P. H. DIAGNOSTIC CENTRE

ISO 9001 : 2015 Certified

List of Pending Test

Test Name	Status
ESR	Ready
UR (URINE ROUTINE)	Ready
Lipid Profile	Ready
BUN	Ready
Uric Acid	Ready
Calcium	Ready
Bilirubin	Ready
SGOT	Ready
SGPT	Ready
Alk. Phosphatase	Ready
GGTP	Ready
Proteins	Ready
TSH	Ready
CREATININE	Ready
CBC	Ready
VITAMIN B12	Ready
HbA1C	Ready
IRON & TIBC	Ready
VITAMIN D	Ready
BSF	Ready

Note:- Following department reports if any,hardcopy of the reports to be collected from the centre where test is performed.

- E.C.G
- STRESS TEST
- PFT
- BMD
- EEG/EMG/NCV

and some special pathological test.

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
AGE / GENDER	:	43 Years / Female	**REGISTRATION DATE**	:	24/06/2021 08:57am
REFERRED BY DR	:	KERING RAMESH	**SAMPLE COLL. DATE**	:	24/06/2021 09:06am
PATIENT ID	:	701005437	**ACCESSION DATE**	:	24/06/2021 12:00pm
SAMPLE COLLECTED BY	:	P.H.AUNDH	**AUTHENTICATION DATE**	:	24/06/2021 01:26pm

ERYTHROCYTE SEDIMENTATION RATE

Test	Observed Value	Unit	Biological Reference Interval
ESR	07	mm/hr	0 - 12

Specimen : Whole Blood
Method : Modified Westergren

Instrument : Sedy 12.

End of Report

Reviewed By :MANDALIK

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
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COMPLETE BLOOD COUNT

Test		Observed Value	Unit	Biological Reference Interval
HAEMOGLOBIN		12.0	g/dL	12.0 - 15.0
R.B.C COUNT		3.83	10^6 / uL	3.8 - 4.8
PCV	**L**	**34.7**	%	36 - 46
MCV		90.60	fL	83 - 101
MCH		31.33	pg	27 - 32
MCHC	**H**	**34.58**	g/dl	31.5 - 34.5
RDW		12.9	%	11.0 - 14.5
PLATELET COUNT		241	x 10^3 /µL	150 - 410
MEAN PLATELET VOLUME(MPV)		8.1	fL	7.8 - 11.0
W.B.C COUNT		5100	per cu-mm	4000 - 10000
DIFFERENTIAL COUNT				
NEUTROPHILS		58.2	%	40.0 - 75.0
LYMPHOCYTES		30.9	%	20 - 45
EOSINOPHILS		1.8	%	1.0 - 6.0
MONOCYTES		8.2	%	0.0 - 10.0
BASOPHILS		0.9	%	0.0 - 1.0
ABSOLUTE NEUTROPHIL COUNT		2968	per cumm	2000 - 7000
ABSOLUTE LYMPHOCYTE COUNT		1576	per cumm	1000 - 3000
NEUTROPHIL LYMPHOCYTE RATIO (NLR)		1.9		< 3
RBC MORPHOLOGY		Normocytic Normochromic		
W.B.C MORPHOLOGY		Normal		
PLATELET MORPHOLOGY		Platelet adequate		

Specimen : Whole Blood (EDTA)
Method : Coulter Principle/Derived from WBC Histogram/Cyanmethhaemoglobin photometry/Calculated.
Instrument : Beckmen Coulter LH750/DXH800/Microscopy.

End of Report

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

Reviewed By :MANDALIK

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BIOCHEMICAL TEST

Test	Observed Value	Unit	Biological Reference Interval
CALCIUM	8.9	mg/dL	8.6 - 10.0
Serum by NM-BAPTA. Instrument : Cobas 6000 / Cobas C 311			
Bilirubin			
BILIRUBIN (TOTAL)	0.38	mg/dL	0.3 - 1.2
BILIRUBIN (DIRECT)	0.14	mg/dL	0 - 0.4
BILIRUBIN (INDIRECT)	0.24	mg/dL	0.1 - 1.0
Serum by Diazo Method Instrument : Cobas 6000 / Cobas C 311			
SGOT (AST)	15.7	U/L	0 - 32
Serum by IFCC Method, Kinetic Instrument : Cobas 6000 / Cobas C 311			
SGPT (ALT)	11.0	U/L	0 - 33
Serum by IFCC Method, Kinetic Instrument : Cobas 6000 / Cobas C 311			
ALKALINE PHOSPHATASE	45	U/L	35 - 105
Serum by IFCC Method Instrument : Cobas 6000 / Cobas C 311			
(GGT) GAMMA-GLUTAMYLTRANSFERASE	13.3	U/L	< 40
Serum by IFCC / SZASZ Instrument : Cobas 6000 / Cobas C 311			
BLOOD UREA	14.6	mg/dL	12.8 - 42.8
BLOOD UREA NITROGEN	6.82	mg/dL	6 - 20
Serum by Urease - GLDH Method Instrument : Cobas 6000/ Cobas C311			
URIC ACID	5.1	mg/dL	2.4 - 5.7
Serum by Enzymatic colorimetric test (Uricase) Instrument : Cobas 6000 / Cobas C 311			

