

Reg. No. NH/6333/DEC-2017



GREEN CITY HOSPITAL

Near V-Mart, DIG Bungalow, Berasia Road, Bhopal AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



Pt. Name SUNGHANDH PARMAL

Age......Sex.F.....Date. 8.110122

BP - 110170

p - 80/m

Sp02 984.

R- 161m

Tut - 70 kg.

H+- 151 cm

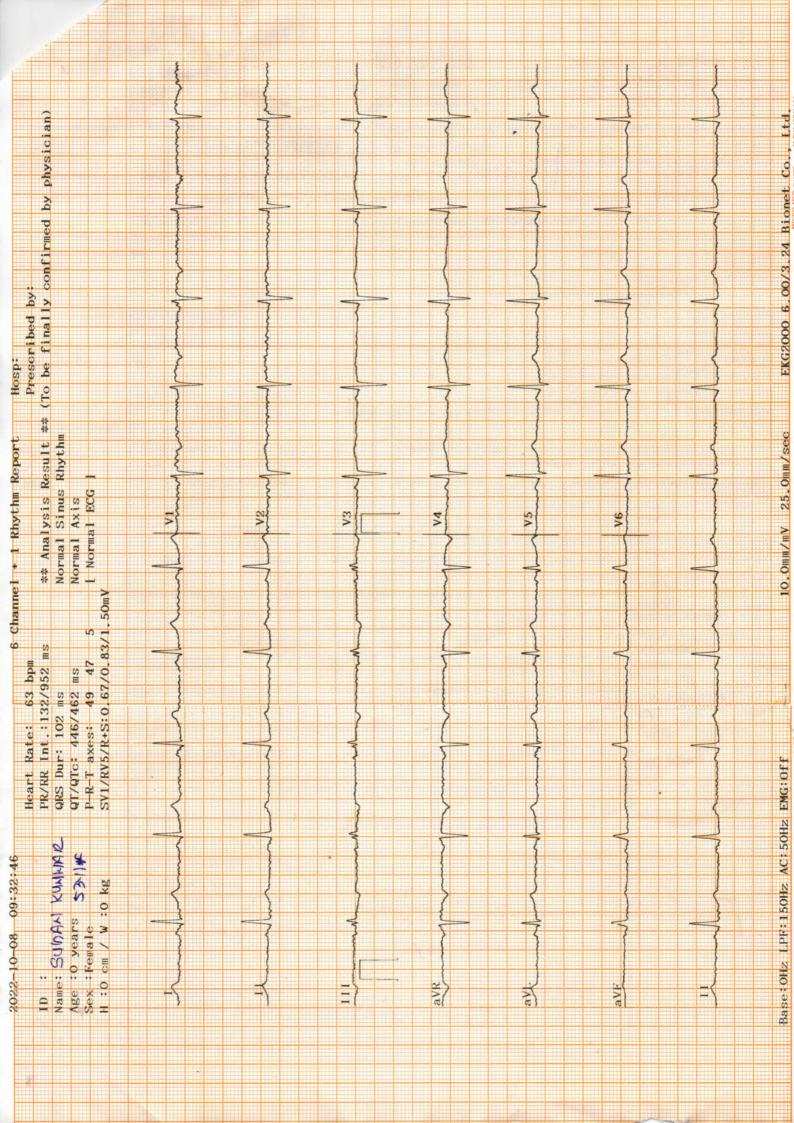
ECG J WNL USG J WNL

- no Haematological

- Viscon 6/6 - Reflexes D/ Mornal - No Dental Abnomalotres

Medically fit

Green City Hospital
Near V-Mart, DIG Bungalow,
Berasia Road,
BHOPAL (M.P.)





