

DR. PRAKASH D MAKWANA  
 M.D.  
 REG.NO.G-29078  
 MO.NO-9722116164

UHID: <u>OSP29057</u>		Date: <u>9/11/22</u>	Time: <u>17:17</u>
Patient Name: <u>PARTH</u>		Height: <u>176 cm</u>	
Age / Sex: <u>31 Y 21 M</u>	LMP:	Weight: <u>68 kg</u>	
History:			
C/C/O:		History:	
<u>NO body complaint</u>		—	
Allergy History: <u>NADA</u>		Addiction: —	
Nutritional Screening: <u>Well-Nourished</u> / Malnourished / Obese			
Vitals & Examination:			
Temperature: <u>Afebrile</u>			
Pulse: <u>82/min</u>			
BP: <u>110/80 mm</u>			
SPO2: <u>98% OI RA</u>			
Provisional Diagnosis:			

Advice:

2) Use still a med ✓?

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
		ATI				
		(IX)				

Insulin Scale	RBS-	hourly	Diet Advice:
< 150 -	300-350 -		Follow-up:
150-200 -	350-400 -		Sign:
200-250 -	400-450 -		
250-300 -	> 450 -		

1, 2, 3

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

UHID: 00129051	Date: 7/11/22	Time: 19:45
Patient Name: Parthibhi Shah	Age / Sex: 31	Height: 176 cm
	Weight: 95 kg	
History: C/O Rupture of lens. U.S.		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: D.V. of eye < C/O W.V. < C/O C/O Clear vision		
Diagnosis:		


Rx						
No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

Other Advice:

Follow-up:

Consultant's Sign: 



## LABORATORY REPORT



Name : PARTH N SHAH	Sex/Age : Male / 31 Years	Case ID : 21102200228
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2386379
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 07-Nov-2022 09:12	Sample Type :	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22236348

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Haemogram (CBC)</b>			
Haemoglobin (Colorimetric)	17.2	G%	13.00 - 17.00
RBC (Electrical Impedance)	5.54	millions/cu mm	4.50 - 5.50
PCV(Calc)	52.69	%	40.00 - 50.00
Monocyte	182	/μL	200.00 - 1000.00
<b>Lipid Profile</b>			
HDL Cholesterol	37.86	mg/dL	48 - 77
Chol/HDL	5.20		0 - 4.1
LDL Cholesterol	129.65	mg/dL	65 - 100
<b>Liver Function Test</b>			
S.G.P.T.	57.12	U/L	0 - 41
Albumin	5.40	gm/dL	3.4 - 5
A/G Ratio	2.4		1.0 - 2.1
Bilirubin Total	2.21	mg/dL	0.2 - 1.0
Bilirubin Unconjugated	1.46	mg/dL	0 - 0.8
Uric Acid	7.42	mg/dL	3.5 - 7.2

Abnormal Result(s) Summary End

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

Page 1 of 13

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## LABORATORY REPORT



Name : **PARTH N SHAH** Sex/Age : **Male / 31 Years** Case ID : **21102200228**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 09:27	Acc. Remarks : Normal	Ref Id2 : O22236348

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

#### HB AND INDICES

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL
Haemoglobin (Colorimetric)	H <b>17.2</b>	G%	13.00 - 17.00
RBC (Electrical Impedance)	H <b>5.54</b>	millions/cumm	4.50 - 5.50
PCV(Calc)	H <b>52.69</b>	%	40.00 - 50.00
MCV (RBC histogram)	95.1	fL	83.00 - 101.00
MCH (Calc)	31.0	pg	27.00 - 32.00
MCHC (Calc)	32.6	gm/dL	31.50 - 34.50
RDW (RBC histogram)	15.10	%	11.00 - 16.00

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

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
Total WBC Count	<b>6070</b>	/μL	4000.00 - 10000.00	
<b>EXPECTED VALUES</b>				
Neutrophil	[ % ] 59.0	%	40.00 - 70.00	[ Abs ] 3581 /μL 2000.00 - 7000.00
Lymphocyte	36.0	%	20.00 - 40.00	2185 /μL 1000.00 - 3000.00
Eosinophil	2.0	%	1.00 - 6.00	121 /μL 20.00 - 500.00
Monocytes	3.0	%	2.00 - 10.00	L <b>182</b> /μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0 /μL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	<b>230000</b>	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	1.64		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.)

