बैंक ऑफ़ बड़ौदा
Bank of Baroda

प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

| स्वास्थ्य जांच लाभार्थी के विवरण | |
|---|---|
| नाम | NAMITABEN DEELIPSINH BHATI |
| जन्म की तारीख | 24-09-1991 |
| कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख | 09-03-2024 |
| बुकिंग संदर्भ सं. | 23M168974100091970S |
| पत्नी/पति के विवरण | |
| कर्मचारी का नाम | MR. BHATI DEELIPSINH B |
| कर्मचारी की क.कू.संख्या | 168974 |
| कर्मचारी का पद | HEAD CASHIER "E"_II |
| कर्मचारी के कार्य का स्थान | VADU |
| कर्मचारी के जन्म की तारीख | 12-11-1986 |

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **19-02-2024** से **31-03-2024** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-
(मुख्य महाप्रबंधक)
मानव संसाधन प्रबंधन विभाग
बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited)से संपर्क करें।)

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 | NAMITABEN DEELIPSINH BHATI |
| DATE OF BIRTH | 24-09-1991 |
| PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE | 09-03-2024 |
| BOOKING REFERENCE NO. | 23M168974100091970S |
| **SPOUSE DETAILS** | |
| EMPLOYEE NAME | MR. BHATI DEELIPSINH B |
| EMPLOYEE EC NO. | 168974 |
| EMPLOYEE DESIGNATION | HEAD CASHIER "E"_II |
| EMPLOYEE PLACE OF WORK | VADU |
| EMPLOYEE BIRTHDATE | 12-11-1986 |

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 **19-02-2024** 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'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))

बैंक ऑफ़ बड़ौदा
Bank of Baroda

नाम
Name Deelipsinh Bharatsinh Bhati

कर्मचारी कूट क्र.
Employee Code No. 168974

जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder

aashka HOSPITAL

# Cytological examination- Pap smear request form

Name: Namita Bhati Age: 33 yr

Complaints:

nonum

No of deliveries: 2 FTLSCS/alh

Last Delivery: 1½ yr. Tcdn

History of abortion: —

Last abortions: —

H/O medical conditions associated:

| | |
|---|---|
| DM | — |
| HTN | — |
| Thyroid | — |

MH:

Reg: Recall

LMP: 20/3/24

P/A:

P/S:

P/V: Cx (N) ✓

Sample:-

| | |
|---|---|
| Vagina | — |
| Cervix | ✓ |

Doctors Sign:-

AHL/GNR/MR/56

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 HOSPITAL

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

**UHID:** OSP33633 **Date:** 29/03/24 **Time:** 11am

**Patient Name:** Namita .. Bhatt **Age /Sex:** 33
**Height:** 168
**Weight:** 69.5

**History:**
C/O Complex myopic check up
pt have glasses BA over 10yr ago

**Allergy History:**

**Nutritional Screening: Well-Nourished / Malnourished / Obese**

**Examination:**
VA 6/18
6/24
VAC correction
6/6
6/6
N/6
Colour vision - normal

**Diagnosis:** Refractive error

Rx

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

Eye examination:

| | RIGHT | | | LEFT | | |
|---|---|---|---|---|---|---|
| | S | C | A | S | C | A |
| D | 0.50 | – | – | 0.75 | – | – |
| N | | | | | | |

Other Advice: Use glasses

Follow-up:

Consultant's Sign:

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 HOSPITAL

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

**UHID:** OSP33633 **Date:** 29/3/24 **Time:**

**Patient Name:** Nunita bhatti **Age /Sex:** 33/F
**Height:** 168
**Weight:** 69.5

**Chief Complain:**

Routine dental check up

**History:**

**Allergy History:**

**Nutritional Screening:** Well-Nourished / Malnourished / Obese

**Examination:**

**Extra oral :** → Stain +
Calculus ++

**Intra oral – Teeth Present :**

**Teeth Absent :**

**Diagnosis:**

Rx

| No | Dosage Form | Name of drug (IN BLOCK LETTERS ONLY) | Dose | Route | Frequency | Duration |
|---|---|---|---|---|---|---|
| 1 | | Dontel Rass. | | | | |
| 2 | | Hexidine gel, [illegible] | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Other Advice:

→ Scaling 500 /-

Follow-up:

Consultant's Sign: Sajan

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 HOSPITAL

29/3/24
6:10pm

Pt: Namitaben
age: 32/F
Wt: 69 kg

H- 168
W- 69.5

- No FHCO,
- Routine checkup.

