



# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

**Address**

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :-40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	[F.C.No116895]	Serial Number :-093

<u>TEST</u>	<u>CBC (Complete Blood Count)</u>		<u>Reference Values</u>
	<u>RESULT</u>	<u>UNIT</u>	
Hb (Haemoglobin)	11.8	gm/dl	12 - 17
Total Leukocyte Count	6,900	/Cumm.	4000 - 11000
RBC Count	3.93	Million/Cumm.	3.8 - 5.8
PCV / Haematocrit	37.6	%	30 - 50
Platelet Count	1.62	Lakhs/c.mm	1.5 - 4.5
MCV	92.2	fl	80 - 100
MCH	28.2	pg	26 - 34
MCHC	30.8	gm/dl	31.5 - 35
<b>Differential Leukocyte Count</b>			
Neutrophil	50	%	40 - 70
Lymphocyte	38	%	20 - 40
Monocyte	02	%	02 - 10
Eosinophi	10	%	01 - 06
Basophil	00	%	< 1 - 2%
ESR	24	mm/1 <sup>st</sup> hr.	00 - 20

\*\*\*end of report\*\*\*

*Signature*





# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

### Address

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 093

### KFT (KIDNEY Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>		
S. Urea	26.0	mg/dl	13	-	45
S. Creatinine	0.84	mg/dl	Male 0.7	-	1.4
			Female 0.6	-	1.2
S. BUN	12.14	mg/dl	6.0	-	21
S. Sodium (Na <sup>+</sup> )	142.3	mmol/ltr	135	-	150
S. Potassium(K <sup>+</sup> )	4.14	mmol/ltr	3.5	-	5.5
S. Chloride(Cl <sup>-</sup> )	105.6	mmol/ltr	94	-	110
S. Calcium	9.08	mg/dl	8.7	-	11.0
S. Uric Acid	4.59	mg/dl	Male 3.5	-	7.2
			Female 2.5	-	6.2

### BLOOD GROUPING

Grouping (ABO)	:	"A" Group
Rh Typing	:	Positive.

\*\*\*end of report\*\*\*

*Signature*



# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

**Address**

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 093

### LFT (Liver Function Test) – serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Total Bilirubin	0.92	mg/dl	Adults: 0.1 - 1.2 Infants: 1.2 - 12
S. SGPT (ALT)	33.0	U/L	05 - 40
S. SGOT (AST)	28.0	U/L	05 - 40
S. Alkaline Phosphatase	91.4	U/L	Adult - 25 - 140 Children (1 – 12 yrs.) – 104 - 390
S. Total Protein	7.14	g/dl	6.0 - 8.3
S. Albumin	3.98	g/dl	3.2 - 5.0
S. Globulin	3.16	g/dl	2.8 - 4.5
S. A/G Ratio	1.25		

\*\*\*end of report\*\*\*

*Signature*





# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

### Address

Naya Toia, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :-40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No116895)	Serial Number :- 093

### Lipid Profile - serum

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
S. Cholesterol	192.0	mg/dl	130 - 200
S. Triglycerides	130.0	mg/dl	Fasting: 25 - 160
S. VLDL-Cholesterol	26.0	mg/dl	10 - 40
S. HDL-Cholesterol	49.0	mg/dl	Male: 30 - 65 Female: 35 - 80
S. LDL-Cholesterol	127.0	mg/dl	60 - 150
Ratio of Cholesterol/HDL	3.91		Low Risk: <3.0 Average Risk: 03 - 5.0 High Risk: >5.0
LDL/HDL Ratio	2.59		1.5 - 3.5

### BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>Reference Values</u>
P. Glucose Fasting	89.0	mg/dl	70 - 110
P. Glucose-Post Prandial (after 130hrs meal)	116.0	mg/dl	80 - 160

\*\*\*end of report\*\*\*





# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

### Address

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	(E.C.No115895)	Serial Number :- 093

### GLYCOSYLATED HEMOGLOBIN

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>
HbA1c	3.65	%

Mean Blood Glucose level (MBG) - 85.09 mg/dl

#### Normal Reference Values

Normal	:	< 8.0 %
Good Control	:	8.0 - 9.0 %
Fair Control	:	9.0 - 10.0 %
Poor Control	:	> 10.0 %

**Summary:-** Glycosylated hemoglobin (GHb) reflects the average blood glucose concentration over the preceding several weeks & a sudden fall from high to low glucose concentration will not produce a correspondingly rapid fall in glycosylated hemoglobin. Thus GHb reflects the metabolic control of glucose level over a period of time, unaffected by diet, insulin, other drugs or exercise on the day of testing. GHb is now widely recognized as an important test for the diagnosis of diabetes mellitus and is a good indicator of the efficacy of therapy.

