

Ruchi sharma, Mrs

ID: 0000

Visit: opd
11.03.1993
30 Years

Female

27.08.2023 10:01:13 AM
sim hospital
sector 63
Gautam Budha Nagar, UP-201307

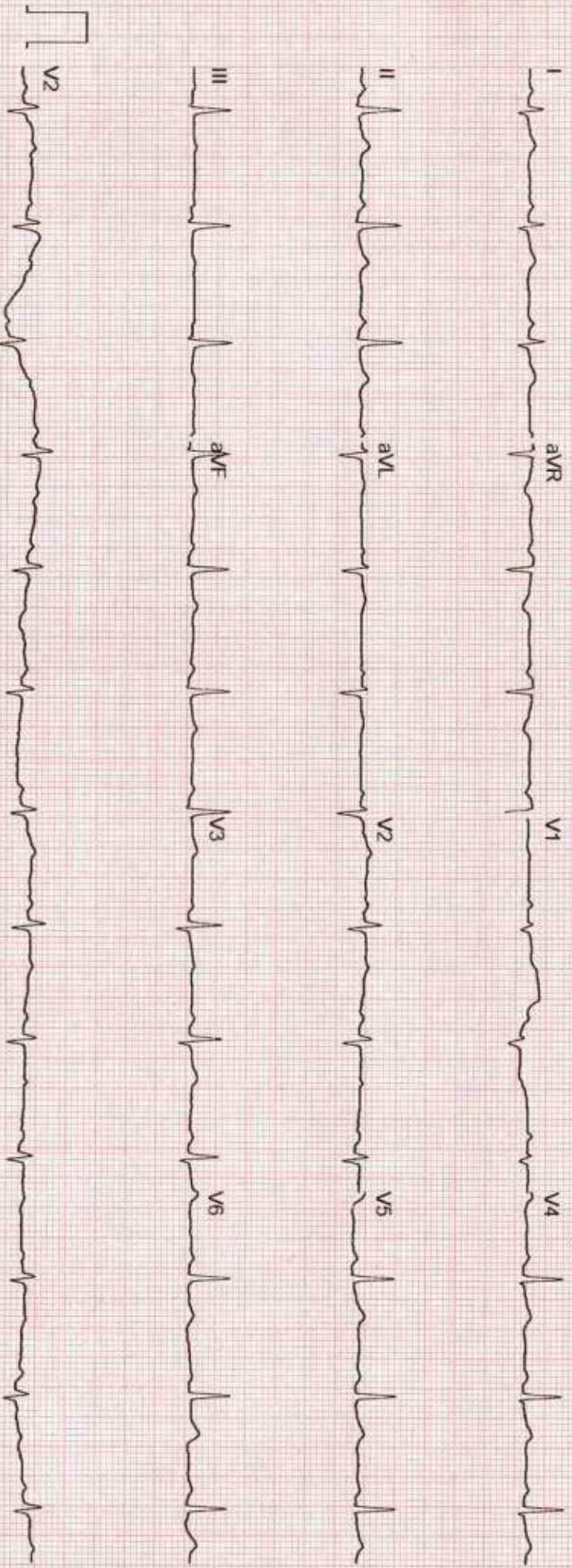
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

77 bpm
--/-- mmHg

QRS	66 ms	Normal sinus rhythm
QT/QTcBaz	372 / 420 ms	Normal ECG
PR	146 ms	
P	88 ms	
RR/PP	780 / 779 ms	
P/ORS/T	53 / 82 / 51 degrees	

SUM SUPER SPECIALITY HOSPITAL
Dr. Vinod Kumar Bhat
M.B.B.S., M.D. (Medicine)
Sr. Consultant Physician
Reg. No. 30989 (DMC)



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4X2.5x3 25 R1 1/1

Unconfirmed

ID : 188
NAME : MRS. RUCHI SHARMA
AGE SEX : 30 / FEMALE

HEIGHT (cm) : 154
WEIGHT (kg) : 55
PROTOCOL : BRUCE

REF. BY : DR. VIJOND BHAT
DONE BY : BHUPENDER BHATTI
TECHNICIAN :

CASE HISTORY

MEDICATION

OBJECT OF TEST

RISK FACTOR

ACTIVITY

OTHER INVESTIGATION

REASON FOR TERMINATION

EXERCISE TOLERANCE

EXERCISE INDUCED ARRHYTHMIAS

HAEMO RESPONSE

CHRONO RESPONSE

FINAL IMPRESSION

EXTRA COMMENTS

: Routine Check Up.

: Age.

: Moderate Active.

: X - Ray.

: Max HR.

: Moderate (< 10 METS).

: Insignificant.

: Normal.

: Negative.

: Stress Test is Negative for Inducible Ischemia

SJM SUPER SPECIALITY HOSPITAL
Dr. Vijond Kumar Bhat
M.B.B.S., M.D. (Medicine)
Sr. Consultant Physician
Reg. No. 20096 (DMC)



Confirmed By : _____

Signature

188 Tested On 27-08-2023, 10:42:06

BPL DYNATRAC

PATIENT ID : 188
 PATIENT NAME : MRS. RUCHI SHARMA
 PROTOCOL : BRUCE

DR. VIJOND BHAT
 Tested On : 27-08-2023, 10:42:06
 BPL DYNATRAC

Stage Name	Time (min:sec)	Speed (kmph)	Grade (%)	HR (bpm)	BP (mmHg)	R.P.P	METS	STLevel (II)	Stage Comments
Total METS achieved		8.00		Maximum ST depression (II)		-2.11 mm			
Maximum HR achieved		176 bpm, 92 % of 190 bpm		Total Exercise time		06:41 (min:sec)			
Pre-Test	03:05	0.00	0.00	86	109 / 74	9374	0.00	0.40	
Supine	00:41	0.00	0.00	78	109 / 74	8502	0.00	0.45	
Hyper Ventilation	00:14	0.00	0.00	83	109 / 74	9047	0.00	-0.60	
Wait For Exercise	00:36	0.00	0.00	91	109 / 74	9919	0.00	-0.05	
Exercise 1	02:52	2.70	10.00	126	120 / 80	15120	5.10	-0.40	
Exercise 2	02:54	4.00	12.00	153	130 / 90	19890	7.10	-1.46	
Peak Exercise	00:41	5.50	14.00	176	140 / 100	24640	8.00	-2.11	
Recovery 1	00:55	0.00	0.00	148	140 / 100	20720	0.00	0.20	
Recovery 2	01:51	0.00	0.00	109	109 / 74	11881	0.00	0.20	
Recovery 3	02:54	0.00	0.00	93	109 / 74	10137	0.00	-0.25	
Recovery 4	03:02	0.00	0.00	97	109 / 74	10573	0.00	0.05	



