



Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel		UHID :	
Col Dt. Time : 02-Apr-2024 14:35	Recv Dt. Time : 02-Apr-2024 14:35	Sample Type :	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ :	Report Printed : 24-May-2024 15:26	

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
CBC			
PCV	35.6	%	37 - 47
Total Leucocyte Count(TLC)	3610	Cells/cmm	4000 - 11000
Kidney Function Test			
Creatinine	0.59	mg/dL	0.7 - 1.2

Abnormal Result(s) Summary End



Personal Details
 UHID: 01VLL2K26U30TXT
 Patient ID: 0233
 Name: Sanam Sujatha
 Age: 49
 Gender: Female
 Mobile: 9740334621

Pre-Existing Medical Conditions

Symptoms

Vitals

Measurements

Interpretation

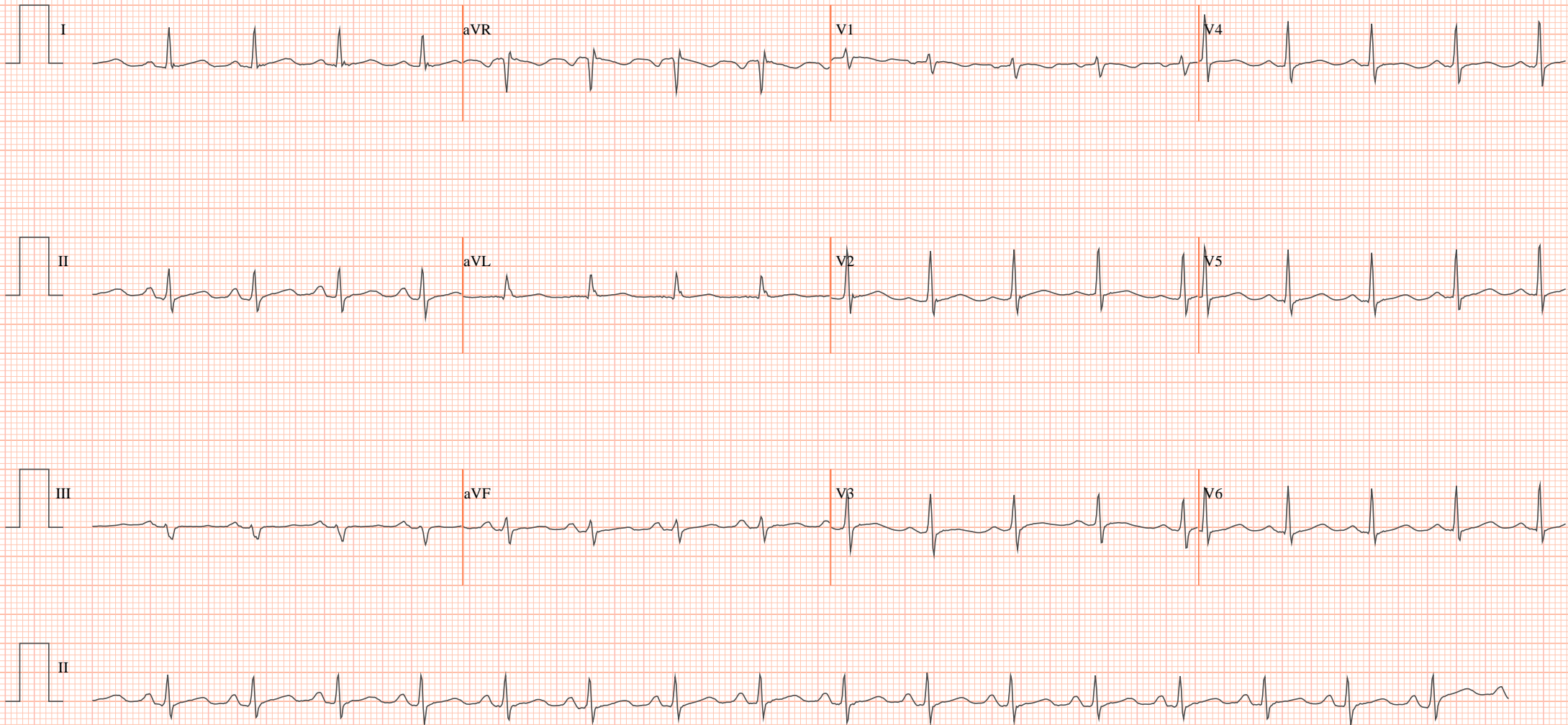
HR: 101 BPM
 PR: 171 ms
 PD: 128 ms
 QRSD: 78 ms
 QRS Axis: -3 deg
 QT/QTc: 341/341 ms