\*\*\*end of report\*\*\*

*Signature*





# URMILA HEART & MULTI SPECIALITY HOSPITAL

## PATHOLOGY REPORT

### Address

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9861179794  
9471013402

Name:- Mrs. Kavita Kumari

Age :40Y/F

Date :-09/11/2024

Ref. By :- Dr. Bank Df Baroda

(E.C.No116895)

Serial Number :- 093

TEST NAME	METHOD	VALUE	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	118.0	ng/dL	(80 - 200)
TOTAL THYROXINE (T4)	C.L.I.A	6.10	µg/dL	(4.5 - 12.0)
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	2.06	µIU/mL	(0.3 - 5.5)

### Technology :

T3 - Competitive Chemi Luminescent Immuno Assay

T4 - Competitive Chemi Luminescent Immuno Assay

TSH - Ultra Sensitive Sandwich Competitive Chemi Luminescent Immuno Assay

### REMARK :

**THYROID HORMONES** -Serum TSH is primarily responsible for the synthesis and release of Thyroid hormones is an early and sensitive indicator of decreased in thyroid reserve is the diagnostic of primary hypothyroidism. The expected increase in TSH demonstrates the classical feedback mechanism between pituitary and thyroid gland. Adult orally TSH measurement is equally important in differentiating secondary and tertiary/hypothalamic hypothyroidism. The increase in total T4 and T3 is associated with pregnancy oral contraceptives and estrogen therapy results into masking of abnormal thyroid function only because of elevation of TBC concentration, which can be monitored by calculating Free Thyroxine Index (FTI) or Thyroid Hormone Binding Ratio (THBR).  
\*\*\*end of report\*\*\*



**URMILA HEART**  
**& MULTI SPECIALITY HOSPITAL**

**PATHOLOGY REPORT**

**Address**

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

Name:- Mrs. Kavita Kumari	Age :40Y/F	Date :-09/11/2024
Ref. By :- Dr. Bank Of Baroda	[E.C.No116895]	Serial Number :- 093

**Urine Routine And Microscopy**

**TEST**

**Physical Examination**

Volume

Colour

Specific Gravity

Appearance

pH

(Acidic)

**Chemical Examination**

Protein

Sugar

Bile Salts

Bile Pigments

**Microscopic Examination**

Pus Cells

Red Blood Cells

Epithelial Cells

Crystal/Cast

Other

\*\*\*end of report\*\*\*

**RESULTS**

20 ml

Light Yellow

1.015

Clear

5.0

Nil

Nil

N/D

N/D

1-2 /hpf

Nil /hpf

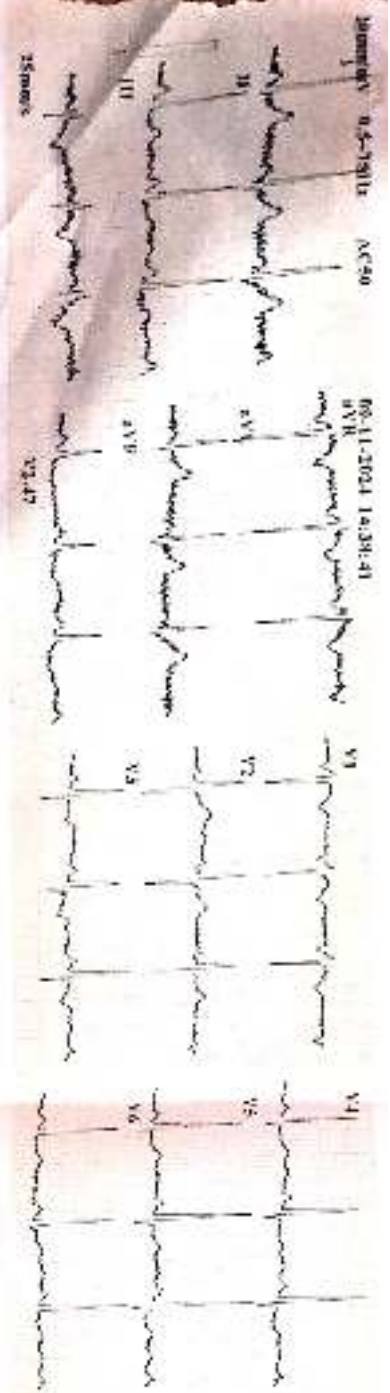
Present (+)

Nil

Nil

*Signature*





ID : 241109-1438  
 Name : J.D. ST  
 Age : 42 yr  
 Sex : Female  
 Height : cm  
 Weight : kg  
 TB : 79 bpm  
 ? Dic : 85 ms  
 PR Int : 156 ms  
 QRS Dur : 98 ms  
 QT/QTc Int : 376/389 ms  
 P/QRS/T axis : 49/38/90 °  
 RV5/VI amp : 4.09/2.6/3.84 mV  
 RV2/VI amp : 1.376  
 RV5/VI amp : 4.78/2.6/3.84 mV

Physician Code:  
 4-5-01(V4,Y3)  
 5-2-01(Y3)

*Kalida Devi*

Diagnostic Institution:  
 806, Sinau, Shirdham  
 sat: 51244 ST-1, Ambarnath, 21(V4,Y3)

Report Confirmed by:





**Address**

Naya Tola, Opp. Polytechnic  
Muzaffarpur  
Ph.: 0621-2222211  
0621-2268042  
Mob.: 9661179794  
9471013402

NAME :- Kavita.  
REFD.BY:- Dr./Self.

