

INDUSTRIAL HEALTH SERVICES

Beena Justine 46 yrs) female 08/03/2024

No fresh conglaints. No comosbidities No PIH.

NO SIH.

com/n-Menopouse at 43 yrs of age.

G2P2 female 2 died in 14rof age. female, 254rs, F7WD, healthy.

The done +14 - father - DM mother - HTN BP-100/60 mm/kg P- 60 (min

SPO, -981.

pt is fit and can resume her normal duties

consult with physician for blood enger cholesteros, vidi saised,







Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

Name - Mrs. BEENA JUSTINE	Age - 46 Y/F
Ref by Dr Siddhivinayak Hospital	Date - 08 /03/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

No significant abnormality seen.

Adv.: Clinical and lab correlation.

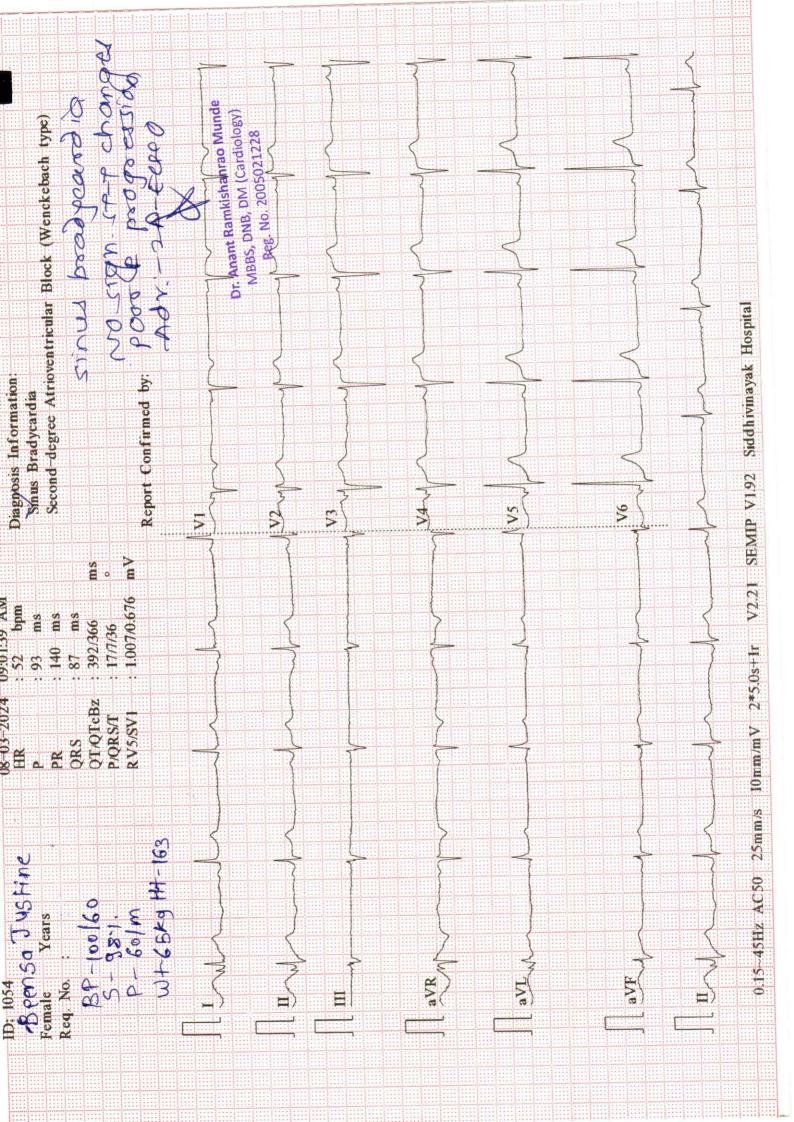
DR. AMOL BENDRE
MBBS: DMRE

CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.











Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

Name - Mrs. Beena Jsutine	Age - 46 Y/F
Ref by Dr Siddhivinayak Hospital	Date - 08/03/2024

USG-BOTH BREASTS

Real time sonography of both breast was performed with high frequency probe.

Both breast show normal, medium level, homogeneous echotexture. No evidence of any solid or cystic focal mass lesion.

No evidence of calcification noted.

The pectorallis major muscles appear normal.

No evidence of axillary lymphadenopathy seen.

IMPRESSION:

No significant abnormality is noted.

