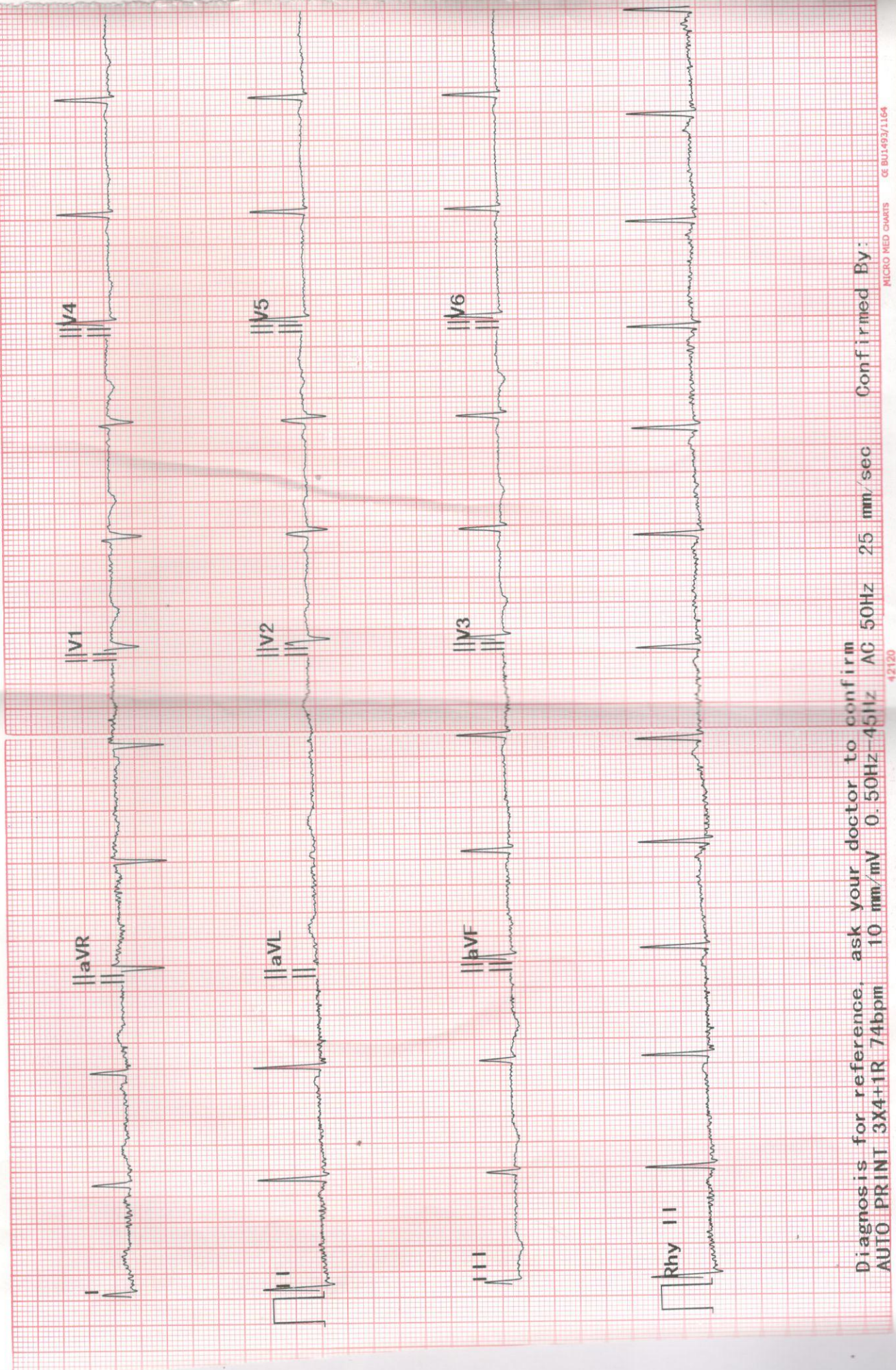


ID : 2303110013  
Name :  
Sex :  
Divisions :

DataTime: 2023-03-11 10:28  
Age :  
BP : / mmHg  
Bed No. :

Hospital :  
Height : cm  
Weight : kg  
Hospital No. :



Diagnosis for reference, ask your doctor to confirm  
AUTO PRINT 3X4+1R 74bpm 10 mm/mV 0.50Hz-45Hz AC 50Hz 25 mm/sec

Confirmed By:



# Dept. of Radiology



REQ. DATE : 11-MAR-2023 REP. DATE : 11-MAR-2023  
NAME : MRS. VERMA GYANTI DHARMENDRA  
PATIENT CODE : 106695 AGE/SEX : 36 YR(S) / FEMALE  
REFERRAL BY : Dr. HOSPITAL PATIENT

## CHEST X-RAY PA VIEW

### OBSERVATION :

Both lungs appear clear.

