

Name: ZALKE PRIYANKA SATISH.

033 Years Age:

Gender:

PID:

P00000644463 OPD:

Exam Date :

27-Apr-2024 09:05

Accession: 129705121330

Exam:

ABDOMEN AND PELVIS

Physician:

HOSPITAL CASE^^^^

ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and echotexture. 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 partially distended.

Uterus and Both ovaries grossly normal. No adnexal pathology is seen.

Visualised bowel loops are non-dilated and show normal peristalsis. There is no ascites or significant lymphadenopathy seen.

IMPRESSION: No significant abnormality noted.

Suggest: Clinical Correlation.

DR. YATIN R. VISAVE CONSULTANT RADIOLOGIST MBBS, DMRD

Regd. No. 090812

Date: 27-Apr-2024 15:40:49



Name:

0

ZALKE PRIYANKA SATISH.

Age:

033 Years

Gender: PID:

P00000644463

OPD :

Exam Date :

27-Apr-2024 11:20

Accession: Exam: 129704121330 CHEST X RAY

Physician:

M. 4

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 15:37:42



2DECHO&DOPPLER REPORT

NAME:MRS.ZALKE PRIYANKA AGE:33Yrs/F DATE:27/04/2024

MITRAL VALVE: has thin leaflets with normal subvalvar motion.

No mitral regurgitation .E= 0.73 & A=0.40 m/sec, E/A ratio- 1.83, E/E' ratio- 3.32

AORTIC VALVE: has three thin leaflets with normal opening

No aortic regurgitation. AVPG= 6.25 mmHg

PULMONARY VALVE; NORMAL, PVPG= 4.92 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 = 21 mm.

TRICUSPID VALVE & PULMONARY VALVES: normal.

Trivial TR, PPG = 18 mmHg. RVS Pressure = 23 mmHg.

No PH.

0

No pericardial effusion.

M- MODE:

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
28mm	25mm	40mm	21mm	08mm	08mm	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



