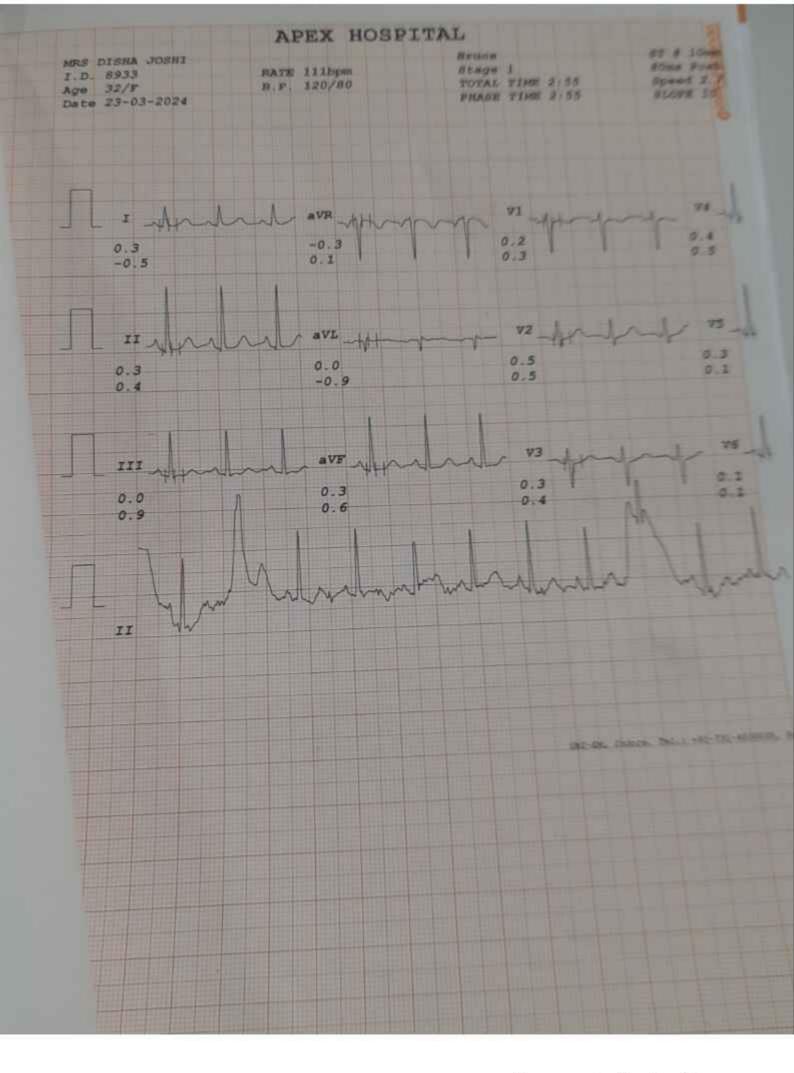
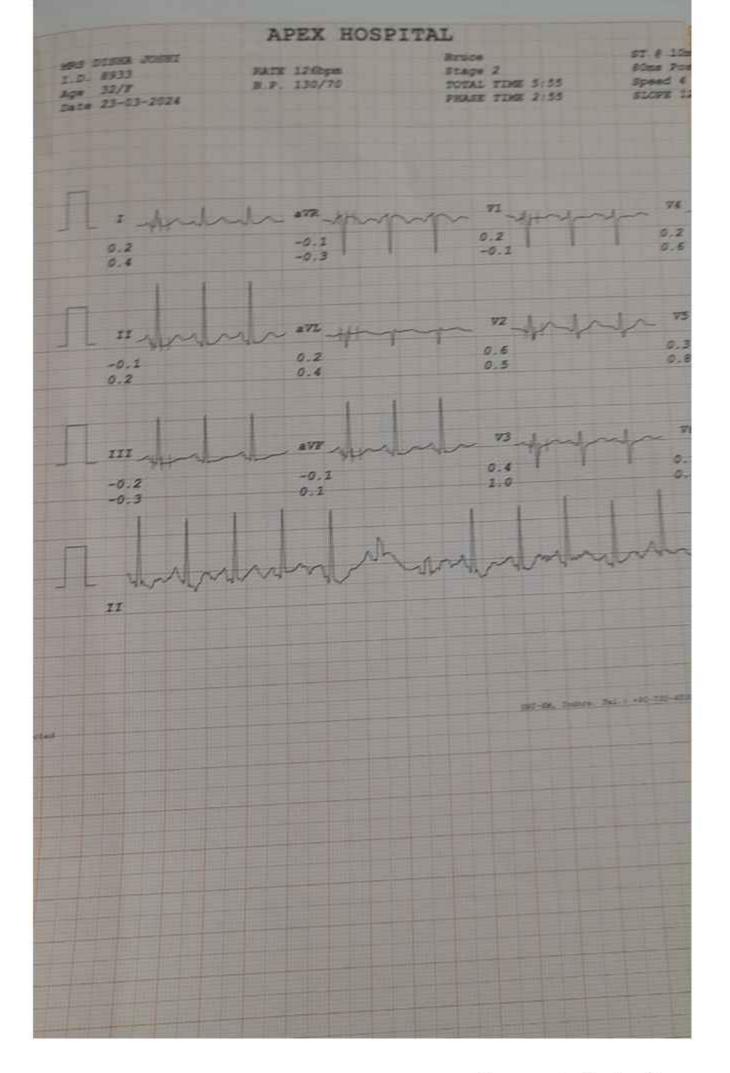
