



Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

Name: ZALKE SATISH SHAMRAO .  
Age : 040 Years  
Gender: M  
PID: P00000644459  
OPD :

Exam Date : 27-Apr-2024 10:07  
Accession: 129702121219  
Exam: CHEST X RAY  
Physician: HOSPITAL CASE^^^^

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

DR. YATIN R. VISAVE  
CONSULTANT RADIOLOGIST  
MBBS, DMRD  
Regd. No. 090812

Date: 27-Apr-2024 15:30:32





Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

<b>Name:</b> ZALKE SATISH SHAMRAO .	<b>Exam Date :</b> 27-Apr-2024 13:20
<b>Age :</b> 040 Years	<b>Accession:</b> 129703121219
<b>Gender:</b> M	<b>Exam:</b> ABDOMEN AND PELVIS
<b>PID:</b> P00000644459	<b>Physician:</b> HOSPITAL CASE <sup>AAAA</sup>
<b>OPD :</b>	

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver is normal in size and shows increased echogenicity suggestive of grade I fatty changes. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.

Pancreas appears normal in size and echotexture. No focal lesion is seen.

Spleen appears normal in size and echotexture. No focal lesion is seen.

Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Prostate is normal in size, shape and echotexture. No obvious focal lesion is seen on present transabdominal study.

Visualised bowel loops are non-dilated and show normal peristalsis.

There is no ascites or significant lymphadenopathy seen.

### IMPRESSION :

**Grade I fatty liver.**

**Suggest : Clinical Correlation.**

DR. YATIN R. VISAVE  
CONSULTANT RADIOLOGIST  
MBBS, DMRD  
Regd. No. 090812

Date: 27-Apr-2024 15:35:52



**2DECHO&DOPPLER REPORT**

**NAME:MR. ZALKE SATISH      AGE:40Yrs/M      DATE:27/04/2024**

MITRAL VALVE: has thin leaflets with normal subvalvar motion.  
 No mitral regurgitation .E= 0.52 & A=0.53 m/sec, E/A ratio- 0.98, E/E' ratio- 4.07  
 AORTIC VALVE : has three thin leaflets with normal opening  
 No aortic regurgitation.AVPG= 5.50 mmHg  
 PULMONARY VALVE; NORMAL,PVPG= 6.57 mmHg  
 LEFT VENTRICLE : is normal , has normal wall thickness, No RWMA at rest .  
 Normal LV systolic function. EF - 60%.  
 LEFT ATRIUM: is normal.  
 RIGHT ATRIUM & RIGHT VENTRICLE: normal in size. TAPSE = 20 mm.  
 TRICUSPID VALVE & PULMONARY VALVES : normal.  
 Trivial TR, PPG = 16 mmHg. RVS Pressure = 21 mmHg.  
 No PH.  
 No pericardial effusion.  
 M- MODE :

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
29mm	28mm	37mm	16mm	10mm	10mm	60%

**IMP :**      **Normal LV Systolic function. EF-60%.**  
**No diastolic dysfunction**  
**No RWMA at rest**  
**Normal Valves and Chambers**  
**IAS & IVS Intact**  
**No clot / vegetation / thrombus / pericardial effusion.**



**DR. KEDAR KULKARNI**  
**DNB(MEDICINE), DNB(CARDIOLOGY)**  
**CONSULTANT INTERVENTIONAL CARDIOLOGIST**



Grant Medical Foundation  
**Ruby Hall Clinic**  
**Hinjawadi**

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No. P-33, Hinjawadi, Pune - 411057  
 Ph. : 020 66999999, E-mail : info@rubyhall.com 24 hrs Helpline - 9422310505

**OPHTHALMOLOGY**

MR. ZALKE SATISH SHAMRAO



Ref: PS008512- Reg: OPS00006042  
 40.5.14/M - NH - 27/04/2024  
 P00000644459 -

NAME

AGE : 41 year.

