

Patient Name : **MRS. SNEHA**
Patient ID : 57975
Age / Sex : 32 years / Female
Referred by : MEDIWHEEL
Bill ID : 94333

Collected : Feb 10, 2024, 10:39 a.m.
Reported : Feb 10, 2024, 12:38 p.m.
Sample ID :



Test Description	Results	Units	Biological Reference Range
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TOTAL THYROXINE (T4)

Sample Type : Serum

Total Thyroxine (T4) [CLIA]	85.20	ng/ml	52 - 127
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****END OF REPORT****

Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

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BLOOD GROUP

Sample Type : EDTA / Whole Blood

ABO Grouping

"B"

Rh Grouping

POSITIVE

Note:

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

END OF REPORT



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POST PRANDIAL BLOOD SUGAR

Sample Type : Flouride PP

Post Prandial Blood Sugar [GOD - POD]	105.00	mg/dl	110-180
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****



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Test Description	Results	Units	Biological Reference Range
<u>ESR</u>			
Sample Type : EDTA / Whole Blood			
ESR	20	Mm/hr	0 - 20
Method	Westergren		

END OF REPORT



Dr. Sudhamani S. MD
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URINE ANALYSE REPORT

Sample Type : Urine

PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	5.0		5.0-7.5
SPECIFIC GRAVITY	1.030		1.010 - 1.030
ALBUMIN	Absent		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

MICROSCOPY

PUS CELLS/hpf	1-2		
RBCs/hpf	Absent		
EPI.CELLS/hpf	1-2		
CASTS	Absent		
CRYSTALS	Absent		
BACTERIA	Absent		
Other	Absent		

****END OF REPORT****

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THYROID STIMULATING HORMONE (TSH)

Sample Type : Serum

Thyroid Stimulative Hormone (TSH) [CLIA]	3.142	μIU/mL	0.3- 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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Clinical Significance :-

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for:Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
- 5.Prediction of thyrotropin-releasing hormone-stimulated TSH response.

END OF REPORT



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TOTAL TRIIODOTHYRONINE (T3)

Sample Type : Serum

TotalTriiodothyronine (T3) [CLIA]	1.487	ng/dL	0.69 - 2.15
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****END OF REPORT****

Dr. Sudhamani S. MD
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Test Description	Results	Units	Biological Reference Range
<u>FASTING BLOOD SUGAR</u>			
Sample Type : Flouride R			
Fasting Blood Sugar [GOD - POD]	103.6	mg/dl	Normal : 70 - 99 mg/dl impaired Tolerance : 100 - 125mg/dl Diabetes Mellitus : >126 mg/dl
Technique :-	Fully Automated Biochemistry Analyser ERBA EM-200		

END OF REPORT



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COMPLETE BLOOD COUNT

Sample Type : EDTA / Whole Blood

Hemoglobin	11.3	g/dl	11.5 - 15.0
RBC COUNT	4.34	Millions/c	3.8 - 4.8
PCV(Hematocrit)	35.5	%	40.0 - 50.0
Mean Cell Volume(MCV) [calculated]	81.7	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH) [calculated]	26.1	pg	27.0 - 32.0
Mean Cell Hb Conc(MCHC) [calculated]	31.9	g/dl	32 - 36
RDW	13.5	%	11.50 - 14.50
Total Leucocytes (WBC) Count	8860	/cumm	4000-11000

DIFFERENTIAL COUNT

Neutrophils	55	%	40 - 70
Lymphocytes	39.3	%	20 - 50
Eosionphils	1.9	%	01 - 06
Monocytes	3.3	%	00 - 08
Basophils [calculated]	0.5	%	00-01

SMEAR STUDY

RBC Morphology	Hypochromia(+),Microcytosis(+)		
WBC Morphology	No E/o Toxic granules seen		
Platelets On Smear	Adequate on Smear		
Platelet Count	288000	/cumm	150000 - 450000
MPV	9.8	fL	6.5 - 10.0

Comments :-**Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

Technique :-

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

END OF REPORT



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BLOOD UREA LEVEL (BUL)

Sample Type : Serum

Urea	15.7	mg/dl	10 - 40
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[Urease - GLDH]

Bun	7.33	mg/dl	6 - 21
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[Calculated]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

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CREATININE

Sample Type : Serum

Creatinine	0.55	mg/dl	0.40 - 1.40
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[Enzymatic]

Estimated GFR	124.82	ml/min/1.73sq m	Normal: >90 Mild Decrease : 60-89 Mild Moderate Decrease : 45-59 Moderate to Severe Decrease : 30-44 Severe Decrease ; 15-29 Kidney Failure : <15
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Formula

Estimated GFR Calculate By CKD-EPI Formula.

