

## PATHOLOGY REPORT

Name:- Mrs. Pinki Kumari	Age :30Y/F	Date :-11/09/2023
Ref. By :- Dr. Bank Of Barauda	(E.C.No102174)	Serial Number :- 0112

TEST	CBC (Complete Blood Count)		Reference Values
	RESULT	UNIT	
Hb (Haemoglobin)	11.0	gm/dl	12 - 17
Total Leukocyte Count	6,800	/Cumm.	4000 - 11000
RBC Count	4.03	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	33.8	%	30 - 50
Platelet Count	1.48	Lakhs/c.mm	1.5 - 4.5
MCV	83.9	fl	80 - 100
MCH	26.5	pg	26 - 34
MCHC	31.5	gm/dl	31.5 - 35
<b>Differential Leukocyte Count</b>			
Neutrophil	54	%	40 - 70
Lymphocyte	42	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	02	%	01 - 06
Basophil	00	%	< 1 - 2 %
ESR	24	mm/1 <sup>st</sup> hr.	00 - 20

\*\*\*end of report\*\*\*

Signature

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### KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Urea	23.0	mg/dl	13 - 45
S. Creatinine	0.76	mg/dl	Male 0.7 - 1.4 Female 0.6 - 1.2
S. BUN	10.74	mg/dl	6.0 - 21
S. Sodium (Na <sup>+</sup> )	140.3	mmol/ltr	135 - 150
S. Potassium(K <sup>+</sup> )	3.75	mmol/ltr	3.5 - 5.5
S. Chloride(Cl <sup>-</sup> )	109.2	mmol/ltr	94 - 110
S. Calcium	9.26	mg/dl	8.7 - 11.0
S. Uric Acid	4.37	mg/dl	Male 3.5 - 7.2 Female 2.5 - 6.2

### BLOOD GROUPING

Grouping (ABO)	:	"AB" Group
Rh Typing	:	Positive.

\*\*\*end of report\*\*\*

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### LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.84	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	36.0	U/L	05 - 40
S. SGOT (AST)	31.0	U/L	05 - 40
S.GGT	34.0	U/L	05 - 45
S. Alkaline Phosphatase	140.3	U/L	Adult -- 25 - 140 Children (1 – 12 yrs.) -- 104 - 390
S. Total Protein	7.24	g/dl	6.0 - 8.3
S. Albumin	4.06	g/dl	3.2 - 5.0
S. Globulin	3.18	g/dl	2.8 - 4.5
S. A/G Ratio	1.27		

\*\*\*end of report\*\*\*

Signature

## PATHOLOGY REPORT

Name - Mrs. Pinki Kumari	Age - 32Y/F	Date - 11/09/2023
Ref. By - Dr. Barkh. Of Sarada	(E.C.No.202174)	Serial Number - 0112

### Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	190.0	mg/dl	130 - 200
S. Triglycerides	85.0	mg/dl	Fasting: 25 - 150
S. VLDL-Cholesterol	17.0	mg/dl	10 - 40
S. HDL-Cholesterol	48.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	125.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.95		Low Risk: <3.0 Average Risk: 3.0 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.60		1.5 - 3.5

### BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	95.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 1.5hrs meal)	113.0	mg/dl	80 - 160

\*\*\*end of report\*\*\*

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Ref. By :- Dr. Bank Of Barauda	(E.C.No102174)	Serial Number :- 0112

### GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	5.20	%

-----  
Mean Blood Glucose level (MBG) – 93.0 mg/dl  
-----

#### Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

**Summary :-** Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

\*\*\*end of report\*\*\*

Signature 



**AGENCY**  
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 9471013402

## PATHOLOGY REPORT

<b>Name</b> - Mrs. Pinky Kumari	<b>Age</b> - 40Y/F	<b>Date</b> - 11/09/2021
<b>Ref. By</b> - Dr. Sandeep Kumar	<b>(F.C.No)</b> 103174	<b>Serial Number</b> - 0112

TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	CLIA	121.0	NGML	(80 - 200)
TOTAL THYROXINE (T4)	CLIA	8.00	NGML	(4.8 - 12.0)
THYROID STIMULATING HORMONE (TSH)	CLIA	3.74	MIU/ML	(0.3 - 8.8)

**Technology :**

- T3 - Competitive Chemi Luminescent Immuno Assay
- T4 - Competitive Chemi Luminescent Immuno Assay
- TSH - Ultra Sensitive Sandwich Competitive Chemi Luminescent Immuno Assay

**REMARKS :**

**THYROID HORMONES** - Serum TSH is primarily regulated by the synthesis and release of Thyroid Releasing Hormone (TRH) and a negative feedback of decrease in thyroid reserve is the diagnosis of primary hypothyroidism. The elevated increase in TSH demonstrate the classical thyroid dysfunction. Deficient synthesis and thyroid gland dysfunction. TSH measurement is an only method of differentiating secondary and tertiary (secondary) hypothyroidism. The increase in total T4 and T3 is associated with pregnancy and contraceptive use. Interpret the test results and marking of abnormal thyroid function only because of absence of TSH autoantibodies which can be measured by calculating Free Thyroxine Index (FTI) or Thyroid Releasing Ratio (TRR) a

