

MRS. RITU PATIDAR

BOB

38 YEARS /FEMALE

29-03-2024

Height: 151 Cms

Weight: 56 Kg

BP: - 100/60 mmhg

Pulse: - 76/- Regular

BMI: - 24.6 kg/m²

EYE: - NORMAL

The Medical Examiner should record the findings under one of the following categories:-

FIT

UNFIT on account of



Chhabra
Dr. D. S.
M.B.B.S.,
Reg. No. 5007
Dr. D.S. CHHABRA
MBBS. MD.

MRS. RITU MUKESH PATIDAR**38 Years /F****BANK OF BARODA****29-03-2024****HEAMOGRAM**

Test Name	Results	Normal Range
Haemoglobin (HB)	11.3	11 - 16 gm%
R.B.C. Count	4.22	3.8 - 4.8 milli./cu.mm
PCV	37.6	36 - 46 %
MCV	89.10	80 - 98 fl
MCH	26.78	27 - 32 pg
MCHC	30.05	31.5 - 34.5 %
TOTAL WBC COUNT	4,600	4,000 to 11,000 /cu.mm
DIFFERENTIAL WBC COUNT	.	
Neutrophils	57	40 - 75 %
Lymphocytes	38	20 - 40 %
Monocytes	03	02 - 08 %
Eosinophils	02	01 - 05 %
Basophils	00	00 - 01 %
PLATELET COUNT	2.53	1.5 - 4 Lacs/cu.mm.
E.S.R	14	M- 0-10 at the end of 1 hr. F- 0-20 at the end of 1 hr

Dr. POOJA PRAPANNA**DR. POOJA PRAPANNA****M.D.**

Note :- All pathological tests have technical and biological limitations. Please correlate clinically as well as with other investigative findings.
A review should be requested in case of any disparity. This report is not valid for medicolegal purpose.

MRS. RITU MUKESH PATIDAR**38 Years /F****BANK OF BARODA****29-03-2024****BIOCHEMISTRY**

Test Name	Results	Normal Range
SERUM BILIRUBIN	:-	
TOTAL BILIRUBIN	0.86	0 - 1 mg/dl
DIRECT BILIRUBIN	0.12	<0.25 mg/dl
INDIRECT BILIRUBIN	0.74	< 1.0 mg/dl
S.G.O.T	25.0	0 - 45 IU/L
S.G.P.T	22.0	0 - 45 IU/L
ALKALINE PHOSPHATE	102.0	Adult - 42 - 128 IU/L Child - 150 - 630 IU/L
TOTAL PROTEIN	6.64	6.0 to 8.0 g/dl
ALBUMIN	3.84	3.2 to 5.0 g/dl
GLOBULIN	2.8	1.9 to 3.5
A:G RATIO	1.37	1.2 TO 2.3
GAMA GT	28.0	5 - 43 Iu/l

Dr Pooja Prapanna
MD
DR. POOJA PRAPANNA

MRS. RITU MUKESH PATIDAR**38 Years /F****BANK OF BARODA****29-03-2024****LIPID PROFILE**

Test Name	Results	Normal Range
TOTAL LIPIDS	485	400 - 700 mg/dl
CHOLESTROL	158.0	<200 mg/dl- Desirable 200 - 239 mg/dl - Borderline High >240 Mg/dl High
HDL CHOLESTROL	42.0	35- 60 mg/dl
TRIGLYCERIDE	119.0	<150 mg/dl Normal 150 - 199 mg/dl Borderline High 200 - 499 mg/dl High
LDL CHOLESTROL	92.2	<100 mg/dl Optimal 100- 129 mg/dl Borderline high 160 - 189 mg/dl High
VLDL CHOLESTROL	23.8	<40 mg/dl
RISK RATIO	3.76	

3 - 6

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MRS. RITU MUKESH PATIDAR
BANK OF BARODA38 Years /F
29-03-2024**URINE EXAMINATION**

