

(12)



भारत सरकार

Government of India



सुमन राय

Suman Ray

जन्म तिथि / DOB : 02/02/1984

महिला / Female



9375 8784 6693

आधार - आम आदमी का अधिकार

- To establish identity, authenticate online.
- Aadhaar is proof of identity, not of citizenship.

INFORMATION

ID: 89

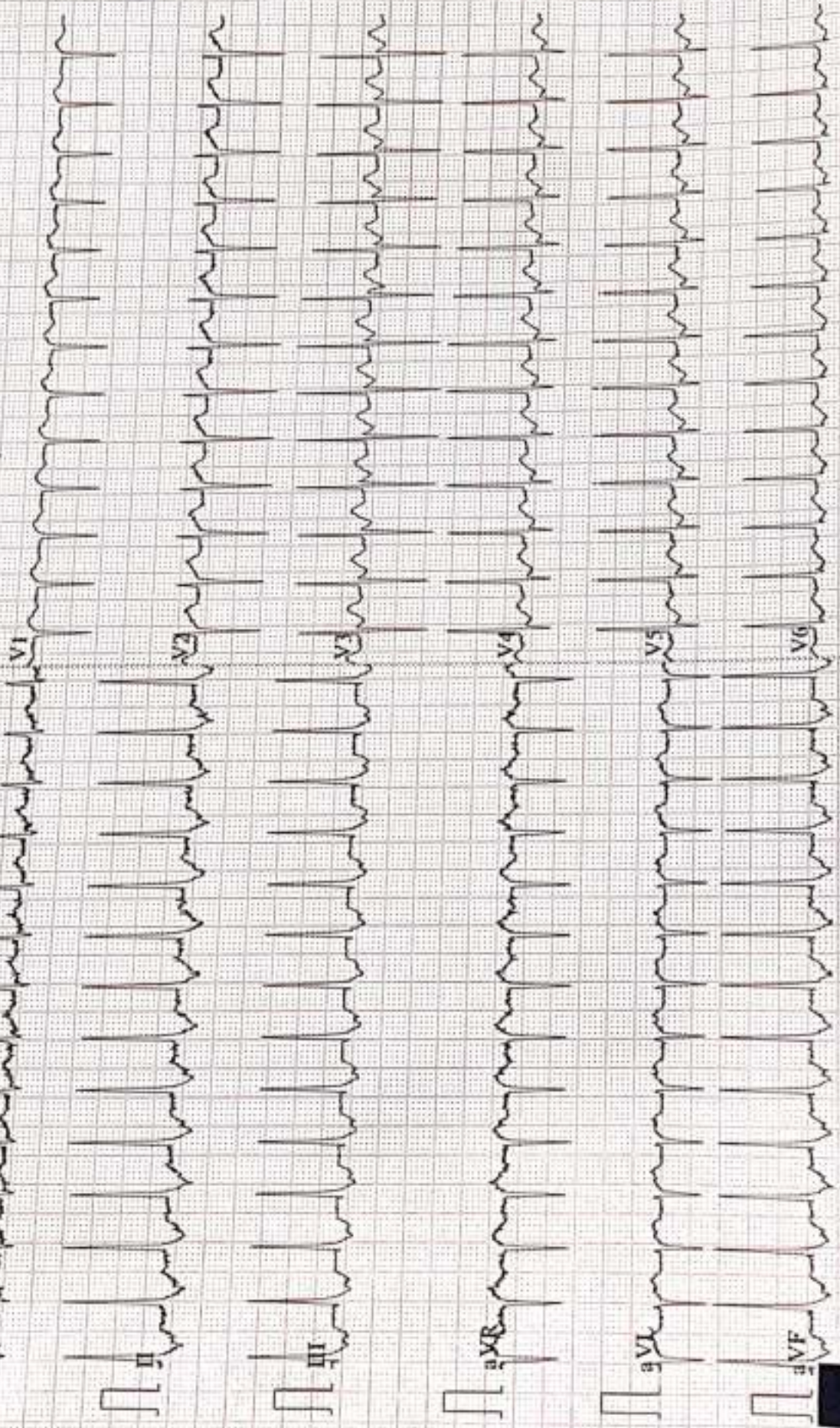
SUMAN RAY  
Female 39Years

26-12-2023 11:09:45 AM 12

HR	: 162	bpm
P	: 0	ms
PR	: 0	ms
QRS	: 80	ms
QT/QTc	: 273/449	ms
P-QRS-T	: 0/80/-71	°
RV5/SV1	: 1.400/0.995	mV

Diagnosis Information:  
 Sinus Tachycardia  
 QS Wave in lead V1  
 Middle ST Depression(II,aVF)  
 Low T Wave(V4,V5,V6)

Ref-Phys. :  
 Report Confirmed by:





Name :- Suman Ray  
Refd by :- Corp.

