

Dr. R. N. Mehrotra MD, DNB (Endocrinology), DM (Endocrinology)

Senior Consultant Endocrinologist & Diabetologist

Regd No.39058

Ph: 23607777 Ext: 3035

email: ravinm1@rediffmail.com



Date:

ID

: 6561 ( UHID:APJ1.0001960673 )

Date

: 18/Jan/2020

Name

: Mrs. Neha Sinha

Age

: 37 (F)

Complaints/Obs:LV-- June 2018. At present On CTDT 40/12.5 + Glimi 1 + Metformin 2gm. PPBS has been >350, A1C >9 from last 6months. Cycles- regular. Has dental issues. No Fever. Recent cough-dry. Has Bfeet ++// Pain--LBA radiating to Rt leg Urine ok

Diagnosis:Type2 diabetes duration:5 years 7 months, Combined hyperlipidemia duration:1 year 7 months, Others:Cx Spondylosis duration: 2 years 7 months

R

BP: 120/75 mmHg Wt: 93.8 Kg Ht: 158 cm BMI: 37.6 Kg/m2 FBS: 202 mg/dl PPBS: 332 mg/dl HbA1c: 9.1

1) TAB. Glycomet GP-0.5 Forte 0 - 0 - 1

1 tablet before dinner

2) TAB. Glycomet GP-1Forte

1 - 0 - 0

(glimepiride 1 mg+metformin hydrochloride 1000 mg)

1 tablet before breakfast

3) TAB. Remo 100

1 - 0 - 0

1 tablet before breakfast (stop if UTI/Genital Infection)

#### Advice:

» 1400 Kcal low fat diabetes diet--

» To be careful about hypoglycemia- always carry glucose with you - at times when you feel extreme weakness Or sweating with hunger- take 3-4 tsp of glucose immediately

If possible try to check blood glucose at that time.

Dr.Rabinder Nath Mehrotra

Reg no: 39058

Tests to be taken for next visit: Calcium/ Vitmain D / S Albumin/ S Phosphorus / CUE / Creatinine / Lipid Profile 作的

2 5/1/2020

Online appointments

www.apollosugar.com

Toll No: 1800 103 1010

ID

: 6561 ( UHID:APJ1.0001960673 )

Name : Mrs.Neha Sinha

Date

: 25/Jan/2020

Age

: 37 (F)

Complaints/Obs:Readings are better

Diagnosis:Type2 diabetes duration:5 years 7 months, Combined hyperlipidemia duration:1 year 8 months, Others:Cx Spondylosis duration:2 years 7 months

R

BP: 120/80 mmHg Ht: 158 cm FBS: 177 mg/dl

1) TAB. Glycomet GP-0.5 Forte

1 - 0 - :

1 tablet before breakfast - 1 tablet before dinner

2) TAB. Remo 100

1 - 0 - 1

1 tablet before breakfast - 1 tablet before dinner (stop if UTI/Genital Infection)

3) TAB. Telmesartan 40

1 - 0 - 0

1 tablet after breakfast

#### Advice:

- » 1400 Kcal low fat diabetes diet--
- » To be careful about hypoglycemia- always carry glucose with you at times when you feel extreme weakness Or sweating with hunger- take 3-4 tsp of glucose immediately

If possible try to check blood glucose at that time.

DIVIFY-- Strip -- once a week-- for 6 weeks- followed by once a month x 6months

Dr.Rabinder Nath Mehrotra Reg no: 39058

Tests to be taken for next visit: x home monitring //FBS + HbA1C-- 1month



# **VIJAYA DIAGNOSTIC CENTRE**

3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Sample Collection: 24/01/2020 08:12

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

### LABORATORY TEST REPORT

Regn Date

: 24/01/2020 07:25

Name

: MRS. NEHA SINHA

Regn No

Ref By

Sample Type : Urine

: 46201812

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

**Print Date** 

: 25/01/202009:30

Age / Sex

: 36 Years / Female

**BIOLOGICAL REFERENCE INTERVAL** 

Regn Centre

: Nizampet - 46

Ref no.

Pale Yellow

1.003 - 1.030

Clear

4.6 - 8

Nil

NA

Negative

Negative

Negative

0-5 Cells/HPF

0-2 Cells / HPF

Nil - Trace

# **COMPLETE URINE EXAMINATION (CUE)**

**TEST NAME** 

**Macroscopic Examination** 

Colour

Light Scattering Measurement Method

**Appearance** 

Light Trasmission Method

**Specific Gravity** 

Refractive index method

Reaction pH Indicator

Protein Protein error of Indicator

Glucose

GOD-POD

Urobilinogen Diazonium method

Bilirubin Diazonium method

Ketones (IRIS)

Legals Method

Nitrites (IRIS)

**Modified Griess Reaction Microscopic Examination** 

**Pus Cells** 

R.B.C

**Epithelial Cells** 

Casts

Crystals Method

RESULT

Pale Yellow

Clear

1.007

Acidic (6.5)

Nil

Present (+++)

Normal

Negative

Negative

Negative

1-2/HPF

Nil

2-3/HPF

Nil

Nil

Nil/LPF

Nil

0 - 5

Reagent Strips, Wave length reflectance method, Refractive index, Flow Digital Imaging technology using APR and Microscopy.