Page 2 of 13

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## LABORATORY REPORT



Name : <b>PARTH N SHAH</b>	Sex/Age : <b>Male / 31 Years</b>	Case ID : <b>21102200228</b>
Ref.By : <b>HOSPITAL</b>	Dis. At :	Pt. ID : <b>2386379</b>
Bill. Loc. : <b>Aashka hospital</b>		Pt. Loc :
Reg Date and Time : <b>07-Nov-2022 09:12</b>	Sample Type : <b>Whole Blood EDTA</b>	Mobile No :
Sample Date and Time : <b>07-Nov-2022 09:12</b>	Sample Coll. By :	Ref Id1 : <b>OSP29051</b>
Report Date and Time : <b>07-Nov-2022 09:27</b>	Acc. Remarks : <b>Normal</b>	Ref Id2 : <b>O22236348</b>

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

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Page 3 of 13

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Name : **PARTH N SHAH** Sex/Age : **Male / 31 Years** Case ID : **21102200228**  
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 10:39	Acc. Remarks : Normal	Ref Id2 : O22236348

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

ESR	04	mm after 1hr	3 - 15	
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Page 4 of 13

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Name : **PARTH N SHAH** Sex/Age : **Male / 31 Years** Case ID : **21102200228**  
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 10:04	Acc. Remarks : Normal	Ref Id2 : O22236348

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  
Rh Type

**B**  
**POSITIVE**

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

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Page 5 of 13

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## LABORATORY REPORT



Name : PARTH N SHAH	Sex/Age : Male / 31 Years	Case ID : 21102200228
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2386379
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 10:06	Acc. Remarks : Normal	Ref Id2 : O22236348

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	1.025		1.005 - 1.030
pH	7.00		5 - 8
Leucocytes (ESTERASE)	Negative		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	Nil	/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	Negative		Negative

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Page 6 of 13

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## LABORATORY REPORT



Name : **PARTH N SHAH** Sex/Age : **Male / 31 Years** Case ID : **21102200228**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
 Bill. Loc. : **Aashka hospital** Pt. Loc. :  
 Reg Date and Time : **07-Nov-2022 09:12** Sample Type : **Spot Urine** Mobile No :  
 Sample Date and Time : **07-Nov-2022 09:12** Sample Coll. By : Ref Id1 : **OSP29051**  
 Report Date and Time : **07-Nov-2022 10:06** Acc. Remarks : **Normal** Ref Id2 : **O22236348**

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)

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Page 7 of 13

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## LABORATORY REPORT



Name : **PARTH N SHAH** Sex/Age : **Male / 31 Years** Case ID : **21102200228**  
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
 Bill. Loc. : **Aashka hospital** Pt. Loc. :  
 Reg Date and Time : **07-Nov-2022 09:12** Sample Type : **Serum** Mobile No :  
 Sample Date and Time : **07-Nov-2022 09:12** Sample Coll. By : Ref Id1 : **OSP29051**  
 Report Date and Time : **07-Nov-2022 10:31** Acc. Remarks : **Normal** Ref Id2 : **O22236348**

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

#### Lipid Profile

<b>Cholesterol</b>	<b>196.79</b>	mg/dL	110 - 200
<b>HDL Cholesterol</b>	<b>L 37.86</b>	mg/dL	48 - 77
<b>Triglyceride</b>	<b>146.40</b>	mg/dL	40 - 200
<b>VLDL</b> <i>Calculated</i>	<b>29.28</b>	mg/dL	10 - 40
<b>Chol/HDL</b> <i>Calculated</i>	<b>H 5.20</b>		0 - 4.1
<b>LDL Cholesterol</b> <i>Calculated</i>	<b>H 129.65</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 assessment 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)

*Shah*

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Page 8 of 13

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Name : <b>PARTH N SHAH</b>	Sex/Age : <b>Male / 31 Years</b>	Case ID : <b>21102200228</b>
Ref.By : <b>HOSPITAL</b>	Dis. At :	Pt. ID : <b>2386379</b>
Bill. Loc. : <b>Aashka hospital</b>		Pt. Loc. :
Reg Date and Time : <b>07-Nov-2022 09:12</b>	Sample Type : <b>Serum</b>	Mobile No :
Sample Date and Time : <b>07-Nov-2022 09:12</b>	Sample Coll. By :	Ref Id1 : <b>OSP29051</b>
Report Date and Time : <b>07-Nov-2022 10:31</b>	Acc. Remarks : <b>Normal</b>	Ref Id2 : <b>O22236348</b>

