

DR. DILIP B GHEEWALA

M.D. (Medicine)

Reg No: G 17770,

Mo: 9825338408

Consultant Physician & Ex. Professor Of Medicine

OPD Days: Monday, Saturday

OPR NO:

Shalby MD Physician Clinic

Patient Name:- *Raeesma Rafik sayed*

Age / Sex :- *52 F SR*

Chief Complaints:-

*hypothyroidism
taking eutroxy
150mg daily*

Date: *7/1/24*

Weight:- *93 kg*

Height:- *154 cm*

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Drug / Food Allergy:-

Past History :-

NAD

Pulse:- *78 b/min*

BP:- *120/80 mmHg*

SpO2:- *100%*

Family History:-

Systemic Examination:-

*RS }
CVS }
PA }
CNS } NAD*

Provisional Diagnosis:-

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India. | Ph.: 0261-7190000 | Email : info.surat@shalby.org

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org

CIN: L85110GJ2004PLC044667

Investigation :-

Pl. admit her
under my care
for parenteral drug
therapy
next week

Treatment and further advices:-
(Write in Capital Letters)

Rx
Tab. Sildenafil M 30
50:500
1 tab. before
breakfast

DM + Tab. Rybelsus 3mg 30
Weight loss.
1 tab. at 7.0 AM

Tab. glycomet SR 500mg 30
with half glass of
water

Follow Up: T. Rosuvastatin 20mg 30 1 tab. before
cholest. 1 tab after dinner
બધી દવાઓ ડિનરને બાદીને લેવી.

Date: _____

Incase of emergency please report to Emergency Department of Hospital OR Call: 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



DR. RUJUTA SHELAT

Consultant Ophthalmologists

Reg. No.:- G-48712

Name:-

Rugbana Rafia Sayid.

Date:- 7/09/24.

Chief Complaints:-

Routine Eye check up
Watering, Blurring of vision, itching eye



Pain Assessment:-

Past History:-

Family History:-

Allergy:-

Bacterial c/sx 2017
Kantidine Glaucoma 2019
Antibiotic high power

Personal History:- Habits:- Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:-

HT:- WT:-

Visual Acuity:-

6/60
6/60

PH Vision:-

Hypothyroid: 15 yrs
on 16yr
Acidity 8-10yr
on 4.

NCT < 18
18

R - 7.50/- 1.50x 05 46
L - 5.00/- 1.50x 160 66

Add + 2.25 on R.

ON Examination

Ant. Segment

Both Eye

WTR

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CIN: L85110GJ2004PLC044667

Cornea

Lens

Fundus

} work

Anterior Chamber

Rt. EYE

Lt. EYE

Media:-

Disc: -

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Investigation:-

pt
Compound myopic Astigmatism
in myopic

Treatment:-

New pair of glasses

BE

Refresh Logon gel ud

Nutritional Assessment:-

o - o - o - o

Preventive Care & Counselling:-

Follow Up ON:-

2 months / 502

Signature of the Consultant

Dr.

DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laprosopic Surgeon
Infertily Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- *Rujana*
Chief Complaints:-

Date: *7/9/22*
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

2
Clapostmepause
bleeding.

M/H:- *(pt do not remember dates exactly)* LMP:-

O/H:- *As per H/O - she has menses (spotty 2-3 times after 1yr of stoppage of menses)*

P/H:-
F/H
Examination:-

O/H - P/L

1st menses | 20 | 25/12 | 6
2nd menses | 20 | 24/12 | 6

Provisional Diagnosis:-

pla-soft

pls - Co healthy

RAI taken

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Treatment & Further Advices:-
(Write in Capital Letters)

Investigaion Advised:-

Rx.

- CANDID ointment - (1)
24 times a day - today
- Candid powder - (1)
- TAB PRIMASA 1000mg - (30)
1-0-0

Adv
D&C +
biopsy
next sat.

8460659501
/

Follow Up:

Date: _____

Incase of emergency Please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096

Numeric Rating Scale



Wong-Baker FACES® Pain Rating Scale



Pre - op

Post - op

Health Check-up

Date : 7/9/24

Patient Reg. No. : _____

Patient Name : Ruchama Sur-ed Age / Sex : 52/F

Address : Surat

Complaints :

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History :

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication :

On Examination :

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sitzings 1 2 3 Deep Perio Surgery : _____

Restoration : _____ Class V Fillings : _____

RCT : _____ Extraction : _____

Dentures : _____ Partial Denture : _____

Implants : _____ Crown & Bridge Present : _____

Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in a well maintained.

hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.