Please correlate with plasma glucose levels and repeat if clinically warranted.



Certificate # MC-2657

DR.TAPOSHI DAS CONSULTANT PATHOLOGIST

ers in Diagnostic Medicare...

<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



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#### LABORATORY TEST REPORT

Regn Date

: 24/01/2020 07:25

Name

: MRS. NEHA SINHA

Regn No

: 46201812

Ref By

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type : Serum

Sample Collection: 24/01/2020 08:12

**Print Date** 

: 25/01/202009:30

Age / Sex

: 36 Years / Female

Regn Centre

: Nizampet - 46

Ref no.

LIPID PROFILE (LP)

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

Serum Status

Clear

**Triglycerides** 

245

Normal: < 150 mg/dL

Borderline high: 150-199 mg/dL

High: 200-499 mg/dL

Very high: >/= 500 mg/dL

Method: GPO - POD

**Total Cholesterol** 

184

Desirable Level: < 200 mg/dL

Borderline: 200 - 239 mg/dL Undesirable : >/= 240 mg/dL

Method: CHOD - POD

LDL Cholesterol.

98

Optimal

: < 100 mg/dL

Near Optimal: 100 - 129 mg/dL Borderline High: 130 - 159 mg/dL High : 160 - 189 mg/dL

Very High

: > 189 mg/dL

Method: Calculation

**HDL Cholesterol** 

37

Desirable Level: > 60 mg/dL Optimal: 40 - 60

mg/dL Undesirable: < 40 mg/dL

Method: Elimination-Catalase/CHOD - POD

VLDL

49

< 30 mg/dL

Total Cholesterol/HDL Cholesterol Ratio 4.97 Low Risk

: 3.3 - 4.4

Average Risk : 4.5 - 7.1

Moderate Risk: 7.2 - 11.0

Method: Calculation

Method: Calculation

LDL Cholesterol/HDL Cholesterol Ratio

2.65

Desirable Level: 0.5 - 3.0

Borderline Risk: 3.0 - 6.0

High Risk

: > 6.0

Method: Calculation

#### Comments / Interpretation:

- Lipid profile is a panel of blood tests that serves as an initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases.

> DR.BIKASH K CHAUDHURY CONSULTANT BIOCHEMIST



<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



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Regn Date

: 24/01/2020 07:25

Name

: MRS. NEHA SINHA

Regn No

: 46201812

Ref By

Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type : Serum

Sample Collection: 24/01/2020 08:12

**Print Date** 

: 25/01/202009:30

Age / Sex

: 36 Years / Female

Regn Centre

: Nizampet - 46

Ref no.

## **PHOSPHORUS**

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

**Phosphorus** 

3.9

Adults: 2.4 - 5.1 mg/dL

Children: 4.0 - 7.0 mg/dL

Method: Phosphomolybdate

#### Comments / Interpretation:

- Serum Phosphorus levels are useful in monitoring renal, endocrine and GI disorders.

- Levels are influenced by the dietary intake, meals, exercise and biphasic circadian rhythm.

### **ALBUMIN SERUM**

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

**Albumin** 

4.3

3.2 - 4.8 g/dL

Method: Bromocresol Green (BCG)

### Comments / Interpretation:

- High albumin levels may be caused by severe dehydration.

- Low albumin levels may be caused by malnutrition, severe burns, Kidney & Liver diseases.

### **CALCIUM**

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

Serum Calcium

8.72

Adults

: 8.3 - 10.6 mg/dL

Children

10 Days - 24 Months: 9.0 - 11.0 mg/dL

2 - 12 Years

: 8.8 - 10.8 mg/dL

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Method: OCPC

## Comments / Interpretation:

- Useful in diagnosis and prognosis of a wide range of disorders including disorders of proteins and Vitamin D, diseases of bone, Kidney, Parathyroid gland and GI tract.

## **CREATININE**

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

Creatinine

0.72

0.55 - 1.02 mg/dL

Method : Jaffe's Kinetic (IDMS traceable)

<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



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### LABORATORY TEST REPORT

Regn Date

: 24/01/2020 07:25

Name

: MRS. NEHA SINHA

Regn No

: 46201812

Ref By

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type : Serum

Sample Collection: 24/01/2020 08:12

**Print Date** 

: 25/01/202009:30

Age / Sex

: 36 Years / Female

Regn Centre

: Nizampet - 46

Ref no.