Heart and mediastinum are normal.

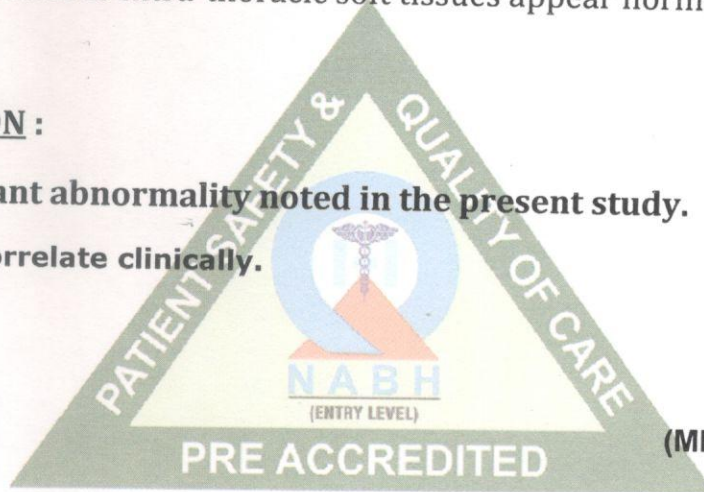
Diaphragm and both CP angles are normal.

Visualised bones & extra-thoracic soft tissues appear normal.

### IMPRESSION :

No significant abnormality noted in the present study.

-Kindly correlate clinically.



Dr. SAURABH PATIL  
(MBBS, MD(RADIOLOGY))



**2D ECHO / COLOUR DOPPLER**

**NAME : MRS. GYANTI VERMA**  
**REF BY : DR. HOSPITAL PATIENT**

**36Yrs/F**

**OPD**  
**11-Mar-23**

**M - Mode values**

**Doppler Values**

AORTIC ROOT (mm)	19	TAPSE	
LEFT ATRIUM (mm)	24		
RV (mm)		AORTIC VEL (m/sec)	1.1
LVID - D (mm)	45	PG (mmHg)	5
LVID - S (mm)	27	MITRAL E VEL (m/sec)	1.1
IVS - D (mm)	10	A VEL (m/ sec)	0.6
LVPW -D (mm)	10	TDI. e' (cm/sec)	
EJECTION FRACTION (%)	60%	E/e'	

**REPORT**

Normal LV size & wall thickness.  
No regional wall motion abnormality  
Normal LV systolic function , LVEF 60%  
Normal sized cardiac chambers.

Pliable mitral valve., no Mitral regurgitation.  
Normal mitral diastolic flows.

Trileaflet aortic valve. No aortic stenosis / regurgitation.

Normal Tricuspid & pulmonary valve  
Trivial tricuspid regurgitation ,  
PA pressure = 20 mmHg - normal

Intact IAS & IVS  
No PDA, coarctation of aorta.  
No clots , vegetations , pericardial effusion noted.

**IMPRESSION :**

**Normal echo study.**  
**No regional wall motion abnormality.**  
**Normal Biventricular systolic & diastolic function , LVEF 60%**  
**Normal PA pressure.**

**DR. RAJDATT DEORE.**  
**MD, DM-CARDIOLOGIST**  
**MMC 2005/03/1520**

*(NORMAL 2D-ECHO & COLOR DOPPLER DOESN'T RULE OUT ISCHAEMIC HEART DISEASE)*

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Junnar, Dist-Pune

☎ 88 7106 7106

**VITARA HEALTHCARE®**

PRN : 106695  
 Patient Name : Mrs. VERMA GYANTI DHARMENDRA  
 Age/Sex : 36Yr(s)/Female  
 Company Name : BANK OF BARODA  
 Referred By : Dr.HOSPITAL PATIENT