\*\*\*end of report\*\*\*

Signature

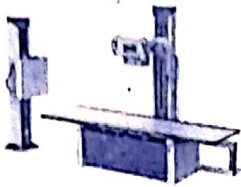
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### Urine Routine And Microscopy

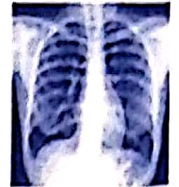
<u>TEST</u>	<u>RESULTS</u>
<b>Physical Examination</b>	
Volume	20 ml
Colour	Lt Yellow
Specific Gravity	1.010
Appearance	Clear
pH	6.0
(Acidic)	
<b>Chemical Examination</b>	
Protein	Trace
Sugar	Nil
Bile Salts	N/D
Bile Pigments	N/D
<b>Microscopic Examination</b>	
Pus Cells	2-3 /hpf
Red Blood Cells	Nil /hpf
Epithelial Cells	Present (+)
Crystal/Cast	Nil
Other	Nil
***end of report***	

Signature



# Raj Digital X-Ray

CHATA CHOWK, MUZAFFARPUR (BIHAR)



No.:

Date .....

Patient's Name : .....

Part X-Rayed.....

Referred by Dr.....

NAME	PINKI KUMARI	AGE/SEX	30 YEARS /FEMALE
REF BY.	DR. A K SINGH M B B S MD	DATE	11.09.2023

## XR- REPORT

### CHEST PA VIEWS

#### Findings :-

- Bilateral Lungs Fields Are Clear.
- Cardiac silhouette is normal in size.
- Bilateral costophrenic angles are normal.
- Bilateral domes of the diaphragm are normal.
- Bony cage & soft tissues are grossly normal.

#### IMPRESSION :- NORMAL STUDY.

Please correlate clinically

**Dr. ANKITCHOTALIYA.MD.DMRD.**

**Consultant Radiologist Reg**

**No:MMC-2013/05/1492**

#### Disclaimer:

It is an online interpretation of medical imaging based on clinical data. All modern machines/procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patients identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose. Any error in typing should be corrected immediately.

**(NOT VALID FOR MEDICO LEGAL PURPOSE)**

**Facilities Available : 300 MA X-Ray Machine (Digital CR) # Computerised ECG**





**NAME :- PINKY KUMARI**  
**REFD. BY :- DR./SELF.**

**DATE :- 11/09/2023**  
**SEX :- F**

**Thanks for the kind referral.**  
**USG of Whole Abdomen**

**Liver:-** Liver is Normal in size [11.97 cm] and shows normal echotexture. No focal lesion is seen. I.H.B.R. are not dilated.

**GB:-** Normal distention. Walls are not thickened (3.0 mm) . No evidence of calculus ,sludge ,or mass lesion seen.

**C.B.D:-** C.B.D. is normal in caliber.

**Pancreas:-** Pancreas normal in size shape and echo texture.

**Spleen:-** Normal in shape, size & contour . (bipolar length is 8.15 cm).

**Kidneys:-** Both kidneys are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification, hydronephrotic changes or mass lesion seen.

**UB:-** Urinary bladder is smoothly outlined. There is no calculus within.

**Uterus:-** The uterus is measuring 7.17x4.50x3.06 cm  
The uterus is normal in shape and size with normal echotexture

**Adnexa:-** Both ovary are normal .

**Free fluid:-** No free fluid is noted in the peritoneal cavity.

**IMPRESSION :- Normal study.**

(sonologist)





# URMILA HEART & MULTI SPECIALITY HOSPITAL

**Address**

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Mob. : 9661179794  
9471013402

## ECHOCARDIOGRAPHY REPORT

Name : Mrs. Pinky Kumari  
Date : 11/09/23  
IPID No. :  
Ref. By : Self

Age/Sex : 30/F  
ECHO No. : Naya Tola, Opp. Polytechnic  
UHID No. : Muzaffarpur  
Done By : Dr. Anil Kr. Singh

### MITRAL VALVE

Morphology AML-Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming  
PML-Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.

Subvalvular deformity Present/Absent. Score: \_\_\_\_\_  
Doppler Normal/Abnormal E>A A>E  
Mitral Stenosis Present/Absent RRInterval \_\_\_\_\_ msec  
EDG \_\_\_\_\_ mmHg MDG mmHg MVAcm2  
Mitral Regurgitation Absent/Trivial/Mild/Moderate/Severe.

### TRICUSPID VALVE

Morphology Normal/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.

Doppler Normal/Abnormal Present/Absent RR interval \_\_\_\_\_ msec.  
Tricuspid stenosis MDG \_\_\_\_\_ mmHg  
EDG \_\_\_\_\_ mmHg Absent/Trivial/Mild/Moderate/Severe Fragmented signals  
Tricuspid regurgitation: Pred. RVSP=RAP+ mmHg  
Velocity msec.