Age/Sex:-39Yrs/F  
Date :-26/12/23

Thanks for referral.

## REPORT OF USG OF WHOLE ABDOMEN

- Liver** :- Normal in size(8.7cm) with normal echotexture. No focal or diffuse lesion is seen. IHBR are not dilated. PV is normal in course and calibre with echofree lumen.
- G. Bladder** :- It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge.
- CBD** :- It is normal in calibre & is echofree.
- Pancreas** :- Normal in shape, size & echotexture. No evidence of parenchymal / ductal calcification is seen. No definite peripancreatic collection is seen.
- Spleen** :- Normal in size(6.9cm) with normal echotexture. No focal lesion is seen. No evidence of varices is noticed.
- Kidneys** :- Both kidneys are normal in shape, size & position. Sinus as well as cortical echoes are normal. No evidence of calculus, space occupying lesion or hydronephrosis is seen.  
Right Kidney measures 8.3cm and Left Kidney measures 8.4cm.
- U. Bladder**:- It is echofree. No evidence of calculus, mass or diverticulum is seen.
- Uterus** :- Normal in size (7.3cm x 3.0cm) and anteverted in position with **Mild thickned cervical endometrium with minimal collection seen in it- Fearure are S/O Early Cervicitis.**
- Ovaries** :- Both ovaries show normal echotexture and follicular pattern. Right ovary measures 35mm x 16mm and Left ovary measures 35mm x 18mm.  
No pelvic (POD) collection is seen.
- Others** :- No ascites or abdominal adenopathy is seen.  
No free subphrenic / basal pleural space collection is seen.

**IMPRESSION:-** *Mild thickned cervical endometrium with minimal collection seen in it- Fearure are S/O Early Cervicitis.  
Otherwise Normal Scan.*

*Dr. U. Kumar*  
**MBBS, MD (Radio-Diagnosis)**  
**Consultant Radiologist**



ISO 9001 : 2015

# AAROGYAM DIAGNOSTICS

(A UNIT OF CULPAM HEALTH CARE PVT. LTD.)

F- 41, PC. Colony, Opp. Madhuban Complex,  
Near Malahi Pakari Chowk, Kankarbagh, Patna - 20

9264278360, 9065875700, 8789391403

info@aarogyamdiagnostics.com

www.aarogyamdiagnostics.com

Date	26/12/2023	Srl No.	14	Patient Id	2312260014
Name	Mrs. SUMAN RAY	Age	39 Yrs.	Sex	F
Ref. By	Dr.BOB				

Test Name	Value	Unit	Normal Value
BOB			
HBA1C	5.0	%	

### EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1C
Good Control	=	5.5 - 6.8 % HbA1C
Fair Control	=	6.8-8.2 % HbA1C
Poor Control	=	>8.2 % HbA1C

### REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia

The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose.

It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1C** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

\*\*\*\* End Of Report \*\*\*\*

Dr.R.B.RAMAN  
MBBS, MD  
CONSULTANT PATHOLOGIST



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<b>Date</b>	<b>26/12/2023</b>	<b>Srl No. 14</b>	<b>Patient Id 2312260014</b>
<b>Name</b>	<b>Mrs. SUMAN RAY</b>	<b>Age 39 Yrs.</b>	<b>Sex F</b>
<b>Ref. By Dr.BOB</b>			

Test Name	Value	Unit	Normal Value
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	10.5	gm/dl	11.5 - 16.5
TOTAL LEUCOCYTE COUNT (TLC)	7,900	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	59	%	40 - 75
LYMPHOCYTE	33	%	20 - 45
EOSINOPHIL	03	%	01 - 06
MONOCYTE	05	%	02 - 10
BASOPHIL	00	%	0 - 0
ESR (WESTEGREN'S METHOD)	15	mm/1st hr.	0 - 20
R B C COUNT	3.52	Millions/cmm	3.8 - 4.8
P.C.V / HAEMATOCRIT	31.5	%	35 - 45
M C V	89.49	fl.	80 - 100
M C H	29.83	Picogram	27.0 - 31.0
M C H C	33.3	gm/dl	33 - 37
PLATELET COUNT	2.28	Lakh/cmm	1.50 - 4.00
BLOOD GROUP ABO	"B"		
RH TYPING	POSITIVE		
BLOOD SUGAR FASTING	72.6	mg/dl	70 - 110
SERUM CREATININE	0.73	mg%	0.5 - 1.3
BLOOD UREA	23.0	mg /dl	15.0 - 45.0
SERUM URIC ACID	3.8	mg%	2.5 - 6.0
<b><u>LIVER FUNCTION TEST (LFT)</u></b>			