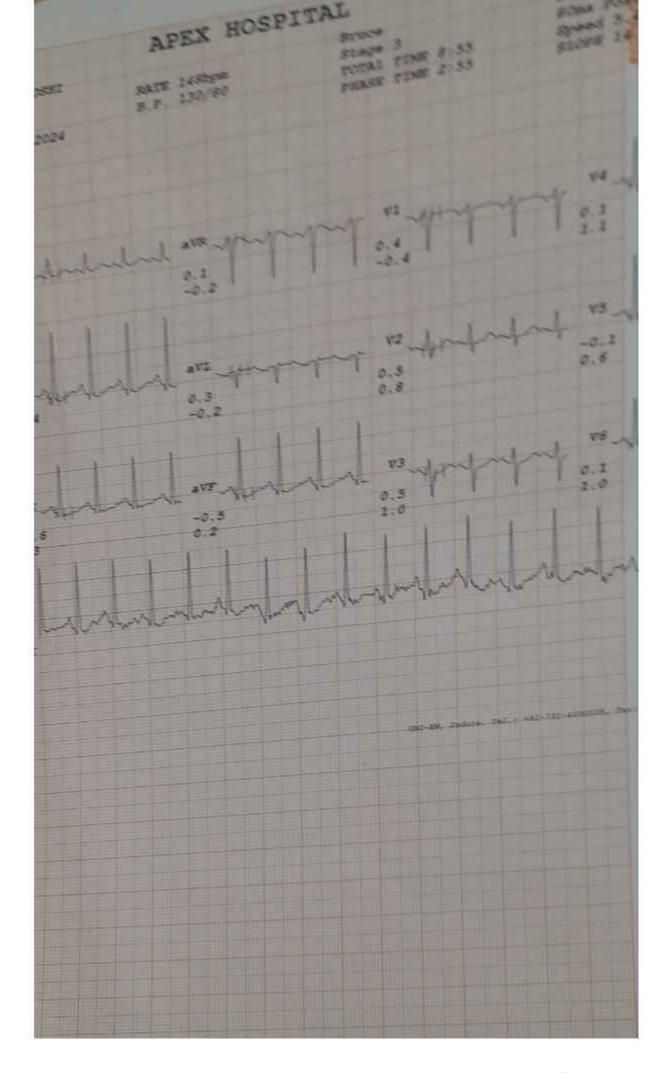
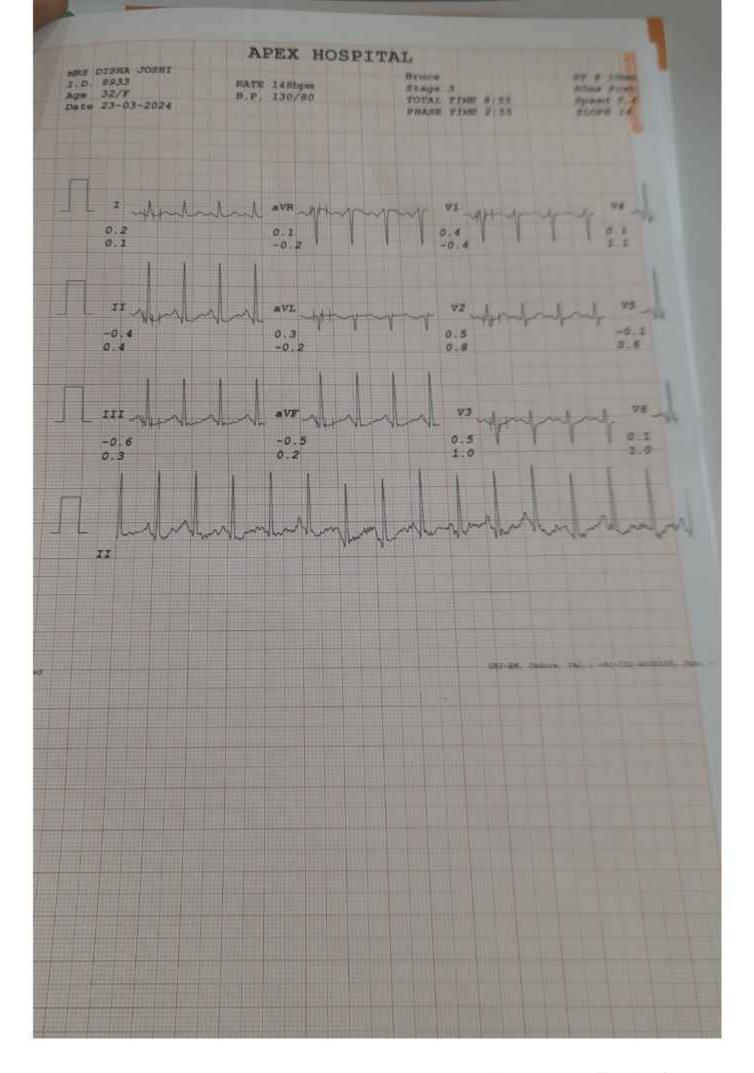


