

per 2073



# ARTHRITIS RHEUMATISM & PAIN CLINIC

## DR P D RATH

MD, FRACR, FRACR (UK), FRACR (CAN), FRACR (INDIA), FRACR (USA), FRACR (UK), FRACR (CAN), FRACR (INDIA), FRACR (USA), FRACR (UK), FRACR (CAN), FRACR (INDIA), FRACR (USA)

DIRECTOR & HEAD OF DEPTT RHEUMATOLOGY

MAX SUPER SPECIALTY HOSPITAL, BANGALORE, INDIA

MEMBER OF THE BOARD OF DIRECTORS, INDIAN RHEUMATOLOGY SOCIETY, AND ASSOCIATION OF RHEUMATOLOGISTS, INDIAN RHEUMATOLOGY SOCIETY

SPECIALIST IN RHEUMATOID ARTHRITIS, OSTEOARTHRITIS, FIBROSITIC ALTERATIONS, FIBROSITIC ALTERATIONS, FIBROSITIC ALTERATIONS, FIBROSITIC ALTERATIONS

CONSULTANT AT MAX HEALTH CARE, NEW DELHI, INDIA

Consultation in OPD only. Not available in OPD. No Quizzes in OPD

BP-110/74  
SFG-99/11  
PR-100/100  
COI-77kg

In case of PERSISTENT infection  
Stop all medications and inform

S to Live Sign. G1 F

D RA Refractory - 30/7/24

Se - Sjogre

i) A to 2 daily

ii) Subred 20mg  
Se/cear

iii) Longa-40  
TBD

iv) Iguratimab 750

v) Aveeno over skin

vi) Movo 400 BD BD

3 months

vii) Pilo 750 5g TDS

CRP CRP  
Hes SUP  
for Greater

viii) Pregabalin 750 PM

ix) PAN-D (M)

x) Gabapentin 300  
100 CRP

xi) XStowia oral

xii) Platan 300-50

Dr P.D. Rath  
110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

Prescription to be Done Before  
Every Follow up as advised



20/2/24

# ARTHRITIS RHEUMATISM & PAIN CLINIC

## DR P D RATH

MD FRCR, FRCP (Gen), FRCP (Rheum)  
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### DIRECTOR & HEAD OF DEPT RHEUMATOLOGY

RAA SUPER SPECIALITY HOSPITAL  
SAGY, BHARU, PANCHKULA, HARYANA

### SPECIALIST IN

- OSTEOARTHRITIS
- DEGENERATIVE
- TRICKLE CELL ARTHRITIS
- ARTHRITIS SPONDYLITIS
- RA
- SCLERODERMA
- DM
- OSTEOPOROSIS
- CHILDHOOD ARTHRITIS

### CONSULTANT AT

RAA HEALTH CARE, NEW DELHI  
SAGY  
PANCHKULA  
HARYANA

Consult at RASTA (RAA) Only  
Between 4:00pm to 8:00pm  
Not Consult on Sunday

APPOINTMENT FEES: 1000/- (Cash)  
1500/- (Credit Card)  
2000/- (Insurance)  
2500/- (Foreign Insurance)  
2500/- (Health Insurance - All Insurance)

RP - 12/18/17  
SP - 9/1/17  
PR - 8/16/17  
WT - 7/5/17

Shalini Singh 41 F

Dr RA Pathak 20/2/24  
Sec. Spjyuit

CAUTION  
PLEASE DO NOT  
USE THIS FORM FOR  
ANY OTHER PURPOSE

Dr. Indrani  
10/1/17 BD.

Dr. Iqbal Singh BD.

Dr. Raj Subal Singh SC.  
once a week

Dr. Navneet 10/1/17 BD

Dr. Pooja 10/1/17 BD

Dr. Pooja Singh BD

Dr. Anshu Singh

Dr. Anshu Singh  
Spjy 12/5/17

Dr. P.D. Rath  
10/1/17 BD

Dr. Manish  
Dr. Anshu Singh  
Dr. Anshu Singh  
Dr. Anshu Singh  
Dr. Anshu Singh  
Dr. Anshu Singh

First Review to be Done Before  
Every Follow up as advised

Arthritis is not cured  
but can be treated well

The Arthritis is progressive, painful, disabling, distressing and its complications have been reported in the patient's notes.



Dr. P.D.

# ARTHRITIS RHEUMATISM & PAIN CLINIC

## DR P D RATH

MD, FRCR, FRCP (UK), FRCP (Edinburgh)  
 FRCR (UK), FRCR (USA), FRCR (Canada)  
 FRCR (UK), FRCR (USA), FRCR (Canada)

## SPECIALIST IN

OSTEOARTHRITIS  
 GOUT  
 RHEUMATOID ARTHRITIS  
 SYSTEMIC LUPUS ERYTHEMATOSUS  
 SCLERODERMA  
 DERMATOMYOSITIS  
 POLYMYOSITIS  
 FIBROSIS  
 SICKLE CELL DISEASE  
 THALASSAEMIA

## CONSULTANT AT

NEW HEALTH CARE NEW DELHI  
 NEW DELHI  
 NEW DELHI  
 NEW DELHI

BP - 130/80  
 FA - 106 bpm  
 PR - 99/1

Shalini Singh LIT

DR RATH Referral 18/10/23  
 Sec - Sjogrens

(SPT)

4. TB Igurat 25y  
 4. TB Igurat 25y  
 4. TB Igurat 25y

CECT  
 HACT  
 Clearest

1. 4.5. Subtotal say 8c max in 100g

4. S. trachea RB BO

4. PAV - D @ Early stages

3. Heavy Pilo TB 4 Sy 7/14 BO

CRP ESR  
 CAP SROF  
 SJM Schwann

CLINICAL  
 HISTORY  
 PHYSICAL EXAMINATION  
 INVESTIGATIONS  
 TREATMENT

DR. P. D. RATH  
 FRCR, FRCP  
 Director & Head of Deptt Rheumatology

The clinical diagnosis, physical examination and treatment details are to be kept strictly confidential to the patient or family.



Reg 1785

# ARTHRITIS RHEUMATISM & PAIN CLINIC

## DR P D RATH

DR P D RATH (FRACR) (FRACR) (FRACR)  
FRACR (FRACR) (FRACR) (FRACR)  
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### SPECIALIST IN

PHYSICIAN RHEUMATOLOGY  
PHYSICIAN RHEUMATOLOGY

### CONSULTANT AT

ARIZONA HEALTH CARE NETWORK  
ARIZONA HEALTH CARE NETWORK  
ARIZONA HEALTH CARE NETWORK  
ARIZONA HEALTH CARE NETWORK

5/14/20

Shalini Patel - 41 F

Dr. P. D. Rath 5/1/23

1/12/10/17/19  
5/14/20

1. NO 2004  
90g RES

- 1. IRON-HD 30.
- 2. Tj Extraoral 20y 5c/level
- 3. Tj Follicular 20y 5c/level  
(WES)
- 4. Follicle 5y N/A/Tu/SAT

10. HCG 30y 0

11. S Tumor 16 30.

12. D/Coin 20y 30.

13. Supraclav 20 0

14. Upper 13 50k/level  
1000

15. CRP 20 30.

16. PPD - 0 0

3 weeks  
Use esp  
esp 1000  
1000  
1000

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# ARTHRITIS RHEUMATISM & PAIN CLINIC

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MD, FRAC (RHEUMATOLOGY) (1997) (London)  
FRACP (RHEUMATOLOGY) (2001) (London)  
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### DIRECTOR & HEAD OF RUPPT RHEUMATOLOGY

MAX SURYA SPECIALITY HOSPITAL  
SARVE CHAKRA, RAIPUR, JHARKHAND

MEMBER OF THE RHEUMATOLOGY SOCIETY OF INDIA  
MEMBER OF THE RHEUMATOLOGY SOCIETY OF INDIA  
MEMBER OF THE RHEUMATOLOGY SOCIETY OF INDIA  
MEMBER OF THE RHEUMATOLOGY SOCIETY OF INDIA

