



DEPARTMENT OF LABORATORY SERVICES

Patient	Mrs. MANISHABEN AJAYKUMAR HIRWAL	Lab No/ManualNo	5381060/
UHIDNo/IPNO	300445422	CollectionDate	11/03/2024 9:35AM
Age/Gender	38 Years/Female	Receiving Date	11/03/2024 9:56AM
Bed No/Ward	OPD	Report Date	11/03/2024 11:21AM
Referred By	Dr. Casualty Medical Officer	Report Status	Final
		Sample Quality	Normal

Test Name	Result	Unit	Bio. Ref. Range	Method	Sample
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Biochemistry

ArcoFemi Healthcare Ltd Below 40 Female

					Serum
Gamma GT	14.50	U/L	6.00 - 42.00	Enzymatic method	Serum
Creatinine	L 0.47	mg/dL	0.50 - 0.90	Jaffe Kinetic Compensated	
Age	38				
Weight	86.2				
Gender	0.85				
eGFR	H 220.85	mL/minute/1.73 m2	71 - 140		Serum
Uric Acid	4.1	mg/dL	2.4 - 5.7	Uricase / Peroxidase (Colorimetric)	Serum
Random Glucose	87.5	mg/dL	< 140.0	Hexokinase	

Dr. Jitendra Narendrabhai Nayak
Reg.No:G-14786
Consultant Pathologist



JCI (USA)

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As per ADA Guideline

For Fasting Plasma Glucose

Normal : Less than 100 mg/dL

Prediabetes : 100 mg/dL to 125 mg/dL

Diabetes : 126 mg/dL or Higher

For 2 hrs Plasma Glucose after 75 Gms Glucose load

Normal : Less than 140 mg/dL

Prediabetes : 140 to 199 mg/dL

Diabetes : 200 mg/dL or higher

For Random Plasma Glucose

Diabetes is diagnosed at blood glucose greater than or equal to 200 mg/dL

LIVER FUNCTION TEST (LFT) SERUM

Serum

SGPT(ALT)	10.60	U/L	0.00 - 33.00	IFCC without pyridoxal phosphate
SGOT(AST)	14.70	U/L	0.00 - 32.00	IFCC without pyridoxal phosphate
Alkaline Phosphatase	95.8	U/L	35.0 - 140.0	PNP-Standardize
Bilirubin Total	0.32	mg/dL	0.00 - 1.00	Diazo Method
Bilirubin Direct	0.12	mg/dL	0.00 - 0.20	Diazo Method
Bilirubin Indirect	0.20	mg/dL	0.00 - 1.10	Calculate from Total and Direct Billirubin
Protein Total	H 8.70	g/dL	6.40 - 8.20	Biuret Method
Albumin	L 3.86	g/dL	3.97 - 4.95	BCG Endpoint
Globulin	H 4.84	g/dL	2.20 - 3.50	Calculated
A/G Ratio	L 0.80	Ratio	0.90 - 2.80	Ratio

EDTA Blood

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HbA1c (Glyco Hb)	5.87	%	4.8 % - 5.9 % Normal 5.9 % - 7.0 % Good diabetic Control 7.0 % - 10.00 % Fair Diabetic Control >10.0 % Poor diabetic Control	Immunoturbidimetric	
Mean Plasma Glucose	131.6	mg/dL	80.0 - 140.0		Serum
Blood Urea	21.3	mg/dL	16.6 - 48.5	Urease,Kinetic,GLDH	
BUN*	9.9	mg/dL	6.0 - 20.0	Ureas with UV	Serum
TOTAL T3*	1.150	ng/mL	0.850 - 2.020	ECLIA.	
TOTAL T4*	5.230	ug/dL	5.130 - 14.060	ECLIA.	
THYROID STIMULATING HORMONE	2.530	uIU/mL	0.270 - 4.200	ECLIA.	

(* Not in NABL Scope)

End Of Report

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Biochemistry

ArcoFemi Healthcare Ltd Below 40 Female

LIPID PROFILE (WITH DIRECT LDL)

Serum

Sample Type	Random				
Cholesterol Total	177.90	mg/dL	Less than 160 mg/dL Excellent Less than 200 mg/dL Desirable 200-239 mg/dL Borderline High 240 mg/dl & over high	Enzymatic (CHE/CHO/POD)	
Triglycerides	81.50	mg/dL	Less than 150 mg/dL Normal 150-199 mg/dL Borderline High 200-499 mg/dL High 500 mg/dL or greater very High	GPO-PAP	
HDL Cholesterol	49.20	mg/dL	Less than 40 mg/dL Low 60 mg/dL or Above Excellent	Homogenous Enzymatic	
LDL Cholesterol (Direct)	123.20	mg/dL	Less than 80 mg/dL Excellent Less than 100 mg/dL Optimal 100-129 mg/dL Near or above optimal 130-159 mg/dL Borderline High 160-189 mg/dL High 190 mg/dL & above Very High	Homogenous Enzymatic	
VLDL Cholesterol	16.3	mg/dL	< 30	Calculated	
LDL/HDL RATIO	2.50		< 3.50	Calculated	
Cholesterol Total / HDL Ratio	3.62		< 4.50		

