



LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. KUJUR SHOBHIT AMIT
EC NO.	89186
DESIGNATION	DIGI CHAMP
PLACE OF WORK	SHIHORI
BIRTHDATE	03-05-1985
PROPOSED DATE OF HEALTH CHECKUP	31-03-2024
BOOKING REFERENCE NO.	23M89186100107388E

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 29-03-2024 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 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))



बैंक ऑफ कॅनाडा
Bank of Canada

शोहित अमित कुजुर
SHOEHIT AMIT KUJUR

89186



शोहित अमित कुजुर
Shoehit Amit Kujur

शोहित अमित कुजुर
Shoehit Amit Kujur

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

 **aashka**
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:	OSP33780	Date:	18/4/24	Time:	
Patient Name:	Shubhit Kumar	Age / Sex:	38/M.	Height:	170
				Weight:	72
Chief Complain:					
History:	Routine dentist check up				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:					
Extra oral :					
Intra oral – Teeth Present :	Stain ++ Calculus +				
Teeth Absent :	Canines teeth 924 / 6				
Diagnosis:					

Aashka Hospitals Ltd.

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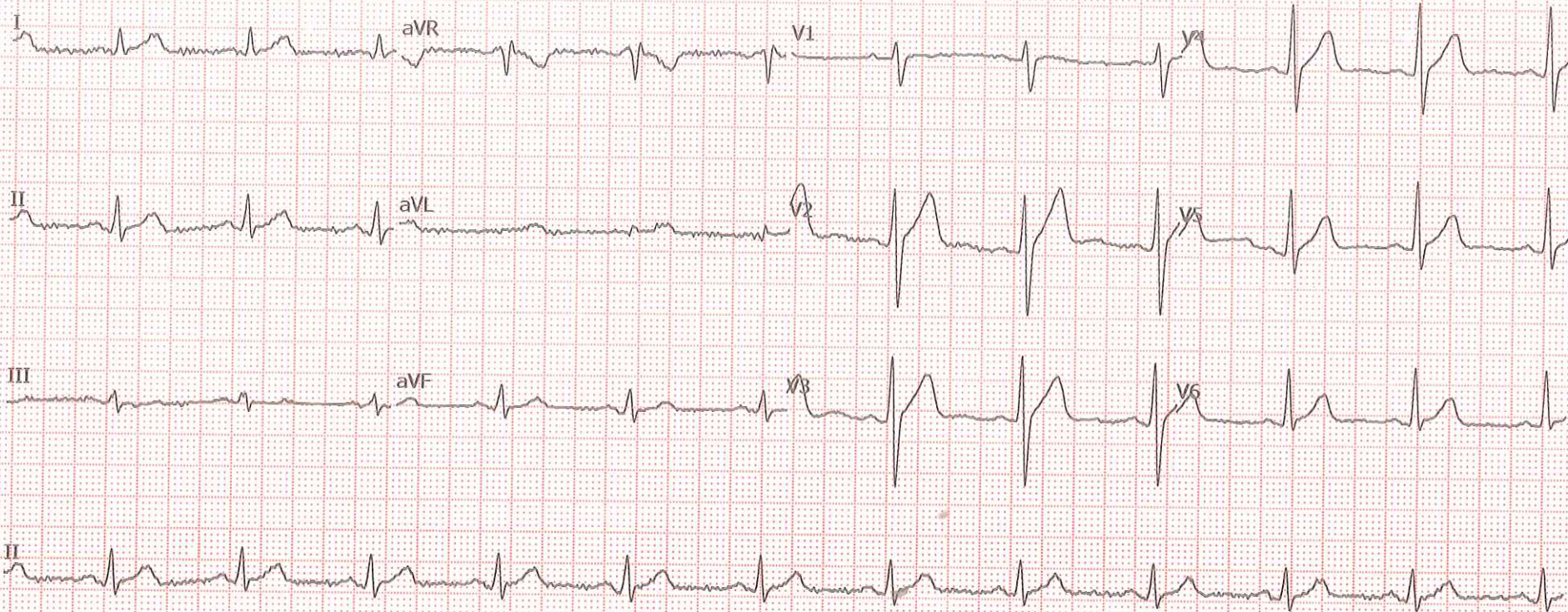
DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	OSP232780	Date:	13/04/24	Time:	11:20
Patient Name:	Shobhit Anant Wani,	Age / Sex:	38	Height:	170 cm
				Weight:	72 - Kg.
History:	c/o Combing Headh dull. Pt has gusses with 3 mm				
Allergy History:					
Nutritional Screening:	Well-Nourished / Malnourished / Obese				
Examination:	VU 26/60 6/60 VUE COMBING 6/6 6/6 2/16				
Diagnosis:	Correct vision - Normal Refractive error				

