

12/01/2024

Deepali Waghmare
40 yrs / female

No fresh complaints.

ICHO - Hypothyroid,
on Rx T. thyrox 50mcg.

BH - fistula-in-ano
operated in 2021.

MLM - 11/01/2024, irregular
∴ 2-3 months.

? Menopausal syndrome

Height - 145 cm
Weight - 56 kg
BMI - 26.6 kg/m²
(overweight)

OIH - G, P, A, L, D
female, 11 yrs, LSCS, healthy.

BP - 120/70 mmHg.

P - 70/min

SpO₂ - 98%.

PT is fit and can resume
her normal duties

consult physician for blood changes

TSH ↑↑, Low Hb ↓, FBS ↑

Act

- Tab. Neurobion forte
0-1-0 x 1 month
- ~~Feto~~ Sup. Instarath
10ml
x 3 days



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ID: 749 *Dipa Patil Waghmare*

Female Years - *40*

Req. No. : *BP-130/80*

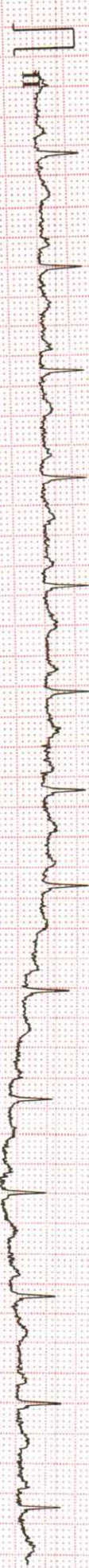
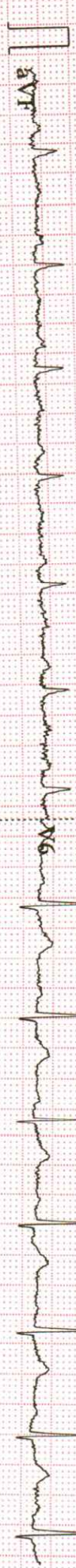
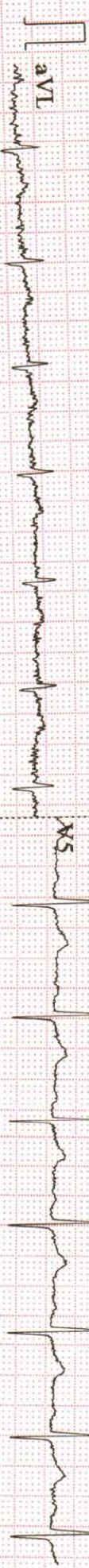
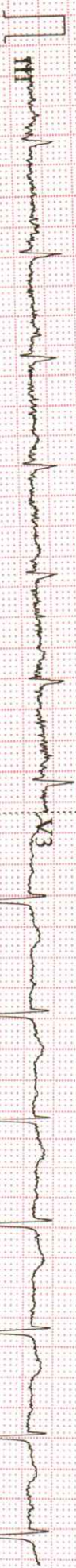
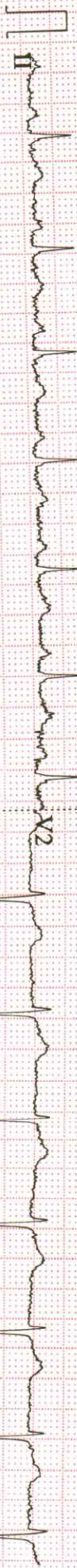
12-01-2024 10:08:48 AM

HR	: 86	bpm
P	: 97	ms
PR	: 177	ms
QRS	: 85	ms
QT/QTcBz	: 358/428	ms
P/QRS/T	: 65/53/24	ms
RV5/SV1	: 0.845/0.554	mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Report Confirmed by:

WNL



0.15-45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r V2.21 SEMIP V1.92 Siddhivinayak Hospital



Name - Mrs. Deepali Waghmare	Age - 40 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date -12/01/2024

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

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





Name - Mrs. Deepali Waghmare	Age - 40 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date - 12/01/2024

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. MOHAMMAD SOHAIB
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.





Name - Mrs. Deepal Waghmare	Age - 40 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date -12/01/2024

USG ABDOMEN & PELVIS

FINDINGS:

The **liver** dimension is normal in size (13.4 cm). It appears normal in morphology with **raised 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 borderline enlarged in size (12.1 cm)and shows normal morphology**

Both **kidneys** demonstrate normal morphology. Both kidneys show normal cortical echogenicity.

The right kidney measures 8.7 x 4.3 cm.

The left kidney measures 10.5 x 4.5 cm.

Urinary bladder: normally distended. Wall thickness - normal.

Uterus: normal in size and morphology. Size: 8.9 x 5.0 x 5.4 cm. **Single hypoechoic fibroid of size 16 x 13 mm with calcific rim along posterior myometrium.**

Endometrium: 7.9 mm, it appears normal in morphology.

Both ovaries are normal in size.

Adnexa appear normal

No free fluid is seen.

Excessive gaseous distension of bowel loops. Visualized loops show normal forward peristalsis

IMPRESSION:

- Borderline Splenomegaly.
- Single intramural uterine fibroid.

