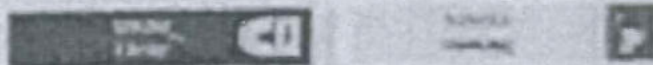




बैंक ऑफ बरोडा

Bank of Baroda



नाम
Name

Dharmendra Pratap Singh

कर्मचारी कोड नं.
Employee Code No.

179144

Employee Code No.

जारीकर्ता प्राधिकारी
Issuing Authority

Issuing Authority

धारक के हस्ताक्षर
Signature of Holder





To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	NISHA SINGH
DATE OF BIRTH	01-07-1977
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	22-07-2023
BOOKING REFERENCE NO.	23S179144100064504S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. SINGH DHARMENDRA PRATAP
EMPLOYEE EC NO.	179144
EMPLOYEE DESIGNATION	HEAD CASHIER "E" _II
EMPLOYEE PLACE OF WORK	MEHSANA,AGLOD FALU
EMPLOYEE BIRTHDATE	08-09-1979

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **19-07-2023** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



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H O S P I T A L



DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID: 00723199	Date: 22/7/23	Time:
Patient Name: Nishu Singh	Age / Sex: 43/F	Height: 150 cm
	Weight: 57.2 kg	
Chief Complaint: - Routine dental check up		
History: - Routine dental check up		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination:		
Extra oral:	Caries teeth 6/8	
Intra oral - Teeth Present:	- Root pieces 4/4	
Teeth Absent:	- Stain 1/1	
	- Calculus 1/1	
Diagnosis:		

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Other Advice:

- ① feeding
- ② Pilling per $\frac{1}{6}$ G/G
- ③ EX-1ⁿ per $\frac{1}{8}$

Follow-up:

Consultant's Sign:



Aashka Hospitals Ltd.

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H O S P I T A L



DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	00723199	Date:	22/7/2023	Time:	
Patient Name:	NISHA SINHA				
Age / Sex:	23/F				
Height:	150				
Weight:	51.2				
History:	c/o Rw ch ur.				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:	D.v. x 616 C.v. x 616 N.v. + 3.00 C.v. ur. num.				
Diagnosis:					

Aashka Hospitals Ltd.

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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



DR. PRERAK TRIVEDI
M.D., IDCCM
CRITICAL CARE MEDICINE
REG.NO.G-59493

UHID:	Date: 22/12/23.	Time: 5:00 PM
Patient Name: Nisha Singh.	Height:	
Age / Sex: 43yrs / F.	LMP:	Weight:
History:	History:	
C/C/O:	NO fresh complaints.	
Allergy History: NAD	Addiction: NAD	
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Vitals & Examination:		
Temperature: Normal.		
Pulse: 78/wm		
BP: 110/68 mmHg		
SPO2: 98% on RA.		
Provisional Diagnosis:		

Advice:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Insulin Scale	RBS-	hourly	Diet Advice:
< 150 -	300-350 -		Follow-up: Sign:
150-200 -	350-400 -		
200-250 -	400-450 -		
250-300 -	> 450 -		

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CIN: L85110GJ2012PLC072647

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H O S P I T A L



PATIENT NAME: NISHA SINGH

GENDER/AGE: Female / 43 Years

DOCTOR:

OPDNO: 00723199

DATE: 22/07/23

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 9.4 x 4.6 cms in size.

Left kidney measures about 9.7 x 4.3 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.


BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 96 cc.

UTERUS: Uterus is anteverted and appears mild bulky showing early Adenomyotic changes. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6.2 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

COMMENT: Mild bulky uterus with early Adenomyotic changes.

Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region and bladder.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.

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aashka
H O S P I T A L



PATIENT NAME: NISHA SINGH
GENDER/AGE: Female / 43 Years
DOCTOR:
OPDNO: O0723199

DATE: 22/07/23

BILATERAL MAMMOGRAM

Dedicated digital mammography with Craniocaudal and medio lateral oblique view was performed.

Fibrofatty and glandular parenchyma is noted on either side. No definite evidence of mass, abnormal microcalcification or architectural distortion is seen. No evidence of skin thickening or nipple retraction is seen.

COMMENT: Normal mammography of breast on either side (BIRADS - Category - I).

BIRADS Categories:

- 0 Need imaging evaluation.
- I Negative.
- II Benign finding.
- III Probably benign finding.
- IV Suspicious abnormality.
- V Highly suggestive of malignancy.
- VI Biopsy proven malignancy.

The false negative mammography is approximately 10%. Management of a palpable abnormality must be based upon clinical grounds.

Screening mammogram:

Women with no symptoms

AGE: 35-39: Baseline study.