Reg. No. NH/6333/DEC-2017

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PATHOLOGY REPORT

Name

:Mrs. Sugan Kumar Parmar

CORP/GCA026000 Advised By : GREEN CITY HOSPITAL

Age

: 53 Years

Sex

: Female

Lab No.: OPD / 2

Date & : 08-Oct-2022

Time : 10:53 am

HAEMOGRAM

Test Performfed	Value Observed	Reference Range
Haemoglobin	13.2 gm%	11.5 - 16 gm%
R.B.C. count	3.84 mil./cmm	4.0 - 5.6 mil./cmm
Total WBC Count	8100 /cumm	4000 - 11000 /cumm
Packed Cell Volume	35.7 %	36 - 47 %
DIFFERENTIAL COUN	T	
Neutrophil	61 %	40 - 70 %
Lymphocytes	32 %	20 - 45 %
Monocytes	04 %	2 - 8 %
Eosinophil	03 %	1 - 5 %
Basophil	00 %	0 - 1 %
RBC Indices		
MCV	93.0 fL	82 - 97 fL
MCH	34.3 pg	27 - 32 pg
MCHC	36.9 %	32 - 36 %
Platelets Indices Platelet Count	2.82	1.5 - 4.5
ESR	11	0 - 16 mm.FHR

BLOOD GROUP

ved Reference Range
1

Blood Group

" A " POSITIVE

Technologist



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Date & : 08-Oct-2022

Time

: 10:53 am

GLYCOSYLATED HEMOGLOBIN (HBA 1C)

Result

3.8%

Reference Range

7%: indicates good diabetic control 10%:Indicates fair diabetic control 13-20%:Indicates poor diabetic control

> Dr. Pritha Dutta MBBS, MD

Biochemistry





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CORP/GCA026000

Advised By : GREEN CITY HOSPITAL

Age

: 53 Years Sex

:Female

Lab No.

:OPD / 2 , Date &

:08-Oct-2022

Time

:10:54 am

BIOCHEMISTRY

Test Performed	Value Observed	Reference Range
Blood Glucose(Fasting)	: 86.0 mg/dl	70 - 110 mg/dl
Blood Glucose (Post-Prandial)	: mg/dl	upto 140 mg/dl
Serum Urea	: 23.9 mg/dl	10 - 45 mg/dl
Serum Creatinine	: 0.61mg/dl	0.50 - 1.0
Serum Uric Acid	: 3.6	Male : < 7.0 mg/dl Female : < 6.0 mg/dl

Dr. Pritha Dutta MBBS, MD Biochemistry





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Sex

: Female

Lab No.: OPD / 2

Date & : 08-Oct-2022

Time : 10:54 am

LIVER FUNCTION TEST

Test Performfed	Value Observed	Reference Range	
Total Bilirubin	0.52 mg/dl	0.3 - 1.2 mg/dl	
Direct Bilirubin	0.11 mg/dl	0.1 - 0.3 mg/dl	
Indirect Bilirubin	0.41 mg/dl 14.1 U/L	0.2 - 0.8 mg/dl	
SGOT	14.1 U/L	5 - 46 U/L	
SGPT (ALT)	15.3 U/L	5 - 49 U/L	
Alkaline Phosphatase	142.2U/L U/L	64 - 306 U/L	
Total Protein	6.3 gm/dl	4.6 - 7.0 gm/dl	
Albumin	4.3 gm/dl	3.2 - 5.2 gm/dl	
Globulin	2 gm/dl	2.3 - 3.5 gm/dl	
	GGTP		

Test Performfed	Value Observed	Reference Range	
Gamma GT	34.6	10 - 45 U/L	

Dr. Pritha Dutta MBBS, MD Biochemistry

Technologist



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Name

:Mrs. Sugan Kumar Parmar

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: 53 Years

Sex

: Female

Lab No.: OPD / 2

Date & : 08-Oct-2022

Time : 10:54 am

LIPID PROFILE

Test Performfed	Value Observed	Reference Range
S. Cholesterol (Total)	150.7mg/dl Health Our Vis	Desirable Level :< 200 mg/dl Borderline level : 200-239 mg/dl High Level > 240 mg/dl
S. Triglycerides	105.6mg/dl	Desirable level :< 150 mg/dl Borderline level :150 - 200 mg/dl High Level: > 200 mg/dl
HDL Cholesterol	49.7 mg/dl	42 - 88 mg/dl
LDL Cholesterol	79.88	Desirable Level:< 130 mg/dl Borderline level:130-180mg/dl
VLDL Cholesterol	21.12	High level: >180 mg/dl Desirable level: < 30 mg/dl Borderline level: 30-45 mg/dl High level: > 45 mg/dl
TC/HDLC (Risk Factor)	3.03	Desirable Level : < 4.3 Borderline level : 4.4 to 11
LDLC/HDLC(Risk Factor)	1.61	High Level : >11 Desirable Level : < 3.0 Borderline level : 3.0 to 6.0 High Level : > 6.0



