

**COLOUR DOPPLER ECHOCARDIOGRAPHY**

<b>Patient Name</b>	<b>Ms NIDHI SHARMA</b>	<b>Reg No</b>	<b>40010000019697</b>
<b>Age</b>	<b>33 YRS</b>	<b>Sex</b>	<b>FEMALE</b>
<b>Ref by</b>	<b>PKG</b>	<b>Date</b>	<b>14/04/23</b>

**2D / M MODE MEASUREMENTS**

AO : 25 mm                      LVID(d) : 40 mm                      IVS(d) : 09 mm  
LA : 30 mm                      LVID (s) : 27 mm                      PW(d) : 09 mm  
EF : 60%

**VALVES**

MITRAL VALVE : Normal  
AORTIC VALVE : Normal  
TRICUSPID VALVE : Normal  
PULMONARY VALVE : Normal

**CHAMBERS**

LEFT ATRIUM : Normal  
RIGHT ATRIUM : Normal sized  
LEFT VENTRICLE : Normal , Normal LV systolic function  
RIGHT VENTRICLE : Normal sized , TAPSE – 23 mm , Normal RV Function

**SEPTAE**

IVS : Intact  
IAS : Intact

**NARAYANA CLINIC**  
A Unit Of NH Integrated Care Private Limited)  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025

<b>Patient Name</b>	MS.NIDHI SHARMA	<b>Requested By</b>	PKG
<b>MRN</b>	40010000019697	<b>Procedure DateTime</b>	14-04-2023 11:47
<b>Age/Sex</b>	33Y/Female	<b>Hospital</b>	NH-LANGFORD

**CHEST RADIOGRAPH (PA VIEW)**

**CLINICAL DETAILS:** For health checkup

**FINDINGS:**

- The lung fields and bronchovascular markings appear normal.
- The cardiac size is within normal limits.
- Mediastinum and great vessels are within normal limits.
- Trachea is normal and is central. The hilar shadows are unremarkable.
- The costo-phrenic angles are clear. No evidence of pleural effusion or pneumothorax.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

**IMPRESSION:**

- **No significant abnormality detected**



Dr Arpita Sanikop  
Junior Consultant

\* This is a digitally signed valid document. Reported Date/Time: 14-04-2023 12:56

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A Unit Of NH Integrated Care Private Limited)  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025

This report has been generated from **NH Teleradiology 24/7**, a service of Narayana Health

