VIJAYA DIAGNOSTIC CENTRE®

H No. 2-137/10, Plot No.42, NH65, Opposite R.S. Brothers, Gangaram, Chanda Nagar, Hyderabad - 500050, Telangana

TEST REPORT

Name	: **Mrs. I SOUNDARYA**			Registered on	: 28-Jun-2025 08:38
Age/Gender	: **30 Years / Female**	BirthDate :	24-May-1995	Collected on	: 28-Jun-2025 11:16
Registration ID	: **251250015430**			Released on	: 28-Jun-2025 16:51
Ref. By	: Dr. RASHMI CHAUDHARY			Printed on	: 28-Jun-2025 18:13
Sample Type	: Whole Blood - EDTA			Regn Centre	: **Kondapur - 125**

GLYCATED HAEMOGLOBIN (HbA1C)

TEST NAME	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycated Haemoglobin	: 5.3	%	Non Diabetic : < 5.7 Pre - Diabetic Range : 5.7 - 6.4 Diabetic Range : >/= 6.5

Method: High performance liquid chromatography

Interpretation / Comments:

Reference Range as per American Diabetes Association (ADA) 2025 Guidelines:

* HbA1c is used to diagnose Diabetes, monitor glycemic control, evaluate the need to change therapy and predict the development of microvascular complications.
* The Glycemic target for non-pregnant adults with diabetes is <7.0%. Lowering A1c value below or around 7.0% has been shown to reduce microvascular complications and macrovascular disease.
* Trends in HbA1C values, at interval of 3 months are a better indicator of Glycemic control than a single test.
* Glycated hemoglobin is proportional to mean plasma glucose level during the previous 6-12 weeks.
* HbA1c result may not correlate with the blood glucose level in presence of Hemoglobin variants, conditions that affect red cell turnover, Systemic Inflammatory Diseases, Chronic renal failures and liver diseases, recent blood transfusions and hypertriglyceridemia. Clinical Correlation is advised in interpretation of low Values.
* ADA guidelines 2025 is being followed.

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Sample Type	: Whole Blood - EDTA			Regn Centre	: **Kondapur - 125**

GLYCATED HAEMOGLOBIN (HbA1C)

HLC-723 G11 V3.11 2025-06-28 16:45:44

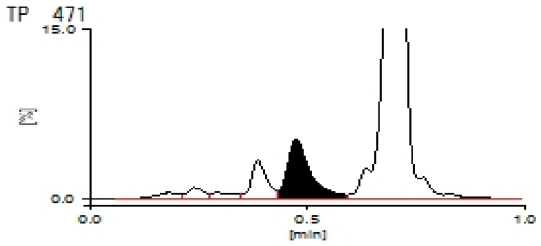
ID 4251250015430
Sample No. 2025062816430387 SL 0003 - 01
Patient ID
Name
Comment

CALIB(N) Y =1.1304X + 0.6477

Name	%	Time	Area
FP			
A1A	0.4	0.18	5.26
A1B	0.6	0.24	7.11
F	0.4	0.33	5.26
LA1C+	1.8	0.38	21.00
SA1C	5.3	0.47	48.74
A0	93.0	0.70	1091.62
H-VAR			
	Total Area		1179.00

HbA1c 5.3 %

HbF 0.4 %



28-06-2025 16:45:44 VDC 1 / 1

VDC
Madinaguda

DR. R PAVAN KUMAR
MD BIOCHEMISTRY
Registration No: 70314

* Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory

VIJAYA DIAGNOSTIC CENTRE®

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Registration ID	: **251250015430**			Released on	: 28-Jun-2025 16:15
Ref. By	: Dr. RASHMI CHAUDHARY			Printed on	: 28-Jun-2025 18:13
Sample Type	: Serum			Regn Centre	: **Kondapur - 125**

TSH-ULTRASENSITIVE

TEST NAME		RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
TSH - Ultrasensitive *Method: Chemiluminiscence Immunoassay*	:	2.031	µIU/mL	Non pregnant : 0.55 - 4.78 Pregnant 1st Trimester : 0.3 - 4.5 2nd Trimester : 0.5 - 4.6 3rd Trimester : 0.8 - 5.2

Interpretation:-

- This test is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) Hypothyroidism.
- TSH assays with increased sensitivity and specificity provide a primary diagnostic tool to differentiate hyperthyroid from euthyroid patients.
- Helpful in monitoring T4 replacement or T4 supressive therapy.
- Helpful to Quantify TSH levels in the subnormal range.
- TSH levels are subjected to circadian variation, hence the time of the day has influence on the measure serum TSH concentrations.
- TSH levels are increased in Primary hypothyroidism, subclinical hypothyroidism.
- TSH levels are decreased in Graves disease, Primary hyperthyroidism, TSH deficiency.