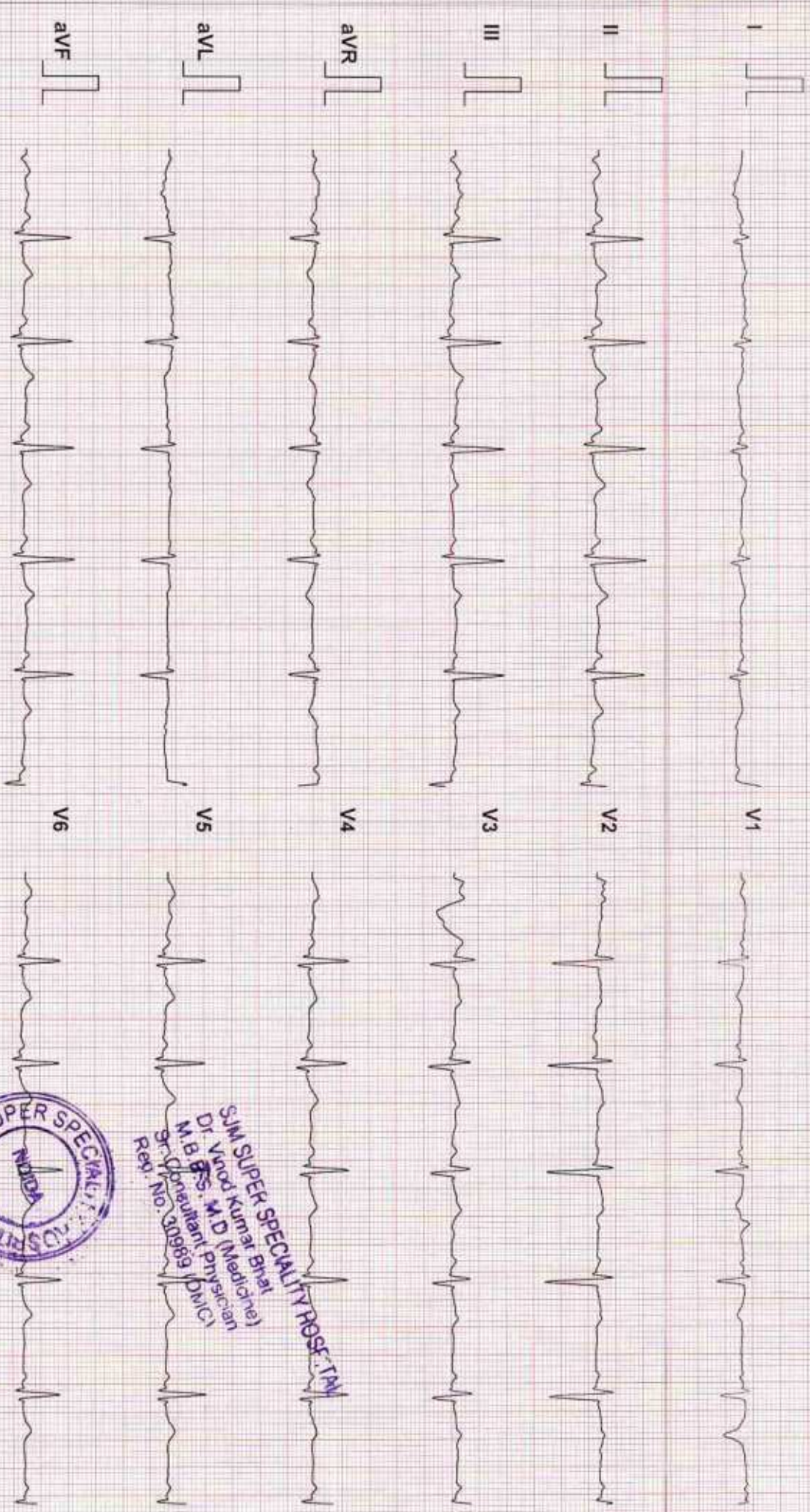
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 Dr. Vijond Kumar Bhat
 M.B.B.S. - M.D (Medicine)
 Sr. Consultant Physician
 Reg. No. 30989 (DMC)

ID : 188
NAME : MRS. RUCHI SHARMA
AGE : 30
BP : 109/74 mmHg

STAGE : Pre-Test
RECORDED TIME : 00:26 (min:sec)
STAGE DURATION : 00:26 (min:sec)
HR : 80 bpm (42%)

PROTOCOL : BRUCE
SPEED : 0.00 kmph
GRADE : 0.00 %
METS : 0.00

DR. VIJOND BHAT
Tested On 27-08-2023, 10:42
BPL DYNATRAC



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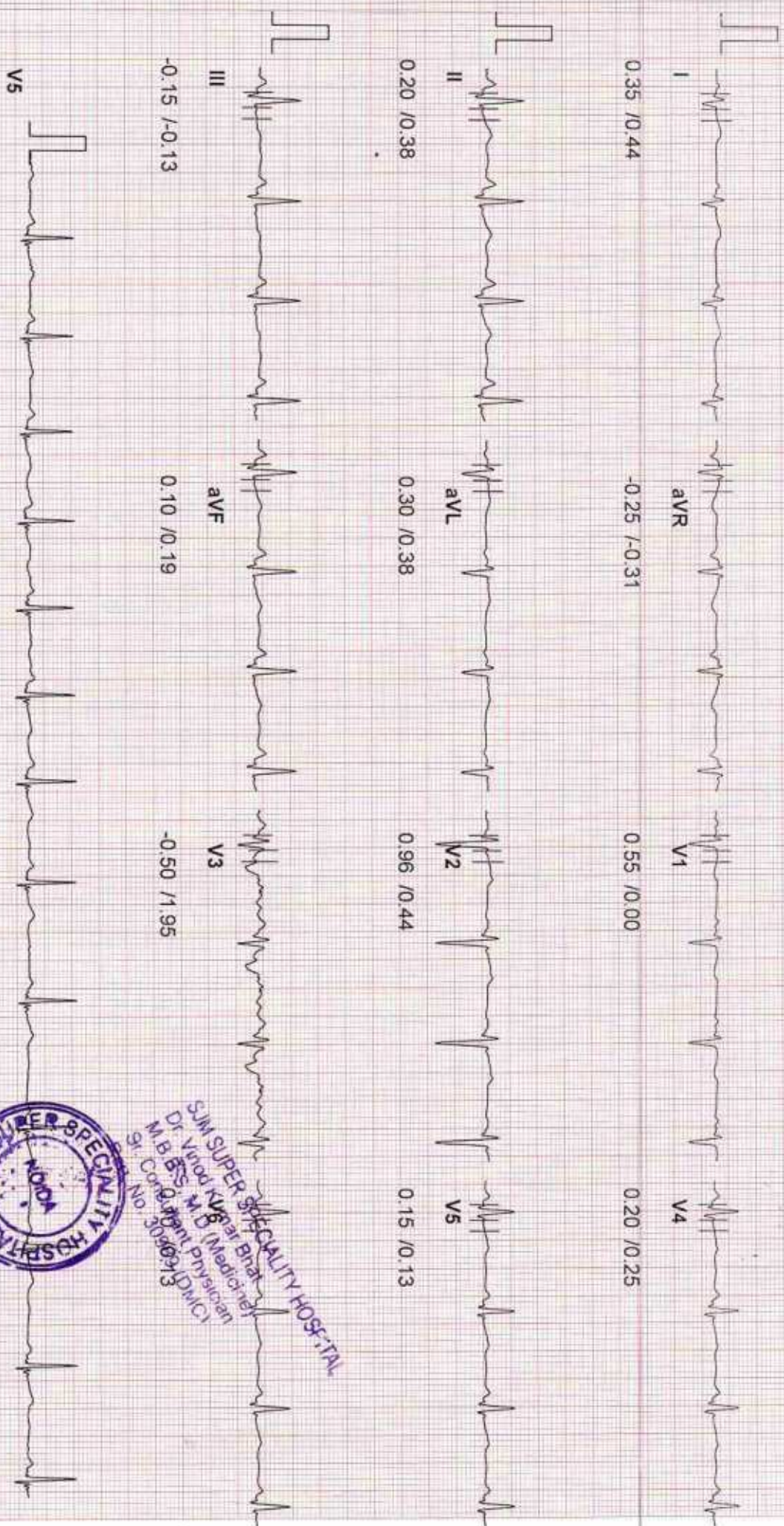
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 188
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 109/74 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Pre-Test
 RECORDED TIME : 03.12 (mi. sec)
 STAGE DURATION : 03.12 (mi. sec)
 HR : 77 bpm (40%)
 METs : 0.00

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00%
 DR. VIOND BHAT
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



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 Dr. Viond Kunal Bhat
 M.B.B.S., M.B. (Medicine)
 Sr. Consultant, Physician
 No. 30569 (DMC)