### SPECIALIST IN

OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS  
OSTEOARTHRITIS

### CONSULTANT AT

MAX HEALTH CARE, RAIPUR  
SARVE CHAKRA  
SARVE CHAKRA  
SARVE CHAKRA

Shalini Singh 41 F

Dr P D Rath  
Sarve Chakra

14/4/20

CBE  
ESR  
Snot  
Sunt  
In blood

1. No. Folitran 20mg 500 (L2000)
2. Folic acid 5mg daily (L2000)
3. Hair oil 200.
4. No. Sahal 100mg 500.
5. No. 30mg 500.
6. Snot vs B.D.
7. Dyloin 50mg 2 (L2000)

Dr. P. D. Rath  
MD, FRAC (RHEUMATOLOGY) (1997) (London)  
FRACP (RHEUMATOLOGY) (2001) (London)  
FRAC (RHEUMATOLOGY) (2001) (London)  
FRAC (RHEUMATOLOGY) (2001) (London)

3 March



MAX SURYA | MD & FRAC (RHEUMATOLOGY) (1997) (London) | FRACP (RHEUMATOLOGY) (2001) (London) | FRAC (RHEUMATOLOGY) (2001) (London) | FRAC (RHEUMATOLOGY) (2001) (London)

MAX SURYA HEALTH SERVICES  
I TRUST, HE CARES  
WE CARE FOR YOUR WELL-BEING

For more information, please contact our office. Treatment costs and hospitalization fees may vary according to the policy of the insurer.



Rajid-4785

# ARTHRITIS RHEUMATISM & PAIN CLINIC

## DR P D RATH

MBBS, MD, FRCP (UK), FRCP (INDIA)  
DIPLOMA IN RHEUMATOLOGY (UK)  
DIPLOMA IN RHEUMATOLOGY (INDIA)  
FELLOWSHIP IN RHEUMATOLOGY (INDIA)  
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### DIRECTOR & HEAD OF DEPT. RHEUMATOLOGY

MAA SUPER SPECIALITY HOSPITAL  
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### SPECIALIST IN

RHEUMATOID ARTHRITIS  
GONORRHOEAL ARTHRITIS  
PSORIASIS ARTHRITIS  
ANKYLOSING SPONDYLITIS  
SLE  
SCLERODERMA  
DIPHTHERIA  
DYSPLASIA  
DYSPLASIA  
DYSPLASIA

### CONSULTANT AT

MAA HEALTH CARE, NEW DELHI  
MAA  
TRINAMALAYAM  
MAA DISTRICT

CP 10/70  
P. 11/10/10  
S. 12/10/10

① - Stealing Exh. 10/10/10  
D. 11/10/10

1. Allergic poor @ 10/10/10  
2. Microbial say 10/10/10  
3. Subacute say 10/10/10  
4. Subacute say 10/10/10  
5. Subacute say 10/10/10

1. Dry Fall from say 10/10/10  
are good

2. Relative say 10/10/10  
3. HCB's say 10/10/10  
4. Subacute say 10/10/10  
5. Subacute say 10/10/10

Dr. P. D. Rath  
MAA SUPER SPECIALITY HOSPITAL  
MAA (MAA) TRINAMALAYAM DISTRICT

Immun  
CPA BSA  
Subacute  
Subacute

MAA SUPER SPECIALITY HOSPITAL  
MAA (MAA) TRINAMALAYAM DISTRICT

**VITAMIN B12 DEFICIENCY**

Dr. MANJUNATH  
 100, JAYAPRASAD ROAD, NEHALI, BANGALORE  
 560025  
 98454 44444



Reference Range  
 (Serum)  
 200-900 pg/ml

NAME	MR. SHARATH	Age: 35 Years	Gender: Male	Requested	200000	400000
Lab No.	1234567			Received	200000	700000
Ref. No.	1	Self		Reported	200000	200000
				Report Date		Free

Test Name	Result	Unit	Ref. Range
VITAMIN B12 (CYANOCOBALAMIN) SERUM	200	pg/ml	210 - 910

Note: To differentiate vitamin B12 & folic deficiency, measurement of Methylmalonyl acid in urine & serum homocysteine level is suggested.

**Comments**

Vitamin B12 performs many important functions in the body but the most significant function is to act as a coenzyme for methylcobalamin in methylcobalamin. It also is the form of gene, methylcobalamin which acts as a coenzyme for the conversion of folic acid to methyl folic acid. Cobalamin deficiency leads to atrophy of gastric mucosa or absence of intrinsic factor. Cobalamin deficiency leads to hyperhomocysteinemia and demyelination of large nerve fibers of spinal cord. Normal body stores is sufficient to last for 3-5 years. Source of Vitamin B12 are liver, kidney, fish, meat, eggs, milk, cheese, yogurt.

**Increased Levels**

- 1. Lack of intrinsic factor: Total or partial gastrectomy, Atrophic gastritis, gastric tumor antibodies
- 2. Malabsorption: Regional ileitis, resected bowel, Tropical Sprue, Celiac disease, pancreatitis, Crohn's disease, bacterial overgrowth & schistosomiasis
- 3. Lack of injected vitamin B12: Salt wasting
- 4. Vitamin deficiency: Vegetarians
- 5. Congenital disorders: Orotic aciduria & transcobalamin deficiency
- 6. Increased demand: Pregnancy especially 3rd trimester

**Increased Levels**

Congenital heart failure, Congestive heart failure, Acute & Chronic Myeloid Leukemia, Polycythemia vera, Dehydration, liver metastasis, Liver disease, Drug induced increases & Protein restriction

**Ritic**  
 100 mg  
 100 mg  
 100 mg

**Neural**  
 100 mg  
 100 mg  
 100 mg

**Neurocal**  
 100 mg  
 100 mg  
 100 mg

End of report



**Dr. MANJUNATH**  
 100, JAYAPRASAD ROAD, NEHALI, BANGALORE  
 560025  
 98454 44444



22 COBE'S  
 COUNTRY LABORATORY TECHNOLOGY  
 1011 W. HARRISON ST.  
 MILWAUKEE, WI 53233  
 TEL: 414.224.2222  
 FAX: 414.224.2222

NAME: **MRS. BRAYNE** AGE: 55 Years SEX: Female  
 LAB NO: **1182743** ACTUALLY BY: **DR. BRAYNE**  
 CLINICAL: **HEALTH SCREENING** REFERENCE: **SYMPTOM FREE** SIGNATURE: **BRAYNE/1182743**  
 Health Status: **Final** REFERRED BY: **DR. VITKOVIC PAVIC**

Test	Result	Biological Reference Range	Units
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**NEEDHAM D. PAIS**

**COMPLETE BLOOD COUNT (CBC) BLOOD**

HEMOGLOBIN	<b>14.0</b>	Low 12.0-15.0	g/dl
HEMATOCRIT	<b>39.3</b>	Low 36.0-46.0	%
MEAN CORPUSCULAR VOLUME (MCV)	<b>92.9</b>	Low 80-100	fL
RED BLOOD CELL COUNT (RBC)	<b>14.8</b>	Low 4.5-5.5	MM <sup>3</sup>
WBC	<b>10.8</b>	Low 5.0-10.0	MM <sup>3</sup>
PLATELET COUNT	<b>76</b>	150-400	MM <sup>3</sup>

TOTAL LEUCOCYTE COUNT	<b>6.1</b>	6.0-11.0	MM <sup>3</sup>
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**DIFFERENTIAL LEUCOCYTE COUNT, BLOOD**

NEUTROPHILS	<b>40.7</b>	40.0-60.0	%
LYMPHOCYTES	<b>57.0</b>	20.0-40.0	%
MONOCYTES	<b>0.3</b>	1.0-5.0	%
EOSINOPHILS	<b>0.0</b>	1.0-5.0	%
PLASMA CELLS	<b>0.0</b>	0.0-1.0	%
IMMATURE NEUTROPHILS COUNT	<b>0.0</b>	0.0-1.0	MM <sup>3</sup>
IMMATURE LYMPHOCYTE COUNT	<b>0.0</b>	0.0-1.0	MM <sup>3</sup>
IMMATURE MONOCYTE COUNT	<b>0.0</b>	0.0-1.0	MM <sup>3</sup>
IMMATURE EOSINOPHILS COUNT	<b>0.0</b>	0.0-1.0	MM <sup>3</sup>
IMMATURE PLASMA CELL COUNT	<b>0.0</b>	0.0-1.0	MM <sup>3</sup>

**Microscopic:**  
 The percentage counts of each type of differential leucocyte from 100. Absolute counts that exceed normal or indicate there is a concentration of the particular count for observation of morphology. The differential leucocyte counts are reported as either total V cell volume or with counts of field.