### PULMONARY VALVE

Morphology Normal/Atresia/Thickening/Doming/Vegetation.

Doppler Normal/Abnormal Present/Absent Level  
Pulmonary stenosis PSG \_\_\_\_\_ mmHg Pulmonary annulus \_\_\_\_\_ mm  
Pulmonary regurgitation Present/Absent  
Early diastolic gradient \_\_\_\_\_ mmHg. End diastolic gradient \_\_\_\_\_ mmHg

### AORTIC VALVE

Morphology Normal/Thickening/Calcification/Restricted opening/Flutter/Vegetation  
No. of cusps 1/2/3/4

Doppler Normal/Abnormal Present/Absent Level  
Aortic Stenosis PSG mmHg Aortic annulus \_\_\_\_\_ mm  
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe.



<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal values</u>
Aorta 2.2	(2.0 – 3.7cm)	LAes 2.9	(1.9 – 4.0cm)
LV es 2.8	(2.2 – 4.0cm)	LV ed 4.0	(3.7 – 5.6cm)
IVS ed 0.9	(0.6 – 1.1cm)	PW (LV) 0.8	(0.6 – 1.1cm)
RVed	(0.7 – 2.6cm)	RV Anterior wall	(upto 5 mm)
LVVd (ml)		LVVs (ml)	
EF 60%	(54%-76%)	IVS motion	Normal/Flat/Paradoxical

**CHAMBERS:**

LV Normal/Enlarged/Clear/Thrombus/Hypertrophy  
Contraction Normal/Reduced

Regional wall motion abnormality Absent/Present

LA Normal/Enlarged/Clear/Thrombus

RA Normal/Enlarged/Clear/Thrombus

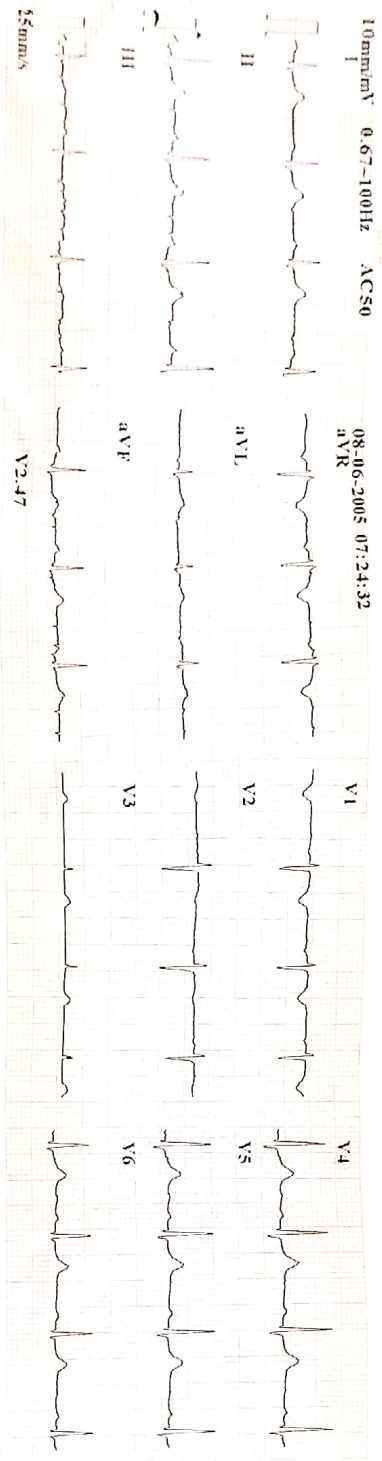
RV Normal/Enlarged/Clear/Thrombus

PERICARDIUM Normal/Thickening/Calcification/Effusion

**COMMENTS & SUMMARY**

**All Chambers are Normal in Size  
No LV Diastolic Dysfunction  
Normal LV Systolic Function  
No RWMA/LVEF=60%  
No MR/AR/PR/TR  
Normal Pericardium**

*For. Dr. Anil Kr. Singh*  
Dr. Anil Kr. Singh  
Cardiologist



ID : 050608-0792  
 Name :  
 Age : 30 yr  
 Sex : Female  
 BP : mmHg  
 Height : cm  
 Weight : kg  
 HR : 80 bpm  
 P Dur : 90 ms  
 PR int : 148 ms  
 QRS Dur : 81 ms  
 QT/QTc int : 336/390 ms  
 %QRS/T axis : 60/56/39 °  
 RV5/SV1 amp : 0.921/0.584 mV  
 RV5+SV1 amp : 1.505 mV  
 RV6/SV2 amp : 0.722/0.645 mV

Minnesota Code:  
 9-4-1(V3)  
*Handwritten signature*

Diagnosis Information:  
 800: Sinus Rhythm  
 \*\*\*Normal ECG\*\*\*

Report Confirmed by: