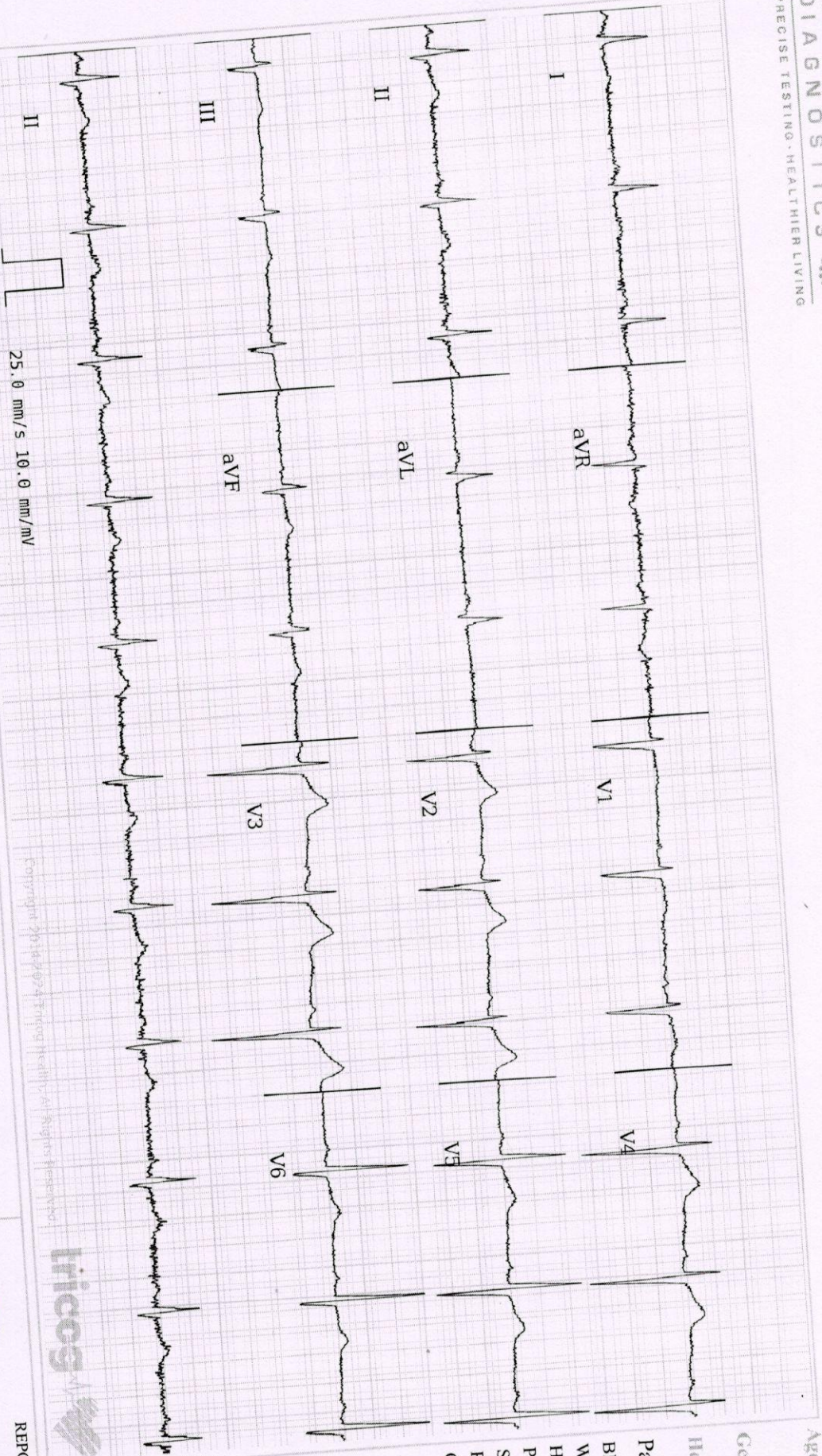
Remark:

M
Dr. MILIND SHINDE
MBBS, DNB Medicine
Reg. No. 2011/05/1544



Patient Name: **KAVITA RAJENDRA THITE**
Patient ID: **2408321585**

SUBURBAN DIAGNOSTICS - LULLANAGAR, PUNE
Date and Time: **23rd Mar 24 10:17 AM**



25.0 mm/s 10.0 mm/mV

REPORTED BY

[Signature]
Dr. Milind Shinde
MBBS, DNB Medicine
2011/05/1544

Measurements
QRSD: 84ms
QT: 410ms
QTcB: 422ms
PR: 140ms
P-R-T: 28° 9° 54°

Age: 40 years NA months NA days
Gender: **Female**
Heart Rate: **64bpm**
Patient Vitals
BP: 120/70 mmHg
Weight: NA
Height: NA
Pulse: NA
SpO2: NA
Resp: NA
Others:

ECG Within Normal Limits: **SINUS RHYTHM**. Please correlate clinically.

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



REGN DATE : 23.03.2024
 AGE:-40 / SEX: / FEMALE.
 NAME :MRS. KAVITA RAJENDRA THITE
 CID : 2408321585

GYNAEC CHECK-UP

History

MH - Past *menopause — 1 year*
 Present

Obs. History - *— 2FTND ^{17F} _{14F}*

Prev Illness - *—*

Prev Op - *— T.h. done 1 1/2 years.*

Drugs - *—*

Breasts:

R - *(N)*

L - *(N)*

PA - *soft*

PS - *—*

PV - *—*

Impression -

vaginitis
MTA VAF

mild G erosion bleeding on touch.

DR.(MRS) PRAVADA M TELANG
 Reg No. 6925
 DIPLOMA IN GYN & OBSTETRICS
 DR. TELANG WOMENS CLINIC
 TELANGANA WOMENS CLINIC
 Kothhawa, Pune-411 040

S. Sulekha
 23/3/24

CID : 2408321585
Name : Mrs KAVITA RAJENDRA THITE
Age / Sex : 40 Years/Female
Ref. Dr :
Reg. Location : Lulla Nagar, Pune Main Centre

Reg. Date : 23-Mar-2024
Reported : 23-Mar-2024 / 16:37

Use a QR Code Scanner
Application To Scan the Code

USG (ABDOMEN + PELVIS)

LIVER :The liver is normal in size (14.9 cm), shape and smooth margins. It shows raised parenchymal echo pattern.The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen.The main portal vein and CBD appears normal.

GALL BLADDER :The gall bladder is partially distended. The visualized gall bladder appears normal. No evidence of pericholecystic fluid is seen.

PANCREAS :The pancreas is well visualised and appears normal.No evidence of solid or cystic mass lesion is noted.

KIDNEYS :Right kidney measures 9.0 x 4.6 cm. Left kidney measures 11.0 x 4.6 cm. Both the kidneys are normal in size, shape and echotexture. No evidence of any calculus,hydronephrosis or mass lesion seen.

SPLEEN :The spleen is normal in size (10 cm), shape and echotexture.No evidence of focal lesion is noted.

URINARY BLADDER :The urinary bladder is well distended.It shows thin walls and sharp mucosa. No evidence of calculus is noted.No mass or diverticulum is seen.

UTERUS :The uterus is anteverted and appears normal. **The endometrial thickness is 5.9 mm.**

OVARIES :Both the ovaries are well visualised and appears normal. There is no evidence of any ovarian or adnexal mass seen.

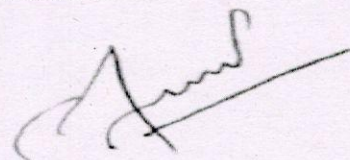
Visualized small bowel loops appear non-dilated. Gaseous distension of large bowel loops. There is no evidence of any lymphadenopathy or ascitis.

IMPRESSION :

- Grade I fatty liver.
- No any other abnormality seen.

Advice - Clinical correlation.

