

पत्र

साथ संलग्न

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41105050

बुकीड: सुविधा,

विषय: बैंक ऑफ बडोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिन्का विवरण निम्नानुसार है, हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैलेंडर वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

नाम	कर्मचारी विवरण
क. कु. मरुया	MS. KUMARI ANITA
पदनाम	171882
कार्य का स्थान	BRANCH OPERATIONS
जन्म की तारीख	DHANBAD, SARAIIDHELA
स्वास्थ्य जांच की प्रस्तावित तारीख	18-10-1987
बुकिंग संदर्भ सं.	29-03-2024
	23M171882100105680E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ बडोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 26-03-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैलेंडर सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपयुक्त सारणी में दी गई कर्मचारी फूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनबॉक्स में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

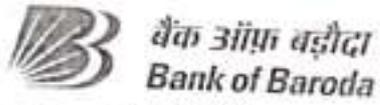
(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ बडोदा



(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



बैंक ऑफ बड़ोदा
Bank of Baroda

नाम : अनिता कुमारी
Name : ANITA KUMARI

कार्यकारी कूट क : 171882
E.C.No. : 171882



Anita Kumari
Signature of Applicant

बैंक ऑफ बड़ोदा लि. १००, कलकत्ता-७५
Bank of Baroda Ltd. 100, Calcutta-75

If found, please return to,
Dy General Manager
Bank of Baroda, Baroda Surya Bhawan, Main Road Bistapur
Jharkhand- 831001, Jharkhand
Phone: 931 687 2249410

PERMANENT ADDRESS: Wo- Shashi Shekhar Green, Vill- Brambe, Po- Brambe,
Ps- Mandar 836201 Ranchi, Jharkhand

EMERGENCY CONTACT NO.: 9546271611

रक्त समूह / Blood Group : O+

चिह्न / Identification Marks : Cut Mark On Left Side Of Elbow




भारत सरकार
 Government of India


 अनिता कुमारी
 Anita Kumari
 पिन (M/D/OB): 18/10/1987
 लिंग: FEMALE

8701 9810 1253
 VID: 8101 7376 1809 8800

मेरा आसपार, मेरी पहचान

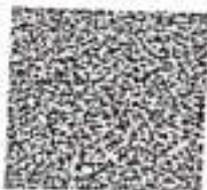



 भारतीय पहचान, पंजीकरण प्राधिकरण
 Unique Identification Authority of India

विधि:
 UID एनए डेटा, uidai.gov.in, विनाईड
 केंद्र, ईडी
 अहमदाबाद - 385205

Address:
 D/O Chandra Orson, P.O.Pali, P.S.Ratu, Chitar
 Kola Barketoli, Ranchi,
 Jharkhand - 835205