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<b>Name</b>	<b>Mrs. SUMAN RAY</b>	<b>Age 39 Yrs.</b>	<b>Sex F</b>
<b>Ref. By Dr.BOB</b>			

Test Name	Value	Unit	Normal Value
BILIRUBIN TOTAL	0.59	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin)	0.20	mg/dl	0.00 - 0.40
UNCONJUGATED (I.D.Bilirubin)	0.39	mg/dl	0.00 - 0.70
TOTAL PROTEIN	6.6	gm/dl	6.6 - 8.3
ALBUMIN	3.4	gm/dl	3.4 - 5.2
GLOBULIN	3.2	gm/dl	2.3 - 3.5
A/G RATIO	<b>1.063</b>		
SGOT	18.7	IU/L	5 - 35
SGPT	8.9	IU/L	5.0 - 45.0
ALKALINE PHOSPHATASE IFCC Method	91.6	U/L	35.0 - 104.0
GAMMA GT	20.5	IU/L	6.0 - 42.0
<b>LFT INTERPRET</b>			
<b><u>LIPID PROFILE</u></b>			
TRIGLYCERIDES	31.0	mg/dL	25.0 - 165.0
TOTAL CHOLESTEROL	97.7	mg/dL	29.0 - 199.0
H D L CHOLESTEROL DIRECT	35.2	mg/dL	35.1 - 88.0
V L D L	6.2	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	<b>56.3</b>	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	2.776		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.599		0.00 - 3.55
THYROID PROFILE			
QUANTITY	20	ml.	



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<b>Name</b>	<b>Mrs. SUMAN RAY</b>	<b>Age</b>	<b>39 Yrs.</b>	<b>Sex</b>	<b>F</b>
<b>Ref. By</b>	<b>Dr.BOB</b>				

Test Name	Value	Unit	Normal Value
COLOUR	PALE YELLOW		
TRANSPARENCY	CLEAR		
SPECIFIC GRAVITY	1.030		
PH	6.5		
ALBUMIN	NIL		
SUGAR	NIL		
<b>MICROSCOPIC EXAMINATION</b>			
PUS CELLS	1-3	/HPF	
RBC'S	NIL	/HPF	
CASTS	NIL		
CRYSTALS	NIL		
EPITHELIAL CELLS	2-4	/HPF	
BACTERIA	NIL		
OTHERS	NIL		

Assay performed on enhanced chemi lumenescence system ( Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.



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Age 39 Yrs.

Sex F

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Test Name	Value	Unit	Normal Value
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.			
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.			

\*\*\*\* End Of Report \*\*\*\*

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Sex F

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Test Name	Value	Unit	Normal Value
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**BIOCHEMISTRY**

BLOOD SUGAR PP

104.5

mg/dl

80 - 160

\*\*\*\* End Of Report \*\*\*\*

Dr.R.B.RAMAN  
MBBS, MD

CONSULTANT PATHOLOGIST



MC-2024

Lab Facility : Unipath House, Besides Sahjanand College, Opp. Kamdhenu Complex, Panjarapole, Ambawadi, Ahmedabad-380015 Gujarat  
Phone: +91-79-49006800 | WhatsApp: 6356005900 | Email: info@unipath.in | Website: www.unipath.in  
Regd. Office : 5th Floor, Doctor House, Nr. Parimal Garden, Ahmedabad-380006 Gujarat  
CIN: U85195GJ2009PLC057059



31204100349

**TEST REPORT**

<b>Reg.No</b> : 31204100349	<b>Reg.Date</b> : 28-Dec-2023 12:43	<b>Collection</b> : 28-Dec-2023 12:43
<b>Name</b> : SUMAN		<b>Received</b> : 28-Dec-2023 12:43
<b>Age</b> : 39 Years	<b>Sex</b> : Female	<b>Report</b> : 28-Dec-2023 13:49
<b>Referred By</b> : AAROGYAM DIAGNOSTICS @ PATNA		<b>Dispatch</b> : 28-Dec-2023 14:10
<b>Referral Dr</b> : □	<b>Status</b> : Final	<b>Location</b> : 41 - PATNA

Test Name	Results	Units	Bio. Ref. Interval
<b>THYROID FUNCTION TEST</b>			
T3 (triiodothyronine), Total <small>CMLA</small>	0.92	ng/mL	0.70 - 2.04
T4 (Thyroxine), Total <small>CMLA</small>	7.94	µg/dL	5.5 - 11.0
TSH (Thyroid stimulating hormone) <small>CMLA</small>	1.407	µIU/mL	0.35 - 4.94

**Sample Type:** Serum

**Comments:**

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing 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

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

----- End Of Report -----

*(Signature)*

**Dr. Avani Patel**  
M.D. Biochemistry  
Reg No.- G-34103