

Patient Name

: Mrs. HIMANSHI HARSH GUPTA

: 40953

Age / Gender

: 30 / Female

UHID IPNO

10000

Referred By

: Dr. PRATIBHA PUNDHIR

Requisitions

: 22/01/2024

Req.No

: 2416751

Reported on

: 22/01/2024

Patient Type

OPD

#### CLINICAL PATHOLOGY

#### URINE ROUTINE MICROSCOPY

| Specimen Type: Urine TEST NAME | RESULT     | UNITS | BIOLOGICAL<br>REF. INTERVAL | METHOD                   |
|--------------------------------|------------|-------|-----------------------------|--------------------------|
| PHYSICAL EXAMINATION           |            |       | 1                           |                          |
| Sample Volume                  | 20         | ml    |                             |                          |
| colour                         | Pale Yello | ow    | Pale Yellow                 |                          |
| Appearance                     | Hazy       |       | Clear                       |                          |
| Specific                       | 1.015      |       |                             | Ion Exchange             |
| Reaction.                      | Acidic     |       | Acidic                      |                          |
| pH -Urine                      | 6.0        |       |                             | Double Indicator         |
| Albumin.                       | NIL        |       | Absent                      | Acid/Base<br>Exchange    |
| Glucose                        | NIL        |       | Absent                      | Oxidase/Peroxid ase      |
| Bile Salt                      | NIL        |       | NIL                         |                          |
| Bile Pigment                   | NIL        |       | NIL                         | Diazo/Fouchets<br>Test   |
| Urobilinogen                   | NIL        |       | NIL                         | Ehrlich Reaction         |
| Leucocyte                      | Traces     |       | Negative                    | Granulocyte<br>Esterases |

-\*\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHOTRA
MBBS MD, (PATHOLOGY)
CONSULTANT PATHOLOGIST
CONSULTANT PATHOLOGIST
REG. NO (Pathology)
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CLINICAL PATHOLOGY

### MICROSCOPIC EXAMINATION

**PUS CELLS - URINE** 

6-8

Red blood cells

Nil

NIL

**Epithelial Cells - Urine** 

2-4

4---5/HPF

Casts

NIL

NIL

Microscopic

Crystals.

NIL

NIL

Microscopic

Interpretation:-

Albumin:

1+(30mg/dl)

2+(100mg/dl)

3+(300mg/dl)

4+(>2000mg/dl)

Glucose: 1+(100mg/dl)

2+(250mg/dl)

3+(500mg/dl)

4+(1000mg/dl)

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHUTRA MBBS MD (PATHOLOGY) CONSULTANT PATHOLOGIST REG WISHAMMEALFOTRA MD (Pathology) Page 2 of 2

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph. :74320 00000, 74969 79727

the health care providers

the health care providers



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#### HAEMATOLOGY

#### COMPLETE HAEMOGRAM (CBC ESR)

| Specimen Type: Whole Blood (EDTA) |        |                        | BIOLOGICAL    |                             |
|-----------------------------------|--------|------------------------|---------------|-----------------------------|
| TEST NAME                         | RESULT | UNITS                  | REF. INTERVAL | METHOD                      |
| Haemoglobin                       | 14.0   | g/dl                   | 11.5 - 16.5   | Cyanide-Free<br>Colorimetry |
| <b>Total Leucocyte Count</b>      | 6500   | cells/cu.mm            | 4000 - 10000  | Impedance<br>Variation      |
| DIFFERENTIAL COUNT                |        |                        |               |                             |
| Neutrophils.                      | 62     | %                      | 40.0 - 80.0   | Flow Cytometry              |
| Lymphocytes.                      | 29     | %                      | 20.0 - 40.0   | Flow Cytometry              |
| Monocytes                         | 80     | %                      | 2.0 - 10.0    | Flow Cytometry              |
| Eosinophils.                      | 01     | %                      | 1.0 - 6.0     | Flow Cytometry              |
| Basophils                         | 00     | %                      | 0.0 - 1.0     | Flow Cytometry              |
| Platelet Count                    | 308    | 1000/cumm              | 150 - 450     | Electrical<br>Impedance     |
| RED BLOOD CELL COUNT              | 4.83   | millions/cun<br>m      | n 3.8 - 4.8   | Electrical<br>Impedance     |
| PACKED CELL VOLUME                | 41.1   | %                      | 36 - 46       | Calculated                  |
| MEAN CORPUSCULAR VOLUME           | 85.1   | fL                     | 76 - 100      | Measured                    |
| MEAN CORPUSCULAR<br>HAEMOGLOBIN   | 29.0   | pg                     | 27 - 32       | Calculated                  |
| MEAN CORPUSCULAR Hb CONC          | 34.1   | g/dl                   | 33 - 37       | Calculated                  |
| E.S.R.                            | 15 mm  | mm at the end of 1st h | 0 - 15<br>r   | Westergren                  |

