



DEPARTMENT OF BIOCHEMISTRY

Patient Name

: Mrs. MEENU

MR No

: 32422

Age/Sex

29 Years / Female

Type

OPD

TPA/Corporate

: MEDIWHEEL

IP No.

Current Bed no. :

Bill Date

26/08/2023

Reporting Date:

26/08/2023

Sample ID

163670

Bill/Req. No.

23310423

Ref Doctor

Dr. Garima Tripathi

Test

Result

Bio. Ref. Interval

Units

BLOOD GLUCOSE FASTING AND PP

PLASMA GLUCOSE(FASTING)

80

70 - 110

mg/dl

BLOOD GROUP

BLOOD GROUP

CDC

" A " RH POSITIVE

COMPLETE HAEMOGRAM

CBC				
HAEMOGLOBIN	11.4	L	12.0 - 16.5	g/dL
TOTAL LEUCOCYTE COUNT	8200		4000 - 11000	/cumm
RED BLOOD CELL COUNT	3.99	L	4.0 - 6.0	millions/cumm
PCV (HAEMATOCRIT)	35.7		35.0 - 47.0	%
MEAN CORPUSCULAR VOLUME	89.5		78 - 98	fL
MEAN CORPUSCULAR HAEMOGLOBIN	28.6		26.5 - 32.5	Picogrames
MEAN CORPUSCULAR HB CONC	32.9		32 - 37	g/dL
PLATELET COUNT	3.03		1.50 - 4.50	Lakh/cumm
NEUTROPHILS	57		40 - 73.0	%
LYMPHOCYTES	34		20 - 40	%
EOSINOPHILS	02		0.0 - 6.0	%
MONOCYTES	07		2.0 - 10.0	%
BASOPHILS ,	00		0.0 - 1.0	%
ABSOLUTE NEUTROPHIL	4674		2000 - 7000	cells/cumm
ABSOLUTE LYMPHOCYTE	2788		1000 - 3000	cells/cumm
ABSOLUTE EOSINOPHIL	164		20 - 500	cells/cumm
ABSOLUTE MONOCYTES	574		200 - 1000	cells/cumm
ABSOLUTE BASOPHILS	0	L	20 - 100	cells/cumm
RDW-CV	13.7		11.5 - 14.5	%
The state of the s				

Dr. Pradip Kumar (Consultant Microbiologist) Dr. Nisha Rana (Consultant Pathologist)

Page 1 of 4

Sonipat, Haryana- 131001, Ph.: 0130 -2400000, Mob.: +91 7533033001, 7531919191, 8944000000 (This is only professional opinion and not the diagnosis, Please correlate clinically)





DEPARTMENT OF HAEMATOLOGY

Patient Name

: Mrs. MEENU

MR No

32422

Age/Sex

29 Years / Female

Type

OPD

TPA/Corporate

MEDIWHEEL

IP No.

Current Bed no.

Bill/Req. No.

Sample ID

Bill Date

26/08/2023 26/08/2023

163670

Reporting Date:

23310423

Ref Doctor

Dr. Garima Tripathi

	Test			
-				

Result

Bio. Ref. Interval

Units

E.S.R.

50

H

0 - 15

mm/hr

HBA1C

HBA1C

%

Note: HBA1c result is suggestive of Diabetes/ higher than glycemic goal in a known Diabetic patient. Please note, glycemic goal should be individualized based on duration of diabetes, age/life expectancy, comorbid connditions, known CVD or advanced microvascular complications, hypoglycaemia unawareness, and individual patient considerstions.

Please Correlate Clinically.