PHTHALMOLOGY

NAME

Ref: PS008513- Reg: OPS000060 33.7.13/F - NH - 27/04/2024 P00000644463 -

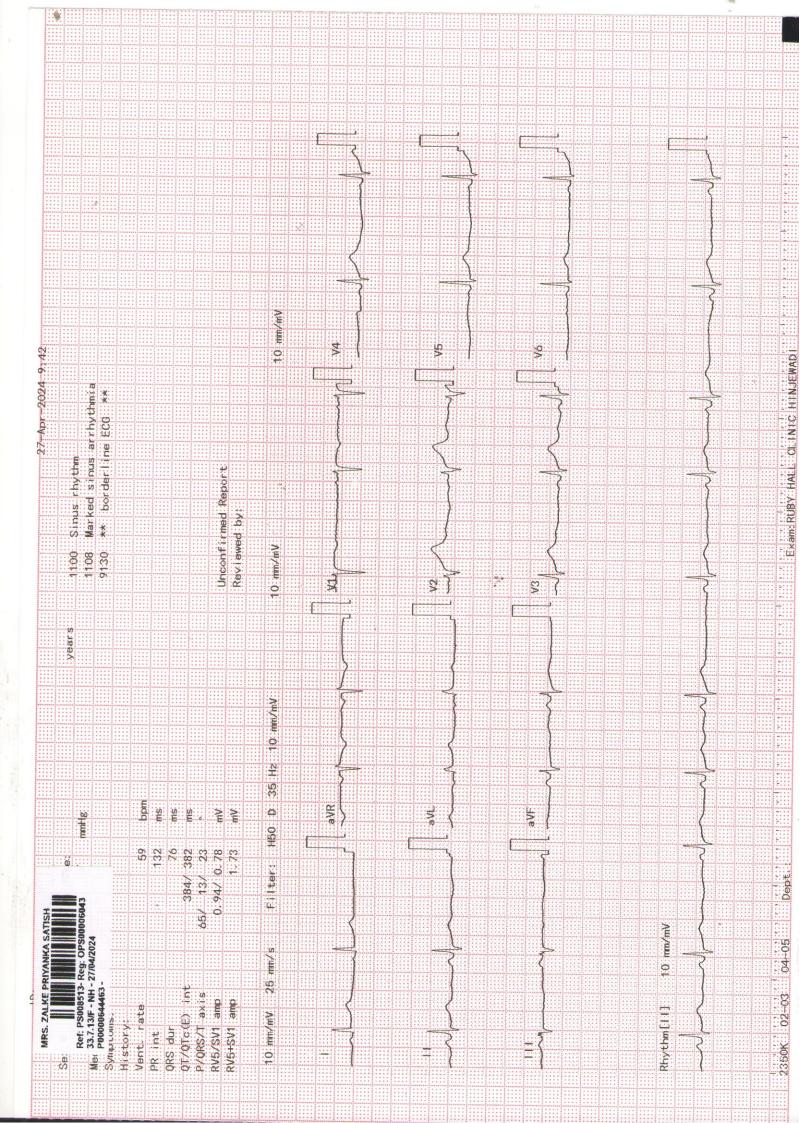
AGE: 337000

R

_unaided	6/6		6/6,
1) Vision \(\overline{\bar{c}} \) glasses			
2) Near Vision unaided		N16.	
3) Binocular Vision		Hormal,	
4) Colour Vision5) Tension		Hormal	
5) Tension		_	
6) Anterior Segment	-	WHI!	
7) Pupils		would	
8) Lens	3,	clear.	
9) Media & Fundus	f ,		
10) Remarks		,	
10) Normania			
Re	efresh	Tear.	
	4-		
Date: 27/04/24			(Signature

PS-35-340

1st Floor, Vision Galleria Shopping Complex, S. No. 127,128, Shivar Garden Road, Pimple Saudagar, Aundh Annex, Pune - 411 027 • Ph: 020 27201616 - 020 27201717 • Email : pimplesaudagar@rubyhall.com • Website : www.rubyhall.com, www.hinjawadi.rubyhall.





Name:

Priyanke Zalke

Date: 27 / 4, /2024

Age: 33 Yrs

Gender: M / F

Visited for regular dental check up

Present complaints:

Intra Oral Examination:

1. Stains: , Calculus:

2. Caries: __

3. Missing:

- 4. Root stumps:
- 5. Crown:
- 6. RC treated:
- 7. Orthodontic examination:

Treatment Advised:

Raine 8/7

DR. ANIKET MALABADI

BDS; **MDS**

Ruby Hall Clinic,

Pimple Saudagar.

Mob: 9980283499 www.aniket32.com



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 Lab Ref No/UHID
 : PS008513/P00000644463
 Received Date
 : 27-04-2024 11:06 AM

 Lab No/Result No
 : 2400163368/911248
 Report Date
 : 27-04-2024 12:03 PM

Referred By Dr. : HOSPITAL CASE Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
FBS Glucose (Fasting). Method: GOD-POD	: 85	mg/dL	Prediabetic: 100 - 125 Diabetic: >= 126 Normal: < 100.0
REFERENCE : ADA 2015 GUIDELINES	5		
CREATININE			
Creatinine Method : Enzymatic	:0.6	mg/dL	0.5 - 1.2
BUN Urea Nitrogen(BUN)	:3.74	mg/dL	6.0 - 20.0
Method : Calculated Urea Method : Urease	:8	mg/dL	17.1-49.2
CALCIUM Calcium Method: Arsenazo	: 9.0	mg/dL	8.6 - 10.2
PHOSPHOROUS Phosphorus Method: Phospho Molybdate	: 3.5	mg/dL	2.7-4.5
URIC ACID Uric Acid Method: Uricase	: 4.0	mg/dL	2.6 - 6.0
LFT Total Bilirubin Method: Diazo	:0.7	mg/dL	0.3 - 1.2
Direct Bilirubin Method : Diazo	:0.1	mg/dL	0-0.4
Indirect Bilirubin Method : Diazo	:0.6	mg/dL	0.0 - 0.8
Alanine Transaminase (ALT) Method: Kinetic	:68.0	U/L	<35
Aspartate Transaminase (AST) Method: Kinetic	:56.0	U/L	10.0 - 40.0



Referred By Dr.