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Clinical Pathology

ArcoFemi Healthcare Ltd Below 40 Female

URINE ROUTINE EXAMINATION

Urine

Physical Examination:

Quantity	20 ml			Visual method	
Colour	Pale Yellow			Visual method	
Appearance:	Slightly turbid			Visual method	
Reaction	5			Reflectance photometer	
Sp. Gravity	1.020		1.015 - 1.030	Reflectance photometer/Enzymatic reaction	

Chemical Examination:

U.Albumin	Present(+)			Reflectance photometer/Manual	
U.Glucose	Nil				
U.Acetone	Nil				
BS/BP	Absent				

Microscopic Examination

Pus Cell	3-4		/H.P.F.	Microscopy	
Red Blood Cell	10-12		/H.P.F.		
Epithelial cell	5-6		/H.P.F.		
Cast	Absent				
Crystals	Absent				
Amorphous	Absent				
Monilia	Absent				
Other:	Absent				

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Dr. Kazumi Gondalia
M.D (Path)
Reg.No.: G-21729



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Haematology

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CBC WITH ESR

EDTA Blood

Haemoglobin	L 9.2	g/dL	12.5 - 16.0	SLS Method	
Hematocrit/PCV	L 31.7	%	37.0 - 47.0	H.focusing Method	
RBC COUNT	L 4.01	mill/Cmm	4.20 - 5.40	H.focusing impedance	
MCV	L 79.1	fl	83.0 - 101.0	Calculated	
MCH	L 22.9	pg	27.0 - 31.0	Calculated	
MCHC	L 29.0	g/dL	32.0 - 36.0	Calculated	
RDW-CV	H 16.8	%	11.5 - 14.0	Calculated	
Platelet count	335000	/cumm	150000 - 410000	H.focusing impedance	
Mean Platelet Volume(MPV)*	8.2	fl	8 - 12	Calculated	
Total Leucocyte Count (TLC)	5010.00	/cumm	4000.00 - 10500.00	Flow Cytometry	
Differential Leucocyte Count				Flowcytometry/Microscopic	
Neutrophils	56	%	40.0 - 70.0		
Lymphocytes	29	%	22 - 45		
Eosinophils	H 11	%	1.0 - 4.0		
Monocytes	04	%	1.0 - 6.0		
Basophils	00	%	0.0 - 1.0		
Immature Granulocytes	00	%	0 - 2		

Absolute Leucocyte Count

Absolute Neutrophil Count*	2805.6	/cumm	1800 - 7700
Absolute Lymphocyte count*	1452.9	/cumm	1000 - 4800
Absolute Eosinophil Count (AEC)	H 551.1	/cumm	0.0 - 450.0
Absolute Monocyte Count*	200.4	/cumm	0 - 800

Peripheral Smear Study

RBCs shows Anisocytosis(+),Hypochromia(+).WBCs shows Mild Eosinophilia.
Platelets are adequate in number.Malarial Parasites are not seen.
No Premature cells are seen.

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Erythrocyte Sedimentation Rate (ESR) **H 93** mm/hr 0 - 12 Photometric capillary stopped flow kinetic

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CytoPathology

ArcoFemi Healthcare Ltd Below 40 Female

Cytopathology Pathology Report

Specimen

Cervical PAP smear.

Clinical Diagnosis

Cervical erosion.

Gross Description

Two fixed unstained slide received, PAP stain done.

Microscopic Description

Smears are satisfactory for evaluation.

Many superficial, few intermediate cells and few parabasal cells seen.

Severe inflammation with predominance of neutrophils seen.

Mild lactobacilli are seen. No parasites/ fungi.

No evidence of intraepithelial lesion or malignancy.

Diagnosis

Cervical smear - **Severe inflammation and no evidence of intraepithelial lesion or malignancy.**

Note- The pap test is a screening procedure to aid in the detection of cervical cancer and its precursors. Because false negative results may occur, regular PAP tests are recommended.

(* Not in NABL Scope

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Immuno-Haematology

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BLOOD GROUPING

EDTA Blood

ABO Group	"B"			Tube Agglutination Method	
Rh Type	Positive				

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