T: Afebrile
P: 79/mm
BP: 110/70 mmHg
SpO2: 98% on RA.

Adv

- No specific Adv.
- ~~follow~~ Inform. SOS.
- Drink Plenty of fluid as lactating mother

Contrast 226 166 05

0459 LOT D 942 #

, Namita bhati

29.03.2024 11:13:25 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

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

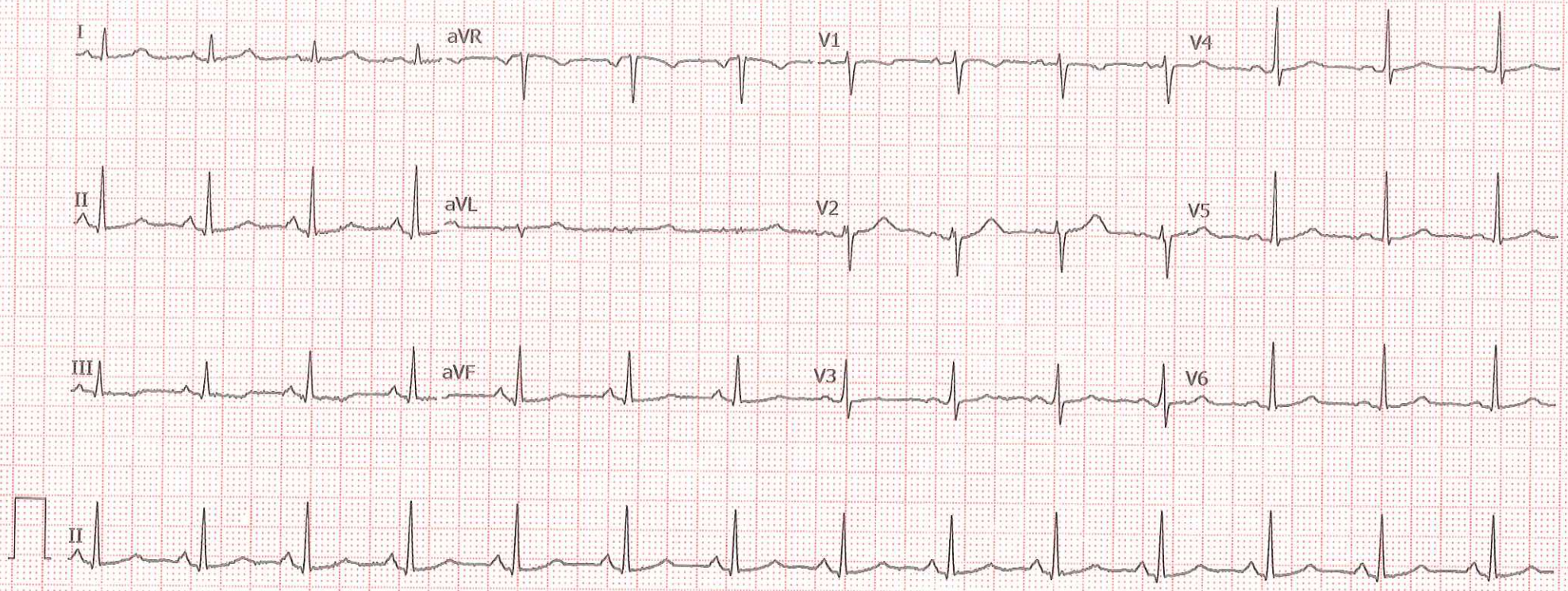
Room:

83 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

| | |
|---|---|
| QRS : | 76 ms |
| QT / QTcBaz : | 396 / 465 ms |
| PR : | 152 ms |
| P : | 112 ms |
| RR / PP : | 722 / 722 ms |
| P / QRS / T : | 68 / 67 / 37 degrees |

Normal sinus rhythm
Normal ECG




GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-40 Hz 50 Hz Unconfirmed
4x2.5x3_25_R1 1/1

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 HOSPITAL

**PATIENT NAME:NAMITABEN D BHATI**
**GENDER/AGE:Female / 32 Years** **DATE:29/03/24**
**DOCTOR:**
**OPDNO:OSP33633**

## X-RAY CHEST PA

Both lung fields appear clear
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.