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

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 Lab No/Result No
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 : 27-04-2024 12:21 PM

Specimen : SERUM

Processing Loc : RHC Hintawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
LFT			
Alkaline Phosphatase	: 67.0	U/L	30.0 - 115.0
Method: 4NPP/AMP BUFFER			
Total Protein	: 7.4	g/dl	6.0 - 8.0
Method : Biuret			
Albumin	: 4.0	g/dl	3.5-4.8
Method : BCG			
Globulin	: 3.4	gm/dL	2.3-3.5
Method : Calculated			
A/G Ratio	: 1.18		
Method : Calculated			
T3-T4-TSH -			
Tri-Iodothyronine, (Total T3)	: 1.61	ng/ml	0.97-1.69
Method : Enhanced Chemiluminiscence			
Thyroxine (T4), Total	: 7.39	ug/dl	5.53-11.01
Method : Enhanced Chemiluminiscence			
Thyroid Stimulating Hormone (Ultra).	: 2.424	uIU/mL	0.58-6.88

Method : Enhanced Chemiluminiscence

1.The TSH levels are subject io diurnal/circadian variation. reaching to peak leve 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 referance 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 ***



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 : /911248
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 : 27-04-2024 12:09 PM

Specimen : SERUM

Processing Loc : RHC Hinjawadi

Verified By Snehal

Referred By Dr.

Dr.POOJA PATHAK Associate Consultant

NOTE:

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: HOSPITAL CASE

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 Lab No/Result No
 : 2400163369/911248
 Report Date
 : 27-04-2024 10:00 RM

Referred By Dr. : HOSPITAL CASE Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation	Result	Units	Biological Reference Interval
HAEMOGRAM/CBC/CYTO			
W.B.C.Count	:7010	/ul	4000-11000
Method : Coulter Principle			
Neutrophils	: 46.9	%	40-75
Method : Derived from WBC Histogram			
Lymphocytes	: 32.4	%	20-40
Monocytes	:9.6	%	2-10
Eosinophils	: 10.1	%	1.0-6.0
Basophils	:1.0	%	0.0-1.0
%Immature Granulocytes	:0.1	%	0.00-0.10
Absolute Neutrophil Count	: 3.3	x10³cells/ul	2-7
Method : Calculated			
Absolute Lymphocyte Count	: 2.3	x10³cells/ul	1 - 3
Method : Calculated			
Absolute Monocyte Count	: 0.7	x10³cells/ul	0.2-1.0
Method : Calculated		402 11 / 1	0.00.0.5
Absolute Eosinophil Count	: 0.7	x10³cells/ul	0.02-0.5
Method : Calculated Absolute Basophil Count	: 0.07	x10³cells/ul	0.02-0.1
Method : Calculated	. 0.07	X10°Cells/ul	0.02-0.1
R.B.C Count	: 4.4	million/ul	3.8 - 5.8
Method : Coulter Principle			
Haemoglobin	: 12.4	g/dl	12 - 15.0
Method : Cyanmethemoglobin Photometry			
Haematocrit	: 39.2	%	36-46
Method : Calculated			
MCV	:89.1	fl	83 - 99
Method : Coulter Principle	20.0		27.00
MCH	: 28.2	pg	27-32
Method : Calculated MCHC	:31.6	g/dl	31.5-34.5
Method : Calculated	• 31.0	g/ui	31.3-34.3
RDW	:12.8	%	11.6-14.0
Method : Calculated From RBC Histogram	-	-	-
Platelet Count	:212.0	x10³/ul	150 - 450
Method : Coulter Principle			
MPV	: 12.5	fl	7.8-11
Method : Coulter Principle			



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: HOSPITAL CASE : EDTA WHOLE BLC **Specimen** Referred By Dr.

> **Processing Loc** : 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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: Mrs.ZALKE PRIYANKA SATISH **Patient Name** : 27-04-2024 09:10 AM **Bill Date** Age / Gender : 33Y(s) 7M(s) 13D(s)/Female Collected Date : 27-04-2024 12:42 PM **Received Date** : 27-04-2024 11:06 AM Lab Ref No/UHID : PS008513/P00000644463 Lab No/Result No : 27-04-2024 03:48 PM : 2400164043-P/911248 Report Date

Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
PPBS			
Glucose (Post Prandial)	: 120	mg/dL	60-140
Method : GOD-POD			

*** End Of The Report ***

Verified By Anand

Referred By Dr.