Test Name	Results	Normal Range
PHYSICAL EXAMINATION		
Quantity	30 ml	
Colour	Pale Yellow	
Appearance	Clear	
Deposits	Absent	
Specific Gravity	1.015	
Reaction	Acidic	
CHEMICAL EXAMINATION		
Albumin	Nil	
Sugar	Nil	
Ketones	Absent	
Bile Pigments	Negative	
Bile Salt	Negative	
Hematuria	Negative	
MICROSCOPIC EXAMINATION		
Pus Cells	1- 2 /hpf	
Red Blood Cells	Nil/hpf	
Epithelial Cell	1 - 2 /hpf	
Crystals	Nil	
Casts	Absent	

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MRS. RITU MUKESH PATIDAR

38 Years /F

BANK OF BARODA

29-03-2024

Test Name	Results	Normal Range
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HAEMATOLOGY PROFILE

BLOOD GROUP

:-

"ABO " GROUP

"O"

Rh (D) Factor

Positive

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(Cross matching & recheck of Blood Group is mandatory before any transfusion)

SEROLOGY PROFILE

HBsAg

Non Reactive

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* Test done by screening methods.
Requires confirmation at referral centre.

BIOCHEMISTRY

FASTING BLOOD SUGAR

70.0

70 - 110 mg/dl

P.P. BLOOD SUGAR

76.0

upto 140 mg/dl

BUN

9.0

5 - 21 Mg/dl

CREATININE

0.66

0.6 - 1.4 mg\dl

URIC ACID

3.84

2.5 - 6.8 mg\dl

CALCIUM

8.78

8.5 - 10.5 mg\dl

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M.D.

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Pt. Name: **MRS. RITU MUKESH PATIDAR**
Ref. By: **BANK OF BARODA**

Age/Sex: **38 Yrs /F**
Date: **29-Mar-2024**

CYTOPATHOLOGY

Material Received :- 2 Pap Smear Prepared.

Microscopic :- Smear adequacy :- satisfactory.

epithelial cells :- Fair no. clusters of superficial and intermediate squamous epithelial cells and endocervical cells with few parabasal cells seen.

Inflammatory cells :- Few leukocytes only.

Background :- Mucinous blood mixed

Dysplastic or malignant cells not seen.

Impression :- Normal Pap Study.

Dr. POOJA PRAPANNA
MD
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M.D.

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MRS. RITU MUKESH PATIDAR

38 Years /F

BANK OF BARODA

29-03-2024

HBA1C

Test Name	Results	Normal Range
HBA1C	5.30	Normal 4-6 % Good Control 6-7 % Fair Control 7-8 % Unsatisfactory Control 8-10 % Poor Control Above 10 %

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DR. POOJA PRAPANNA
MD M.D.

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4D SONOGRAPHY • COLOR DOPPLER • ECHO • PATHOLOGY • DIGITAL X-RAY & OPG • TMT • ECG • HOLTER

MRS. RITU MUKESH PATIDAR

38 Yrs./F

BOB

29th Mar, 2024

X-RAY CHEST PA VIEW

Bony cage is normal.

Trachea is central. C.P. angles are clear.

Cardiac contour and cardiothoracic ratio are normal.

Lung fields are clear.



DR.D.S.CHHABRA.

M.D.



LABORATORY REPORT



Name : Mrs RITU MUKESH PATIDAR	Sex/Age : Female / 38 Years	Case ID : 40301608316
Ref. By :	Dis. At :	Pt. ID :
Bill. Loc. : UNIQUE DIAGNOSTIC CENTRE INDORE		Pt. Loc. :
Reg Date and Time : 29-Mar-2024 11:12	Sample Type : Serum	Mobile No. :
Sample Date and Time : 29-Mar-2024 11:12	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 29-Mar-2024 12:36	Acc. Remarks : -	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3) <small>CMIA</small>	96.94	ng/dL	58 - 159	
Thyroxine (T4) <small>CMIA</small>	7.43	µg/dL	5.5 - 11.0	
TSH <small>CMIA</small>	1.91	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), 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.