AGE: 40-49: Every 1-2 years

AGE: 50 and above: Every year

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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H O S P I T A L



PATIENT NAME: NISHA SINGH

GENDER/AGE: Female / 43 Years

DOCTOR:

OPDNO: O0723199

DATE: 22/07/23

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI

CONSULTANT RADIOLOGIST

PATIENT NAME: NISHA SINGH

GENDER/AGE: Female / 43 Years

DOCTOR: DR. HASIT JOSHI

OPDNO: O0723199

DATE: 22/07/23

2D-ECHO

MITRAL VALVE	: MILD MVP
AORTIC VALVE	: NORMAL
TRICUSPID VALVE	: NORMAL
PULMONARY VALVE	: NORMAL
AORTA	: 32mm
LEFT ATRIUM	: 36mm
LV Dd / Ds	: 40/26mm
IVS / LVPW / D	: 10/9mm
IVS	: INTACT
IAS	: FLOPPY
RA	: NORMAL
RV	: NORMAL
PA	: NORMAL
PERICARDIUM	: NORMAL
VEL	: PEAK MEAN
M/S	: Gradient mm Hg Gradient mm Hg
MITRAL	: 1/0.5m/s
AORTIC	: 1.1m/s
PULMONARY	: 1.0m/s
COLOUR DOPPLER	: MILD MR (15-20%), NO AR, MILD TR
RVSP	: 32mmHg
CONCLUSION	: MILD MVP / MILD MR (15-20%); NORMAL LV SIZE / SYSTOLIC FUNCTION.



CARDIOLOGIST

DR. HASIT JOSHI (9825012235)

LABORATORY REPORT

Name : NISHA SINGH Sex/Age : Female/ 44 Years Case ID : 30702200676
 Ref.By : Dis. At : Pt. ID : 2857464
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Mobile No :
 Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
 Report Date and Time : Acc. Remarks : Normal Ref Id2 : 023242940

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	105.98	mg/dL	70 - 100
Glyco Hemoglobin			
HbA1C	5.94	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Haemogram (CBC)			
Haemoglobin (Colorimetric)	10.6	G%	12.00 - 15.00
PCV(Calc)	32.35	%	36.00 - 46.00
MCV (RBC histogram)	73.2	fL	83.00 - 101.00
MCH (Calc)	23.9	pg	27.00 - 32.00
RDW (RBC histogram)	16.50	%	11.00 - 16.00
Total WBC Count	3340	/μL	4000.00 - 10000.00
Eosinophil	8.0	%	1.00 - 6.00
Neutrophil	1770	/μL	2000.00 - 7000.00
Monocyte	134	/μL	200.00 - 1000.00
Lipid Profile			
Cholesterol	252.31	mg/dL	110 - 200
Chol/HDL	4.15		0 - 4.1
LDL Cholesterol	163.65	mg/dL	65 - 100

Abnormal Result(s) Summary End

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

Printed On : 22-Jul-2023 14:22



CONDITIONS OF REPORTING

The undersigned hereby certifies that the foregoing is a true and correct copy of the report of the ...

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LABORATORY REPORT

Name : NISHA SINGH Sex/Age : Female/ 44 Years Case ID : 30702200676
 Ref.By : Dis. At : Pt. ID : 2857464
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Whole Blood EDTA Mobile No :
 Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
 Report Date and Time : 22-Jul-2023 10:43 Acc. Remarks : Normal Ref Id2 : 023242940

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin (Colorimetric)	L	10.6	G%	12.00 - 15.00
RBC (Electrical Impedance)		4.42	millions/cumm	3.80 - 4.80
PCV(Calc)	L	32.35	%	36.00 - 46.00
MCV (RBC histogram)	L	73.2	fL	83.00 - 101.00
MCH (Calc)	L	23.9	pg	27.00 - 32.00
MCHC (Calc)		32.6	gm/dL	31.50 - 34.50
RDW (RBC histogram)	H	16.50	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	L	3340	/µL	4000.00 - 10000.00	
Neutrophil	L%	53.0	%	40.00 - 70.00	[Abs] L 1770 /µL 2000.00 - 7000.00
Lymphocyte		33.0	%	20.00 - 40.00	1102 /µL 1000.00 - 3000.00
Eosinophil	H	8.0	%	1.00 - 6.00	267 /µL 20.00 - 500.00
Monocytes		4.0	%	2.00 - 10.00	L 134 /µL 200.00 - 1000.00
Basophil		2.0	%	0.00 - 2.00	67 /µL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count		172000	/µL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)		1.61		0.78 - 3.53

SMEAR STUDY

RBC Morphology : Microcytic hypochromic RBCS.

WBC Morphology : Leucopenia

Platelet : Platelets are adequate in number.

Parasite : Malarial Parasite not seen on smear.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Amit Prajapati

DCP.