-\*\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

DR VISHAL SALHUTRA
MBBS MD, (PATHOLOGY)
CONSULTANTA PATHOLOGIST
REG. NO. HMC 15281
REG. NO. HMC 15281

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

MD (Pathology)
Page 1 of 1



Patient Name

: Mrs. HIMANSHI HARSH GUPTA

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: 22/01/2024 / 9.41 AM

Referred By Req.No

Patient Type

: Dr. PRATIBHA PUNDHIR : 2416751

: OPD

Reported on

Requisitions

: 22/01/2024

/ 12.14 PM

#### **SEROLOGY**

#### **BLOOD GROUP and RH TYPE**

Specimen Type

WHOLE BLOOD

BIOLOGICAL

METHOD

TEST NAME

RESULT

UNITS

REFERENCE INTERVAL

Blood Group

"AB" RH POSITIVE

Hemagglutination

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

REG. NO. HMC

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22/01/2024

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#### BIOCHEMISTRY

#### BLOOD SUGAR FASTING AND PP

| Specimen Type: Serum          | BIOLOGICAL |       |               |                       |  |
|-------------------------------|------------|-------|---------------|-----------------------|--|
| TEST NAME                     | RESULT     | UNITS | REF, INTERVAL | METHOD                |  |
| FASTING PP                    | 82.33      | mg/dl | 70 - 110      | GOD-POD               |  |
| Plasma glucose (Fasting)      | 62.33      | mg/ar | 70-110        | Hexokinase            |  |
| Plasma Glucose(POST Prandial) | 101.32     | mg/dl | 90 - 140      | GOD-POD<br>Hexokinase |  |

-\*\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHUIRA MBBS MD, (PATHOLOGY CONSULTANT PATHOLL MD (Pathology)
Page 1 of 1

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph.: 74320 00000, 74969 79727

Date: 2024.02.06 16:34:23 IST



Patient Name

: Mrs. HIMANSHI HARSH GUPTA

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: 30 / Female

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: Dr. PRATIBHA PUNDHIR

Requisitions

: 22/01/2024

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: 2416751

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Patient Type

: OPD

#### BIOCHEMISTRY

#### **BSPP (BLOOD SUGAR PP)**

Specimen Type: Serum

BIOLOGICAL

TEST NAME

RESULT

REF. INTERVAL METHOD

**FASTING PP** 

Plasma Glucose(POST Prandial)

101.32

mg/dl

UNITS

90 - 140

GOD-POD

Hexokinase

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHOTKA MBBS MD, (RATHOLOGY) REG. WSHAL SALHOTRA

MD (Pathology)
Page 1 of 1

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph.: 74320 00000, 74969 79727

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Digitally signed by ANI Date: 2024.02.06 16:34:23 IST