R

L

- 1) Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{6/6} \quad \underline{6/6} \\ \text{c glasses} \quad \underline{\hspace{10em}} \end{array} \right.$
- 2) Near Vision  $\left\{ \begin{array}{l} \text{unaided} \quad \underline{\hspace{10em}} \\ \text{c glasses} \quad \underline{N/6} \end{array} \right.$
- 3) Binocular Vision  $\underline{\hspace{10em} Normal.}$
- 4) Colour Vision  $\underline{\hspace{10em} Normal.}$
- 5) Tension  $\underline{\hspace{10em} - \hspace{10em} -}$
- 6) Anterior Segment  $\underline{\hspace{10em} WNL}$
- 7) Pupils  $\underline{\hspace{10em} WNL}$
- 8) Lens  $\underline{\hspace{10em} clear.}$
- 9) Media & Fundus  $\underline{\hspace{10em}}$

10) Remarks  $\underline{\hspace{10em}}$   
 $\underline{\hspace{10em} RE plano / Add.}$   
 $\underline{\hspace{10em} (E -0.50 X 90^\circ / +1.00)}$

Date : 27/04/24.

(Signature)

Name of Doctor

Signature of Doctor

27-Apr-2024 9:47

MR. ZALKE SATISH SHAMRAO



Ref: PS008572- Reg: OPS00006042

Medi 40.5.14/M - NH - 27/04/2024

Symt P00000644459 -

Sex

years

1100 Sinus rhythm  
9110 \*\* normal ECG \*\*

mmHg

Vent rate	75	bpm
PR int	172	ms
QRS dur	86	ms
QT/QTc(E) int	352/381	ms
P/QRS/T axis	34/27/34	°
RV5/SV1 amp	1.12/0.43	mV
RV5+SV1 amp	1.56	mV

Unconfirmed Report  
Reviewed by:

10 mm/mV

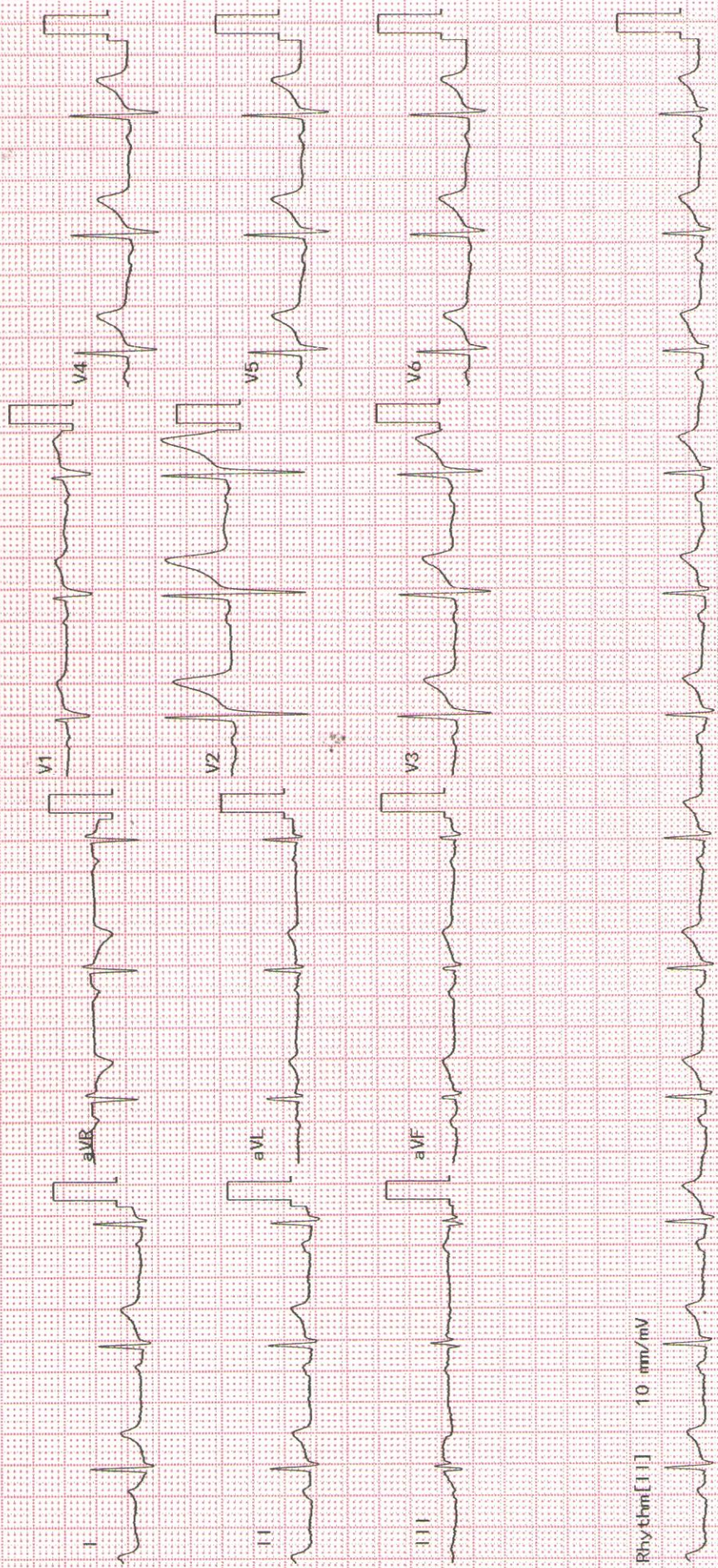
10 mm/mV

10 mm/mV

10 mm/mV

10 mm/mV

10 mm/mV



Rhythm [1] 10 mm/mV



Grant Medical Foundation

**Ruby Hall Clinic**

Pimple Saudagar

Name: Suresh Zolke

Date: 27/4 /2024

Age: 45 Yrs

Gender: M / F

Visited for regular dental check up

Present complaints:

Intra Oral Examination:

1. Stains: , Calculus:
2. Caries: e 7/.
3. Missing:
4. Root stumps:
5. Crown:
6. RC treated:
7. Orthodontic examination:

Treatment Advised:

Restore 7/.

*Dr. Aniket*

**DR. ANIKET MALABADI**

**BDS; MDS**

Ruby Hall Clinic,

Pimple Saudagar.

Mob: 9980283499

www.aniket32.com

<b>Patient Name</b> :	Mr.ZALKE SATISH SHAMRAO	<b>Bill Date</b> :	27-04-2024 09:10 AM
<b>Age / Gender</b> :	40Y(s) 5M(s) 14D(s)/Male	<b>Collected Date</b> :	27-04-2024 09:13 AM
<b>Lab Ref No/UHID</b> :	PS008512/P00000644459	<b>Received Date</b> :	27-04-2024 09:13 AM
<b>Lab No/Result No</b> :	2400163375/911275	<b>Report Date</b> :	27-04-2024 12:09 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
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**FBS**

Glucose (Fasting). Method : GOD-POD	: <b>145</b>	mg/dL	Prediabetic : 100 - 125 Diabetic : >= 126 Normal : < 100.0
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REFERENCE : ADA 2015 GUIDELINES

**CREATININE**

Creatinine Method : Enzymatic	: 0.7	mg/dL	0.6 - 1.3
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**BUN**

Urea Nitrogen(BUN) Method : Calculated	: 12.62	mg/dL	6.0 - 20.0
Urea Method : Urease	: 27	mg/dL	12.8-42.8

**CALCIUM**

Calcium Method : Arsenazo	: 9.2	mg/dL	8.6 - 10.2
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**PHOSPHOROUS**

Phosphorus Method : Phospho Molybdate	: 3.8	mg/dL	2.7-4.5
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**URIC ACID**

Uric Acid Method : Uricase	: 5.1	mg/dL	3.5-7.2
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**LFT**

Total Bilirubin Method : Diazo	: 0.5	mg/dL	0.3 - 1.2
Direct Bilirubin Method : Diazo	: 0.2	mg/dL	0-0.4
Indirect Bilirubin Method : Diazo	: 0.3	mg/dL	0.0 - 0.8
Alanine Transaminase (ALT) Method : Kinetic	: 49.0	U/L	<50
Aspartate Transaminase (AST) Method : Kinetic	: 23.0	U/L	10.0 - 40.0