-----End of Report-----



Dr Anand mugaonkar
M.B. B. S. DMRE
REG NO. 2015031031

Click here to view images <<ImageLink>>

Page no 1 of 1

CID : 2408321585
Name : Mrs KAVITA RAJENDRA THITE
Age / Sex : 40 Years/Female
Ref. Dr :
Reg. Location : Lulla Nagar, Pune Main Centre

Use a QR Code Scanner
Application To Scan the Code
Reg. Date : 23-Mar-2024
Reported : 23-Mar-2024 / 16:04

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

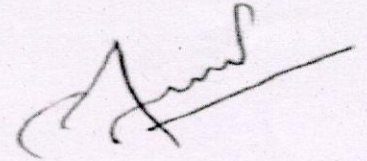
The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----



Dr Anand mugaonkar
M.B. B. S. DMRE
REG NO. 2015031031

Click here to view images <<ImageLink>>

Page no 1 of 1



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:01

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<u>RBC PARAMETERS</u>			
Haemoglobin	11.6	12.0-15.0 g/dL	Spectrophotometric
RBC	4.26	3.8-4.8 mil/cmm	Elect. Impedance
PCV	35.3	36-46 %	Calculated
MCV	83	80-100 fl	Calculated
MCH	27.2	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	14.6	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7800	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	39.5	20-40 %	
Absolute Lymphocytes	3081.0	1000-3000 /cmm	Calculated
Monocytes	2.7	2-10 %	
Absolute Monocytes	210.6	200-1000 /cmm	Calculated
Neutrophils	55.0	40-80 %	
Absolute Neutrophils	4290.0	2000-7000 /cmm	Calculated
Eosinophils	2.5	1-6 %	
Absolute Eosinophils	195.0	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	23.4	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	203000	150000-400000 /cmm	Elect. Impedance
MPV	10.2	6-11 fl	Calculated
PDW	20.0	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



Use a QR Code Scanner
Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:22

Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Normocytic, Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	--
COMMENT	-

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR **42** 2-20 mm at 1 hr. Sedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***




Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:50

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	92.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	124	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***



Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:50

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
KIDNEY FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	14.1	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.6	6-20 mg/dl	Calculated
CREATININE, Serum	0.89	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	84	(ml/min/1.73sqm) Normal or High: Above 90 Mild decrease: 60-89 Mild to moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15	Calculated

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
URIC ACID, Serum	5.7	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.6	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.5	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	139	135-148 mmol/l	ISE
POTASSIUM, Serum	4.6	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	105.9	98-107 mmol/l	ISE

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***



Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:01

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.4	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	108.3	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***



MC-2463

Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 13:21

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Yellow	Pale Yellow	-
Reaction (pH)	Acidic (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	4-5	Less than 20/hpf	

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein (1+ = 25 mg/dl , 2+ =75 mg/dl , 3+ = 150 mg/dl , 4+ = 500 mg/dl)
- Glucose(1+ = 50 mg/dl , 2+ =100 mg/dl , 3+ =300 mg/dl ,4+ =1000 mg/dl)
- Ketone (1+ =5 mg/dl , 2+ = 15 mg/dl , 3+= 50 mg/dl , 4+ = 150 mg/dl)

Reference: Pack inert

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***



Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:32

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	AB
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

Refernces:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***




Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:50

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	141.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	95.7	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	41.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	99.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	80.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	19.3	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.9	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***




Dr.KARAN MAURYA
D.N.B (Path)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:36

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.1	3.10-6.80 pmol/L	ECLIA
Note: Kindly note change in reference range and method w.e.f 12-07-2023			
Free T4, Serum	15.3	12-22 pmol/L Pregnant Women (pmol/L): First Trimester:12.1-19.6 Second Trimester:9.63-17.0 Third Trimester:8.39-15.6	ECLIA
Note: Kindly note change in reference range and method w.e.f 12-07-2023			
sensitiveTSH, Serum	1.86	0.270-4.20 mIU/ml Pregnant Women (microIU/ml): First Trimester:0.33-4.59 Second Trimester:0.35-4.10 Third Trimester:0.21-3.15	ECLIA

Note: Kindly note change in reference range and method w.e.f 12-07-2023 TSH values between 5.5 to 15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH. 2) TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal & heart failure, severe burns, trauma & surgery etc.