Lab No : 16604  
 Req.No : 16604  
 Collection Date & Time : 11/03/2023 09:00 AM  
 Reporting Date & Time : 11/03/2023 12:59 PM  
 Print Date & Time : 11/03/2023 01:12 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
----------------	--------------	------	---------------

**HAEMATOLOGY****HAEMOGRAM**

HAEMOGLOBIN (Hb)	: 12.7	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 39.5	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.63	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 85	cu micron	76 - 96
M.C.H.	: 27.4	pg	27 - 32
M.C.H.C	: 32.2	picograms	32 - 36
RDW-CV	: 12.8	%	11 - 16
WBC TOTAL COUNT	: 5700	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000 150000 - 450000
PLATELET COUNT	: 299000	cumm	
<b>WBC DIFFERENTIAL COUNT</b>			
NEUTROPHILS	: 59	%	ADULT : 40 - 70 CHILD : 20 - 40
ABSOLUTE NEUTROPHILS	: 3363	µL	2000 - 7000
LYMPHOCYTES	: 34	%	ADULT : 20 - 40 CHILD : 40 - 70
ABSOLUTE LYMPHOCYTES	: 1938	µL	1000 - 3000
MONOCYTES	: 05	%	02 - 08
ABSOLUTE MONOCYTES	: 285	µL	200 - 1000
EOSINOPHILS	: 02	%	01 - 04
ABSOLUTE EOSINOPHILS	: 114	µL	20 - 500
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	µL	0 - 100

Technician

*for Pathologist*  
 Dr. AMRUT V. ASHTURKAR  
 MD (Pathology) (MMC-2003/04/1751)

Pathologist

**Kalyani Nagar**

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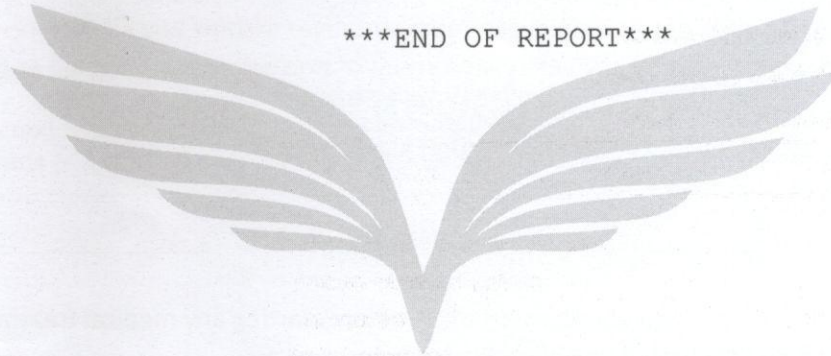
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**PRN** : 106695 **Lab No** : 16604  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA **Req.No** : 16604  
**Age/Sex** : 36Yr(s)/Female  
**Collection Date & Time** : 11/03/2023 09:00 AM  
**Company Name** : BANK OF BARODA **Reporting Date & Time** : 11/03/2023 12:59 PM  
**Referred By** : Dr.HOSPITAL PATIENT **Print Date & Time** : 11/03/2023 01:12 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
RBC MORPHOLOGY	: Normocytic Normochromic		
WBC MORPHOLOGY	: Within Normal Limits		
PLATELETS	: Adequate		
PARASITES	: Not Detected		

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

\*\*\*END OF REPORT\*\*\*



VITARA HEALTHCARE

**Dr. AMRUT V. ASHTURKAR**  
MD (Pathology) (MMC-2003/04/1751)

**Technician**

Report Type By :- LATA RANAWARE

**Pathologist**

**Kalyani Nagar**

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VITARA HEALTHCARE®

**PRN** : 106695  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA  
**Age/Sex** : 36Yr(s)/Female  
**Company Name** : BANK OF BARODA  
**Referred By** : Dr.HOSPITAL PATIENT

**Lab No** : 16604  
**Req.No** : 16604

**Collection Date & Time** : 11/03/2023 09:00 AM  
**Reporting Date & Time** : 11/03/2023 01:11 PM  
**Print Date & Time** : 11/03/2023 01:12 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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**HAEMATOLOGY****BLOOD GROUP**

BLOOD GROUP : "B"  
RH FACTOR : POSITIVE

**NOTE** : This is for your information only.  
Kindly note that any blood or blood product transfusion or therapeutic intervention has to be done after confirmation of blood group by concerned authorities.  
In infants (< 6 months age), please repeat Blood Group after 6 months of age for confirmation.