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<b>Lab No/Result No</b>	: 2400163375/911275	<b>Report Date</b>	: 27-04-2024 12:24 PM
<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: SERUM
		<b>Processing Loc</b>	: RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LFT</b>			
Alkaline Phosphatase <i>Method : 4NPP/AMP BUFFER</i>	: 79.0	U/L	30.0 - 115.0
Total Protein <i>Method : Biuret</i>	: 7.6	g/dl	6.0 - 8.0
Albumin <i>Method : BCG</i>	: 4.2	g/dl	3.5-4.8
Globulin <i>Method : Calculated</i>	: 3.4	gm/dL	2.3-3.5
A/G Ratio <i>Method : Calculated</i>	: 1.24		
<b>PSA BLOOD</b>			
Prostate Specific Antigen (PSA) <i>Method : Enhanced Chemiluminescence</i>	: 0.396	ng/ml	00-4.0

\*\*\* End Of The Report \*\*\*

**Verified By**  
Ruhi S

**Dr.POOJA PATHAK**  
Associate Consultant

**NOTE :**

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<b>Lab Ref No/UHID</b> :	PS008512/P00000644459	<b>Received Date</b> :	27-04-2024 09:13 AM
<b>Lab No/Result No</b> :	2400163376/911275	<b>Report Date</b> :	27-04-2024 12:18 AM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	EDTA WHOLE BLC
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>HAEMOGRAM/CBC/CYTO</b>			
<b>W.B.C.Count</b>	: 8410	/ul	4000-11000
<i>Method : Coulter Principle</i>			
Neutrophils	: 57.1	%	40-75
<i>Method : Derived from WBC Histogram</i>			
Lymphocytes	: 28.5	%	20-40
Monocytes	: 6.5	%	2-10
Eosinophils	: <b>6.9</b>	%	1.0-6.0
Basophils	: 1.0	%	0.0-1.0
%Immature Granulocytes	: 1.0	%	0.00-0.10
Absolute Neutrophil Count	: 4.8	x10 <sup>3</sup> cells/ul	2-7
<i>Method : Calculated</i>			
Absolute Lymphocyte Count	: 2.4	x10 <sup>3</sup> cells/ul	1 - 3
<i>Method : Calculated</i>			
Absolute Monocyte Count	: 0.6	x10 <sup>3</sup> cells/ul	0.2-1.0
<i>Method : Calculated</i>			
Absolute Eosinophil Count	: <b>0.6</b>	x10 <sup>3</sup> cells/ul	0.02-0.5
<i>Method : Calculated</i>			
Absolute Basophil Count	: 0.08	x10 <sup>3</sup> cells/ul	0.02-0.1
<i>Method : Calculated</i>			
R.B.C Count	: 5.05	million/ul	4.5 - 6.5
<i>Method : Coulter Principle</i>			
<b>Haemoglobin</b>	: 14.2	g/dl	13 - 17
<i>Method : Cyanmethemoglobin Photometry</i>			
Haematocrit	: 42.3	%	40-50
<i>Method : Calculated</i>			
MCV	: 83.8	fl	83-99
<i>Method : Coulter Principle</i>			
MCH	: 28.1	pg	27 - 32
<i>Method : Calculated</i>			
MCHC	: 33.6	g/dl	31.5 - 34.5
<i>Method : Calculated</i>			
RDW	: 12.5	%	11.6-14.0
<i>Method : Calculated From RBC Histogram</i>			
<b>Platelet Count</b>	: 412.0	x10 <sup>3</sup> /ul	150 - 450
<i>Method : Coulter Principle</i>			
MPV	: 9.9	fl	7.8-11
<i>Method : Coulter Principle</i>			

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<b>Lab Ref No/UHID</b>	: PS008512/P00000644459	<b>Received Date</b>	: 27-04-2024 09:13 AM
<b>Lab No/Result No</b>	: 2400163376/911275	<b>Report Date</b>	: 27-04-2024 11:15 AM
<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: EDTA WHOLE BLC
		<b>Processing Loc</b>	: RHC Hinjawadi