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:36

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***



Signature

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 09:48
Reported : 23-Mar-2024 / 12:48

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIVER FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.35	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.2	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.15	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
SGOT (AST), Serum	28.7	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	19.9	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	21.8	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	66.7	35-105 U/L	Colorimetric

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
*** End Of Report ***



Dr. Chandrakant Pawar

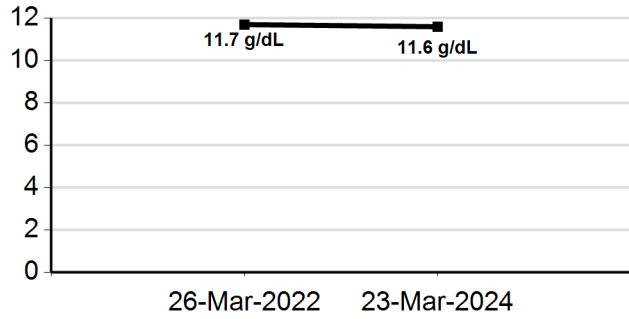
Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



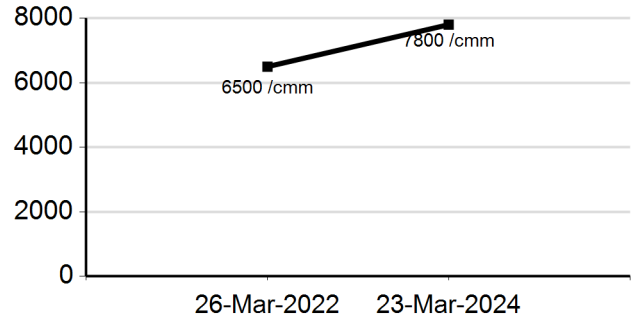
Use a QR Code Scanner Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