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 88 ms
QT / QTcBaz : 364 / 398 ms
PR : 142 ms
P : 92 ms
RR / PP : 834 / 833 ms
P / QRS / T : 48 / 37 / 34 degrees

Normal sinus rhythm
Normal ECG



PATIENT NAME: SHOBHIT AMIT KUJUR

GENDER/AGE: Male / 38 Years

DATE: 13/04/24

DOCTOR: DR. HASIT JOSHI

OPDNO: OSP33780

2D-ECHO

MITRAL VALVE	: MILD MVP
AORTIC VALVE	: NORMAL
TRICUSPID VALVE	: NORMAL
PULMONARY VALVE	: NORMAL
AORTA	: 34mm
LEFT ATRIUM	: 36mm
LV Dd / Ds	: 46/31mm
IVS / LVPW / D	: 10/9mm
IVS	: INTACT
IAS	: INTACT
RA	: NORMAL
RV	: NORMAL
PA	: NORMAL
PERICARDIUM	: NORMAL
VEL	: PEAK MEAN
M/S	: Gradient mm Hg Gradient mm Hg
MITRAL	: 0.9/0.7m/s
AORTIC	: 1.2m/s
PULMONARY	: 0.8m/s
COLOUR DOPPLER	: MILD MR/TR
RVSP	: 30mmHg
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.

CARDIOLOGIST

DR. HASIT JOSHI (9825012235)



LABORATORY REPORT



Name : SHOBHIT AMIT KUJUR

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Dis. At :

Case ID : 40402200306

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type :

Mobile No :

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time :

Acc. Remarks : Normal

Ref Id2 :

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	104.14	mg/dL	70.0 - 100
Glyco Hemoglobin (HbA1c)			
HbA1C	5.82	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Haemogram (CBC)			
Haemoglobin	12.6	G%	13.00 - 17.00
MCV (RBC histogram)	75.7	fL	83.00 - 101.00
MCH (Calc)	23.2	pg	27.00 - 32.00
MCHC (Calc)	30.6	gm/dL	31.50 - 34.50
Total WBC Count	3830	/ μ L	4000.00 - 10000.00
Lymphocyte	43.0	%	20.00 - 40.00
Neutrophil	1762	/ μ L	2000.00 - 7000.00
Platelet Count	89000	/ μ L	150000.00 - 410000.00
Lipid Profile			
HDL Cholesterol	39.2	mg/dL	48 - 77
Chol/HDL	4.45		0 - 4.1
LDL Cholesterol	114.74	mg/dL	0.00 - 100.00

Abnormal Result(s) Summary End

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



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR** Sex/Age : **Male / 38 Years** Case ID : **40402200306**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3513206**
 Bill. Loc. : **Aashka hospital** Pt. Loc. :
 Reg Date and Time : **13-Apr-2024 09:19** Sample Type : **Whole Blood EDTA** Mobile No :
 Sample Date and Time : **13-Apr-2024 09:19** Sample Coll. By : Ref Id1 : **OSP33780**
 Report Date and Time : **13-Apr-2024 11:50** Acc. Remarks : **Normal** Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
Haemoglobin	L 12.6	G%	13.00 - 17.00	
RBC (Electrical Impedance)	5.45	millions/cumm	4.50 - 5.50	
PCV(Calc)	41.26	%	40.00 - 50.00	
MCV (RBC histogram)	L 75.7	fL	83.00 - 101.00	
MCH (Calc)	L 23.2	pg	27.00 - 32.00	
MCHC (Calc)	L 30.6	gm/dL	31.50 - 34.50	
RDW (RBC histogram)	14.80	%	11.00 - 16.00	
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)				
Total WBC Count	L 3830	/μL	4000.00 - 10000.00	

