



the future of HEALTH CARE

PALMLAND

LABORATORY



Name : CHANDANI CHOUDHARY
Ref By : DR. WASIM RAJ(MEDICWHEEL)

Age/Sex : 36 Yrs./F
Date : 12/03/2022
Report ID. : W-2
Ward : -/
0.00000000

DIAGNOSTIC REPORT

HAEMATOLOGY ANALYSIS

TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
<u>BLOOD COUNTS & INDICES</u>				
Haemoglobin	: 11.40	gm%		12.0 - 16.0 gm%
Total RBC	: 3.80	mill/cmm		4.2 - 5.4 mill/cmm
PCV	: 35.60	%		37 - 47 %
MCV	: 93.68	fL		80 - 96 fL
MCH	: 30.00	pg		27 - 31 pg
MCHC	: 32.02	%		32 - 36 %
RDW	: 14.70	%		10 - 15 %
Total WBC	: 7,300	/cmm		4,000 - 11,000/cmm
Platelet Count	: 2,14,000	/cmm		1.5 - 4.0 Lac/cmm.
<u>DIFFERENTIAL LEUCOCYTES COUNT</u>				
Neutrophils	: 62	%		55 - 70 %
Lymphocytes	: 30	%		20 - 40 %
Eosinophils	: 05	%		01 - 06 %
Monocytes	: 03	%		02 - 08 %
Basophils	: 00	%		00 - 01 %
<u>ABSOLUTE COUNTS</u>				
Neutrophils	: 4526	/μL		2000 - 7000 /μL
Lymphocytes	: 2190	/μL		800 - 4000 /μL
Eosinophils	: 365	/μL		20 - 500 /μL
Monocytes	: 219	/μL		120 - 1200 /μL
<u>NEUTROPHIL : LYMPHOCYTE</u>				
Ratio	: 2.07			
Platelet In Smear	: ADEQUATE			
<u>ERYTHROCYTES SEDIMENTATION RATE</u>				
ESR	: 4	mm	Westergren	03 - 12 mm

Test done on Fully automated Cellcounter - NIHON KOHDEN, JAPAN

End Of Report

DR. DEV VARMA

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DIAGNOSTIC REPORT

Hb A1C REPORT

TEST	RESULT	UNIT	REFERENCE INTERVAL
GLYCOSYLATED HB			
Hb A1C	11.1	%	Non Diabetic : 4.3 - 6.3 % Good Control : 6.4 - 7.5 % Moderate Control : 7.5 - 9.0 % Poor Control : 9.0 % & Above
Avg. Blood Glucose Level	318	mg/dl	

Notes :

Average Blood Glucose	Hemoglobin Alc%
298	12 %
269	11 %
240	10 %
212	09 %
183	08 %
154	07 %
126	06 %
97	05 %

Comment:

HbA1c is an important indicator of long-term glycemic control with the ability to reflect the cumulative glycemic history of the preceding two to three months. HbA1c not only provides a reliable measure of chronic hyperglycemia but also correlates well with the risk of long-term diabetes complications.

Test done by HPLC Method.

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DIAGNOSTIC REPORT

HAEMATOLOGY ANALYSIS

TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
Blood Group	:	" AB "		
Rh Factor (Anti D.)	:	" <u>NEGATIVE</u> "		

Test done on Fully automated Cellcounter - NIHON KOHDEN, JAPAN

BIOCHEMISTRY ANALYSIS

Fasting Blood Glucose (FBS)	- :	<u>274</u>	mg/dl	70 - 110 mg/dl
Urine Glucose	- :	<u>PRESENT(+)</u>		
Post-Prandial Blood Glucose	:	<u>367</u>	mg/dl	80 to 140 mg/dl
Urine Glucose	- :	<u>PRESENT(++)</u>		
Creatinine	:	0.7	mg/dl	0.60 - 1.20 mg/dl
Blood Urea Nitrogen	:	7.10	mg/dl	4.5 - 19 mg/dl
S. Uric Acid	:	5.30	mg/dl	2.5 - 7.0 mg/dl

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DIAGNOSTIC REPORT

LIVER FUNCTION TEST

TEST	RESULT	UNIT	REFERENCE INTERVAL
Total Billirubin	: 0.60	mg/dl	0 - 1.0 mg/dl
Direct Billirubin	: 0.30	mg/dl	up to 0.25 mg/dl
Indirect Billirubin	: 0.30	mg/dl	0.1 - 1.0 mg/dl
S. Alk. Phosphatase	: 47	U/L	36.00 - 113.00 U/L
S.G.P.T.	: 12	U/L	10 - 40 U/L
S.G.O.T.	: 16	IU/L	up to 40 IU/L
Total Protein	: 6.50	g/dl	6.00 - 8.00 g/dl
Albumin	: 4.10	g/dl	3.5 - 5.0 g/dl
Globulin	: 2.40	g/dl	2.3 - 3.5 g/dl
A.G. Ratio	: 1.7		2.5 - 1.2 : 1
GGTP	: 14		5 - 85

Test done by (DIASYS)