RBC Morphology : Normocytic normochromic

WBC Morphology : Eosinophilia  
Platelet : Adequate

\*\*\* End Of The Report \*\*\*

**Verified By**  
Snehal

**Dr.POOJA PATHAK**  
Associate Consultant

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**Patient Name** : Mr.ZALKE SATISH SHAMRAO  
**Age / Gender** : 40Y(s) 5M(s) 14D(s)/Male  
**Lab Ref No/UHID** : PS008512/P00000644459  
**Lab No/Result No** : 2400163987-P/911275  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 27-04-2024 09:10 AM  
**Collected Date** : 27-04-2024 12:13 PM  
**Received Date** : 27-04-2024 09:13 AM  
**Report Date** : 27-04-2024 03:48 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
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**PPBS**

Glucose (Post Prandial) : **172** mg/dL 60-140

Method : GOD-POD

\*\*\* End Of The Report \*\*\*

**Verified By**  
Anand

**Dr. Anjana Sanghavi**  
Consultant Pathologist

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**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 27-04-2024 09:10 AM  
**Collected Date** : 27-04-2024 09:13 AM  
**Received Date** : 27-04-2024 09:13 AM  
**Report Date** : 27-04-2024 02:17 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**ESR**

ESR At 1 Hour : 10 mm/hr 0 - 15

Method : Modified Westergren Method

**INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

**Verified By**  
Anand

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**Age / Gender** : 40Y(s) 5M(s) 14D(s)/Male  
**Lab Ref No/UHID** : PS008512/P00000644459  
**Lab No/Result No** : 2400163375/911275  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 27-04-2024 09:10 AM  
**Collected Date** : 27-04-2024 09:13 AM  
**Received Date** : 27-04-2024 09:13 AM  
**Report Date** : 27-04-2024 01:43 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>ELECTROLYTES (Na &amp; K)</b>			
Sodium <i>Method : Potentiometric</i>	: 142.0	mmol/L	136.0 - 145.0
Potassium <i>Method : Potentiometric</i>	: 4.3	mmol/L	3.5 - 5.1
Chloride <i>Method : Potentiometric</i>	: 99.0	mmol/L	98.0 - 107.0

\*\*\* End Of The Report \*\*\*

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Anand

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<b>Lab Ref No/UHID</b> :	PS008512/P00000644459	<b>Received Date</b> :	27-04-2024 09:13 AM
<b>Lab No/Result No</b> :	2400163792/911275	<b>Report Date</b> :	27-04-2024 03:48 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	URINE
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>URINE ROUTINE</b>			
<b>PHYSICAL EXAMINATION</b>			
Colour	: Pale Yellow		
Appearance	: Clear		
<b>CHEMICAL TEST</b>			
Ph	: 5.0		5.0-7.0
Specific Gravity	: 1.025		1.015-1.030
Albumin	: Absent		Abset
Urine Glucose	: 1+	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments	: Absent		Absent
<i>Method : Photometric Measurement</i>			
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent
Leucocytes Esterase	: Absent		Absent
<b>MICROSCOPIC TEST</b>			
Pus Cells.	: 1-2	/hpf	0 - 5
Red Blood Cells.	: Absent	/hpf	0 - 2
Epithelial Cells.	: 1-2	/hpf	0-5
Bacteria	: Absent	/hpf	Absent
Cast	: Absent		Absent
Yeast Cells	: Absent		Absent
Crystals	: Absent		Absent
Others	: Absent		Absent

\*\*\* End Of The Report \*\*\*

**Verified By**  
SACHIN

**Dr. Anjana Sanghavi**  
Consultant Pathologist

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<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LIPID PROFILE</b>			
Cholesterol	: 135.0	mg/dL	130.0 - 220.0
<i>Method : Enzymatic</i>			
Triglycerides	: 140	mg/dL	35.0 - 180.0
<i>Method : Enzymatic</i>			
HDL Cholesterol	: <b>31</b>	mg/dL	35-65
<i>Method : Enzymatic</i>			
LDL Cholesterol	: 76	mg/dL	10.0 - 130.0
<i>Method : Calculated</i>			
VLDL Cholesterol	: 28	mg/dL	5.0-36.0
<i>Method : Calculated</i>			
Cholestrol/HDL Ratio	: 4.35	--	2.0-6.2
<i>Method : Calculated</i>			