188

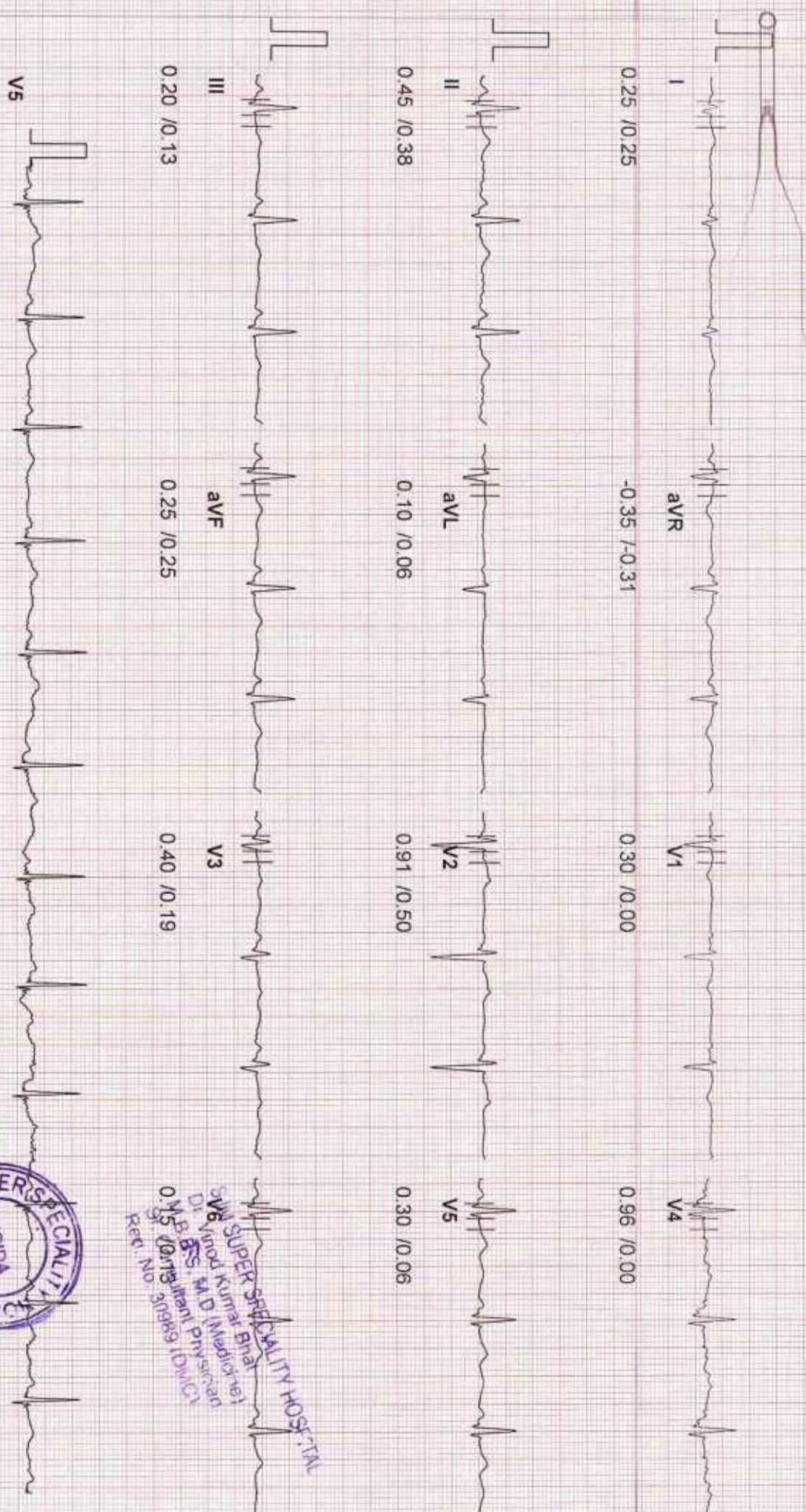
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 188
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 109/74 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Supine
 RECORDED TIME : 03:54 (min:sec)
 STAGE DURATION : 00:42 (min:sec)
 HR : 79 bpm (41%)
 PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJOND BHAT
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



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20 Hz Filter

10mm/mV, 25mm/Sec

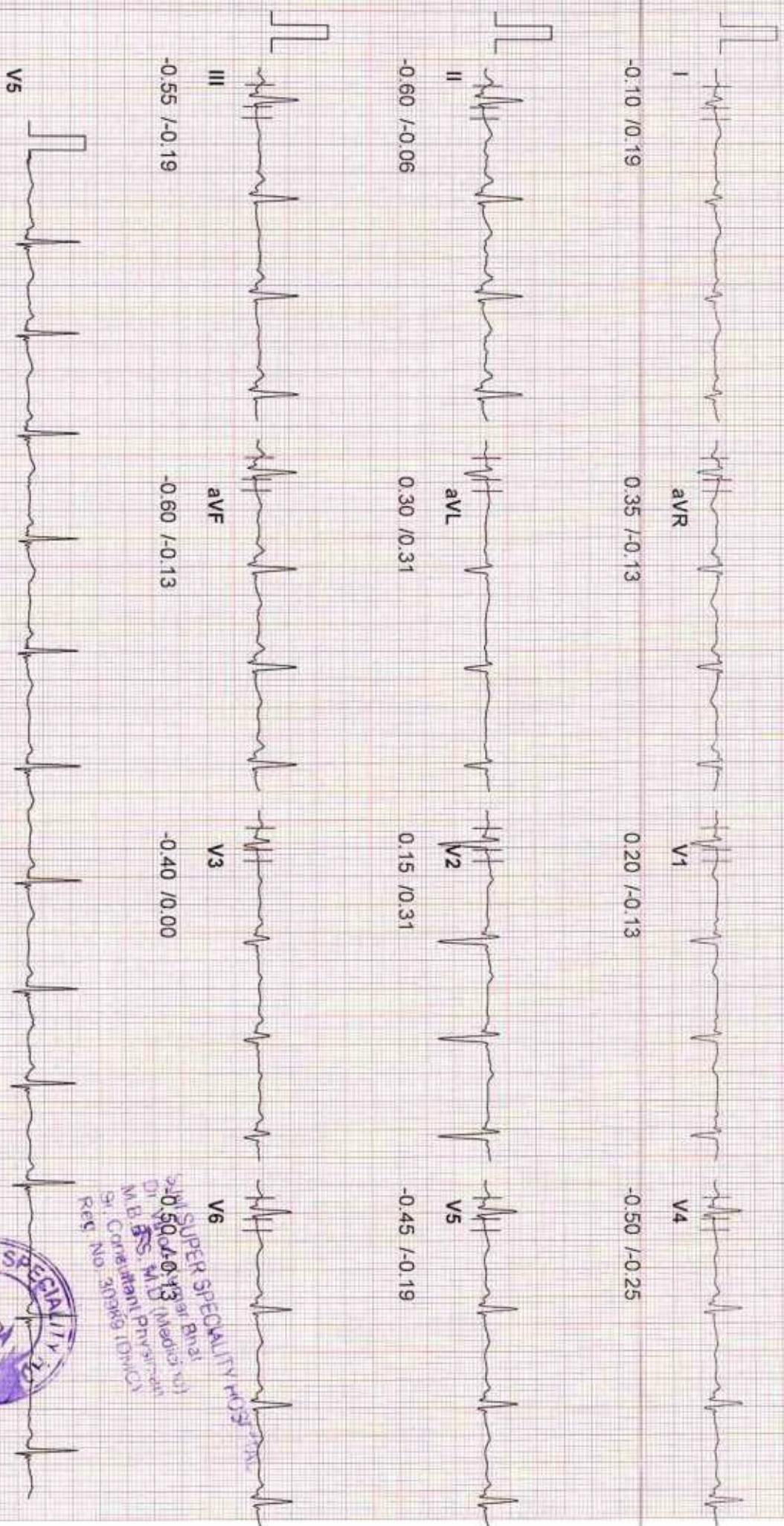


SJM SUPER SPECIALITY HOSPITAL
 Dr. Vinod Kumar Bhat
 MD, BCS, M.D. (Medical)
 Consultant Physician
 (CCMC) 011-26101300
 Ret. No. 011-26101300

ID : 188
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 109/74 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Hyper V₁ titration
 RECORDED TIME : 04:12 (min:sec)
 STAGE DURATION : 00:18 (min:sec)
 HR : 72 bpm (37%)
 METS : 0.00