Dr. Shreya Shah

M.D. (Pathologist)

Dr. Manoj Shah

M.D. (Path. & Bact.)

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LABORATORY REPORT



Name : NISHA SINGH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 44 Years Case ID : 30702200676
Dis. At : Pt. ID : 2857464
Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Whole Blood EDTA Mobile No :
Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
Report Date and Time : 22-Jul-2023 11:05 Acc. Remarks : Normal Ref Id2 : 023242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

ESR 07 mm after 1hr 3 - 20
Westergren Method

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Amit Prajapati
DCP.

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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LABORATORY REPORT



Name : NISHA SINGH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 44 Years Case ID : 30702200676
Dis. At : Pt. ID : 2857464
Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Whole Blood EDTA Mobile No :
Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : O0723199
Report Date and Time : 22-Jul-2023 13:12 Acc. Remarks : Normal Ref Id2 : O23242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

HAEMATOLOGY INVESTIGATIONS BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type : O
Rh Type : POSITIVE

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Amit Prajapati
DCP.

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

Printed On : 22-Jul-2023 14:22





LABORATORY REPORT



Name : NISHA SINGH Sex/Age : Female/ 44 Years Case ID : 30702200676
 Ref.By : Dis. At : Pt. ID : 2857464
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
 Report Date and Time : 22-Jul-2023 11:00 Acc. Remarks : Normal Ref Id2 : 023242940

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

<u>Physical examination</u>				
Colour	Pale yellow			
Transparency	Clear			
<u>Chemical Examination By Sysmex UC-3500</u>				
Sp.Gravity	1.015		1.005 - 1.030	
pH	6.00		5 - 8	
Leucocytes (ESTERASE)	Negative		Negative	
Protein	Negative		Negative	
Glucose	Negative		Negative	
Ketone Bodies Urine	Negative		Negative	
Urobilinogen	Negative		Negative	
Bilirubin	Negative		Negative	
Blood	Negative		Negative	
Nitrite	Negative		Negative	
<u>Flowcytometric Examination By Sysmex UF-5000</u>				
Leucocyte	Nil	/HPF	Nil	
Red Blood Cell	Nil	/HPF	Nil	
Epithelial Cell	Present +	/HPF	Present(+)	
Bacteria	Nil	/ul	Nil	
Yeast	Nil	/ul	Nil	
Cast	Nil	/LPF	Nil	
Crystals	Nil	/HPF	Nil	

Note: (L-L-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)



Dr. Amit Prajapati

DCP.

Page 5 of 13

Printed On : 22-Jul-2023 14:22





LABORATORY REPORT



Name : NISHA SINGH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 44 Years
Dis. At :
Pt. Loc. :

Case ID : 30702200676

Pt. ID : 2857464

Pt. Loc. :

Reg Date and Time : 22-Jul-2023 09:44

Sample Type : Spot Urine

Mobile No :

Sample Date and Time : 22-Jul-2023 09:44

Sample Coll. By :

Ref Id1 : O0723199

Report Date and Time : 22-Jul-2023 11:00

Acc. Remarks : Normal

Ref Id2 : O23242940

Parameter	Unit	Expected value	Result/Notations			
			Trace	+	++	+++
pH	-	4.6-8.0				++++
SG	-	1.003-1.035				
Protein	mg/dL	Negative (<10)	10	25	75	150
Glucose	mg/dL	Negative (<30)	30	50	100	300
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6
Ketone	mg/dL	Negative (<5)	5	15	50	150
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12

Parameter	Unit	Expected value	Result/Notations			
			Trace	+	++	+++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500
Nitrite(Strip)	-	Negative	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150
Pus cells (Microscopic)	/hpf	<5	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)



Dr. Amit Prajapati

DCP.

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LABORATORY REPORT



Name : NISHA SINGH

Sex/Age : Female/ 44 Years Case ID : 30702200676

Ref.By :

Dis. At : Pt. ID : 2857464

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44

Sample Type : Plasma Fluoride F, Plasma Fluoride PP

Mobile No :

Sample Date and Time : 22-Jul-2023 09:44

Sample Coll. By :

Ref Id1 : 00723199

Report Date and Time : 22-Jul-2023 13:15

Acc. Remarks : Normal

Ref Id2 : 023242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H	105.98	mg/dL	70 - 100
Plasma Glucose - PP <i>Photometric, Hexokinase</i>		103.58	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseeer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Amit Prajapati

DCP.

Dr. Shreya Shah

M.D. (Pathologist)

Dr. Manoj Shah

M.D. (Path. & Bact.)