8701 9810 1253
 VID: 8101 7376 1809 8800




MRS ANITA KUMARI
Female

29-Mar-24 16:53:49

ASAPTI INST. OF CARDIAC SCIENCES



Rate 97 . Sinus rhythm.....Normal P axis, V-rate 50- 99

PR 150
 QRS 84
 QT 344
 QTc 437

--AXIS--
 P 60
 QRS 60
 T 32

12 Lead: Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

P 50- 0.50-100 Hz W

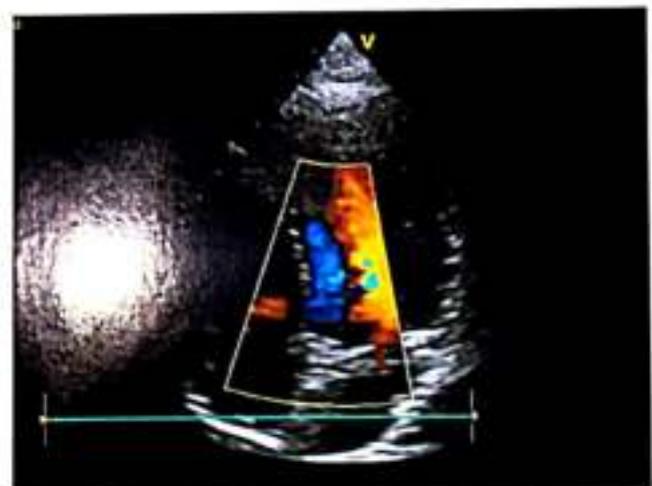
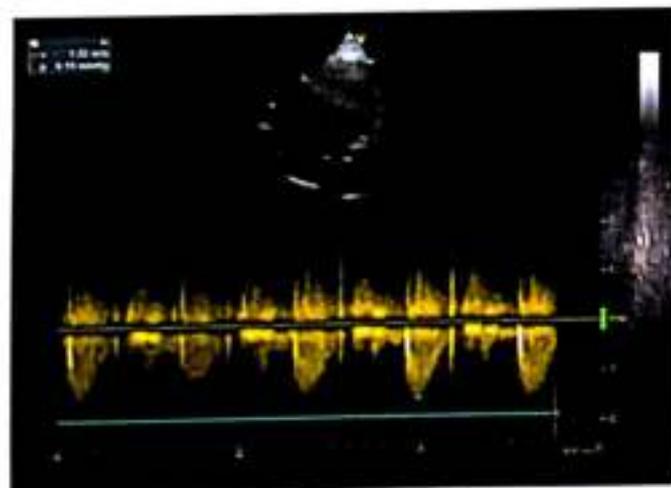
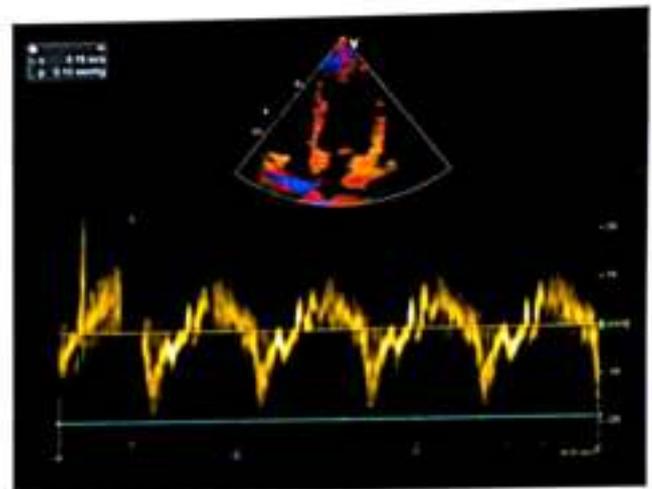
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ASARFI INSTITUTE OF CARDIAC SCIENCES

Name : MRS ANITA KUMARI

Date : 29/03/2024

Patient Id : 80705



REPORT

ECHOCARDIOGRAPHY REPORT

Name: MRS ANITA KUMARI

Age: 36

Sex: Female

Date: 29/03/2024

2D & M-MODE MEASUREMENTS

LA Diam	2.2 cm
Ao Diam	2.0 cm
IVSd	0.9 cm
LVIDd	3.6 cm
LVPWd	0.9 cm
IVSs	1.2 cm
LVIDs	2.3 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	53 ml
ESV(Teich)	19 ml
EF(Teich)	65 %
%FS	35 %
SV(Teich)	35 ml
LVd Mass	101.12 g
RWT	0.51

MITRAL VALVE

MV E Vel	1.09 m/s
MV DecT	160 ms
MV Dec Slope	6.8 m/s ²
MV A Vel	0.62 m/s
MV E/A Ratio	1.77
E'	0.16 m/s
E/E'	6.92

AORTIC VALVE

AV Vmax	1.52 m/s
AV maxPG	9.19 mmHg

TRICUSPID VALVE

PULMONARY VALVE

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-57%)
- NORMAL MITRAL INFLOW PATTERN
- NO MR, AR, TRACE TR, NO PAH
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL ECHO STUDY


DR. S.H. CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH. SIG

OUR FACILITIES

• MRI-3Tesa • CARDIAC CT & CORONARY ANGIO • USG-4D • MAMMOGRAPHY • DIGITAL X-RAY • ENDOSCOPY
ECHO • EEG • ECG • TMT • PATHOLOGY • PREVENTIVE CANCER SCREENING • OPG • FIBRO SCAN • NCV
All Biopsies Including TRUS Guided Biopsy

Patient's Name : ANITA KUMARI

Age : 36 Yrs.

