

**Address**

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

**PATHOLOGY REPORT**

Name:- Mrs. Madhunita KUmari	Age :44Y/F	Date :-17/04/2024
Ref.By :- Dr. Bank Of Baroda(E.C.No60765)		Serial Number :- 017

<u>TEST</u>	<u>CBC (Complete Blood Count)</u>		<u>Reference Values</u>
	<u>RESULT</u>	<u>UNIT</u>	
Hb (Haemoglobin)	10.8	gm/dl	12 - 17
Total Leukocyte Count	8,000	/Cumm.	4000 - 11000
RBC Count	4.22	Million/Cumm.	3.8 -5.8
PCV / Haematocrit	35.6	%	30 - 50
Platelet Count	1.56	Lakhs/c.mm	1.5 - 4.5
MCV	84.4	fl	80 - 100
MCH	23.2	pg	26 - 34
MCHC	27.5	gm/dl	31.5 - 35
<b>Differential Leukocyte Count</b>			
Neutrophil	46	%	40 - 70
Lymphocyte	40	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	12	%	01 -06
Basophi	00	%	<1 - 2 %
ESR	20	mm/1 <sup>st</sup> hr.	00 - 20

\*\*\*end of report\*\*\*

  
Signature





# URMILA HEART & MULTI SPECIALITY HOSPITAL

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### KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>		
S. Urea	25.0	mg/dl	13	-	45
S. Creatinine	0.85	mg/dl	Male 0.7	-	1.4
			Female 0.6	-	1.2
S. BUN	11.67	mg/dl	6.0	-	21
S. Sodium (Na <sup>+</sup> )	142.0	mmol/ltr	135	-	150
S. Potassium(K <sup>+</sup> )	4.02	mmol/ltr	3.5	-	5.5
S. Chloride(Cl <sup>-</sup> )	102.1	mmol/ltr	94	-	110
S. Calcium	9.20	mg/dl	8.7	-	11.0
S. Uric Acid	3.70	mg/dl	Male 3.5	-	7.2
			Female 2.5	-	6.2

### BLOOD GROUPING

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

\*\*\*end of report\*\*\*

  
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### LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>	
S. Total Bilirubin	0.77	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12	
S. SGPT (ALT)	28.0	U/L	05 - 40	
S. SGOT (AST)	33.0	U/L	05 - 40	
S.GGT	36.0	U/L	05 - 45	
S. Alkaline Phosphatase	101.3	U/L	Adult – 25 - 140 Children (1 – 12 yrs.) – 104 - 390	
S. Total Protein	7.05	g/dl	6.0 - 8.3	
S. Albumin	3.93	g/dl	3.2 - 5.0	
S. Globulin	3.12	g/dl	2.8 - 4.5	
S. A/G Ratio	1.25			

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### Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	130.0	mg/dl	130 - 200
S. Triglycerides	70.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	14.0	mg/dl	10 - 40
S. HDL-Cholesterol	39.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	77.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.33		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	1.97		1.5 - 3.5

### BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	80.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.30hrs meal)	126.0	mg/dl	80 - 160

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### GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	3.90	%

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Mean Blood Glucose level (MBG) – 89.01 mg/dl

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#### 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	118.0	ng/dL	(60 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	5.02	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	1.89	µIU/mL	(0.3 - 5.5)

### Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwish 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



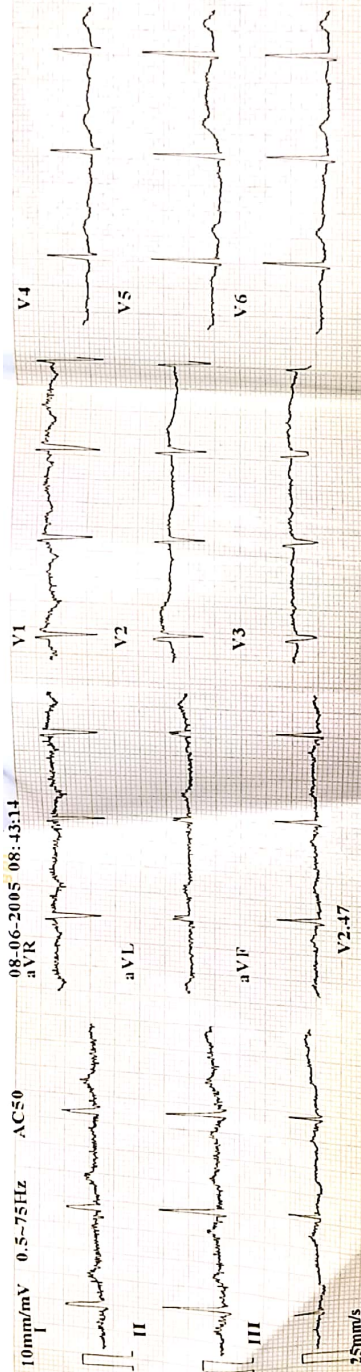
Minnesota Code:  
4-5-0(II)