Sinus tachycardia
 Normal axis

TEST REPORT

Authorized by

Dr. Yogesh Kothari
 MD, DNB, FESC, FEP
 Reg No- KMC 44065



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV



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Corporate	: NDPL - Mediwheel	UHID	:		
Col Dt. Time	: 02-Apr-2024 09:27	Recv Dt. Time	: 02-Apr-2024 09:27	Sample Type	: Whole Blood EDTA
Reg Dt. Time	: 02-Apr-2024 09:16	Report Released @	: 02-Apr-2024 14:52	Report Printed	: 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Blood Group & Rh Type <i>Column agglutination</i>	B Positive			

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

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Sundari.R

Verified by



DR. MONICA KUMBHAT M
MBBS,MD (Pathology) FGIL



MC-5972

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Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 13:11	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
Complete Blood Counts				
RBC Count <i>Electrical Impedance</i>	4.07	millions/cm m	3.8 - 5.8	
Haemoglobin <i>SLS</i>	12.1	g/dL	11.5 - 16.5	
PCV	L 35.6	%	37 - 47	
Mean Corpuscular Volume <i>Calculated</i>	87.5	fL	76 - 96	
Mean Corpuscular Hemoglobin <i>Calculated</i>	29.7	pg	27 - 32	
Mean Corpuscular Hb Concentration <i>Calculated</i>	34.0	g/dL	30 - 35	
Red Cell Distribution Width (RDW) <i>Calculated</i>	12.2	%	11.5 - 14	
Total Leucocyte Count(TLC) <i>Fluorescent Flowcytometry</i>	L 3610	Cells/cmm	4000 - 11000	
<u>Differential Counts</u>				
Neutrophil <i>Fluorescent Flowcytometry</i>	58.9	%	40 - 75	
Lymphocyte <i>Fluorescent Flowcytometry</i>	31.6	%	20 - 45	
Monocytes <i>Fluorescent Flowcytometry</i>	7.5	%	2 - 10	
Eosinophil	1.4	%	1 - 6	
Basophil <i>Fluorescent Flowcytometry</i>	0.6	%	0 - 1	
<u>Absolute Counts</u>				
Absolute Neutrophil Count <i>Calculated</i>	2130	Cells/cmm	2000-7000	
Absolute Lymphocyte Count <i>Calculated</i>	1140	Cells/cmm	1000-5000	
Absolute Monocyte Count <i>Calculated</i>	270	Cells/cmm	200-1000	
Absolute Eosinophil Count <i>Calculated</i>	50	Cells/cmm	20-500	
Absolute Basophil Count <i>Calculated</i>	20	Cell/cmm	20-100	
Platelet Count <i>Electrical Impedance</i>	240000	Cells/cmm	150000 - 400000	
Mean Platelet Volume (MPV)	10.3	fL	7.2 - 11.7	

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

Divya.NHT

Divya.NHT

Verified by

Mellonie P

Dr. Mellonie P
MBBS,MD (Pathology),FIOP

ஹெல்த் ஈஸியா எடுக்காதிங்க டெஸ்ட் ஈஸியா எடுங்க





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According to ICSH guideline (international Council for Standardisation in Hematology), the differential counts should be reported in absolute numbers.

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

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Divya.NHT

Verified by

Dr. Mellonie P
MBBS,MD (Pathology),FIOP

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Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Serum	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 15:56	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
C- Reactive Protein <i>Immunoturbidimetric</i>	3.90	mg/L	0 - 6	

INTERPRETATIONS:

Detecting systemic inflammatory processes. Detecting infection and assessing response to antibiotic treatment of bacterial infections Differentiating between active and inactive disease forms with concurrent infection CRP levels can increase dramatically (100-fold or more) after severe trauma, bacterial infection, inflammation, surgery, or neoplastic proliferation. CRP has been used to assess activity of inflammatory disease, to detect infections after surgery, to detect transplant rejection, and to monitor these inflammatory processes. Elevated values are consistent with an acute inflammatory process.

