

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011-41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	NIKITA PARTH GAJJAR
DATE OF BIRTH	25-09-1990
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	10-02-2024
BOOKING REFERENCE NO.	23M172610100088412S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. GAJJAR PARTH ASHWINKUMAR
EMPLOYEE EC NO.	172610
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR B
EMPLOYEE PLACE OF WORK	SONASAN
EMPLOYEE BIRTHDATE	31-07-1987

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 06-02-2024 till 31-03-2024. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

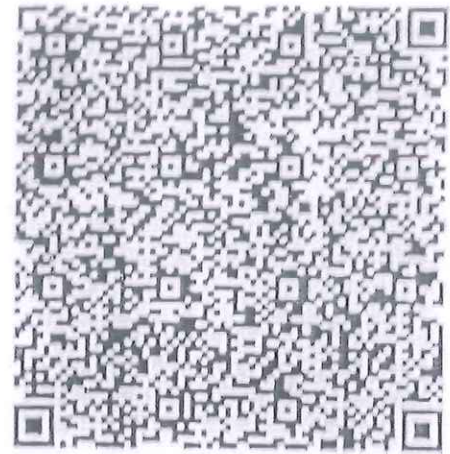
Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

ਮਾਟੀ ਆਇਟ, ਮਾਟੀ ਆਇਟ

2340 1896 3802



ਫੀ / Female

%ਮ ਟੀਟੀਮ / DOB : 25/08/1990

Gajjar Nikita Parth

ਗਜ਼ਰ ਨਿਕਿਟਾ ਪਾਰਥ

Government of India

ਗਿਰਦ ਸਰਕਾਰ



1947



help@uidai.gov.in



www.uidai.gov.in



2340 1896 3802



भारतीय पहचान प्राधिकरण
Unique Identification Authority of India

સરનામું:

W/O ગાજર પાર્થ, પ્લોટ નં-169/2,
આનંદવાટિકા સોસાયટી, સેક્ટર-22,
ગાંધીનગર, ગાંધીનગર સેક્ટર ૨૧,
ગુજરાત, ૩૮૨૦૨૧

Address:

W/O Gajjar Parth, Plot No-169/2,
Anandvatika Society, Sector-22,
Gandhinagar, Gandhinagar Sector
21, Gujarat, 382021

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



aashka
H O S P I T A L



DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	OSP 33245	Date:	16-2-24	Time:	
Patient Name:	Nikita				
History:	Retinal detachment				
Allergy History:	None				
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:	BS S/C				
Diagnosis:	None				

Rx						
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination: *Continue Exam*

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

DR

Other Advice:

2/A
6 months

Follow-up:

6 months

Consultant's Sign:

Tris



Name: Nishtar Begum Age: 34 yrs

Complaints:
None

No of deliveries: 1st ND/9/14
Last Delivery: 3 yrs

History of abortion: none
H/O medical conditions associated:

DM
HTN
Thyroid

Last abortions: —

MH: Racem Reg:

LMP: 1/2/24

P/A:

P/S: [Signature]

P/N:

Sample:-
Vagina
Cervix

Doctors Sign:- [Signature]