ID : 050608-0843  
Name :  
Age : 44 yr  
Sex : Female  
BP :  
Height : mmHg  
Weight : cm  
kg

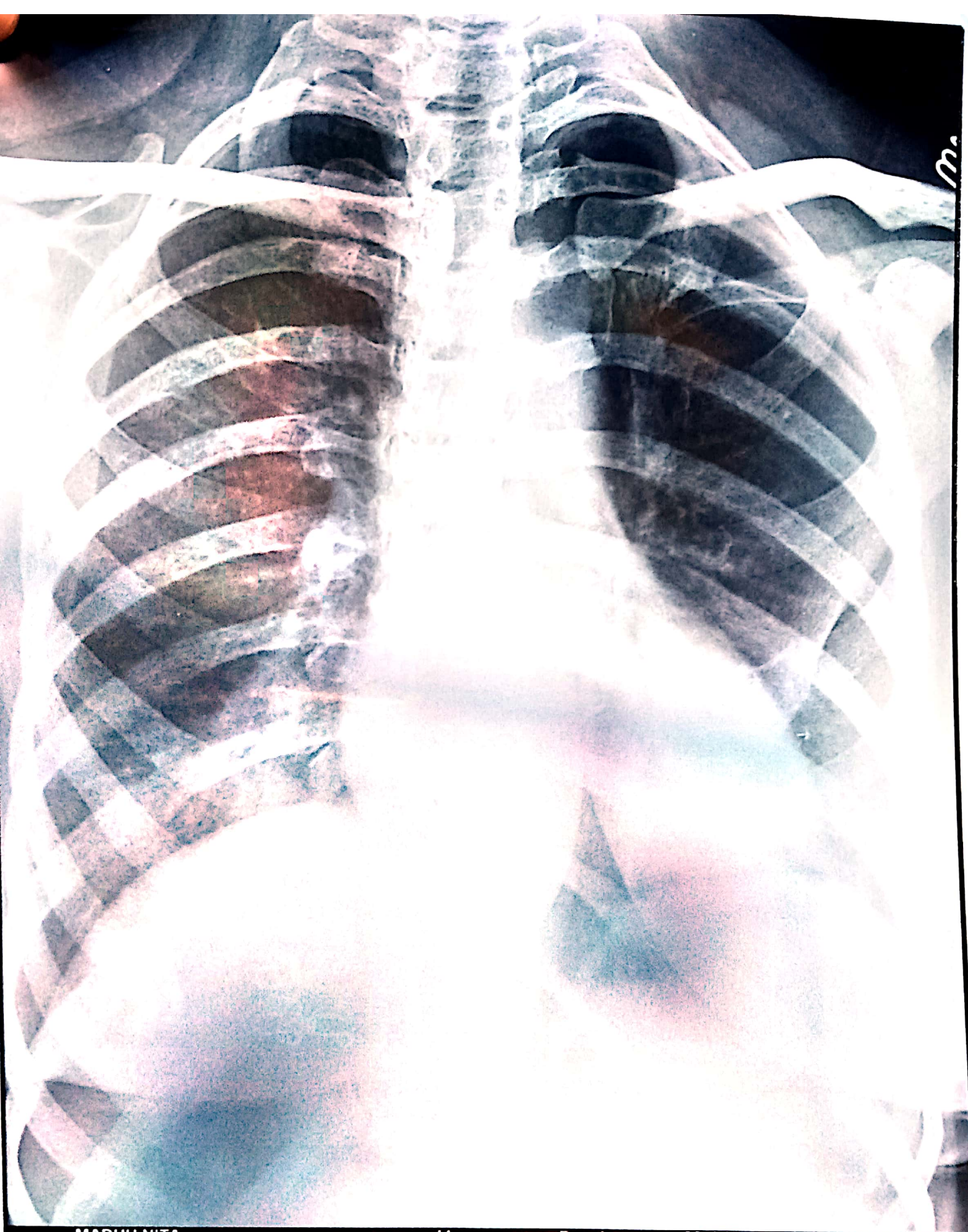
*Pladbury*

Diagnosis Information:  
800: Sinus Rhythm  
\*\*\*Normal ECG\*\*\*

Report Confirmed by:



HR	:	77	bpm	
P	Dur	:	99	ms
PR	int	:	168	ms
QRS	Dur	:	81	ms
QT/QTc	int	:	360/409	ms
P/QRS/T	axis	:	63/33/4	°
RV5/SV1	amp	:	1.295/0.982	mV
RV6/SV1	amp	:	2.277	mV
RV6/SV2	amp	:	1.171/0.673	mV



MADHU NITA

44

Female

69.4 %

Chest PA

17-04-24 1:56:37 PM

DR. A. K. SINGH

URMILA HEART & MULTISPECIALITY HOSPITAL, NAYA TOLA MUZAFFARPUR







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Name :- Mrs. Madhuni Kumari  
Refd. By :- Dr. Self