Patient Name

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Requisitions

22/01/2024

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#### BIOCHEMISTRY

#### HBA1C

Specimen Type: WHOLE BLOOD

BIOLOGICAL

**TEST NAME** 

RESULT

4.2 - 5.7

6.0

UNITS %

REF. INTERVAL METHOD

Glycosylated Haemoglobin

(HbA1c) Estimated Average Glucose (eAG)

125.5

mg/dL

Calculated

**HPLC** 

Interpretation for HbA1c% as per American Diabetes Association (ADA)

Non diabetic adults: <5.7

At risk (Prediabetes): 5.7-6.4 Diagonsing Diabetes: >=6.5

Therapeutic goals for glycemic control: Age > 19 years, Goal of therapy: <7.0

Age <19 years, Goal of therapy: <7.5

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

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Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHUIRA MBBS MDWAPHOLOGY) CONSULTANT PATHOLOGIS REG WOHAMSALSTOTRA MD (Pathology) Page 1 of 1

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Patient Type

: OPD

#### BIOCHEMISTRY

#### LIPID PROFILE

| Specimen Type: Serum     |        |       | BIOLOGICAL    |              |
|--------------------------|--------|-------|---------------|--------------|
| TEST NAME                | RESULT | UNITS | REF. INTERVAL | METHOD       |
| LIPID PROFILE            |        |       |               |              |
| SERUM CHOLESTROL         | 164.70 | mg/dl | 0 - 200       | Cholestrol   |
|                          |        |       |               | Oxidase -    |
|                          |        |       |               | Peroxidase   |
| Serum Triglycerides      | 62.01  | mg/dl | Up to 150     | GPO -Trinder |
| HDL Cholesterol          | 86.07  | mg/dl | 0 - >60       | Oxidase -    |
|                          |        |       |               | Peroxidase   |
| LDL Cholesterol          | 66.23  | mg/dl | 0 - >100      | Calculated   |
| VLDL Cholesterol         | 12.40  | mg/dL | 0 - <30       | Calculated   |
| 5 0 0 0 101 NEW WEST 328 |        |       |               |              |

Recommended cut points for lipid profile Category : Acceptable : Borderline : High Cholestrol: <200: 200-239: >=240 Triglycerdes: <150 : 150-199 : 200-499 LDL cholestrol:<100:100-129:160-189

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHOTRA MBBS MD (PATHOLOGY) CONSULTANT BATHOLUGIS CONSULTANC 15281 REGDH VISHAL SALHOTRA MD (Pathology)
Page 1 of 1

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph. :74320 00000, 74969 79727



Patient Name

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: Dr. PRATIBHA PUNDHIR

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22/01/2024

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OPD

#### BIOCHEMISTRY

#### KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

| Specimen Type: Serum | BIOLOGICAL |       |               |                                      |  |
|----------------------|------------|-------|---------------|--------------------------------------|--|
| TEST NAME            | RESULT     | UNITS | REF. INTERVAL | METHOD                               |  |
| Urea Creatinine      |            |       |               |                                      |  |
| Serum Urea           | 24.22      | mg/dl | 13 - 45       | UreaseGLDH                           |  |
| Serum Creatinine     | 0.77       | mg/dL | 0.5 - 1.04    | Modified<br>JAFFEs                   |  |
| Serum Uric Acid      | 2.57       | mg/dl | 2.6 - 6.0     | Uricase Trinder,<br>End Point (Toos) |  |
| Serum Sodium         | 140.6      | meq/l | 135 - 155     | ISE Indirect                         |  |
| Serum Potassium      | 4.85       | meq/l | 3.5 - 5.6     | ISE Indirect                         |  |

<sup>\*</sup>Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

-\*\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology) DR VISHAL SALHOJRA
MBBS MD, (PATHOLOGY)
CONSULTANT PATHOLOGIST
PEG. No. YISHAL SALHOTRA
MD (Pathology)
Page 1 of 1