Technique :-

Done On Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

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LIPID PROFILE

Sample Type : Serum

TOTAL CHOLESTEROL [CHOD-PAP]	167	mg/dL	Desirable : <200 mg/dl Borderline : 200 - 239mg/dl High : >240 mg/dl
TRIGLYCERIDES [Glycerol Phosphate Oxidase]	115.6	mg/dL	Desirable : <150 mg/dl Borderline : 150 - 199mg/dl High : >200mg/dl
HDL CHOLESTEROL [Direct]	31.4	mg/dL	Desirable : >40 mg/dl Borderline Risk : 35 mg/dl High Risk : <30 mg/dl
LDL CHOLESTEROL [Calculated]	112.48	mg/dL	Desirable : <100 mg/dl Borderline : 130 - 160mg/dl High : >160mg/dl
VLDL Cholesterol [Calculated]	23.12	mg/dL	Desirable : <26 mg/dl Borderline : >30 mg/dl
Total Chol / HDL Chol Ratio [Calculated]	5.32	mg/dL	Desirable : <5 %
LDL / HDL Ratio [Calculated]	3.58		1.00 - 3.55
NON-HDL CHOLESTEROL [Calculated]	135.60	mg/dL	Desirable : <130 mg/dl Borderline : 160 - 189 mg/dl High : >220 mg/dl

Technique: Fully Automated Biochemistry Analyser ERBA EM-200.

END OF REPORT



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SR. URIC ACID

Sample Type : Serum

Uric Acid [Uricase - POD]	4.6	mg/dl	2.5 - 6.8
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

****END OF REPORT****

Dr. Sudhamani S. MD
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Reg. No. : 90461

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LIVER FUNCTION TEST

Sample Type : Serum

TOTAL BILIRUBIN [DIAZO]	0.34	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [DIAZO]	0.14	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [CALCULATED]	0.20	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [IFCC without Pyridoxal Phosphate]	14	IU/L	5-40 IU/L
S.G.P.T.(ALT) [IFCC without Pyridoxal Phosphate]	8.6	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [Amino Methyl Propanol (AMP)]	68	IU/L	44-147 IU/L
TOTAL PROTEINS [BIURET]	6.86	IU/L	6.0 - 8.5 g/dL
ALBUMIN [BROMO CRESOL GREEN (BCG)]	3.88	g/dl	3.5-5.0 g/dl
GLOBULIN [CALCULATED]	2.98	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [CALCULATED]	1.30		
GAMMA GT	14.3	U/L	0 - 45

Technique : Fully Automated Biochemistry Analyser ERBA EM-200

****END OF REPORT****

Dr. Sudhamani S. MD
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Test Description	Results	Units	Biological Reference Range
<u>GLYCOCYLATED HAEMOGLOBIN</u>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [Tosoh HPLC]	5.5	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	111.15	mg/dL	116.89 - 154.2

END OF REPORT



Dr. Sudhamani S. MD
Consultant Pathologist
Reg. No. : 90461

ECHO Report

Date: 10/02/2024

Patient Details

Patient ID –

Name- MRS SNEHA GAJBHIYE

Age- 32 YEARS

Gender- FEMALE

Referral BY - MEDIWHEEL

Doctor Incharge

DR. MAHESH PADSALGE

Clinical Status of Patient -

Finding description -

- 1. Normal cardiac chambers dimensions .**
- 2. Normal LV systolic function.**
- 3. No RWMA.**
- 4. All cardiac valves are structurally normal.**
- 5. Trivial MR, Trivial PR, NO AR.**
- 6. No PAH (PASP – 23mmHg).**
- 7. Normal RV systolic function.**
- 8. No clot/vegetation/pericardial effusion.**
- 9. No coarctation of aorta.**

LVID (Diastole) 35-56(mm)	- 44.00	LVID (Systole) 24-42(mm)	- 30.00
IVS (Diastole) 8-12(mm)	- 08.00	IVS (Systole) 14-42(mm)	- 10.00
LVPWT (Diastole) 6-11(mm)	- 08.00	EPSS	- 4.00
LVEF (%)	- 60 %	LVFS (%)	- 31.00

LV Volume (Diastolic)(mm³)
Meridional Wall Stress in System

LV Volume (Systolic)(mm³)
Cubed LV Volume in Diastole (mm³)

Cubed LV+ myocardial volume (mm³)

Velocity of circumferential
Shortening (mm)

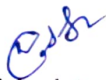
Aortic root 22-37(mm)	- 28.00
Left Atrium Length (mm)	- 30.00
Left Atrium Volume (mm ³)	
RV size	Normal
Normal	
RV volume (mm ³)	
Normal	
Pericardium	Normal
Effusion	None
Resp Variation	Present
Predicted RV Systolic Pressure	