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

Reviewed By :USHA PYARELAL

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BIOCHEMICAL TEST

Test	Observed Value	Unit	Biological Reference Interval
TOTAL PROTEIN	6.56	g/dL	6.4 - 8.3
ALBUMIN	4.33	g/dL	3.5 - 5.2
GLOBULIN	2.23	g/dL	2.3 - 3.5
A/G RATIO	1.94		0.9 - 2.0

Serum by Biuret Method (Protein),BCG Gen 2 (Albumin)
Instrument : Cobas 6000 / Cobas C 311

SERUM CREATININE	0.70	mg/dL	0.5 - 0.9

Serum by Jaffe method Gen 2
Instrument : Cobas 6000 / Cobas C 311

End of Report

Reviewed By :USHA PYARELAL

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

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LIPID PROFILE

Test		Observed Value	Unit	Biological Reference Interval
BIO-CHEMICAL TEST				
TOTAL CHOLESTEROL	**H**	**227.8**	mg/dL	< 200
TRIGLYCERIDES		136.6	mg/dL	0 - 150
HDL CHOLESTEROL		43.8	mg/dL	30 - 70
VLDL CHOLESTEROL		27.32	mg/dl	Upto 35
LDL CHOLESTEROL	**H**	**156.68**	mg/dL	< 100
TC/HDLC RATIO	**H**	**5.20**		Upto 5.0
LDLC/HDLC RATIO		3.58		2.5 - 3.5

Specimen : Serum
Method : CHOD-POD (cholestrol/Enzymetic colorimetic (triglyceride, LDL)/PEG(HDL)/Calculated(VLDL)
Instrument Used : Cobas 6000/Cobas c 311.

INTERPRETATION : As per NCEP 2001 ATP III guidelines May 2001
Total Cholesterol
200 - 239 : Borderline high
> 240 : High

Triglyceride
150 - 199 : Borderline high
200 - 499 : High
> 500 : Very high

LDL Cholesterol
100 - 129 : Near / Above optimal
130 - 159 : Borderline high
160 - 189 : High
>190 : Very High

*****End of Report*****

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

Reviewed By :USHA PYARELAL

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S.IRON & TIBC

Test	Observed Value	Unit	Biological Reference Interval
IRON	82.78	µg/dL	33 - 193
TOTAL IRON BINDING CAPACITY (TIBC)	339	µg/dL	255 - 450
IRON SATURATION	24.42	%	20 - 50

Serum by Ferrozine Method - without deproteinization (Iron).
Direct Determination (TIBC).
Calculation (Saturation).

Instrument : Cobas 6000 / Cobas C 311.

INTERPRETATION :

1. In Iron deficiency anemia the TIBC is elevated and the Iron saturation is lowered to 15% or less.
2. Low serum Iron associated with low TIBC is characteristic of anemia of chronic disorders, malignant tumors and infections.
3. Estrogens and oral contraceptives increase TIBC levels.

*****End of Report*****

Reviewed By :USHA PYARELAL

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
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PATIENT ID	:	701005437	**ACCESSION DATE**	:	24/06/2021 12:03pm
SAMPLE COLLECTED BY	:	P.H.AUNDH	**AUTHENTICATION DATE**	:	24/06/2021 01:45pm

URINE ROUTINE

Test	Observed Value	Unit	Biological Reference Interval
PHYSICAL EXAMINATION			
QUANTITY	20 ml		
COLOUR	Pale yellow		Pale yellow
APPEARANCE	Clear		Clear
PH	6.5		4.5- 8
SPECIFIC GRAVITY	1.015		1.005 - 1.030
DEPOSIT	Absent		Absent
CHEMICAL EXAMINATION			
PROTEINS	Negative		Negative
GLUCOSE	Negative		Negative
KETONE BODIES	Negative		Negative
OCCULT BLOOD	Positive		Negative
BILIRUBIN	Negative		Negative
UROBILINOGEN	Normal		Normal
NITRITE	Negative		Negative
MICROSCOPIC EXAMINATION :-			
PUS CELLS	Occasional		0-2 / hpf
RED BLOOD CELLS	3 - 4/hpf		0-2 / hpf
EPITHELIAL CELLS	2 - 3 /hpf		< 20 / hpf

Method :
Visual observation/GOD-POD (Glucose)/Protein error (Protein)/Legal~s test (Ketone)/Peroxidase (Occult blood)/PH indicator (PH)/Diazonium Coupling (Bilirubin)/Diazonium reaction (urobilinogen)/Griess test (Nitrite)/Ionic concentration (Specific Gravity)/wet mount/Microscopy.

Instrument : Cobas u 411.

*****End of Report*****

Reviewed By :MANISHA AMBLE

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
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REFERRED BY DR	:	KERING RAMESH	**SAMPLE COLL. DATE**	:	24/06/2021 09:06am
PATIENT ID	:	701005437	**ACCESSION DATE**	:	24/06/2021 11:51am
SAMPLE COLLECTED BY	:	P.H.AUNDH	**AUTHENTICATION DATE**	:	24/06/2021 01:29pm

BLOOD GLUCOSE FASTING

Test	Observed Value	Unit	Biological Reference Interval
BLOOD GLUCOSE FASTING	89.0	mg/dL	70 -110

Specimen :Plasma.
Method : Hexokinase (UV).
Instrument : Cobas 6000 / Cobas c 311.