-- End of Report --

id: 40010000019697  
ms nidhi sharma  
33 Years  
Female

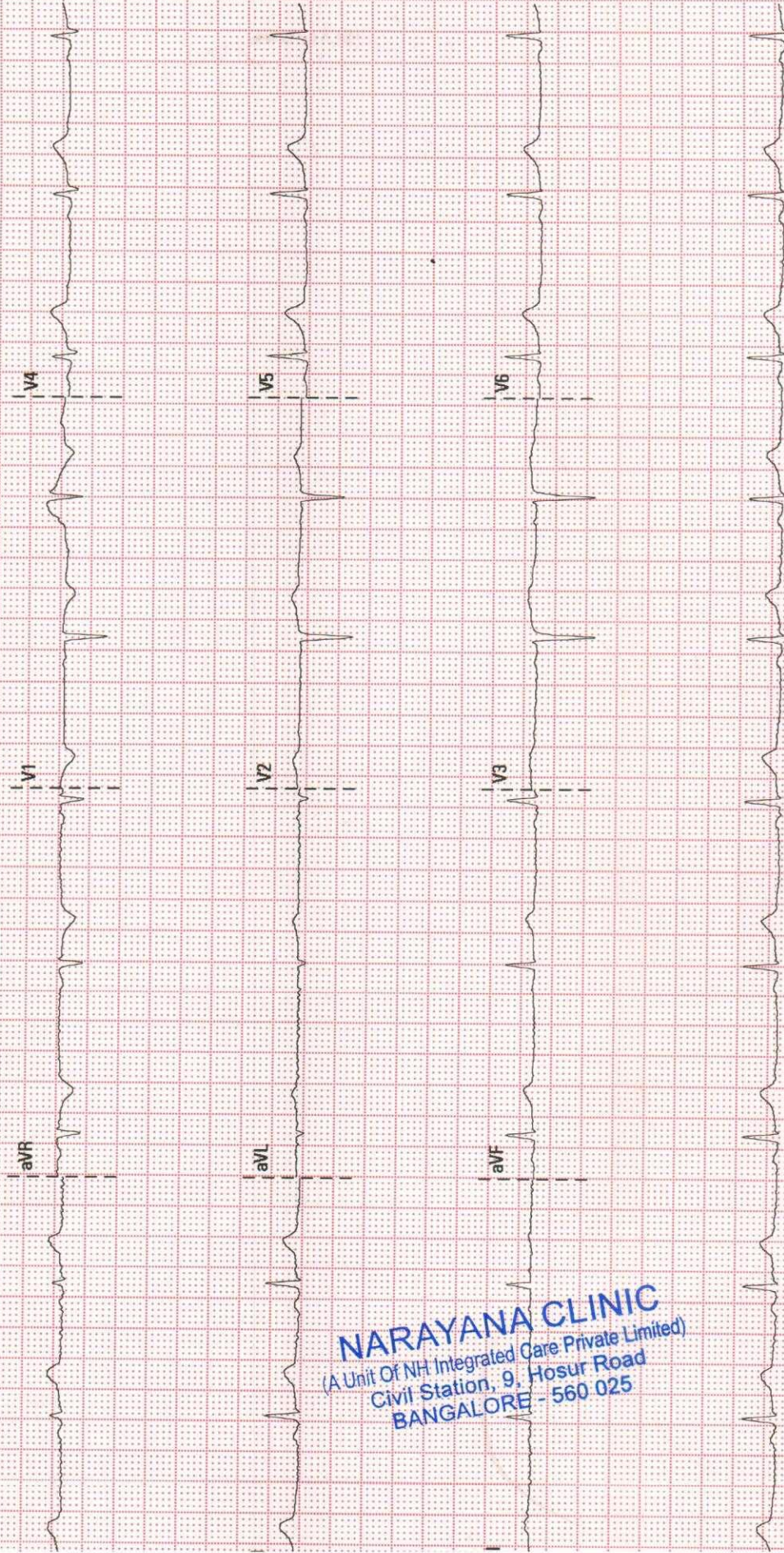
14-04-2023 11:29:09 AM

Vent. Rate  
PR Interval  
QRS Duration  
QT/QTc Interval  
P/QRS/T Axes  
QTc/Hodges

61 bpm  
150 ms  
70 ms  
414/416 ms  
56/80/42 deg

Sinus rhythm  
Poor R-wave progression  
Borderline ECG

Unconfirmed Diagnosis



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25 mm/s 10 mm/mV

BDR 20 Hz

Narayana Medical Centre Langford

02.07.00V28.4.1

SN-FN-77008762

<b>Patient Name</b>	Ms. NIDHI SHARMA	<b>Reg No</b>	40010000019697
<b>Age</b>	33 Yrs	<b>Sex</b>	Female
<b>Ref by</b>	PKG	<b>Date</b>	14/04/23

**Ultrasound Abdomen & Pelvis**

**FINDINGS:**

**Liver** is normal in size and normal echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

**Portal vein** is normal in size, course and caliber. CBD is not dilated

**Gall bladder** Distended, no obvious calculus/sludge seen at the time of scan.

**Pancreas** Head and body seen appears normal rest is persistently obscured by gaseous bowel.

**Spleen** is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

**Kidneys** Both Kidneys are normal in size, shape, and position. RK- 9.3 x 1.3 cm, LK - 9.5 x 1.4 cm. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis at the time of scan.

**Urinary Bladder** is distended. Wall thickness is normal. No evidence of calculi.

**Uterus** is anteverted and normal in size.

Endometrium - 7 mm

Both ovaries are normal in size and echogenicity.