DR. VIJOND BHAT
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



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20 Hz Filter

10mm/mV, 25mm/Sec

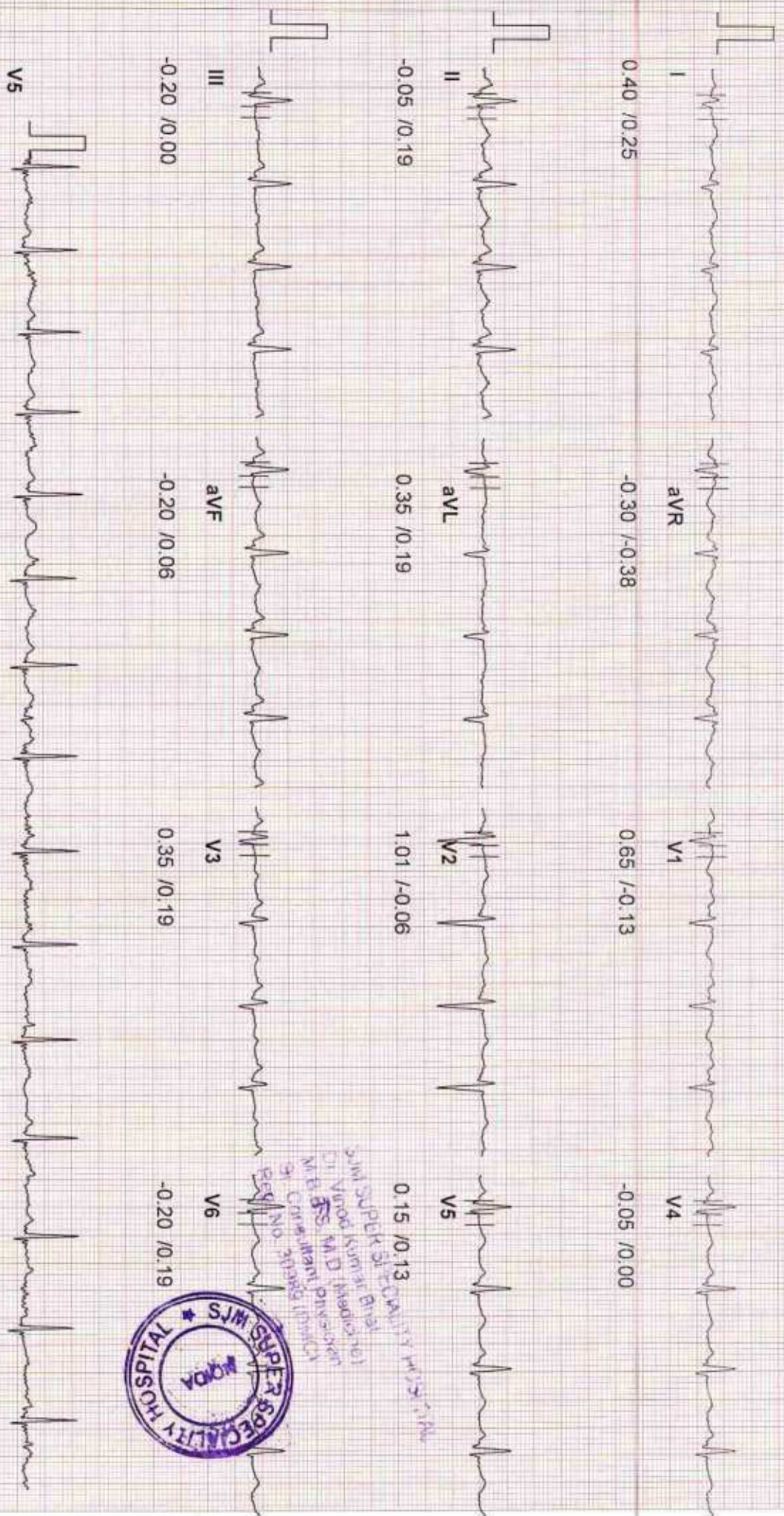


SJM SUPER SPECIALITY HOSPITAL
 Dr. RUCHI SHARMA (M.D. (Medicine))
 Sr. Consultant Physician
 REG. NO. 21896 (MCH)

ID : BB
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 106/74 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Wait For Exercise
 RECORD TIME : 04:49 (min:sec)
 STAGE DURATION : 00:37 (min:sec)
 HR : 89 bpm (46%)
 PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJOND BHUT
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



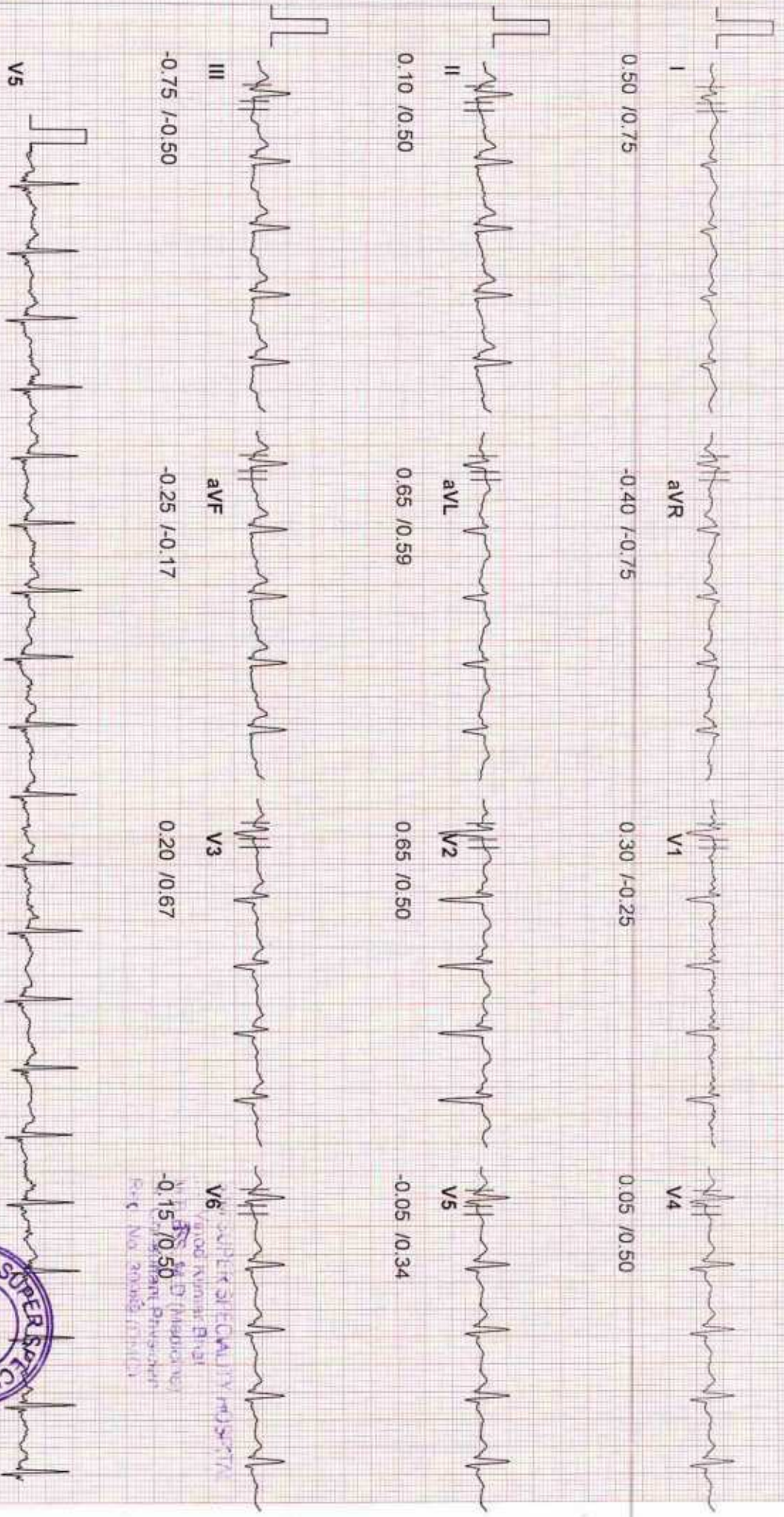
SUNSHINE SPECIALITY HOSPITAL
 Dr. Vinod Kumar Bhat
 M.B.B.S., M.D. (Medicine)
 Sr. Consultant, Physician
 Reg. No. 21988 (MCA)



ID : 188
NAME : MRS. RUCHI SHARMA
AGE : 30
BP : 120/80 mmHg
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise 1
RECORDED TIME : 03:00 (min sec)
STAGE DURATION : 03:00 (min sec)
HR : 125 bpm (65 %)
PROTOCOL : BRUCE
SPEED : 2.7 kmph
GRADE : 10.00 %
METS : 5.10