CAUTIONS :

Elevated C-reactive protein (CRP) values are nonspecific and should not be interpreted without a complete clinical history. Oral contraceptives may increase CRP levels. HSCR/C-Reactive Protein, High Sensitivity, Serum is the appropriate CRP test to order to assess risk of cardiovascular disease or events.

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

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C.M.Iyappan

Verified by



Dr.Selvi R
Consultant Biochemist

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MC-5972

**Neuberg Ehrlich Laboratory Private Limited,**

No 7, Rajiv Gandhi Salai, Industrial Estate, Perungudi, Chennai - 600096.

 044-4141 2222 Info@neubergdiagnostics.com www.neubergdiagnostics.com



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TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Calcium <i>Arsenazo III</i>	9.30	mg/dL	8.4 - 10.2	

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

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C.M. Iyappan.

C.M.Iyappan

Verified by

Dr.Selvi R
Consultant Biochemist



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Reg Dt. Time	: 02-Apr-2024 09:16	Report Released @	: 02-Apr-2024 13:39	Report Printed	: 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
DENTAL EXAMINATION	.			

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

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Kalaiselvi

Verified by


Dr.Monica.M

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Test	Result
ECHOCARDIOGRAM REPORT	
AO (ed)	2.5 cm
LA (es)	2.4 cm
LVID (ed)	3.7 cm
LVID (es)	2.4 cm
IVS (ed/es)	0.7/1.0 cm
LVPW(ed/es)	0.8/1.0 cm
FS	36%
EF	67%
AML	Intrinsically normal
PML	Intrinsically normal
AV	Intrinsically normal
TV	Intrinsically normal
PV	Intrinsically normal
RV	Intrinsically normal
RA	Intrinsically normal
IVS	Intact
IAS	Intact
AO	Intrinsically normal
PA	Intrinsically normal
LA	Intrinsically normal
LEFT VERTICLE	No regional wall motion abnormality LV normal in size Normal LV function
PERICARDIUM	No Evidence of pericardial effusion
Pulmonic velocity	0.9 m/s
Aortic velocity	1.1 m/s
Mitral velocity (E/A)	0.4/0.5m/s Tricuspid velocity-1.8 m/s, PG- 18 mmHg

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

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FASEEHA ANJUM

Verified by

**Dr. Malathi Jawahar**
(Consultant Cardiologist)

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Impression:

NO REGIONAL WALL MOTION ABNORMALITY
LV NORMAL IN SIZE
NORMAL LV FUNCTION
GRADE I LVDD
TRIVIAL MR / TRIVIAL TR / NO PAH
NO PE / CLOT
RA, RV NORMAL IN SIZE
NORMAL RV FUNCTION
EF – 67 %

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

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FASEEHA ANJUM


Verified by

*Malathi Jawahar***Dr. Malathi Jawahar**
(Consultant Cardiologist)

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TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Electrolytes

Sodium <i>ISE, Indirect</i>	138.00	mmol/L	136 - 145	
Potassium <i>ISE, Indirect</i>	3.90	mmol/L	3.5 - 5.1	
Chloride <i>ISE, Indirect</i>	104.00	mmol/L	98 - 107	
Bi Carbonate <i>Enzymatic</i>	26.00	mEq/L	21 - 32	

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

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C.M. Iyappan

C.M.Iyappan

Verified by

[Signature]
Dr.Selvi R
Consultant Biochemist



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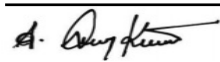


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Corporate	: NDPL - Mediwheel	UHID	:		
Col Dt. Time	: 02-Apr-2024 09:27	Recv Dt. Time	: 02-Apr-2024 09:27	Sample Type	: Whole Blood EDTA
Reg Dt. Time	: 02-Apr-2024 09:16	Report Released @	: 02-Apr-2024 15:11	Report Printed	: 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR <i>Photometrical capillary stopped flow kinetic analysis</i>	6	mm/hour	0 - 20	