Thanks for the referral.....

DR. AMOL BENDRE
MBBS; DMRE
CONSULTANT RADIOLOGIST





OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE

BEENA JUSTINE

AGE

46

DATE - 08.03.2024

Spects: With Glasses

	RT Eye	Lt Eye
NEAR	N/6	N/6
DISTANT	6/6	6/6
Color Blind Test	NORMAL	

SIDDHIVINAYAK HOSPITALS





Imaging Department

Name - Mrs. Beerra Justine Doppler	Age - 46 Y/F
Ref by Dr Siddhivinayak Hospital	Date - 08/03/2024

USG ABDOMEN & PELVIS

FINDINGS:

The liver dimension is enlarged in size.(17.1 cm) It appears normal in morphology with normal echogenicity. No evidence of intrahepatic ductal dilatation.

The GB-gallbladder is distended normally with no stones within.

The CBD- common bile duct is normal. The portal vein is normal.

The pancreas appears normal in morphology.

The **spleen** is normal in size (8.6 cm) and morphology

Both ${\bf kidneys}$ demonstrate normal morphology. Both kidneys show normal cortical echogenicity.

The right kidney measures 9.6 x 3.9 cm.

The left kidney measures 9.9 x 4.2 cm.

Urinary bladder: normally distended. Wall thickness - normal.

Uterus: is post menopausal status

No free fluid is seen.

IMPRESSION:

Hepatomegaly

DR. AMOL BENDRE

MBBS; DMRE

CONSULTANT RADIOLOGIST









Imaging Department
Sonography | Colour Doppler | 3D / 4D USG

ECHOCARDIOGRAM

NAME	MRS. BEENA JUSTIN
AGE/SEX	46 YRS/F
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	08/03/2024

2D/M-MODE ECHOCARDIOGRAPHY

VALVES: MITRAL VALVE:	CHAMBERS: LEFT ATRIUM: Normal Left atrial appendage: Normal
 AML: Normal PML: Normal Sub-valvular deformity: Absent 	LEFT VENTRICLE: Normal • RWMA: No
AORTIC VALVE: Normal No. of cusps: 3	Contraction: Normal RIGHT ATRIUM: Normal
PULMONARY VALVE: Normal TRICUSPID VALVE: Normal	RIGHT VENTRICLE: Normal RWMA: No Contraction: Normal
GREAT VESSELS: • AORTA: Normal • PULMONARY ARTERY: Normal	SEPTAE: • IAS: Intact • IVS: Intact
CORONARIES: Proximal coronaries normal	VENACAVAE: • SVC: Normal
CORONARY SINUS: Normal PULMONARY VEINS: Normal	IVC: Normal and collapsing >20% with respiration PERICARDIUM: Normal

MEASUREMENTS:

AORT	٨.	LEFT VENTR	ICLE STUDY	RIGHT VENTR	CICLE STUDY
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	34 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	50.2 mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	32.0 mm	RVEF	%
Ascending aorta	mm	IVSd	7.4 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	7.4 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	65 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	14.9 mm





COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MRS. BEENA JUSTIN	
AGE/SEX	46 YRS/F	
REFERRED BY	SIDDHIVINAYAK HOSPITAL	
DATE OF EXAMINATION	08/03/2024	

	MITRAL	TRICUSPID	AORTIC	PULMONARY
	MITRAL	1110	1.33	0.92
FLOW VELOCITY (m/s)				
PPG (mmHg)				
MPG (mmHg)				
VALVE AREA (cm²)				
DVI (ms)			_	
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/				
DECELERATION TIME (ms)			_	
PHT (ms)				-
VENA CONTRACTA (mm)		mo ny		
REGURGITATION		TRJV= m/s PASP= mmHg		
E/A	1.5			
E/E'	9.1			

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 65 %)
- Good RV systolic function
- Normal diastolic function
- · All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

ADVICE: Nil

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB, DM (CARDIOLOGY)

INTERVENTIONAL CARDIOLOGIST

Dr. Anant Ramkishanrao Munde MBBS, DNB, DM (Cardiology)
Reg. No. 2005021228



Ref By



: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

: Mrs. BEENA JUSTINE (A) Name

Collected On : 8/3/2024 9:19 am

Lab ID. : 186072

. 8/3/2024 9:29 am Received On

Reported On : 8/3/2024 9:34 pm

Age/Sex : 46 Years / Female

: FINAL

Report Status

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDA SE)	224.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	33.6	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease :>=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	129.3	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	26	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	165	mg/dL	Optimal:<100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High: 160 - 189mg/dl. Very high:>= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	4.91		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	6.67		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 1 of 13