### Comments / Interpretation:

- Useful in the diagnosis of renal insufficiency and is more specific and sensitive indicator of renal disease than of BUN.

- Use of simultaneous BUN and creatinine levels provide more information in the diagnosis of renal insufficiency.



Certificate # MC-2657

CONSULTANT BIOCHEMIST

<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



Ref By

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3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

## LABORATORY TEST REPORT

Regn Date : 24/01/2020 07:25 Name : MRS. NEHA SINI

: 24/01/2020 07:25 : MRS. NEHA SINHA

Regn No : 46201812

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type : Serum

Sample Collection: 24/01/2020 08:12

Print Date : 25/01/2020 09:30

Age / Sex : 36 Years / Female

Regn Centre : Nizampet - 46

Ref no.

VITAMIN-D (25-HYDROXY, D2+D3) - TOTAL

TEST NAME RESULT BIOLOGICAL REFERENCE INTERVAL

25 (OH) VIT D2 Ergocalciferol : 3.13 ng/mL Specific reference range for

Vitamin D2 is not available.

25 (OH) VIT D3 Cholecalciferol : 8.72 ng/mL Specific reference range for

Vitamin D3 is not available.

25 (OH) VIT D TOTAL (Vit D2 + Vit D3) : 11.85 ng/mL Deficiency : < 20

Insufficiency: 20 -30 Sufficiency: 30 - 100 Toxicity: >100

Method: Liquid Chromatography Tandem Mass Spectrometry.

#### Interpretation:

- Vitamin D is a steroid hormone involved in the intestinal absorption of calcium and regulation of calcium hemostasis.
- Vitamin D is essential for the formation and maintenance of strong, healthy bones.
- 25 OH Vitamin D is the major circulating form of Vitamin D and precursor of active form of 1, 25, di hydroxy Vitamin D.
- Vitamin D occurs in two forms, D2 ergocalciferol (plant origin) and D3 cholecalciferol (sunlight origin) in the body.
- Vitamin D deficiency can result from inadequate exposure to the sun, inadequate alimentary intake, decreased absorption, abnormal metabolism or Vitamin D resistance. Recently many chronic disease such as cancer, high blood pressure, osteoporosis and several autoimmune diseases have been linked to Vitamin D deficiency.
- 25(OH) Vit-D is a reliable indicator of the Vitamin D status because the serum or plasma levels of it reflect the storage levels of Vitamin D in our body. Lower levels of 25(OH) Vit-D correlates with the clinical symptoms of Vitamin D deficiency.
- Vitamin D2 and Vitamin D3 added together is total Vitamin D.

DR S G ALI HATIM
CONSULTANT BIOCHEMIST

Customer Care © 040 2100 0000

Released Date: 24/01/2020 14:56

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<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



# IJAYA DIAGNOSTIC CEN

3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

## LABORATORY TEST REPORT

Regn Date

: 17/01/2020 07:22

Name

: MRS. NEHA SINHA

Regn No

: 46201188

Ref By

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type

: Fluoride Plasma

Sample Collection: 17/01/2020 07:23

Print Date

: 18/01/202009:20

Age / Sex

36 Years / Female

Regn Centre

: Nizampet - 46

Ref no.

**FASTING PLASMA GLUCOSE (FPG)** 

**TEST NAME** 

RESULT

**BIOLOGICAL REFERENCE INTERVAL** 

**Fasting Plasma Glucose** 

202

Normal: 70 - 100 mg/dL

Impaired Fasting Glucose: 101 - 125 mg/dL

Diabetes: >/= 126 mg/dL

Method: Hexokinase

Comments / Interpretation:

- ADA Guidelines (2019) are adopted for the evaluation of Diabetic Status.

POST LUNCH PLASMA GLUCOSE (PLPG)

**TEST NAME** 

RESULT

BIOLOGICAL REFERENCE INTERVAL

2 hrs Post Lunch Plasma Glucose

332

Normal: < 140 mg/dL

Impaired Glucose Tolerance: 141 - 199 mg/dL

Diabetes: >/= 200 mg/dL

Method: Hexokinase

Comments / Interpretation:

- ADA Guidelines (2019) are adopted for the evaluation of Diabetic Status.

Certificate # MC-2657

DR.AFREEN ANWAR CONSULTANT BIOCHEMIST

Customer Care © 040 2100 0000 Released Date: 17/01/2020 15:06

<sup>\*</sup> Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory



# IJAYA DIAGNOSTIC CEN

3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Ph: 040 2342 0422 to 427

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

#### LABORATORY TEST REPORT

Regn Date

: 17/01/2020 07:22

Name

: MRS. NEHA SINHA

Regn No

46201188

Ref By

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type : Whole Blood - EDTA

Sample Collection: 17/01/2020 07:23

**Print Date** Age / Sex

Regn Centre

: 18/01/2020 09:20

36 Years

/ Female

Ref no.

