

Hosp. Reg. No.: TMC - Zone C - 386

INDUSTRIAL HEALTH SERVICES

13/01/2024

Prajakta Dhotre 30 yrs/ Female

> to cough 1 , cold 1. headache . afdosile No co-modbidity NO PIM. NO SIH m1n- 20/11/2023, irregular. OlH- G2P, ALLIDO. 2 yrs, male, LSCS, healthy.

Height-168cm Weight - 62kg BmI-ZZlrg1m2 Nomal

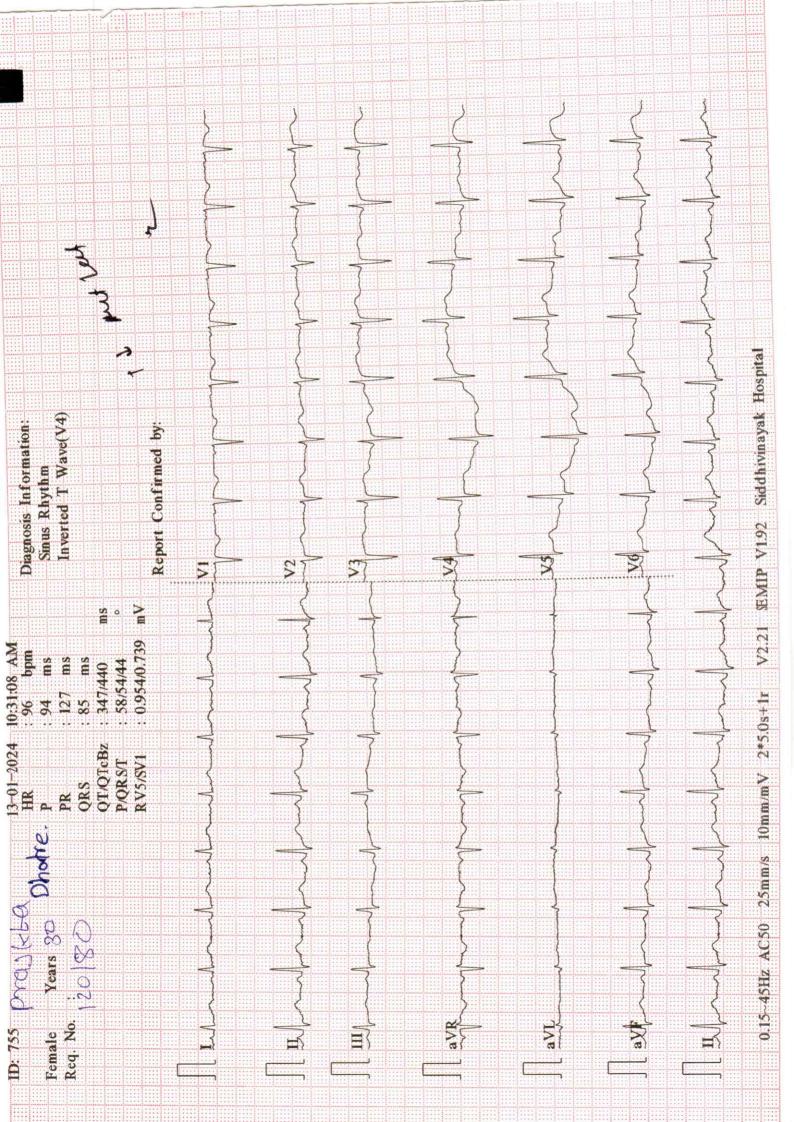
BP- 120/80 mm kg P- 901 min SPO, 981.

Pt is fit and resume her normal duties

& Consult with phy sician for blood charges







OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE

PRAJAKTA DHOTRE

AGE

30

DATE -

13.01.2024

Spects: Without Glasses

	RT Eye	Lt Eye	
NEAR	N/6	N/6	
DISTANT	6/12	6/6	
Color Blind Test	NORMAL		

SIDDHIVINAYAK HOSPITALS





Imaging Department

Name - Mrs. Pragartay Differer Doppler Age /40369/F

Ref by Dr.- Siddhivinayak Hospital Date - 13/01/2024

USG ABDOMEN & PELVIS

FINDINGS:

The liver dimension is enlarged in size (19.3 cm). It appears normal in morphology with normal echogenicity. No evidence of intrahepatic ductal dilatation.

The GB-gallbladder is distended normally with no stones within.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The spleen is normal in size (10.2 cm) and morphology

Both kidneys demonstrate normal morphology. Both kidneys show normal cortical echogenicity.