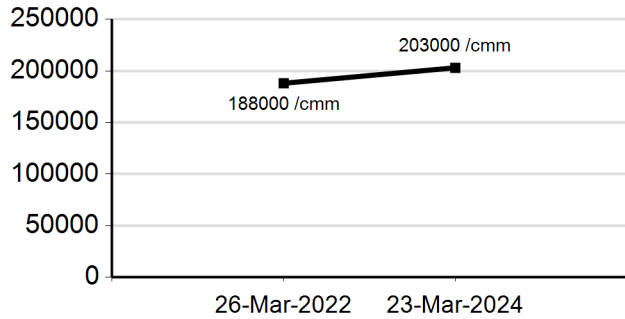
Haemoglobin



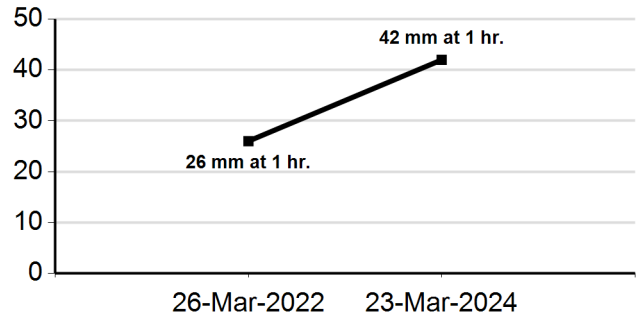
WBC Total Count



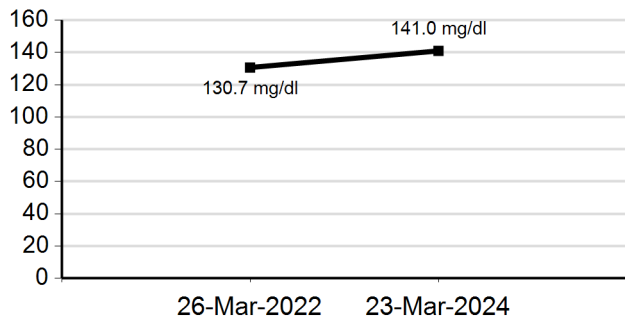
Platelet Count



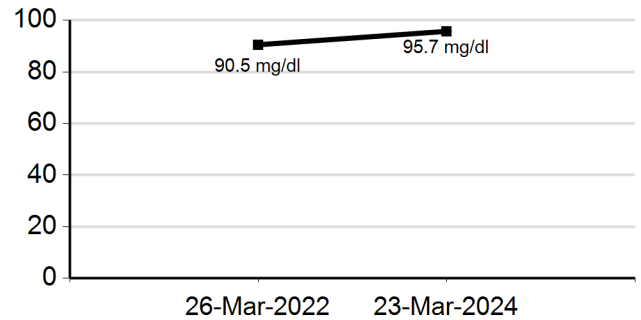
ESR



CHOLESTEROL



TRIGLYCERIDES

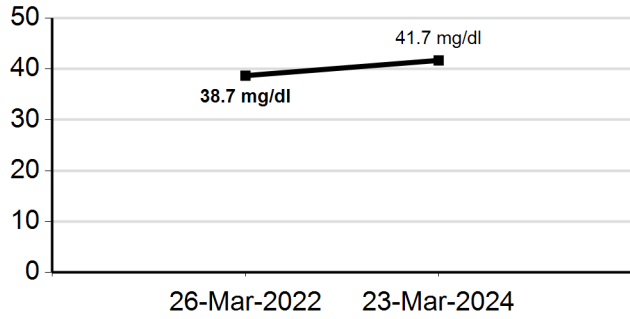




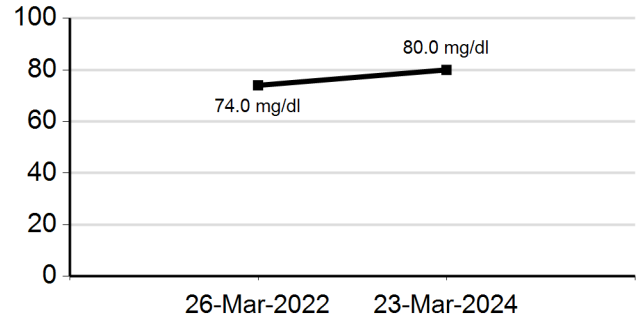
Use a QR Code Scanner
 Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