Collected On Name : Mrs. BEENA JUSTINE (A)

Lab ID. : 186072

Age/Sex : 46 Years / Female

Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / : 8/3/2024 9:19 am

. 8/3/2024 9:29 am Received On Reported On : 8/3/2024 9:34 pm

Report Status : FINAL

COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
HEMOGLOBIN	12.8	gm/dl	12.0 - 15.0	
HEMATOCRIT (PCV)	38.4	%	36 - 46	
RBC COUNT	4.4	x10^6/uL	4.5 - 5.5	
MCV	87	fl	80 - 96	
MCH	29.1	pg	27 - 33	
MCHC	33	g/dl	33 - 36	
RDW-CV	12.5	%	11.5 - 14.5	
TOTAL LEUCOCYTE COUNT	5620	/cumm	4000 - 11000	
DIFFERENTIAL COUNT				
NEUTROPHILS	56	%	40 - 80	
LYMPHOCYTES	35	%	20 - 40	
EOSINOPHILS	03	%	0 - 6	
MONOCYTES	06	%	2 - 10	
BASOPHILS	00	%	0 - 1	
PLATELET COUNT	298000	/ cumm	150000 - 450000	
MPV	10.2	fl	6.5 - 11.5	
PDW	16	%	9.0 - 17.0	
PCT	0.300	%	0.200 - 0.500	
RBC MORPHOLOGY	Normocytic Normo	ochromic		
WBC MORPHOLOGY	Normal			
PLATELETS ON SMEAR	Adequate			
Marker I - EDTA Mile I - Diagram Teatre	dense and Automobile City	De LOUILO DO	and District according	

Method: EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method). Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT ------

Checked By

Priyanka Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 2 of 13



Ref By



Collected On : 8/3/2024 9:19 am Name : Mrs. BEENA JUSTINE (A) . 8/3/2024 9:29 am

Lab ID. Received On : 186072 : 8/3/2024 9:34 pm

Reported On Age/Sex : 46 Years / Female

Report Status : FINAL

URINE ROUTINE EXAMINATION

TEST NAME UNIT REFERENCE RANGE **RESULTS**

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

VOLUME 20ml

COLOUR Pale Yellow Pale Yellow

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

APPEARANCE Slightly hazy Clear

CHEMICAL EXAMINATION

REACTION Acidic Acidic

(methyl red and Bromothymol blue indicator)

1.005 - 1.022 SP. GRAVITY 1.010

(Bromothymol blue indicator)

PROTEIN Absent Absent

(Protein error of PH indicator)

BLOOD Absent Absent

(Peroxidase Method)

SUGAR Absent Absent

(GOD/POD)

KETONES Absent Absent

(Acetoacetic acid)

BILE SALT & PIGMENT Absent Absent

(Diazonium Salt)

UROBILINOGEN Normal Normal

(Red azodye)

LEUKOCYTES Absent Absent

(pyrrole amino acid ester diazonium salt)

Negative

(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)

MICROSCOPIC EXAMINATION

RED BLOOD CELLS Absent / HPF Absent **PUS CELLS** 1-2 / HPF 0 - 5 **EPITHELIAL** 4-6 / HPF 0 - 5

CASTS Absent

Checked By

SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 3 of 13





Name : Mrs. BEENA JUSTINE (A) **Collected On** : 8/3/2024 9:19 am

. 8/3/2024 9:29 am Lab ID. Received On : 186072

: 8/3/2024 9:34 pm Reported On Age/Sex : 46 Years / Female

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 4 of 13



Collected On : 8/3/2024 9:19 am Name : Mrs. BEENA JUSTINE (A)

Lab ID. : 186072

Age/Sex : 46 Years / Female

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

. 8/3/2024 9:29 am

Reported On : 8/3/2024 9:34 pm

Report Status : FINAL

Received On

IMMUNO ASSAY

	TEST NAME	RESULTS	UNIT	REFERENCE RANGE		
	TFT (THYROID FUNCTION TEST)					
	SPECIMEN	Serum				
	Т3	95.43	ng/dl	84.63 - 201.8		
	T4	5.78	μg/dl	5.13 - 14.06		
	TSH	1.02	μIU/ml	0.270 - 4.20		
DONE ON FULLY AUTOMATED ANALYSER COBAS e411.						
	INTERPRETATION	T3 (Trijodo Thyronine)	T4 (T	hyroxine)		