Dr.Anjana Sangh

Dr.Anjana Sanghavi Consultant Pathologist

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Referred By Dr. : HOSPITAL CASE Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation	Result	Units	Biological Reference Interval
ESR			

ESR At 1 Hour :16 mm/hr 0 - 20

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 moniter course of disease or response to therapy if initially elevated.

*** End Of The Report ***

Verified By SANDEEP

> Dr.POOJA PATHAK Associate Consultant

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Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
ELECTROLYTES (Na &	. K)		
Sodium	:143.0	mmol/L	136.0 - 145.0
Method : Potentiometric			
Potassium	:4.1	mmol/L	3.5 - 5.1
Method : Potentiometric			
Chloride	:106.0	mmol/L	98.0 - 107.0
Method : Potentiometric			

*** End Of The Report ***

Verified By AMOL

Referred By Dr.

Dr.POOJA PATHAK Associate Consultant

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Specimen : URINE

Processing Loc : RHC Hinjawadi

Absent Absent

Absent

Absent



DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY

Investigation	Result	Units	Biological Reference Interval
URINE ROUTINE			
PHYSICAL EXAMINATION	<u>1</u>		
Colour	: Pale Yellow		
Appearance	: Slightly Turbid		
CHEMICAL TEST			
Ph	: 5.0		5.0-7.0
Specific Gravity	:1.005		1.015-1.030
Albumin	: Absent		Abset
Urine Glucose	: Absent	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments	: Absent		Absent
Method : Photometric Measurement			
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent
Leucocytes Esterase	: 3+		Absent
MICROSCOPIC TEST			
Pus Cells.	: 35-40	/hpf	0 - 5
Red Blood Cells.	: Absent	/hpf	0 - 2
Epithelial Cells.	:12-15	/hpf	0-5
Bacteria	: Absent	/hpf	Absent

*** End Of The Report ***

Verified By SACHIN

Yeast Cells

Crystals

Others

Cast

Dr.Anjana Sanghavi Consultant Pathologist

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: Absent

: Absent

: Absent

: Absent



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Specimen : SERUM

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY

Investigation	Result	Units	Biological Reference Interval
LIPID PROFILE			
Cholesterol	:169.0	mg/dL	130.0 - 220.0
Method : Enzymatic			
Triglycerides	: 173	mg/dL	35.0 - 180.0
Method : Enzymatic			
HDL Cholesterol	: 53	mg/dL	35-65
Method : Enzymatic			
LDL Cholesterol	:81.4	mg/dL	10.0 - 130.0
Method : Calculated			
VLDL Cholesterol	: 34.6	mg/dL	5.0-36.0
Method : Calculated			
Cholestrol/HDL Ratio	:3.19		2.0-6.2
Method : Calculated			

*** End Of The Report ***

Verified By Snehal

Referred By Dr.

Dr.POOJA PATHAK Associate Consultant

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 : 27-04-2024 11:06 AM

 Lab No/Result No
 : 2400163761/911248
 Report Date
 : 27-04-2024 12:48 PM

: HOSPITAL CASE Specimen : EDTA WHOLE BLC

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK

Investigation Result Units Biological Reference Interval

BLOOD GROUP

Blood Group : B RH POSITIVE

*** End Of The Report ***

Verified By Ardeore

Referred By Dr.

Dr POO14 P

Dr.POOJA PATHAK
Associate Consultant

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 Lab No/Result No
 : 2400163370-G/911248
 Report Date
 : 27-04-2024 01:03 PM

Referred By Dr. : HOSPITAL CASE Specimen : WHOLE BLOOD

Processing Loc : RHC Hinjawadi



DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY

Investigation Result Units Biological Reference Interval

GLYCOCYLATED HB% (HbAIC)

Glycosylated Haemoglobin :5.1 % 4-6.5

(HbA1C)

Method: Turbidometric Inhibition

Immunoassay

Prediabetic : 5.7 - 6.4 %Diabetic : >= 6.5 %

Therapeutic Target: <7.0 %

REFERENCE: ADA 2015 GUIDELINES

*** End Of The Report ***

Verified By

Ruhi S

Dr.POOJA PATHAK Associate Consultant

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