\*\*\*END OF REPORT\*\*\*

VITARA HEALTHCARE

*per Jadhav*

**Dr. AMRUT V. ASHTURKAR**  
MD (Pathology) (MMC-2003/04/1751)

**Technician**

Report Type By :- LATA RANAWEDE

**Pathologist**

**Kalyani Nagar**Bglw. No 3/10, Goodwill Enclave,  
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**VITARA HEALTHCARE**

Patient ID : 110323057

Patient Name : **MRS. GYANTI VERMA**

Age / Gender : 36 YEARS / FEMALE

Ref. By : AIMS HOSPITAL

Affiliation : AIMS HOSPITAL



Registration Date : 11-Mar-2023 2:14 PM

Sample Collected on : 11-Mar-2023 2:14 PM

Sample Received on : 11-Mar-2023 5:10 PM

Report Released on : 11-Mar-2023 5:11 PM

**Glycosylated Haemoglobin (HbA1c)**

Investigation	Result	Unit	Bio. Ref. Range
HbA1c (HPLC)	5.5	%	Above 8% : Action Suggested Between 6-8% : Goal Below 6% : Non-Diabetic Level

Sample Type : EDTA Whole Blood  
Method : Fully Automated H.P.L.C.

Average Blood Glucose (ABG)	111	mg/dL	90 - 120 : Excellent Control 121 - 150 : Good Control 151 - 180 : Average Control 181 - 210 : Action Suggested > 211 : Panic Value
-----------------------------	-----	-------	--

Method : Derived from HbA1c values

**INTERPRETATION :**

NOTE : HbA1c PARAMETER IS NGSP LEVEL 1 CERTIFIED.

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non - diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & hemolytic), chronic renal failure and liver diseases, Clinic correlation is suggested.
- To estimate the eAG from the HbA1c value, the following equation is used :  $eAG (mg/dl) = 28.7A1c - 46.7$
- Interference of Hemoglobinopathies in HbA1c estimation.
  - For hbF > 25%, an alternate platform (FRUCTOSAMINE) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - Heterozygous state detected (D10/Tosho G8 is corrected for HbS and HbC trait).
- In Known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.

Excellent Control - 6 to 7 %  
Fair to Good Control - 7 to 8 %  
Unsatisfactory Control - 8 to 10 %

Lab Equipment

Test performed on Fully Automated Biorad D10 - HbA1c  
Analyzer

----- END OF REPORT -----



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**VITARA HEALTHCARE®**

**PRN** : 106695 **Lab No** : 16604  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA **Req.No** : 16604  
**Age/Sex** : 36Yr(s)/Female  
**Collection Date & Time** : 11/03/2023 09:00 AM  
**Company Name** : BANK OF BARODA **Reporting Date & Time** : 11/03/2023 02:16 PM  
**Referred By** : Dr.HOSPITAL PATIENT **Print Date & Time** : 11/03/2023 02:23 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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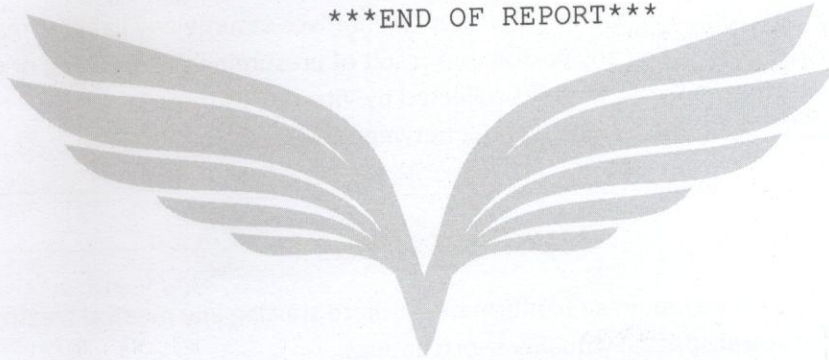
**HAEMATOLOGY****ESR**

ESR MM ( AT The End of 1 Hr.) By : 10  
Westergren Method


mm/hr

Male : 0 - 15  
Female : 0 - 20

\*\*\*END OF REPORT\*\*\*

**VITARA HEALTHCARE****Technician**

Report Type By :- LATA RANAWARE

Dr.  **ASHTURKAR**  
MD (Pathology) (MMC-2003/04/1751)