DR. NEHA GAJBI
MBBS.MD
Registration No: TSMC/FMR/30414

* Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory

VIJAYA DIAGNOSTIC CENTRE®

3-6-16 & 17, Street No. 19, Opp. Lane to Tanishq, Chandra Nagar, Himayatnagar, Hyderabad - 500029

TEST REPORT

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Registration ID	: **251250015430**			Released on	: 28-Jun-2025 17:27
Ref. By	: Dr. RASHMI CHAUDHARY			Printed on	: 28-Jun-2025 18:13
Sample Type	: Serum			Regn Centre	: **Kondapur - 125**

VITAMIN D TOTAL (D2 + D3)

TEST NAME		RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
25 (OH) VIT D2 Ergocalciferol	:	1.86	ng/mL	NA
Method: LC-MS/MS				
25 (OH) VIT D3 Cholecalciferol	:	17.68	ng/mL	NA
Method: LC-MS/MS				
Vitamin D total (D2+D3)	:	**19.54**	ng/mL	Deficiency : < 20 Insufficiency : 20 – 29 Sufficiency : 30 – 100 Toxicity : > 100
Method: Calculation				

Interpretation / Comments :

- Vitamin D is a steroid hormone involved in the intestinal absorption of calcium and regulation of cal 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. JNANKUMAR CHAUDHURI
MD BIOCHEMISTRY
Registration No: TSMC/FMR/10720

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TEST REPORT

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Age/Gender	: **30 Years / Female**	BirthDate :	24-May-1995	Collected on	: 28-Jun-2025 11:16
Registration ID	: **251250015430**			Released on	: 28-Jun-2025 14:13
Ref. By	: Dr. RASHMI CHAUDHARY			Printed on	: 28-Jun-2025 18:13
Sample Type	: Whole Blood - EDTA			Regn Centre	: **Kondapur - 125**

COMPLETE BLOOD PICTURE (CBP)

TEST NAME		RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Haemoglobin	:	13.4	gm/dL	12.0 - 15.0
Method: Photometric Measurement				
Total RBC Count	:	4.8	Cells/cumm	3.8 - 4.8
Method: Coulter Principle				
Packed Cell Volume / Hematocrit	:	40.4	%	36.0 - 46.0
Method: Calculated				
MCV	:	84.3	fL	83.0 - 101.0
Method: Derived From RBC Histogram				
MCH	:	27.9	pg	27.0 - 32.0
Method: Calculated				
MCHC	:	33.1	gm/dL	31.5 - 34.5
Method: Calculated				
RDW	:	14.0	%	11.6 - 14.0
Method: Derived From RBC Histogram				
Total Leucocytes (WBC) Count	:	8300	Cells/cumm	4000 - 10000
Method: Coulter Principle				
Differential count				
Neutrophils	:	56	%	40 - 80
Method: VCS 360 Technology and Microscopy				
Lymphocytes	:	34	%	20 - 40
Method: VCS 360 Technology and Microscopy				
Eosinophils	:	3	%	1 - 6
Method: VCS 360 Technology and Microscopy				
Monocytes	:	6	%	2 - 10
Method: VCS 360 Technology and Microscopy				
Basophils	:	1	%	0-2
Method: VCS 360 Technology and Microscopy				
Absolute Leucocyte Count				
Absolute Neutrophil Count	:	4648	Cells/cumm	2000 - 7000
Method: Calculated				
Absolute Lymphocyte Count	:	2822	Cells/cumm	1000 - 3000
Method: Calculated				
Absolute Eosinophil Count	:	249	Cells/cumm	20 - 500
Method: Calculated				

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Sample Type	: Whole Blood - EDTA			Regn Centre	: **Kondapur - 125**

COMPLETE BLOOD PICTURE (CBP)

TEST NAME		RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Absolute Monocyte Count	:	498	Cells/cumm	200 - 1000
Method: Calculated				
Platelet Count	:	360000	Cells/cumm	150000 - 410000
Method: Coulter Principle and Microscopy				
Peripheral Smear				
RBC	:	Normocytic Normochromic		
Method: Microscopy of Leishman stained smear				
WBC	:	Normal in morphology, maturity and distribution		
Method: Microscopy of Leishman stained smear				
Platelets	:	Adequate		
Method: Microscopy of Leishman stained smear				

DR. NEHA GAJBI
MBBS.MD
Registration No: TSMC/FMR/30414

* Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory

VIJAYA DIAGNOSTIC CENTRE®

Opp. Heritage Fresh, Seshadri Marg, Raghavendra Colony, Kondapur, Hyderabad - 500084, Telangana

TEST REPORT

Name	:	**Mrs. I SOUNDARYA**	Registered on	:	28-Jun-2025 08:38
Age/Gender	:	**30 Years/Female**	Released on	:	28-Jun-2025 12:13
Registration ID	:	251250015430	Printed on	:	28-Jun-2025 18:13
Ref. By	:	Dr. RASHMI CHAUDHARY	Regn Centre	:	**Kondapur - 125**

DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES
ULTRASOUND PELVIS

History : C/o prolonged periods

Urinary Bladder : Well distended. No wall thickening was seen.

Uterus : Size : 7.7 x 3.9 x 5.3 cm
Normal in size, shape and echotexture.
Endometrial thickness is normal and measures : 7.8 mm.
Cervix appears normal.

Ovaries : Right ovary :3.3 x 2.0 x 2.8 cm (Volume : 9 cc) AFC 15-18
Left ovary :2.9 x 1.3 x 2.6 cm (Volume : 6 cc) AFC 12- 15
Both ovaries are normal in size, shape and shows multiple peripherally arranged follicles with maintained central echogenic stroma.

Impression :

- **Bilateral ovaries show polycystic morphology**

- FOR CLINICAL CORRELATION.

DR. B ARCHANA
MBBS, DMRD
Registration No: APMC/FMR/86442

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

* Suggested Clinical Correlation, If Necessary Kindly Discuss with signatory