10.02.2024 11:50:10 AM

AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

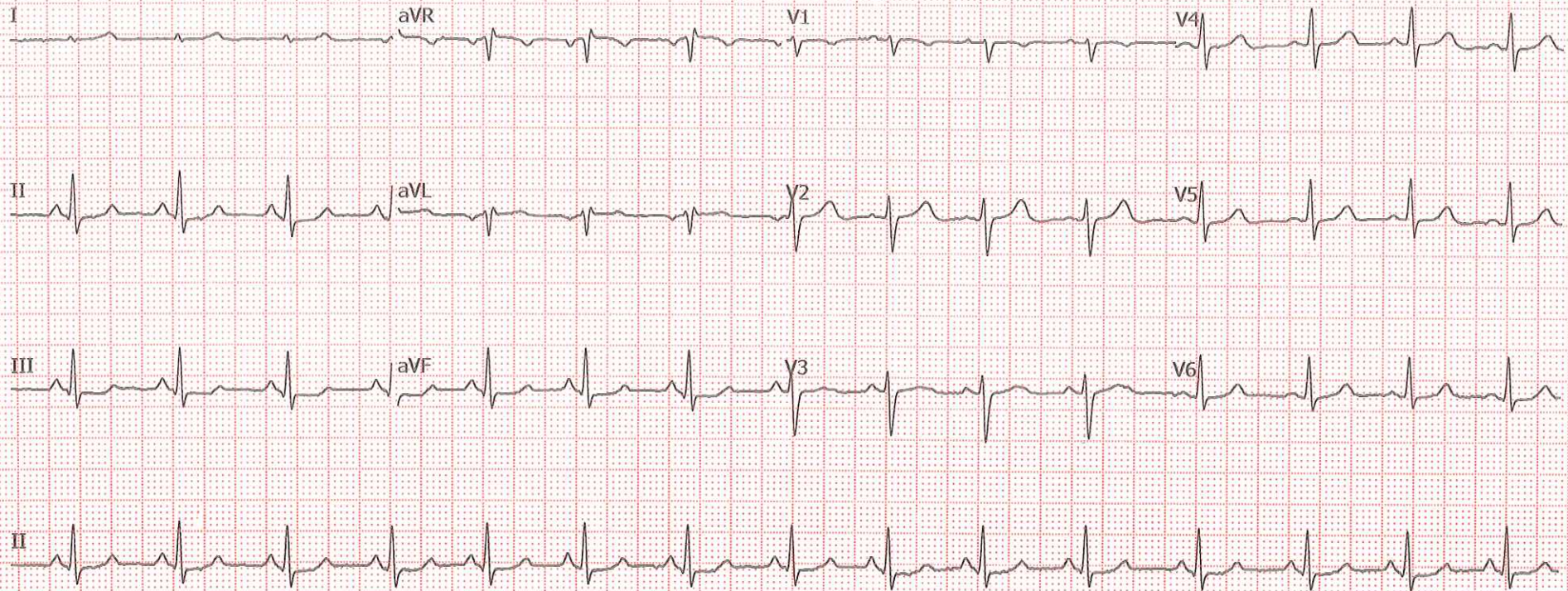
Room:

91 bpm
--/-- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 80 ms
QT / QTcBaz : 350 / 430 ms
PR : 120 ms
P : 96 ms
RR / PP : 660 / 659 ms
P / QRS / T : 83 / 89 / 45 degrees

Normal sinus rhythm
Normal ECG



Aashka Hospitals Ltd.

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Sargasan, Gandhinagar - 382421, Gujarat, India
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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka
H O S P I T A L



PATIENT NAME: NIKITA PARTH GAJJAR

GENDER/AGE: Female / 33 Years

DOCTOR:

OPDNO: OSP33246

DATE: 10/02/24

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and show tiny calculus of about 4 mm. No evidence of changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 9.4 x 4.2 cms in size.

Left kidney measures about 9.6 x 4.1 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 130 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 4.2 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

COMMENT: Tiny GB calculus.

Normal sonographic appearance of liver, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd:

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



PATIENT NAME: NIKITA PARTH GAJJAR

GENDER/AGE: Female / 33 Years

DOCTOR:

OPDNO: OSP33246

DATE: 10/02/24

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST



LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
 Ref.By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :
 Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:54
 Sample Date and Time : 10-Feb-2024 09:54
 Report Date and Time :

Sample Type :
 Sample Coll. By :
 Acc. Remarks : Normal

Mobile No : 9016044004
 Ref Id1 : osp33246
 Ref Id2 : O23249976

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
RBC (Electrical Impedance)	4.88	millions/cu mm	3.80 - 4.80
Platelet Count	428000	/ μ L	150000.00 - 410000.00
Lipid Profile			
Cholesterol	207.17	mg/dL	110 - 200
LDL Cholesterol	133.88	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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CONDITIONS OF REPORTING

1. The laboratory shall not be held responsible for any errors or omissions which are imposed by the limits of sensitivity and specificity of the test or by the quality of the specimen received by the laboratory. Isolated laboratory results are not to be used for the diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with the clinical picture of the patient and other investigations.

2. The laboratory shall not be responsible for the sample received.

3. The report is valid only if the specimen is received in full without written approval of the Neuberg Suprotech Reference Laboratory.

4. The laboratory shall not be held responsible to collect the concerned laboratory personnel as suggested in the table to the form, for their action, rechecking, repeat sampling, reflexion/confirmatory testing, etc.). Neuberg Suprotech Reference Laboratory is not liable in case of any error or omission of reporting & preserving samples after testing for a stipulated period, after the retention period of the sample of fresh specimen is requested.

5. Sample Reports are valid only in the laboratory of the referring doctor only.

6. The laboratory shall not be held responsible for any errors or omissions which are imposed by the limits of sensitivity and specificity of the test or by the quality of the specimen received by the laboratory. Isolated laboratory results are not to be used for the diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with the clinical picture of the patient and other investigations.

