

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads  
Sargasan, Candhinagar - 382421. Gujarat, India

Phone: 079 29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



DR. PRAKASH D MAKWANA

M.D.

REG.NO.G-29078

MO.NO-9722116164


UHID: 00223066	Date: 11/2/2023	Time: 3:55 PM
Patient Name: ANISHCHANDRA	Height: 161 cm	Weight: 79 kg
Age / Sex: 3740/M	LMP:	
History:		
C/C/O: ⇒ ROUTINE HEALTH CHECK UP	History: ⇒ NO	
Allergy History: NKDA	Addiction: —	
Nutritional Screening: Well-Nourished / Malnourished / Obese ✓		
Vitals & Examination:		
Temperature: AFEBRILE		
Pulse: 99/minute		
BP: 100/60 mm Hg		
SPO2: 99% on ROOM AIR		
Provisional Diagnosis:		



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DR. UNNATI SHAH  
B.D.S. (DENTAL SURGEON)  
REG. NO. A-7742  
MO.NO- 9904596691

UHID:	00223066	Date:	11/2/23	Time:	
Patient Name:	Anshchandra Patelkar			Age / Sex:	38 / M
				Height:	161 cm
				Weight:	79 kg
History:					
Examination:	U-V canals Stems +++ Calculus + 				
Diagnosis:					

Treatment:

Scaling

Restorations

night guard

Dramatic

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

UHID: 00223066	Date: 11/02/2023	Time:
Patient Name: AMIT PATEL	Age / Sex: 36 / M	Height: 161 cm
	Weight: 79 kg	
History: C/O - Routine check-up.		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: 402619 402619		
Diagnosis:		



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CIN: L85110GJ2012PLC072647



**PATIENT NAME: ANISHCHANDRA VINODCHADRA PARLEKAR**

**GENDER/AGE: Male / 36 Years**

**DATE: 11/02/23**

**DOCTOR:**

**OPDNO: O0223066**

**X-RAY CHEST PA**

Both lung fields appear clear

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.

**Impression: Normal Chest X ray examination**

**RADIOLOGIST**

**DR. MEHUL PATELIYA**

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**PATIENT NAME: ANISHCHANDRA VINODCHADRA PARLEKAR**

**GENDER/AGE: Male / 36 Years**

**DATE: 11/02/23**

**DOCTOR:**

**OPDNO: 00223066**

**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 appears normal. No evidence of calculus or 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 10.1 x 4.6 cms in size.

Left kidney measures about 10.6 x 4.8 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 120 cc.

**PROSTATE:** Prostate appears normal in size and shows normal parenchymal echoes. No evidence of pathological calcification or solid or cystic mass lesion is seen.

Prostate volume measures about 14 cc.

**COMMENT:** Normal sonographic appearance of liver, GB; Pancreas, spleen, kidneys, para-aortic region, bladder and prostate.

**RADIOLOGIST**

**DR. MEHUL PATELIYA**





LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR	Sex/Age : Male / 37 Years	Case ID : 30202200227
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2552918
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Feb-2023 09:11	Sample Type :	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22238841

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Blood Urea Nitrogen (BUN)</b>			
BUN (Blood Urea Nitrogen)	5.8	mg/dL	6.00 - 20.00
<b>Lipid Profile</b>			
Cholesterol	226.77	mg/dL	110 - 200
HDL Cholesterol	39.3	mg/dL	48 - 77
Triglyceride	218.41	mg/dL	40 - 200
VLDL	43.68	mg/dL	10 - 40
Chol/HDL	5.77		0 - 4.1
LDL Cholesterol	143.79	mg/dL	65 - 100
<b>Urine Examination</b>			
Leucocytes (ESTERASE)	Trace		Negative
ESR	21	mm after 1hr	3 - 15
Plasma Glucose - F	103.36	mg/dL	70.0 - 100
Plasma Glucose - PP	167.16	mg/dL	70.0 - 140.0