**Pathologist**



**Kalyani Nagar**

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**VITARA HEALTHCARE®**

**PRN** : 106695  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA  
**Age/Sex** : 36Yr(s)/Female  
**Company Name** : BANK OF BARODA  
**Referred By** : Dr.HOSPITAL PATIENT

**Lab No** : 16604  
**Req.No** : 16604

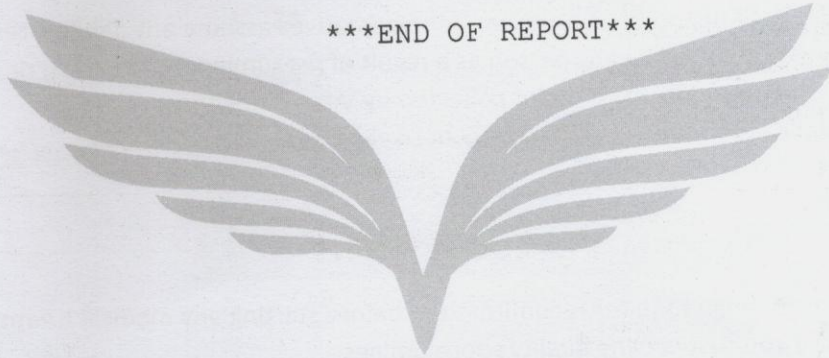
**Collection Date & Time** : 11/03/2023 09:00 AM  
**Reporting Date & Time** : 11/03/2023 02:16 PM  
**Print Date & Time** : 11/03/2023 02:24 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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**BIOCHEMISTRY****BSL-F & PP**

Blood Sugar Level Fasting	: 118	MG/DL	60 - 110
Blood Sugar Level PP	: 122	MG/DL	70 - 140

\*\*\*END OF REPORT\*\*\*

**VITARA HEALTHCARE****Technician**

Report Type By :- LATA RANAWARE

**Dr. AMRUT V. ASHTURKAR**  
MD (Pathology) (MMC-2003/04/1751)

**Pathologist**

**Kalyani Nagar**

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**VITARA HEALTHCARE®**

**PRN** : 106695 **Lab No** : 16604  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA **Req.No** : 16604  
**Age/Sex** : 36Yr(s)/Female  
**Collection Date & Time** : 11/03/2023 09:00 AM  
**Company Name** : BANK OF BARODA **Reporting Date & Time** : 11/03/2023 02:19 PM  
**Referred By** : Dr.HOSPITAL PATIENT **Print Date & Time** : 11/03/2023 02:23 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
----------------	--------------	------	---------------

**BIOCHEMISTRY****LIPID PROFILE**

CHOLESTEROL (serum)	: 128	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 49	MG/DL	0 - 150
HDL (serum)	: 24	MG/DL	Male : 42 - 79.5 Female : 42 - 79.5
LDL (serum)	: 94.2	MG/DL	0 - 130
VLDL (serum)	: 9.80	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 5.33		Male : 1.0 - 5.0 Female : 1.0 - 4.5
LDL/HDL RATIO	: 3.93		Male : <= 3.6 Female : <=3.2

**NCEP Guidelines**

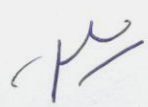
	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.  
Cholesterol & Triglycerides reprocessed , & confirmed.

\*\*\*END OF REPORT\*\*\*

**Technician**

Report Type By :- LATA RANAWADE

  
Dr. AMRUT V. ASHTURKAR  
MD (Pathology) (MMC-2003/04/1751)

**Pathologist**

**Kalyani Nagar**

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Junnar, Dist-Pune

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VITARA HEALTHCARE®

**PRN** : 106695  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA  
**Age/Sex** : 36Yr(s)/Female

**Lab No** : 16604  
**Req.No** : 16604

**Company Name** : BANK OF BARODA  
**Referred By** : Dr.HOSPITAL PATIENT

**Collection Date & Time** : 11/03/2023 09:00 AM  
**Reporting Date & Time** : 11/03/2023 02:19 PM  
**Print Date & Time** : 11/03/2023 02:23 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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**BIOCHEMISTRY****LFT ( Liver function Test )**