DR. VIJND BHAT
Tested On 27-08-2023, 10
BPL DYNATRAC



188

20 Hz Filter

10mm/mV, 25mm/Sec

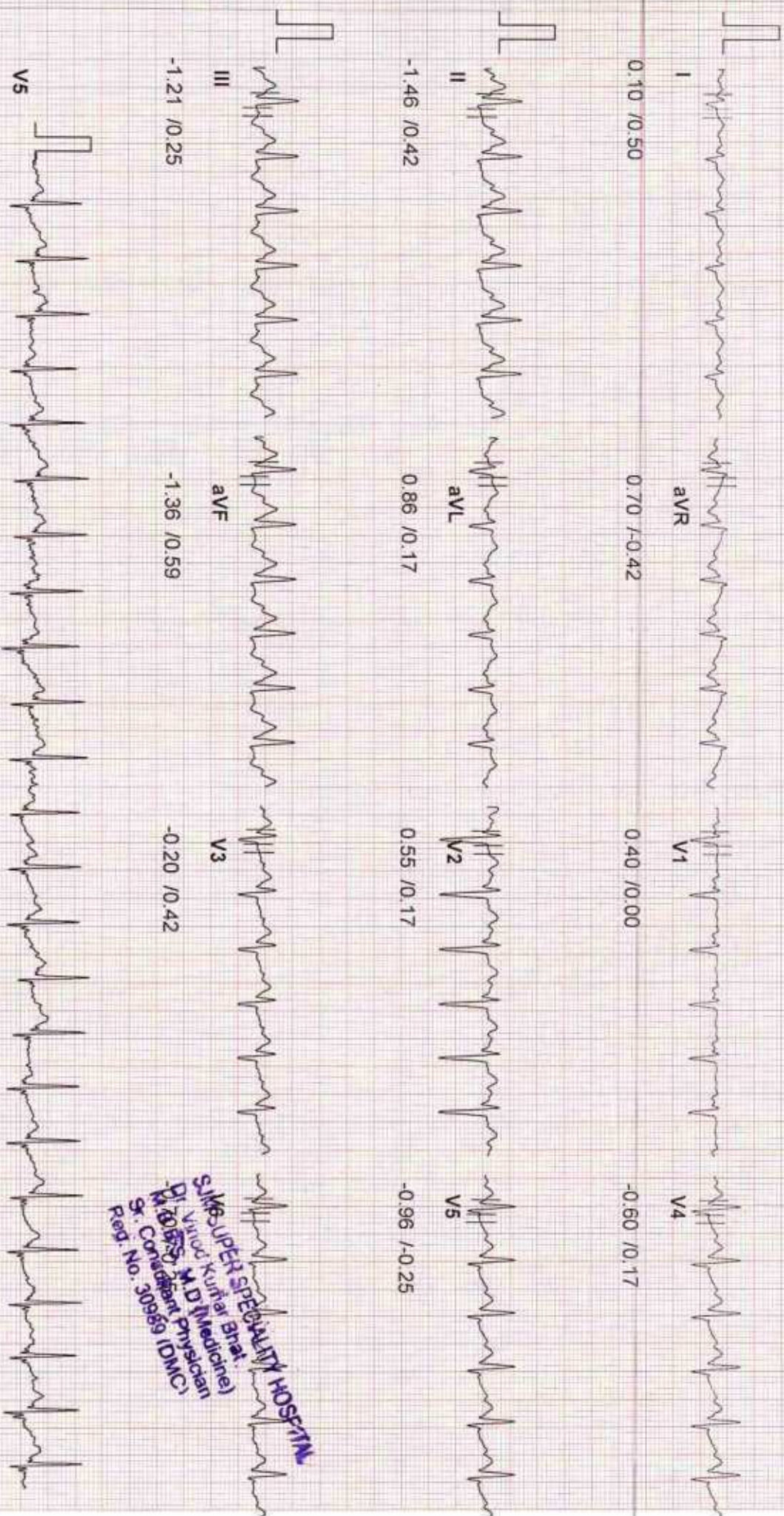


V6
SJM SUPER SPECIALITY HOSPITAL
V6000 Number: BPL-31
V6000 (Medical Use)
BPL DYNATRAC
BPL No: 20003/27/02/01

ID : EB
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 130/90 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise2
 RECORDED TIME : 06:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 155 bpm (81 %)

PROTOCOL : BRUCE
 SPEED : 4.0 Km/h
 GRADE : 12.00 %
 METS : 7.10
 DR. VIJOND BH./T
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



SJM SUPER SPECIALITY HOSPITAL
 Dr. Vijond Kuntal Bhargava
 M.D. (Medicine)
 Sr. Consultant Physician
 Reg. No. 30969 (DMC)

ID : 188
NAME : MRS. RUCHI SHARMA
AGE : 30
BP : 140/100 mmHg
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise; Peak Ex) PROTOCOL : BRUCE
RECORDED TIME : 00:41 (mi:sec) SPEED : 5.5 kmph
STAGE DURATION : 00:41 (mi:sec) GRADE : 14.00 %
HR : 176 bpm (92 %) METS : 8.00