**Impression:**
**Normal chest x-ray examination.**

RADIOLOGIST
DR.MEHUL PATELIYA

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 HOSPITAL

PATIENT NAME:NAMITABEN D BHATI
GENDER/AGE:Female / 32 Years
DOCTOR:
OPDNO:OSP33633

DATE:29/03/24

## SONOGRAPHY OF ABDOMEN AND PELVIS

**LIVER:** Liver appears normal in size and normal parenchymal echoes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicals 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, renal hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.
Right kidney measures about 10.4 x 4.1 cms in size.
Left kidney measures about 10.2 x 4.0 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 normal wall thickening. No evidence of bladder calculus, diverticulum or mass lesion is seen.
**UTERUS:** Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 8 mm. No evidence of uterine mass lesion is seen.
**OVARIES**: Both ovaries appear normal in size and shape. No e/o any adnexal mass seen. No e/o free fluid seen in cul-de-sac.

**COMMENT:** Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder, uterus.

RADIOLOGIST
DR.MEHUL PATELIYA

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 HOSPITAL

PATIENT NAME:NAMITABEN D BHATI
GENDER/AGE:Female / 32 Years
DOCTOR:DR.HASIT JOSHI
OPDNO:OSP33633

DATE:29/03/24

## 2D-ECHO

| | | |
|---|---|---|
| MITRAL VALVE | : MILD MVP | |
| AORTIC VALVE | : NORMAL | |
| TRICUSPID VALVE | : NORMAL | |
| PULMONARY VALVE | : NORMAL | |
| AORTA | : 30mm | |
| LEFT ATRIUM | : 34mm | |
| LV Dd / Ds | : 44/29mm | EF 65% |
| 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 | : 1/0.7m/s | |
| AORTIC | : 1.4m/s | |
| PULMONARY | : 1.0m/s | |
| COLOUR DOPPLER | : TRIVIAL MR /TR | |
| RVSP | : 26mmHg | |
| CONCLUSION | : NORMAL LV SIZE / SYSTOLIC FUNCTION. | |

CARDIOLOGIST
DR.HASIT JOSHI (9825012235)

# LABORATORY REPORT

| | | | |
|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age : **Female/ 33 Years** | Case ID : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At : | Pt. ID : 3469449 |
| Bill. Loc. | : Aashka hospital | | Pt. Loc : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Serum | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 13:58 | Acc. Remarks | : Normal | Ref Id2 | : |

## BIOCHEMICAL INVESTIGATIONS

### Liver Function Test

| TEST | | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|---|
| **S.G.P.T.** *UV with P5P* | | 33.97 | U/L | 14 - 59 | |
| **S.G.O.T.** *UV with P5P* | | 28.17 | U/L | 15 - 37 | |
| **Alkaline Phosphatase** *Enzymatic, PNPP-AMP* | | 74.03 | U/L | 46 - 116 | |
| **Gamma Glutamyl Transferase** *L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate* | | 36.03 | U/L | 0 - 38 | |
| **Proteins (Total)** *Colorimetric, Biuret* | H | 8.33 | gm/dL | 6.40 - 8.30 | |
| **Albumin** *Bromocresol purple* | | 4.72 | gm/dL | 3.4 - 5 | |
| **Globulin** *Calculated* | | 3.61 | gm/dL | 2 - 4.1 | |
| **A/G Ratio** *Calculated* | | 1.3 | | 1.0 - 2.1 | |
| **Bilirubin Total** *Photometry* | | 0.36 | mg/dL | 0.3 - 1.2 | |
| **Bilirubin Conjugated** *Diazotization reaction* | | 0.15 | mg/dL | 0 - 0.50 | |
| **Bilirubin Unconjugated** *Calculated* | | 0.21 | mg/dL | 0 - 0.8 | |

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

**Dr. Shreya Shah**
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42

| [illegible] | Contract Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | Contract Numbers |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

## LABORATORY REPORT

| | | | |
|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age : **Female/ 33 Years** | Case ID : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At : | Pt. ID : 3469449 |
| Bill. Loc. | : Aashka hospital | | Pt. Loc : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Serum | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 12:44 | Acc. Remarks | : Normal | Ref Id2 | : |

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|
| **BUN (Blood Urea Nitrogen)** *GLDH* | **10.0** | mg/dL | 7.00 - 18.70 | |
| **Uric Acid** *Uricase* | **4.34** | mg/dL | 2.6 - 6.2 | |
| **Creatinine** | **0.66** | mg/dL | 0.50 - 1.50 | |

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

**Dr. Shreya Shah**
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42



CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS

[illegible]