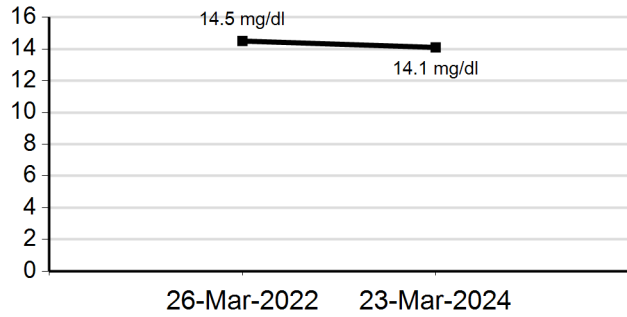
HDL CHOLESTEROL



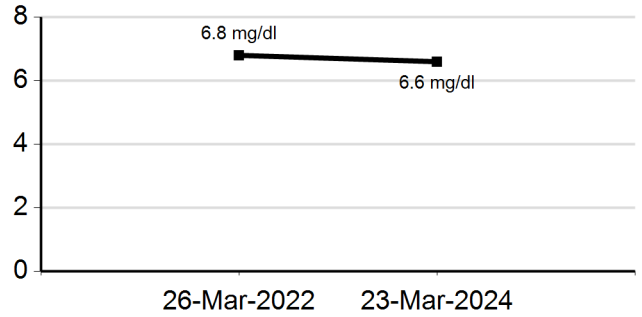
LDL CHOLESTEROL



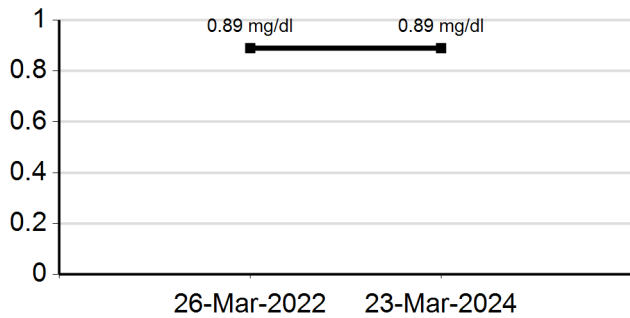
BLOOD UREA



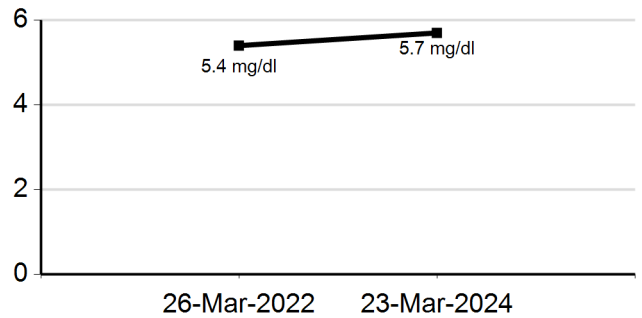
BUN



CREATININE



URIC ACID

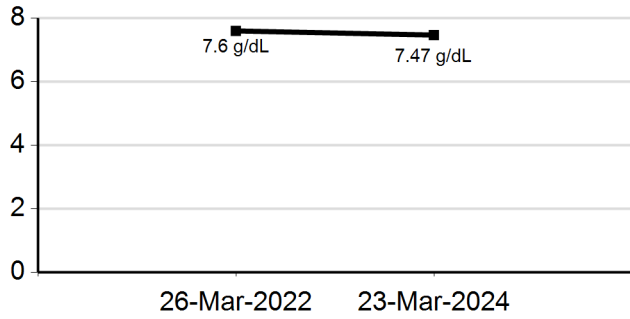




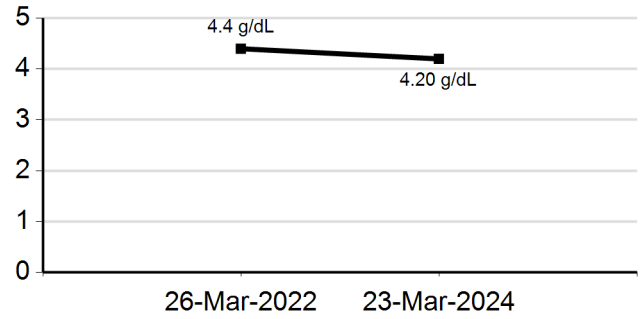
Use a QR Code Scanner
 Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