DR. VIJOND BHAT
Tested On 27-08-2023, 10
BPL DYNATRAC

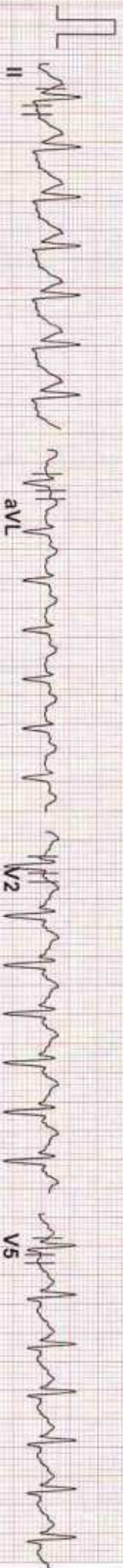


0.30 / 71.43

0.96 / -0.67

0.50 / 0.42

-1.96 / -1.01

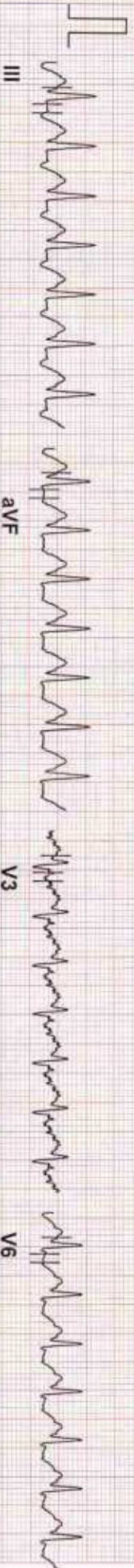


-2.11 / 0.50

0.91 / 0.59

0.75 / 1.17

-1.66 / -0.50



-2.06 / -0.75

-2.16 / -0.17

-1.81 / -0.84

-2.26 / -0.42



V5

avF

V3

V6

188

20 Hz Filter

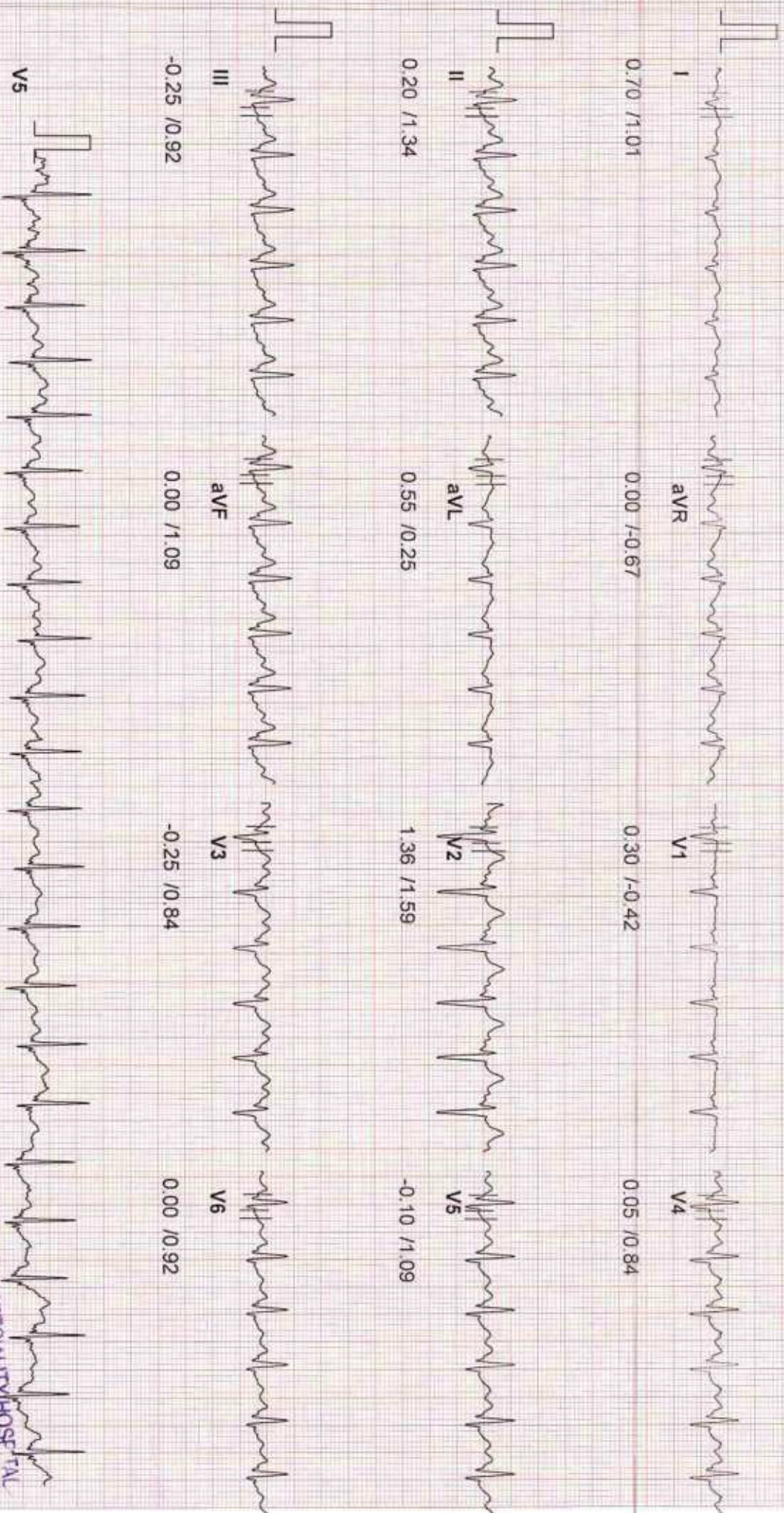
10mm/mV, 25mm/Sec

DR. VIJOND BHAT
Sr. Consultant Physician
Regd. No. 30989 (DMC)
M.B.B.S., M.D (Medicine)
Dr. Vinod Kumar Bhat

ID : 188
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 140/100 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 1
 RECORDED TIME : 00:59 (min sec)
 STAGE DURATION : 00:59 (min sec)
 HR : 144 bpm (75%)
 PROTOCC : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJOND B. AT
 Tested On : 27-08-2023, 10
 BPL DYNATRAC



188

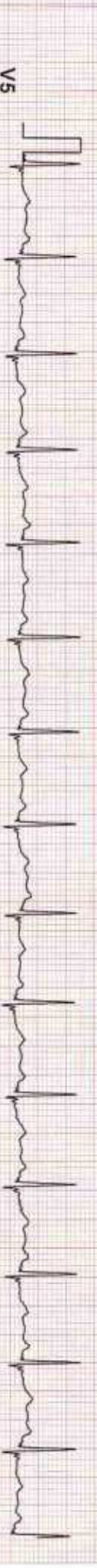
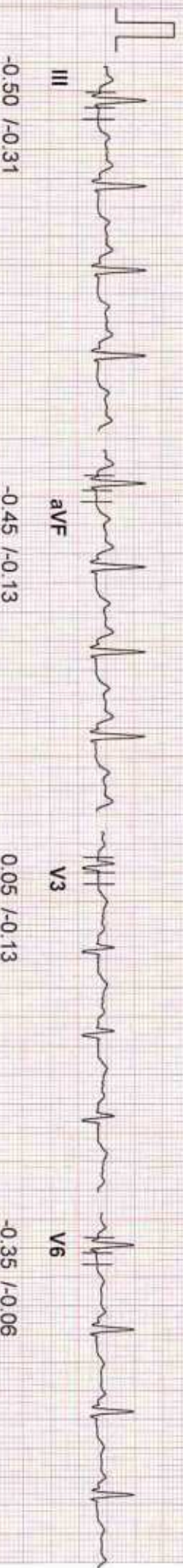
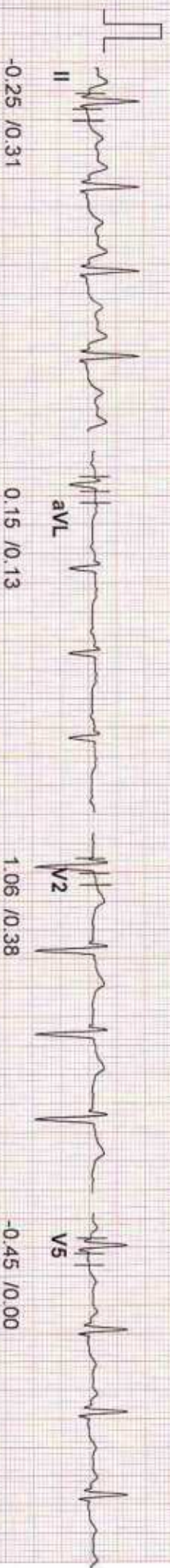
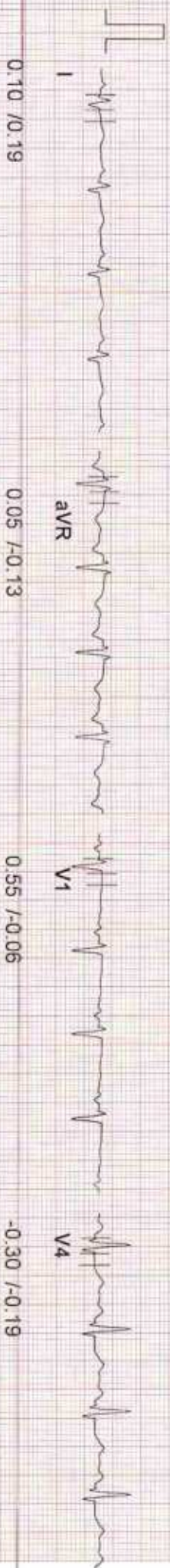
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SJM SUPER SPECIALITY HOSPITAL
 Dr. Vinod Kumar Bhat
 M.B.B.S. M.D. (Medicine)
 Sr. Consultant Physician
 Fortis/HV, 25mm/Sec

ID : 188
 NAME : MRS. RUCHI SHARMA
 AGE : 30
 BP : 109/74 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : RECOVER 3
 RECORDED TIME : 02:59 (min:sec)
 STAGE DURATION : 02:59 (min:sec)
 HR : 97 bpm (51%)

DR. VIJOND BHAT
 Tested On 27-08-2023, 10
 BPL DYNATRAC



188

20 Hz Filter

10mm/mV, 25mm/Sec

Laboratory Report

Lab Serial no. : LSHHI258133	Mr. No : 105394
Patient Name : Mrs. RUCHI SHARMA	Reg. Date & Time : 27-Aug-2023 01:04 AM
Age / Sex : 30 Yrs / F	Sample Receive Date : 27-Aug-2023 01:05 PM
Referred by : Dr. SELF	Result Entry Date : 27-Aug-2023 02:42PM
Doctor Name : Dr. Vinod Bhat	Reporting Time : 27-Aug-2023 02:42 PM
OPD : OPD	

HAEMATOLOGY

	results	unit	reference
CBC / COMPLETE BLOOD COUNT			
HB (Haemoglobin)	9.9	gm/dl	12.0 - 16.0
TLC	4.9	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	58	%	40 - 70
Lymphocyte	35	%	20 - 40
Eosinophil	06	%	02 - 06
Monocyte	01	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	3.63	Thousand / UI	3.8 - 5.10
P.C.V	31.3	million/UI	0 - 40
M.C.V.	86.2	fL	78 - 100
M.C.H.	27.3	pg	27 - 32
M.C.H.C.	31.6	g/dl	32 - 36
Platelet Count	1.70	Lacs/cumm	1.5 - 4.5

INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer



technician :

Typed By : Mr. BIRJESH

Page 1


Dr. Rajeev Goel
M.D. (Pathologist)
36548 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

Laboratory Report

Lab Serial no.	: LSHHI258133	Mr. No	: 105394
Patient Name	: Mrs. RUCHI SHARMA	Reg. Date & Time	: 27-Aug-2023 01:04 AM
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Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 27-Aug-2023 02:42 PM
OPD	: OPD		

HAEMATOLOGY

results unit reference

ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate) **32** mm/1hr 00 - 20

Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

BIOCHEMISTRY

results unit reference

BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F) **118.6** mg/dl 70 - 110

Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



technician :

Typed By : Mr. BIRJESH

Laboratory Report

Lab Serial no. : LSHHI258133	Mr. No : 105394
Patient Name : Mrs. RUCHI SHARMA	Reg. Date & Time : 27-Aug-2023 01:04 AM
Age / Sex : 30 Yrs / F	Sample Receive Date : 27-Aug-2023 01:05 PM
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Doctor Name : Dr. Vinod Bhat	Reporting Time : 27-Aug-2023 02:42 PM
OPD : OPD	