Patient Name

: Mrs. HIMANSHI HARSH GUPTA

UHID

40953

Age / Gender

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IPNO

Referred By

: Dr. PRATIBHA PUNDHIR : 2416751

Requisitions

: 22/01/2024

Req.No
Patient Type

. OPD

Reported on

: 22/01/2024

#### BIOCHEMISTRY

#### LFT(LIVER FUNCTION TEST)

| Specimen Type: Serum | BIOLOGICAL |       |               |                                       |  |
|----------------------|------------|-------|---------------|---------------------------------------|--|
| TEST NAME            | RESULT     | UNITS | REF. INTERVAL | METHOD                                |  |
| TOTAL BILIRUBIN      | 0.86       | mg/dL | 0.1 - 1.2     | Diazotized<br>Sulphanilic Acid        |  |
| DIRECT BILIRUBIN     | 0.52       | mg/dL | 0.00 - 0.20   | Diazotized<br>Sulphanilic Acid        |  |
| INDIRECT BILIRUBIN   | 0.34       | mg/dL | 0.0 - 0.9     | Calculated                            |  |
| SGOT (AST)           | 17.88      | IU/L  | 0 - 35        | IFCC WPP AMP                          |  |
| SGPT (ALT)           | 14.72      | IU/L  | 5 - 40        | IFCC WPP AMP                          |  |
| Alkaline Phosphatase | 76.88      | IU/L  | 50 - 136      | Modified IFCC                         |  |
| Total Protein        | 7.26       | g/dl  | 6.4-8.2       | Biuret Endpoint                       |  |
| Albumin - Serum      | 4.54       | g/DL  | 3.2 - 5.0     | Photometric<br>Column test<br>BCG Dye |  |
| Globulin             | 2.72       | gms%  | 2.3 - 4.5     | Calculated                            |  |

<sup>\*</sup>Results of these tests should always be interpreted in conjunction with patients medical history, clinical presentation and other findings.

-\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

DR VISHAL SALHOTRA
MBBS MD WBATHOLOGY)
CONSULTANT PATHOLOGIST
REPT. NISHAM SAEHOTRA
MD (Pathology)
Page 1 of 1

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph.: 74320 00000, 74969 79727

are providers



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#### IMMUNOLOGY

#### THYROID PROFILE

| Specimen Type: Serum              | BIOLOGICAL |        |               |        |  |
|-----------------------------------|------------|--------|---------------|--------|--|
| TEST NAME                         | RESULT     | UNITS  | REF. INTERVAL | METHOD |  |
| Tri-iodothyronine (T3)            | 1.19       | ng/mL  | 0.69 - 2.15   | CLIA   |  |
| Thyroxine (T4)                    | 87.9       | ng/mL  | 52 - 127      | CLIA   |  |
| Thyroid Stimulating Hormone (TSH) | 5.20       | μIU/mL | 0.3 - 4.5     | CLIA   |  |

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition as TSH directly affects thyroid function, malfunction of the pituitary or the hypo - thalamus influences the thyroid gland activity. Disease in any portion of the thyroid-pitutaryhypothala- mus system may influence the levels of T3 and T4 in the blood. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. Certain conditions like pregnancy, excess estrogen's, androgen's, antibiotic steroids and glucocorticoids may cause false thyroid values.

Reference ranges of TSH in pregnancy

1st Trimester = 0.1-2.5

2ed Trimester = 0.2-3.0

TSH levels are subject to circadian variation peaking early morning and a low level in the evening. The time of the day has influence on the measured serum TSH concentrations.