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DIAGNOSTIC REPORT

LIPID PROFILE

TEST	RESULT	UNIT	REFERENCE INTERVAL
Total Lipid (Calculated)	: 794	mg/dL	350 - 750 mg/dL
Serum Cholesterol	: 240.0	mg/dL	130 - 200 mg/dL
Serum Triglyceride	: 178.0	mg/dL	60 - 165 mg/dL
HDL Cholesterol	: 54.0	mg/dL	30 - 70 mg/dL
LDL Cholesterol	: 150.4	mg/dL	Upto 150 mg/dL
CHOL./HDL Chol. Ratio	: 4.44	: 1	Less than 5
LDL Chol/HDL Chol Ratio	: 2.79	: 1	Less than 3.5

Interpretation Based On New N.C.E.P. Guidelines

Test	Result (mg/dl)	Interpretation
CHOLESTEROL	< 200	Desirable
	200 - 239	Borderline
	> = 240	High
TRIGLYCERIDES	< 170	Normal
	170 - 199	Borderline
	> 200	High
LDL CHOLESTEROL	< 100	Desirable
	100 - 129	Sub-Optional
	130 - 159	Borderline High
HDL CHOLESTEROL	> 160	High
	< 35	Low
	> 60	High

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DIAGNOSTIC REPORT

THYROID FUNCTION TEST

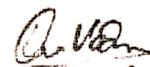
TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
Total Triiodothyronine(T3)	: 1.60	ng/ml	ELIFA	0.6-2.02 ng/ml
Total Thyroxine(T4)	: 10.30	ug/dl	ELIFA	5.13-14.06 ug/dl
Thyroid Stimulating Hormone (TSH)	: 1.40	uIU/ml		0.27-5.25 uIU/ml

NORMAL VALUES

Age	T3 ng/ml	T4 ug/dl	T.S.H. uIU/ml
01 - 12 Month	1.05 - 2.80	7.8 - 16.5	New Born : 1.3-19.0 3 Days : 1.1-17.0 10 weeks : 0.6-10.0 14 months: 0.4-7.0
01 - 05 Yrs	1.05 - 2.69	7.3 - 15.0	0.4-6.0
05 - 10 Yrs	0.94 - 2.41	6.04 - 13.3	0.25-5.25
10 - 15 Yrs	0.83 - 2.13	5.60 - 11.7	0.25-5.25
15 - 20 Yrs	0.80 - 2.00	4.20 - 11.8	0.25-5.25
> 20 Yrs	0.79 - 1.58	4.00 - 11.0	0.25-5.25

Test Done On Automated Immuno Assay- 360, Tosoh, Japan

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URINE ANALYSIS

TEST	RESULT	UNIT
Sample	: RANDOM	
PHYSICAL EXAMINATION		
Quantity	: 15	ml
Colour	: PALE YELLOW	
Transparency	: CLEAR	
Specific Gravity	: 1.030	
pH	: ACIDIC	
CHEMICAL EXAMINATION		
Albumin	: PRESENT (+) : ~ 30 mg/dL	
Sugar	: PRESENT (+++) : ~ 1000 mg/dL	
Acetone	: ABSENT	
Bile Salts	: ABSENT	
Bile Pigments	: ABSENT	
Occult Blood	: ABSENT	
MICROSCOPIC EXAMINATION		
Pus Cells / h.p.f.	: 1-2	
R.B.C. / h.p.f.	: ABSENT	
Epithelial / h.p.f.	: 5-7	

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MADHURAM Imaging Center

Multi Slice CT Scan | USG | X-Ray | Colour Doppler

Dr. Payal D. Shah
M.B.B.S., M.D. (Radiodiagnosis)

Dr. Darshit B. Shah
M.B.B.S., M.D. (Radiodiagnosis)
Ex- Clinical Associate, Lilavati hospital
(Mumbai)

Pt Name: Chandani Choudhary Date: 12th March 2022

USG OF ABDOMEN & PELVIS

- Liver is borderline enlarged in size, measuring approx. 152mm. No evidence of focal SOL or dilatation of IHBR seen.
- Porta hepatis appear normal.
- Gallbladder not Seen (H/O surgery).
- Pancreas appeared normal in size and normal in echotexture.
- Spleen appeared normal in size, measuring approx. 116mm and normal in echotexture.
- Aorta appeared normal. No para aortic lymphnodes seen.

Right kidney measured 89x31mm.
Cortex and collecting system of right kidney appeared normal.
No calculi or obstructive uropathy.

Left kidney measured 109x53mm.
Cortex and collecting system of left kidney appeared normal.
No calculi or obstructive uropathy.

Urinary bladder: Appears normal. No calculi are seen.

Uterus appears normal in size; measuring approx. 58x50x41mm, VOL:65cc. and shows homogenous endometrial shows echotexture.

- Approx. 9.7x7.2 sized posterior myometrial wall fibroid seen. (mm).
- Endometrium measures approx. 8.2mm.
Bilateral ovaries appear normal in size, shape and echotexture.
Bilateral adnexa appear unremarkable.
Bowels are well-visualised and appear normal.
Appendix not seen due to bowel gas.
No evidence of free fluid in pelvis.

