



ITD/CSE INFOSYSTEMS PVT. LTD.

Diagnostics S. No. : LSHHI307872	MR No. : MR/23/002525
Patient Name : Mrs. ANUPAMA SAINI	Doctor : Dr. RMO
Age/Sex : 31 YRS Sex : Female	Date & Time : 08-Apr-2023 08:46 AM
OPD/IPD : OPD	Sample Collection : 08-Apr-2023 08:51 AM
IPDNo :	Reporting Date/Time : 08-Apr-2023 11:31 AM
	ReferDoctor :

**BIO-CHEMISTRY**

Test Name	Status	Result	Biological Reference Interval	Unit
<b><u>BLOOD GLUCOSE FASTING</u></b>				
BLOOD SUGAR FASTING		84	70-110	mg/dl

**HAEMATOLOGY**

**BLOOD GROUP And RH TYPE**

BLOOD GROUP ABO & Rh		"B" POSITIVE	-	
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**CBC(COMPLETE BLOOD COUNT)**

HAEMOGLOBIN		11.4	11.0-15.0	gm/dl
TLC (Total Leucocyte Count)		6900	4000-11000	/cumm
NEUTROPHILS		61	45-75	%
LYMPHOCYTES		27	20-45	%
EOSINOPHILS		03	0-6	%
MONOCYTES		09	02-10	%
BASOPHILS		00	0-2	%
RBC		4.96	3.8-5.5	Millions/cmm
PCV/HAEMATOCRIT		39.7	35-45	%
MCV		80	76-96	fl
MCH	L	23	27-31	Picogram
MCHC	L	28.7	30-35	gm/dl
RDW	H	15.5	11.5-14.5	%
PLATELETS		3.34	1.5-4.5	

*Handwritten signature*

(This is only professional opinion and not the diagnosis, Please correlate clinically)

CHD City, Sector-45, G.T. Road, Karnal, Haryana - 132116 Ph.: 0184-7110000, 9643000000, 8222008811,22

PARK GROUP OF HOSPITALS : West Delhi • South Delhi • Gurgaon • Karnal • Panipat • Hodal • Ambala • Behror

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**BIO-CHEMISTRY**

**CREATININE SERUM**

CREATININE 0.8 0.6-1.4 mg/dl

**HAEMATOLOGY**

**ESR**

ESR 20 0-20 mm/1sthr

**BIO-CHEMISTRY**

**LFT(LIVER FUNCTION TEST)**

BILIRUBIN (TOTAL)	0.43	0.1-1.2	mg/dl
BILIRUBIN DIRECT	0.21	0.0-0.3	mg/dl <sup>v</sup>
BILIRUBIN INDIRECT	0.22	0.1-0.9	mg/dl
SGOT (AST)	27	0-40.0	IU/L
SGPT (ALT)	18	0-40	IU/L
ALK.PHOSPHATASE	53	48.0-119	IU/L
TOTAL PROTEIN	7.9	6.0-8.0	gm/dl
ALBUMIN	4.6	3.20-5.0	gm/dl
GLOBULIN	3.3	2.30-3.80	gm/dl
A/G Ratio	1.3	1.0-1.60	

**LIPID PROFILE**

TOTAL CHOLESTEROL	193	0-250	mg/dL
TRIGLYCERIDE	88	0-161	mg/dL
HDL-CHOLESTEROL	50	30.0-60.0	mg/dL
LDL CHOLESTEROL	125.4	0-130	mg/dL
VLDL	17.6	0-40	mg/dL

*Jhalke Ray*

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LDL / HDL RATIO	2.50	0.0-35.0	
<b>UREA</b>			
BLOOD UREA	23	10.0-45.0	mg/dl
<b>URIC ACID, SERUM</b>			
URIC ACID	2.8	2.5-6.2	mg/dl

**CLINICAL PATHOLOGY**

**URINE ROUTINE EXAMINATION**

VOLUME	30	-	ml
COLOUR	P.YELLOW	-	
APPEARANCE	CLEAR	-	
URINE pH	6.0	5.5-8.5	
SPECIFIC GRAVITY	1.010	-	
KETONE	NEG	-	
URINE PROTEIN	NEG	-	
URINE SUGAR	NEG	-	
PUS CELLS	2-3	1-2	/HPF
RBC CELLS	NIL	-	
EPITHELIAL CELLS	2-3	2-3	/HPF
CRYSTALS	NIL	-	
CASTS	NIL	-	

