



2578844 / 2578849 **363596** 88442





2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: KALPANA M JHA

AGE/SEX:39 YRS/FEMALE

DATE: 01/04/2024

REF BY:DIRECT

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NORMAL LV DIASTOLIC DYSFUNCTION.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- TRIVIAL TR. NO PAH.
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

LA: 32MM

AO: 27MM

IVS: 11/13MM

LVPW: 10/12MM

LVID: 44/23MM

CONCLUSION:

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

DR.NIRAV BHALANI [CARDIOLOGIST]

DR.ARVIND SHARMA
[CARDIOLOGIST]

1 0265-2578844 / 2578849 **1** 63596 88442





PATIENT NAME: KALPANA JHA	
AGE/SEX: 39 YRS/F	DATE: Monday, 01 April 2024

CHEST X-RAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

IMPRESSION:

- NO SIGNFICANT ABNORMALITY NOTED IN LUNG FIELDS
- **NORMAL CARDIAC SHADOW**

DR SHARAD RUNGTA (MD & DNB)

CONSULTANT RADIOLOGIST

Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.

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PATIENT NAME: KALPANA JHA

AGE/SEX: 39 YRS/F DATE: Monday, 01 April 2024

ULTRASOUND OF ABDOMEN & PELVIS

LIVER appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No evidence of abnormal wall thickening or any significant calculus within.

PANCREAS appears normal. MPD is WNL.

SPLEEN appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size, shape and position.

Show normal cortical echogenicity. Corticomedullary differentiation is maintained.

No evidence of calculus or hydronephrosis on either side.

URINARY BLADDER is partially full. No evidence of abnormal wall thickening or any significant calculus within.

UTERUS appears normal in size and position. CET is 10.6 mm WNL. No evidence of focal lesion noted. Bilateral ovaries appear normal in size. No evidence of focal or obvious mass lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis.

No evidence of LYMPHADENOPATHY noted.

No evidence of ASCITES noted.

IMPRESSION:

• NO SIGNIFICANT ABNORMALITY AT PRESENT SCAN.

DR SHARAD RUNGTA (MD & DNB)

CONSULTANT RADIOLOGIST

 $Not \ all \ pathologies \ can \ be \ detected \ on \ ultrasound \ in \ each \ scan. \ Further \ radiographic \ evaluation \ is \ suggested \ if \ required.$







Patient Name:

Kalpana Mukulmukesh Jha

Sample No.:

20240400015

Patient ID:

20240400002

Visit No.:

OPD20240400011

Age / Sex:

39y/Female

Call. Date:

01/04/2024 08:08

Consultant:

DR SAURABH JAIN

S. Coff. Date:

01/04/2024 08:16

Ward:

Report Date:

01/04/2024 12:46

CBC, ESR

Result	Normal Value
8.6 gm/dl [L]	12.5 to 16.0 gm/dl
29.7 % [L]	37.0 to 47.0 %
60 fL [L]	78 to 100 fL
17.4 pg [L]	27 to 31 pg
29 g/dl [L]	32 to 36 g/dl
16.2 % [H]	11.5 to 14.0 %
4.95 X 10^6/ cumm	4.2 to 5.4 X 10^6/ cumm
82 % [H]	38 to 70 %
15 %	15 to 48 %
1 %	0 to 6 %
2 % [L]	3 to 11 %
0 %	0.0 to 1.0 %
100	< 100 > 100
10100 /cmm	4000 to 10000 /cmm
290000 / cmm	1,50,000 to 4,50,000 /cmm
20 mm/hr	1 to 20 mm/hr
	8.6 gm/dl [L] 29.7 % [L] 60 fL [L] 17.4 pg [L] 29 g/dl [L] 16.2 % [H] 4.95 X 10^6/ cumm 82 % [H] 15 % 1 % 2 % [L] 0 % 100 10100 /cmm 290000 / cmm



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Ward:

_

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FBS & PPBS

Investigation Result

Normal Value

Blood Sugar (FBS):

304 mg/dl [H]

74 - 100 mg/dl

Urine Sugar (FUS):

+++

Blood Sugar (PP2BS):

332 mg/dl [H]

70 to 120 mg/dl

Urine Sugar (PP2US):

++++

HBA1C

Investigation Result

Normal Value

Glycosylated Hb:

8.2 % [H]

Near Normal Glycemia: 6 to 7

Excellent Control: 7 to 8 Good Control: 8 to 9 Fair Control: 9 to 10

Poor Control: > 10

Average Plasma Glucose of Last 3

188.64

Months:

Dr.Mehul Desai M.B.D.C.P Reg.No.G-9521

Maesai



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Blood Group

Investigation

Result

Normal Value

BLOOD GROUP:

ABO

AB

Rh

Positive

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine:	0.6 mg/dl	0.6 - 1.4 mg/dl
Urea :	24 mg/ dl	13 - 45 mg/dl
Uric Acid :	3 mg/dl	3.5 - 7.2 mg/dl
Calcium :	8.6 mg/dl	8.5 - 10.5



1 0265-2578844 / 2578849 **1** 63596 88442





Patient Name:

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Sample No.:

40 to 150 U/L

7 to 35 U/L

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01/04/2024 08:08

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DR SAURABH JAIN

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01/04/2024 08:17

Ward:

Report Date :

01/04/2024 12:46

LFT (Liver Function Test)

Alkaline Phosphatase (ALP):

GAMMA GT. :

,		
Investigation	Result	Normal Value
Total Bilirubin :	0.5 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.3 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.2 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT):	11 U/L	5 to 34 U/L
ALT (SGPT):	16 U/L	0 to 55 U/L
Total Protein (TP) :	7 g/dL	6.4 to 8.3, g/dl
Albumin (ALB):	4.2 g/dl	3.5 to 5.2 g/dl
Globulin:	2.8 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.5	

92 U/L

15 U/L



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20240400015

Patient ID:

20240400002

Visit No.: Call. Date: OPD20240400011 01/04/2024 08:08

Age / Sex: Consultant:

39y/Female DR SAURABH JAIN

S. Coll. Date:

01/04/2024 08:17

Ward:

Report Date: 01/04/2024 12:46

Lipid Profile

Investigation

Result

Normal Value

Sample:

Fasting

Sample Type:

Normal

Cholesterol (Chol):

206 mg/dl [H]

Low risk: < 200

Moderate risk: 200 - 239

High risk : > or = 240

Triglyceride:

120 mg/dl

Normal: < 200.0

High: 200 - 499

Very High: > or = 500

HDL Cholesterol:

37 mg/dl [L]

Low risk: >or = 60 mg/dL

High risk: Up to 35 mg/dL

LDL:

145 mg/dl [N]

131.0 to 159.0(N)

< 130.0(L)

> 159.0(H)

VLDL:

24 mg/dl

Up to 0 to 34 mg/dl

LDL/HDL Ratio:

3.92

Low risk: 0.5 to 3.0

Moderate risk: 3.0 to 6.0 Elevted level high > 6.0

Total Chol / HDL Ratio:

5.57

Low Risk: 3.3 to 4.4

Average Risk: 4.4 to 7.1

Moderate Risk: 7.1 to 11.0

High Risk: > 11.0

Total Lipids:

663 mg/dl

400 to 700 mg/dl

Note: - Lipemic samples give high triglyceride value and falsely low LDL value.



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Sample No.:

20240400015

Patient ID : Age / Sex :

Consultant:

20240400002

DR SAURABH JAIN

39y/Female

le Call. Da

Visit No. : Call. Date : OPD20240400011 01/04/2024 08:08

S. Coll. Date :

01/04/2024 08:17

Report Date :

01/04/2024 12:46

Urine R/M

Ward:

Investigation Result Normal Value

Quantity -:

20 ml

Colour - :

Pale Yellow

Reaction (pH):

6.0

4.6-8.0

Turbidity:

Clear

Deposit:

Absent

Absent

Sp.Gravity:

1.020

1.005-1.010

Protein :

Absent

Absent

Glucose:

Present (+++)

Absent

Bile Salts :

Absent

Absent

Bile pigments :

Absent

Absent

Ketones:

Absent

Absent

Urobilinogen:

Absent

Blood:

Absent

Absent

Pus Cells :

0-1 /hpf

0-5/hpf

Red Blood Cells :

Absent /hpf

Absent

Epithelial Cells:

1-2 /hpf

CONDITIONS OF REPORTING

- 1. The reported results are for the referring doctor's information only. Isolated results may not confirm the final diagnosis of a disease and should be interpreted with patient's clinical history, keeping in mind the limitations of methodology and technology. Partial reproduction of these reports are illegal.
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- 6. Results relate only to the sample tested. Result of laboratory tests may very from laboratory to laboratory and also in some parameters from time to time for the same patient; may be due to physiological variations, different methodology, technology & its limitations etc.
- 7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolysed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
- 8. In unanticipated circumstances (non-availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule. However USL(B). LLP. will ensure that the delay is minimized.
- 9. The sex of the fetus will not be revealed as per the Prenatal Diagnostic Technique (Regulation and Prevention of Misuse Act, 1994)
- 10. Tests parameters marked by asterisks (*) are excluded from the "scope" of NABL accredited tests.
- 11. It is mandatory to send Biopsy/Histopathology specimen in 10% formalin.
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- 13. These reports are not valid for medico-legal purposes.
- 14. Any queries regarding possible interpretation / clinical pathological correlation from referring doctor/patient should be directed to the pathologists.
- 15. Subject to Baroda Jurisdiction only.

GENERAL PRINCIPLES OF LABORATORY TESTING & LABORATORY REFERENCE RANGES

- 1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are so ifficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
- 2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
- 3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
- 4. Negative laboratory test results do not necessary rule out a clinical diagnosis.

