

SUBURBAN DIAGNOSTICS - BHAYANDER EAST

Patient Name: SANGEETA MAKWANA

Date and Time: 3rd Dec 22 11:14 AM

Patient ID: 2233719569

Age **50** **10** **2**
years months days

Gender **Female**

Heart Rate **82bpm**

Patient Vitals

BP: 130/80 mmHg

Weight: 68 kg

Height: 154 cm

Pulse: NA

Spo2: NA

Resp: NA

Others: _____

Measurements

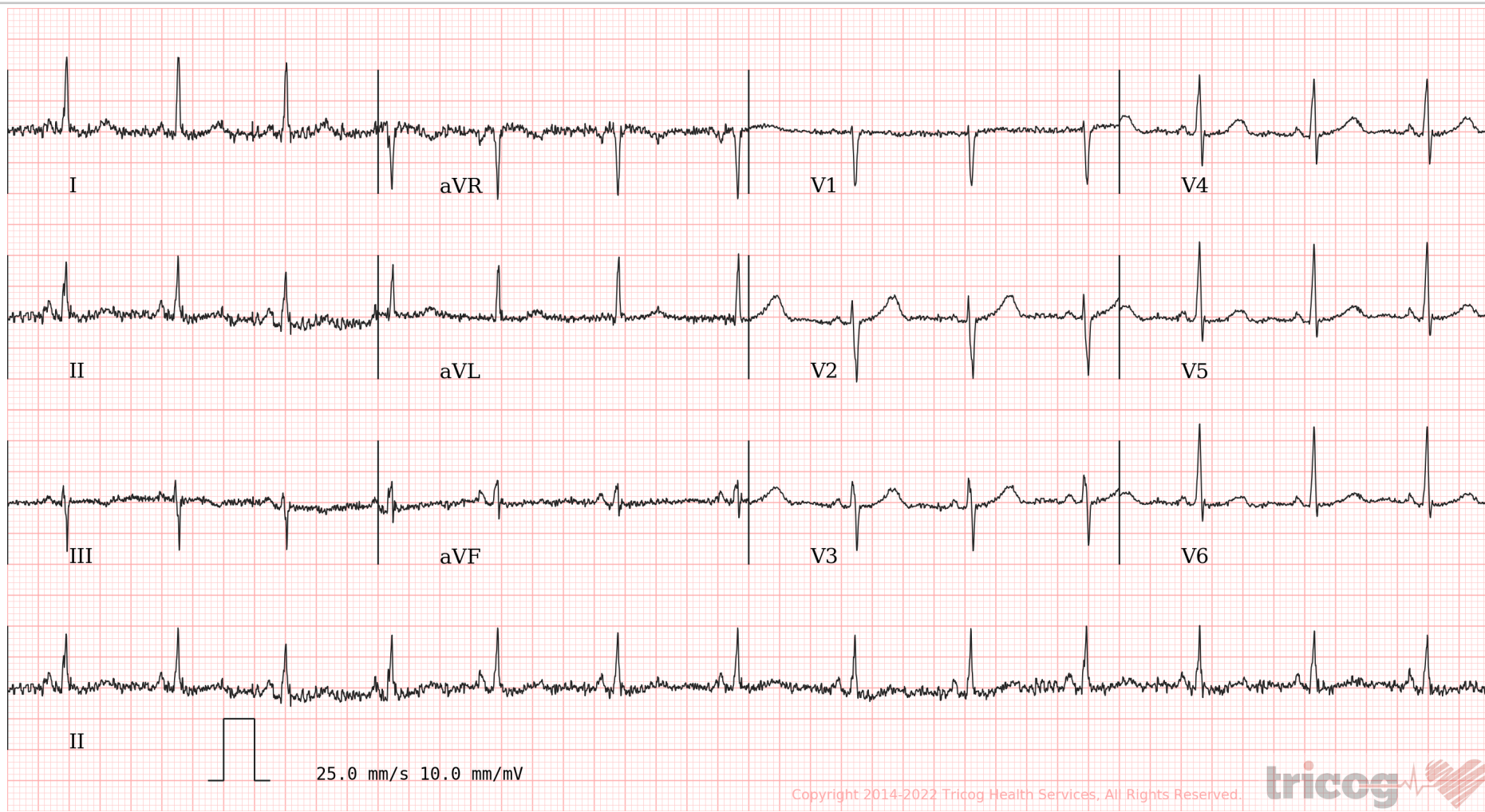
QRSD: 62ms

QT: 378ms

QTc: 441ms

PR: 122ms

P-R-T: 53° 12° 33°



Copyright 2014-2022 Tricog Health Services, All Rights Reserved.



ECG Within Normal Limits: Sinus Rhythm, Normal Axis No significant ST-T changes. Please correlate clinically.