After knee replacement any treatment should be done under "Antibiotic Coverage"

Adv.: Scaling

Jodan 7/3/20

Dr. Darshini V. Shah
(Consultant Dental Surgeon)

Patient's Name: Ruqsana Rafik Sayed**UHID:273935****Age: 52 yrs / Female****Date: 07 / 09 / 2024****ECHOCARDIOGRAPHY REPORT****Valves:-****Mitral valve :Normal, No MR****Aortic valve :Normal, No AR****Tricuspid valve :Normal, No TR****Pulmonary valve:Normal, No PR****Chambers:-****Left Atrium:Normal****Right Atrium:Normal****Right Ventricle:Normal size cavity, Good RV systolic function With TAPSE:22****Left Ventricle: Normal size cardiac chambers, No Regional wall Motion abnormality.
Normal LV systolic function
with Ejection Fraction 60 %.
Grade I Diastolic Flow Pattern.****Septae:-****IVS: Intact. No residual VSD.****IAS :Intact.****Pericardium:Normal.****IVC:12 mm with more than 50% collapsibility.****OTHER FINDINGS :- Bilateral lung angle clear****CONCLUSION:-**

- Normal LV Systolic function
- No RWMA
- Grade I LVDD
- EF 60 %

**DR.SUSHIL YADAV**
Consultant Clinical cardiologist**Note : Normal echo study does not rule out underlying Coronary artery disease****SHALBY HOSPITAL, SURAT**

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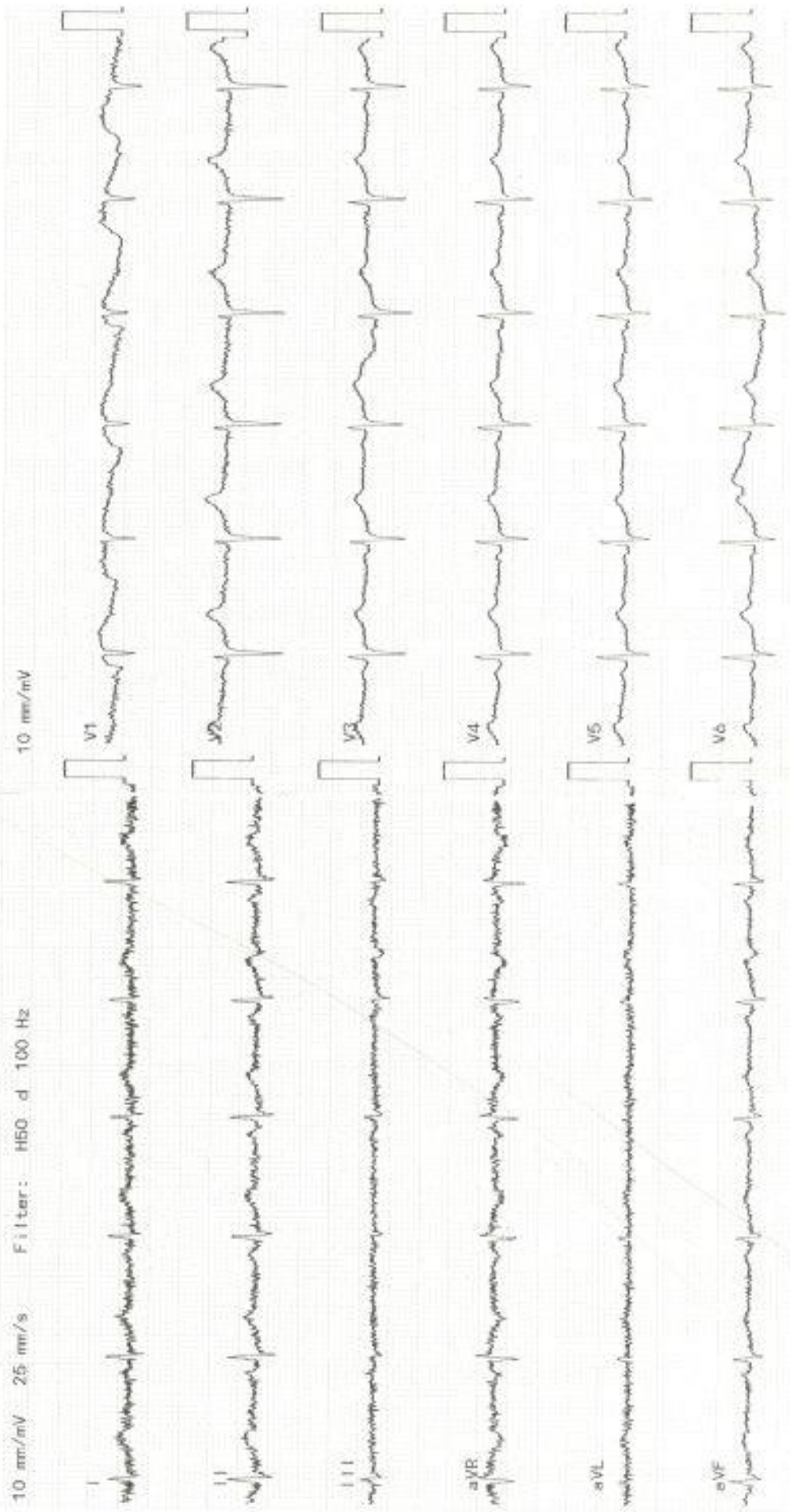
ID: _____ Name: _____ Birth date: _____ / _____ / _____ years