BIOCHEMISTRY

	results	unit	reference
LIPID PROFILE, Serum			
S. Cholesterol	196.1	mg/dl	< - 200
HDL Cholesterol	50.7	mg/dl	42.0 - 88.0
LDL Cholesterol	124.6	mg/dl	50 - 150
VLDL Cholesterol	20.7	mg/dl	00 - 40
Triglyceride	103.6	mg/dl	00 - 170
Chloestrol/HDL RATIO	3.86	%	3.30 - 4.40

INTERPRETATION:

Lipid profile OF lipid panel IS a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

BLOOD SUGAR (PP), Serum

SUGAR PP	98.7	mg/dl	80 - 140
----------	------	-------	----------

Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT



Technician :

Typed By : Mr. BIRJESH

Laboratory Report

Lab Serial no.	: LSHHI258133	Mr. No	: 105394
Patient Name	: Mrs. RUCHI SHARMA	Reg. Date & Time	: 27-Aug-2023 01:04 AM
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Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 27-Aug-2023 02:42 PM
OPD	: OPD		

BIOCHEMISTRY

	results	unit	reference
KFT,Serum			
Blood Urea	13.2	mg/dL	13 - 40
Serum Creatinine	0.83	mg/dl	0.6 - 1.1
Uric Acid	4.6	mg/dl	2.6 - 6.0
Calcium	9.0	mg/dL	8.8 - 10.2
Sodium (Na ⁺)	137.1	mEq/L	135 - 150
Potassium (K ⁺)	4.21	mEq/L	3.5 - 5.0
Chloride (Cl)	100.9	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	6.16	mg/dL	7 - 18

Comment:-


Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body.
Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

Centre for Excellent Patient Care



technician :

Typed By : Mr. BIRJESH


Dr. Rajeev Goel
M.D. (Pathologist)
36548 (MCI)

Page 1

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist



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 E-mail.: email@sjmhospital.com
 Web.: www.sjmhospital.com



Laboratory Report

Lab Serial No. : LSHHI258133	Reg. No. : 105394
Patient Name : MRS. RUCHI SHARMA	Reg. Date & Time : 27-Aug-2023 01:04 AM
Age/Sex : 30 Yrs /F	Sample Collection Date : 27-Aug-2023 01:05 PM
Referred By : SELF	Sample Receiving Date : 27-Aug-2023 01:05 PM
Doctor Name : Dr. Vinod Bhat	ReportingTime : 27-Aug-2023 02:42 PM
OPD/IPD : OPD	:

TEST NAME

VALUE

ABO

"O"

Rh

NEGATIVE

Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive an RH negative.

URINE SUGAR (FBS)

CHEMICAL EXAMINATION

Glucose : Nil

URINE SUGAR (PPBS)

CHEMICAL EXAMINATION

Glucose : Nil



Mr. BIRJESH

RJG
<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>
Dr. Rajeev Goel
 M.D. (Pathologist)
 36548 (MCI)

27-08-2023
Dr. Bupinder Zutshi
 (M.B.B.S., MD)
 Pathologist & Microbiologist



SJM SUPER SPECIALITY HOSPITAL

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 E-mail.: email@sjmhospital.com
 Web.: www.sjmhospital.com



Laboratory Report

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Age/Sex : 30 Yrs /F	Sample Collection Date : 27-Aug-2023 01:05 PM
Referred By : SELF	Sample Receiving Date : 27-Aug-2023 01:05 PM
Doctor Name : Dr. Vinod Bhat	ReportingTime : 27-Aug-2023 02:42 PM
OPD/IPD : OPD	:

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

Quantity: 20 ml
 Color: Straw
 Transparency: clear

CHEMICAL EXAMINATION

Albumin: nil
 Glucose: nil
 PH: Acidic

MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF
 RBC's: nil
 Crystals: nil
 Epithelial cells: 0-1 /HPF
 Others: nil

Note:-

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.



Mr. BIRJESH

R. Goel
<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>
Dr. Rajeev Goel
 M.D. (Pathologist)
 36548 (MCI)

27-08-2023
Dr. Bupinder Zutshi
 (M.B.B.S., MD)
 Pathologist & Microbiologist



RUCHI SHARMA

PID NO: P542300422447
Age: 30.0 Year(s) Sex: Female



Reference: Dr. SEM **Medical Laboratory Report** VID: 230054000404827

Sample Collected At:
S J MEMORIAL HOSPITAL
PLOT NO 2, SEC 63, OPP SHANI
MANDIR, CHIJARASI, SEC 63, NOIDA
201301
Sample Processed At: Metropolis
Healthcare Ltd E-21, B1 Mohan Co-op
Ind Estate New Delhi-110044

Registered On:
27/08/2023 07:47 PM
Collected On:
27/08/2023 7:47PM
Reported On:
27/08/2023 09:03 PM

HbA1c Glycated Haemoglobin

(EDTA Whole Blood)

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1C- Glycated Haemoglobin (HPLC)	5.2	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5
Estimated Average Glucose (eAG) (Calculated)	102.54	mg/dL	

Interpretation & Remark:

- 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 2022, 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 & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies 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/ turbo 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 % and Poor Control - More than 10 % .

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.



Dr. Geeta Chopra
Dr. Geeta Chopra .
M.D (Pathology)
(DMC Reg. No. - 5204)



RUCHI SHARMA

PID NO: P542300422447

Age: 30.0 Year(s) Sex: Female



Reference: Dr. S. E.

Sample Collected At:
S J MEMORIAL HOSPITAL
PLOT NO 2, SEC 63, OPP SHANI
MANDIR, CHIJARASI, SEC 63, NOIDA
201301
Sample Processed At: Metropolis
Healthcare Ltd E-21, B1 Mohan Co-op
Ind Estate New Delhi-110044

Medical Laboratory Report

VIP: 230054000404827

Registered On:
27/08/2023 07:47 PM
Collected On:
27/08/2023 7:47 PM
Reported On:
27/08/2023 09:03 PM

Investigation

Thyroid panel-1
(Serum,ECLIA)

T3 (Total)

Observed Value

Unit

Biological Reference Interval

102

ng/dL

84.6-201.8
Second Trimester : 128.9 - 262.3
First Trimester : 104.8 - 229.8
Third trimesters : 135.4 - 261.7

T4 (Total)

7.52

µg/dL

5.1-14.1
First Trimester : 7.33 - 14.8
Second Trimester : 7.93 - 16.1
Third Trimester : 6.95 - 15.7

TSH(Ultrasensitive)

1.07

µIU/mL

0.54-5.3
First Trimester : 0.33-4.59
Second Trimester : 0.35-4.10
Third trimester : 0.21-3.15

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	•Chronic Autoimmune Thyroiditis •Post thyroidectomy,Post radiiodine •Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	•Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness •Subclinical Hyperthyroidism •Thyroxine ingestion"
Decreased	Decreased	Decreased	•Central Hypothyroidism •Non-Thyroidal illness •Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	•Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness



Dr. Geeta Chopra .
MD (Pathology)
(D.M.C. Reg. No. - 5204)

Page 2 of 3



RUCHI SHARMA

PID NO: P542300422447

Age: 30.0 Year(s) Sex: Female



Reference: Dr. SCLF

Sample Collected At:
S J MEMORIAL HOSPITAL
PLOT NO 2, SEC 63, OPP SHANI
MANDIR, CHIJARASI, SEC 63, NOIDA
201301

Sample Processed At: Metropolis
Healthcare Ltd E-21, B1 Mohan Co-op
Ind Estate New Delhi-110044

Medical Laboratory Report

VIP: 280854000404827

Registered On:
27/08/2023 07:47 PM
Collected On:
27/08/2023 7:47PM
Reported On:
27/08/2023 09:03 PM

- References:
1. Interpretation of thyroid function tests. Dayan et al. THE LANCET • Vol 357 • February 24, 2001
 2. Laboratory Evaluation of Thyroid Function, Indian Thyroid Guidelines, JAPI, January 2011, vol. 59

-- End of Report --



Tests marked with NABL symbol are accredited by NABL vide Certificate no MC-2676; Validity till 04-04-2024

Dr. Geeta Chopra

Page 3 of 3

Dr. Geeta Chopra .
M.D (Pathology)
(DMC Reg. No. - 5204)



Case ID	103230067336
Patient Name	RUCHI SHARMA
Age/Sex	30 Year /Female
Hospital Location	Noida, Uttar Pradesh, India
Hospital Name	SJM Hospital and IVF Centre
Physician Name	Dr. Pushpa Kaul
Date & Time of Accessioning	28/08/2023 17:46 Hrs
Date & Time of Reporting	30/08/2023 22:02 Hrs



TEST NAME

Pap Smear-LBC

SPECIMEN INFORMATION

Cervicovaginal smear, liquid based cytology (As per 2014 BETHESDA SYSTEM) Collected on 28/08/2023 at 12:00 Hrs

CLINICAL HISTORY

Not Provided

METHODOLOGY

Cytology

CYTOLOGY REPORT



Satisfactory for Evaluation
Transformation zone: Present
Squamous cellularity: Adequate
Inflammatory change: Severe
Negative for intraepithelial lesion or malignancy (NILM)

COMMENT

1. If the symptomatology persists, a repeat pap test is advised after a course of antibiotic therapy.
2. The reporting was done as per Bethesda System of Reporting of Cervical Cytology, 2014.