**ERYTHROCYTE SEDIMENTATION RATE, BLOOD**

ESR	<b>48</b>	High 0-15	mm/hr
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**HHAIC POLYMERIZED HEMOGLOBIN, BLOOD**

HHAIC	<b>0.0</b>	0.2-0.8	%
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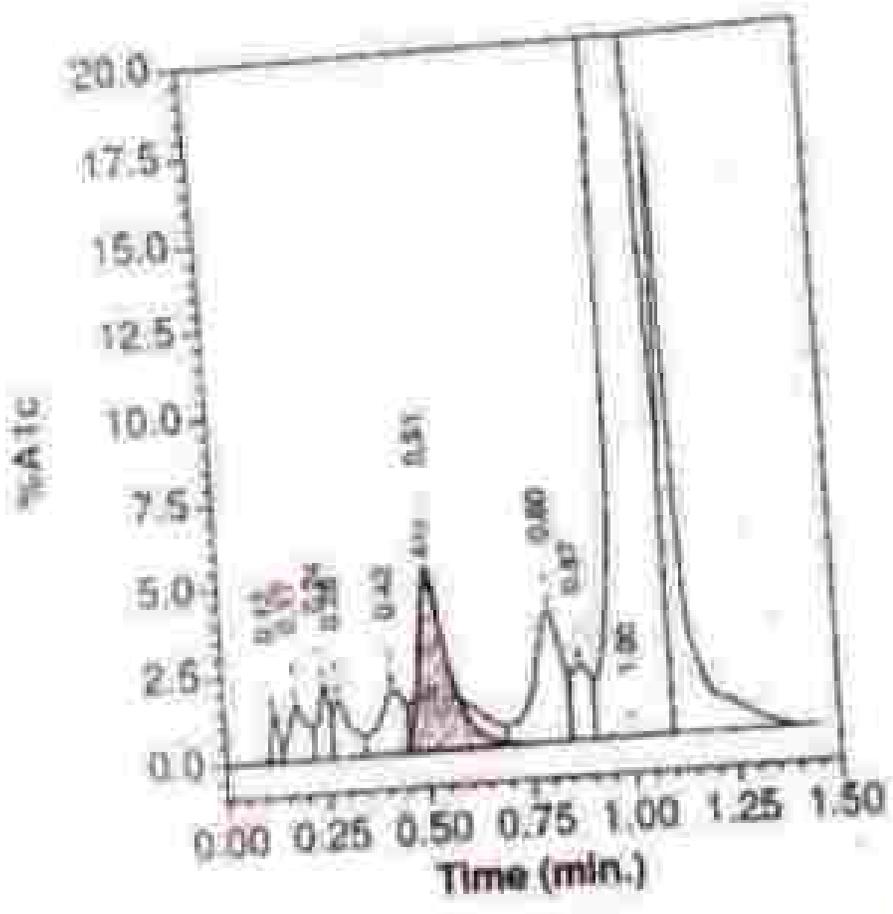
1011 W. HARRISON ST. MILWAUKEE, WI 53233 TEL: 414.224.2222 FAX: 414.224.2222 WWW.DIAGNOLABS.COM



NAME: **MR. SHANU**  
 ID: **12345**  
 ADDRESS: **123 Main St**  
 CITY: **LAHORE**

RECORD NO: **12345**  
 ANALYST: **MR. SHANU**  
 METHOD: **GC/MS**  
 SAMPLE NO: **001**  
 DATE: **2023-10-27**

LAB: **Diagno LABS**  
 REPORT NO: **12345**



Method: **GC/MS**  
 Date: **2023-10-27**  
 Time: **10:00**

**Notes:**  
 1. The chromatogram shows several peaks, with the most prominent peak at 0.95 minutes.  
 2. The peak at 0.95 minutes is identified as [Peak Name].  
 3. The peak at 0.55 minutes is identified as [Peak Name].  
 4. The peak at 0.45 minutes is identified as [Peak Name].  
 5. The peak at 0.35 minutes is identified as [Peak Name].  
 6. The peak at 0.25 minutes is identified as [Peak Name].  
 7. The peak at 0.15 minutes is identified as [Peak Name].

**Diagno LABS**  
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 Email: info@diagno.com

# Diagno LABS

Chart # 445 Excellence

Diagno Labs

12345 Main St  
 Suite 100  
 Chicago, IL 60601  
 Tel: (773) 555-1234  
 Fax: (773) 555-5678

A Branch of Diagnostics Laboratory  
 1000 North Dearborn Street, Chicago, IL 60610

NAME: **MR. SALMAN**  
 MRN: **12345678**  
 LAB: **123456789**  
 ADDRESS: **12345 Main St, Chicago, IL 60601**  
 PHONE: **(773) 555-1234**  
 SPECIALTY: **General**

TESTS: **Glucose Fasting Plasma, Lipid Profile, Serum Creatinine, etc.**

Test	Result	Biological Reference Range	Unit
GLUCOSE FASTING PLASMA	95.5	70 - 100	mg/dL
GLUCOSE FASTING	100.0	70 - 100	mg/dL
CHOLESTEROL TOTAL	180.0	125 - 200	mg/dL
LDL CHOLESTEROL	110.0	70 - 130	mg/dL
HDL CHOLESTEROL	35.0	35 - 65	mg/dL
TRIGLYCERIDES	150.0	0 - 150	mg/dL
CREATININE SERUM	1.2	0.6 - 1.2	mg/dL
UREA NITROGEN SERUM	15.0	8 - 20	mg/dL
BUN	15.0	8 - 20	mg/dL
AMYLASE	100.0	30 - 100	U/L
ALP	450.0	100 - 400	U/L
AST	30.0	10 - 40	U/L
ALT	40.0	10 - 40	U/L
GGT	50.0	0 - 50	U/L
AMYLASE (ALT/SGPT)	100.0	30 - 100	U/L
ALP (ALT/SGPT)	450.0	100 - 400	U/L
AST (ALT/SGPT)	30.0	10 - 40	U/L
ALT (ALT/SGPT)	40.0	10 - 40	U/L
GGT (ALT/SGPT)	50.0	0 - 50	U/L



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Dr. [Signature]

[Signature]

Diagno Labs, 12345 Main St, Chicago, IL 60601. Tel: (773) 555-1234. Fax: (773) 555-5678.