Sex: M cm kg
Indication: _____
Symptoms: _____
History: _____
Heart rate: 77 bpm
PR int: 138 ms
QRS dur: 82 ms
P/QTc(E) int: 384/ 416 ms
P/QRS/T axis: 56/ 22/ 42 °
RV5/SV1 amp: 0.50/ 0.49 mV
RV5+SV1 amp: 0.99 mV

1100 Sinus rhythm
0102 ARTIFACT PRESENT
9110 ** normal ECG **

Puksema sybil

Unconfirmed Report
Reviewed by: _____



Patient Name: RUQSANA RAFIK SAYED	UHID: 273935
Age / Sex: 52 Yrs. / Female	Study: USG Abdomen + Pelvis
Referred By: Dr. at shalby hospital	Date: 07.09.2024

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver is normal in size and appearance. It shows increased in echotexture .S/o Grade I fatty liver. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. Portal vein appears normal.

Gall bladder Post cholecystectomy status.

CBD appears normal.

Pancreas appears normal in size and echotexture.
Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Urinary bladder well distended and appears normal. No evidence of any intraluminal mass or calculi.

Uterus appears normal in size. The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- Grade I fatty liver.

Thanks for referrals.

DR.NITIN DESAI
(CONSULTANT RADIOLOGIST)

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CIN: L85110GJ2004PLC044667

Patient ID:	SUR0000273935	Patient Name:	RUQSANA R SAYED
Age:	52 Years	Sex:	F
Accession Number:	9015 MHC	Modality:	DX
Referring Physician:	DR SHALBY	Study:	CHEST PA
Study Date:	7-Sep-2024		

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

- No significant abnormality seen.

Thanks for referral.


DR. NITIN DESAI
(CONSULTANT RADIOLOGIST)

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Certificate No. - BC-000


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PID : SUR0000273935 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Ruqsana Rafik Saiyed /	Registered On : 07-Sep-2024 08:42 AM
Lab ID : 409900508	Collected On : 07-Sep-2024 08:49 AM
Gender/Age : Female / 52 Years	DOB : 12-Jan-1972
Received On : 07-Sep-2024 08:54 AM	Sample Type : EDTA Whole Blood
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <small>Colorimetric Non Cyanide</small>	10.5	g/dL	12.0 - 15.0
RBC COUNT <small>Electrical Impedance</small>	4.29	mill/cmm	3.8 - 4.8
HCT <small>Calculated</small>	32.7	%	36 - 46
MCV <small>Calculated based on the RBC histogram</small>	76.3	fL	83 - 101
MCH <small>Calculated</small>	24.5	pg	27 - 32
MCHC <small>Calculated</small>	32.1	g/dL	31.5 - 34.5
RDW <small>Calculated</small>	14.2	%	11.6 - 14.0

TOTAL LEUCOCYTE COUNT

Total WBC Count <small>Electrical Impedance</small>	7020	cells/cmm	4000 - 10000
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DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)