The right kidney measures 10.6 x 3.9 cm.

The left kidney measures 10.9 x 5.2 cm.

Urinary bladder: normally distended. Wall thickness - normal.

Uterus: normal in size and morphology. Size: 9.3 x 4.3 x 4.7 cm. IUCD seen in situ

Both ovaries are normal.

Adnexa appear normal

No free fluid is seen.

IMPRESSION:

- Hepatomegaly.
- IUCD noted in uterus in situ.

DR. AMOL BENDRE

MBBS: DMRE

CONSULTANT RADIOLOGIST









Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

Name - Mrs. Prajakta Dhotre	Age - 30 Y/F
Ref by Dr Siddhivinayak Hospital	Date - 13/01/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

· No significant abnormality seen.

Adv.: Clinical and lab correlation.

DR. MOHÄMMAD SOHAIB
MBBS; DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.









Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

ECHOCARDIOGRAM

NAME	MRS. PRAJAKTA DHOTRE			
AGE/SEX	32 YRS/F			
EFERRED BY SIDDHIVINAYAK HOSPITAL				
DATE OF EXAMINATION	13/01/2024			

2D/M-MODE ECHOCARDIOGRAPHY

VALVES:	CHAMBERS:
MITRAL VALVE:	LEFT ATRIUM: Normal
AML: NormalPML: Normal	Left atrial appendage: Normal
 Sub-valvular deformity: Absent 	LEFT VENTRICLE: Normal
	RWMA: No
No. of cusps: 3	Contraction: Normal
PULMONARY VALVE: Normal	RIGHT ATRIUM: Normal
TRICUSPID VALVE: Normal	RIGHT VENTRICLE: Normal • RWMA: No
	Contraction: Normal
GREAT VESSELS:	SEPTAE:
AORTA: Normal	IAS: Intact
 PULMONARY ARTERY: Normal 	IVS: Intact
CORONARIES: Proximal coronaries normal	VENACAVAE:
CORONARY	SVC: Normal
CORONARY SINUS: Normal	 IVC: Normal and collapsing >20% with respiration
PULMONARY VEINS: Normal	PERICARDIUM: Normal

MEASUREMENTS:

AORT	A	LEFT VENTR	ICLE STUDY	RIGHT VENTR	CICLE STUDY
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	30 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	48.6 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	29.7 mm	RVEF	%
Ascending aorta	mm	IVSd	8.8 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	8.8 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	70 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	mm





COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MRS. PRAJAKTA DHOTRE
AGE/SEX	MAGARIA DHOTRE
REFERRED BY	32YRS/F
	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	13/01/2024
	13/01/2024

FLOW VELOCITY (m/s)	MITRAL	TRICUSPID	100000	
PPG (mmHg)			AORTIC	PULMONARY
MPG (mmHg)			1.3	1.07
VALVE AREA (cm ²)				
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)	_			
ACCELERATION				
DECELERATION TIME (ms)	_			
PHT (ms)				
VENA CONTRACTA (mm)				
REGURGITATION				
		TRJV= m/s		
E/A		PASP = mmHg		
Z/E'	1.6			
	7.9			

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 70 %)
- Good RV systolic function
- Normal diastolic function
- All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

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	7	11	L.	NII

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB. DM (CARDIOLOGY)

INTERVENTIONAL CARDIOLOGIST

Dr. Anant Rankishanrao Munde MBBS, DNB, DM (Cardiology) Reg. No. 2005021228





/ Male

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Name : Mr. PRAJKTA DHOTRE (A)

: 180438

Collected On

: 13/1/2024 9:28 am

Lab ID.

Received On

. 13/1/2024 9:38 am

: 13/1/2024 5:27 pm

Age/Sex

Ref By

: 29 Years

Reported On

: FINAL

Report Status

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDA SE)	147.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	33.9	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease: >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	95.6	mg/dL	Desirable level: <161 mg/dl. High:>= 161 - 199 mg/dl. Borderline High:200 - 499 mg/dl. Very high:>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	19	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	94	mg/dL	Optimal: <100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High: 160 - 189mg/dl. Very high: >= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	2.77		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	4.34		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