BOWEL GASSES SEEN.

**Impression:**

- **No significant sonological abnormality seen at the time of scan.**

Dr. Naveed Ansar  
Consultant Radiologist

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.

**ANANTHANA CLINIC**  
(A Unit Of NH Integrated Care Private Limited)  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 05:58 PM

Barcode : N12304140002 Specimen : Plasma Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	93	mg/dL	ADA standards 2020 >126 : Diabetes 70 to 99 : Normal 100 to 125 : Pre-diabetes
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	122	-	ADA standards 2020 >200 : Diabetes 70 to 139 : Normal 140 to 199 : Pre-diabetes

--End of Report--

Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



CLINIC  
Unit Of NH Integrated Care Private Limited)  
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**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 12:35 PM

Barcode : N12304140004 Specimen : Serum Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

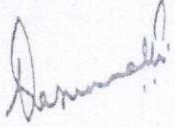
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine	0.55 L	mg/dL	0.6-1.0
eGFR (Calculated)	127.3	mL/min/1.73m <sup>2</sup>	Inductive of Renal Impairment:<60 Note:eGFR is inaccurate for Hemodynamically unstable patients. eGFR is not applicable for less than 18 years of age .
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	8.3	mg/dL	7.0-17.0
<b>Serum Uric Acid</b> (Colorimetric - Uricase,Peroxidase)	3.0	mg/dL	2.5-6.2
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total	143 L	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides (LPL/GK)	74	-	0.0-150.0
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	44	mg/dL	40.0-60.0
Non-HDL Cholesterol	99	-	-
LDL Cholesterol (Colorimetric)	84.2 L	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190
VLDL Cholesterol (Calculated)	14.8	mg/dL	<40.0
Cholesterol /HDL Ratio (Calculated)	3.3	-	0.0-5.0
<b>THYROID PROFILE (T3, T4, TSH)</b>			

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Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

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- Kindly correlate clinically.



**IVAKAYANA CLINIC**  
A Unit Of NH Integrated Care Private Limited)  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025

## DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 10:58 AM

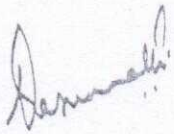
Barcode : N02304140001 Specimen : Urine Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

## MOLECULAR DIAGNOSTICS

Test	Result	Unit
Urine For Sugar (Post Prandial)	Nil	-

--End of Report--



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

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**WINDMILL CLINIC**  
A Unit Of NH Integrated Care Private Limited)  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025



## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 11:16 AM

Barcode : N22304140003 Specimen : Whole Blood Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

## HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	12.32	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	<b>3.78 L</b>	Million/ul	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	<b>34.4 L</b>	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	90.9	fL	80.0-100.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	<b>32.6 H</b>	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	<b>35.8 H</b>	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.6	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	330.0	Thous/ $\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	7.70	Thous/ $\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCS Technology Plus Microscopy)	71.76	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	20.78	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.46	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	1.85	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.14	%	0.0-2.0

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## DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 10:59 AM

Barcode : N12304140003 Specimen : Whole Blood Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

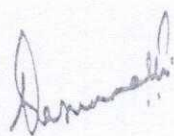
## BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HbA1C	5.1	%	Normal: 4.0-5.6 Prediabetes:5.7-6.4 Diabetes:>6.5 (ADA Recommendation 2017)
Estimated Average Glucose	99.67	%	-

**Interpretation:**

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

--End of Report--



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

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**NARAYANA CLINIC**  
Unit Of NH Integrated Care Private Limited  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 11:44 AM

Barcode : N82304140001 Specimen : Urine Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317 Rectified On : 14/04/2023 11:45 AM