REPORTED BY

Dr. Smita Valani
MBBS, D. Cardiology
2011/03/0587



CID : 2233719569
Name : Mrs Sangeeta MAKWANA
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 03-Dec-2022
Reported : 03-Dec-2022/14:50

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.9 cm), shape and shows smooth margins. It shows increased parenchymal echotexture. No obvious cystic or solid lesion made out in the parenchyma. The intra hepatic biliary and portal radicals appear normal. The main portal vein appears normal.

GALL BLADDER:

The gall bladder is folded and physiologically distended. Neck region is not well visualised. Gall bladder wall appears normal. No evidence of calculus, mass lesion or sludge seen in the visualised lumen.

COMMON BILE DUCT:

The visualized common bile duct is normal in calibre. Terminal common bile duct is obscured due to bowel gas artefacts.

PANCREAS:

The pancreas appears normal. No evidence of solid or cystic mass lesion made out.

KIDNEYS:

Right kidney measures 9.9 x 3.7 cm. Left kidney measures 9.4 x 4.8 cm. Both the kidneys are normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. Pelvicalyceal system is normal. No evidence of any calculus, hydronephrosis or mass lesion seen on both sides.

SPLEEN:

The spleen is normal in size (7.7 cm). Parenchyma appears normal. No evidence of focal lesion is noted.

URINARY BLADDER:

The urinary bladder is well distended and reveals no intraluminal abnormality. Bladder wall appears normal. No obvious calculus or mass lesion made out in the lumen.

There is no evidence of any lymphadenopathy or ascites.

UTERUS : POST MENOPAUSAL

The uterus is anteverted and appears normal. It measures 5.9 x 4.3 x 3.8 cms in size. Myometrium appears homogenous. Two ill defined hypoechoic to heterogenous lesions measuring 23.6 x 21.9 mm and 16.2 x 14.5 mm are seen in the anterior myometrium. No obvious abnormal vascularity made out - s/o fibroids. The endometrium is pushed posteriorly, appears normal and measures 5.4 mm.



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : Mrs Sangeeta MAKWANA
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 03-Dec-2022
Reported : 03-Dec-2022/14:50

OVARIES:

Both ovaries are not visualised – possibly atrophic(post menopausal).

There is no evidence of any ovarian or adnexal mass seen.

No free fluid is seen in the pouch of douglas.

IMPRESSION:

- **Grade I fatty infiltration of liver.**
- **Uterine fibroids.**

Kindly correlate clinically.

Investigations have their limitation. Solitary pathological/Radiological & other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms & other related tests. Please interpret accordingly.

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

This report is prepared and physically checked by DR VIBHA S KAMBLE before dispatch.

DR.VIBHA S KAMBLE
MBBS ,DMRD
Reg No -65470
Consultant Radiologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : Mrs Sangeeta MAKWANA
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 03-Dec-2022
Reported : 03-Dec-2022/14:50



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : Mrs Sangeeta MAKWANA
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 03-Dec-2022
Reported : 03-Dec-2022/16:27

X-RAY CHEST PA VIEW

Positional rotation seen.

Calcific foci noted in the right mid zone s/o old healed lesions.

Increased reticuloalveolar markings are seen in both the lung fields.

The lung fields are otherwise clear with no active parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal.

The domes of the diaphragm and hila are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal.

IMPRESSION:

No significant active parenchymal abnormality detected.

Kindly correlate clinically.

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

This report is prepared and physically checked by DR VIBHA S KAMBLE before dispatch.

DR.VIBHA S KAMBLE
MBBS ,DMRD
Reg No -65470
Consultant Radiologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : Mrs Sangeeta MAKWANA
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 03-Dec-2022
Reported : 03-Dec-2022/16:27



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 12:57

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	13.1	12.0-15.0 g/dL	Spectrophotometric
RBC	4.36	3.8-4.8 mil/cmm	Elect. Impedance
PCV	39.8	36-46 %	Measured
MCV	91	80-100 fl	Calculated
MCH	30.0	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	13.4	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6430	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	26.8	20-40 %	
Absolute Lymphocytes	1723.2	1000-3000 /cmm	Calculated
Monocytes	6.5	2-10 %	
Absolute Monocytes	418.0	200-1000 /cmm	Calculated
Neutrophils	63.0	40-80 %	
Absolute Neutrophils	4050.9	2000-7000 /cmm	Calculated
Eosinophils	3.6	1-6 %	
Absolute Eosinophils	231.5	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	6.4	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	358000	150000-400000 /cmm	Elect. Impedance
MPV	8.1	6-11 fl	Calculated
PDW	13.3	11-18 %	Calculated



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 13:57

RBC MORPHOLOGY

Hypochromia -
Microcytosis -
Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB 39 2-20 mm at 1 hr. Westergren

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 16:39

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	112.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	119.5	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 14:56

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
KIDNEY FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BLOOD UREA, Serum	24.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	11.6	6-20 mg/dl	Calculated
CREATININE, Serum	0.62	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	108	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.5	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
URIC ACID, Serum	5.0	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.3	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.9	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	142	135-148 mmol/l	ISE
POTASSIUM, Serum	4.5	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	102	98-107 mmol/l	ISE