Referred by Dr. : M/O ASARFI HOSPITAL

Test Date : 29.03.2024

Patient ID : 240329/56

Sex : FEMALE

Report Date : 29.03.2024

ULTRASONOGRAPHY OF WHOLE ABDOMEN

- LIVER** : Is normal in size & shape. Parenchyma shows homogenous in echopattern. No focal lesion is seen. IHBR are not dilated. Portal vein is normal in diameter.
- GALL BLADDER** : Is normal in size. Wall thickness is normal. No calculus or sludge is seen.
- CBD** : Is normal in diameter. No calculus is seen within the lumen.
- PANCREAS**: Is normal in size and homogenous in echopattern. MPD is not dilated.
- SPLEEN** : Is normal in size and homogenous in echopattern. No focal lesion is seen.
- KIDNEYS** : Right kidney is normal in size. Parenchymal echogenicity is normal. Cortico-medullary distinction is preserved. No calculus is seen. Pelvicalyceal system is not dilated.
Left kidney is normal in size. Parenchymal echogenicity is normal. Cortico-medullary distinction is preserved. No calculus is seen. Pelvicalyceal system is not dilated.
- URETERS** : Are not dilated.
- URINARY BLADDER** : Is adequately distended. Wall thickness is normal. No calculus is seen.
- UTERUS** : Is normal in size (measures- 87mm in long axis). Myometrial echopattern is homogenous. No mass lesion seen. Endometrial thickness is normal. Cervix appears normal.
- ADNEXAE** : Bilateral ovaries are normal in size.
No mass lesion or cyst is seen in bilateral adnexal region.
No free fluid is seen in peritoneal cavity.

IMPRESSION

- Ultrasonography whole abdomen is within normal limit.

Suggested : Clinical correlation & further investigation.


DR. M K JHA
MBBS (CMC, Kolkata)
MD, Radiology (IPGME & R, Kolkata)
FRCR-II A (London)
Consultant [Radiology & Imaging]



DR. SUMIT AGARWAL
MBBS, DNB (Rad. Diagnosis)
Hinduja hospital Mumbai
Ex SR Cooper hospital Mumbai.
FMF ID- 275506

Typed by:-...Varsha....

DHANBAD

Shri Ram Vatika, Barwa Road, Dhalya, Dhanbad-826001
+91 9155001151/50 ✉ imagicahealthscandhanbad@gmail.com



RADIOLOGY REPORT

Patient Name :	MRS ANITA KUMARI	Patient ID :	80705
Modality :	DX	Sex :	F
Age :	36Y	Study :	CHEST PA
Reff. Dr. :	DR SELF	Study Date :	29-03-2024

X-RAY CHEST (PA VIEW)

OBSERVATIONS:

- B/L lung fields are normal.
- Both hila appear normal in size and density.
- Trachea is central.
- Heart size appears normal.
- Both costophrenic angles appear normal.
- Both domes of diaphragm appear normal in outline and position.
- The bony cage and surrounding soft tissue is normal.

IMPRESSION: Normal study.

Please correlate clinically.

Bishnu Prasad Tripathy

Dr. Bishnu P Tripathy, MD

Consultant Radiologist

Registration No: - 21792/2016

Date 30-03-2024 Time 09-36-36



Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.