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>URINE ROUTINE &amp; MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
Volume	30.00	ml	-
Colour	Pale Yellow	-	-
Appearance	Clear	-	-
<b>CHEMICAL EXAMINATION</b>			
pH(Reaction)	6.5	-	4.8-7.5
Sp. Gravity	1.020	-	1.002 - 1.03
Protein	Nil	-	-
Urine Glucose	Nil	-	-
Ketone Bodies	Nil	-	-
Bile Salts	Nil	-	-
Bile Pigment (Bilirubin)	Nil	-	-
Urobilinogen	Normal	-	-
<b>MICROSCOPIC EXAMINATION</b>			
Pus Cells	3-4/hpf	-	-
RBC	Nil	-	-
Epithelial Cells	3-4/hpf	-	-

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Civil Station, 9, Hosur Road  
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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 14/04/2023 10:58 AM

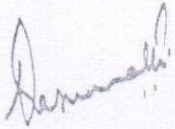
Barcode : N22304140002 Specimen : Whole Blood - ESR Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	8	mm/1hr	0.0-12.0

--End of Report--



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

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- Kindly correlate clinically.



**NARAYANA CLINIC**  
(Unit Of NH Integrated Care Private Limited)  
Hosur Road  
560 025

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Collected On : 14/04/2023 09:31 AM Received On : 14/04/2023 09:32 AM Reported On : 15/04/2023 02:48 PM

Barcode : N72304140001 Specimen : Smear Consultant : Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8939320317

CYTOLOGY

PAP SMEAR

LAB No. P:13/2023

MATERIAL RECEIVED Received 2 unstained smears.

CLINICAL DETAILS LMP:22/03/2023  
No other pertinent clinical information.

SPECIMEN TYPE Routine type.

SMEAR ADEQUACY Smears are satisfactory for evaluation.

GENERAL CATEGORIZATION CERVICAL CYTOLOGY SMEAR REPORT-The Bethesda system 2014  
Smears examined show mainly intermediate cells and a few superficial cells. A few trophozoites of Trichomonas Vaginalis are seen. The background show's scattered neutrophils and many Dodderlein bacilli. No dysplastic /malignant cells are seen in the smears examined.

IMPRESSION Pap smears showing a few trophozoites of Trichomonas Vaginalis.

NOTE Kindly correlate clinically.

Pap test is only a screening test for cervical cancer,with inherent false negative results.

--End of Report--

Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

**NARAYANA CLINIC**  
(A Unit of NHI Integrated Care Private Limited)  
Civil Station Road  
Bangalore - 560 025  
985 025

**GREAT ARTERIES**

AORTA : Normal sized , Normal arch

PULMONARY ARTERY : Normal

**DOPPLER DATA**

MITRAL VALVE : E : 1.2 m/s , A : 0.6 m/s, MR – Trivial

AORTIC VALVE : Pgr – 9 mmHg, AR - Trivial

TRICUSPID VALVE : TR – Trivial , PASP – 25 mmHg

PULMONARY VALVE : Pgr – 6 mmHg

**WALL MOTION ABNORMALITIES : NO RWMA**

PERICARDIUM : Nil

VEGETATION/THROMBUS : Nil

**OTHER FINDINGS :**

HR : 65 bpm (Sinus Rhythm)

IVC : 13 mm , Normal Sized, Collapsing, Normal RA pressure

**FINAL DIAGNOSIS**

NORMAL CHAMBER DIMENSIONS

NORMAL VALVES

NORMAL PA PRESSURE

NO RWMA

NORMAL RV AND LV FUNCTION

LVEF- 60%

Done by : SHABRIN TAJ

CARDIAC SONOGRAPHER

Signature

MAHARAJA CLINIC  
Unit 01/11 Integrated Care Private Limited  
Civil Station, 9, Hosur Road  
BANGALORE - 560 025

<b>Patient Name</b>	Ms. NIDHI SHARMA	<b>Reg No</b>	40010000019697
<b>Age</b>	33 Yrs	<b>Sex</b>	Female
<b>Ref by</b>	PKG	<b>Date</b>	14/04/23

**Ultrasound Abdomen & Pelvis**

**FINDINGS:**

**Liver** is normal in size and normal echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

**Portal vein** is normal in size, course and caliber. CBD is not dilated

**Gall bladder** Distended ,no obvious calculus/sludge seen at the time of scan .

**Pancreas** Head and body seen appears normal rest is persistently obscured by gaseous bowel.

**Spleen** is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

**Kidneys** Both Kidneys are normal in size , shape , and position. RK- 9.3 x 1.3 cm ,LK – 9.5 x 1.4 cm . Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis at the time of scan.