7. The laboratory shall not be held responsible for any errors or omissions which are imposed by the limits of sensitivity and specificity of the test or by the quality of the specimen received by the laboratory. Isolated laboratory results are not to be used for the diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with the clinical picture of the patient and other investigations.

8. The laboratory shall not be held responsible for any errors or omissions which are imposed by the limits of sensitivity and specificity of the test or by the quality of the specimen received by the laboratory. Isolated laboratory results are not to be used for the diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with the clinical picture of the patient and other investigations.

Job Reports & Advisory Services

Job Reports & Advisory Services	Contact Numbers
Infective Aetio. & Immunology	079-40408120
Microbiology	079-40408145
Immunopathology & Chemistry	079-40408132
Chemopathology & Clinical Pathology	079-40408114
Physiology, Immunology & Biotechnology	079-40408117
Genetics	079-40408161

Other Services

Other Services	Contact Numbers
Microbiology & Immunology	7698009812
Microbiology & Immunology	9824002011
Microbiology & Immunology	9824723315
Microbiology & Immunology	98244408721
Microbiology & Immunology	7698009903

9. The laboratory shall not be held responsible for any errors or omissions which are imposed by the limits of sensitivity and specificity of the test or by the quality of the specimen received by the laboratory. Isolated laboratory results are not to be used for the diagnosis of the disease, but only help in arriving at a diagnosis in conjunction with the clinical picture of the patient and other investigations.

Neuberg Suprotech Branches in Ahmedabad

1. P. No. 202, 2nd Floor, 1st Cross, 6th Street, 6357244307, Bopunagar - 685678001/22.
 2. P. No. 2, 1st Floor, 1st Cross, 23450003, Dopal - 02717-23586182, Gato - 6857244303
 Bhavnagar - 9879624264

Neuberg Suprotech Collection Centers in Ahmedabad

1. P. No. 202, 2nd Floor, 1st Cross, 6th Street, 6357244307, Bopunagar - 685678001/22.
 2. P. No. 2, 1st Floor, 1st Cross, 23450003, Dopal - 02717-23586182, Gato - 6857244303

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 2. P. No. 2, 1st Floor, 1st Cross, 23450003, Dopal - 02717-23586182, Gato - 6857244303

Regd. Office:

Neuberg Suprotech Reference Laboratories Private Limited
 P. No. 202, 2nd Floor, 1st Cross, 6th Street, 6357244307, Bopunagar - 685678001/22.
 15th Floor, Spathagiri Bhawan, 15, IV Street
 Akshayapuri, Chennai - 600018, Tamil Nadu
 CN - 9821957029 (3PM-1.5) V47



LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
 Ref. By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :
 Pt. Loc :

Case ID : 40202200267
 Pt. ID : 3340339
 Mobile No : 9016044004
 Ref Id1 : osp33246
 Ref Id2 : O23249976

Reg Date and Time : 10-Feb-2024 09:54
 Sample Type : Whole Blood EDTA
 Sample Date and Time : 10-Feb-2024 09:54
 Sample Coll. By :
 Report Date and Time : 10-Feb-2024 10:19
 Acc. Remarks : Normal

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES	RESULTS	UNIT	EXPECTED VALUES	EXPECTED VALUES
Haemoglobin	13.4	G%	12.0 - 15.0	/μL 2000.00 - 7000.00
RBC (Electrical Impedance)	H 4.88	millions/cumm	3.80 - 4.80	/μL 1000.00 - 3000.00
PCV(Calc)	41.33	%	36.00 - 46.00	/μL 20.00 - 500.00
MCV (RBC histogram)	84.7	fL	83.00 - 101.00	/μL 200.00 - 1000.00
MCH (Calc)	27.4	pg	27.00 - 32.00	/μL 0.00 - 100.00
MCHC (Calc)	32.3	gm/dL	31.50 - 34.50	
RDW (RBC histogram)	14.10	%	11.00 - 16.00	
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)				
Total WBC Count	6060	/μL	4000.00 - 10000.00	[Abs] 3878
Neutrophil	[%] 64.0	%	40.00 - 70.00	1454
Lymphocyte	24.0	%	20.00 - 40.00	121
Eosinophil	2.0	%	1.00 - 6.00	606
Monocytes	10.0	%	2.00 - 10.00	0
Basophil	0.0	%	0.00 - 2.00	

PLATELET COUNT (Optical)

Platelet Count	H 428000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	2.67		0.78 - 3.53

SMEAR STUDY

RBC Morphology : Normocytic Normochromic RBCs.
 WBC Morphology : Total WBC count within normal limits.
 Platelet : Thrombocytosis
 Parasite : Malarial Parasite not seen on smear.