LAB  
TECHNICIAN

Dr. VISHAL SALHOTRA  
MD (PATHOLOGY)

*Nidhi Kaushik*  
Dr. NISHITHA KHERA  
MBBS, MD (PATHOLOGY)

Dr. PARDIP KUMAR  
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Dr. NIDHI KAUSHIK  
MBBS, MD, DNB  
(PATHOLOGY)

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Age/Sex	: 31 YRS Sex : Female	Reporting Date/Time	: 08-Apr-2023 10:15 AM
Visit Date & Time	: 08-Apr-2023 08:46 AM	IPD No	:
OPD/IPD	: OPD		

**XRAY CHEST PA**

**FINDING:-**

- Bilateral lung fields are normal
- The trachea is central.
- Both the costophrenic and cardiophrenic angles are sharp.
- Both domes of diaphragm are normal in position and contour.
- Both the hila are normal
- Cardiac shadow is normal.
- Bones and soft tissues are normal

**Impression: Normal study.**

*Dr. Deepa*

**DR. DEEPA NSHU SHARMA**  
**MD (Radiodiagnosis)**  
**Reg. No.- HN22292**  
**Park Hospital Karnal**

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Patient Name	: <b>Mrs. ANUPAMA SAINI</b>	Doctor	: Dr. RMO
Age/Sex	: 31 YRS      Sex : Female	Reporting Date/Time	: 08-Apr-2023 10:36 AM
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### ULTRASOUND

Liver is borderline enlarged (13.4cm) and shows normal echo pattern.. There is no focal hepatic lesion present. Portal vein and CBD are normal in course and caliber.

Gallbladder is distended and shows normal intraluminal echotexture. There is normal wall thickness.

Pancreas is normal in size, contour & echo pattern The pancreatic duct is not dilated. Pancreatic contour is regular & peri pancreatic planes are maintained.

Spleen is normal in size & echo pattern.

Both kidneys are normal in shape size contour & echo pattern. There is no hydronephrosis defined on either side. Both ureters are obscured by bowel gas.

Bladder is distended and shows normal intraluminal echotexture and wall thickness.

Uterus and bilateral adnexa are normal in morphology and echotexture.

There is no free fluid present in the abdomen

**Impression:**

No significant abnormality.

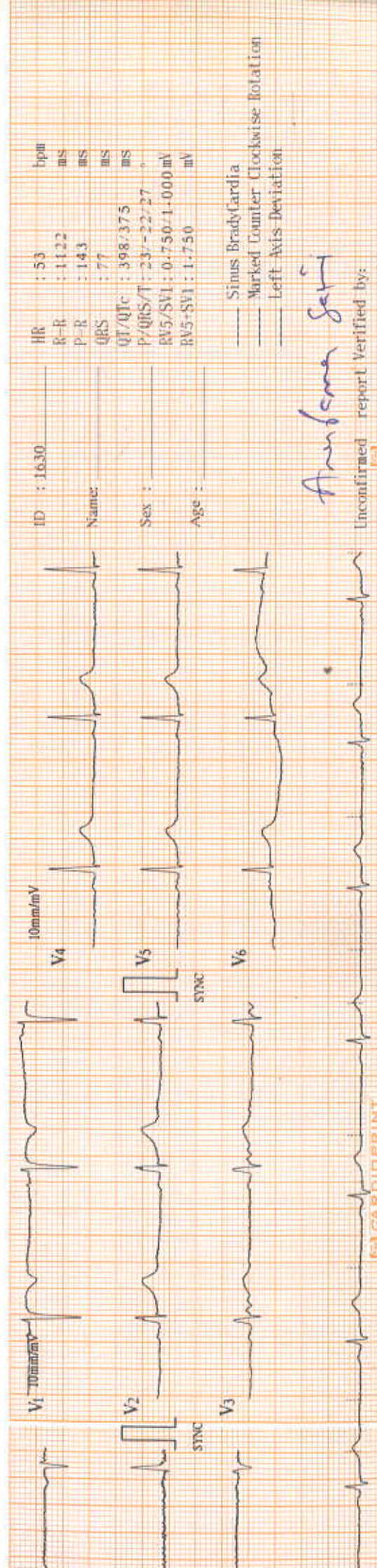


**Dr. Deepanshu Sharma**  
MD RADIODIAGNOSIS  
Reg. No. HMC 22292  
Park Hospital

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Park Group of Hospitals : West Delhi • South Delhi • Gurgaon • Faridabad • Hodal • Panipat