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

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ARUN KUMAR

Verified by


DR.MONICA KUMBHAT M
MBBS,MD (Pathology) FGIL

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Reg Dt. Time	: 02-Apr-2024 09:16	Report Released @	: 02-Apr-2024 13:39	Report Printed	: 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
EYE Test (Near,Far and Color)	Report Attached			

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

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Kalaiselvi

Verified by


Dr.Monica.M

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Corporate : NDPL - Mediwheel		UHID :		
Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Plasma Fluoride F		
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 13:34	Report Printed : 24-May-2024 15:26		

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F HEXOKINASE/G-6-PDH	85	mg/dL	Fasting blood glucose : 70 - 99 mg/dl - Normal 100 - 125 mg/dl - Impaired Fasting : Diabetic : =>126.	

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

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KOMATHI

Verified by


Dr.Selvi R
Consultant Biochemist



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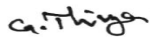


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Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 12:20	Recv Dt. Time : 02-Apr-2024 12:20	Sample Type : Plasma Fluoride PP	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 15:10	Report Printed : 24-May-2024 15:26	


TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - PP <i>HEXOKINASE/G-6-PDH</i>	101.00	mg/dL	Normal : 70-140 mg/dL Impaired Tolerance : 141 - 199 Diabetic : => 200	

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

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**Thivya G**

Verified by

**Dr. Preeti Kabra**
Chief Of Lab

ஹெல்த் ஈஸியா எடுக்காதிங்க டெஸ்ட் ஈஸியா எடுங்க





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Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 18:37	Report Printed : 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C HPLC	5.80	%	Non Diabetic : Less than 5.7 % Pre Diabetic : 5.7 - 6.4 Diabetic : => 6.5 %	
Estimated Avg Glucose (3 Mths) Calculated	119.76	mg/dL	70 - 126 Diabetic : > 154	

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

Interpretation :

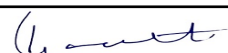
HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemc control.
Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
Increased HbA1C values may be found in patients with polycythemia or post 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 glycemc 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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AUTO

Verified by


Dr. P. Mahendranath
MD Pathologist



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TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
GYNAEC. EXAM	.			

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

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Kalaiselvi

Verified by


Dr.Monica.M

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TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
Kidney Function Test				
Urea <i>Uricase</i>	17.50	mg/dL	12.84 - 42.8	*Please note change in Reference range.
Creatinine <i>Enzymatic</i>	L 0.59	mg/dL	0.7 - 1.2	
Uric Acid <i>Uricase</i>	4.60	mg/dL	2.6 - 6.0	

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

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C.M. Iyappan.

C.M.Iyappan

Verified by


Dr.Selvi R
Consultant Biochemist

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Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Other,SCAN	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 14:22	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Physical Examination

Height	158	
Blood Pressure	110/70	mmHg
Body Weight	54	
Body Mass Index	21.6	

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

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Kalaiselvi


Dr.Monica.M

Verified by

ஹெல்த் ஈஸியா எடுக்காதிங்க டெஸ்ட் ஈஸியா எடுங்க





Final Laboratory Report				PID	:
Name	: Mrs. SANAM SUJATHA	Sex/Age	: Female / 49 Years	Lab ID	: 40409100233
Ref. By	:	SRF ID	:	Ref. ID	:
Corporate	: NDPL - Mediwheel	UHID	:		
Col Dt. Time	: 02-Apr-2024 09:27	Recv Dt. Time	: 02-Apr-2024 09:27	Sample Type	: Serum
Reg Dt. Time	: 02-Apr-2024 09:16	Report Released @	: 02-Apr-2024 15:56	Report Printed	: 24-May-2024 15:26

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Phosphorus Inorganic <i>Phosphomolybdate</i>	3.30	mg/dL	2.3 - 4.7	

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

Page 20 of 32

C.M. Iyappan.