Abnormal Result(s) Summary End

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



## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11 Sample Type : Whole Blood EDTA Mobile No : 9727726069  
 Sample Date and Time : 11-Feb-2023 09:11 Sample Coll. By : Ref Id1 : O0223066  
 Report Date and Time : 11-Feb-2023 09:22 Acc. Remarks : Normal Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin (Colorimetric)	15.0	G%	13.00 - 17.00
RBC (Electrical Impedance)	5.28	millions/cumm	4.50 - 5.50
PCV(Calc)	44.40	%	40.00 - 50.00
MCV (RBC histogram)	84.1	fL	83.00 - 101.00
MCH (Calc)	28.4	pg	27.00 - 32.00
MCHC (Calc)	33.8	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.60	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	6610	/μL	4000.00 - 10000.00
	[ % ]	EXPECTED VALUES	[ Abs ] EXPECTED VALUES
Neutrophil	66.0	% 40.00 - 70.00	4363 /μL 2000.00 - 7000.00
Lymphocyte	24.0	% 20.00 - 40.00	1586 /μL 1000.00 - 3000.00
Eosinophil	5.0	% 1.00 - 6.00	331 /μL 20.00 - 500.00
Monocytes	4.0	% 2.00 - 10.00	264 /μL 200.00 - 1000.00
Basophil	1.0	% 0.00 - 2.00	66 /μL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	261000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	2.75		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

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

Dr. Shreya Shah  
M.D. (Pathologist)

Dr. Manoj Shah  
M.D. (Path. & Bact.)

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## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Whole Blood EDTA	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 09:22	Acc. Remarks : Normal	Ref Id2 : O22238841

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

**Dr. Manoj Shah**  
M.D. (Path. & Bact.)

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## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Whole Blood EDTA	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 11:51	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	H 21	mm after 1hr	3 - 15	

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

**Dr. Manoj Shah**  
M.D. (Path. & Bact.)

**Dr. Shreya Shah**  
M.D. (Pathologist)

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## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Whole Blood EDTA	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 09:19	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### HAEMATOLOGY INVESTIGATIONS

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

ABO Type	A
Rh Type	<u>POSITIVE</u>

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

**Dr. Shreya Shah**  
M.D. (Pathologist)

**Dr. Manoj Shah**  
M.D. (Path. & Bact.)

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LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Spot Urine	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 09:34	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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**URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)**

Physical examination

Colour : Pale yellow  
 Transparency : Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.015		1.005 - 1.030
pH	6.00		5 - 8
Leucocytes (ESTERASE)	<u>Trace</u>		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	<u>1-2</u>	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

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

*Manoj Shah*

Dr. Manoj Shah  
 M.D. (Path. & Bact.)

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## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Feb-2023 09:11 Sample Type : Spot Urine Mobile No : 9727726069  
 Sample Date and Time : 11-Feb-2023 09:11 Sample Coll. By : Ref Id1 : O0223066  
 Report Date and Time : 11-Feb-2023 09:34 Acc. Remarks : Normal Ref Id2 : O22238841

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	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
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	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

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

*Shah*

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## LABORATORY REPORT



Name : **ANISHCHANDRA VINODCHANDRA PARLEKAR** Sex/Age : **Male / 37 Years** Case ID : **30202200227**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2552918**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 11-Feb-2023 09:11 Sample Type : **Plasma Fluoride F, Plasma Fluoride PP, Serum** Mobile No : **9727726069**  
 Sample Date and Time : 11-Feb-2023 09:11 Sample Coll. By : Ref Id1 : **O0223066**  
 Report Date and Time : 11-Feb-2023 12:34 Acc. Remarks : **Normal** Ref Id2 : **O22238841**  
**TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS**

<b>Plasma Glucose - F</b>	<b>H</b>	<b>103.36</b>	<b>mg/dL</b>	<b>70.0 - 100</b>
<b>Plasma Glucose - PP</b>	<b>H</b>	<b>167.16</b>	<b>mg/dL</b>	<b>70.0 - 140.0</b>
<b>BUN (Blood Urea Nitrogen)</b> <small>GLDH</small>	<b>L</b>	<b>5.8</b>	<b>mg/dL</b>	<b>6.00 - 20.00</b>
<b>Creatinine</b>		<b>0.72</b>	<b>mg/dL</b>	<b>0.50 - 1.50</b>
<b>Uric Acid</b>		<b>6.77</b>	<b>mg/dL</b>	<b>3.5 - 7.2</b>

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

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## LABORATORY REPORT



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 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Feb-2023 09:11 Sample Type : Serum Mobile No : 9727726069  
 Sample Date and Time : 11-Feb-2023 09:11 Sample Coll. By : Ref Id1 : O0223066  
 Report Date and Time : 11-Feb-2023 12:32 Acc. Remarks : Normal Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