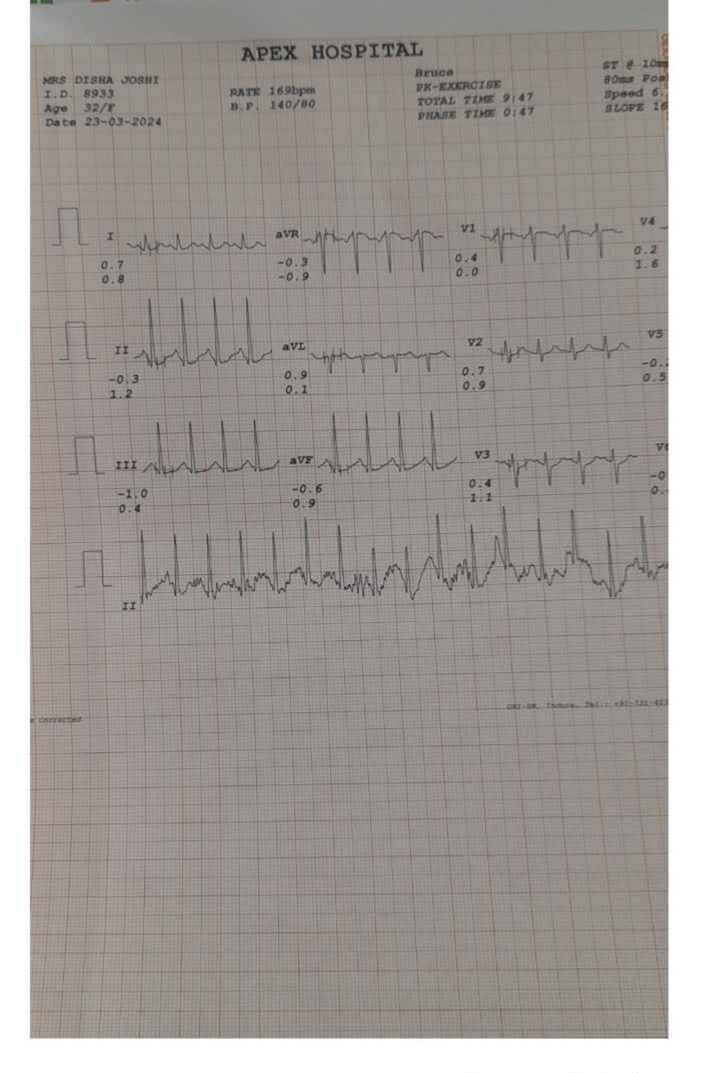
	R	AMDIVALIA			· ·
DATE AGE/SEX	23-03-2024	DIVALI		PROTOCOL HISTORY INDIGATION MEDICATION	Brude
PHASE	TOTAL STAGE	SPEED Km/Hr	GRADE	H.R.	a.P. RFP x100
NE 1 2 2 8 3 XERCISE	2:55 2:55 5:55 2:55 8:55 2:55 9:47 0:47 10:28 0:29	2.7 4 5.4 6.7	10 12 14 16	104 111 126 148 169 141	120 / 70 124 120 / 80 133 130 / 70 163 130 / 80 192 140 / 80 236 140 / 80 197
MAX HEA MAX BLO REASON BP RESI ARRYTHI	DURATION ART RATE DOD PRESSURE OF TERMINATION:	9:47 169 bpm 8 140 / 80 m	9 % of t	arget heart	MAX WORK LOAD rate 188 bpm
chnician : 4	14 Tel. 3 493-731-4030035,	7881 +9L-M31-4031	120. E-Mailt #	ICCPF	ARDIOLOGIC

