



OnePLUS Ultrasound Lab

— QUALITY FIRST... ALWAYS! —

INFOSEINFOSYSTEMS PVT. LTD.

Dr. Nitin Agarwal
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Ex. Chief of Lab Dr. Lal Path Labs.

Dr. Pooja (Garg) Agarwal
Radiologist & Director
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NAME	:Mrs. NUPOOR KUMARI	Barcode No	:10114224
AGE/GENDER	:28 YRS/Female	SPECIMEN DATE	:26/Feb/2022 09:21AM
PATIENT ID	:91728	SPECIMEN RECEIVED	:26/Feb/2022 10:04AM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:26/Feb/2022 03:10PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012202260010

Test Name	Result	Unit	Ref. Range
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HAEMATOLOGY

Health checkup 2 Female

Glycosylated Hemoglobin (HbA1c)	5.0	%	Non Diabetic adults <5.7 Prediabetic (at risk) 5.7-6.4 Diabetes >6.4
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Estimated average blood glucose (eag)	97
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Reference range (mg/dl):

90 - 120:Excellent control, 121 - 150:Good Control, 151 - 180:Average Control, 181 - 210:Action Suggested

>211:Panic value

BLOOD GROUP (ABO)	A
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Rh typing	POSITIVE
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NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

CBC

Haemoglobin	11.2	g/dl	11.5-15.0
Total Leucocyte Count	7770	/cumm	4000-10000
Differential leucocyte count			
Neutrophils	56.6	%	40-80
Lymphocyte	35.40	%	20-40
Monocytes	5.00	%	2-10
Eosinophils	2.6	%	1-6
Basophils	0.4	%	0-2
RBC Count	3.89	million/cumm	3.8-4.8

Checked By.

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Test Name	Result	Unit	Ref. Range
PCV(Hematocrit)	35.4	%	36-46
MCV	91	fL	83-101
MCH	28.9	Pg	27-32
MCHC	31.8	G/dL	32-35
Platelet count	171000	/cumm	150000-450000
RDW-CV	14.3	%	11.4-14.0
ESR(WESTEGRENs METHOD)	16	mm/1hr	<20
<u>BIOCHEMISTRY</u>			
Blood sugar fasting	86	mg/dL	70-110

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PATIENT ID	:91728	SPECIMEN RECEIVED	:26/Feb/2022 02:08PM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:26/Feb/2022 04:21PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012202260010

Test Name	Result	Unit	Ref. Range
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BIOCHEMISTRY

<u>Blood sugar pp</u>	99	mg/dL	70.0-140.0
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Page 3 of 6

Clinical correlation is essential for final diagnosis. • If test results are unsatisfactory please contact personally or on phone. • This report is for perusal of doctors only.
• All disputes Subject to Delhi Jurisdiction only. • Not for medicolegal purposes. • All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound.



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BIOCHEMISTRY

Bun (blood urea nitrogen)	12.40	mg/dl	7-18.7
Uric acid, serum	3.5	mg/dl	2.4-5.7
Creatinine, serum	0.86	mg/dl	0.50-0.9

LFT(LIVER FUNCTION TEST)

Bilirubin Total	0.65	mg/dl	0.1-1.2
Bilirubin Conjugated	0.24	mg/dl	0-0.4
Bilirubin Unconjugated	0.41	mg/dl	up to 0.7
SGOT (AST)	19	U/L	0-31
SGPT (ALT)	10	U/L	<34
Alkaline phosphatase	96	U/L	35-104
Gamma glutamyl transpeptidase	24	U/L	<39
Total Protein	6.9	gm/dl	6.60 - 8.70
Albumin	3.9	g/dL	3.8-5.1
Globulin	3.00	gm/dl	1.8-3.4
Albumin/Globulin Ratio	1.30		1.10 - 2.50

LIPID PROFILE

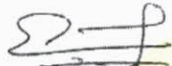
Cholesterol	144	mg/dl	50-200
Triglycerides	91	mg/dL	25-150
HDL Cholesterol	45	mg/dL	30 - 70
LDL cholesterol	81	mg/dL	< 130
VLDL cholesterol	18.2	mg/dL	5-40
Cholesterol/HDL Ratio	3.2		Low Risk 3.3-4.97 Average Risk 4.4-7.1 Moderate Risk 7.1-11.0 High Risk >11.0
LDL/HDL Ratio	1.8		0 - 3.55

According to ATP III and NCEP guidelines

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Test Name	Result	Unit	Ref. Range	
Parameter	Normal	Desirable	Borderline	High
Total cholesterol	<200	200-239		240
Triglycerides	<150	150-199	200-499	500
LDL	Optimal <100 Near Optimal 100-129	130-159	160-180	190
HDL	<40 : LOW 60 : HIGH			

ENDOCRINOLOGY

THYROID PROFILE(T3,T4,TSH)

Triiodothyronine total [t3]	0.95	ng/dl	0.52-1.9
Thyroxine total [t4]	7.10	µg/dl	4.8-11.6
TSH (Thyroid Stimulating Hormone)	4.20	µIU/ml	0.25-5.0

AGE WISE VARIATION IN TSH

AGE	TSH(µIU/ml)	AGE	TSH(µIU/ml)
1-4 weeks	1.00 - 19.0	16-20 yrs	0.25 - 5.0
1-12 mths	1.70 - 9.1	21 - 80 yrs	0.25 - 5.0
1-5 yrs	0.80 - 8.2	I st trimester	0.25 - 5.0
6-10 yrs	0.25 - 5.0	II nd trimester	0.50 - 5.0
11-15 yrs	0.25 - 5.0	II rd trimester	0.4 - 6.0

Reference ranges - Interpretation of Diagnostic tests - (Jacques Wallach)

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
4. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis

CLINICAL PATHOLOGY

URINE ROUTINE

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Page 5 of 6

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Test Name	Result	Unit	Ref. Range
<u>Physical examination</u>			
Quantity	30		ML
Colour	PALE YELLOW		
Transparency	CLEAR		CLEAR
Sp.gravity	1.010		1.010-1.030
pH	6.00		
Reaction	ACIDIC		ACIDIC
<u>Chemical examination</u>			
Urine protein	NIL		NIL
Urine sugar	NIL		NIL
Bilirubin, urine	NEGATIVE		NEGATIVE
Urobilinogen	NORMAL		NORMAL
Ketones	NEGATIVE		NEGATIVE
<u>Microscopic examination</u>			
Pus cells.	1-2	/HPF	1-2
Epithelial cells	1-2	/HPF	0-5
R.B.C.	NIL	/HPF	NIL
Casts	NIL	/HPF	NIL
Crystals	NIL	/HPF	NIL
Bacteria	NIL	/HPF	NIL
Others.	NIL		NIL

*** End Of Report ***

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