the health care providers the health care providers



HR : 53 bpm  
 R-R : 1122 ms  
 P-R : 143 ms  
 QRS : 77 ms  
 QT/QTc : 398/375 ms  
 P/QRS/T : 23/-22/27 °  
 RV5/SVL : 0.750/1.000 mV  
 RV5-SVL : 1.750 mV

ID : 1630  
 Name :  
 Sex :  
 Age :

- Sinus BradyCardia
- Marked Counter Clockwise Rotation
- Left Axis Deviation

*Anurama Jothi*

Unconfirmed report verified by: [Signature]



# Prognosis Laboratories

National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-110075

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<b>Lab No.</b>	012304090070	<b>Age/Gender</b>	31 YRS/FEMALE	<b>Coll. On</b>	09/Apr/2023 07:36AM
<b>Name</b>	Ms. ANUPAMA SAINI			<b>Reg. On</b>	09/Apr/2023
<b>Ref. Dr.</b>				<b>Approved On</b>	09/Apr/2023 10:38AM
<b>Rpt. Centre</b>	Self			<b>Printed On</b>	09/Apr/2023 01:55PM

Test Name	Value	Unit	Biological Reference Interval
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<b>HbA1c (Glycosylated haemoglobin), EDTA whole blood</b>	5.2	%	4.0 - 6.0
<i>Method : HPLC</i>			
<b>Estimated average plasma Glucose</b>	102.54	mg/dL	65 - 136
<i>Method : Calculated</i>			

The test is approved by NGSP for patient sample testing.

**Interpretation:**

Metabolically normal patients	%	4.0 - 6.0
Good control:	%	< 7.0
Fair control:	%	7.0 - 8.0
Poor control:	%	> 8.0

Glycosylated hemoglobin or HbA1C is a reliable indicator of mean plasma glucose levels for a period of 8-12 weeks preceding the date on which the test is performed and is a more reliable indicator of overall blood sugar control in known diabetic patients than blood sugar levels. A value of 4-6 % is usually seen in metabolically normal patients, however diabetics with very good control can also yield similar values. The HbA1c test, thus can not be used to differentiate between diabetic patients with very good control over the plasma glucose levels from metabolically normal, non-diabetic subjects as both groups may reveal very similar values in the assay.



Dr. Smita Sadwani  
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Dr. Moushmi Mukherjee  
MBBS,MD (Pathology)  
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Test Name	Value	Unit	Biological Reference Interval
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**TSH (Thyroid Stimulating Hormone), serum** **6.08** uIU/ml 0.27 - 4.2  
 Method : ECLA

**Interpretation:**  
 1. Primary hyperthyroidism is accompanied by elevated serum FT3 and FT4 values alongwith depressed TSH levels.  
 2. Primary hypothyroidism is accompanied by depressed serum FT3 and FT4 values and elevated serum TSH levels.  
 3. High FT3 levels accompanied by normal FT4 levels and depressed TSH levels may be seen in T3 toxicosis.  
 4. Central hypothyroidism occurs due to pituitary or thalamic malfunction (secondary and tertiary hypothyroidism respectively). This relatively rare but important condition is indicated by presence of low serum FT3 and FT4 levels, in conjunction with TSH levels that are paradoxically either low/normal or are not elevated to levels that are expected.

The following ranges are recommended for pregnant females:

Trimester	Unit	Range
First trimester	uIU/ml	0.1 - 2.5
Second trimester	uIU/ml	0.2 - 3.0
Third trimester	uIU/ml	0.3 - 3.0

**\*Disclaimer: This is an electronically validated report, if any discrepancy found should be confirmed by user.**  
 This test was performed at Prognosis Laboratories, 515-516, Sector 19, Dwarka, New Delhi-110075.  
 \*\*\* End Of Report \*\*\*



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 MD(Biochemistry)  
 Technical Director

Dr. Anita  
 MD Pathology  
 Sr. Consultant Pathologist

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