Technologist



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Advised By : GREEN CITY HOSPITAL

Age

: 53 Years

Sex

: Female

Lab No.: OPD / 2

Date & : 08-Oct-2022

Time

: 10:54 am

URINE ROUTINE MICROSCOPIC EXAMINATION

Test Performfed

Value Observed

Physical Examination

Volume

Colour

20 ml th Our Vision

Appearance

Reaction (pH)

Acidic

Chemical Examination

Albumin

Nil

SUGAR

Nil

Microscopic Examination

PUS(WBC) Cells

4-5 /hpf

/hpf

RBC

Nil /hpf

/hpf

/hpf

Epithelial Cells

2-3 /hpf

Casts

Absent

Crystals

Absent

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Name

:Mrs. Sugan Kumar Parmar

CORP/GCA026000 Advised By : GREEN CITY HOSPITAL

Age

: 53 Years

Sex

: Female

Lab No.: OPD / 2

Date & : 08-Oct-2022

Time

: 11:46 am

STOOL EXAMINATION

Test Performfed

Value Observed

Physical Examination

Colour

LIGHT BROWN

Consistency

Mucus

Trace

Chemical Examination

Reaction

Acidic

Occult blood

Absent

Microscopic Examination

Pus-cells

Absent /hpf

/hpf

RBC

Absent /hpf

/hpf

Fat Globules

Absent

Dr. Pritha Dutta MBBS, MD

Biochemistry



Near V-Mart, DIG Bungalow, Berasia Road, Bhopal AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



PATHOLOGY REPORT

NAme

:Mrs. Sugan Kumar Parmar

Advised By : GREEN CITY HOSPITAL

Age

: 53 Years Sex

:Female

:OPD / 2 Lab No.

Date &

:08-Oct-2022

Time

:12:03 pm

BIOCHEMISTRY

Test Performed

Value Observed

Reference Range

Blood Glucose (Post-Prandial)

: 123.0mg/dl

upto 140 mg/dl

Dr. Pritha Dutta MBBS, MD

Biochemistry

Please Correlate clinically as well as with other investigative findings. This report is not valid for medico legal purpose.

For Emergency / Ambulance Service Contact No.: 0755-2733323





Near V-Mart, DIG Bungalow, Berasia Road, Bhopal AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL



PATHOLOGY REPORT

NAme

:Mrs. Sugan Kumar Parmar

Advised By CORP/GCA026000

CORP/GCA026000

CORP/GCA026000

Age

: 53 Years Sex

: Female

Lab No.

:OPD / 2

Date &

:08-Oct-2022

Time

:12:06 pm

CLINICAL PATHOLOGY

Urine Sugar (PP)

: Nil tour Health Our Visio

> Dr. Pritha Dutta MBBS, MD Biochemistry



PROCESSED AT:

Thyrocare

D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703







Corporate office: Thyrocare Technologies Limited, ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703

REPORT

NAME : MRS SUGAN KUNWAR PARMAR (53Y/F)

REF. BY : GREEN CITY **TEST ASKED** : T3-T4-TSH

SAMPLE COLLECTED AT: (4620014663),GREEN CITY HOSPITAL,NEAR V-MART, BERASIA ROAD, DIG BUNGALOW, BHOPAL, MADHYA

PRADESH.,462001

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	91	ng/dl	60-200
TOTAL THYROXINE (T4)	C.L.I.A	7.4	μg/dl	4.5-12
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	3.39	μIU/ml	0.3-5.5

Comments: SUGGESTING THYRONORMALCY

Please correlate with clinical conditions.