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible] Supratech Branches in Ahmedabad

[illegible]

[illegible] Collection Centers in Ahmedabad

[illegible]

[illegible] Center For Genomic Medicine

[illegible]

[illegible]

## LABORATORY REPORT

| | | | |
|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age : **Female/ 33 Years** | Case ID : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At : | Pt. ID : 3469449 |
| Bill. Loc. | : Aashka hospital | | Pt. Loc : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Serum | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 15:06 | Acc. Remarks | : Normal | Ref Id2 | : |

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|
| **Thyroid Function Test** | | | | |
| **Triiodothyronine (T3)** *CMIA* | **1.16** | ng/mL | 0.64 - 1.52 | |
| **Thyroxine (T4)** *CMIA* | **6.23** | µg/dL | 4.87 - 11.72 | |
| **TSH** *CMIA* | **1.24** | µIU/mL | 0.35 - 4.94 | |

**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 & incipent 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 supressed 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** | **Reference range (microIU/ml)** |
|---|---|
| First trimester | 0.24 - 2.00 |
| Second trimester | 0.43-2.2 |
| Third trimester | 0.8-2.5 |

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

**Dr. Sandip Shah**
M.D. (Path. & Bact.)
Consultant Pathologist

**Dr. Aakash Shah**
MD. Path.
Consultant Pathologist

**Dr. Sandip Shah**
M.D. (Path. & Bact.)
Consultant Pathologist

Printed On : 29-Mar-2024 16:42

[illegible]

[illegible]

[illegible] Reference [illegible]

[illegible]

[illegible]

[illegible] Reference Laboratories [illegible]

[illegible]

[illegible]

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible] Branches in Ahmedabad

[illegible]

[illegible] Collection Centers in Ahmedabad

[illegible]

[illegible] Center For Genomic Medicine

[illegible]

[illegible]

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age | : Female/ 33 Years | Case ID | : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Serum | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 15:06 | Acc. Remarks | : Normal | Ref Id2 | : |

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 (an 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 triodothyronine (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, hyperthyroidism 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 hormons vary according trimesper in pregnancy.

| TSH ref range in Pregnacy | Reference range (microIU/ml) |
|---|---|
| First triemester | 0.24 - 2.00 |
| Second triemester | 0.43-2.2 |
| Third triemester | 0.8-2.5 |

| | T3 | T4 | TSH |
|---|---|---|---|
| Normal Thyroid function | N | N | N |
| Primary Hyperthyroidism | ↑ | ↑ | ↓ |
| Secondary Hyperthyroidism | ↑ | ↑ | ↑ |
| 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. Sandip Shah
M.D. (Path. & Bact.)
Consultant Pathologist

Dr. Aakash Shah
MD. Path.
Consultant Pathologist

Dr. Sandip Shah
M.D. (Path. & Bact.)
Consultant Pathologist

Printed On : 29-Mar-2024 16:42

## LABORATORY REPORT

| | | | |
|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age : Female/ 33 Years | Case ID : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At : | Pt. ID : 3469449 |
| Bill. Loc. | : Aashka hospital | | Pt. Loc : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Spot Urine | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 11:06 | Acc. Remarks | : Normal | Ref Id2 | : |

### URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|
| Physical examination | | | | |
| Colour | Pale yellow | | | |
| Transparency | Clear | | | |
| Chemical Examination By Sysmex UC-3500 | | | | |
| Sp.Gravity | >1.025 | | 1.005 - 1.030 | |
| pH | 7.00 | | 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 | |
| Flowcytometric Examination By Sysmex UF-5000 | | | | |
| Leucocyte | 1-2 | /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)

Printed On : 29-Mar-2024 16:42

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age | : **Female/ 33 Years** | Case ID | : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Spot Urine | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 11:06 | 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 | 500 |
| Glucose | mg/dL | Negative (<30) | 30 | 50 | 100 | 300 | 1000 |
| 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/Notifications | | | | |
|---|---|---|---|---|---|---|---|
| | | | Trace | + | ++ | +++ | ++++ |
| Leukocytes (Strip) | /micro L | Negative (<10) | 10 | 25 | 100 | 500 | - |
| Nitrite(Strip) | - | Negative | - | - | - | - | - |
| Erythrocytes(Strip) | /micro L | Negative (<5) | 10 | 25 | 50 | 150 | 250 |
| Pus cells (Microscopic) | /hpf | <5 | - | - | - | - | - |
| Red blood cells(Microscopic) | /hpf | <2 | - | - | - | - | - |
| Cast (Microscopic) | /lpf | <2 | - | - | - | - | - |