: Nizampet - 46

# **GLYCOSYLATED HAEMOGLOBIN (HbA1c)**

**TEST NAME** 

RESULT

**BIOLOGICAL REFERENCE INTERVAL** 

Glycosylated Haemoglobin

9.1

Non Diabetic: < 5.6%

Prediabetic Range: 5.7 - 6.4%

Diabetic Range: > 6.5%

Method: High Performance Liquid Chromatography (HPLC)

#### Comments / Interpretation:

- Glycosylated hemoglobin is proportional to mean plasma glucose level during previous 6-12 weeks.

- Values may not be comparable with different methodologies and even different laboratories using the same methodology.

- Perform A1c at least twice annually in Diabetes patients to ascertain meeting of goals

- Perform A1c test quarterly in Diabetes patients whose therapy has changed and who are not meeting goals

- Recommended goal of A1c is < 7%

- ADA Guidelines 2019.

Certificate # MC-2657

DR.AFREEN ANWAR CONSULTANT BIOCHEMIST



# IJAYA DIAGNOSTIC CE

3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Ph: 040 2342 0422 to 427

/ Female

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

### LABORATORY TEST REPORT

Regn Date

: 17/01/2020 07:22

Name

MRS. NEHA SINHA

Regn No

46201188

Ref By

: Dr. DR REDDYS LABORATORIES LTD

(ONPAYMENT)

Sample Type: Whole Blood - EDTA

Sample Collection: 17/01/2020 07:23

**Print Date** 

18/01/2020 09:20

Age / Sex Regn Centre 36 Years

: Nizampet - 46

Ref no.

Bio-Rad

D-100

DT7H290801 **Patient Report** 

#### 6201188

atient ID:

OB:

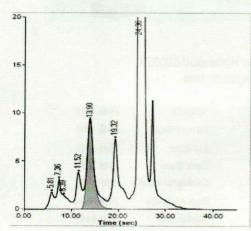
Gender: Physician:

ick: U40 in Date/Time: Position: 1

17-Jan-2020 12:06:31

Note:

Comment:



RT	Area	Area%	Concentration (% NGSP)
5.81	1643.15	0.96	
7.36	2398.38	1.41	
8.39	1966.08	1.15	
11.52	4411.20	2.59	
13.90	12788.39		9.1
19.32	10027.75	5.89	
24.36	137109.04	80.49	
	5.81 7.36 8.39 11.52 13.90 19.32	5.81 1643.15 7.36 2398.38 8.39 1966.08 11.52 4411.20 13.90 12788.39 19.32 10027.75	5.81     1643.15     0.96       7.36     2398.38     1.41       8.39     1966.08     1.15       11.52     4411.20     2.59       13.90     12788.39        19.32     10027.75     5.89

Total Area:

Status: Released

Page 1 of 1

Printed: 17-Jan-2020 12:06:37

\* Suggestess Chateai Euneration, 4f3 Necessary Kindly Discuss with Psternationy

NABL Accredited



The Pioneers in Diagnostic Medicare...

HOSPITALS

Ph: 23607777 Ext: 3035

email: ravinm1@rediffmail.com

FOR DIABETES AND ENDOCRINOLOGY

Date:

ID

: 6561 ( UHID: APJ1.0001960673 )

Date

: 26/May/2018

Name

: Mrs.Neha Sinha

Age

: 35 (F)

Complaints/Obs:On Glycomet GP-1 -- twice daily from 1 years. 1 Child. Not for pregnancy for next 1 year. Cycles- regular. LMP-4/5/18. Exercise- recent. Diet erratic.

Diagnosis: Type2 diabetes 4 years, Others: Cx Spondylosis 1 Year

Rx

BP: 130/80 mmHg Wt: 96 Kg Ht: 158 cm BMI: 38.5 Kg/m<sup>2</sup>

1) TAB. Glycomet GP-0.5 Forte

1 tablet before breakfast - 1 tablet before dinner

#### Advice:

» 1400 Kcal low fat diabetes diet--

» To be careful about hypoglycemia- always carry glucose with you - at times when you feel extreme weakness Or sweating with hunger- take 3-4 tsp of glucose immediately

If possible try to check blood glucose at that time.

Dr.Rabinder Nath Mehrotra

Reg no: 39058

Tests to be taken for next visit: FBS, Creatinine + Lipid Profile/ eyes- retina Check + Spot urine micro albumin

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Online appointments

www.apollosugar.com

Toll No: 1800 103 1010

18/1/20 WH-93.8 kgs BP-120/75 Publ-96