**Urinary Bladder** is distended. Wall thickness is normal. No evidence of calculi.

**Uterus** is anteverted and normal in size.  
Endometrium – 7 mm  
Both ovaries are normal in size and echogenicity .

BOWEL GASSES SEEN.

***Impression:***

- ***No significant sonological abnormality seen at the time of scan.***

Dr. Naveed Ansar  
Consultant Radiologist

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.

<b>Patient Name</b>	MS.NIDHI SHARMA	<b>Requested By</b>	PKG
<b>MRN</b>	40010000019697	<b>Procedure DateTime</b>	14-04-2023 11:47
<b>Age/Sex</b>	33Y/Female	<b>Hospital</b>	NH-LANGFORD

**CHEST RADIOGRAPH (PA VIEW)**

**CLINICAL DETAILS:** For health checkup

**FINDINGS:**

- The lung fields and bronchovascular markings appear normal.
- The cardiac size is within normal limits.
- Mediastinum and great vessels are within normal limits.
- Trachea is normal and is central. The hilar shadows are unremarkable.
- The costo-phrenic angles are clear. No evidence of pleural effusion or pneumothorax.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

**IMPRESSION:**

- **No significant abnormality detected**



Dr Arpita Sanikop  
Junior Consultant

\* This is a digitally signed valid document. Reported Date/Time: 14-04-2023 12:56



Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Tri Iodo Thyronine (T3) 1.78 H ng/mL 0.97-1.69

**Interpretations:**

Thyroid hormone binding protein can profoundly affect total T3 and total T4 levels especially in pregnancy and in patients on steroid therapy.

Unbound fractions of T3 and T4(FT3, FT4) of thyroid hormones are biologically active forms and correlate more closely with clinical status of the patient.

Thyroxine (T4) 8.14 ug/dl 5.53-11.0

TSH (Thyroid Stimulating Hormone) 1.29 µIU/mL 0.4-4.049

**Interpretations:**

TSH levels are subject to circadian variation, reaching peak levels between 2-4 a.m. and minimum between 6-10 p.m. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentration.

**LIVER FUNCTION TEST(LFT)**

Bilirubin Total (Colorimetric -Diazo Method)	0.7	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.1	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.6	-	-
Total Protein (Colorimetric - Biuret Method)	7.3	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.4	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.9	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.52	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	19	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	16	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	88	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	16	U/L	12.0-43.0

--End of Report--

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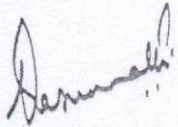
Absolute Neutrophil Count	5.53 L	-	1800.0-8000.0
Absolute Lymphocyte Count	1.61 L	-	990.0-3150.0
Absolute Monocyte Count	0.43	-	-
Absolute Eosinophil Count	0.15	-	-
Absolute Basophil Count	0.02	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### BLOOD GROUP & RH TYPING

Blood Group	"O"	-	-
RH Typing	POSITIVE	-	-

--End of Report--



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

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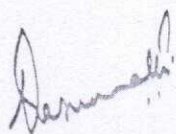
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(A Unit of NH Integrated Care Private Limited)  
Civil Station, 9 Hosur Road  
BANGALORE - 560 025



Patient Name : Ms Nidhi Sharma MRN : 40010000019697 Gender/Age : FEMALE , 33y (03/01/1990)

Crystals	Nil	-	-
Casts	Nil	-	-
Bacteria	Nil	-	-

--End of Report--



Dr. Vasumathi Kishore  
MBBS, DCP  
CONSULTANT PATHOLOGIST

**Note**

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



NARAYANA CLINIC  
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