KFT(KIDNEY FUNCTION TEST)/RFT/Renal Profile

SERUM UREA	22	13.0 - 45.0	mg/dL
SERUM CREATININE	0.9	0.5 - 1.2	mg/dL
SERUM URIC ACID	3.3	2.5 - 6.8	mg/dL
SERUM SODIUM	137	130 - 149	mmol/L
SERUM POTASSIUM	4.4	3.5 - 5.5	mmol/L

LFT(LIVER FUNCTION TEST)

LFT			
TOTAL BILIRUBIN	0.5	0.1 - 1.2	mg/dL
DIRECT BILIRUBIN	0.2	0.00 - 0.30	mg/dL
INDIRECT BILIRUBIN	0.3	Adult: 0 - 0.8	mg/dL
SGOT (AST)	27	0.0 - 45	IU/L
SGPT (ALT)	25	00 - 45.00	IU/L
ALP	92	41 - 137	U/L
TOTAL PROTEINS	7.1	6.0 - 8.2	g/dL
ALBUMIN	4.2	3.20 - 5.00	g/dL

Checked By:

Dr. Pradip Kumar (Consultant Microbiologist) Dr. Nisha Rana (Consultant Pathologist)

Page 2 of 4

Sonipat, Haryana- 131001, Ph.: 0130 -2400000, Mob.: +91 7533033001, 7531919191, 8944000000 (This is only professional opinion and not the diagnosis, Please correlate clinically)





DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. MEENU

MR No 32422

Age/Sex

29 Years / Female

Type

OPD

TPA/Corporate

MEDIWHEEL

IP No.

Current Bed no.

Bill Date

26/08/2023

Reporting Date:

26/08/2023

Sample ID

163670

Bill/Req. No.

23310423

Ref Doctor

Dr. Garima Tripathi

ml

Test	Result	Bio. Ref. Interval	Units
GLOBULIN	2.9	2.0 - 3.50	g/dL
A/G RATIO	1.45		

LIPID PROFILE

LIPID PROFILE	g Away	EAST THE TREE	
SERUM CHOLESTROL	114	0 - 200	mg/dl
SERUM TRIGLYCERIDES	85	Up to 150	mg/dl
HDL CHOLESTEROL	55	30 - 60	mg/dl
VLDL CHOLESTEROL	17	*Less than 30	mg/dL
LDL CHOLESTEROL	42	Optimal <100,Above Opt. 129 -high 160-189	. 100- mg/dl
LDL CHOLESTEROL/HDL RATIO	0.76	Desirable Level: 0.5 - 3.0	
		Borderline Risk : 3.0 - 6.0 Risk : > 6.0) High
		135K . = 0.0	

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

VOLUME 20 COLOUR Pale Yellow Pale Yellow **APPEARANCE** Clear Clear SPECIFIC GRAVITY 1.020

CHEMICAL EXAMINATION

REACTION Acidic BLOOD NIL **ALBUMIN** NIL NIL **GLUCOSE** NIL 6.5

MICROSCOPIC EXAMINATION

PUS CELL 5-6 /HPF **RED BLOOD CELLS** Nil /HPF

Checked By:

Dr. Pradip Kumar (Consultant Microbiologist) Dr. Nisha Rana (Consultant Pathologist)

Page 3 of 4

Sonipat, Haryana- 131001, Ph.: 0130 -2400000, Mob.: +91 7533033001, 7531919191, 8944000000 (This is only professional opinion and not the diagnosis, Please correlate clinically)





DEPARTMENT CEINICAL PATHOLOGY

Patient Name

: Mrs. MEENU

MR No

32422

Age/Sex

29 Years / Female

Type

OPD

TPA/Corporate

IP No.

Current Bed no. :

MEDIWHEEL

Sample ID

26/08/2023

Reporting Date:

26/08/2023 163670

Bill/Req. No.

23310423

Ref Doctor

Bill Date

Dr. Garima Tripathi

Test	Result	Bio. Ref. Interval	Units
EPITHELIAL CELLS	6-8	2-4	/HPF
CASTS	NIL	NIL	
CRYSTALS	NIL	NIL	

Note: Albumin test positive by Multistrip Method is confirmed by Sulphosalycylic acid method.

Checked By:

Dr. Pradip Kumar (Consultant Microbiologist) Dr. Nisha Rana (Consultant Pathologist)

Page 4 of 4



anosis Laboratories

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

012308260824

Age/Gender 29 YRS/FEMALE

Coll. On

26/Aug/2023 06:38PM

Ms. MEENU 32422 Name

Reg. On

26/Aug/2023

Ref. Dr.

