

| | | | |
|--|-------------------|---|-----------------------|
| Patient Name : Mrs. ITHI SHARMA | UHID | : | 33164 |
| Age / Gender : 29 / Female | IPNO | : | |
| Referred By : Dr. PRATIBHA PUNDIR | Requisitions | : | 11/02/2023 / 8.56 AM |
| Req.No : 2308947 | Sample collection | : | 11/02/2023 |
| Patient Type : OPD | Sample Receiving | : | 11/02/2023 |
| | Reported on | : | 11/02/2023 / 11.24 AM |

BIOCHEMISTRY

BLOOD GROUP And RH TYPE

Specimen Type :

| TEST NAME | RESULT | UNITS | BIOLOGICAL REF. INTERVAL | METHOD |
|--------------------|-------------------|-------|-----------------------------|---|
| Blood Group | " B " RH POSITIVE | | | MATRIX GEL ABO/Rho (D) FORWARD & REVERSE GROUPING |

-**** End of Report ****-

Please Correlate With Clinical Findings

Lab Technician

Dr. GAURVI PIPLANI
MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 1.59 PM

BIOCHEMISTRY

BLOOD SUGAR FASTING

| Specimen Type | BIOLOGICAL | | | |
|---------------------------------|-------------------|--------------|------------------|--------------------|
| TEST NAME | RESULT | UNITS | REFERENCE | METHOD |
| Plasma glucose(fasting.) | 86.5 | mg/dl | 70 - 110 | GOD-POD Hexokinase |

****** End of Report ******

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 1.57 PM

BIOCHEMISTRY

BSPP (BLOOD SUGAR PP)

Specimen Type

BIOLOGICAL

TEST NAME

RESULT

UNITS

REFERENCE

METHOD

FASTING PP

Plasma Glucose(POST Prandial) 131.96 mg/dl 90 - 140 GOD-POD Hexokinase

*Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

*Performed on fully Automated Dimension X-Pand plus BioChemistry Analyser.

*External Quality Control by Biorad Laboratory.

-** End of Report ****-**

Please Correlate With Clinical Findings

Lab Technician Dr. GAURVI PIPLANI
MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

| | | |
|--|-------------------|------------------------|
| Patient Name : Mrs. ITHI SHARMA | UHID | : 33164 |
| Age / Gender : 29 / Female | IPNO | : |
| Referred By : Dr. PRATIBHA PUNDHIR | Requisitions | : 11/02/2023 / 8.56 AM |
| Req.No : 2308947 | Sample collection | : 11/02/2023 |
| Patient Type : OPD | Sample Receiving | : 11/02/2023 |
| | Reported on | : 11/02/2023 / 1.59 PM |

HAEMATOLOGY

COMPLETE HAEMOGRAM (CBC ESR)

Specimen Type : Whole Blood

| TEST NAME | RESULT | UNITS | REF. INTERVAL | BIOLOGICAL METHOD |
|-------------------------------------|--------|----------------|---------------|--------------------------|
| Haemoglobin | 12.9 | gm/dl | 11.5 - 16.5 | Cyanide-Free Colorimetry |
| Total Leucocyte Count | 8700 | | 4000 - 11000 | Impedance Variation |
| <u>DIFFERENTIAL COUNT</u> | | | | |
| Neutrophils. | 55 | % | 40.0 - 75.0 | Flow Cytometry |
| Lymphocytes. | 35 | % | 20.0 - 45.0 | Flow Cytometry |
| Monocytes | 09 | % | 2.0 - 10.0 | Flow Cytometry |
| Eosinophils. | 01 | % | 0.0 - 4.0 | Flow Cytometry |
| Basophils | 00 | % | 0.0 - 1.0 | Flow Cytometry |
| Platelet Count | 1.85 | 1000/cumm | 1.50 - 4.50 | Electrical Impedance |
| RED BLOOD CELL COUNT | 4.09 | millions/cum m | 3.5 - 5.5 | Electrical Impedance |
| PACKED CELL VOLUME | 35.6 | % | 36 - 46 | Calculated |
| MEAN CORPUSCULAR VOLUME | 87.1 | fL | 76 - 96 | Measured |
| MEAN CORPUSCULAR HAEMOGLOBIN | 31.5 | pg | 27 - 32 | Calculated |
| MEAN CORPUSCULAR Hb CONC | 36.2 | gm/dl | 33 - 37 | Calculated |

-**** End of Report ****-

Please Correlate With Clinical Findings

Lab Technician

Dr. GAURVI PIPLANI
MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 2.00 PM

BIOCHEMISTRY

KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

| Specimen Type | Serum | BIOLOGICAL | | | |
|-------------------------|---------------|-------------------|----------------------------|--------------------------------------|--|
| TEST NAME | RESULT | UNITS | REFERENCE | METHOD | |
| Urea Creatinine | | | | | |
| Serum Urea | 16.9 | mg/dl | 13 - 45 | UreaseGLDH | |
| Serum Creatinine | 0.67 | mg/dL | Male: 0.6 - 1.3 | Modified JAFFEs | |
| Serum Uric Acid | 4.80 | mg/dl | Adult Female: 2.6 - 6.0 | Uricase Trinder, End Point (Toos) | |
| Serum Sodium | 139.0 | meq/l | 135 - 155 | ISE Indirect | |
| Serum Potassium | 4.22 | meq/l | 3.5 - 5.6 | ISE Indirect | |

*Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

*Performed on fully Automated Dimension X-Pand plus BioChemistry Analyser.