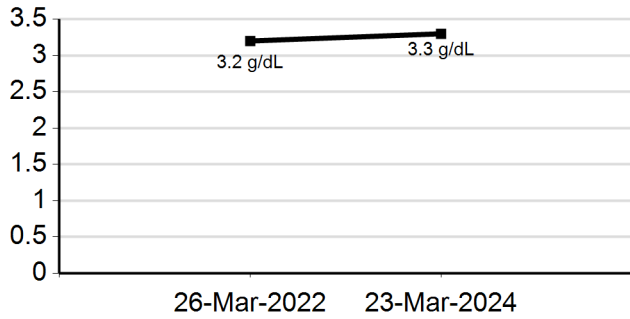
TOTAL PROTEINS



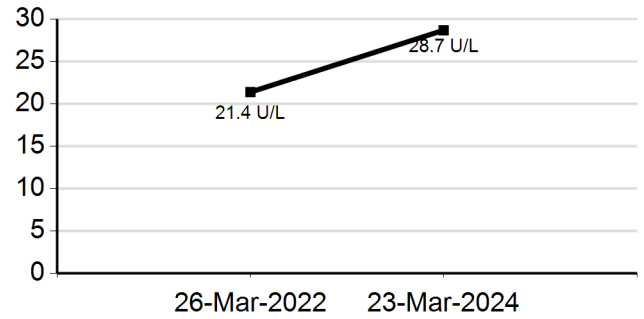
ALBUMIN



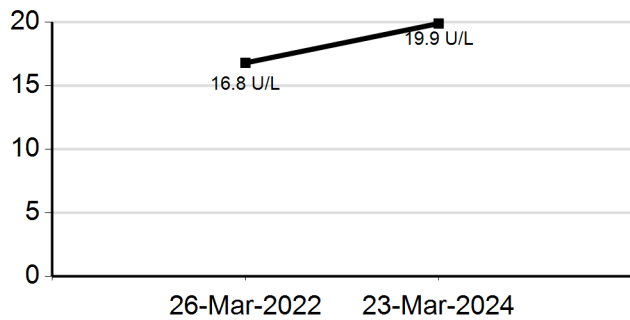
GLOBULIN



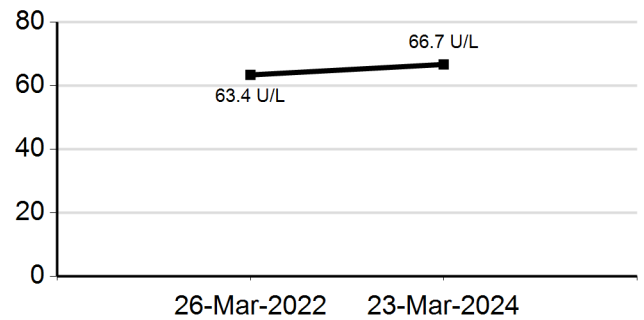
SGOT (AST)



SGPT (ALT)



ALKALINE PHOSPHATASE

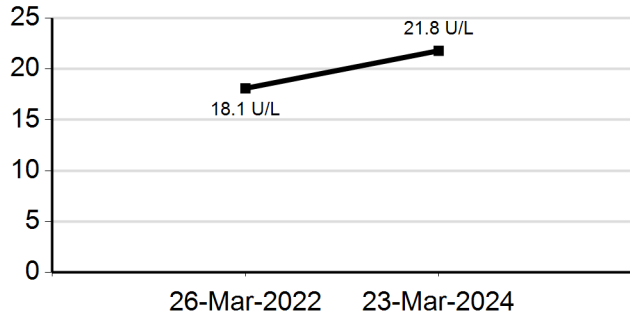




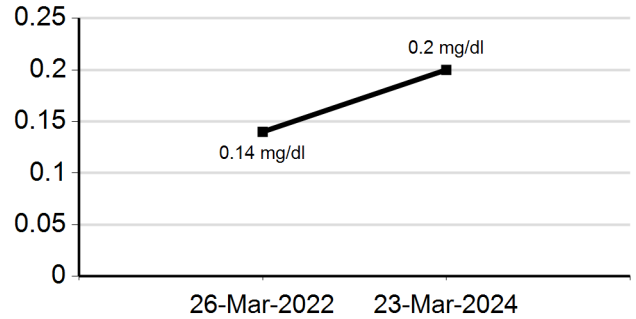
Use a QR Code Scanner
 Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

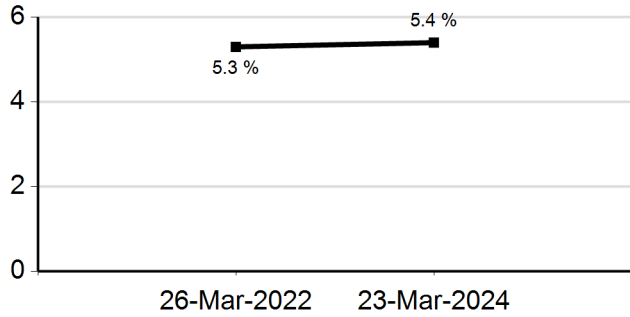
GAMMA GT



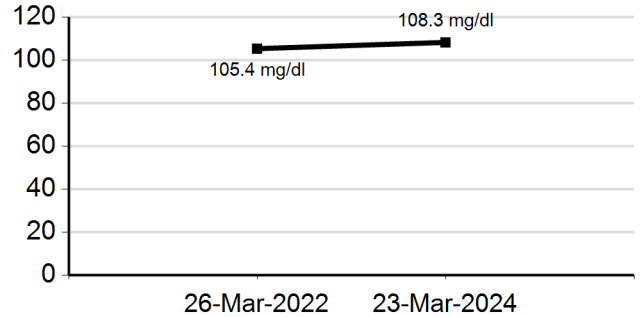
BILIRUBIN (DIRECT)