NIDAAN PARK HOSPITAL

Approved On 26/Aug/2023 09:08PM

Rpt. Centre

Dr. OTHER

Printed On

07/Sep/2023 05:27PM

Test Name	Value	Unit	Biological Reference Interval	
Thyroid profile, Total (T3,T4,TSH)				
T3 (Triiodothyronine) , serum Method : ECLIA	1.82	ng/mL	0.80 - 2.0	
T4 (Thyroxine) , serum Method : ECLIA	7.48	ug/dL	5.1 - 14.1	
TSH (Thyroid Stimulating Hormone) , serum Method : ECLIA	13.6	uIU/ml	0.27 - 4.2	

Interpretation:

- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values alongwith depressed TSH levels
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- High T3 levels coupled with normal T4 and suppressed TSH may be seen in T3 toxicosis.

Note: Total T3 and total T4 are highly bound to plasma proteins and are amenable to fluctuations with plasma protein content as well as due to binding defects in the thyroid hormone binding proteins.

The following ranges are recommended for pregnant females:

Gestation period	TSH (uIU/ml)	
First trimester	0.1 - 2.5	
Second trimester	0.2 - 3.0	
Third trimester	03-30	

*Disclaimer: This is an electronically validated report, if any discrepancy found should be confirmed by user.

*** End Of Report ***



Dr. Smita Sadwani MD(Biochemistry) **Technical Director**

Dr. Mayank Gupta MD, DNB Pthology Consultant Pathologist Dr. Deepak Sadwani MD(Pathology) Lab Director

> MURTHA ROAD

Dr. Moushmi Mukherjee MBBS,MD (Pathology) Consultant Pathologist

Scan this QR Code to view report

Page 1 of 1



Patient Id

32422

Name

MEENU 29 YRS

Accession No

Study Date

26-Aug-2023

Age

Gender

13111,154

CHEST X RAY (PA VIEW)

OBSERVATION:

Multiple calcified nodules seen in left upper, bilateral mid and lower zones.

Rest of the both lung fields appear clear.

Both costo-phrenic angles appear clear.

Cardiothoracic ratio is normal.

Both domes of diaphragm appear normal.

Thoracic soft tissue and skeletal system appear unremarkable.

ADVICE: Please Correlate Clinically.

This Report is not valid for any medico legal purpose. This report is prepared on the basis of digital DICOM images transmitted via internet without identification of patient, not on the films or plates provided to the patient.

Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines power face their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassess about a second enterpretation in online reporting is not established, such no way can this report he intrized to purpose

DR PRASHANT MUDGAL MBBS, MD, DMRE

CONSULTANT RADIOLOGIST

REG NO. MP8713





DEPARTMENT OF RADIOLOGY

Patient Name

Mrs. MEENU

Reg No

32422

Age/Sex

29 Years 7 Months 26Days / Female

Self

Ref. Doctor OPD

Type

Billed Date

: 26/08/2023

9.26 AM

Reported Date

: 26/08/2023

Req. No.

: 23310423

Consultant Doctor

: Dr. Garima Tripathi

USG WHOLE ABDOMEN/KUB

FINDINGS:-

LIVER is normal in size (15.0 cm) and echotexture. No evidence of any focal lesion or IHBR dilation is present. Portal vein and CBD are normal in caliber at porta.

GALL BLADDER is partially distended.

SPLEEN is normal in size (10.7 cm) and echotexture. No focal lesion is seen.

PANCREAS is normal in size and echotexture. Peripancreatic fat planes are clear. MPD is not dilated.

RIGHT KIDNEY is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

LEFT KIDNEY is normal in size and position and outline. Corticomedullary differentiation is maintained. There is no evidence of any focal lesion / calculus / backpressure changes.

URINARY BLADDER is minimally distended.

UTERUS & OVARIES could not be assessed due to poor acoustic window.

No free fluid seen in the abdomen.

To be correlate clinically



Sonipat, Haryana- 131001, Ph.: 0130 -2400000, Mob.: +91 7533033001, 7531919191, 8944000000 (This is only professional opinion and not the diagnosis, Please correlate clinically