24 HOUR EMERGENCY

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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuni, Bishunpur Polytechnic, Dhanbad 826 130

Ph. No. 7808368888, 9297862282, 9234681514



FINAL REPORT

Name : MRS. ANITA KUMARI
 Reg. No. : MAR24-80705
 Age / Sex : 36 Y 5 M 11 D / Female
 Doctor : Self-Walkin
 Pat. Type : Mediwheel



Collection Time : 29-03-2024 10:41:29
 Receiving Time : 29-03-2024 10:42:11
 Reporting Time : 29-03-2024 13:55:37
 Publish Time : 29-03-2024 3:13 pm

Test Name	Result	Flag	Unit	Reference Range
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Biochemistry

Creatinine, Serum

Method: Enzymatic

Creatinine, Serum

0.6

Machine Name: XL640

mg/dl

0.6-1.4

Uric Acid, Serum

Method: Enzymatic

Uric Acid, Serum

3.3

L

Machine Name: XL640

mg/dl

3.4-7.0

Blood Urea Nitrogen (BUN)

Method: Calculated

Blood Urea Nitrogen (BUN)

6.3

L

Machine Name: XL640

mg/dl

07-21

Fasting Blood Glucose, Plasma

Method: GOD-POD

Fasting Blood Glucose, Plasma

92.0

Machine Name: XL640

mg/dl

70-110

LIPID PROFILE, SERUM

Method: Spectrophotometry

Triglycerides (Enzymatic)

85.0

Machine Name: XL640

mg/dl

Normal: <150

Borderline-high:

150-199 High risk

200-499

Very high risk >500

Cholesterol, Total (CHOD/PAP)

177.0

mg/dl

<200 No risk 200-239

Moderate

risk >240 High risk

VLDL Cholesterol (Calculated)

17

mg/dl

0-30

HDL Cholesterol (Enzymatic)

57.5

L

mg/dl

<40 High Risk ; >60 No

Risk



DR. N. N. SINGH
 MD (PATHOLOGY)

Get this report on the Asarfi Hospital App for Medico-Legal purposes

(1) It is presumed that the test(s) performed are on the specimen(s) (Sample(s)) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s). (2) Laboratory investigations are only test to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico-legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/serum etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the name on the test requisition form. (5) The Results of the Test May vary from lab to lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email-asarfihospital@gmail.com

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Pat. Type : Mediawheel



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Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	102.5	H	mg/dl	Optimum:<100 Above optimum:<130; Moderate risk:130-159; High risk>160
Cholesterol Total : HDL Ratio (Calculated)	3.08		mg/dl	1.2-6.0
GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD				
Method : HPLC / Nephelometry				
HbA1C	5.6		%	4.4-6.2
Estimated average glucose (eAG)	114.02		mg/dl	

Machine Name: BIO-RAD, D-10 / MSPA

Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.

Note: 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.

FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HbA1C RESULTS |

_____ | _____ |
Hemoglobin variants, elevated fetal	Any condition that shortens erythrocyte
hemoglobin (HbF) and chemically	survival or decreases mean erythrocyte
modified derivatives of hemoglobin	age (e.g., recovery from acute blood loss,
(e.g. carbamylated Hb in patients	hemolytic anemia, HbS5, HbCC, and HbSC)
with renal failure) can affect the	will falsely lower HbA1c test results
accuracy of HbA1c measurements	regardless of the assay method used. Iron
deficiency anemia is associated with	
higher HbA1c	



DR N N SINGH
MD (PATHOLOGY)

Caution of Laboratory Test Results:
(1) It is presumed that the tests performed are on the specimen(s) (Sample(s)) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) (Sample(s)). Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (2) Tests results are not valid for medico-legal purposes. (3) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/Spemic etc. (c) Incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (f) The Results of the Test May vary from lab to lab and also from time to time for the same patient. (g) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology (7) In case of queries or unexpected test results please call at +91 9297862282, Email: lab.asarfi@gmail.com

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Publish Time : 29-03-2024 3:13 pm