Neutrophil	L 46.0	%	40.00 - 70.00	L 1762	EXPECTED VALUES /μL 2000.00 - 7000.00
Lymphocyte	H 43.0	%	20.00 - 40.00	1647	/μL 1000.00 - 3000.00
Eosinophil	5.0	%	1.00 - 6.00	192	/μL 20.00 - 500.00
Monocytes	6.0	%	2.00 - 10.00	230	/μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	L 89000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.07		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Microcytic hypochromic RBCS.
WBC Morphology	Leucopenia
Platelet	Thrombocytopenia
Parasite	Malarial Parasite not seen on smear.

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



Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Case ID : 40402200306

Dis. At :

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Whole Blood EDTA

Mobile No :

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time : 13-Apr-2024 14:23

Acc. Remarks : Normal

Ref Id2 :

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

ESR
Westergren Method

8

mm after 1hr 3 - 15

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

Dr. Shreya Shah

M.D. (Pathologist)

Page 3 of 13



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Case ID : 40402200306

Dis. At :

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Whole Blood EDTA

Mobile No :

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time : 13-Apr-2024 11:58

Acc. Remarks : Normal

Ref Id2 :

TEST

RESULTS

UNIT BIOLOGICAL REF RANGE

REMARKS

HAEMATOLOGY INVESTIGATIONS

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

ABO Type

A

Rh Type

POSITIVE

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

Dr. Shreya Shah

M.D. (Pathologist)

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Printed On : 13-Apr-2024 15:23



LABORATORY REPORT

Name : **SHOBHIT AMIT KUJUR** Sex/Age : **Male / 38 Years** Case ID : **40402200306**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3513206**
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : **13-Apr-2024 09:19** Sample Type : **Plasma Fluoride F, Plasma Fluoride PP** Mobile No :
 Sample Date and Time : **13-Apr-2024 09:19** Sample Coll. By :
 Report Date and Time : **13-Apr-2024 13:03** Acc. Remarks : **Normal** Ref Id1 : **OSP33780**
 TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F	H	104.14	mg/dL	70.0 - 100
Plasma Glucose - PP		108.38	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. Shreya Shah
M.D. (Pathologist)



LABORATORY REPORT

Name : **SHOBHIT AMIT KUJUR** Sex/Age : **Male / 38 Years** Case ID : **40402200306**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3513206**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : **13-Apr-2024 09:19** Sample Type : **Whole Blood EDTA** Mobile No :
 Sample Date and Time : **13-Apr-2024 09:19** Sample Coll. By : Ref Id1 : **OSP33780**
 Report Date and Time : **13-Apr-2024 10:22** Acc. Remarks : **Normal** Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Glycated Haemoglobin Estimation

HbA1C	H	5.82	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Estimated Avg Glucose (3 Mths) <i>Calculated</i>		120.33	mg/dL	Not available

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

Dr. Shreya Shah
M.D. (Pathologist)



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashika hospital

Sex/Age : Male / 38 Years

Dis. At :

Pt. Loc :

Case ID : 40402200306

Pt. ID : 3513206

Mobile No :

Reg Date and Time : 13-Apr-2024 09:19 Sample Type : Serum

Sample Date and Time : 13-Apr-2024 09:19 Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time : 13-Apr-2024 15:00 Acc. Remarks : Normal

Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	174.59	mg/dL	110 - 200	
HDL Cholesterol	L 39.2	mg/dL	48 - 77	
Triglyceride <i>Glycerol Phosphate Oxidase</i>	103.27	mg/dL	<150	
VLDL <i>Calculated</i>	20.65	mg/dL	10 - 40	
Chol/HDL <i>Calculated</i>	H 4.45		0 - 4.1	
LDL Cholesterol <i>Calculated</i>	H 114.74	mg/dL	0.00 - 100.00	