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)



Dr. Shreya Shah
 M.D. (Pathologist)

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CONDITIONS OF REPORTING

1. The laboratory's performance is within the limits of sensitivity and specificity of the test. The quality of the specimen received by the laboratory, isolated laboratory and the laboratory's procedures, but only help in arriving at a diagnosis in conjunction with the clinical picture, and does not replace a clinical one.

2. The laboratory is not liable for the results received.

3. All blood banking, serology and other tests are done without written approval of the Neuberg Suprattech Reference Laboratory.

4. The laboratory is not responsible for the concerned laboratory personnel as suggested in the table to the laboratory. But plus up on receiving repeat sampling, reflex confirmatory testing etc. Neuberg Suprattech Reference Laboratory will follow the procedure of retaining & preserving samples after testing for a stipulated period, when the station advised of the result, a fresh specimen is requested.

5. Result report, on the recommendation of the referring doctor only.

6. The laboratory is not responsible for the concerned laboratory personnel as suggested in the table to the laboratory. But plus up on receiving repeat sampling, reflex confirmatory testing etc. Neuberg Suprattech Reference Laboratory (NSRL) locations (within the NSRL network) will follow the procedure of retaining & preserving samples after testing for a stipulated period, when the station advised of the result, a fresh specimen is requested.

7. The laboratory is not responsible for the concerned laboratory personnel as suggested in the table to the laboratory. But plus up on receiving repeat sampling, reflex confirmatory testing etc. Neuberg Suprattech Reference Laboratory (NSRL) locations (within the NSRL network) will follow the procedure of retaining & preserving samples after testing for a stipulated period, when the station advised of the result, a fresh specimen is requested.

8. The laboratory is not responsible for the concerned laboratory personnel as suggested in the table to the laboratory. But plus up on receiving repeat sampling, reflex confirmatory testing etc. Neuberg Suprattech Reference Laboratory (NSRL) locations (within the NSRL network) will follow the procedure of retaining & preserving samples after testing for a stipulated period, when the station advised of the result, a fresh specimen is requested.

Lab Reports & Advisory Services

	Contact Numbers
Blood Bank & Transfusion Services	079-40408120
Chemistry	079-40408145
Subclinical Hematology	079-40408132
Microbiology & Clinical Pathology	079-40408114
Sex & Infectious Laboratory & Electrophoresis	079-40408117
Genetics	079-40408161

Branches

	Contact Numbers
Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla	7698009912
Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla	9824602011
Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla	9824728815
Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla	9824409721
Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla	7698009903

For more information, please contact us at contact@suprattechlabs.com with attention to the concerned personnel.

Neuberg Suprattech Branches in Ahmedabad

Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla, 635676001-22,
 21, Vaidya Sai Chandra Road, 380002, Rajkot - 02717 235681/02, Gero - 6957244303
 Shyamnagar - 9679924264

Neuberg Suprattech Collection Centers in Ahmedabad

Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla, 635676001-22, Rajkot - 02717 235681/02, Gero - 6957244303

Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla

Neuberg Suprattech Reference Laboratory, Dr. Animesh Shukla, 635676001-22,
 21, Vaidya Sai Chandra Road, 380002, Rajkot - 02717 235681/02, Gero - 6957244303

Head Office:

Neuberg Suprattech Reference Laboratories Private Limited
 15, IV Street
 400004, Chennai - 600018, Tamil Nadu
 CN - 08519511201, 3975, 151947



LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
Ref.By : AASHKA HOSPITAL
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
Dis. At :
Pt. ID : 3340339
Pt. Loc :

Case ID : 40202200267

Reg Date and Time : 10-Feb-2024 09:54	Sample Type : Whole Blood EDTA	Mobile No : 9016044004
Sample Date and Time : 10-Feb-2024 09:54	Sample Coll. By :	Ref Id1 : osp33246
Report Date and Time : 10-Feb-2024 10:40	Acc. Remarks : Normal	Ref Id2 : O23249976

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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ESR
Westergren Method