INTERPRETATION T3 (Triiodo Thyronine) T4 (Thyroxine)

AGE	RANGE	AGE	RANGES
1-30 days	100-740	1-14 Days	11.8-22.6
1-11 months	105-245	1-2 weeks	9.9-16.6
1-5 years	105-269	1-4 months	7.2-14.4
6-10 years	94-241	4-12months	7.8-16.5
11-15 years	82-213	1-5 years	7.3-15.0
15-20 years	80-210	5-10 years	6.4-13.3
		11-15 years	5.6-11.7

TSH(Thyroid stimulating hormone)

AGE	RANGES
0-14 Days	1.0-39
2 weeks -5 mg	onths 1.7-9.1
6 months-20 y	ears 0.7-6.4
Pregnancy	
1st Trimester	0.1-2.5
2nd Trimester	0.20-3.0

3rd Trimester 0.30-3.0

INTERPRETATION:

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 5 of 13



Name : Mrs. BEENA JUSTINE (A) **Collected On** : 8/3/2024 9:19 am

. 8/3/2024 9:29 am Lab ID. Received On : 186072

: 8/3/2024 9:34 pm Reported On Age/Sex : 46 Years / Female

Report Status : FINAL : SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 6 of 13





: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Name : Mrs. BEENA JUSTINE (A) **Collected On** : 8/3/2024 9:19 am

Lab ID. : 186072

. 8/3/2024 9:29 am Received On

Reported On : 8/3/2024 9:34 pm

Age/Sex : 46 Years / Female

: FINAL

Report Status

HAEMATOLOGY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

BLOOD GROUP

Ref By

SPECIMEN WHOLE BLOOD EDTA & SERUM

* ABO GROUP 'B'

RH FACTOR **POSITIVE**

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

----- END OF REPORT -----

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 7 of 13





: Mrs. BEENA JUSTINE (A) Name

Collected On

: 8/3/2024 9:19 am

Lab ID. : 186072 Received On Reported On . 8/3/2024 9:29 am

Age/Sex : 46 Years

/ Female

: 8/3/2024 9:34 pm

Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

*RENAL FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA	14.4	mg/dL	13 - 40
(Urease UV GLDH Kinetic)			
BLOOD UREA NITROGEN	6.73	mg/dL	5 - 20
(Calculated)			
S. CREATININE	0.66	mg/dL	0.6 - 1.4
(Enzymatic)			
S. URIC ACID	4.3	mg/dL	2.6 - 6.0
(Uricase)			
S. SODIUM	137.0	mEq/L	137 - 145
(ISE Direct Method)			
S. POTASSIUM	4.00	mEq/L	3.5 - 5.1
(ISE Direct Method)	00.0	E/I	00 110
S. CHLORIDE	98.0	mEq/L	98 - 110
(ISE Direct Method) S. PHOSPHORUS	3.43	ma/dl	2.5 - 4.5
(Ammonium Molybdate)	5.45	mg/dL	2.3 - 4.3
S. CALCIUM	9.3	mg/dL	8.6 - 10.2
(Arsenazo III)	3.3	g, a.	0.0 10.2
PROTEIN	6.57	g/dl	6.4 - 8.3
(Biuret)		<u>.</u>	
S. ALBUMIN	3.8	g/dl	3.2 - 4.6
(BGC)			
S.GLOBULIN	2.77	g/dl	1.9 - 3.5
(Calculated)			
A/G RATIO	1.37		0 - 2
calculated			
NOTE	BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.		

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 8 of 13



Name : Mrs. BEENA JUSTINE (A) **Collected On** : 8/3/2024 9:19 am

Lab ID. [:] 186072

. 8/3/2024 9:29 am Received On

Age/Sex : 46 Years / Female Reported On : 8/3/2024 9:34 pm

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS / Ref By

Report Status : FINAL



Peripheral smear examination

TEST NAME RESULTS

SPECIMEN RECEIVED WHOLE BLOOD EDTA **RBC** Normocytic, Norochromic

WBC Total leukocytes count is normal on smear.