\*\*\* End Of The Report \*\*\*

**Verified By**  
 Ruhi S

**Dr.POOJA PATHAK**  
 Associate Consultant

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**Report Date** : 27-04-2024 12:48 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK**

Investigation	Result	Units	Biological Reference Interval
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**BLOOD GROUP**

Blood Group : AB RH POSITIVE

\*\*\* End Of The Report \*\*\*

**Verified By**  
Ardeore

**Dr.POOJA PATHAK**  
Associate Consultant

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**Lab No/Result No** : 2400163377-G/911275  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 27-04-2024 09:10 AM  
**Collected Date** : 27-04-2024 09:13 AM  
**Received Date** : 27-04-2024 09:13 AM  
**Report Date** : 27-04-2024 01:03 PM  
**Specimen** : WHOLE BLOOD  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**GLYCOSYLATED HB% (HbA1C)**

Glycosylated Haemoglobin : **7.6** % 4-6.5

Method : Turbidometric Inhibition  
Immunoassay

Prediabetic : 5.7 - 6.4 %  
Diabetic :  $\geq$  6.5 %  
Therapeutic Target :  $<$ 7.0 %

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Verified By**  
Ruhi S

**Dr.POOJA PATHAK**  
Associate Consultant

**NOTE :**

- \* Kindly Correlate clinically & discuss if necessary.
- \* Results pertain to the specimen submitted.
- \* For 'Terms and Conditions of Reporting', kindly visit our website : www.Rubyhall.com

<b>Patient Name</b> :	Mr.ZALKE SATISH SHAMRAO	<b>Bill Date</b> :	27-04-2024 09:10 AM
<b>Age / Gender</b> :	40Y(s) 5M(s) 14D(s)/Male	<b>Collected Date</b> :	27-04-2024 09:13 AM
<b>Lab Ref No/UHID</b> :	PS008512/P00000644459	<b>Received Date</b> :	27-04-2024 09:13 AM
<b>Lab No/Result No</b> :	2400163375/911275	<b>Report Date</b> :	27-04-2024 12:24 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>T3-T4-TSH -</b>			
Tri-Iodothyronine, (Total T3) <i>Method : Enhanced Chemiluminescence</i>	: 1.53	ng/ml	0.97-1.69
Thyroxine (T4), Total <i>Method : Enhanced Chemiluminescence</i>	: 7.96	ug/dl	5.53-11.01
Thyroid Stimulating Hormone (Ultra). <i>Method : Enhanced Chemiluminescence</i>	: 3.509	uIU/mL	0.40-4.04

1.The TSH levels are subject to diurnal/circadian variation. reaching to peak level between 2 to 4 am. and at a minimum between 6 to 10 pm. The variation is to the order of 50%, hence the time when sample is collected has influence on the levels of TSH 2.Many substances produced in central nervous system, even in healthy euthyroid individuals, may enhance or suppress TSH production in addition to the feedback effect of thyroid hormone . 3.Furthermore, although TSH levels rise and fall in response to changes in the concentration of Free T4, individuals appear to have their own setpoints and factors such as race and age also contribute to variability in TSH levels Alterations of normal pituitary response are also common in patients with a variety of illnesses which can affect the levels of TSH. 4.Interassay variations are possible on different Immunoassay platforms.

TSH - For pregnancy the reference range is as follows -  
 1st -trimester : 0.6 - 3.4 uIU/mL  
 2nd trimester : 0.37 - 3.6 uIU/mL  
 3rd trimester : 0.38 - 4.04 uIU/mL

\*\*\* End Of The Report \*\*\*

**Verified By**  
Snehal

**Dr. Anjana Sanghavi**  
**Consultant Pathologist**

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