BILIRUBIN TOTAL (serum)	: 0.9	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT (serum)	: 0.4	mg/dL	0.0 - 0.5
BILIRUBIN INDIRECT (serum)	: 0.50	mg/dL	0.1 - 1.0
S.G.O.T (serum)	: 31	U/L	0 - 40
S.G.P.T (serum)	: 20	U/L	0 - 45
ALKALINE PHOSPHATASE (serum)	: 79	U/L	35 - 105
PROTEINS TOTAL (serum)	: 7.1	g/dl	6.6 - 8.7
ALBUMIN (serum)	: 4.1	g/dl	3.5 - 5.0
GLOBULIN (serum)	: 3	g/dl	1.8 - 3.6
A/G RATIO	: 1.37		1:1 - 2:2

\*\*\*END OF REPORT\*\*\*

VITARA HEALTHCARE

Technician

Report Type By :- LATA RANAWARE

Dr.  AMRUT V. ASHTURKAR  
MD (Pathology) (MMC-2003/04/1751)

Pathologist

**Kalyani Nagar**

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**VITARA HEALTHCARE®**

**PRN** : 106695 **Lab No** : 16604  
**Patient Name** : Mrs. VERMA GYANTI DHARMENDRA **Req.No** : 16604  
**Age/Sex** : 36Yr(s)/Female  
**Company Name** : BANK OF BARODA **Collection Date & Time** : 11/03/2023 09:00 AM  
**Referred By** : Dr.HOSPITAL PATIENT **Reporting Date & Time** : 11/03/2023 02:19 PM  
**Print Date & Time** : 11/03/2023 02:23 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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**CLINICAL PATHOLOGY****URINE ROUTINE****PHYSICAL EXAMINATION**

QUANTITY : 30 ML  
COLOUR : PALE YELLOW  
APPEARANCE : SLIGHTLY HAZY  
REACTION : ACIDIC  
SPECIFIC GRAVITY : 1.030

**CHEMICAL EXAMINATION**


PROTEIN : ABSENT  
SUGAR : ABSENT  
KETONES : ABSENT  
BILE SALTS : ABSENT  
BILE PIGMENTS : ABSENT  
UROBILINOGEN : NORMAL

**MICROSCOPIC EXAMINATION**

PUS CELLS : 2-4 /hpf  
RBC CELLS : ABSENT / hpf  
EPITHELIAL CELLS : 1-2 /hpf  
CASTS : ABSENT /hpf  
CRYSTALS : ABSENT  
OTHER FINDINGS : ABSENT  
BACTERIA : ABSENT

\*\*\*END OF REPORT\*\*\*

**Technician****Report Type By :-** LATA RANAWARE

  
**Dr. AMRUT V. ASHTURKAR**  
MD (Pathology) (MMC-2003/04/1751)

**Pathologist**

**Kalyani Nagar**

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Junnar, Dist-Pune  
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**VITARA HEALTHCARE®**

Patient ID : 110323057  
Patient Name : **MRS. GYANTI VERMA**  
Age / Gender : 36 YEARS / FEMALE  
Ref. By : AIMS HOSPITAL  
Affiliation : AIMS HOSPITAL



Registration Date : 11-Mar-2023 2:14 PM  
Sample Collected on : 11-Mar-2023 2:14 PM  
Sample Received on : 11-Mar-2023 5:10 PM  
Report Released on : 11-Mar-2023 4:48 PM

**THYROID FUNCTION TEST**

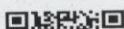
Investigation	Result	Unit	Bio. Ref. Range
Total Triiodothyronine (T3)	124.9	ng/dl	Normal : 70-204 ng/dL First Trimester : 81-190 ng/dL Second Trimester : 100-260 ng/dL Third Trimester : 100-260 ng/dL
Method ECLIA			
Total Thyroxine (T4)	6.95	ug/dl	5.5-11.0
Method ECLIA			
Thyroid Stimulating Hormone (TSH)	1.68	uIU/mL	Normal : 0.27-4.2 $\mu$ IU/ml First Trimester : 0.33-4.59 $\mu$ IU/ml Second Trimester : 0.35-4.1 $\mu$ IU/ml Third Trimester : 0.21-3.15 $\mu$ IU/ml
Method ECLIA			

REFERENCE : TIETZ Fundamentals of Clinical Chemistry

**INTERPRETATION :**

- Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism.
- Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc. In such cases Free T3 and Free T4 gives corrected values.
- Total T3 may decrease by <25 percent in healthy older individuals. - In cases of primary hypothyroidism, T3 and T4 levels are low and TSH is significantly elevated. In the case of pituitary dysfunction, either due to intrinsic hypothalamic or pituitary disease i.e central hypothyroidism, normal or marginally elevated basal TSH levels are often seen despite significant reduction in T4 and T3 levels.