TEAM OF DOCTORS

Dr. Girish Gupta, MD (Path)

Dr. Ankit Jhaveri MD (Path)

Dr. Rachna Parekh DCP

Dr Priya Mangukiya MD (Microbiology)

Dr. Varsha Raimalani, PhD

Dr. Nehal Tiwari MD (Path)

Dr. Usha Amliyar DCP

Dr. Rakesh Shah MD (Path), DCP

Dr. Vishal Jhaveri, DCP

Dr. Hetal Parikh MD (Path) FRCPath (UK)

Dr. Mitesh Rathwa MD (Path)

Dr. Shreyas Nisarta MD (Path)

Dr. Vaishali Bhatt, DCP

Dr. Manjari Bhabhor DCP

OUR UNITS

- a) Aayu Path Lab (Tarsali) 9376224836, 7043940202
- b) Purak Hi-Tech Lab (Nizampura) 7229046350, 9377559900
- c) Dr. Jhaveri Laboratory (Akota) 0265-2329428, 9998724579
- d) Dr. Jhaveri Laboratory (Polo Ground) 0265-2424335, 9725282172
- e) Jhaveri Advanced Path Lab (Subhanpura)
- f) Jhaveri Advanced Path Lab (Waghodiya road)







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Home Visit / OPD Reception: 9998724579

TEST REPORT

40401000145 Reg. No.

Reg. Date : 01-Apr-2024 12:44

Collected On

: 01-Apr-2024 12:44

Name

: Ms. KALPANA JHA

Approved On

: 01-Apr-2024 14:05

Age

: 39 Years

Gender

Dispatch At

Ref. By Location

: Female Ref No :

Tele No.

: SAVITA SUPERSPECIALTY HOSPITAL @ WAG: ODIYA ROAD

Test Name	Results	Units	Bio. Ref. Interval
	THYROID FUNCT	TON TEST	
T3 (triiodothyronine)	1.04	ng/mL	0.6 - 1.81
Method:CLIA			
T4 (Thyroxine)	9.10	µg/dL	4.5 - 12.6
Method: CLIA			
TSH (ultra sensitive)	1.466	µIU/mL	0.55 - 4.78
Method:CLIA			
Sample Type:Serum			

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the amerior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low

TSH levels During Pregnancy:

First Trimester: 0.1 to 2.5 µIU/mL Second Trimester: 0.2 to 3.0 µIU/mL Third trimester: 0.3 to 3.0 µIU/mL

Referance: Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Sounders,2012:2170

End Of Report

This is an electronically authenticated report.

Test done from collected sample.

Printed On: 01-Apr-2024 14:06

We are open 24 x 7 & 365 days

Dr. Višhal Jhaveri Reg. G-13041 LLP Identification Number: AAN-8932 Page 1 of 1

We are open 24 x 7 & 365 days

LLP Identification Number: AAN-8932









Examination by Physician

Name: KALPANA MUKULMUKESH JHA Reg. No: 20240400002
Age/ Sex: 39/FEMALE DOE: 1-04-24
Physical Examination 7 3 9 9
Height: 168C.m Weight: Taky BMI: 77.99
Temperature: N Pulse: 95 BP: 1:46 88 SP07-987
ChiefComplaints:
Back pain radiating to UL
PastHistory: K196 - Disbetes - on Methorson 500 aD
et is intolerent to oral iron.
Examination:
General Examination:
Systemic Examination:
Investigation: H6-8.6 RBS FBS-884, 8P2-332, H6A.C-8.21.
ECG
Others
Advice: X ray, Cervical spine, Thyroid profile. Ortho opinion. Signature
Ortho opinion. Signature

Reformin 500 1-07

Didde OT. Metformin 500 1-07

Teneli 20 100

ST. Pantocid L 101.

Syp Mucaine gel 24sf TD: AC

× 18day

T. Dan MR. 1-01. x8day



Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019

0265-2578844 / 2578849 63596 88442

mh@savitahospital.com savitahospital.com





Examination by Ophthalmologist

Name: KALPANA MUKULMUKESH JHA Reg.	No: <u>20240400002</u>
Age/ Sex: <u>39/FEMALE</u>	OOE: <u>01-04-2024</u>
Present Complaints:	
Medical History: Kldo DM - Onk	
Examination of Eye: Right LEFT	
External Examination:	
Anti seg Examination:	
Schiot Tonometry IOP:	
Fundus:	
Without Glass Distant Vision:	
Near Vision:	-
Near Vision: N_6 N_6	
Colour Vision (With Ishihara Chart): WNL	
Impression:	
Advice: _ Class use	
- Dilated fundus everlus	ution for
DR screening advised Signature:	PSharte
	LADODARA



71866





Date: 17/09/2016



कत्पना झा Kalpana Jha जन्म तिथि/DOB: 14/01/1985 महिला/ FEMALE

5315 8393 5515

VD: 9159 0780 5839 9403 मेरा आधार, मेरी पहचान यान े स्टब्स



आरतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India



त द्वारा: मुकुल मुकेश, ग्योफ़ेसर कॉलोनी, पंचमुखी बजरंगबली ठ के पास, अपर बिलासी पोस्ट देवघर थाना देवघर जिला ठ देवघर, देवघर, देवघर, ड झारखण्ड - 814112

BAddress:

BC/O: Mukui Mukesh, proffesor colony, near panchmukhi bajrangbii, upper bilasi post edeoghar thana deoghar dist deoghar, Deoghar,

Deoghar, Deoghar,

Alharkhand - 814112



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VID: 9159 0780 5839 9403