**Pending Services**
Liquid Base Cytology PAP

---------- 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)

**Printed On :** 29-Mar-2024 16:42



CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS

[illegible]

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible] in Ahmedabad

[illegible]

[illegible] Collection Centers in Ahmedabad

[illegible]

[illegible] Center for Genomic Medicine

[illegible]

[illegible]

Neuberg Supratech
REFERENCE LABORATORIES
( A unit of Neuberg Diagnostics Private Limited )

LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age | : Female/ 33 Years | Case ID | : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| 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 | **112.23** | mg/dL | 70 - 100 |
| **Haemogram (CBC)** | | | |
| Lymphocyte | **41.0** | % | 20.00 - 40.00 |
| Monocyte | **181** | /µL | 200.00 - 1000.00 |
| **Lipid Profile** | | | |
| HDL Cholesterol | **42.0** | mg/dL | 48 - 77 |
| Triglyceride | **171.35** | mg/dL | <150 |
| Chol/HDL | **4.60** | | 0 - 4.1 |
| LDL Cholesterol | **117.08** | mg/dL | 0.00 - 100.00 |
| **Liver Function Test** | | | |
| Proteins (Total) | **8.33** | gm/dL | 6.40 - 8.30 |

**Abnormal Result(s) Summary End**

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

Printed On : 29-Mar-2024 16:42



CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age | : Female/ 33 Years | Case ID | : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Whole Blood EDTA | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 10:13 | Acc. Remarks | : Normal | Ref Id2 | : |

## HAEMOGRAM REPORT

| TEST | RESULTS | UNIT | BIOLOGICAL REF. INTERVAL | REMARKS |
|---|---|---|---|---|
| **HB AND INDICES** | | | | |
| **Haemoglobin** | 13.2 | G% | 12.0 - 15.0 | |
| **RBC (Electrical Impedance)** | 4.66 | millions/cumm | 3.80 - 4.80 | |
| **PCV(Calc)** | 39.84 | % | 36.00 - 46.00 | |
| **MCV (RBC histogram)** | 85.5 | fL | 83.00 - 101.00 | |
| **MCH (Calc)** | 28.4 | pg | 27.00 - 32.00 | |
| **MCHC (Calc)** | 33.2 | gm/dL | 31.50 - 34.50 | |
| **RDW (RBC histogram)** | 12.40 | % | 11.00 - 16.00 | |
| **TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)** | | | | |
| **Total WBC Count** | 6040 | /µL | 4000.00 - 10000.00 | |

| | [%] | | EXPECTED VALUES | [Abs] | | EXPECTED VALUES |
|---|---|---|---|---|---|---|
| **Neutrophil** | 53.0 | % | 40.00 - 70.00 | 3201 | /µL | 2000.00 - 7000.00 |
| **Lymphocyte** | H **41.0** | % | 20.00 - 40.00 | 2476 | /µL | 1000.00 - 3000.00 |
| **Eosinophil** | 3.0 | % | 1.00 - 6.00 | 181 | /µL | 20.00 - 500.00 |
| **Monocytes** | 3.0 | % | 2.00 - 10.00 | L **181** | /µL | 200.00 - 1000.00 |
| **Basophil** | 0.0 | % | 0.00 - 2.00 | 0 | /µL | 0.00 - 100.00 |

| | | | |
|---|---|---|---|
| **PLATELET COUNT (Optical)** | | | |
| **Platelet Count** | 319000 | /µL | 150000.00 - 410000.00 |
| **Neut/Lympho Ratio (NLR)** | 1.29 | | 0.78 - 3.53 |

**SMEAR STUDY**

| | |
|---|---|
| **RBC Morphology** | Normocytic Normochromic RBCs. |
| **WBC Morphology** | Total WBC count within normal limits. |
| **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. Shreya Shah**
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42

[illegible] of the specimen received by the laboratory [illegible]

[illegible]

[illegible] Neuberg Supratech Reference [illegible]

[illegible]

[illegible]

[illegible] Neuberg Supratech Reference Laboratories [illegible]

[illegible]

[illegible]

|  |  |
|---|---|
| [illegible] | Contact Numbers |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | Contact Numbers |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible] in Ahmedabad

[illegible]

[illegible] Collection Centers in Ahmedabad

[illegible]

[illegible] for Genomic Medicine

[illegible]