Method:

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

~~ End of report ~~

Sample Collected on (SCT) Sample Received on (SRT) Report Released on (RRT)

Sample Type Labcode

Barcode



: 08 Oct 2022 18:10

: 09 Oct 2022 02:36

: 09 Oct 2022 04:41

: SERUM

: AA019221

: 0810119939/A7220

Dr Kuldeep Singh MD(Path)

Dr Sachin Patil MD(Path)

Page: 1 of 2

CONDITIONS OF REPORTING

- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- This report is not valid for medico-legal purpose.
- Neither Thyrocare, nor its employees/representatives assume any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report.
- Thyrocare Discovery video link :- https://youtu.be/nbdYeRqYvOc
- For clinical support please contact @8450950852,8450950853,8450950854 between 10:00 to 18:00

EXPLANATIONS

- v Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- v **Name** The name is as declared by the client and recored by the personnel who collected the specimen.
- v Ref.Dr The name of the doctor who has recommended testing as declared by the client.
- Labcode This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- Barcode This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- v SCP Specimen Collection Point This is the location where the blood or specimen was collected as declared by the client.
- v SCT Specimen Collection Time The time when specimen was collected as declared by the client.
- v SRT Specimen Receiving Time This time when the specimen reached our laboratory.
- RRT Report Releasing Time The time when our pathologist has released the values for Reporting.
- Reference Range Means the range of values in which 95% of the normal population would fall.

SUGGESTIONS

- Values out of reference range requires reconfirmation before starting any medical treatment.
- Retesting is needed if you suspect any quality shortcomings.
- Testing or retesting should be done in accredited laboratories.
- For suggestions, complaints or feedback, write to us at info@thyrocare.com or call us on 022-3090 0000 / 6712 3400
- SMS:<Labcode No.> to 9870666333





BOOK A TEST

Give a Call - 022 4128 2828

WhatsApp **TGS** to 8104112632

Email to tgs@focustb.com

Page : 2 of 2



Dr. RITESH R. KUMAWAT

M.B.B.S., D.M.R.D., D.N.B. (Radio Diagnosis) Consultant Radiologist Reg. No. MP-12614



drriteshkumawat@gmail.com niramayadiagnosticcenter@gmail.com

FACILITIES AVAILABLE: ROUTINE /HIGH FREQUENCY USG, 3D/4D USG, COLOUR DOPPLER, USG GUIDED PROCEDURES & DIGITAL X-RAY

Date: 08.10.2022

PATIENT'S NAME: MRS. SUGAN KUNWAR

REF. BY: SELFG

AGE: 53Y SEX: FEMALE

Ultrasonography: Whole Abdomen

Liver: Is normal in size, shape and echotexture measures 14.2 cm in long axis in mid clavicular line. Margins are smooth and regular. Intra and extra hepatic billiary and vascular channels are normal. No evidence of any focal or diffuse mass lesion seen. Gaseous distension of bowel loops noted.

Gall Bladder: Reveal a clear anechoic lumen. Its wall of normal thickness. No pericholecystic pathology seen.

CBD & PV are of normal calibre.

Right Kidney: Normal in size, shape & echotexture measures 10.2 x 4.1 cm. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, calculus or scarring seen and upper pole simple cyst 15 mm.

Left Kidney: Normal in size, shape & echotexture measures 10.2 x 4.1 cm. Cortical echotexture appears to be normal. Cortico-medullary differentiation is maintained. No hydronephrosis, calculus or scarring seen.

Spleen: Is normal in size, shape and echotexture.

Pancreas: Appear to be normal in shape, size & echotexture. Pancreatic duct is not dilated.

Urinary Bladder: Is central smooth in contour and reveal a clear lumen. Their walls are of normal thickness.

Uterus:- Is atrophic in size measures 42 x 15 x 20 mm and midline endometrial echo complex Diagnostic Center 4.6 mm. Cervix appears normal.

Both ovaries:- Not visualized obscured by bowel gases.

No evidence of obvious adnexal mass lesion is seen.

- No evidence of any free fluid/lymphadenopathy.
- No evidence of bowel wall thickening noted.

Impression: USG Study Reveals:

- Gaseous distension of bowel loops noted.
- Right renal upper pole simple cyst 15 mm.