-\*\*\*\* End of Report \*\*\*\*

Please Correlate With Clinical Findings

DR VISHAL SALHUIKA MBBS MD, (PATHOLOGY)
CONSULTANT PATHOLOGIST REG. NO. HMC 15281

Lab Technician

Dr. SEEMILY KAHMEI MD (Pathology)

MD (Pathology)
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Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph. :74320 00000, 74969 79727

the health care providers

the **health** care providers



### COLOR DOPPLER ECHO CARDIOGRAPHY REPORT

NAME:MRS.HIMANSHI HARSH GUPTA

AGE:-30Y/F

MR.-40953

Refd.By:DR.PRATIBHA

DATED:22/01/2024

On 2D examination

FINAL IMPRESSION: -

- NO LVH
- NO RWMA
- NORMAL LV SYSTOLIC FUNCTION.
- EJECTION FRACTION =58%.
- NO AORTIC REGURGITATION
- NO MITRAL REGURGITATION
- TRACE TRICUSPID REGURGITATION
- NORMAL LV DIASTOLIC FUNCTION

DR. DINESH JOSHI
MD PHYSICIAN, PG DCC
NON-INVASIVE CARDIOLOGIST
Ex Max Hospital Mohali
Ex Paras Hospital Panchkula
REGD NO-013983

Dr SHWETA VOHRA

MBBS MEDICINE

MBBS MEDICINE

MB DM FACC FAPSIC FSCAI(USA)

Interventional Cardiologist

Ex Asst Professor PGIMS

Ex SR KGMU Lucknow

REGD NO.-18541



NAME : MRS. HIMANSHI HARSH GUPTA AGE / SEX : 30 YRS / F REF. BY : DR. PRATIBHA PUNDHIR REG.DATE : 22/01/2024

UHID : 40953/OPD

#### USG WHOLE ABDOMEN

#### LIVER:

Normal in size and shows raised echogenicity with normal outline. No focal lesion is seen.

Intrahepatic biliary radicals are normal. Portal vein is normal.

#### **GALL BLADDER:**

is partially distended. Wall thickness is normal. No mass/calculus seen in its lumen.

#### PANCREAS:

Normal in size and echotexture

#### SPLEEN:

Normal in size and echotexture. No focal lesion is seen.

#### KIDNEYS:

Both kidneys are normal in size, shape and echotexture. No mass lesion is seen.

Cortical thickness and corticomedullary differentiations are maintained on both sides.

No hydronephrosis/calculus is seen.

#### **URINARY BLADDER:**

is distended. Mucosal wall is regular and normal in thickness. No calculus / mass lesion is seen.

#### **UTERUS**

Anteverted, Normal in size and echotexture. No mass lesion is seen.

Endometrial thickness is normal.

#### ADNEXAE:

No adnexal pathology is seen.

No free fluid is seen in abdomen

#### IMPRESSION:

Ajax Chugh

Grade I fatty liver.

Please correlate clinically & with other investigations.

BS ONB (Radiodiagnos

DR. AHAW CHEGH

MBBS, DNB (RADIODIAGNOSIS)

CONSULTANT RADIOLOGIST

THIS REPORT IS NOT VALID FOR MEDICOLEGAL PURPOSES
Thanks for the Referral, With Regards

Sultanpur Chowk, Nr. Dhulkot Barrier, Ambala Chandigarh Expy, Ambala, Haryana 134003 Ph.: 74320 00000, 74969 79727

the health care providers the health are providers



| Name             | HIMANSHI HARSH GUPTA | Age        | 030Y - F                                  |
|------------------|----------------------|------------|---|
| Date             | 22/01/2024           | Patient Id | 40953                                     |
| Referring Doctor | 3                    | Center     | Healing Touch Hospital Place: Ambala City |

#### X RAY CHEST

Both lung fields show normal bronchovascular markings. Cardiac silhouette appear normal in size. Domes of the diaphragm are normally placed. Costophrenic angles appear normal on both sides. Visualized bony thoracic cage and soft tissue appear normal.

diagnosis)

Suggested clinical correlation

Not For Medicolegal Purposes.

Dr. Ajay Chugh

Consultant Radiologist DNB (Radiodiagnosis)

DISCLAIMER: It is an online interpretation of medical imaging based on the available clinical data. Patient's identification in online reporting is not established, so this report cannot be utilized for any medico legal purpose/ certifications. All modern machines/procedures have their own limitations. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests.