Conclusion:

- Uterine fibroid
- Borderline hepatomegaly.

Thanks for the reference.

Dr. Payal D. Shah (MBBS, MD)
Consultant Radiologist

Dr. Darshit B. Shah (MBBS, MD)
Consultant Radiologist



MADHURAM Imaging Center

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M.B.B.S., M.D. (Radiodiagnosis)

Dr. Darshit B. Shah

M.B.B.S., M.D. (Radiodiagnosis)

Ex- Clinical Associate, Lilavati hospital
(Mumbai)

Pt Name: Chandani Choudhary

Date: 12th March 2022

Plain Skiagram chest (PA View)

Bilateral lung fields appear normal.

Both dome of hemi diaphragms appear normal.

Bilateral cp angle appears normal.

Bony thorax appears normal.

Cardiac shadow appears normal.

Conclusion:

- No significant abnormalities are seen.

Thanks for the reference.

Dr. Payal D. Shah (MBBS, MD)
Consultant Radiologist


Dr. Darshit B. Shah (MBBS, MD)
Consultant Radiologist



ECHOCARDIOGRAPHY AND DOPPLER STUDY REPORT

Patient Name- CHANDANI CHOUDHARY Age/sex-36/F Date-12/03/2022

SECTOR ECHOCARDIOGRAPHY:

All cardiac chambers are normal in dimensions
All cardiac valves are normal in structure & excursions
LV systolic function is normal at rest (LVEF=60%)
There is no e/o regional wall motion abnormality at rest
RVOT / MPA are normal. Pulmonary Valve normal
No e/o clot / mass seen

M-MODE	TEST	NORMAL
AORTA	25	20-37mms
LA	28	24-40mms
LVIDD	40	37-53mms
LVIDS	27	24-36mms
IVSD	09	6-12mms
LVPWD	09	6-12mms
EF	60	>55%
FS	32	

COLOUR FLOW, CW AND HAEMODYNAMIC DATA:

Normal flow through cardiac valves
No MR/ AR/ No AS; No PAH
Normal LV diastolic function
No E/O Lt--> Rt shunt

VALVE	PEAK VELOCITY (m/s)	REMARKS
AV	1.2	No AR/ AS
MV	E=0.7, A=0.6 E/A=1.2	No MR
PV	1.0	AT:130ms
TV	-----	No TR PASP: 20mmHg

CONCLUSION:

- * Normal LV systolic function at rest (LVEF=60%)
- * Normal valves; No MR/ TR/ AR/ AS
- * No pulmonary hypertension
- * No clot / pericardial effusion

DR DHIRAJ SATHE
MBBS, MD, DNB,
DNB (CARDIOLOGY)



the future of HEALTH CARE

PALMLAND
HOSPITAL

(Unit of Raj Palmland Hospital Pvt. Ltd.)

OPHTHALMOLOGY CONSULTATION

Name: Chandni choudhary Date: 12/03/21

Age: 36 Sex: Male Female HCP Reg.No.: _____

Ophthalmic History:

1. Do you feel that your eyesight is falling?
આંખે ઓછું દેખાતું હોય તેવું લાગે છે? Yes No
2. Any time feel to experience black outs?
કોઈવાર અંધારા આવે છે? Yes No
3. Any unexpected flicking of eyes?
આંખ વારંવાર અચાનક મારે છે? Yes No
4. Do you get difficulty in reading small letters?
નાના અક્ષર વાંચવામાં તકલીફ પડે છે? Yes No
5. Do you experience black dots temporarily?
આંખ સામે કોઈવાર કાળા ટપકા દેખાય છે? Yes No
6. Do you have exclusive aids?
વાંચવા કે જોવા માટે કોઈ ચશ્મા કે સ્પેશીયલ સાધન વાપરો છો? Yes No

Clinical Evaluation / History / Presenting Complain:

Examination Eyes:

1. Eyelids

Right OCAD Left

2. Cornea & Conjunctiva

Right Left

3. Vision

Right OCAD Left

SPH	CYY	AXIS	VN
/			OC6

SPH	CYY	AXIS	VN
/			OC6

SPH	CYY	AXIS	VN
/			OC6

SPH	CYY	AXIS	VN
/			OC6

Colour Vision:

NAD

Tonometry:

Right

NAD

Left

Fundus: (Must in case of DM & HT)

Right

NAD

Left

Eye Movements:

Right

Left

OK

Clinical Impression:

[Empty box for Clinical Impression]


Recommendation:

A. Additional Inv. / Referral Suggested

[Empty box for Recommendation A]

B. Therapeutic advise

[Empty box for Recommendation B]



 Ophthalmology's Signature

CHANDNI

Female

Years

UHID :

HR : 86 bpm
 P : 84 ms
 PR : 141 ms
 QRS : 79 ms
 QT/QTc : 325/391 ms
 P/QRS/T : 55/30/5 °
 RV5/SV1 : 0.647/0.529 mV

Diagnosis Information: 71

Technician : 078111
Unconfirmed Report.