End of Report

Reviewed By :USHA PYARELAL

MC - 2630

DR.Manjiri Waknis.
M.D Consultant Pathologist
Reg. No. : 42396

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TSH

Test	Observed Value	Unit	Biological Reference Interval
THYROID STIMULATING HORMONE (TSH)	**L 0.221**	µIU/mL	0.4 - 4.5 1st Trimester : 0.3 - 4.5 2nd Trimester : 0.5 - 4.6 3rd Trimester : 0.8 - 5.2

Specimen : Serum By CMIA
Instrument: ARCHITECT i2000 SRPLUS

*****End of Report*****

MC - 2630

Dr.Anuja Mahajan
M.D Consultant Pathologist
Reg. No. : 2014/11/4844

Reviewed By :AVINASH INGOLE

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
AGE / GENDER	:	43 Years / Female	**REGISTRATION DATE**	:	24/06/2021 08:57am
REFERRED BY DR	:	KERING RAMESH	**SAMPLE COLL. DATE**	:	24/06/2021 09:06am
PATIENT ID	:	701005437	**ACCESSION DATE**	:	24/06/2021 12:00pm
SAMPLE COLLECTED BY	:	P.H.AUNDH	**AUTHENTICATION DATE**	:	24/06/2021 01:36pm

VITAMIN B12

Test	Observed Value	Unit	Biological Reference Interval
VITAMIN B12	541.3	pg/mL	Normal : 180 - 914 Indeterminate : 145 - 180 Deficient : < 145

Specimen: Serum By ECLIA
Instrument: Cobas 6000

INTERPRETATION
1. Increased level are seen in Chronic granylocytic leukemia, COPD, Chronic renal 1eukocytosis, Liver cell damage, Obesity, Polycythemia vera, Severe CHF and some carcinomas.
2. Decreased level are seen in Abnormalities of cobalamin transport or metabolism, Bacterial overgrowth, Dietary deficiency, Gastric or small intestine surgery, Inflammatory bowel disease, Intestinal malabsorption, Intrinisic factor deficiency and Late pregnancy.
3. Pregnany, smoking, hemodialysis, multiple myeloma, can decrease B 12 levels.
4. Patients taking vitamin B12 supplementation may have misleading results.
5. A normal serum B12 level does not rule out tissue deficiency of vitamin B12.

*****End of Report*****

Reviewed By :AVINASH INGOLE

MC - 2630

Dr.Anuja Mahajan
M.D Consultant Pathologist
Reg. No. : 2014/11/4844

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
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SAMPLE COLLECTED BY	:	P.H.AUNDH	**AUTHENTICATION DATE**	:	24/06/2021 02:21pm

HBA1C

Test	Observed Value	Unit	Biological Reference Interval
HbA1C	5.5	%	Normal : 4.0 - 5.6 Pre Diabetes : 5.7 - 6.4 Diabetic : > 6.5
MEAN GLUCOSE LEVEL	111.15	mg/dL	

Specimen : Whole Blood EDTA
Method : HPLC

INTERPRETATION :
ADA Recommendation for Diabetic control
4 - 6 : Non-diabetic
6 - 7 : Excellent Control
7 - 8 : Fair To Good Control
8 - 10 : Unsatisfactory Control
Above 10 : Poor Control

1. HbA1c is used for monitoring diabetic control and reflects mean plasma glucose over three months.
2. HbA1c is falsely low in diabetic with hemolytic disease. In these individuals a plasma fructosamine level may be used which evaluates diabetes over 15 days.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. HbA1c value is used to estimate the mean plasma Glucose(MPG) level over the last 90 days.

*****End of Report*****

Reviewed By :SAJAN LANDAGE

MC - 2630

DR.Rekha S Jha.
M.D Consultant Pathologist
Reg. No. : MCI-18-29785

PATIENT'S NAME	:	MRS. JAIN PAPITA	**CLIENT**	:	PH COM
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VITAMIN D TOTAL (25 HYDROXY)

Test	Observed Value	Unit	Biological Reference Interval
VITAMIN D TOTAL (25-HYDROXY VIT.D)	55.4	ng/mL	Deficiency : < 10 Insufficiency :10 - 30 Sufficiency : 30 - 100 Toxicity : > 100
METHOD	CMIA		

INTERPRETATION:

1. Decreased in Malabsorption, Steatorrhea, Dietary osteomalacia, anticonvulsant osteomalacia, Billary & portal cirrhosis, Thyrotoxicosis, Pancreatic insufficiency, Celiac disease, Inflammatory bowel disease, Rickets, Alzheimer disease.
2. Increased in Vitamin D intoxication, Excessive exposure to sunlight.

*****End of Report*****

Reviewed By :AVINASH INGOLE

MC - 2630

Dr.Anuja Mahajan
M.D Consultant Pathologist
Reg. No. : 2014/11/4844