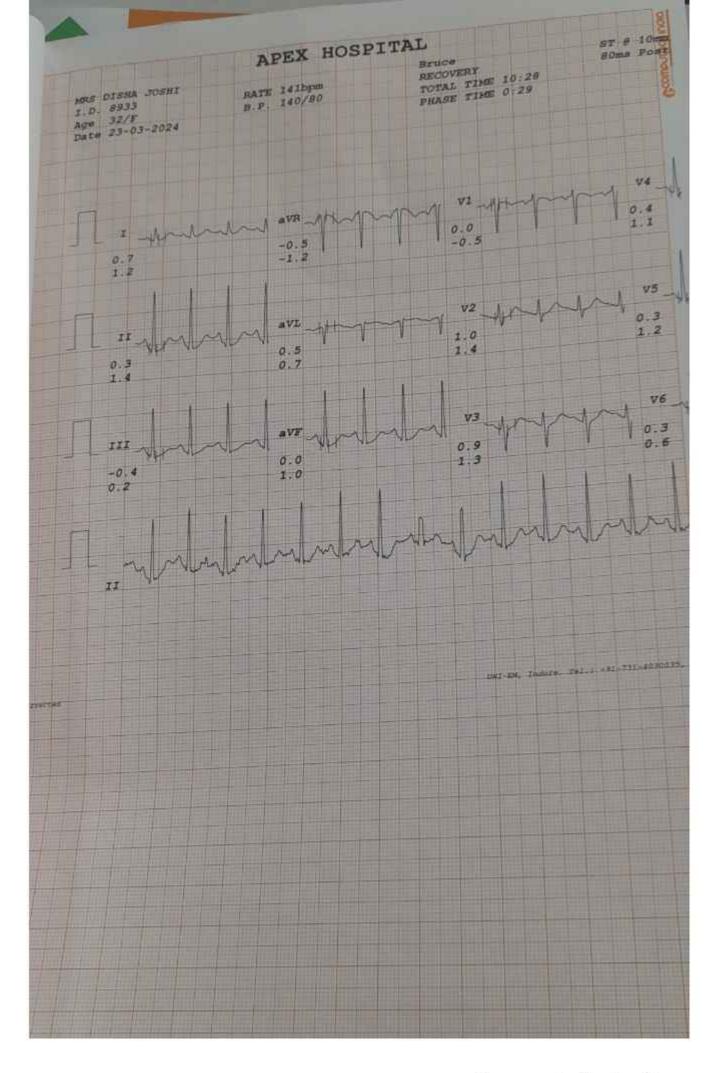














APEX HOSPITALS KANDIVALI DIAGNOSTIC



Akura Road, Next to Lotina Woods , Lakhandwaia Township, Near Mahindra Gate No. 4, Kandivali (E.), Mumber 400101 email info@papeshospitals.in | www.spits@oupothisquitals.com



Tele: 022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name UHID/IP No Age/Gender Bed No/Ward