Call with Confidence

Diagno LABS  
 11, Jalan Bukit Merah, Singapore 150001  
 Tel: 65 6335 1111  
 Fax: 65 6335 1112  
 Email: info@diagno.com.sg

NAME: **MR. RAJESH**  
 UNIT NO: **1001**  
 HOSPITAL: **THE UNIVERSITY MEDICAL CENTRE**  
 REPORT STATUS: **Final**

DATE: **15/05/2018**

TEST	Result	Biological Reference Range	Unit
<b>ALKALINE PHOSPHATASE SERUM</b> ALKALINE PHOSPHATASE *NOTE: TEST FOR LIVER AND BONE DISEASE	81.0	10-127	U/L
<b>GAMMA GLUTAMYL TRANSFERASE (GGT) SERUM</b> GAMMA GLUTAMYL TRANSFERASE *NOTE: TEST FOR LIVER AND BILE DUCT DISEASE	15.0	0-38.0	U/L
<b>PROTEIN TOTAL, SERUM</b> PROTEIN TOTAL *NOTE: IMMUNOELECTROPHORESIS	7.0	6.3-8.2	g/dL
<b>ALBUMIN SERUM</b> ALBUMIN *NOTE: IMMUNOELECTROPHORESIS	3.1	3.2-4.7	g/dL
<b>BILIRUBIN, SERUM</b> BILIRUBIN	1.1	0.2-1.2	mg/dL
<b>ALT (AST)</b> ALT (AST)	1.25	0.0-37.0	U/L
<b>BLOOD UREA NITROGEN (BUN), SERUM</b> BLOOD UREA NITROGEN *NOTE: TEST FOR KIDNEY DISEASE	10.00	8.0-20.0	mg/dL
<b>CREATININE, SERUM</b> CREATININE *NOTE: TEST FOR KIDNEY DISEASE	0.60	0.6-1.3	mg/dL
<b>BUN/CREATININE RATIO</b> BUN/CREATININE RATIO *NOTE: TEST FOR KIDNEY DISEASE	17.5	10.0-13.0	mg/dL
<b>URIC ACID, SERUM</b> URIC ACID *NOTE: TEST FOR GOUT AND KIDNEY DISEASE	4.1	2.4-6.4	mg/dL
<b>CALCIUM, SERUM</b> CALCIUM *NOTE: TEST FOR BONE DISEASE	9.70	8.8-10.4	mg/dL
<b>SODIUM, SERUM</b> SODIUM	140.0	132-146	mmol/L
<b>POTASSIUM, SERUM</b> POTASSIUM	4.6	3.5-5.3	mmol/L
<b>CHLORIDE, SERUM</b> CHLORIDE *NOTE: TEST FOR KIDNEY DISEASE	108.0	95-109	mmol/L







Dr. [Name] (MD)  
 COORDINATING PHYSICIAN  
 1000 N. [Address]  
 [City, State, Zip]  
 [Phone Number]  
 [Email Address]

NAME: **MR. [Name]** DOB: **[Date]** SEX: **[Gender]**  
 ADDRESS: **[Address]** ALLIANCE ID: **[ID]**  
 APPOINTMENT: **[Date/Time]** REFERENCE BY: **[Physician Name]** REFERENCE NO: **[Number]**  
 RECEIVED AT: **[Date/Time]**  
 RECEIVED BY: **[Name]**

TESTS: **[List of Tests]**

Test	Result	Biological Reference Range	Units
<b>IRON PROFILE</b>			
IRON	24.0	Low 20 - 37	µg/dL
UNSATURATED IRON BINDING CAPACITY	300	High 150 - 300	µg/dL
TRANSFERRIN SATURATION	7.7%	20 - 45%	%
TRANSFERRIN	3.2	Low 2.0 - 4.0	g/L
IRON/TRANSFERRIN RATIO	7.5	0.5 - 1.0	µg/g
TRANSFERRIN SATURATION	2.3	0.5 - 1.0	µg/g
IRON/TRANSFERRIN RATIO	3.4	0.5 - 1.0	µg/g

**THYROID FUNCTION TESTS**  
 THYROID STIMULATING HORMONE (TSH)  
 0.22 (Reference Range: 0.01 - 0.10) (Low)  
 THYROID STIMULATING HORMONE (TSH) (Free)  
 0.22 (Reference Range: 0.01 - 0.10) (Low)  
 THYROID STIMULATING HORMONE (TSH) (Free) (Free)  
 0.22 (Reference Range: 0.01 - 0.10) (Low)

Reference Range	TS Level	TS Level	TS Level
Normal	Normal	Normal	Normal
Normal or Low Normal	Normal	Normal	Normal
Increased	Increased	Increased	Increased
Normal or High Normal	Normal	Normal	Normal

**Interpretation:**  
 The above results suggest that the patient has a low TSH level, which is consistent with a diagnosis of hyperthyroidism. The patient's TSH level is significantly below the reference range, and this finding is consistent with the clinical picture of hyperthyroidism. The patient's TSH level is significantly below the reference range, and this finding is consistent with the clinical picture of hyperthyroidism. The patient's TSH level is significantly below the reference range, and this finding is consistent with the clinical picture of hyperthyroidism.

Reference Interval (mg/dL) Age Reference Interval (mg/dL) Age Reference Interval (mg/dL) Age  
 100-200 18-24 100-200 25-34 100-200 35-44

# Lal Pathlabs

11500 E. Colfax Ave, Suite 1000  
Denver, CO 80231  
303.755.7000



11500 E. Colfax Ave  
Denver, CO 80231

TEST NAME	ANA (ENZYME IMMUNOASSAY)	REF. RANGE	Result	U001	U002
SYNOPSIS	ANA (ENZYME IMMUNOASSAY)	Result	U001	U002	U003

TEST NAME	ANA (ENZYME IMMUNOASSAY)	REF. RANGE	Result	U001	U002
SYNOPSIS	ANA (ENZYME IMMUNOASSAY)	Result	U001	U002	U003

### Synopsis

TEST NAME	ANA (ENZYME IMMUNOASSAY)	Result
U001	ANA (ENZYME IMMUNOASSAY)	Result
U002	ANA (ENZYME IMMUNOASSAY)	Result
U003	ANA (ENZYME IMMUNOASSAY)	Result

### Comments

ANA (Enzyme Immunoassay) is the most sensitive screening test for autoantibodies in patients suspected of autoimmune disease. They are a heterogeneous group of autoantibodies directed against ds-DNA, ss-DNA, RNP, Scl-70, Sm, SSB/SSA, SMC, Sm/SSB, Scl-70, Jo-1 & Centromere. ANA is found also in healthy individuals (5-10%). ANA is found in patients with Primary Biliary Cirrhosis (PBC), Sjogren's Syndrome (SS), Systemic Lupus Erythematosus (SLE), Mixed Connective Tissue Disease (MCTD), and other autoimmune diseases. ANA has also been detected in individuals taking certain drugs like phenytoin, hydralazine, chlorpromazine. Study of SLE patients, healthy and ethnic groups.

TEST NAME	ANA (ENZYME IMMUNOASSAY)	REF. RANGE	Result	U001	U002
SYNOPSIS	ANA (ENZYME IMMUNOASSAY)	Result	U001	U002	U003

### Synopsis

TEST NAME	ANA (ENZYME IMMUNOASSAY)	Result
U001	ANA (ENZYME IMMUNOASSAY)	Result
U002	ANA (ENZYME IMMUNOASSAY)	Result
U003	ANA (ENZYME IMMUNOASSAY)	Result

### Comments

ANA (Enzyme Immunoassay) is the most sensitive screening test for autoantibodies in patients suspected of autoimmune disease. They are a heterogeneous group of autoantibodies directed against ds-DNA, ss-DNA, RNP, Scl-70, Sm, SSB/SSA, SMC, Sm/SSB, Scl-70, Jo-1 & Centromere. ANA is found also in healthy individuals (5-10%). ANA is found in patients with Primary Biliary Cirrhosis (PBC), Sjogren's Syndrome (SS), Systemic Lupus Erythematosus (SLE), Mixed Connective Tissue Disease (MCTD), and other autoimmune diseases. ANA has also been detected in individuals taking certain drugs like phenytoin, hydralazine, chlorpromazine. Study of SLE patients, healthy and ethnic groups.