Left Atrium Width (mm)
Left Atrium Area (mm²)
RV Function

RA Size

IVC Size (mm) – 14mm Collapsible

Doppler Findings- I



Dr. Mahesh Padsalge

Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



भारत सरकार
Government of India



स्नेहा पंजाबराव गजभिये
Sneha Panjabrao Gajbhiye
जन्म तारीख/DOB: 29/04/1991
महिला/ FEMALE

6948 6706 5792

माझे आधार, माझी ओळख

Dr. Mahesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



भारतीय विशिष्ट ओळख प्राधिकरण
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D/O पंजाबराव गजभिये, डॉ अंबेडकर चौक
पाटीपुरा, यवतमाळ, यवतमाळ,
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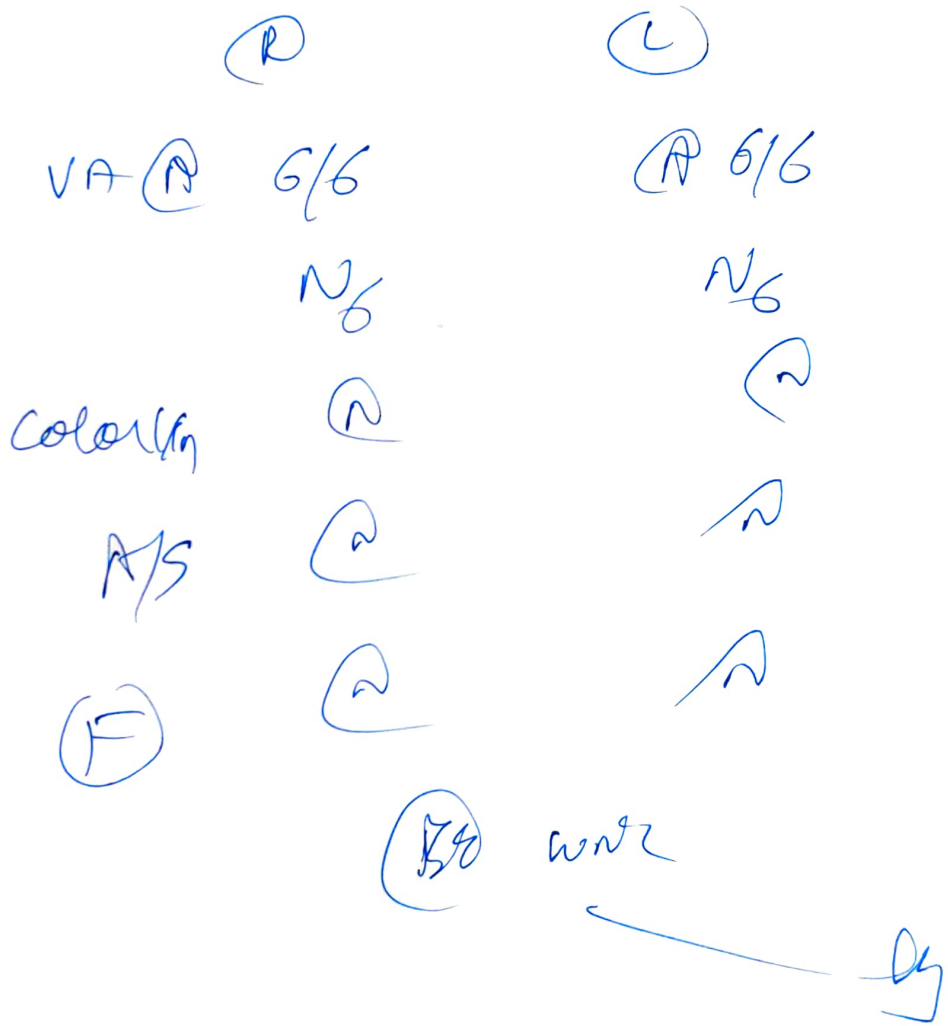
www.uidai.gov.in