DATE :- 09/11/2024  
SEX:- F

Thanks for the kind referral.  
USG of Whole Abdomen

- Liver:** -Liver is enlarged in shape, size [142.9 mm] with shows fatty infiltration.
- GB:-** Movements of both domes of diaphragm appears normal  
Normal distention. Walls are not thickened (2.0 mm) . No evidence of calculus,sludge,or mass lesion seen.
- C.B.D:-** C.B.D. is normal in calibre.
- Pancreas:-** Pancreas normal in size shape and echotexture.
- Spleen:-** Normal in shape, size & contour . (bipolar length is 102.4mm ).
- Kidneys:-** Both kidneys are normal in shape, size, contour, cortical echo texture, and sinus echoes. No evidence of calculus, calcification,hydronephrotic changes or mass lesion seen.
- Urinary bladder:-** Urinary bladder wall is thickened. There is no calculus within.
- Uterus:-** Uterus measures 81.1 x 32.9 x 33.2 mm. A/V in position .  
Uterus is normal in size and minimal collection seen in endometrium cavity .
- Adnexa:-** Both ovary are normal in shape and size, no mass or cyst seen .
- P.O.D.:-** No collection seen.
- Free fluid :** No free fluid is noted in the peritoneal cavity.
- OTHERS :-** Few fecal gas seen .

**Impression :-** Hepatomegaly with fatty liver.  
Cystitis.  
Endometrium collection.







**URMILA HEART**  
**& MULTI SPECIALITY HOSPITAL**

**ECHOCARDIOGRAPHY REPORT**

**Address**

**Naya Tola, Opp. Polyte  
Muzaffarpur  
Ph.: 0621-222221  
0621-228804  
Mob.: 966117979  
947101340**

Name	: Mrs. Kavita Kumari	Age/Sex	: 40/F
Date	: 09/11/2024	ECHO No.	:
IPID No.	:	UHID No.	:
Ref. By	: BOB	Done By	: Dr. Anil Kr. Singh

**MITRAL VALVE**

Morphology **AML-Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming**  
**PML-Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.**

Subvalvular deformity Present/Absent. Score: \_\_\_\_\_

Doppler Normal/Abnormal E>A A>E

Mitral Stenosis Present/Absent RR Interval \_\_\_\_\_ msec

EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg MVA cm<sup>2</sup>

Mitral Regurgitation Absent/Trivial/Mild/Moderate/Severe.

**TRICUSPID VALVE**

Morphology **Normal/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.**

Doppler **Normal/Abnormal**

Tricuspid stenosis Present/Absent RR interval \_\_\_\_\_ msec.

EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg

Tricuspid regurgitation: Absent/Trivial/Mild/Moderate/Severe Fragmented signals

Velocity \_\_\_\_\_ msec. Pred. RVSP=RAP1 mmHg

**PULMONARY VALVE**

Morphology **Normal/Atresia/Thickening/Doming/Vegetation.**

Doppler **Normal/Abnormal.**

Pulmonary stenosis Present/Absent Level \_\_\_\_\_

PSG \_\_\_\_\_ mmHg Pulmonary annulus \_\_\_\_\_ mm

Pulmonary regurgitation Present/Absent

Early diastolic gradient \_\_\_\_\_ mmHg. End diastolic gradient \_\_\_\_\_ mmHg

**AORTIC VALVE**

Morphology **Normal/Thickening/Calcification/Restricted opening/Flutter/Vegetation**  
 No. of cusps 1/2/3/4

Doppler **Normal/Abnormal**

Aortic Stenosis Present/Absent Level \_\_\_\_\_

PSG mmHg Aortic annulus \_\_\_\_\_ mm

Aortic regurgitation: Absent/Trivial/Mild/Moderate/Severe.

<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal values</u>
Aorta 2.3	(2.0 – 3.7cm)	LAes 3.8	(1.9 – 4.0cm)
LV es 3.1	(2.2 – 4.0cm)	LV ed 4.6	(3.7 – 5.6cm)
IVS ed 1.0	(0.6 – 1.1cm)	PW (LV) 1.1	(0.6 – 1.1cm)
RVed	(0.7 – 2.6cm)	RV Anterior wall	(upto 5 mm)
LVVd (ml)		LVVs (ml)	
LVEF 60%	(54%-76%)	IVS motion	Normal/Flat/Paradoxical

**CHAMBERS:**

LV **Normal/Enlarged/Clear/Thrombus/Hypertrophy**  
**Contraction Normal/Reduced**

Regional wall motion abnormality **Absent/Present**

LA **Normal/Enlarged/Clear/Thrombus**

RA **Normal/Enlarged/Clear/Thrombus**

RV **Normal/Enlarged/Clear/Thrombus**

PERICARDIUM **Normal/Thickening/Calcification/Effusion**

**COMMENTS & SUMMARY**

**All chambers are Normal in size**  
**Normal LV Systolic & Diastolic Function**  
**No RWMA/LVEF=60%**  
**No MR /AR / PR /TR**  
**Normal Pericardium**

**Dr. Anil Kr. Singh**  
**Cardiologist**