> **NEUTROPHILS:56%** LYMPHOCYTES:35% EOSINOPHILS:03% MONOCYTES:06% BASOPHILS:00% Adequate on smear

HEMOPARASITE No parasites seen Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

PLATELET

Priyanka Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 9 of 13





Name : Mrs. BEENA JUSTINE (A) **Collected On**

: 8/3/2024 9:19 am

Lab ID.

: 186072

: 46 Years

Received On Reported On . 8/3/2024 9:29 am

Age/Sex

/ Female

: 8/3/2024 9:34 pm

Ref By

: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Report Status : FINAL

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
TOTAL BILLIRUBIN	0.41	mg/dL	0.2 - 1.2	
(Method-Diazo)				
DIRECT BILLIRUBIN	0.19	mg/dL	0.0 - 0.4	
(Method-Diazo)				
INDIRECT BILLIRUBIN	0.22	mg/dL	0 - 0.8	
Calculated				
SGOT(AST)	14.5	U/L	0 - 37	
(UV without PSP)				
SGPT(ALT)	10.3	U/L	UP to 40	
UV Kinetic Without PLP (P-L-P)				
ALKALINE PHOSPHATASE	54.0	U/L	42 - 98	
(Method-ALP-AMP)				
S. PROTIEN	6.57	g/dl	6.4 - 8.3	
(Method-Biuret)				
S. ALBUMIN	3.8	g/dl	3.5 - 5.2	
(Method-BCG)				
S. GLOBULIN	2.77	g/dl	1.90 - 3.50	
Calculated				
A/G RATIO	1.37		0 - 2	
Calculated				

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By

Priyanka_Deshmukh

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 10 of 13



: SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

Name : Mrs. BEENA JUSTINE (A) **Collected On** : 8/3/2024 9:19 am

Lab ID. : 186072

. 8/3/2024 9:29 am Received On

Ref By

Reported On : 8/3/2024 9:34 pm

Age/Sex : 46 Years / Female

Report Status : FINAL

НΔ	EM	ΔΤ	OI	O	GY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>ESR</u>			
ESR	10	mm/1hr.	0 - 20

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 11 of 13



Name : Mrs. BEENA JUSTINE (A)

Lab ID. : 186072

Age/Sex : 46 Years / Female

Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

: 8/3/2024 9:19 am Collected On

. 8/3/2024 9:29 am Received On

Report Status : FINAL

Reported On

: 8/3/2024 9:34 pm

BIOCH	EMIS	TRY
-------	------	-----

TEST NAME	RESULTS	UNIT	REFERENCE RANGE	
GAMMA GT	31.1	U/L	5 - 55	
BLOOD GLUCOSE FASTING & PP				
BLOOD GLUCOSE FASTING	94.4	mg/dL	70 - 110	
BLOOD GLUCOSE PP	99.1	mg/dL	70 - 140	

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

- 1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
- 2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

INTERPRETATION

- Normal glucose tolerance : 70-110 mg/dl

- Impaired Fasting glucose (IFG): 110-125 mg/dl

- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)

- Normal glucose tolerance: 70-139 mg/dl - Impaired glucose tolerance: 140-199 mg/dl

- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS

- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED	5.8	%	Hb A1c
HAEMOGLOBIN)			> 8 Action suggested
			< 7 Goal
			< 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	119.8	mg/dL	65.1 - 136.3
METHOD	Particle Enhanced Immi		

Checked By

SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 12 of 13

^{***}Any positive criteria should be tested on subsequent day with same or other criteria.



Collected On : 8/3/2024 9:19 am Name : Mrs. BEENA JUSTINE (A)

. 8/3/2024 9:29 am Lab ID. Received On : 186072

Reported On : 8/3/2024 9:34 pm Age/Sex : 46 Years / Female

Report Status : FINAL Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS /

BIOCHEMISTRY

UNIT REFERENCE RANGE TEST NAME **RESULTS**

HbA1c: Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes. Average Blood Glucose (A.B.G) is calculated value from HbA1c: Glycosylated hemoglobin concentration in whole Blood. It indicates average blood sugar level over past three months.

Result relates to sample tested, Kindly correlate with clinical findings.

Checked By SHAISTA Q

DR. SMITA RANVEER. M.B.B.S.M.D. Pathology(Mum) **Consultant Histocytopathologist**

Page 13 of 13