Test Name	Result	Flag	Unit	Reference Range
Liver Function Test (LFT)				
Method : Spectrophotometry				
Bilirubin Total (Diazo)	2.1	H	mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.6	H	mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	1.5	H	mg/dl	0.00-1.0
SGPT (IFCC without PDP)	16.8		U/L	7-50
SGOT (IFCC without PDP)	18.5		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	235.0		U/L	70-306
GGT (Enzymatic)	18.9		U/L	0-55
Protein Total (Biuret)	7.9		g/dl	6.4-8.3
Albumin (BCG)	4.5		g/dl	3.5-5.2
Globulin (Calculated)	3.4		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.32			0.8-2.0

Machine Name: XL-640



DR N N SINGH
MD (PATHOLOGY)

Get Test Results on the App for Medical/Legal purposes
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 Pat. Type : Mediwheel



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 Receiving Time : 29-03-2024 10:42:15
 Reporting Time : 29-03-2024 19:16:05
 Publish Time : 30-03-2024 1:11 pm

Test Name	Result	Flag	Unit	Reference Range
Glucose, PP Method: GOD-POD	110.7		mg/dl	70-140

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine



DR N N SINGH
 MD (PATHOLOGY)

Division of Laboratory Testing & Analysis

Page 3 of 30

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Reg. No. : MAR24-80705
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Test Name	Result	Flag	Unit	Reference Range
Clinical Pathology				



DR N N SINGH
MD (PATHOLOGY)

Caution: For Hospital Use Only - Not for Medical-Legal purposes.
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"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuni, Bishnupur Polytechnic, Dhanbad 826 130

Ph. No : 7806368888, 9297862282, 9234681514



FINAL REPORT

Name : MRS. ANITA KUMARI
Reg. No. : MAR24-80705
Age / Sex : 36 Y 5 M 11 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 29-03-2024 10:41:29
Receiving Time : 29-03-2024 10:42:11
Reporting Time : 29-03-2024 13:55:37
Publish Time : 29-03-2024 3:13 pm

Test Name	Result	Flag	Unit	Reference Range
Routine Urine Examination; Urine				
Method: Microscopic				Machine Name: Microscope
Leukocytes	NEGATIVE			
Appearance	SLIGHTLY HAZY			
Colour	STRAW			
Volume	15		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	7.0			
Specific Gravity	1.010			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	1-2		/hpf.	
Epithelial Cells	1-2		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	



DR N N SINGH
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Reporting Time : 29-03-2024 13:55:37
Publish Time : 29-03-2024 3:13 pm

Test Name	Result	Flag	Unit	Reference Range
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN		.	
Protein:Creatinine Ratio; Urine				
Method : Immunoturbidimetry, Spectrophotometer				
Protein	108.0		mg/L	
Creatinine	32.84		mg/dl	
PCR	3.29		mg/g	0-0.5




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Get the report in Hindi for medical-legal purposes. (1) It is presumed that the test(s) performed are on the specimen(s) (Sample(s)) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s). (2) Laboratory investigations are only for to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico-legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/serum, etc. (c) incorrect specimen type for requested test. (d) Specimen quality is unsatisfactory. (e) There is a discrepancy between the label on the specimen container and the name on the test requisition form. (5) The Results of the Test may vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email: labasarfi@gmail.com

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Reg. No. : MAR24-80705
Age / Sex : 36 Y 5 M 0 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 29-03-2024 10:41:29
Receiving Time : 29-03-2024 10:42:13
Reporting Time : 31-03-2024 11:58:01
Publish Time : 01-04-2024 10:31 am

Test Name	Result	Flag	Unit	Reference Range
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Microbiology

Culture & Sensitivity (Urine)

Method : vitek 2 compact

Machine Name : vitek 2 compact

Organism Isolated

NO GROWTH OF ANY ORGANISM

Note:

In view of developing antibiotics resistance in india. It is advisalbe to use anitblotics belonging to Group B & C only if the patient is resistant to antibiotics.

* Insturment used Bact/Alert 3D 60 & vitek 2 compact.