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

#### Liver Function Test

<b>S.G.P.T.</b>	H	<b>57.12</b>	U/L	0 - 41
<b>S.G.O.T.</b>		<b>31.23</b>	U/L	15 - 37
<b>Alkaline Phosphatase</b>		<b>62.87</b>	U/L	40 - 130
<b>Gamma Glutamyl Transferase</b>		<b>50.47</b>	U/L	8 - 61
<b>Proteins (Total)</b>		<b>7.67</b>	gm/dL	6.4 - 8.2
<b>Albumin</b>	H	<b>5.40</b>	gm/dL	3.4 - 5
<b>Globulin</b> <i>Calculated</i>		<b>2.27</b>	gm/dL	2 - 4.1
<b>A/G Ratio</b> <i>Calculated</i>	H	<b>2.4</b>		1.0 - 2.1
<b>Bilirubin Total</b>	H	<b>2.21</b>	mg/dL	0.2 - 1.0
<b>Bilirubin Conjugated</b>		<b>0.75</b>	mg/dL	
<b>Bilirubin Unconjugated</b> <i>Calculated</i>	H	<b>1.46</b>	mg/dL	0 - 0.8

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

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Page 9 of 13

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## LABORATORY REPORT



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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2386379
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Serum	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 10:31	Acc. Remarks : Normal	Ref Id2 : O22236348

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

<b>BUN (Blood Urea Nitrogen)</b> <small>GLDH</small>	<b>11.30</b>	mg/dL	6.00 - 20.00	
<b>Creatinine</b>	<b>1.14</b>	mg/dL	0.50 - 1.50	
<b>Uric Acid</b>	<b>H 7.42</b>	mg/dL	3.5 - 7.2	

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Page 10 of 13

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 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 09:54	Acc. Remarks : Normal	Ref Id2 : O22236348

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

#### Glycated Haemoglobin Estimation

<b>HbA1C</b>	<b>5.40</b>	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
<b>Estimated Avg Glucose (3 Mths)</b> <i>Calculated</i>	<b>108.28</b>	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.

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Page 11 of 13

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 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2386379**  
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : 07-Nov-2022 09:12 Sample Type : Serum Mobile No :  
 Sample Date and Time : 07-Nov-2022 09:12 Sample Coll. By : Ref Id1 : OSP29051  
 Report Date and Time : 07-Nov-2022 10:37 Acc. Remarks : Normal Ref Id2 : O22236348

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
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### Thyroid Function Test

Triiodothyronine (T3)	88.24	ng/dL	70 - 204	
Thyroxine (T4) CMIA	6.8	ng/dL	4.6 - 10.5	
TSH CMIA	1.889	µIU/mL	0.4 - 4.2	

#### 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/↑	↓

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)

Page 12 of 13

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## LABORATORY REPORT



Name : PARTH N SHAH	Sex/Age : Male / 31 Years	Case ID : 21102200228
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2386379
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 07-Nov-2022 09:12	Sample Type : Serum	Mobile No :
Sample Date and Time : 07-Nov-2022 09:12	Sample Coll. By :	Ref Id1 : OSP29051
Report Date and Time : 07-Nov-2022 10:37	Acc. Remarks : Normal	Ref Id2 : O22236348

----- 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)

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

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

Page 13 of 13

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

**PATIENT NAME: PARTH N SHAH**

**GENDER/AGE: Male / 31 Years**

**DATE: 07/11/22**

**DOCTOR:**

**OPDNO: OSP29051**

### 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:** Left kidney is not seen in left renal fossa/ elsewhere in abdomen suggest congenital absent. Right kidney is compensatory enlarged in size. Right renal contour is smooth. Cortical and central echoes appear normal. Right cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen. No evidence of perinephric fluid collection is seen.

Right kidney measures about 12.6 x 6.4 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 90 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:** Absent left kidney with compensatory enlarged right kidney.  
Normal sonographic appearance of liver, GB, Pancreas, spleen, bladder and prostate.

  
**DR. SNEHAL PRAJAPATI**  
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.  
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CIN: L85110GJ2012PLC072647



**PATIENT NAME: PARTH N SHAH**  
**GENDER/AGE: Male / 31 Years**  
**DOCTOR:**  
**OPDNO: OSP29051**

**DATE: 07/11/22**

**X-RAY CHEST PA**

Both lung fields show increased broncho-vascular markings.  
**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.

  
**DR. SNEHAL PRAJAPATI**  
**CONSULTANT RADIOLOGIST**

PATIENT NAME: PARTH N SHAH  
GENDER/AGE: Male / 31 Years  
DOCTOR: DR. HASIT JOSHI  
OPDNO: OSP29051

DATE: 07/11/22

**2D-ECHO**

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 32mm	
LEFT ATRIUM	: 31mm	
LV Dd / Ds	: 42/32mm	<u>EF 57%</u>
IVS / LVPW / D	: 12/10mm	BORDERLINE LVH
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 0.8/0.7m/s	
AORTIC	: 1.3m/s	
PULMONARY	: 1.2m/s	
COLOUR DOPPLER	: TRIVIAL MR/TR	
RVSP	: 28mmHg	
CONCLUSION	: BORDERLINE LVH; NORMAL LV FUNCTION.	