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Page 1 of 2

# Cal Path Labs

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Age	Sex	Height	Weight	Temp	Pulse	BP	SpO2
35	M	175	70	37.2	72	120/80	98

WBC	Hgb	Hct	PLT
12.5	14.5	45	250

- 1. High level of protein in urine & high creatinine level in serum suggest chronic kidney disease
- 2. Patient showing signs suggest that they have an acute kidney injury (AKI) with proteinuria & elevated creatinine

Urea Nitrogen	12	15	20
---------------	----	----	----

Urea Nitrogen	Creatinine
12	1.5
15	2.0
20	3.0
25	4.5

Chronic kidney disease (CKD) is a long-term condition that affects the kidneys. It is characterized by a gradual loss of kidney function over time. CKD is often asymptomatic until it reaches an advanced stage. The most common cause of CKD is diabetes, followed by high blood pressure. Other causes include glomerulonephritis, polycystic kidney disease, and certain medications. CKD is diagnosed when the glomerular filtration rate (GFR) is less than 60 mL/min/1.73 m<sup>2</sup> for at least 3 months. The severity of CKD is classified into five stages based on the GFR. Stage 1 is the least severe, and stage 5 is the most severe, requiring dialysis or kidney transplantation. Symptoms of CKD include fatigue, weakness, loss of appetite, and swelling in the legs and feet. CKD is a progressive disease, and early detection and treatment are essential to slow its progression and prevent complications.

- 1. Patient shows signs of acute kidney injury (AKI) with proteinuria & elevated creatinine
- 2. Patient shows signs of chronic kidney disease (CKD) with proteinuria & elevated creatinine
- 3. Patient shows signs of hypertension with elevated blood pressure
- 4. Patient shows signs of diabetes with elevated blood glucose
- 5. Patient shows signs of anemia with low hemoglobin
- 6. Patient shows signs of electrolyte imbalance with elevated potassium

Urea Nitrogen	12	15	20
---------------	----	----	----

Urea Nitrogen	Creatinine
12	1.5
15	2.0
20	3.0
25	4.5



10000

# Lal PathLabs

101, Nehru Park,  
15C, MIDC Area, Sector  
10/1, Vashi, Dist. Thane,  
Maharashtra - 401 102



Phone: 022-25520000  
Fax: 022-25520001  
E-mail: info@lalpathlabs.com

NAME	M/S. SHALINI SHARMA	Collected	21/03/2018	24/03/2018
LAB NO.	210000101	Age: 34 Years	Gender: Female	Reported
AC. NAME	R	Ref By: Dr. Shalini P. Chaturvedi MBBS	Report Date	21/03/2018

Test Name	Results	Units	Ref. Int. Interval
ANA	negative		
ANA	Weak positive		
ANA	Moderate positive		
ANA	Strong positive		

### Comments

ANA antibodies are generally considered as a serological marker of Primary Sjogren's syndrome and are detected in nearly 80% of these patients. They are also seen in 5-10% cases of ANA positive SLE patients. Titers of both IgG/IgA & IgM/IgG antibodies in SLE patients show a lower incidence of high titers compared to SLE patients with ANA titers. Detection of this antibody can precede the development of symptoms of Sjogren's syndrome by several years.

*Shilpa*  
Dr. Shilpa  
101, Nehru Park,  
Vashi, Dist. Thane,  
Maharashtra - 401 102

*M. K. Kulkarni*  
Dr. M. K. Kulkarni  
101, Nehru Park,  
Vashi, Dist. Thane,  
Maharashtra - 401 102

Page 1 of 1

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21/03/2018 - A

# Lal PathLabs

20-1070000-000  
 N.C. CLIA REG. NO. 2008-000001  
 4401 WILSON ROAD  
 RALEIGH, NC 27604

**Lal**  
 PathLabs  
 4401 Wilson Road  
 Raleigh, NC 27604

Lab No. 123456  
 Patient No. 789012  
 Order No. 345678

NAME	Ms. SHARON WIND		Gender	Female	DOB	01/15/1965
MRN	1123456	Age	55 Yrs	Order	789012	PHYSICIAN: DR. J. SMITH
CLINICAL	SPEW BY: DR. SPENDING PARENT MOSE		Requester	DR. J. SMITH	Ref	

Test Name	Result	Units	Ref. Int. Range
QUANTITATIVE HEPATITIS B SURFACE ANTIBODY (ANTI-HBs)	Non-reactive	International Units (IU/L)	0.05 - 0.10 IU/L
QUANTITATIVE HEPATITIS B CORE ANTIBODY (ANTI-HBc)	0.25	Optical Density (O.D.)	0.05 - 0.10 O.D.
QUANTITATIVE HEPATITIS B CORE ANTIGEN (HBcAg)	0.05	Optical Density (O.D.)	0.05 - 0.10 O.D.

Results are reported as:  
 Positive: > 0.10 IU/L for Anti-HBs, > 0.10 O.D. for Anti-HBc and HBcAg.  
 Negative: ≤ 0.10 IU/L for Anti-HBs, ≤ 0.10 O.D. for Anti-HBc and HBcAg.  
 Follow-up and clinical correlation.

*[Handwritten mark]*

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# In Lab Path Labs


**IN LAB PATH LABS**  
 101, MIDC INDUSTRIAL ESTATE  
 4TH FLOOR, WAKHURDA,  
 PUNE-411004


**In Lab Path Labs**  
 101, MIDC INDUSTRIAL ESTATE  
 4TH FLOOR, WAKHURDA,  
 PUNE-411004

C-101, MIDC INDUSTRIAL ESTATE  
 4TH FLOOR, WAKHURDA,  
 PUNE-411004

NAME	MR. SHALIN BHOIR			Gender	Female	Lab No.	2022018	Report No.	10102018
AGE	30 Years	DOB		Ref By	DR. UPENDRA FADNIS MESS	Report Status	Final		

Test Name	Result	Unit	Ref. Int. Range
ANTI-CCP (CYCLIC CITRULLINATED PEPTIDE)	+ 250 U	U/ml	< 20

Sensitivity of this assay is 70.0% and specificity is 98.2%  
 Specificity for Anti-CCP antibodies in Juvenile arthritis patients has not been established

**REFERENCE:**  
 Anti-CCP antibodies are useful for evaluating patients suspected of Rheumatoid arthritis. Positive result rate is 60-80% of Rheumatoid arthritis patients depending on disease severity. The positive predictive value for Anti-CCP antibodies for Rheumatoid arthritis is far greater than Rheumatoid factor. False positive result is 1-2% maximum. Up to 20% patients with seronegative Rheumatoid arthritis also show Anti-CCP antibodies.

- Clinical Uses:**
- Diagnosis of early Rheumatoid arthritis - Anti-CCP antibodies are detected in approximately 70-80% cases of Rheumatoid arthritis usually after 3-6 months of symptoms
  - Prognosis of severity of disease - Early Rheumatoid arthritis patients with Anti-CCP positivity may develop a more severe form of the disease as compared with Anti-CCP negative patients
  - It is useful to clearly distinguish Rheumatoid arthritis from Polymyositis rheumatica and seronegative SLE

Reference Range	0-20	U/ml	0.58 - 1.85
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Reference Range	Reference Range of TSH (as per American Thyroid Association)
0-10 mIU/L	0.45-4.50
0-20 mIU/L	0.35-4.94
0-30 mIU/L	0.30-5.00

- Note:**
- TSH levels are raised by thyroid resistance, resulting with levels between 2 - 4.5 mIU/L and at a minimum between 0.10 mIU/L. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
  - Values > 0.03 mIU/L need to be clinically correlated due to presence of a late TSH value in some individuals.




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NAME	ALL INDIA 2000	Collected	200001-200002
AGE	45	Received	200003-200004
SEX	Male	Reported	200005-200006
CLINICAL	BY: DR. UPENDRA KUMAR SHARMA	Report Date	Final

TESTS: **Results** **Units** **Ref. Interval**

**CLINICAL USE**

- 1. Diagnose hypothyroidism and hyperthyroidism
- 2. Monitor T4 replacement or T4 suppressive therapy
- 3. Monitor TSH levels in the subnormal range

**Major Causes:** Primary hypothyroidism, Subclinical hypothyroidism, TSH dependent hypothyroidism, Thyroid hormone resistance

**Secondary Causes:** Graves disease, Autonomous thyroid hormone secretion, TSH deficiency

*Rishi*  
 Rishi  
 Senior Analyst  
 PathLabs

*Manish*  
 Manish  
 Senior Analyst  
 PathLabs

*Shivam*  
 Shivam  
 Senior Analyst  
 PathLabs

End of report

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4

PATIENT'S NAME	MRS. BHAGINI SINGH	DATE	26/08/14
REFERRED BY	DR. UPENDRA PANDAY	AGE/SEX	48/F

**MRI : RIGHT WRIST**

**IMAGING SEQUENCES (NOMO)**

**AXIAL: T1 & TSE T2 W; SAGITTAL: TSE T1 W; CORONAL: STIR & T1 W.**

There is evidence of minimal edema seen dorsal to the capitol, deep to the extensor retinaculum. No definite collection or focal lesion seen.