08 mm after 1hr 3 - 20

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Page 3 of 13

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT



Name : NIKITA PARTH GAJJAR Sex/Age : Female/ 34 Years Case ID : 40202200267
Ref.By : AASHKA HOSPITAL Dis. At : Pt. ID : 3340339
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Whole Blood EDTA Mobile No : 9016044004
Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By : Ref Id1 : osp33246
Report Date and Time : 10-Feb-2024 10:13 Acc. Remarks : Normal Ref Id2 : O23249976

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

HAEMATOLOGY INVESTIGATIONS BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type O
Rh Type POSITIVE

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Page 4 of 13

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
 Ref.By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :
 Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Spot Urine
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By :
 Report Date and Time : 10-Feb-2024 11:06 Acc. Remarks : Normal

Mobile No : 9016044004
 Ref Id1 : osp33246
 Ref Id2 : O23249976

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour Pale yellow
 Transparency Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.020		1.005 - 1.030
pH	5.50		5 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/µL	Nil
Yeast	Nil	/µL	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
 M.D. (Pathologist)

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
 Ref.By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :

Case ID : 40202200267
 Pt. ID : 3340339
 Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Spot Urine
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By :
 Report Date and Time : 10-Feb-2024 11:06 Acc. Remarks : Normal

Mobile No : 9016044004
 Ref Id1 : osp33246
 Ref Id2 : O23249976

Parameter	Unit	Expected value	Result/Notations			
			Trace	+	++	+++
pH	-	4.6-8.0				
SG	-	1.003-1.035				
Protein	mg/dL	Negative (<10)	10	25	75	150
Glucose	mg/dL	Negative (<30)	30	50	100	300
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6
Ketone	mg/dL	Negative (<5)	5	15	50	150
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12

Parameter	Unit	Expected value	Result/Notifications			
			Trace	+	++	+++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500
Nitrite(Strip)	-	Negative	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150
Pus cells (Microscopic)	/hpf	<5	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-

Note:(LL-Very Low, L-Low, H-High, HH-Very High , A-Abnormal)



Dr. Shreya Shah
 M.D. (Pathologist)

Page 6 of 13

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT

Name : NIKITA PARTH GAJJAR Sex/Age : Female/ 34 Years Case ID : 40202200267
 Ref.By : AASHKA HOSPITAL Dis. At : Pt. ID : 3340339
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Plasma Fluoride F, Plasma Fluoride PP, Serum Mobile No : 9016044004
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By : Ref Id1 : osp33246
 Report Date and Time : 10-Feb-2024 14:46 Acc. Remarks : Normal Ref Id2 : O23249976

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F <i>Photometric, Hexokinase</i>	99.95	mg/dL	70 - 100	
Plasma Glucose - PP	74.87	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitrogen) <i>GLDH</i>	7.1	mg/dL	7.00 - 18.70	
Creatinine	0.60	mg/dL	0.50 - 1.50	
Uric Acid <i>Uricase</i>	2.71	mg/dL	2.6 - 6.2	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh A-Abnormal)


 Dr. Shreya Shah

M.D. (Pathologist)

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT

Name : NIKITA PARTH GAJJAR

Sex/Age : Female/ 34 Years

Case ID : 40202200267

Ref.By : AASHKA HOSPITAL

Dis. At :

Pt. ID : 3340339

Bill. Loc. : Aashka hospital

Pt. Loc :

Mobile No : 9016044004

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Serum

Ref Id1 : osp33246

Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By :

Ref Id2 : O23249976

Report Date and Time : 10-Feb-2024 14:46 Acc. Remarks : Normal

REMARKS

TEST

RESULTS UNIT BIOLOGICAL REF RANGE

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	H	207.17	mg/dL	110 - 200
HDL Cholesterol		57.3	mg/dL	48 - 77
Triglyceride <i>Glycerol Phosphate Oxidase</i>		79.96	mg/dL	<150
VLDL <i>Calculated</i>		15.99	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>		3.62		0 - 4.1
LDL Cholesterol <i>Calculated</i>	H	133.88	mg/dL	0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240		High 200-499
High 160-189			

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Shreya Shah

M.D. (Pathologist)

Page 8 of 13

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT



Name : NIKITA PARTH GAJJAR
 Ref.By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :
 Pt. Loc :

Case ID : 40202200267

Pt. ID : 3340339

Pt. Loc :

Mobile No : 9016044004

Ref Id1 : osp33246

Ref Id2 : O23249976

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Serum
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By :
 Report Date and Time : 10-Feb-2024 14:46 Acc. Remarks : Normal