C.M.Iyappan

Verified by

[Signature]
Dr.Selvi R
Consultant Biochemist



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MC-5972



Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Serum	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 16:08	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroxine (T4) CMA	9.91	µg/dL	4.87 - 11.72	

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

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MC-5972



Final Laboratory Report				PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233		
Ref. By :	SRF ID :	Ref. ID :		
Corporate : NDPL - Mediwheel		UHID :		
Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Serum		
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 16:08	Report Printed : 24-May-2024 15:26		

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Triiodothyronine (T3) <i>CMIA</i>	113.24	ng/dL	35 - 193 * Note : Please note change in reference range	

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

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MC-5972



Final Laboratory Report				PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233		
Ref. By :	SRF ID :	Ref. ID :		
Corporate : NDPL - Mediwheel		UHID :		
Col Dt. Time : 02-Apr-2024 09:27	Recv Dt. Time : 02-Apr-2024 09:27	Sample Type : Serum		
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 16:08	Report Printed : 24-May-2024 15:26		

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
TSH CMIA	1.3100	μIU/mL	0.35 - 4.94 PREGNANCY: First trimester : 0.1 - 2.5 Second trimester : 0.2 - 3.0 Third trimester : 0.3 - 3.0	

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 concentration (>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), PRTN 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.

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

For test performed on specimens received or collected from non-NDPL 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. NDPL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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MC-5972



Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 09:28	Recv Dt. Time : 02-Apr-2024 09:28	Sample Type : Urine	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 15:37	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
<u>Urine Routine Examination</u>				
Appearance <i>Manual</i>	Slightly Turbid		Clear	
Colour	Pale yellow			
pH <i>Ion concentration</i>	6.5		4.6 - 8	
Sp.Gravity <i>pKa change</i>	1.010		1.003 - 1.035	
<u>Chemical Examination</u>				
Protein <i>Tetrabromophenol blue</i>	Negative		Negative	
Glucose <i>GOD-POD</i>	Negative		Negative	
Bile pigment <i>Biochemical</i>	Negative		Negative	
Urobilinogen <i>Diazotization reaction</i>	Negative		Negative	
Ketones <i>Sodium Nitroprusside Reaction</i>	Negative	mg/dL	Negative	
Nitrite <i>N-(1-naphthyl)-ethylenediamine</i>	Negative		Negative	
<u>Microscopic Examination</u>				
Red Blood Cell	Nil	/HPF	Nil	
Pus Cells <i>Microscopy</i>	2-3	/HPF	0-5 cells/hpf	
Epithelial Cell <i>Microscopy</i>	3-4	/HPF	Negative	
Cast <i>Microscopy</i>	Nil	/HPF	Nil	
Pathological Cast <i>Reflectance Photometry</i>	Nil	/HPF	NIL	
<u>Crystals</u>				
Calcium oxalate Monohydrate	Nil	/HPF	Nil	
Calcium oxalate Dihydrate	Nil	/HPF	Nil	
Triple phosphate	Nil	/HPF	Nil	
Uric Acid <i>Phase Contrast Microscopy</i>	Nil	/HPF	Nil	
Bacteria	Nil	/μL	Nil	
Yeast	Nil	/μL	Nil	

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



Divya.NHT

Verified by



DR.MONICA KUMBHAT M
MBBS,MD (Pathology) FGIL

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Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel		UHID :	
Col Dt. Time : 02-Apr-2024 09:28	Recv Dt. Time : 02-Apr-2024 09:28	Sample Type : Urine	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 15:37	Report Printed : 24-May-2024 15:26	

Amorphous Deposits
Phase Contrast Microscopy

0.0 /HPF 0-29.5 p/hpf

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DR.MONICA KUMBHAT M
MBBS,MD (Pathology) FGIL

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Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 09:28	Recv Dt. Time : 02-Apr-2024 09:28	Sample Type : Urine F	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 16:14	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Urine Glucose (Fasting)	Not Present		Absent	

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

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**Divya.NHT**

Verified by

**DR.MONICA KUMBHAT M**
MBBS,MD (Pathology) FGIL

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Final Laboratory Report			PID :
Name : Mrs. SANAM SUJATHA	Sex/Age : Female / 49 Years	Lab ID : 40409100233	
Ref. By :	SRF ID :	Ref. ID :	
Corporate : NDPL - Mediwheel	UHID :		
Col Dt. Time : 02-Apr-2024 12:22	Recv Dt. Time : 02-Apr-2024 12:22	Sample Type : Urine PP	
Reg Dt. Time : 02-Apr-2024 09:16	Report Released @ : 02-Apr-2024 16:14	Report Printed : 24-May-2024 15:26	