Architecture and alignment of inferior radio-ulnar, radio-carpal, ulno-carpal and intercarpal joints are maintained. Carpo-metacarpal joints are also normally visualized. No definite erosion is noted in periarthicular regions.

All the visualized bones, viz. lower shaft of radius, ulna, carpal bones, and metacarpals are showing normal cortical outline and marrow signal intensity. No focal or diffuse area of altered signal intensity is observed.

Flexor and extensor tendons are displaying normal thickness and signal intensity. Flexor retinaculum and carpal tunnel are showing normal MR morphology and signal intensity.

Pericarpal musculotendinous attachments are normally visualized. Muscles around wrist joint are showing normal intensity and intermuscular fat planes.

Majority low-volts around wrist joint are normally visualized. No significant neurovascular abnormality is detected.

**IMPRESSION**

- MR images revealed minimal edema dorsally deep to the extensor retinaculum - inflammatory/nonspecific.

DR. ANIL KUMAR  
 Executive Radiologist

Dr. AJAY BULLAGAN  
 Consultant Radiologist

Please correlate clinically  
 AXIS IMAGING CENTRE  
 15, 16th Floor, 22, Park Road,  
 110002, New Delhi, India  
 Axis Imaging Centre  
 15, 16th Floor, 22, Park Road,  
 110002, New Delhi, India

*(Signature)*

# Laal Pallak



Sl. No.	NAME OF THE PATIENT	Age	Sex	Address	Referral Hospital	Referral Doctor	Referral Date
1	MA. SHAMSH BACH	45	Female	2001/11, CALUPATHAN	...	...	...

1. The patient is a 45-year-old female with a long history of rheumatoid arthritis. She has been treated with low-dose prednisolone (5 mg daily) for the past 10 years. She has been on this therapy since she was 35 years old. She has been on this therapy since she was 35 years old. She has been on this therapy since she was 35 years old.

- 1. The patient is a 45-year-old female with a long history of rheumatoid arthritis. She has been treated with low-dose prednisolone (5 mg daily) for the past 10 years. She has been on this therapy since she was 35 years old. She has been on this therapy since she was 35 years old.
- 2. The patient is a 45-year-old female with a long history of rheumatoid arthritis. She has been treated with low-dose prednisolone (5 mg daily) for the past 10 years. She has been on this therapy since she was 35 years old. She has been on this therapy since she was 35 years old.

Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

✓ A





Dr. Anil Singhal  
**ORTHO CARE**  
Multi-specialty Hospital and Trauma Centre

Reg. No. ANR20210210

Page 2

Patient Name	Dr. Anil Singhal	Ref. No.	ANR20210210
Age	45	Sex	Male
Address	...	Phone	...
...	...	...	...

Dr. ANIL SINGHAL (SINGHAL AND SINGHAL) DINI (DINIS) REG. NO. UPNOC 20260

23/07/2024

Particulars: (1) Elbow and (2) Hand  
 Note: All on ground  
 Note: Hyperextension joint

# Epitelson (1)  
 @ Unicap # 2nd Malware

AKPLOS  
 AB-PWIS

GRIP Capitan by two headless screws + titanium plates

Signature of the Doctor

Arthroscopy  
 Acute + Para  
 Capsular repair  
 Sutured caps



Handwritten signature and initials of the doctor.



PHYSICIAN: [Name]  
**ORTHOCARE**  
 [Address]

PHYSICIAN: [Name]

**CLAIM #**

APPT	PHYSICIAN	DATE	TIME
12345	DR. J. SMITH	01/15/2024	10:00 AM
12345	DR. J. SMITH	01/15/2024	10:00 AM
12345	DR. J. SMITH	01/15/2024	10:00 AM
12345	DR. J. SMITH	01/15/2024	10:00 AM

**DETAILS**

DATE	TIME	DESCRIPTION	ICD-10	ICD-9	ICD-10-CM	ICD-10-PCS
01/15/2024	10:00 AM	PHYSICIAN VISIT	S90.01A	86.09	S90.01A	86.09

**CHARGE AMOUNT** \$1,200.00  
**DISCOUNT** \$100.00  
**NET AMOUNT** \$1,100.00

**PAYMENTS**

DATE	TIME	DESCRIPTION	AMOUNT	TYPE	STATUS
01/15/2024	10:00 AM	PAYMENT	\$1,100.00	CASH	PAID

**PAY AMOUNT** \$1,200.00  
**CASH PAID** \$1,100.00  
**PAID BY** [Name]

1234567890  
 0123456789  
 9876543210  
 0123456789  
 9876543210



# THE ORTHOPEDIC INSTITUTE OF FLORIDA ORTHOCARE

10001  
11

## INVOICE

Account No.	10001	DATE	10/15/2024
Invoice No.	10001	DATE	10/15/2024
Product Code	10001	DATE	10/15/2024
Item Code	10001	DATE	10/15/2024

## DETAILS

LINE	QTY	DESCRIPTION	UNIT	PRICE	TAX	DISC	TOTAL
1	1	10001		1000	0	0	1000

Gross Amount: 1000  
 Discount: 0  
 Net Amount: 1000

## PAYMENT

DATE	10/15/2024	AMOUNT	1000
------	------------	--------	------

Net Amount: 1000  
 Cash on Hand: 0  
 Balance Due: 1000

THE ORTHOPEDIC INSTITUTE OF FLORIDA  
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Dr. Fakhri Ahmad  
17A, 17B, 17C, 17D, 17E, 17F, 17G, 17H, 17I, 17J, 17K, 17L, 17M, 17N, 17O, 17P, 17Q, 17R, 17S, 17T, 17U, 17V, 17W, 17X, 17Y, 17Z

Name	: Mrs. SHARDA SINGH	Rolling No.	: 1001/2022/0001/17
Age	: 32 Yrs	Sample Collection No.	: 1001/2022/11/0001
Sex	: Female	Sample Received No.	: 1001/2022/11/0001
DOB	: 15/05/1990	Report Received No.	: 1001/2022/11/0001
Accession No.	: 1001/2022/11/0001	Report No.	: 1001/2022/11/0001
Referring Doctor	: Dr. Fakhri Ahmad	Ref No.	: 1001/2022/11/0001
Received By	: Dr. Fakhri Ahmad		

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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**Observations:**  
This report provides an overview of the results of the following tests. The laboratory will continue to monitor the patient's condition and report any changes. Please contact the laboratory for further information. (Please provide name, blood number and date of birth) and contact number (for info, contact info, TSP, etc) and report an analysis for results.