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CONSULTANT RADIOLOGIST





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Age/Sex : 40 Years / Female Reported On : 12/1/2024 5:18 pm
Ref By : SIDDHIVINAYAK HOSPITAL CGHS /ESIS Report Status : FINAL



***LIPID PROFILE**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE)	168.0	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)	45.7	mg/dL	Major risk factor for heart : <30 mg/dl. Negative risk factor for heart disease : >=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	61.8	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)	12	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	110	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)	2.41		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	3.68		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

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

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

Checked By
SHAISTA Q

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M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist





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COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	8.0	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	27.2	%	36 - 46
RBC COUNT	4.66	x10 ⁶ /uL	4.5 - 5.5
MCV	58	fl	80 - 96
MCH	17.2	pg	27 - 33
MCHC	29	g/dl	33 - 36
RDW-CV	19.0	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	6650	/cumm	4000 - 11000
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	58	%	40 - 80
LYMPHOCYTES	37	%	20 - 40
EOSINOPHILS	01	%	0 - 6
MONOCYTES	04	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	335000	/cumm	150000 - 450000
MPV	10.6	fl	6.5 - 11.5
PDW	15.6	%	9.0 - 17.0
PCT	0.360	%	0.200 - 0.500
RBC MORPHOLOGY	Hypochromia(+),Microcytosis(+),Anisopoikilocytosis(Mild),Fragmented red blood cells few,pencil cells few.		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

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.

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>URINE ROUTINE EXAMINATION</u>			
<u>PHYSICAL EXAMINATION</u>			
VOLUME	20ml		
COLOUR	Pale yellow		Pale Yellow
APPEARANCE	Hazy		Clear
<u>CHEMICAL EXAMINATION</u>			
REACTION (methyl red and Bromothymol blue indicator)	Acidic		Acidic
SP. GRAVITY (Bromothymol blue indicator)	1.015		1.005 - 1.022
PROTEIN (Protein error of PH indicator)	Absent		Absent
BLOOD (Peroxidase Method)	Absent		Absent
SUGAR (GOD/POD)	Absent		Absent
KETONES (Acetoacetic acid)	Absent		Absent
BILE SALT & PIGMENT (Diazonium Salt)	Absent		Absent
UROBILINOGEN (Red azodye)	Absent		Normal
LEUKOCYTES (pyrrole amino acid ester diazonium salt)	Absent		Absent
NITRITE (Diazonium compound With tetrahydrobenzo quinolin 3-phenol)	Absent		Negative
<u>MICROSCOPIC EXAMINATION</u>			
RED BLOOD CELLS	Absent		Absent
PUS CELLS	4-6	/ HPF	0 - 5
EPITHELIAL	20-25	/ HPF	0 - 5
CASTS	Absent		

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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.

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IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>TFT (THYROID FUNCTION TEST)</u>			
SPACE		Space	-
SPECIMEN	Serum		
T3	145.6	ng/dl	84.63 - 201.8
T4	10.47	µg/dl	5.13 - 14.06
TSH	14.98	µIU/ml	0.270 - 4.20
T3 (Triiodo Thyronine hormone)	T4 (Thyroxine)	TSH(Thyroid stimulating hormone)	
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 yrs	105-269	1-4 months	7.2-14.4
6-10 yrs	94-241	4 -12 months	7.8-16.5
11-15 yrs	82-213	1-5 yrs	7.3-15.0
0.1-2.5			
15-20 yrs	80-210	5-10 yrs	6.4-13.3
0.20-3.0			
		11-15 yrs	5.6-11.7
0.30-3.0			

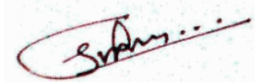
INTERPRETATION :

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.

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

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HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
<u>BLOOD GROUP</u>			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'A'		
RH FACTOR	POSITIVE		
Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)			
Result relates to sample tested, Kindly correlate with clinical findings.			
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***RENAL FUNCTION TEST**

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	29.6	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	13.83	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.62	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	5.2	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	135.0	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	5.00	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	98.0	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.41	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.6	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	7.07	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	4.08	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.99	g/dl	1.9 - 3.5
A/G RATIO calculated	1.36		0 - 2

NOTE

BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200)
ANALYZER.

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

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

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* 1 8 0 3 6 2 *

Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Moderate hypochromia, Moderate microcytosis, Mild anisopoikilocytosis, Fragmented red blood cells few, pencil cells few.
WBC	Total leucocyte count is normal on smear. Neutrophils:58 % Lymphocytes:36 % Monocytes:04 % Eosinophils:02 % Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.
ADVICE	Iron study and HB-electrophoresis for typing of Anemia. Result relates to sample tested, Kindly correlate with clinical findings. ----- END OF REPORT -----

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LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	0.73	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	0.34	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.39	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	13.2	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	10.0	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	75.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	7.07	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	4.08	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.99	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.36		0 - 2

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

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* 1 8 0 3 6 2 *

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	60	mm/1hr.	0 - 20

METHOD - WESTERGREN

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

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BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GAMMA GT	24.2	U/L	5 - 55
<u>BLOOD GLUCOSE FASTING & PP</u>			
BLOOD GLUCOSE FASTING	111.7	mg/dL	70 - 110
BLOOD GLUCOSE PP	98.3	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 specimen. 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

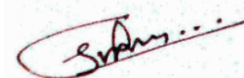
- Fasting plasma glucose ≥ 126 mg/dl
- Classical symptoms +Random plasma glucose ≥ 200 mg/dl
- Plasma glucose ≥ 200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin $> 6.5\%$

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

GLYCOCELATED HEMOGLOBIN (HBA1C)

HBA1C (GLYCOSALATED HAEMOGLOBIN)	6.3	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	134.1	mg/dL	65.1 - 136.3
METHOD	Particle Enhanced Immunoturbidimetry		

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* 1 8 0 3 6 2 *

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
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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.

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