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. UV with PSp	16.30	U/L	14 - 59	
S.G.O.T. UV with PSp	18.04	U/L	15 - 37	
Alkaline Phosphatase Enzymatic, PNPP-AMP	97.61	U/L	46 - 116	
Gamma Glutamyl Transferase L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate	21.04	U/L	0 - 38	
Proteins (Total) Colorimetric, Buret	8.28	gm/dL	6.40 - 8.30	
Albumin Bromocresol purple	4.93	gm/dL	3.4 - 5	
Globulin Calculated	3.08	gm/dL	2 - 4.1	
A/G Ratio Calculated	1.6		1.0 - 2.1	
Bilirubin Total Photometry	0.65	mg/dL	0.3 - 1.2	
Bilirubin Conjugated Diazotization reaction	0.31	mg/dL	0 - 0.50	
Bilirubin Unconjugated Calculated	0.34	mg/dL	0 - 0.8	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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 M.D. (Pathologist)

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LABORATORY REPORT



Name : NIKITA PARTH GAJJAR Sex/Age : Female/ 34 Years Case ID : 40202200267
 Ref.By : AASHKA HOSPITAL Dis. At : Pt. ID : 3340339
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Whole Blood EDTA Mobile No : 9016044004
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By : Ref Id1 : osp33246
 Report Date and Time : 10-Feb-2024 10:40 Acc. Remarks : Normal Ref Id2 : O23249976

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Glycated Haemoglobin Estimation

HbA1C	3.95	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	66.67	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia. Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients. Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-Very Low, L-Low, H-High, HH-Very High , A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Page 10 of 13

Printed On : 10-Feb-2024 14:59





LABORATORY REPORT

Name : **NIKITA PARTH GAJJAR** Sex/Age : **Female/ 34 Years** Case ID : **40202200267**
 Ref.By : **AASHKA HOSPITAL** Dis. At : Pt. ID : **3340339**

Bill. Loc. : **Aashka hospital** Mobile No : **9016044004**
 Reg Date and Time : **10-Feb-2024 09:54** Sample Type : **Serum**
 Sample Date and Time : **10-Feb-2024 09:54** Sample Coll. By :
 Report Date and Time : **10-Feb-2024 14:46** Acc. Remarks : **Normal**
 Ref Id1 : **osp33246**
 Ref Id2 : **O23249976**

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Proteins (Total) <i>Colorimetric, Biuret</i>	8.01	gm/dL	6.40 - 8.30
Albumin <i>Bromocresol purple</i>	4.93	gm/dL	3.4 - 5
Globulin <i>Calculated</i>	3.08	gm/dL	2 - 4.1
A/G Ratio <i>Calculated</i>	1.6		1.0 - 2.1

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



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M.D. (Pathologist)

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LABORATORY REPORT



Name : NIKITA PARTH GAJJAR Sex/Age : Female/ 34 Years Case ID : 40202200267
Ref.By : AASHKA HOSPITAL Dis. At : Pt. ID : 3340339
Bill. Loc. : Aashka hospital Pt. Loc :
Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Serum Mobile No : 9016044004
Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By : Ref Id1 : osp33246
Report Date and Time : 10-Feb-2024 11:16 Acc. Remarks : Normal Ref Id2 : O23249976

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3)	84.98	ng/dL	70 - 204	
Thyroxine (T4) <i>CMLA</i>	7.18	ng/dL	4.87 - 11.72	
TSH <i>CMLA</i>	2.10	μIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 μIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 μIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
 Second trimester
 Third trimester

Reference range (microIU/ml)

0.24 - 2.00
 0.43-2.2
 0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



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Page 12 of 13

Printed On : 10-Feb-2024 14:39





LABORATORY REPORT

Name : NIKITA PARTH GAJJAR
 Ref.By : AASHKA HOSPITAL
 Bill. Loc. : Aashka hospital

Sex/Age : Female/ 34 Years
 Dis. At :
 Pt. ID : 3340339
 Pt. Loc. :

Reg Date and Time : 10-Feb-2024 09:54 Sample Type : Serum
 Sample Date and Time : 10-Feb-2024 09:54 Sample Coll. By :
 Report Date and Time : 10-Feb-2024 11:16 Acc. Remarks : Normal

Mobile No : 9016044004
 Ref Id1 : osp33246
 Ref Id2 : O23249976

Interpretation Note:
 Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hypothyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.
 TSH ref range in Pregnancy
 First trimester 0.24 - 2.00
 Second trimester 0.43-2.2
 Third trimester 0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hypertthyroidism	↑	↑	↓
Secondary Hypertthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Pending Services
 Liquid Base Cytology

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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