*External Quality Control by Biorad Laboratory.

****** End of Report ******

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 2.00 PM

BIOCHEMISTRY

LFT(LIVER FUNCTION TEST)

| Specimen Type | Serum | BIOLOGICAL | | |
|-----------------------------|---------------|-------------------|------------------|------------------------------------|
| TEST NAME | RESULT | UNITS | REFERENCE | METHOD |
| TOTAL BILIRUBIN | 1.90 | mg/dL | 0.1 - 1.2 | Diazotized Sulphanilic Acid |
| DIRECT BILIRUBIN | 0.21 | mg/dL | 0.00 - 0.20 | Diazotized Sulphanilic Acid |
| INDIRECT BILIRUBIN | 1.69 | mg/dL | 0.0 - 0.9 | Diazotized Sulphanilic Acid |
| SGOT (AST) | 30.7 | IU/L | 0 - 35 | IFCC WPP AMP |
| SGPT (ALT) | 61.5 | IU/L | 5 - 40 | IFCC WPP AMP |
| Alkaline Phosphatase | 128.2 | IU/L | Adult: 50 - 136 | Modified IFCC |
| Total Protein | 5.20 | g/dl | 6.4-8.2 | Biuret Endpoint |
| Albumin - Serum | 4.47 | g/DL | 3.2 - 5.0 | Photometric Column test BCG Dye |
| Globulin | 0.73 | gms% | 2.3 - 4.5 | |

*Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

-** End of Report ****-**

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 1.59 PM

BIOCHEMISTRY

LIPID PROFILE.(TOTAL CHOLESTEROL,LDL,HDL,TREIGYLCERIDES)

| Specimen Type | BIOLOGICAL | | | |
|----------------------------|-------------------|--------------|--|--------------------|
| TEST NAME | RESULT | UNITS | REFERENCE | METHOD |
| LIPID PROFILE | | | | |
| SERUM CHOLESTROL | 218.8 | mg/dl | 0 - 200 | Cholestrol Oxidase |
| Serum Triglycerides | 108.7 | mg/dl | Up to 150 | GPO -Trinder |
| HDL Cholesterol | 41.3 | mg/dl | 0 - >60 | Direct Method |
| LDL Cholesterol | 155.7 | mg/dl | Optimal <100,Above Opt. 100-129 -high 160-189 | Direct Measure |
| VLDL Cholesterol | 21.7 | mg/dL | *Less than 30 | Calculated |

*Automated Direct HDL And LDL Estimation.

*Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

-** End of Report ****-**

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 2.22 PM

CLINICAL PATHOLOGY

URINE ROUTINE MICROSCOPY

| Specimen Type | BIOLOGICAL | | | |
|------------------------------------|-------------------|--------------|------------------|---|
| TEST NAME | RESULT | UNITS | REFERENCE | METHOD |
| <u>PHYSICAL EXAMINATION</u> | | | | |
| volume | 20 | ml | | |
| colour | Yellow | | Pale Yellow | |
| Appearance | Clear | | Clear | |
| Specific Gravity | 1.030 | | | Polyelectrolytes Ionic |
| reaction | Acidic | | Acidic | |
| pH -Urine | 5.0 | | | PH paper |
| Blood | Negative | | Negative | |
| Albumin | NIL | | NIL | Protein-error-of-Indicator/Sulphosalicylic Acid |
| Glucose | NIL | | NIL | GODPOD/Benedicts |
| Bile Salt | NIL | | NIL | |
| Bile Pigment | NIL | | NIL | Diazo/Fouchets Test |
| Urobilinogen | NIL | | NIL | Elrich Aldehyde |

****** End of Report ******

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)

Patient Name : Mrs. ITHI SHARMA
Age / Gender : 29 / Female
Referred By : Dr. PRATIBHA PUNDHIR
Req.No : 2308947
Patient Type : OPD

UHID : 33164
IPNO :
Requisitions : 11/02/2023 / 8.56 AM
Sample collection : 11/02/2023
Sample Receiving : 11/02/2023
Reported on : 11/02/2023 / 2.22 PM

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION

| | | | |
|---------------------------------|-----|-----------|-------------|
| PUS CELLS - URINE | 3-4 | | |
| Red blood cells | Nil | NIL | |
| Epithelial Cells - Urine | 1-2 | 4---5/HPF | |
| Casts | NIL | NIL | Microscopic |
| Crystals. | NIL | NIL | Microscopic |

Albumin test positive by Multistrip Method is confirmed by Sulphosalicylic acid method.