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Lab ID. : 180438

Reported On : 13/1/2024 5:27 pm Age/Sex : 29 Years / Male

Report Status Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

: FINAL

. 13/1/2024 9:38 am

COMPLETE BLOOD COUNT

Received On

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	11.4	gm/dl	13 - 18
HEMATOCRIT (PCV)	34.2	%	42 - 52
RBC COUNT	3.88	x10^6/uL	4.70 - 6.50
MCV	88	fl	80 - 96
MCH	29.4	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	14.2	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	6410	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	50	%	40 - 80
LYMPHOCYTES	38	%	20 - 40
EOSINOPHILS	03	%	0 - 6
MONOCYTES	09	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	355000	/ cumm	150000 - 450000
MPV	8.9	fl	6.5 - 11.5
PDW	15.9	%	9.0 - 17.0
PCT	0.320	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Norm	ochromic, Reduced red	blood cells count
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		
Mathad , FDTA Whale Blood. Tosts done on Automated Civ. Part Cell Country DDC and Distalat count by			

Method: EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method). Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By

Priyanka_Deshmukh

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. 13/1/2024 9:38 am Lab ID. : 180438 Received On

Reported On : 13/1/2024 5:27 pm Age/Sex : 29 Years / Male

Report Status : FINAL Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

URINE ROUTINE EXAMINATION

TEST NAME UNIT REFERENCE RANGE **RESULTS**

URINE ROUTINE EXAMINATION PHYSICAL EXAMINATION

VOLUME 20ml

COLOUR Pale yellow Pale Yellow

CLEAR APPEARANCE Clear

CHEMICAL EXAMINATION

REACTION Acidic Acidic

(methyl red and Bromothymol blue indicator)

1.005 - 1.022 SP. GRAVITY 1.010

(Bromothymol blue indicator)

PROTEIN Absent Absent

(Protein error of PH indicator)

BLOOD Absent Absent

(Peroxidase Method)

SUGAR Absent Absent

(GOD/POD)

KETONES Absent Absent

(Acetoacetic acid)

BILE SALT & PIGMENT Absent Absent

(Diazonium Salt)

UROBILINOGEN Normal Normal

(Red azodye)

LEUKOCYTES Absent Absent

(pyrrole amino acid ester diazonium salt)

Negative

(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)

MICROSCOPIC EXAMINATION

RED BLOOD CELLS Absent Absent **PUS CELLS** 1-2 / HPF 0 - 5 **EPITHELIAL** 2-3 / HPF 0 - 5

CASTS Absent

Checked By

SHAISTA Q

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. 13/1/2024 9:38 am Lab ID. Received On : 180438

: 13/1/2024 5:27 pm Reported On Age/Sex : 29 Years / Male

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

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Lab ID. : 180438

Reported On : 13/1/2024 5:27 pm Age/Sex : 29 Years / Male

IMMUNO ASSAY

Received On

Report Status : FINAL Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

. 13/1/2024 9:38 am

TEST NAME		RESULTS		UNIT	REFERENCE RANGE		
TFT (THYROID FUNCTION TEST)							
SPACE				Space	-		
SPECIMEN		Serum					
T3		81.59		ng/dl	84.63 - 201.8		
T4		6.12		μg/dl	5.13 - 14.06		
TSH		3.48		μIU/ml	0.270 - 4.20		
T3 (Triido Thyronine) hormone)		T4 (Thyroxine	T4 (Thyroxine)		nyroid stimulating		
AGE	RANGE	AGE	RANGES	AGE	RANGES		
1-30 days	100-740	1-14 Days	11.8-22.6	0-14 D	ays 1.0-39		
1-11 months	105-245	1-2 weeks	9.9-16.6	2 wks -	5 months 1.7-9.1		
1-5 yrs	105-269	1-4 months	7.2-14.4	6 mon	ths-20 yrs 0.7-6.4		
6-10 yrs	94-241	4 -12 months	7.8-16.5	Pregn	ancy		
11-15 yrs	82-213	1-5 yrs	7.3-15.0	1st Tr	imester		
0.1-2.5							
15-20 yrs	80-210	5-10 yrs	6.4-13.3	2nd T	rimester		
0.20-3.0							
		11-15 yrs	5.6-11.7	3rd ⁻	Trimester		
0.20.2.0							

0.30-3.0

INTERPRETATION:

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By

Priyanka Deshmukh

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Report Status : FINAL

Received On

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

HAEMATOLOGY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

BLOOD GROUP

Ref By

SPECIMEN WHOLE BLOOD EDTA & SERUM

* ABO GROUP '0'

RH FACTOR **POSITIVE**

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

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

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: Mr. PRAJKTA DHOTRE (A) Name

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: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status