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Urine Glucose (Post Prandial)	Not Present		Absent	

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

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MBBS,MD (Pathology) FGIL

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LABORATORY REPORT		PID	:
Name	: Mrs. SANAM SUJATHA	Sex/Age	: Female/49 Years
Ref. By	:	Lab ID	: 40409100233
Corporate	: NDPL - Mediwheel	Ref. ID	:
Reg Dt. Time	: 02-Apr-2024 09:16	UID	:
Sample Dt. Time	: 02-Apr-2024 09:27	Report Released @	: 02-Apr-2024 13:26
		Report Printed @	: 24-May-2024 15:26
		Sample Type	: SCAN

ULTRASOUND WHOLE ABDOMEN

The liver is normal in size and shows uniform echotexture with no other focal abnormality. **A simple cyst of 4.0 x 3.8 cm is seen in right lobe of liver.**

The gall bladder is normal sized and smooth walled and contains no calculus.

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture. The pancreatic duct is normal.

The portal vein and the IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

No para aortic lymphadenopathy is seen.

No abnormality is seen in the region of the adrenal glands.

The right kidney measures: 10.4 x 3.3 cms.

The left kidney measures: 10.5 x 3.3 cms.

Both kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally. There is no calculus or calyceal dilatation.

The ureters are not dilated.

The urinary bladder is smooth walled and uniformly transonic. There is no intravesical mass



Ranjani S

Verified By


 **Neuberg Ehrlich Laboratory Private Limited,**
No 46 & 48, Masilamani Rd, Balaji Nagar, Royapettah, Chennai -600014

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Sonologist

 044-4141 2222

 info@neubergdiagnostics.com

 www.neubergdiagnostics.com

TEST REPORT

LABORATORY REPORT		PID	:
Name	: Mrs. SANAM SUJATHA	Sex/Age	: Female/49 Years
Ref. By	:	Lab ID	: 40409100233
Corporate	: NDPL - Mediwheel	Ref. ID	:
Reg Dt. Time	: 02-Apr-2024 09:16	UID	:
Sample Dt. Time	: 02-Apr-2024 09:27	Report Released @	: 02-Apr-2024 13:26
		Report Printed @	: 24-May-2024 15:26
		Sample Type	: SCAN

or calculus.

Uterus and ovaries are not visualized (H/O Surgery)

Iliac fossae are normal.

No mass or fluid collection is seen in the right iliac fossa.

The appendix is not visualized.

IMPRESSION :

- ***SIMPLE HEPATIC CYST***
- ***POST HYSTERECTOMY STATUS***
- ***OTHER ORGANS ARE NORMAL***

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

**Ranjani S**

Verified By

Neuberg Ehrlich Laboratory Private Limited,
No 46 & 48, Masilamani Rd, Balaji Nagar, Royapettah, Chennai -600014