NEUTROPHILS <small>Flow Cytometry</small>	58	%	40 - 80
LYMPHOCYTES <small>Flow Cytometry</small>	31	%	20 - 40
EOSINOPHILS <small>Flow Cytometry</small>	7	%	1 - 6
MONOCYTES <small>Flow Cytometry</small>	4	%	2 - 10
BASOPHIL <small>Flow Cytometry</small>	0	%	0 - 2

PLATELET INDICES

PLATELET COUNT <small>Electrical Impedance</small>	367000	/cmm	150000 - 410000
MPV <small>Calculated based on PLT Histogram</small>	8.9	fL	7.5 - 12.0

PERIPHERAL SMEAR EXAMINATION

RBCs	Mild hypochromic and microcytic.
WBCs	Total and differential leucocyte counts are within normal limit
PLATELETS	Adequate in number and normal in morphology.
MALARIAL PARASITE	Malarial parasites are not seen on smear examination.

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference interval: Dacie and Lewis practical haematology 11th edition.

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Generated On : 07-Sep-2024 12:35 PM

Approved On : 07-Sep-2024 11:24 AM

Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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Tel: 0261 7190000 | Ext: 851 | Mo: 9512036048 | Email: pathology.surat@shalby.in | Web: www.shalby.org

PID : SUR0000273935 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Ruqsana Rafik Saiyed /	Registered On : 07-Sep-2024 08:42 AM
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Ref. By : Health Check Up Shalby	Received On : 07-Sep-2024 08:54 AM
	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"
RH Type	POSITIVE

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	Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour <small>Modified Westergren Method</small>	34	mm in 1 hour	0 - 30
HBA1C HbA1c - Glycated Haemoglobin <small>Boronate Affinity Assay</small>	7.7	%	Non-diabetic: ≤ 5.6 Pre-diabetic: 5.7-6.4 Diabetic: ≥ 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5
Estimated Average Glucose (eAG) (mg/dL) <small>Calculated</small>	174	mg/dL	

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Dr Pankaj Agrawal
 M.B., D.C.P
 Consulting Pathologist



Certificate No.: NC-406

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 Lab ID : 409900508 Collected On : 07-Sep-2024 08:49 AM
 Gender/Age : Female / 52 Years DOB : 12-Jan-1972 Received On : 07-Sep-2024 09:19 AM
 Ref. By : Health Check Up Shalby Sample Type : Fluoride F, Urine (PP),
 Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
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PLASMA GLUCOSE LEVEL

FASTING PLASMA GLUCOSE

Plasma Glucose (F)	165	mg/dL	74 - 106
---------------------------	------------	-------	----------

GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (F)	ABSENT	mg/dL	Absent
------------------------	---------------	-------	--------

Glucose-oxidase/oxidase reaction

POST PRANDIAL PLASMA GLUCOSE

Plasma Glucose (PP)	188	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
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GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric

Urine Sugar (PP)	PRESENT[++]	mg/dL	Absent
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Glucose-oxidase/oxidase reaction

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Dr Pankaj AgrawalM.B., D.C.P.
Consulting Pathologist

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 Gender/Age : Female / 52 Years DOB : 12-Jan-1972 Received On : 07-Sep-2024 09:19 AM
 Ref. By : Health Check Up Shalby Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	238	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	139	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	73	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	165	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	137	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	28	mg/dL	6 - 38
LDL/dHDL <i>Calculated</i>	1.9		2.5 - 3.5
Chol/dHDL <i>Calculated</i>	3.3	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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Ref. By : Health Check Up Shalby	Received On : 07-Sep-2024 09:19 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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THYROID PROFILE (TFT)

Total T3 <small>Chemiluminescence immunoassay (CLIA)</small>	120	ng/dL	87 - 178
Total T4 <small>Chemiluminescence immunoassay (CLIA)</small>	16.77	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH <small>Chemiluminescence immunoassay (CLIA)</small>	0.026	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

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Certificate No. - NC-039

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Received On : 07-Sep-2024 09:19 AM	Sample Type : Serum
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

RENAL FUNCTION TEST**NABL Accredited Parameters**

Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	10	mg/dL	7 - 17
UREA <i>Calculated</i>	21	mg/dL	15 - 36
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.58	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	7.0	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.5	mg/dL	8.4 - 10.2
Sodium <i>Direct Ion Selective Electrode</i>	141	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.5	mmol/L	3.5 - 5.1
Chloride	107	mmol/L	98 - 107

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Dr Pankaj AgrawalM.B., D.C.P.
Consulting Pathologist