: FINAL

*RENAL FUNCTION TEST

	Name and the second sec					
TEST NAME	RESULTS	UNIT	REFERENCE RANGE			
BLOOD UREA	19.3	mg/dL	19 - 45			
(Urease UV GLDH Kinetic)						
BLOOD UREA NITROGEN	9.02	mg/dL	5 - 20			
(Calculated)						
S. CREATININE	0.62	mg/dL	0.6 - 1.4			
(Enzymatic)						
S. URIC ACID	2.9	mg/dL	3.5 - 7.2			
(Uricase)						
S. SODIUM	138.3	mEq/L	137 - 145			
(ISE Direct Method)						
S. POTASSIUM	3.89	mEq/L	3.5 - 5.1			
(ISE Direct Method)						
S. CHLORIDE	100.2	mEq/L	98 - 110			
(ISE Direct Method)						
S. PHOSPHORUS	3.56	mg/dL	2.5 - 4.5			
(Ammonium Molybdate)						
S. CALCIUM	8.9	mg/dL	8.6 - 10.2			
(Arsenazo III) PROTEIN	6.94	~ / -11	6.4 - 8.3			
	0.94	g/dl	6.4 - 8.3			
(Biuret) S. ALBUMIN	3.88	م (ا	3.2 - 4.6			
	3.00	g/dl	3.2 - 4.6			
(BGC) S.GLOBULIN	3.06	g/dl	1.9 - 3.5			
(Calculated)	5.00	g/ui	1.5 5.5			
A/G RATIO	1.27		0 - 2			
calculated	1.2/		0 2			
NOTE	BIOCHEMISTRY TEST DO	ONE ON FULLY AUT	OMATED (EM 200)			

Result relates to sample tested, Kindly correlate with clinical findings.

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Reported On

: 13/1/2024 5:27 pm

/ Male : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Report Status

: FINAL

Peripheral smear examination

TEST NAME RESULTS

SPECIMEN RECEIVED WHOLE BLOOD EDTA

RBC Normocytic, Normochromic **WBC** Total leukocyte count is normal.

> Neutrophils-50% Lymphocytes-38% Monocytes- 09% Eosinophils-03% Adequate on smear.

PLATELET HEMOPARASITE No parasite seen.

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

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Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status

: FINAL

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
TOTAL BILLIRUBIN	0.53	mg/dL	0.0 - 2.0	
(Method-Diazo)				
DIRECT BILLIRUBIN	0.22	mg/dL	0.0 - 0.4	
(Method-Diazo)				
INDIRECT BILLIRUBIN	0.31	mg/dL	0 - 0.8	
Calculated				
SGOT(AST)	10.3	U/L	0 - 37	
(UV without PSP)				
SGPT(ALT)	11.4	U/L	UP to 40	
UV Kinetic Without PLP (P-L-P)				
ALKALINE PHOSPHATASE	68.0	U/L	53 - 128	
(Method-ALP-AMP)				
S. PROTIEN	6.94	g/dl	6.4 - 8.3	
(Method-Biuret)				
S. ALBUMIN	3.88	g/dl	3.5 - 5.2	
(Method-BCG)				
S. GLOBULIN	3.06	g/dl	1.90 - 3.50	
Calculated				
A/G RATIO	1.27		0 - 2	
Calculated				

Result relates to sample tested, Kindly correlate with clinical findings.

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Report Status

: FINAL

НΔ	EM	ΔΤ	OI	O	GY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
<u>ESR</u>				
ESR	70	mm/1hr.	0 - 20	

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

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Report Status : FINAL Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE		
GLYCOCELATED HEMOGLOBIN (HBA1C)					
HBA1C (GLYCOSALATED	5.4	%	Hb A1c		
HAEMOGLOBIN)			> 8 Action suggested		
			< 7 Goal		
			< 6 Non - diabetic level		
AVERAGE BLOOD GLUCOSE (A. B.	108.3	mg/dL	NON - DIABETIC : <=5.6		
G.)			PRE - DIABETIC: 5.7 - 6.4		
			DIABETIC: >6.5		

METHOD Particle Enhanced Immunoturbidimetry

HbA1c: Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c: Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

BLOOD GLUCOSE FASTING & PP

BLOOD GLUCOSE FASTING	96.1	mg/dL	70 - 110
BLOOD GLUCOSE PP	98.9	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

- 1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
- 2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

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BIOCHEMISTRY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl

- Impaired Fasting glucose (IFG) : 110-125 mg/dl

- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance : 70-139 mg/dl - Impaired glucose tolerance: 140-199 mg/dl

- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

***Any positive criteria should be tested on subsequent day with same or other criteria. **GAMMA GT** 14.9 13 - 109

Result relates to sample tested, Kindly correlate with clinical findings.

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