Pla MP

Mrs. DISHA JOSHI 150009693 / 11392 32 Yrs/Female

Sample Date Report Date Report Status

23/03/2024 5:24944 Receiving Date 23/03/2024 5:35PM 23/03/2024 6:40944

prescribed By	Dr. Ramesh Hari Pawar	Report
Presentation		HAEMATOLOGY

	HA	EMATOLOG		
Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) Esample: W. B. EDTA Haemoglobin Estimation (Hb) RBC Count (Red Blood Cell) PCV (Haematocrit) MCV MCH MCHC MDW Iotal Leukocyte Count (TLC) Ieutrophil % Insolute Neutrophil Count (ANC) Isolute Lymphocyte Count Isolute Eosinophil Count (AEC) Isolute Basophil Count Isolute Basophil Count Isolute Basophil Count	12.7 L 4.79 37.6 L 78.5 26.51 L 33.78 12.0 8500 58 40 01 01 00 4930 3400 H 85 85 L 0.00 Within norm	gm/dl 10^6/uL % fi pg gm/dl % cells/cu.mi % % % /cu.mm /cu.mm /cu.mm	13.5 - 18.0 4.70 - 6.00 40.0 - 50.0 78 - 100 27 - 31 30 - 36 11.0 - 16.0 m 4000.0 - 10500.0 40 - 80 20 - 40 0 - 6 1 - 12 0 - 2 2000 - 7000 1000 - 3000 20 - 500 200 - 1000	Calculated
Cs Marphology Cs Marphology	Normocytic 193	Normochromic 10^3/ul		DC Detection
relet Count elets Morphology /	Adequate of	n smear fl	7 - 12	

-- End Of Report--



Dr. SANDEEP B PORWAL MBBS MD (Path) Mumbai



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DEPARTMENT OF LABORATORY SCIENCES

Patient Name UHID/IP No Age/Gender

Bed No/Ward

Prescribed By

Mrs. DISHA 305HI 150009693 / 11392 32 Yrs/Female

Dr. Ramesh Hari Pawar

LabNo Sample Date

Receiving Date 23/03/2024 5:39PM Report Date

Report Status

23/03/2024 5:24PM

23/03/2024 6:40PM



HAEMATOLOGY

	F	AEMATUL	OGI	Method	
Test Name	Result	Unit	Biological Ref. Range	Media	
ERYTHROCYTE SEDIME	NTATION RATE (ESR)				

Sample: W. B. EDTA

SR (Erythrocyte Sed.Rate)

20 H

mm/hr

< 15

Viesengren

-- End Of Report-

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Akurli Road, Next to Lodha Woods , Lokhandwala Township, Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101. email: info@apexhospitals.in | www.apexgroupofhospitals.com

DEPARTMENT OF LABORATORY SCIENCES

Patient Name UHID/IP No Age/Gender

Mrs. DISHA JOSHI 150009693 / 11392

Bed No/Ward Prescribed By 32 Yrs/Female Dr. Ramesh Hari Pawar LabNo Sample Date Receiving Date Report Date Report Status

23/03/2024 5:24PM 23/03/2024 5:39PM 23/03/2024 6:40PM Final

FACILITY

IMMUNO-HAEMATOLOGY

	IMMUNO)-HAEMI	Biological	Method
Test Name	Result	Unit	Ref. Range	
BLOOD GROUPING Sample: W. B. EDTA	100 220			SLIDE METHOD
Blood Group (ABO and Rh)	"O" RH Positive			

-- End Of Report--



APEX HOSPITALS KANDIVALI DIAGNOSTIC



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Tolo .: 022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name UNID/IP No Age/Gender

HE'S. DISHA XOSHI 150009693 / 11392

Bed No/Ward Prescribed By 32 Yrs/Female

Dr. Ramesh Hari Pawar

LabNo Sample Date Receiving Date 23/03/2024 5:39944

23/03/2024 6:50994 Report Date Pirist Report Status

23/03/2024 5:24094

BIOCHEMISTRY

Result	Unit	Biological Ref. Range	Method
108.0	mg/dl	70 - 140	Glucose Oxidase, Hydrogen
	108.0		Ref. Range

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :

The glycammic index and response to food consumed, Changes in body composition, Increased insulin response and

sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics a Insulin treatment.

GLUCOSE (FASTING)

Sample: FL. Plasma

Glucose (Fasting Blood Sugar / FBS) 99.0

mq/di

70 - 110

Glucose Oxidase, Hydrogen Perticide

-- End Of Report--

Dr. SANDEEP B PORWAL MBBS MD (Path) Mumbal



prescribed By Dr. Ramesti ram	1	STOCHEMIST	Biological	A Miles
	Result	Unit	Ref. Range	
Test Name LIPID PROFILE SERUM Sample: Serum	110.0	mg/dl	< 200.00	Cholesterol Oxidase, Esterase, Pero xidase Enzymatic End point
Triglycendes HDL Cholesterol VLDL Cholesterol	56.0 48.0 11.20 50.80	mg/dl mg/dl mg/dl mg/dl	< 150 40.00 - 60.00 6.00 - 38.00 < 100.00 3.50 - 5.00	Phosphotungstat Calculated Value Calculated Value Calculated Value
LDL Cholesterol Cholesterol Total: HDL Cholesterol Ratio LDL Cholesterol: HDL Cholesterol Ratio			2.50 - 3.50	Calculated Value