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 14:39

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.1	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	128.4	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 04-Dec-2022 / 11:26
Reported : 04-Dec-2022 / 15:45

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
EXAMINATION OF FAECES

PARAMETER RESULTS BIOLOGICAL REF RANGE

PHYSICAL EXAMINATION

Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent

CHEMICAL EXAMINATION

Reaction (pH)	Acidic (5.0)	-
Occult Blood	Absent	Absent

MICROSCOPIC EXAMINATION

Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent
Reducing Substances	-	Absent

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 16:44

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
URINE EXAMINATION REPORT**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	6.5	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	5-6	Less than 20/hpf	
Others	-		

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein:(1+ -25 mg/dl, 2+ -75 mg/dl, 3+ - 150 mg/dl, 4+ - 500 mg/dl)
- Glucose:(1+ ~ 50 mg/dl, 2+ -100 mg/dl, 3+ ~300 mg/dl,4+ ~1000 mg/dl)
- Ketone:(1+ ~5 mg/dl, 2+ ~15 mg/dl, 3+ ~ 50 mg/dl, 4+ ~ 150 mg/dl)

Reference: Pack insert



MC-2111



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 16:44

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 13:09
Reported : 05-Dec-2022 / 18:34

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
PAP SMEAR REPORT**

Specimen:- (G/SDC - 9840/22)

Received LBC vial.

Adequacy:-

Satisfactory for evaluation.

Squamous metaplastic cells are present.

Microscopic:-

Smear reveals intermediate and parabasal squamous cells along with moderate neutrophilic infiltrate.

Interpretation:-

1. Negative for intraepithelial lesion or malignancy
2. Inflammatory smear

Advised : Repeat PAP smear evaluation after control of local inflammation with HPV testing.

Report as per " THE BETHESDA SYSTEM" for cervicovaginal reporting.

Note: Pap test is a screening test for cervical cancer with inherent false negative results.

LBC samples will be retained for a period of one month after release of report. Any further tests required (eg HPV testing- test code PATH007131) may be ordered within this period.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***



Dr.SHAMLA KULKARNI
MD (PATH)
Consultant Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 15:18

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	B
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:
ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Dr. Vrushi Shroff

Dr.VRUSHALI SHROFF
M.D.(PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 14:05

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	201.6	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	142.9	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	56.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	145.4	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	116.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	29.4	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.6	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.1	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 12:54

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.6	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.5	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	2.81	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



Use a QR Code Scanner
Application To Scan the Code

CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 12:54

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuase of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2233719569
Name : MRS.SANGEETA MAKWANA
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 03-Dec-2022 / 09:08
Reported : 03-Dec-2022 / 14:05

Use a QR Code Scanner
Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIVER FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.52	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.20	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.32	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.5	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT (AST), Serum	23.8	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	18.7	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	10.1	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	142.1	35-105 U/L	Colorimetric

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist

CID: 2233719569	Age/Gender : 50 Years/ F
Name : Mrs.Sangeeta MAKWANA	Registered : 03/12/2022
Ref. By Dr. Arcofemi Healthcare Limited	Reported : 03/12/2022
Reg.Location : Bhayander East (Main Centre)	Printed : 03/12/2022

2D-Echocardiogram & Doppler Report

Cardiac Evaluation:

DIMENSIONS:

IVSd 8 mm
LVIDd 43 mm
LVPWd 8.6 mm

IVSs 9.8 mm
LVIDs 24 mm
LVPWS 10.2 mm

LVEF 70% (M-MODE), Visually EF-65%

LA- 25 mm, Aorta- 24 mm

TAPSE -20 mm
IVC - 18mm, collapsing
No RWMA

MORPHOLOGICAL DATA

Mitral Valve Normal
Aortic Valve Normal
Tricuspid Valve Normal
Pulmonary Valve Normal
Right Ventricle Normal

IAS / IVS Intact

Pulmonary Artery Normal
Aorta Normal
Right Atrium Normal
Left Atrium Normal
Pericardium Normal

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

DOPPLER DATA:

Mitral E velocity	0.64 m/s
Mitral A velocity	0.87 m/s
Mitral E' velocity	0.14 m/s
E/E'	4.57
Aortic V max	1.09 m/s PG 5.2 mm Hg
TR Gmax	16 mm Hg

Trivial MR and AR, Trivial TR
No clot/vegetation/effusion.

IMPRESSION:

- Good LV systolic function, LVEF = 65 %, Normal RV function
- Grade 1 Diastolic Dysfunction
- No PH. (PASP by TR jet 21mm Hg).

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



DR. ASHISH MISHRA
M.B.B.S., M.D., D.M. Cardiology
Reg. No. 2010/03/0511
CONSULTANT CARDIOLOGIST