Final Report

Dr. Fakhri Ahmad  
17A, 17B, 17C, 17D, 17E, 17F, 17G, 17H, 17I, 17J, 17K, 17L, 17M, 17N, 17O, 17P, 17Q, 17R, 17S, 17T, 17U, 17V, 17W, 17X, 17Y, 17Z



जाय सही तो इलाज सही



ATHKIND



HealthKIND ADVANCE  
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Name	MR. SHARAD KUMAR	DOB	1980-01-01
Age	42 Yrs	Gender	Male
Height	175 cm	Weight	75 kg
BMI	24.5	BP	120/80 mmHg
Address	123 Main Street, New Delhi, India		
Referring Doctor	Dr. Anil Kumar		

Report Status - Final

Test Name	Result	Biological Reference Interval	Unit
-----------	--------	-------------------------------	------

HEALTHKIND ADVANCE  
 BIOCHEMISTRY

Lipid Profile Direct

LDL Cholesterol (Direct)	190	Optimal < 100 Near Optimal 100 - 129 Borderline High 130 - 159 High 160 - 189 Very High > 190	mg/dL
--------------------------	-----	-----------------------------------------------------------------------------------------------------------	-------

Microalbuminuria, Spot Urine

Urine Microalbumin	600	0 - 30	mg/dL
Urine Creatinine	150	30 - 130	mg/dL
Albumin Creatinine Ratio, Spot Urine	4.0	Normal < 30 Microalbuminuria 30 - 300 Nephropathy > 300	mg/dL Creatinine

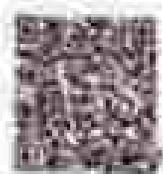
LDL Cholesterol (Direct)

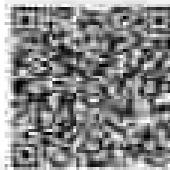
**CLINICAL SIGNIFICANCE:**  
 LDL Cholesterol is directly associated with increased likelihood of coronary heart disease. Elevated LDL levels are associated with atherosclerosis, the main cause of heart disease, stroke, peripheral vascular disease, and peripheral artery disease. Elevated LDL levels are also associated with hypertension, diabetes mellitus, and kidney disease. Lowering LDL levels reduces cardiovascular risk.

Lipid Profile Direct

Treatment of LDL-C goals to vary high risk and extremely high risk patients by the Lipid Association of India.

Risk Stratification	Target LDL-C goals	
	Group A	Group B
High risk patients	LDL-C goal of < 100 mg/dL	LDL-C goal of < 130 mg/dL





### Laboratory Investigation Report

Patient Name	Ms. Susan Singh	Sex	Female
Age	42 Y 11 M 05 D	Other Test(s)	IF
Account ID	MS100024199 (MS10002419)	Collection Date/Time	04/20/2024 12:29PM
Ref Order	PCPO 000	Reporting Date/Time	04/20/2024 05:17PM

Test Name	Result	Unit	Reference Range
ANA - IIA, Diffuse			
dsDNA	Negative		0-1:000
Anti-Smith	Negative		0-1:100
Anti-RNP	Negative		0-1:100
Scl-70	Negative		0-1:100
Anti-CCP	Negative		0-1:100
Anti-AMA	Negative		0-1:100
Anti-AMA IgG	Negative		0-1:100
Anti-AMA IgA	Negative		0-1:100
Anti-AMA IgM	Negative		0-1:100
Anti-AMA IgE	Negative		0-1:100
Anti-AMA IgG4	Negative		0-1:100
Anti-AMA IgG2	Negative		0-1:100
Anti-AMA IgG1	Negative		0-1:100
Anti-AMA IgA1	Negative		0-1:100
Anti-AMA IgA2	Negative		0-1:100
Anti-AMA IgM1	Negative		0-1:100
Anti-AMA IgM2	Negative		0-1:100
Anti-AMA IgE1	Negative		0-1:100
Anti-AMA IgE2	Negative		0-1:100

### Interpretation

- This test provides a qualitative algorithm using 17 different autoantibodies which is an additional step beyond testing for autoantibodies against the AEC. Most commonly tested autoantibodies, Rheumatoid factor, Nucleosome, Perinuclear the positive primary antibodies and IgG4, IgG2, IgG1, IgA2, IgA1, IgM2, IgM1, IgE2, IgE1.
- A qualitative clinical diagnosis should not be made by number of a single test only. The result is made by taking clinical history and other laboratory studies in to account.

### Keeply correlation with clinical findings

\*\*\* End Of Report \*\*\*

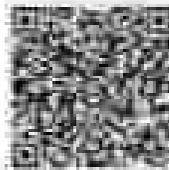
  
**Dr. Praveen K. Das MD**  
 Director  
 Max Health Care Services

  
**Dr. Anandharaj Das MD**  
 Director  
 Rheumatology & Immunology

  
**Dr. Anandharaj Das MD**  
 Director  
 Rheumatology

  
**Dr. Anandharaj Das MD**  
 Director  
 Rheumatology

Dr. Praveen K. Das MD, Max Health Care Services, Max Hospital, Post Bag No. 110, Saket, New Delhi-110017  
 Dr. Anandharaj Das MD, Max Health Care Services, Max Hospital, Post Bag No. 110, Saket, New Delhi-110017  
 The reference to other reports can be verified by visiting the URL on top of the page



Laboratory Investigation Report

Patient Name	Ms. Susan Singh	Sex	Female
Age/Sex	42Y11M02S.F	Other Ref ID	
Accountable	MS00024579 (04/20/23)	Collection Date/Time	04/20/24 12:20PM
Ref Order	RPO 001	Reporting Date/Time	04/20/24 05:47PM

Clinical Biochemistry

11850410101010000000

Creatinine, Serum

Date	20 Apr 2024 12:20 PM	Unit	µmol/L Interval
Time	12:20 PM	Result	68
Operator	MS00024579	Ref. Range	48-131
4070 by MORD	75.00	Normal	1.75
4070 by CR-071001	68.73	Ref	

Ref. Range

eGFR - Estimated Glomerular Filtration Rate is calculated by MDRD equation which is most accurate for GFRs < 90ml/min/1.73m<sup>2</sup> or MDRD equation is used for adult population only.

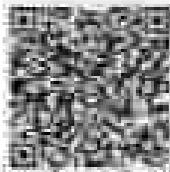
Category	Reference Interval (µmol/L/1.73m <sup>2</sup> )	Comment
01	20	Trace or Neg
02	31-49	Mild Decrease
03	30-45	Mild to Moderate Decrease
04	30-44	Moderate to Severe Decrease
05	15-29	Severe Decrease
06	< 15	Kidney Failure

GGT - Aspartate Aminotransferase, Serum

Date	20 Apr 2024 12:20 PM	Unit	U/L Interval
Time	12:20 PM	Result	48
Operator	MS00024579	Ref. Range	0-50
GGT - Aspartate Transaminase (AST)	10.68	Ref	

Interpretation

Results are within reference ranges. The test results are based on the data provided. The laboratory is not responsible for the interpretation of the results. Please consult your physician for further information.



Laboratory Investigation Report

Patient Name	Mrs. Susan Singh	Sex	Female
Age	42 Y 11 M 02 D	Other Test(s)	IF
Account No.	MH00024379 (Masters)	Collection Date/Time	25 Apr 2024 12:22PM
Ref Code	RPO 046	Reporting Date/Time	25 Apr 2024 05:07PM

Clinical Biochemistry

PHYSICIAN'S SIGNATURE

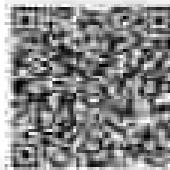
CRP- C- Reactive Protein, Serum

Date	Time	Unit	Ref Interval
25 Apr 2024	12:22 PM	mg/L	0.0 - 0.3
CRP	3.05		

**INTERPRETATION:** This test is clinically useful to identify patients with the levels of inflammation caused by bacterial infection. This measure also provides information about disease activity, response to therapy, prognosis. The reference interval varies with the clinical context of other diseases.

Ref Range

Male	Female
0.0 - 1.0	0.0 - 1.0



Laboratory Investigation Report

Patient Name	Ms. Susan Soper	Sex	Female
Age	42 Y 11 M 05 D	Other Test(s)	IF
Account ID	10100024199 (MAXLAB)	Collection Date/Time	25 Apr 2024 12:20PM
Ref Code	RPO-001	Reporting Date/Time	25 Apr 2024 09:27PM

Clinical Biochemistry		Unit	Ref Interval
<b>Prothrombin Factor (Quantitative), Serum</b>			
Date:	25 Apr 2024	Unit	Ref Interval
	12:20 PM		
Prothrombin Factor	29.66	Unit	< 12.0

**Interpretation:** If comment field is used as directed within MyLab's systems. Laboratory measurements. With comment field included (LJ). The patient's full clinical information (LJ) is (LJ) also. Patient's level of awareness of their own health status, which should be used with caution and discretion only.