<b>Cholesterol</b>	H	<b>226.77</b>	mg/dL	110 - 200
<b>HDL Cholesterol</b>	L	<b>39.3</b>	mg/dL	48 - 77
<b>Triglyceride</b>	H	<b>218.41</b>	mg/dL	40 - 200
<b>VLDL</b> <i>Calculated</i>	H	<b>43.68</b>	mg/dL	10 - 40
<b>Chol/HDL</b> <i>Calculated</i>	H	<b>5.77</b>		0 - 4.1
<b>LDL Cholesterol</b> <i>Calculated</i>	H	<b>143.79</b>	mg/dL	65 - 100

#### 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 assesment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assesment 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 assesment

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

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 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Serum	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 12:33	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Liver Function Test

S.G.P.T.	29.45	U/L	0 - 41	
S.G.O.T.	21.93	U/L	15 - 37	
Alkaline Phosphatase	75.32	U/L	40 - 130	
Gamma Glutamyl Transferase	47.35	U/L	8 - 61	
Proteins (Total)	7.33	gm/dL	6.4 - 8.2	
Albumin	4.82	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.51	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.9		1.0 - 2.1	
Bilirubin Total	0.87	mg/dL	0.2 - 1.0	
Bilirubin Conjugated	0.31	mg/dL		
Bilirubin Unconjugated <i>Calculated</i>	0.56	mg/dL	0 - 0.8	

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

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M.D. (Path. & Bact.)

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LABORATORY REPORT



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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2552918
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Whole Blood EDTA	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 10:49	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b><u>Glycated Haemoglobin Estimation</u></b>				
HbA1C	5.22	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	103.11	mg/dL		

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-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

*Shah*

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M.D. (Path. & Bact.)

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LABORATORY REPORT



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 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11	Sample Type : Serum	Mobile No : 9727726069
Sample Date and Time : 11-Feb-2023 09:11	Sample Coll. By :	Ref Id1 : O0223066
Report Date and Time : 11-Feb-2023 12:54	Acc. Remarks : Normal	Ref Id2 : O22238841

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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**Thyroid Function Test**

Triiodothyronine (T3)	121.34	ng/dL	70 - 204	
Thyroxine (T4) <small>CMIA</small>	8.2	ng/dL	4.6 - 10.5	
TSH <small>CMIA</small>	1.027	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), PRTN 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**

**Reference range (microIU/ml)**

First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

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

**Dr. Manoj Shah**  
M.D. (Path. & Bact.)

**Dr. Shreya Shah**  
M.D. (Pathologist)



## LABORATORY REPORT



Name : ANISHCHANDRA VINODCHANDRA PARLEKAR Sex/Age : Male / 37 Years Case ID : 30202200227  
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2552918  
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Feb-2023 09:11 Sample Type : Serum Mobile No : 9727726069  
 Sample Date and Time : 11-Feb-2023 09:11 Sample Coll. By : Ref Id1 : O0223066  
 Report Date and Time : 11-Feb-2023 12:54 Acc. Remarks : Normal Ref Id2 : O22238841

**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, hyperthyroidism 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	Reference range (microIU/ml)
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 Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- 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)

*Shah*

Dr. Manoj Shah  
M.D. (Path. & Bact.)

Dr. Shreya Shah  
M.D. (Pathologist)

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Neuberg Supratech Reference Laboratories Private Limited

"KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

Phone : 079-40408181 / 61618181 | Email : contact@supratechlabs.com | Website : www.neubergsupratech.com

**Aashka Hospitals Ltd.**

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Emergency No.: +91-7575007707 / 9879752777  
www.aashkahospitals.in  
CIN: L85110GJ2012PLC072647



**PATIENT NAME: ANISHCHANDRA VINODCHADRA PARLEKAR**  
**GENDER/AGE: Male / 36 Years** **DATE: 11/02/23**  
**DOCTOR: DR. HASIT JOSHI**  
**OPDNO: O0223066**