Shalby Hospital (A Unit of Shalby Limited) Near Navyug College, Rander Road, Adajan, Surat, Gujarat, India.
 Tel: 0261 7190000 | Ext: 851 | Mo: 9512036046 | Email: pathology.surat@shalby.in | Web: www.shalby.org

PID : SUR0000273935 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Ruqsana Rafik Saiyed /	Registered On : 07-Sep-2024 08:42 AM
Lab ID : 409900508	Collected On : 07-Sep-2024 08:49 AM
Gender/Age : Female / 52 Years	DOB : 12-Jan-1972
Ref. By : Health Check Up Shalby	Received On : 07-Sep-2024 09:19 AM
	Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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BIOCHEMISTRY

Phosphorus (Not in NABL Scope) <i>Phosphomolybdate reduction (PMA Phenol)</i>	4.1	mg/dL	2.5 - 4.5
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Lab ID : 409900508	Collected On : 07-Sep-2024 08:49 AM
Gender/Age : Female / 52 Years	DOB : 12-Jan-1972
Received On : 07-Sep-2024 08:54 AM	Sample Type : Urine
Ref. By : Health Check Up Shalby	

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour	Pale Yellow		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Glucose	Glucose-oxidase/oxidase reaction	Negative	Negative
Bilirubin	Azo coupling Reaction with diazonium	Negative	Negative
Ketone	Sodium Nitroprusside reaction	Negative	Negative
Specific Gravity	Refractometric Method - Bromthymol blue	1.025	S.G. value 1.001 - 1.035
Blood	Peroxidase like activity of hemoglobin	Negative	Negative
pH	Double Indicator principle	5.0	PH value 4.6 - 8.0
Protein	Protein Error of Indicator Principle	Negative	Negative
Urobilinogen	Modified Ehrlich reaction	0.2	EU/dL Upto 1.0 mg/dL (EU/dL)
Nitrite	Diazotization reaction of nitrite with an aromatic amine	Negative	Negative
Leucocyte	Leucocyte Esterase Test	Negative	Negative
Microscopic Examination			
Pus cells	2-3/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	8-10/hpf	/hpf	NA
Crystals	Nil		Nil
Cast	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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Lab ID : 409900508	Collected On : 07-Sep-2024 08:49 AM
Gender/Age : Female / 52 Years	DOB : 12-Jan-1972
Received On : 07-Sep-2024 09:19 AM	Sample Type : Serum
Ref. By : Health Check Up Shalby	

Parameter	Result	Unit	Biological Ref. Interval
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Liver Function Test

Liver Function Test

SGPT (ALT)

Multi Point Rate with P-5-P

16

U/L

9 - 52

SGOT (AST)

Multi Point Rate with P-5-P

18

U/L

14 - 36

Alkaline Phosphatase

PNPP, AMP Buffer

110

U/L

 20-50 yrs.: 42 - 98
 4-19 yr : 54 - 369
 >=51 yr : 56 - 119

GGT

L-gamma-glutamyl-4-nitroanilide/glycylglycine Kinetic

15

U/L

12 - 43

S. PROTEIN

Sulfur (Alkaline cupric sulfate), End Point

7.0

g/dL

6.3 - 8.2

Albumin

Bromocresol Green (BCG), Colorimetric

4.0

g/dL

3.5 - 5.0

S. GLOBULIN

Calculated

3.0

g/dL

2.3 - 3.6

A/G Ratio

Calculated

1.3

Ratio

1.0 - 2.3

Bilirubin Total

Azobilirubin/Dyphylline/Diazonium Salt

0.5

mg/dL

 0-1 day (premature) 1.0 - 8.0
 0-1 day (full term) : 2.0 - 6.0
 1-2 day (premature) : 6.0 - 12.0
 1-2 day (full term) : 6.0 - 10.0
 3-5 day (premature) : 10.0 - 14.0
 3-5 day (full term) : 4.0 - 8.0

Adult : 0.2 - 1.3

Bilirubin Unconjugated

End-point Colorimetric (Dual wavelength spectrophotometric)

0.5

mg/dL

 Unconjugated bilirubin
 Adults: 0.0-1.1
 Neonates: 0.6-10.5

Bilirubin Direct

Calculated

0.0

mg/dL

 Conjugated bilirubin and
 Delta bilirubin (Bilirubin
 covalently bound to albumin)
 0.0-0.4

----- End of Report -----

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