Sneha Gajbhiye

10/02/2024

32/F

of men



Female

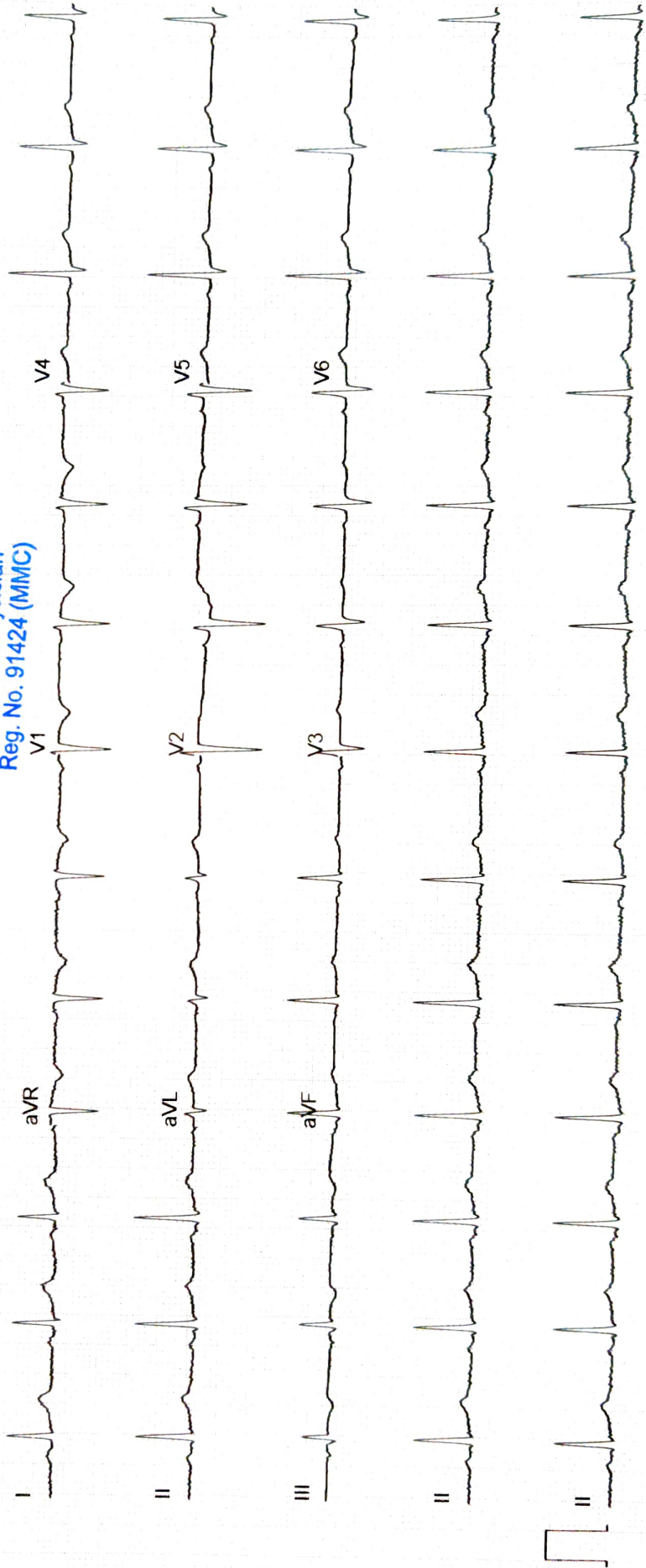
tes minor normal heart

Normal sinus rhythm
Normal ECG

QRS : 88 ms
QT / QTcBaz : 378 / 425 ms
PR : 128 ms
P : 84 ms
RR / PP : 792 / 789 ms
P / QRS / T : 22 / 55 / 23 degrees

Dr.

Dr. Manesh V. Padsalge
MD. (Medicine)
Consultant Physician
Reg. No. 91424 (MMC)



Name: MRS. SNEHA	Age/sex: 32 Yrs / FEMALE
Ref by: MEDIWHEEL	Date: 10/02/2024

ULTRASOUND EXAMINATION OF ABDOMEN & PELVIS

Findings-

The Liver is normal in size (13.1cm) shape and echogenicity. No focal lesion is seen. The Hepatic veins appear normal. There is no IHBR dilatation. The portal vein appears normal.

The gall bladder is well distended. The extra hepatic C.B.D. is of normal caliber.

The visualized Pancreas appears normal in size and reflectivity. The pancreatic duct is not dilated. The spleen is normal in size (9.0cm), No focal lesion is seen. Splenic vein is normal at hilum.

Both kidneys are normal in position and size. They show normal cortical reflectivity and cortico-medullary differentiation. There is no evidence of renal calculus, hydronephrosis or mass.

Right kidney measures 10.5 x 4.2 cm

Left kidney measures 11.0 x 4.2 cm

The Urinary bladder is well distended. No evidence of any intraluminal mass or calculi.

*Uterus is anteverted and measures 7.9 x 4.3x 4.5cm, appears normal in size, shape and echotexture. No focal lesion noted. Endometrial echoes are mid line and measure 2.5 mm. Cervix appears normal.

Both ovaries are mildly bulky in size and show peripherally arranged small follicles, s/o PCOD morphology.

Right ovary measures 2.6 x 1.7x3.6 cm -11.0cc

Left ovary measures 3.4 x 1.8x3.1 cm -10.4cc

No free fluid is noted in abdomen and pelvis.

No probe tenderness seen in present study

IMPRESSION:-

Both ovaries PCOD morphology

Adv: clinical and hormonal correlation



DR. MRUDULA BABAR
CONSULTANT RADIOLOGIST.
DR. MRUDULA BABAR
MBBS, MD, DMRE (RADIOLOGY)
CPS MUMBAI 2009

REG. NO. 2005/03/2139