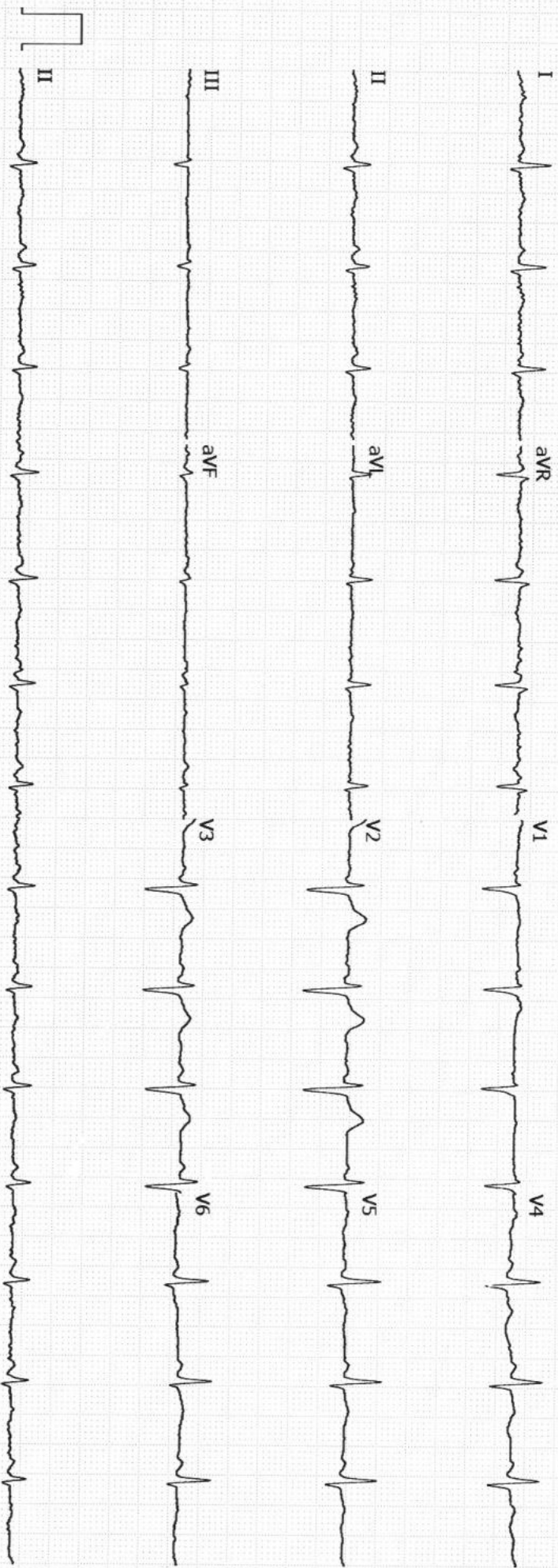
**2D-ECHO**

<b>MITRAL VALVE</b>	<b>: AML LONG REDUNDANT</b>	
<b>AORTIC VALVE</b>	<b>: NORMAL</b>	
<b>TRICUSPID VALVE</b>	<b>: NORMAL</b>	
<b>PULMONARY VALVE</b>	<b>: NORMAL</b>	
<b>AORTA</b>	<b>: 35mm</b>	
<b>LEFT ATRIUM</b>	<b>: 34mm</b>	
<b>LV Dd / Ds</b>	<b>: 37/23mm</b>	<b>EF 60%</b>
<b>IVS / LVPW / D</b>	<b>: 11/10mm</b>	
<b>IVS</b>	<b>: INTACT</b>	
<b>IAS</b>	<b>: FLOPPY</b>	
<b>RA</b>	<b>: NORMAL</b>	
<b>RV</b>	<b>: NORMAL</b>	
<b>PA</b>	<b>: NORMAL</b>	
<b>PERICARDIUM</b>	<b>: NORMAL</b>	
<b>VEL</b>	<b>: PEAK</b>	<b>MEAN</b>
<b>M/S</b>	<b>: Gradient mm Hg</b>	<b>Gradient mm Hg</b>
<b>MITRAL</b>	<b>: 1/0.7m/s</b>	
<b>AORTIC</b>	<b>: 1.0m/s</b>	
<b>PULMONARY</b>	<b>: 0.9m/s</b>	
<b>COLOUR DOPPLER</b>	<b>: TRIVIAL MR; MILD TR</b>	
<b>RVSP</b>	<b>: 28mmHg</b>	
<b>CONCLUSION</b>	<b>: NORMAL LV SIZE / SYSTOLIC FUNCTION.</b>	

**CARDIOLOGIST**  
**DR. HASIT JOSHI (9825012235)**

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 80 ms  
QT / QTcBaz : 352 / 428 ms  
PR : 120 ms  
P : 92 ms  
RR / PP : 676 / 674 ms  
P / QRS / T : 45 / 10 / 12 degrees  
Normal sinus rhythm  
Normal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.36-20 Hz 50 Hz

Unconfirmed  
4x2.5x3\_25\_R1 1/1

LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. PARLEKAR ANISHCHANDRA VINODKUMAR
EC NO	88933
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	AHMEDABAD, AHMEDABAD MAIN
BIRTHDATE	14-03-1986
PROPOSED DATE OF HEALTH CHECKUP	28-01-2023
BOOKING REFERENCE NO.	22M88933100039042E

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 **27-01-2023** till **31-03-2023**. 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 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))