-- End Of Report--

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Tele .: 022-62747000 (100 Lin

email info@apexhospitals.in | www.apexgroupofhospitals.com DEPARTMENT OF LABORATORY SCIENCES

Patient Name UHID/IP No Age/Gender

Mrs. DISHA JOSHI 150009693 / 11392 32 Yrs/Female

Sample Date Receiving Date Report Date Report Status

23/03/2024 5:24PM 23/03/2024 5:39PM 23/03/2024 6:40PM Final

Bed No/Ward Prescribed By

Dr. Ramesh Hari Pawar

PTO	CH	EMIST	13	1
DIO	-			ni.

MARK I	BI	OCHEMITO	The state of the s	Method
Test Name	Result	Unit	Biological Ref. Range	
LIVER FUNCTION TEST (LFT) SERU Sample: Serum Bilirubin Total (TBil) Bilirubin Direct (Dbil) Bilirubin Indirect SGPT (ALT) SGOT (AST) Protein Total Albumin	0.82 0.40 0.42 52.35 H 29.67 7.0 4.2	mg/dl mg/dl mg/dl U/L U/L gm/dl gm/dl	0.30 - 1.30 0.00 - 0.50 0 - 1 5 - 40 5 - 40 6.00 - 8.00 3.20 - 5.00	Diphyline Diazonium Salt IFCC modified IFCC modified Biuret Bromocresol Green (BCG) Calculated Value
Globulin A/G Ratio (Albumin/Globulin Ratio) Alkaline Phosphatase GGTP (GAMMA GT)	2.80 1.50 110.6 29.99	gm/dl IU/L IU/L	1.80 - 3.50 1.00 - 2.50 42 - 140 15.0 - 72.0	Calculated Value UV Kinetic IFCC

-- End Of Report--



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Tele .: 022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