****** End of Report ******

Please Correlate With Clinical Findings

Lab Technician **Dr. GAURVI PIPLANI**
 MD (Pathology)

Dr. KANIKA GUPTA
MD (Pathology)



Mrs. ITHI SHARMA

Healing Touch

PID NO: 220277000007397
Age: 29.0 Year(s) Sex: Female

Super Speciality Hospital
HEALTHCARE PVT LTD



Reference: Dr.PARK HOSPITAL
Sample Collected At:
HEALING TOUCH SUPER SPECIALITY HOSPITAL A UNIT OF BLUE HEAVENS CHANDIGARH AMBALA HIGHWAY VILL SADOPUR AMBALA CITY HARYANA 134002
Sample Processed At: DOGRA PATH LAB LLP, #16, SECTOR -7, URBAN

VID: 220277000007397
Requested On: 11/02/2023 07:27 PM
Collected On: 11/02/2023 7:27 PM
Reported On: 12/02/2023 07:56 AM

HbA1c Glycated Haemoglobin

(EDTA Whole Blood)

| Investigation | Observed Value | Unit | Biological Reference Interval |
|--|----------------|-------|---|
| HbA1C- Glycated Haemoglobin (HPLC) | 5.6 | % | Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 |
| Estimated Average Glucose (eAG) (Calculated) | 114.02 | mg/dL | |

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2022, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %.

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

Vasudogra

Dr. Vasu Kumar Dogra
M.D. (Pathology)

(This is only professional Opinion and not the diagnosis, Please correlated clinically)

anpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Ex. Ambala, Haryana 134003 Ph. : 74320 00000, 7496 71 - 2500000, 74320 00000, 74969 79727 Toll free No.: 1800 180 1234 E-mail : healingtouchhospital2012@gmail.com
p of Hospitals : West Delhi, Ambala, Gurgaon, Fridabad, Hodal, Panipat, Sonipat, Kanal, Jaipur, E

the health care providers the health care providers

Mrs. ITI SHARMA

Healing Touch

Super Speciality Hospital

Age: 29.0 Year(s) Sex: Female

Reference: Dr.PARK HOSPITAL

Sample Collected At:
HEALING TOUCH SUPER SPECIALITY
HOSPITAL A UNIT OF BLUE HEAVENS
HEALTHCARE PVT LTD
CHANDIGARH AMBALA HIGHWAY VILL
SADOPUR AMBALA CITY HARYANA
134002

Sample Processed At: DOGRA PATH
LAB LLP, #16, SECTOR -7, URBAN

VID: 22027700007397

Received On
11/02/2023 07:27 PM
Created On
11/02/2023 07:27 PM
Reported On
12/02/2023 07:56 AM

Investigation

Thyroid panel - 2
(Serum, CMA)

Free T3

3.48

pg/mL

2.0-4.4

First Trimester : 2.46 - 3.49
Second Trimester : 2.09 - 3.55
Third trimester : 2.01 - 3.27

Free T4

1.01

ng/dL

0.93-1.7

First Trimester : 0.7-2.0
Second Trimester : 0.5-1.6
Third Trimester : 0.5-1.6

TSH(Ultrasensitive)

5.6074

µIU/mL

0.54-5.3

First Trimester : 0.33-4.59
Second Trimester : 0.35-4.10
Third trimester : 0.21-3.15

INTERPRETATION

| TSH | T3 / FT3 | T4 / FT4 | Suggested Interpretation for the Thyroid Function Tests Pattern |
|---------------------------|------------------------|------------------------|---|
| Within Range | Decreased | Within Range | • Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%. |
| Raised | Within Range | Within Range | • Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness* |
| Raised | Decreased | Decreased | • Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radiiodine • Hypothyroid phase of transient thyroiditis* |
| Raised or within Range | Raised | Raised or within Range | • Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics* |
| Decreased | Raised or within Range | Raised or within Range | • Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion* |
| Decreased | Decreased | Decreased | • Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)* |
| Decreased | Raised | Raised | • Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis, Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum* |
| Decreased or within Range | Raised | Within Range | • T3 toxicosis • Non-Thyroidal illness |

Vasudogra

Dr. Vasu Kumar Dogra
M.D (Pathology)

(This is only professional Opinion and not the diagnosis, Please correlated clinically)

tanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh, Faridkot, Ambala, Haryana 134003 Ph. : 74320 00000, 74969 79727
171 - 2500000, 74320 00000, 74969 79727 Toll free No.: 1800 180 1234 E-mail : healingtouchhospital2012@gmail.com,

up of Hospitals : West Delhi, Ambala, Gurgaon, Fridabad, Hodal, Panipat, Sonipat, Kanal, Jaipur, Behror

the health care providers the health care providers