Date :- 17/04/2024  
Sex :- F

Thanks for the kind referral.  
USG of Whole Abdomen

- Liver:-** Liver is normal shape in size [123.3 mm] with homogenous coarse echo texture. No focal lesion seen or Intrahepatic ducts dilation seen. Movements of both domes of diaphragm appears normal
- GB:-** Normal distention. Walls are not thickened. No evidence of calculus, sludge, or mass lesion seen.
- C.B.D:-** C.B.D. is normal in calibre.
- Pancreas:-** Pancreas normal in size shape and echotexture.
- Spleen:-** Normal in shape, size & contour. (bipolar length is 95.3 mm).
- Kidneys:-** Both kidney are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification, hydronephrotic changes or mass lesion seen.
- Urinary bladder:-** Urinary bladder is smoothly outlined. There is no calculus within.
- Uterus:-** Uterus measures 75.8 x 42.4 x 40.1 mm. A/V in position. Uterus is normal in size and normal echotexture
- Adnexa:-** Both ovaries are normal in size.
- P.O.D.:-** No collection seen.
- Free fluid :-** No free fluid is noted in the peritoneal cavity.

**Impression :- Normal Study.**



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Ref.By :- Dr. Bank Of Baroda	(E.C.No.60765 )	Serial Number :- 0172

### Urine Routine And Microscopy

<u>TEST</u>	<u>RESULTS</u>
<b>Physical Examination</b>	
Volume	20 ml
Colour	Lt.Yellow
Specific Gravity	1.020
Appearance	Clear
pH	5.0
(Acidic)	
<b>Chemical Examination</b>	
Protein	Nil
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D
<b>Microscopic Examination</b>	
Pus Cells	2-3 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	<b>Present (+)</b>
Crystal/Cast	Nil
Other	Nil
***end of report***	

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## ECHOCARDIOGRAPHY REPORT

Name :Mrs. Madhunita  
Date :21/04/2024  
IPID No. :  
Ref. By :BOB

Age/Sex : 44/F  
ECHO No. :  
UHID No. :  
Done By : Dr. Anil Kr. Singh

### MITRAL VALVE

Morphology AML-Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming  
PML-Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.  
Subvalvular deformity Present/Absent. Score: \_\_\_\_\_  
Doppler Normal/Abnormal E>A A>E  
Mitral Stenosis Present/Absent RRInterval \_\_\_\_\_msec  
EDG \_\_\_\_\_mmHg MDG mmHg MVAcm2  
Mitral Regurgitation Absent/Trivial/Mild/Moderate/Severe.

### TRICUSPID VALVE

Morphology Normal/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.  
Doppler Normal/Abnormal  
Tricuspid stenosis Present/Absent RR interval \_\_\_\_\_msec.  
EDG \_\_\_\_\_mmHg MDG \_\_\_\_\_mmHg  
Tricuspid regurgitation: Absent/Trivial/Mild/Moderate/Severe Fragmented signals  
Velocity \_\_\_\_\_msec. Pred. RVSP=RAP+ mmHg

### PULMONARY VALVE

Morphology Normal/Atresia/Thickening/Doming/Vegetation.  
Doppler Normal/Abnormal.  
Pulmonary stenosis Present/Absent Level  
PSG \_\_\_\_\_mmHg Pulmonary annulus \_\_\_\_\_mm  
Pulmonary regurgitation Present/Absent  
Early diastolic gradient \_\_\_\_\_mmHg. End diastolic gradient \_\_\_\_\_mmHg

### AORTIC VALVE

Morphology Normal/Thickening/Calcification/Restricted opening/Flutter/Vegetation  
No. of cusps 1/2/3/4  
Doppler Normal/Abnormal  
Aortic Stenosis Present/Absent Level  
PSG mmHg Aortic annulus \_\_\_\_\_mm  
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe.



<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal values</u>
Aorta 2.8	(2.0 – 3.7cm)	LAes 2.9	(1.9 – 4.0cm)
LV es 2.8	(2.2 – 4.0cm)	LV ed 4.2	(3.7 – 5.6cm)
IVS ed 0.7	(0.6 – 1.1cm)	PW (LV) 1.0	(0.6 – 1.1cm)
RVed	(0.7 – 2.6cm)	RV Anterior wall	(upto 5 mm)
LVVd (ml)		LVVs (ml)	Normal/Flat/Paradoxical
EF 60%	(54%-76%)	IVS motion	

**CHAMBERS:**

LV	Normal/Enlarged/Clear/Thrombus/Hypertrophy Contraction	Normal/Reduced
Regional wall motion abnormality	Absent/Present	
LA	Normal/Enlarged/Clear/Thrombus	
RA	Normal/Enlarged/Clear/Thrombus	
RV	Normal/Enlarged/Clear/Thrombus	
PERICARDIUM	Normal/Thickening/Calcification/Effusion	

**COMMENTS & SUMMARY**

All Chambers are Normal in size  
 gd I LV Diastolic Dysfunction  
 Normal LV Systolic Function  
 No RWMA/LVEF=60%  
 No MR/AR/PR/TR  
 Normal Pericardium

*For A*  
 Dr. Anil Kr. Singh  
 Cardiologist