  
CARDIOLOGIST  
DR. HASIT JOSHI (9825012235)

07.11.2022 11:29:01 AM  
ASHKA HOSPITAL LTD.  
SARGASAN  
GANDHINAGAR

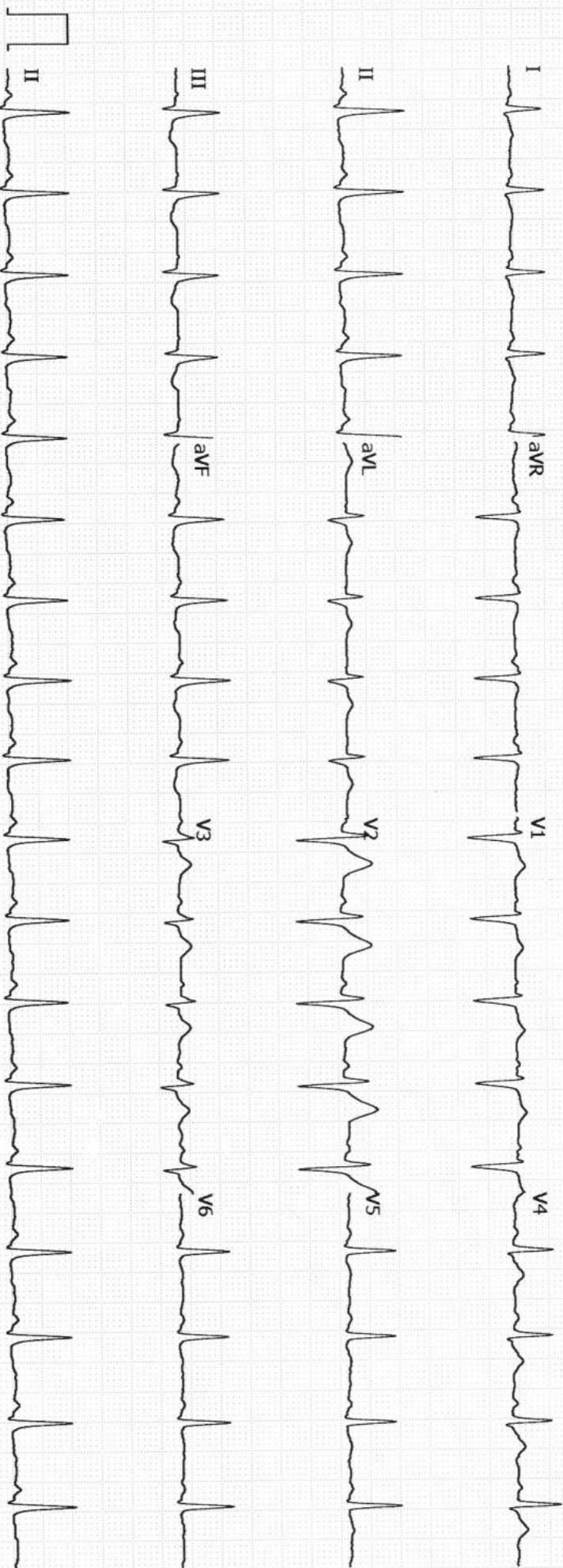
Location: 1  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room:

110 bpm  
-- / -- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS :	84 ms	Sinus tachycardia
QT / QTcBaz :	312 / 422 ms	Nonspecific T wave abnormality
PR :	112 ms	Abnormal ECG
P :	88 ms	
RR / PP :	546 / 545 ms	
P / QRS / T :	50 / 57 / -11 degrees	



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www.aashkahospitals.in  
CIN: L85110GJ2012PLC072647



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

UHID: <i>OSP 29051</i>	Date: <i>7/11/22</i>	Time: <i>13:29</i>
Patient Name: <i>Parth Shah</i>	Age / Sex: <i>31/M</i>	Height: <i>176cm</i>
		Weight: <i>95kg</i>
History:		
Examination: <i>Calculus +</i> <i>Stn - +</i> <i>Carious <math>\frac{0}{0}</math> / 02</i>		
Diagnosis:		

Treatment:

→ Sabz

₹ 200

→ Resh

$\frac{0}{0} / 00$

₹ 1400

↓  
Debit