



(17)

Ph.: 0621-2222211, 0621-2268042, Mob. : 9661179794, 9471013402

URMILA HEART & MULTI SPECIALITY HOSPITAL

उर्मिला हार्ट एण्ड मल्टी स्पेशियलिटी हॉस्पिटल

Naya Tola, Opp. Polytechnic, Muzaffarpur

डॉ० अनिल कुमार सिंह

एम बी बी एस, डीप कार्ड, पी जी डी सी सी, एफ सी आर,
(अपोलो हॉस्पिटल)

किडनिलियन एवं हृदय रोग विशेषज्ञ

सदर अस्पताल, मुजफ्फरपुर
सुरभुवन कार्डियोलोजिस्ट

फोर्टिस हॉस्पिटल, इस्कॉर्ट हार्ट इन्स्टीट्यूट, नई दिल्ली
सरकारी मेडिकल कॉलेज एच ए एल डी (यूके)
पुष्पांजली हॉस्पिटल, आगरा
मेम्बर ऑफ आई सी सी



समय:-

सुबह 12 बजे से 03 बजे तक
शाम 6:30 बजे से रात्रि 8 बजे तक

Dr. Anil Kumar Singh

M.B.B.S. DIP Card, PGDCC, FCR (Apollo Hospital)

Cardiologist & Consultant Physician

Sadar Hospital, Muzaffarpur

Ex. Cardiologist

Fortis Hospital, Escorts Heart Institute, New Delhi

Govt. Medical College, HALD (UK)

Pushpanjali Hospital, Agra

Member of IACC

Reg. No. : MCI 29808

Pt. Name Mrs. Anu Raha Date 02/12/23

Address B-3 Age 34 Sex F Wt. B.P.

Ad-12/12/23
Ad-29/12
Case-2
pno B/w

ct
7 No No DM
HTN
Hypertension



शनिवार को केवल Emergency मरीज देखा जाएगा।

Valid for 20 Days

Not Valid for Medico Legal Purpose



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ADDITION

Naya Tola, Opp. Poly
Muzaffarpur
Ph. : 0621-22222
0621-22686
Mob. : 96611797
94710134

PATHOLOGY REPORT

Name:- Mrs. Anuradha	Age :34Y/F	Date :-02/12/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No110946)	Serial Number :- 0217

TEST	CBC (Complete Blood Count)		Reference Values
	RESULT	UNIT	
Hb (Haemoglobin)	11.4	gm/dl	12 - 17
Total Leukocyte Count	15,100	/Cumm.	4000 - 11000
RBC Count	4.64	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	35.0	%	30 - 50
Platelet Count	2.77	Lakhs/c.mm	1.5 - 4.5
MCV	78.4	fl	80 - 100
MCH	24.3	pg	26 - 34
MCHC	30.9	gm/dl	31.5 - 35
Differential Leukocyte Count			
Neutrophil	65	%	40 - 70
Lymphocyte	30	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	13	%	01 - 06
Basophil	00	%	<1 - 2 %
ESR	28	mm/1 st hr.	00 - 20

end of report

Signature



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PATHOLOGY REPORT

Name:- Mrs. Anuradha	Age :34Y/F	Date :-02/12/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No110946)	Serial Number :- 0217

KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	24.0	mg/dl	13 - 45
S. Creatinine	0.88	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	11.20	mg/dl	6.0 - 21
S. Sodium (Na ⁺)	137.0	mmol/ltr	135 - 150
S. Potassium(K ⁺)	4.05	mmol/ltr	3.5 - 5.5
S. Chloride(Cl ⁻)	99.3	mmol/ltr	94 - 110
S. Calcium	9.05	mg/dl	8.7 - 11.0
S. Uric Acid	8.83	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

BLOOD GROUPING

Grouping (ABO)	:	"A" Group
Rh Typing	:	Positive.

end of report

Signature



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PATHOLOGY REPORT

Name: Mrs. Anuradha	Age: 34Y/F	Date: 02/12/2023
Ref. By: Dr. Bank Of Barauda	(E.C.No110946)	Serial Number: 0217

LFT (Liver Function Test) - serum

TEST	RESULT	UNIT	Reference Values
S. Total Bilirubin	0.77	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	33.0	U/L	05 - 40
S. SGOT (AST)	38.0	U/L	05 - 40
S. GGT	32.0	U/L	05 - 45
S. Alkaline Phosphatase	101.8	U/L	Adult -- 25 - 140 Children (1 - 12 yrs.) -- 104 - 390
S. Total Protein	7.03	g/dl	6.0 - 8.3
S. Albumin	4.01	g/dl	3.2 - 5.0
S. Globulin	3.02	g/dl	2.8 - 4.5
S. A/G Ratio	1.32	-	-

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Name:- Mrs. Anuradha	Age :34Y/F	Date :-02/12/2023
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Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	195.0	mg/dl	130 - 200
S. Triglycerides	125.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	25.0	mg/dl	10 - 40
S. HDL-Cholesterol	50.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	120.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.90		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.40		1.5 - 3.5

BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Random	108.0	mg/dl	70 - 160

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PATHOLOGY REPORT

Name :- Mrs. Anuradha	Age : 34Y/F	Date :- 02/12/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No110946)	Serial Number :- 0217

GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	4.90	%

Mean Blood Glucose level (MBG) - 95.3 mg/dl

Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

Summary :- Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

end of report

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TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	122.3	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	7.8	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	3.05	µIU/mL	(0.3 - 5.5)

Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensltive Sandwsh Competitive Chemi Luminescent Immuno Assay

REMARK :

THYROID HORMONES -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decrease in thyroid reserve is the diagnostic of primary hypothyroidism. The expeted increase in TSH demonstrate the classical feedback mechanism between pituitary and thyroid gland. Additionally TSH measurement is equally important in differentiating secondary and tertiary(hypothalamic) hypothyroidism. The increase in total T4 and T3 is associated with pregnancy, oral contraceptive and estrogen therapy results into masking of abnormal thyroid function only because of alteration of TBG concentration, which can be monitored by calculating Free Thyroxine Index(FTI) or Thyroid Hormone Binding Ratio(THBR).a

end of report

Signature