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Condition of Laboratory Testing & Reporting

(1) The responsibility for the accuracy of the test results (Sample) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen. (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Test results are not valid for medico legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/spinnic etc.) (b) Informed specimen type for requested test. (c) Specimen quality is unsatisfactory. (5) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (6) The Results of the Test May vary from lab and also from time to time for the same patient. (7) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (8) In case of queries or unexpected test results please call at +91 9297862282, Email-labaaa@gnail.com

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Test Name	Result	Flag	Unit	Reference Range
Haematology				
BLOOD GROUP, ABO & RH TYPING				
Method: Agglutination				
ABO GROUP	O	-		0-0
RH TYPING	POSITIVE	-		0-0
ESR (Erythrocyte Sedimentation Rate)				
Method: Westergren				
ESR	09		mm/hr	0-10

Machine Name: VES-MATIC 20
 mm/hr



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Test Name	Result	Flag	Unit	Reference Range
Nature of Material: EDTA Blood Sample				
Complete Blood Count (CBC)				
Method: Electronical Impedence			Machine Name: Sysmex 6 part	
Hemoglobin (Photometry)	9.7	L	g/dl	13-18
PCV (Calculated)	34.1	L	%	40-50
MCH (Calculated)	20.7	L	Pg	27-31
MCHC (Calculated)	28.4	L	g/dl	31.5-35.5
Red Cell Distribution Width (RDW) (Electrical Impedence)	17.6	H	%	11.6-14
Total Leukocyte Count (TLC) (Electrical Impedence)	4,400		/cu-mm	4000-11000
RBC Count (Electrical Impedence)	4.69		million/mm3	4.5-5.5
Mean Corpuscular Volume (MCV) (Electrical Impedence)	72.7	L	fl	83-101
Platelet Count (Electrical Impedence)	1.43	L	lakhs/cumm	1.5-4.5
Neutrophils (VCS Technology)	57		%	55-75
Lymphocytes (VCS Technology)	35	H	%	15-30
Eosinophils (VCS Technology)	04		%	1-6
Monocytes (VCS Technology)	04		%	2-10
Basophils (VCS Technology)	00		%	0-1



DR N N SINGH
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सर्वोपरि उक्तानि निष्कर्षाणि प्राप्तानि सन्ति।
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Test Name	Result	Flag	Unit	Reference Range
Immunology and Serology				
THYROID PROFILE, TOTAL, SERUM				
Method : ECLIA				
T3, Total	1.31		ng/ml	0.8-2.0
T4, Total	7.79		µg/dL	5.10-14.10
TSH (Ultrasensitive)	3.18		mIU/mL	0.27-4.2

Machine Name: Vitros EO

Interpretation:

- TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50% ; hence time of the day has influence on the measured serum TSH concentrations.
- Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
- Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
- Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.




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Baramuri, Bishunpur Polytechnic, Dhanbad - 828 130 (Jharkhand)
7707013096, 7808368888 | www.asarfihospital.com, info@asarfihospital.com

PHC

PRESCRIPTION FOR GLASS

Reg No. 80705

Date: 29/08/24

Name: MRS Anita Kumari

Age: 36 Gender: M F

	RIGHT EYE				LEFT EYE			
	D SPH	D CYL	AXIS	VISION	D SPH	D CYL	AXIS	VISION
FOR DISTANCE VISION	<u>0.75</u>	<u>---</u>	<u>---</u>	<u>6/6</u>	<u>-1.00</u>	<u>---</u>	<u>---</u>	<u>6/6</u>
ADD FOR NEAR VISION	<u>---</u>	<u>---</u>	<u>---</u>	<u>N6</u>	<u>---</u>	<u>---</u>	<u>---</u>	<u>N6</u>

Lens: White / Photo Chromic / Tinted / Kryptok / Executive / Bifocal / CR 39

P.D.:

m.m. For DV

m.m. For NV

Remarks: Constant use / Distance use / Near use

Refractionist: [Signature]

AHL/D/079/13/October/23



C/O → routine check up

NO Transmittal History

VA < 6/12
6/18 E out glab

NO < 11/6
12/6

EyeID → NO Flat

Contg → CLEAR

SCERA → CLEAR

A/C → deep

LENS → CLEAR

Adv
9P