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)

Soma

Dr. Soma Yadav
M.D. (Pathology)

Dr. A Mishra
M.D. Microbiology

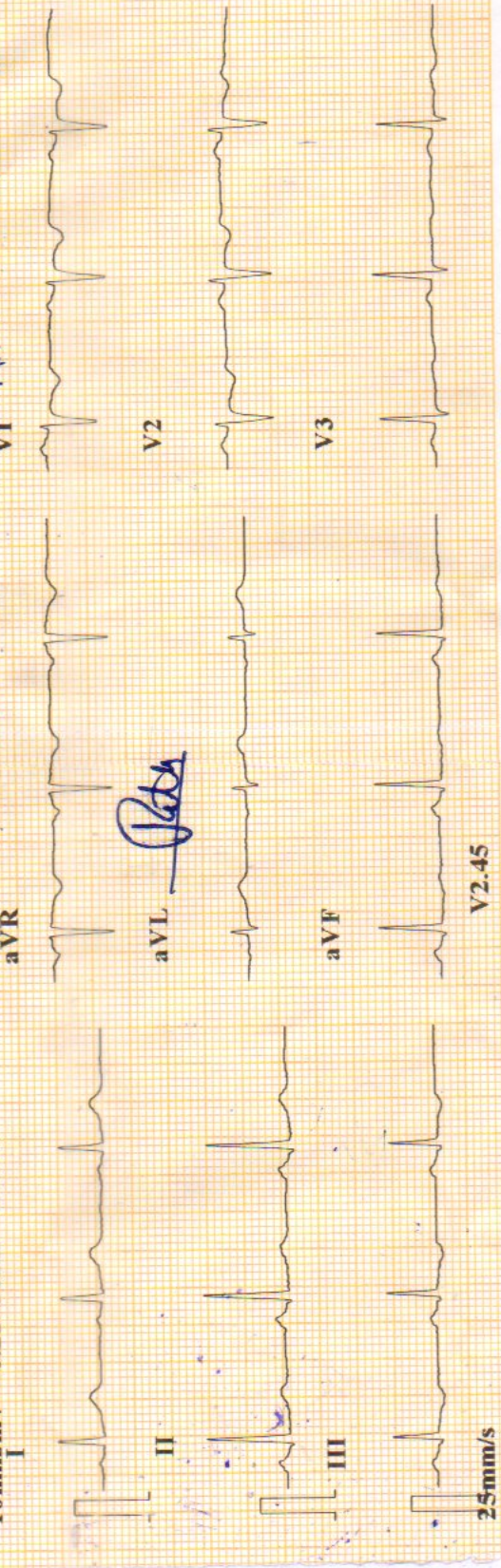
Printed On : 29-Mar-2024 12:46

Ritu Padidar

28-03-2024 10:45:30

10mm/mV 0.25-35Hz AC50

25mm/s



CARDIART

BPL

ID	: 240328-1046	Minnesota Code:	4-3-1 (V2)
Name	: Ritu Padidar	800: Sinus Rhythm	5-5-0 (II, V4, V5, V6)
Age	: 38 yr	***Normal ECG***	9-4-1 (V3)
Sex	: Female		
BP	: mmHg		
Height	: cm		
Weight	: kg		
HR	: 98 bpm	Diagnosis Information:	
P Dur	: 142 ms	800: Sinus Rhythm	
PR int	: 90 ms	***Normal ECG***	
QRS Dur	: 361/406 ms		
QT/QTc int	: 66/56/2 °		
P/QRS/T axis	: 1.197/0.729 mV		
RV5/SV1 amp	: 1.926 mV		
RV5+SV1 amp	: 1.200/0.661 mV		
RV6/SV2 amp			

Report Confirmed by:

Handwritten signature

Chhabra
B.L.M.D.
Dr. Mahendra Chourasiya
M.D., D.M. (Cardio)

Dr. Mahendra Chourasiya
M.D., D.M. (Cardio)



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