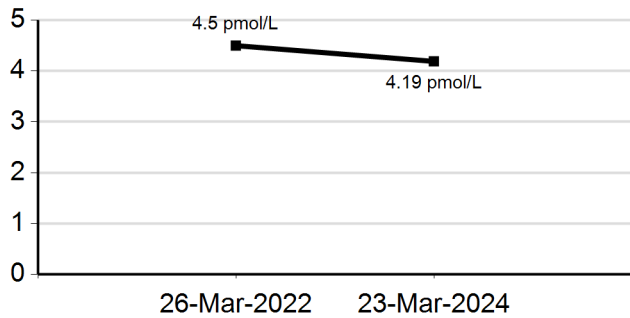
Glycosylated Hemoglobin (HbA1c)



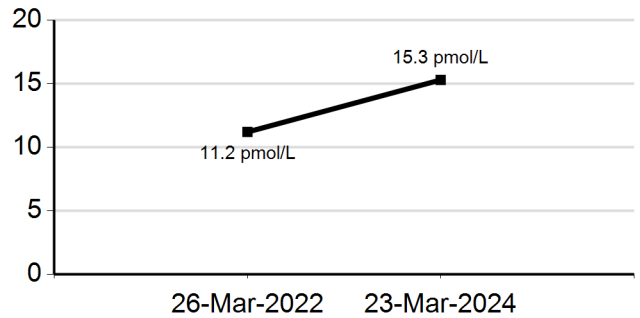
Estimated Average Glucose (eAG)



Free T3



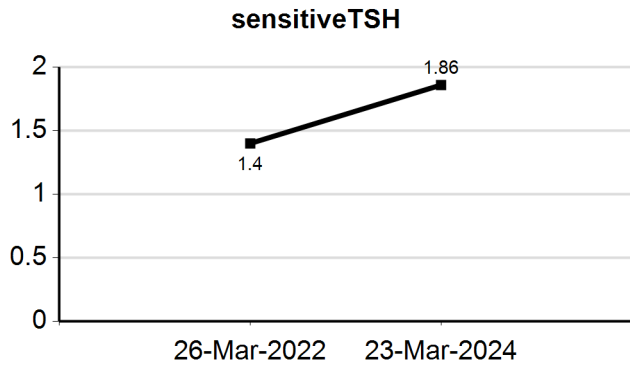
Free T4





Use a QR Code Scanner
Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)





Use a QR Code Scanner
Application To Scan the Code

CID : 2408321585
Name : MRS.KAVITA RAJENDRA THITE
Age / Gender : 40 Years / Female
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 23-Mar-2024 / 12:29
Reported : 26-Mar-2024 / 18:01

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
PAP SMEAR REPORT**

Liquid based cytology

Specimen : (G/SDC - 3679/24)

Received EziPrep vial.

Adequacy :

Satisfactory for evaluation.

Endocervical cells are present.

Microscopic :

Smear reveals mainly intermediate and fewer superficial squamous cells along with moderate neutrophilic infiltrate.

Interpretation :

1. Negative for intraepithelial lesion or malignancy.
2. Inflammatory smear.

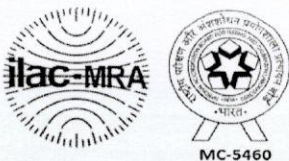
Recommended : Repeat testing after inflammation subsides.

Case reviewed by Dr.Konil Varshney.

Report as per " THE BETHESDA SYSTEM" for cervicovaginal reporting.

Note : : Pap test is a screening test for cervical cancer with inherent false negative results.

LBC samples will be retained for a period of one month after release of report. Any further tests required eg. HPV testing (test code: PATH007131) may be ordered within this period.



Dr.VRUNDA SHETH
MBBS,DNB(Path),Dip.FRCP.
CHIEF OF HISTOPATHOLOGY &
CYTOPATHOLOGY