DR. RAMYA

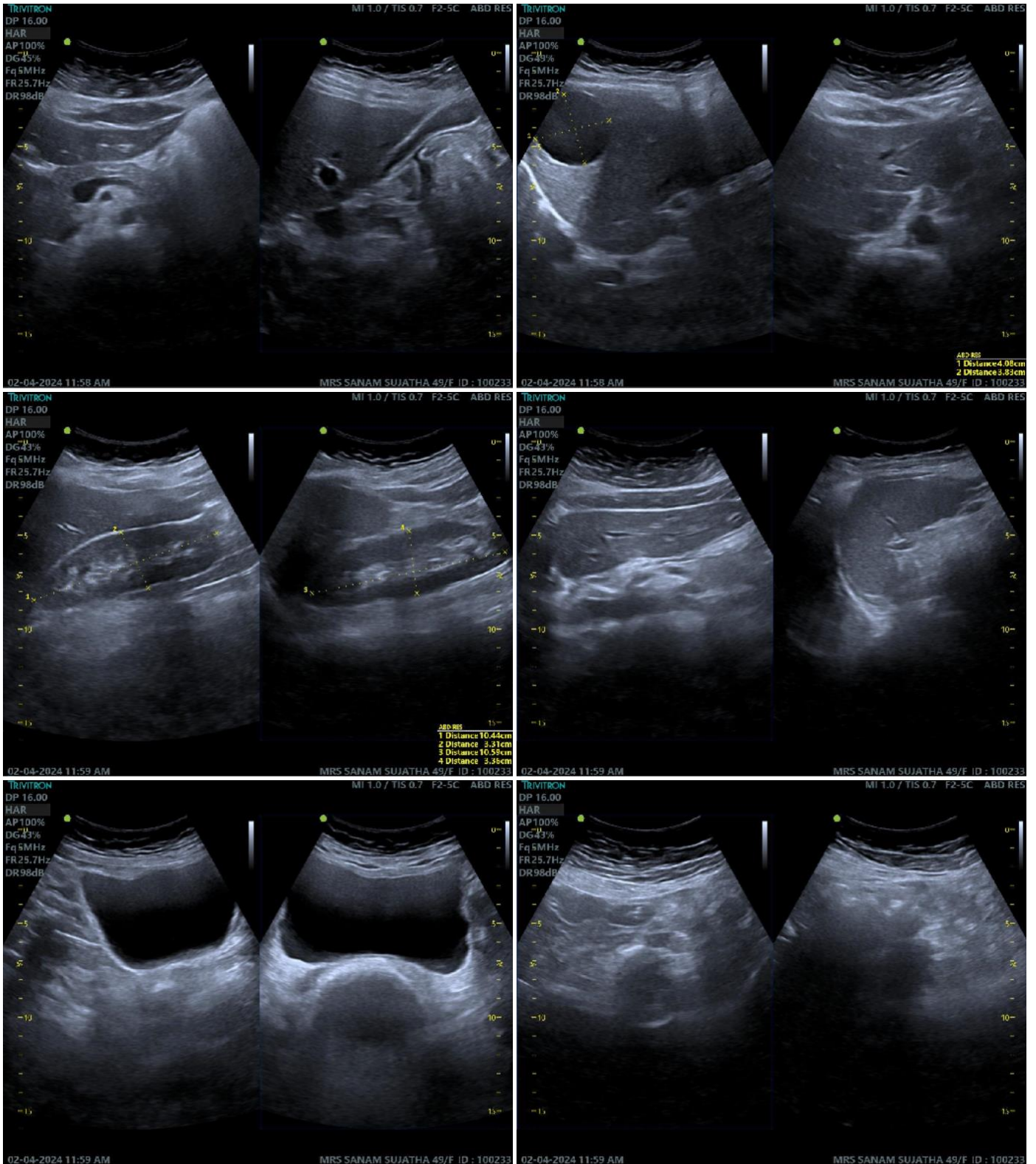
Sonologist

044-4141 2222

info@neubergdiagnostics.com

www.neubergdiagnostics.com

Patient name G MRS. SANAM SUJATHA		Age/Sex	
Patient ID AE • Sou 100233 • USA		TEST REPORT	
Referred by		Visit No	
		Visit Date	02/04/2024



ஹெல்த் ஈஸியா எடுக்காதிங்க டெஸ்ட் ஈஸியா எடுங்க



<i>Patient Name</i>	Mrs SANAM SUJATHA	<i>Patient ID</i>	100233
<i>Age/D.O.B</i>	49Y	<i>Gender</i>	F
<i>Referring Doctor</i>	NA	<i>Date</i>	2 Apr 24

Report Title

XRAY RADIOGRAPH CHEST - PA

History

.

Observations

Cardiothoracic ratio is normal.
Sternum appears normal.
Both lung fields are clear.
Soft tissues of the chest wall are normal.
Visualized thoracic vertebral is normal.
Both costophrenic angles appear normal.

Impression

The study is within normal limits.

Reported By,



Dr. Aditi Agarwal

MBBS, MD
Consultant Radiologist
DMC -103820

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