atient Name JHID/IP No age/Gender sed No/Ward

rescribed By

Mrs. DISHA JOSHI 150009693 / 11392 32 Yrs/Female

Dr. Ramesh Hari Pawar

LabNo Sample Date

Receiving Date Report Date Report Status

23/03/2024 5:24PM

23/03/2024 5:39PM 23/03/2024 6:40PM

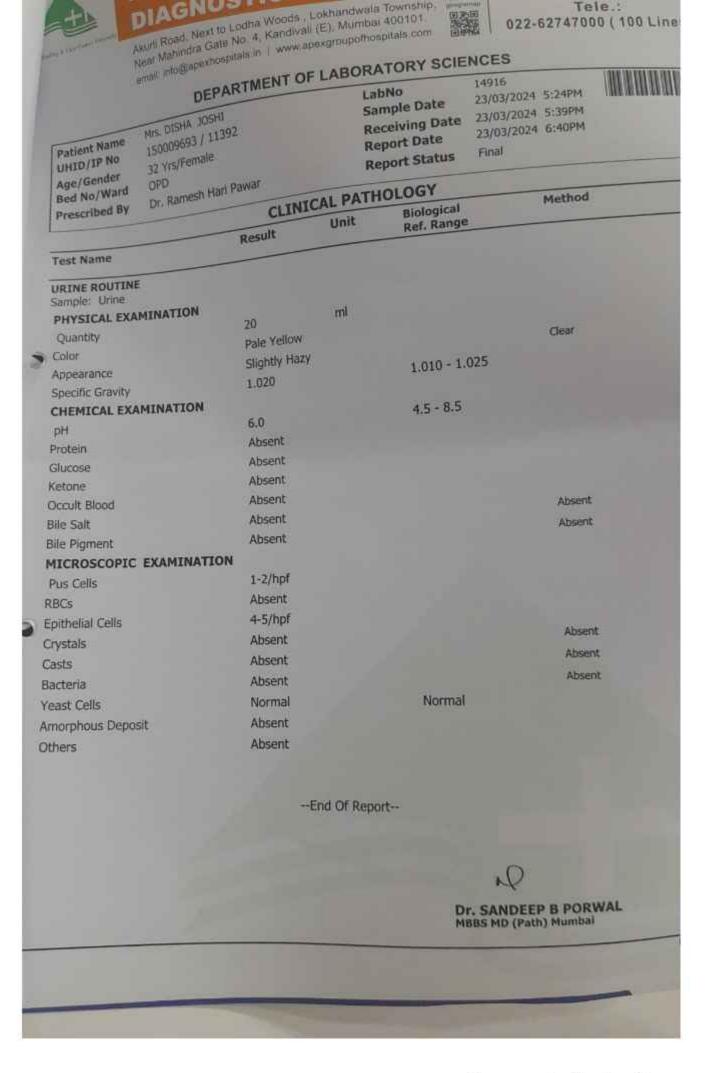
Final

	В	IOCHEMIST	RY	Method
est Name	Result	Unit	Biological Ref. Range	methox
FT (RENAL FUNCTION TEST) ample: Serum				
Dreatinine	0.96	mg/dl	0.70 - 1.50	Jaffes
JREA	19.26	mg/dl	15 - 50	CDC Urease, Colorimetric
3UN - Blood Urea Nitrogen	9	mg/dl	7 - 20	
Zalcium	8.9	mg/dl	8.6 - 10.5	Arsenazo III
Jric Acid	5.6	mm/hr	3.5 - 8.5	URICASE- PEROXIDASE
² hosphorus	4.0	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
Sodium	140.0	mEq/L	135 - 146	ISE Direct
Potassium	4.9	mEq/L	3.5 - 5.5	ISE Direct
Chloride	106.0	mEq/L	98 - 108	ISE Direct.
Protein Total	7.0	gm/dl	6.00 - 8.00	Bluret
Albumin	4.2	gm/dl	3.20 - 5.00	Bromocresol Green (BOG)
Globulin	2.80	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.50	25.00	1.00 - 2.50	Calculated Value

-- End Of Report--



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ISO 9001-2015 Certified

V015323-24/74476 WS DISHA JOSHI WYN Female STE POSPITALS KANDIVALI Sample ID Reg. Date Report Date

24036630 : 23/03/2024 : 23/03/2024



HBA1C-GLYCOSYLATED HAEMOGLOBIN

Case No.

H H	BA1C-GLYCOSYL	100W	Biological Reference Range
	Result	Unit	s s Non-disbetic
Yest Cescription	5.2	%	5.7-6.4 Pre-diabetic > 6.5 Diabetic
HDATO (EDTAWB)	(G) 102.54	mg/dL	

Estimated Average Glub

- 1 lbAtcs and to manually quadrac control. It reflects the estimated average glucose (eAG).
 2 hbAtcs and to manually quadract by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-
- If you of 6.5%.

 I had a real care a batter indicator of diabetic control than a solitary test.

 I had a real care a batter indicator of diabetic control than a solitary test.

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 I have a real care a batter indicator of diabetic control than a solitary test.

 I have a real care a batter indicator of diabetic control than a solitary test.
- to essential the eAG from the HbA1C value, the following equation is used: eAG(mg/di) = 28.7*A1o-46.7

- A For HDF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c E. Historice of Haemoglobinopathilis in HbA1c estimation.
- 8. Homograph heroglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
- C. Helmanyous water detected (D10/ Toeho G8 is corrected for HbS and HbC trait). 7. In book dabate patents, following values can be considered as a tool for monitoring the glycemic control.

Excellent Control - 6 to 7 %

Fair to Good Control - 7 to 8 %

Unsensitationy Control - 8 to 10 % and Poor Control - More than 10 % Note: Hasmoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy



Reference Range

ISO 9001-2015 Certified

Patient Id : PVD18323-24/74476

Patient MRS DISHA JOSHI Age/sex 32 Yrs/ Female

Center APEX HOSPITALS KANDIVALI

Ref. By : Self

Sample ID : Reg. Date : Report Date :

: 24036630 : 23/03/2024 : 23/03/2024

Case No.