Dr. Ritesh Kumawat MBBS, DMRD, DNB (Radio Diagnosis) Consultant Radiologist

Reg. No: MP - 12614



Shop No. 7, 8 & 9, Naseer Complex, 169 Green Park Colony, D.I.G. Bunglow Square, BHOPAL - 462001













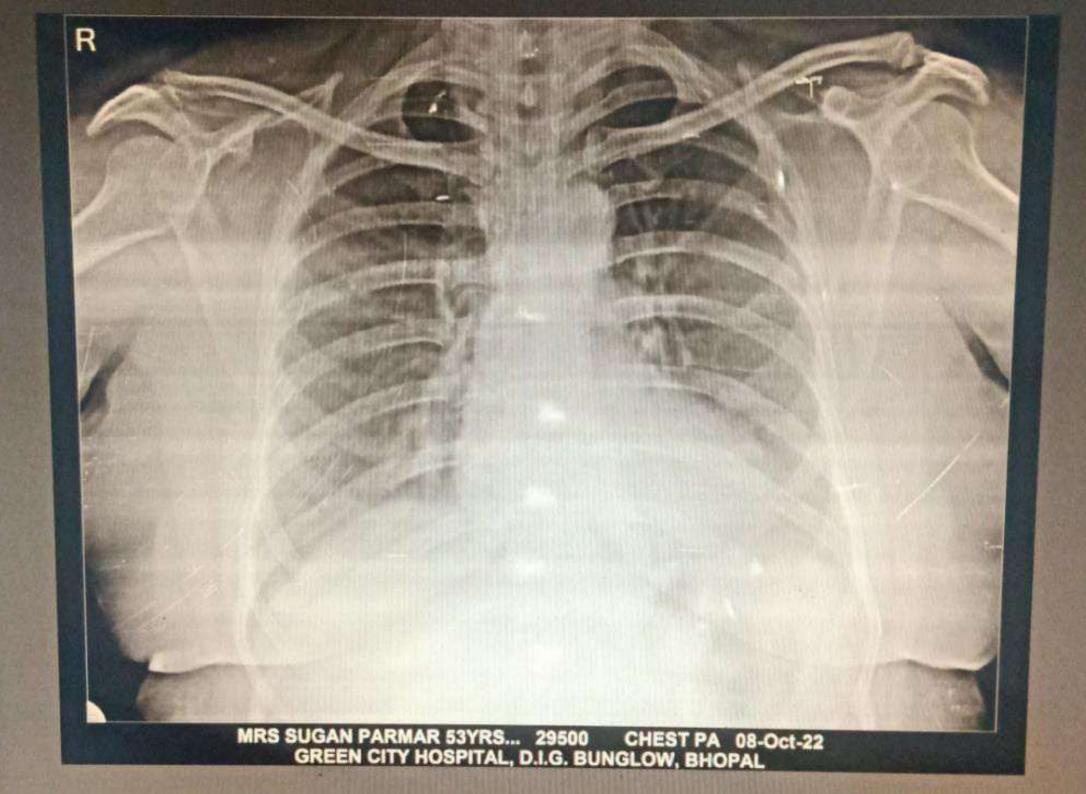
















Near V-Mart, DIG Bungalow, Berasia Road, Bhopal Ph.: 0755-2733323



AN ISO 2015-9001 & NABH CERTIFIED HOSPITAL

NAME OF CLIENT: MRS. SUGAN KUNWAR	Age/Sex:53Y/F	Procedure Date : 08-10-2022	
REF. BY: MEDIWHEEL		Reporting Date : 08-10-2022	

X-RAY CHEST

- > Bilateral lung parenchyma is clear. Reliance Industries Limited
- Bilateral Hilary shadow is normal.
- > Trachea midline is normal.
- > Bilateral CP angle are clear.
- > Cardio thoracic ratio is normal.

Impression: No remarkable abnormality seen in present study.

DR. NITIN KHANTAL CONSULTANT RADIOLOGIST

SCIENCE OF RADIOLOGICAL DAIGNOSIS IS BASED ON INTERPRETATION OF VARIOUS SHADOW PRODUCED BY BOTH NORMAL AND ABNORMAL TISSUES, DISSIMILAR DIVERSE DISEASES PRODUCE SIMILAR SHADOWS, HENCE THIS REPORT REPRESENT VARIOUS POSSIBILITIES AND NOT MEANT FOR MEDICO-LEGAL PURPOSES