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

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



Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Case ID : 40402200306

Dis. At :

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Serum

Mobile No :

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time : 13-Apr-2024 15:13

Acc. Remarks : Normal

Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with Psp</i>	41.87	U/L	16 - 63	
S.G.O.T. <i>UV with Psp</i>	27.18	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	70.74	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	19.76	U/L	0 - 55	
Proteins (Total) <i>Colorimetric, Biuret</i>	7.69	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.90	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.79	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.8		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.52	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.20	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.32	mg/dL	0 - 0.8	

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



Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT



Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Dis. At :

Case ID : 40402200306

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Serum

Mobile No :

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Ref Id1 : OSP33780

Report Date and Time : 13-Apr-2024 15:00

Acc. Remarks : Normal

Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BUN (Blood Urea Nitrogen)
GLDH 13.2 mg/dL 8.90 - 20.60

Uric Acid
Uricase 5.59 mg/dL 3.5 - 7.2

Creatinine 0.86 mg/dL 0.50 - 1.50

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

Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT

Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Dis. At :

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Serum

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Report Date and Time : 13-Apr-2024 11:11

Acc. Remarks : Normal

Mobile No :

Ref Id1 : OSP33780

Ref Id2 :

TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

Thyroid Function Test

Triiodothyronine (T3)	83.67	ng/dL	70 - 204
Thyroxine (T4) <i>CMA</i>	6.86	ng/dL	4.87 -11.72
TSH <i>CMA</i>	1.13	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 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), 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 anti-animal 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)

Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT

Name : **SHOBHIT AMIT KUJUR**

Ref.By : HOSPITAL

Bill. Loc. : Aashka hospital

Sex/Age : Male / 38 Years

Case ID : 40402200306

Dis. At :

Pt. ID : 3513206

Pt. Loc :

Reg Date and Time : 13-Apr-2024 09:19

Sample Type : Serum

Sample Date and Time : 13-Apr-2024 09:19

Sample Coll. By :

Report Date and Time : 13-Apr-2024 11:11

Acc. Remarks : Normal

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, 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 result to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (on alternative screening test), when the s-TSH then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal 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 hyperthyroid 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

Second trimester

Third trimester

Reference range (microIU/ml)

0.24 - 2.00

0.43-2.7

0.8-2.6

	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/↑	↓

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



Dr. Shreya Shah

M.D. (Pathologist)



LABORATORY REPORT



Name : SHOBHIT AMIT KUJUR Sex/Age : Male / 38 Years Case ID : 40402200306
Ref.By : HOSPITAL Dis. At :
Bill. Loc. : Aashka hospital
Reg Date and Time : 13-Apr-2024 09:19 Sample Type : Spot Urine Mobile No :
Sample Date and Time : 13-Apr-2024 09:19 Sample Coll. By : Ref Id1 : OSP33780
Report Date and Time : 13-Apr-2024 11:10 Acc. Remarks : Normal Ref Id2 :

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	1.025		1.005 - 1.030	
pH	5.50		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	/µL	Nil	
Yeast	Nil	/µL	Nil	
Cast	Nil	/HPF	Nil	
Crystals	Nil	/HPF	Nil	

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



Dr. Shreya Shah
M.D. (Pathologist)



LABORATORY REPORT

Name : **SHOBHIT AMIT KUJUR** Sex/Age : **Male / 38 Years** Case ID : **40402200306**
 Ref.By : **HOSPITAL** Dis. At :
 Bill. Loc. : **Aashka hospital** Pt. ID : **3513206**
 Pt. Loc. :

Reg Date and Time : **13-Apr-2024 09:19** Sample Type : **Spot Urine** Mobile No :
 Sample Date and Time : **13-Apr-2024 09:19** Sample Coll. By : Ref Id1 : **OSP33780**
 Report Date and Time : **13-Apr-2024 11:10** Acc. Remarks : **Normal** Ref Id2 :

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	-	-	-	-

----- 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)

Dr. Shreya Shah
M.D. (Pathologist)