- Primary hyperthyroidism (eg: Grave's disease, nodular goiter) is associated with high levels of thyroid hormones and depressed or undetectable levels of TSH.



*Barbanti*



**Dept. of Radiology**  
(For Report Purpose Only)



REQ. DATE : 11-MAR-2023      REP. DATE : 11-MAR-2023  
NAME : MRS. VERMA GYANTI DHARMENDRA  
PATIENT CODE : 106695      AGE/SEX : 36 YR(S) / FEMALE  
REFERRAL BY : Dr. HOSPITAL PATIENT

**USG ABDOMEN AND PELVIS**

**OBSERVATION :**

**Liver** : Is normal in size, shape & echotexture. No focal lesion / IHBR dilatation.

**CBD / PV** : Normal.  
mm seen

**G.B.** : Moderately distended, A calculus of size 28

**Spleen** : Is normal in size , shape & echotexture. No focal lesion.

**Pancreas** : Normal in size, shape & echotexture.

**Both kidneys** are normal in size, shape & echotexture, CMD maintained.  
No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 10 x 4.2 cm.

Left kidney measures : 9.8 x 4.5 cm.

**Urinary bladder** : Moderately distended, normal.

**Uterus** : Anteverted, normal in size , shape, echotexture. No fibroid.  
Endometrium show normal appearance. ET = 4 mm.

**Both ovaries** : show normal features. Adnexa clear.

No obvious demonstrable small bowel / RIF pathology.

Normal Aorta, IVC, adrenals and other retroperitoneal structures.

No ascites / lymphadenopathy / pleural effusion.

**IMPRESSION :**

**Cholelithiasis without cholecystitis**

- Kindly co-relate clinically.

**Dr. SAURABH PATIL**  
(MBBS, MD(RADIOLOGY))



# Dept. of Radiology

(For Report Purpose Only)



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## BILATERAL SONOMAMMOGRAPHY

### OBSERVATION:

#### RT. BREAST.

Fibro-glandular tissues appear normal.  
Skin and subcutaneous tissue appear normal.  
Nipple shows normal features.  
No significant axillary adenopathy.

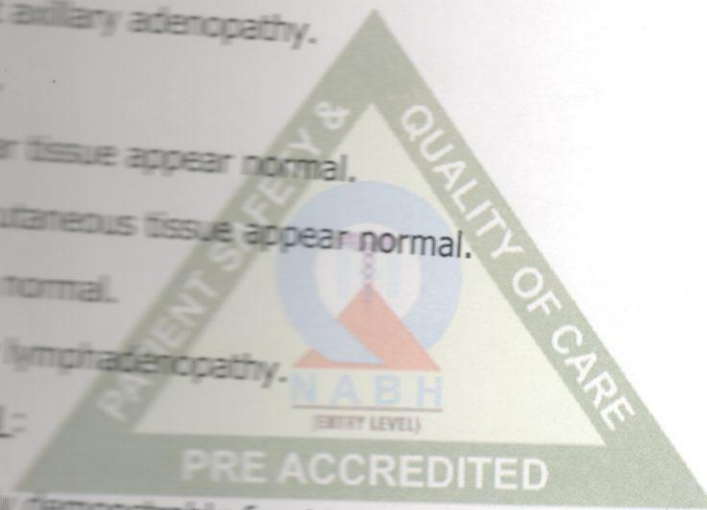
#### LT. BREAST.

Fibro-glandular tissue appear normal.  
Skin and subcutaneous tissue appear normal.  
Nipple appear normal.  
No e/o axillary lymphadenopathy.

### IMPRESSION :-

No sonologically demonstrable focal breast lesion.

- Kindly correlate clinically.



*Patil*

Dr. SAURABH PATIL  
(MBBS, MD(RADIOLOGY))