IMMUNOASSAY

st Doscrip	otion		Result	Unit	Biological Reference Range
NAME OF TAXABLE PARTY.	4 TSH (TF	a	137.51	ng/dl	83-200
(For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim: 135.4 - 261.7
4 (Thyroxi	ne)		7.85	ug/dL	5.13 - 14.10
					For Pregnant females: First Trim: 7.33 - 14.8 Second Trim: 7.93 - 16.1 Third Trim: 6.95 - 15.7
TSH(Thyro Method : E	CLIA	ting Harmon	20/22/3	uIU/ml	0.27 - 4,20
	13/F13	TAIFTA	Suggested Interpretation fo	the Thyrold Function Tests P	altern
Within Range	Decreased				
		Within Rengii	(56%)		older illness. In elderly the group in T3 level can be upto
Raised	Within Range	Within Range	(56%)	in the range of 4.7 to 15 edUlni octhyroidism ypothyroidism	is community associated with Physiological & Eclogical
			25%. Included High TSH-especially TSH Variability. Subclinical Autoimmune Hyl- Intermittent T4 therapy for ti- Pactivery phase after Non- Chronic Autoimmune Thyto Post thyroidectomy Post ra Hypothyroid phase of trans.	in the range of 4.7 to 15 ed.Und comproided thyroided thyroided thyroided formothe condities	is community associated with Physiological & Biological
Raised	Within Range Decressed Raised	Within Range	25% - Inclated High TSH-especially TSH Variability - Subclinical Autoimmune Hyr - Intermittent T4 therapy for in - Recovery phase after Non Chronic Autoimmune Thyro - Post thyroidectomy, Post in - Hypothyroid phase of trans - Interfering antibodies to the - Intermittent T4 therapy or - Parus interference - Amodal	in the range of 4.7 to 15 edulino convroidism ypothyroidism (hytroidal filness' iddis boodine ient thyroidiss' roid formones (anti-TPO antibo '4 overdose prine, Heparin, Beta blockers, ste prine, Heparin, Beta blockers, ste	is community associated with Physiological & Biological adies)
Raised or	Within Range Decressed Raised	Within Range Decreased Rained or within	25% - Inclated High TSH-especially TSH Variability - Subclinical Autoimmune Hyr - Intermittent T4 therapy for in - Recovery phase after Non Chronic Autoimmune Thyro - Post thyroidectomy, Post in - Hypothyroid phase of trans - Interfering antibodies to the - Intermittent T4 therapy or - Parus interference - Amodal	in the range of 4.7 to 15 edulind softworks my yearbyroids m (hytroidal filtress* idns bolodine emithyroids: "roid hormones (anti-TPO antibo" 4 overdose rone, Heparin, Beta blockers, ste stly in the range of 0.1 to 0.4 of	is community associated with Physiological & Biological adies)
Raised or sother Range	Within Range Decressed Raised	Waren Range Decreased Raised or within Range Raised or within	-toniated High TSH-expecisity TSH Variability -Subdinical Autoimmune Hyr- Internation 1.4 therapy for h- Plescovery phase after NocChronic Autoimmune Thyro- Post thyroidectomy Pist in -Hypothyroid phase of trans -Interfering antizodies to th -Internation T4 therapy or -brug interference- Amioda -isolated Low TSH -expect -Subdinical Hypermyroidie -Thyroidie ingestion* -Central Hypothyroidism -Non-Thyroidia illness -Riscent treatment for Hyp	in the range of 4.7 to 15 edi.lind polityroidism (hytroidism thytroidis filtress*) didis sonodre itent thyroidist* roid hormones (anti-TPO antibot* overdose rone, Heparin, Beta blockers, ste stily in the range of 0.1 to 0.4 often antibot* overdose rone, Heparin, Beta blockers, ste stily in the range of 0.1 to 0.4 often antibot* overdose rone, Heparin, Beta blockers, ste stily in the range of 0.1 to 0.4 often antibot* overdose rounds.	is commonly associated with Physiological & Eclogical orids, roids, anti-epileolics* on seen in elderly & associated with Non-Thyroidal Energ pressed;*
Raised or within Range Decreased	Within Range Decressed Raised Raised or within Range	Waren Range Decreased Raised or within Range Raised or within Range	-toniated High TSH-expecisity TSH Variability -Subclinical Autoimmune Hyr- Intermittent 14 therapy for h- Recovery phase after NonChronic Autoimmune Tryro- Post thyroidectomy, Post ra- Hypothyroid phase of trans -Interfering antibodies to the -Interfering the TSH expect -Subclinical Hypermyroids -Thyroxine ingestion* -Central Hypothyroidistin -Non-Thyroxial illness -Recent treatment for Hyp -Primary Hypermyroids	in the range of 4.7 to 15 edition sometimes of the second	in continently associated with Physiological & Biological initia) roids, anti-optieptics* on seen in elderly & associated with Non-Thytoldal Bress pressed;*

---End Of Report-----

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahlsay west Mumbai-68 individual laboratory investigations are never conductive to should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone Partial reproduction of this report is not permitted. The test report is not valid for Medico-legal purpose.

-T3 toxicosis -Non-Thyroidal linesa

Wittin Range

DR. SANDEEP B. PORW MBBS MD (Path) Mumb MMC Reg no 20010316

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notes

Decreased

Raised