## LABORATORY REPORT

| | | | |
|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age | : **Female/ 33 Years** |
| Ref.By | : HOSPITAL | Dis. At | : |
| Bill. Loc. | : Aashka hospital | | |

| | |
|---|---|
| Case ID | : **40302200754** |
| Pt. ID | : 3469449 |
| Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Whole Blood EDTA | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 13:58 | Acc. Remarks | : Normal | Ref Id2 | : |

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|
| **ESR**<br>*Westergren Method* | 16 | mm after 1hr | 3 - 20 | |

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

**Dr. Shreya Shah**
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42

## LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age | : **Female/ 33 Years** | Case ID | : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Whole Blood EDTA | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 10:39 | 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** | **B** | | | |
| **Rh Type** | **POSITIVE** | | | |

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

**Dr. Shreya Shah**
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : **NAMITABEN D BHATI** | Sex/Age | : **Female/ 33 Years** | Case ID | : **40302200754** |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Plasma Fluoride F, Plasma Fluoride PP | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 16:39 | Acc. Remarks | : Normal | Ref Id2 | : |

| TEST | | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|---|
| **BIOCHEMICAL INVESTIGATIONS** | | | | | |
| **Blood Glucose Level (Fasting & Post Prandial)** | | | | | |
| **Plasma Glucose - F**<br>*Photometric,Hexokinase* | H | **112.23** | mg/dL | 70 - 100 | |
| **Plasma Glucose - PP**<br>*Photometric,Hexokinase* | | **119.75** | mg/dL | 70.0 - 140.0 | |

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

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer 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)

Printed On : 29-Mar-2024 16:42

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

| [illegible] | Contact Numbers |
|---|---|
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |
| [illegible] | [illegible] |

[illegible]

[illegible] in Ahmedabad

[illegible]

[illegible] Collection Centres in Ahmedabad

[illegible]

[illegible] Centre for Genomic Medicine

[illegible]

[illegible]

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age | : Female/ 33 Years | Case ID | : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |

| | | | | | |
|---|---|---|---|---|---|
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Whole Blood EDTA | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 14:19 | Acc. Remarks | : Normal | Ref Id2 | : |

## Glycated Haemoglobin Estimation

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|
| **HbA1C**<br>*HPLC* | **5.50** | % of total Hb | <5.7: Normal<br>5.7-6.4: Prediabetes<br>>=6.5: Diabetes | |
| **Estimated Avg Glucose (3 Mths)**<br>*Calculated* | **111.15** | 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:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

**Dr. Sandip Shah**
M.D. (Path. & Bact.)
Consultant Pathologist

**Dr. Aakash Shah**
MD. Path.
Consultant Pathologist

**Dr. Sandip Shah**
M.D. (Path. & Bact.)
Consultant Pathologist

Printed On : 29-Mar-2024 16:42

# LABORATORY REPORT

| | | | | | |
|---|---|---|---|---|---|
| Name | : NAMITABEN D BHATI | Sex/Age | : Female/ 33 Years | Case ID | : 40302200754 |
| Ref.By | : HOSPITAL | Dis. At | : | Pt. ID | : 3469449 |
| Bill. Loc. | : Aashka hospital | | | Pt. Loc | : |
| Reg Date and Time | : 29-Mar-2024 09:53 | Sample Type | : Serum | Mobile No | : |
| Sample Date and Time | : 29-Mar-2024 09:53 | Sample Coll. By | : | Ref Id1 | : OSP33633 |
| Report Date and Time | : 29-Mar-2024 12:44 | Acc. Remarks | : Normal | Ref Id2 | : |

## BIOCHEMICAL INVESTIGATIONS

### Lipid Profile

| TEST | | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|---|---|---|---|---|
| **Cholesterol** *Colorimetric, CHOD-POD* | | 193.35 | mg/dL | 110 - 200 | |
| **HDL Cholesterol** | L | 42.0 | mg/dL | 48 - 77 | |
| **Triglyceride** *Glycerol Phosphate Oxidase* | H | 171.35 | mg/dL | <150 | |
| **VLDL** *Calculated* | | 34.27 | mg/dL | 10 - 40 | |
| **Chol/HDL** *Calculated* | H | 4.60 | | 0 - 4.1 | |
| **LDL Cholesterol** *Calculated* | H | 117.08 | 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 |
| High 160-189 | - | - | - |

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- 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 interpreation 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 assesment

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

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 29-Mar-2024 16:42