Disclaimer:-PAP test is a screening test for cervical cancer with inherent false negative results.



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COLLEGE of AMERICAN PATHOLOGISTS
AU-ID-2010258

Samrati

Dr. Samrati Arora, MD
Reg. No. 40685



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Question?

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Toll Free Helpline +91 8882899999

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1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient named or identified in the bill/test request form.
2. The test results relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory.
3. The reported results are for information and are subject to confirmation and interpretation by the referring doctor.
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J.S. Tower, Plot No. K-702, Sector-K, Ashiyana,
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CORE Diagnostics Satellite Lab

Guwahati Ground Floor, Honuram Boro Path, Shubham Velocity, BS Road, Dispur, Kamrup Metropolitan
Guwahati, Assam - 781005

The test was processed in Lab 102.



भारत सरकार
Government of India

रुचि शर्मा
Ruchi Sharma
जन्म तिथि/DOB: 11/03/1993
महिला/ FEMALE

5539 3090 4746

मेरा आधार, मेरी पहचान

7575820319

w - 55kg
H - 154cm
B.P - 109/74
Pulse - 81
SpO2 - 99

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Address: D/O: Suresh Sharma, A-124, Anand Vihar, Railway Colony, Jagatpura, Near Water tank, Jaipur, Jaipur, Rajasthan - 302017

पता: D/O: सुरेश शर्मा, ए-124, आनंद विहार, रेलवे कालोनी, जगतपुरा, पानी की टंकी के पास, जयपुर, जयपुर, राजस्थान - 302017

5539 3090 4746

Medinheel

Fueh
27/8/23



PATIENT ID	: 23790 OPD	X-Ray Report	PATIENT NAME	: MRS RUCHI SHARMA
AGE	: 30Y		SEX	: Female
ACCN	:		MODALITY	: DX
REF. PHY.	:		STUDY	: Chest
STUDY DATE	: 27-Aug-2023		VOUCHER NO	#{voucherNo}

RADIOLOGY REPORT

EXAM: X RAY CHEST

CLINICAL HISTORY:

COMPARISON:

None

TECHNIQUE:

Frontal projections of the chest were obtained

FINDINGS

Both lung fields are clear.
Both costophrenic angles appear normal.
The tracheal lucency is centrally placed.
The mediastinal and diaphragmatic outlines appear normal.
The heart shadow is normal.
The bony thoracic cage and soft tissues are normal.

IMPRESSION

1. The study is within normal limits.

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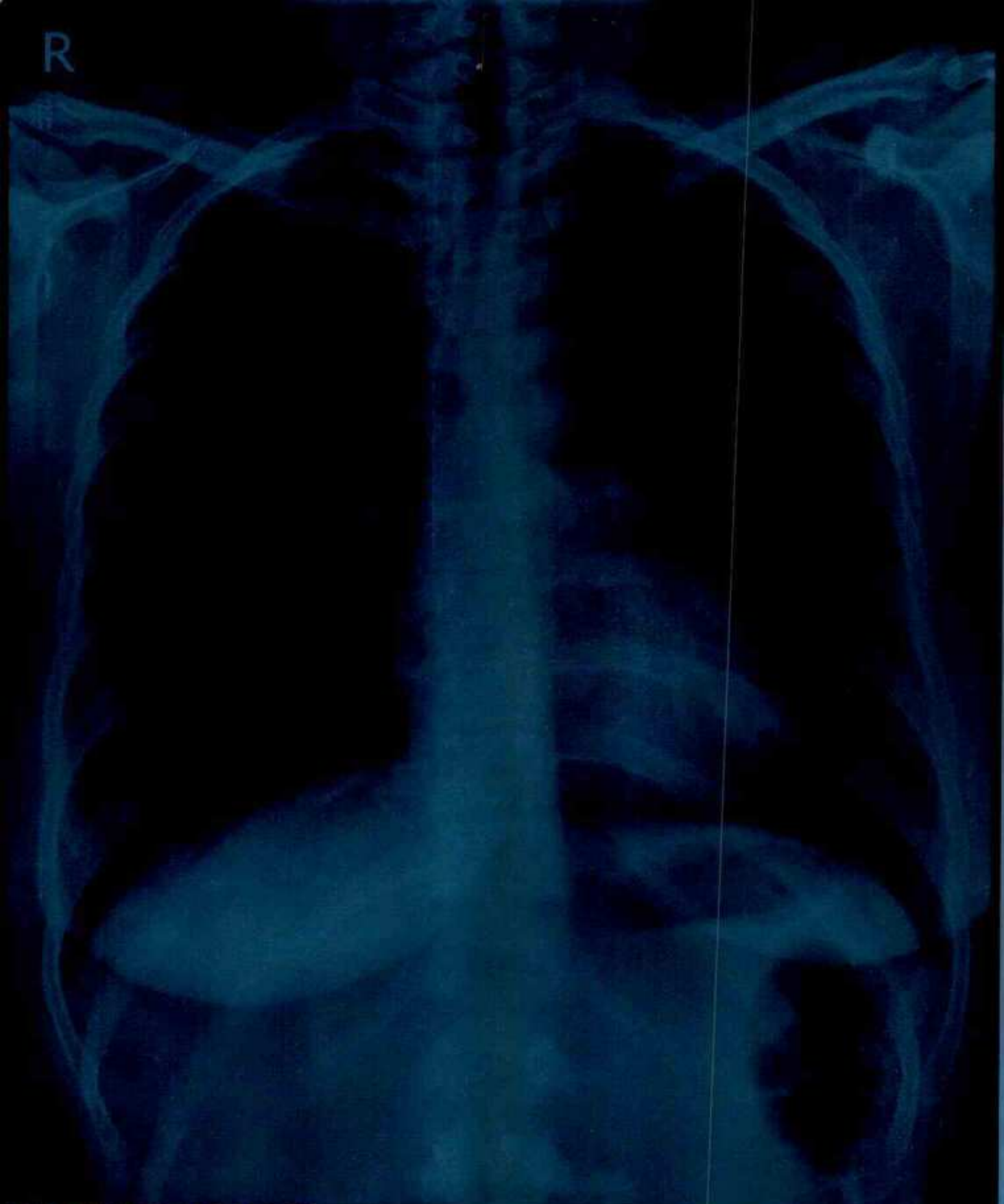


Dr. AMIT KHARAT
MBBS, DNB, DNB, MNAMS, FPD, FICR
Consultant Radiologist
Reg. No. 00056

Dr. Amit Kharat
27th Aug 2023



R



MRS RUCHI SHARMA 30 Female

Chest PA

23790 OPD

27/08/2023 9:12:14 AM

S. J. MEMORIAL SUPER SPECIALITY HOSPITAL SEC 63, CHHJARSI, NOIDA

Ultrasound Report

NAME: Mrs. Ruchi Sharma

AGE: 30yrs

DATE: 27/08/2023.

Real time USG of abdomen and pelvis reveals –

LIVER--Liver appears normal in size and shape, contour and echopattern. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER- Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

PANCREAS-Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN-Spleen show normal size, shape and homogeneous echopattern. No focal mass lesion is seen in parenchyma.

KIDNEY -Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculus on right side. **Left kidney shows renal concretions.**

RETROPERITONIUM- -There is no evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

URINARY BLADDER- Adequately distended. Walls were regular and thin. Contents are normal. No stone formation seen.

UTERUS-Uterus and both ovaries are normal in size, shape and echopattern. No focal lesion is seen. Endometrium normal. There is no evidence of free fluid seen in the pelvis. There is no evidence of adnexal mass is seen.

IMPRESSION: Left Renal concretions.

DR. PUSHPA KAUL



For SJM Super Specialty Hospital
DR. Rakesh Gujjar