Printed On : 22-Jul-2023 14:22





LABORATORY REPORT



Name : NISHA SINGH Sex/Age : Female/ 44 Years Case ID : 30702200676
 Ref.By : Dis. At : Pt. ID : 2857464
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Serum Mobile No :
 Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
 Report Date and Time : 22-Jul-2023 13:39 Acc. Remarks : Normal Ref Id2 : 023242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	H	252.31	mg/dL	110 - 200
HDL Cholesterol		60.8	mg/dL	48 - 77
Triglyceride <i>Glycerol Phosphate Oxidase</i>		139.28	mg/dL	<150
VLDL <i>Calculated</i>		27.86	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>	H	4.15		0 - 4.1
LDL Cholesterol <i>Calculated</i>	H	163.65	mg/dL	65 - 100

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240		High 200-499
High 160-189			

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note: (L-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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LABORATORY REPORT



Name : NISHA SINGH Sex/Age : Female/ 44 Years Case ID : 30702200676
 Ref.By : Dis. At : Pt. ID : 2857464
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Serum Mobile No :
 Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : O0723199
 Report Date and Time : 22-Jul-2023 14:12 Acc. Remarks : Normal Ref Id2 : O23242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with P5p</i>	16.75	U/L	14 - 59	
S.G.O.T. <i>UV with P5p</i>	21.83	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	92.0	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	17.63	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.64	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.61	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.03	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.5		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.35	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.10	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.25	mg/dL	0 - 0.8	

Note: (LL-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)



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Dr. Manoj Shah
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LABORATORY REPORT



Name : NISHA SINGH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 44 Years
Dis. At :
Pt. Loc. :

Case ID : 30702200676

Pt. ID : 2857464

Pt. Loc. :

Reg Date and Time : 22-Jul-2023 09:44

Sample Type : Serum

Mobile No. :

Sample Date and Time : 22-Jul-2023 09:44

Sample Coll. By :

Ref Id1 : O0723199

Report Date and Time : 22-Jul-2023 13:39

Acc. Remarks : Normal

Ref Id2 : O23242940

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BUN (Blood Urea Nitrogen) 9.5 mg/dL 7.00 - 18.70

GLDH

Creatinine 0.77 mg/dL 0.50 - 1.50

Uric Acid 5.18 mg/dL 2.6 - 6.2

Uricase

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : NISHA SINGH

Sex/Age : Female/ 44 Years Case ID : 30702200676

Ref.By :

Dis. At : Pt. ID : 2857464

Bill. Loc. : Aashka hospital

Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 22-Jul-2023 09:44	Sample Coll. By :	Ref Id1 : 00723199
Report Date and Time : 22-Jul-2023 10:32	Acc. Remarks : Normal	Ref Id2 : 023242940

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

HbA1C H 5.94 % of total Hb <5.7: Normal
5.7-6.4: Prediabetes
>=6.5: Diabetes

Estimated Avg Glucose (3 Mths) 123.78 mg/dL
Calculated

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia. Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients. Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



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LABORATORY REPORT



Name : NISHA SINGH
Ref.By :
Bill. Loc. : Aashka hospital

Sex/Age : Female/ 44 Years
Dis. At :
Pt. Loc :

Case ID : 30702200676
Pt. ID : 2857464
Pt. Loc :

Reg Date and Time : 22-Jul-2023 09:44 Sample Type : Serum Mobile No :
Sample Date and Time : 22-Jul-2023 09:44 Sample Coll. By : Ref Id1 : 00723199
Report Date and Time : 22-Jul-2023 12:29 Acc. Remarks : Normal Ref Id2 : 023242940

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

Thyroid Function Test

Triiodothyronine (T3)	105.48	ng/dL	70 - 204	
Thyroxine (T4) C/M/A	5.2	ng/dL	4.87 - 11.72	
TSH C/M/A	1.773	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentrations (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)



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LABORATORY REPORT



Name : NISHA SINGH
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Sex/Age : Female/ 44 Years
Dis. At :
Pt. Loc. :

Case ID : 30702200676
Pt. ID : 2857464
Pt. Loc. :

Reg Date and Time	: 22-Jul-2023 09:44	Sample Type	: Serum	Mobile No :
Sample Date and Time	: 22-Jul-2023 09:44	Sample Coll. By :		Ref Id1 : 00723199
Report Date and Time	: 22-Jul-2023 12:29	Acc. Remarks	: Normal	Ref Id2 : 023242940

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (on alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hypothyroid patients, hypothyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.
TSH ref range in Pregnancy
First trimester 0.24 - 2.00
Second trimester 0.43-2.2
Third trimester 0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hypertthyroidism	↑	↑	↓
Secondary Hypertthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)


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22.07.2023 1:17:07 PM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

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

Room:

62 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 74 ms Normal sinus rhythm
QT / QTcBaz : 408 / 414 ms Normal ECG
PR : 154 ms
P : 112 ms
RR / PP : 966 / 967 ms
P / QRS / T : 62 / 74 / 61 degrees