Laboratory Investigation Report

Patient Name	Ms. Anne Sage	Sex	Female
Age	42 Y 11 M 05 D	Other Test ID	
Accountable	Ms. Anne Sage (00000000000000000000)	Collection Date/Time	15 Apr 2024 12:28 PM
Ref Date	RPO Ref	Reporting Date/Time	15 Apr 2024 05:47 PM

Clinical Biochemistry

11/15/2024 10:00:00 AM

SCPT - Anne Anne Transferrin, Serum

Date	Time	Unit	Ref. Int. Interval
15 Apr 2024	12:28 PM	g/L	11-45
SCPT - Anne Anne Transferrin (ACT)	16.77	15.2	11-45

Interpretation

Interpretation of this test should be done in conjunction with the clinical history and other laboratory tests and by a qualified physician.

Results available without findings

End Of Report

Dr. Anne Sage, M.D.  
Attending Consultant & Account Manager  
Pathology

Dr. Anne Sage, MD  
Attending Consultant & Account Manager

Dr. Anne Sage, M.D.  
Attending Consultant & Account Manager  
Pathology

Dr. Anne Sage, MD  
Attending Consultant & Account Manager

Dr. Anne Sage, M.D.  
Attending Consultant & Account Manager

MAX Lab is a service of the University of Maryland Medical System. For more information, please contact MAX Lab at 410-328-7300.

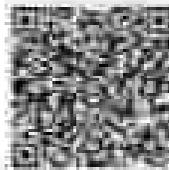
MAX Lab is a service of the University of Maryland Medical System. For more information, please contact MAX Lab at 410-328-7300.

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Report



Laboratory Investigation Report

Patient Name	Mrs. Susan Singh	Sex	Female - Adolescent from General
Age/Sex	12Y11M02S.F	Other Referral	N
Location	16100024109 (KASIKART)	Collection Date/Time	16Apr 2024 12:29PM
Ref Doctor	R.P.O. Singh	Reporting Doctor	16Apr 2024 12:29PM

Hematology

11850410910 (KASIKART)

Complete Haemogram, Peripheral smear and ESR (EDTA)

Date	15/Apr/2024 14/Jan/22	Unit	Ref. Ref. Interval
	12:22PM	09:03PM	
Haemoglobin	11.4	9.1	g/dl 12.0-16.0
Packed Cell Volume	33.3	31.7	% 40-50
Total Leucocyte Count (TLC)	7.4	7.15	10 <sup>9</sup> /L 4.0-10.0
HbC Index	4.69	5.50	10-120 3.5-4.8
MCV	79.4	80.3	fL 80-101
MCH	34.3	33.3	pg 27-37
MCHC	30.6	28.7	g/dl 31.5-34.8
Platelet Count	106	104	10 <sup>9</sup> /L 150-400
MPV	102	108	fL 73-112
PDW	17.8	18.1	fL 11.5-14.8

Differential Cell Count

	15/Apr/2024 14/Jan/22	Unit	Ref. Ref. Interval
	12:22PM	09:03PM	
Neutrophils	50.8	40	% 40-70
Lymphocytes	24.0	13	% 20-40
Monocytes	6.2	16	% 2-10
Eosinophils	2.3	10	% 1-5
Basophils	1.4	10	% 0-2

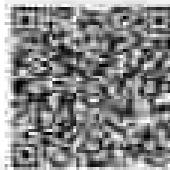
Abscise Leukocyte Count

	15/Apr/2024 14/Jan/22	Unit	Ref. Ref. Interval
	12:22PM	09:03PM	
Absolute Neutrophil Count	4.18	7.38	10 <sup>9</sup> /L 2.0-7.0
Absolute Lymphocyte Count	2.5	1.2	10 <sup>9</sup> /L 1.0-3.0
Absolute Monocyte Count	0.5	0.27	10 <sup>9</sup> /L 0.2-1.0
Absolute Eosinophil Count	0.17		10 <sup>9</sup> /L 0.0-0.5
Absolute Basophil Count	0.03		10 <sup>9</sup> /L 0.0-0.1
ESR (Modified Westergren) 1h		79	mm/h 0-12

Peripheral Smear Examination

**RBC:** - Mild Anisopoikilocytosis Predominantly Normocytic Normochromic  
**WBC:** - Counts within normal limits  
**Platelet:** - Adequate





Laboratory Investigation Report

Print Name	Mr. Ryan Gray	Case	Def. - Unknown Person - Sexual
Age/DOB	42 Y/11 W 03 D 1 P	Other Ref/ID	J
Account ID	10100024109100000000	Collection Date/Time	04/20/2024 12:00PM
Ref Code	RCP0000	Reporting Date/Time	04/20/2024 12:00PM

Serology

TEST RESULTS SUMMARY

Anti-CCP (Anti Cyclic Citrullinated Peptide) Serum

Date	20 Apr 2024	Unit	U/ml Ref Interval
Time	12:00 PM	Value	< 17.0
Anti-CCP Part	4185		

Comments / Interpretation

This test is both an adjunct to diagnosis and a prognostic test for rheumatoid arthritis.

Kindly correlate with clinical findings.

End Of Report

Dr. Prakash A. Desai, MD  
 Director, Laboratory  
 MAX LAB, 10000 10th Avenue

Dr. Anand Kumar Desai, MD  
 Director, Laboratory  
 MAX LAB, 10000 10th Avenue

Dr. Anand Kumar Desai, MD  
 Director, Laboratory  
 MAX LAB, 10000 10th Avenue

Dr. Prakash A. Desai, MD  
 Director, Laboratory  
 MAX LAB, 10000 10th Avenue



**Client**

**Pathkind Collection Center (Blood Road)**  
 Naraina, New Delhi  
 Blood ID: SURVIVANCE-01002001-CY22102404

**Processed By**

**Pathkind Diagnostics Pvt. Ltd.**  
 Ground Floor, One Stop Labs, Saket, New Delhi  
 DR. Sandeep Arora - JEN02 - Ph No - 981104766

<b>Name</b>	1. Mrs. SHALINI SINGH	<b>Booking Date</b>	18/01/2023 10:56:27
<b>Age</b>	- 42 Yrs	<b>Sample Collected on</b>	18/01/2023 11:00:43
<b>Sex</b>	1. Female	<b>Sample Received on</b>	18/01/2023 12:30:36
<b>P-ID No.</b>	- F12057000025523	<b>Report Released on</b>	04/02/2023 15:10:57
<b>Accession No.</b>	11052210111029	<b>Barcode No.</b>	99428532
<b>Referring Doctor</b>	SELF	<b>Ref No.</b>	
<b>Referred By</b>	Dr. Rajesh Kumar CP Pathkind CC Blood Road		

**Report Status - Preliminary Report**

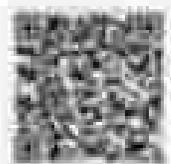
Test Name	Result	Biological Ref. Interval	Unit
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**HEALTHKIND ADVANCE**

**HAEMATOLOGY**

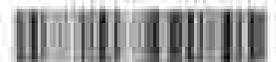
**Complete Blood Count (CBC)**

<b>Haemoglobin (Hb)</b> <small>Sample - Whole Blood EDTA Method - Photometric measurement</small>	10.1	12.0 - 15.0	g/dL
<b>Total WBC Count / TLC</b> <small>Sample - Whole Blood EDTA Method - Impedance</small>	9.0	4.0 - 10.0	thous/cmm
<b>RBC Count</b> <small>Sample - Whole Blood EDTA Method - Impedance</small>	3.4	3.8 - 4.8	millions/cmm
<b>PCV / Hematocrit</b> <small>Sample - Whole Blood EDTA Method - 100% Ethanol</small>	28.3	35.0 - 45.0	%
<b>MCV</b> <small>Sample - Whole Blood EDTA Method - Calculated</small>	83.0	83.0 - 101.0	fL
<b>MCH</b> <small>Sample - Whole Blood EDTA Method - Calculated</small>	28.7	27.0 - 32.0	pg
<b>MCHC</b> <small>Sample - Whole Blood EDTA Method - Calculated</small>	34.2	31.0 - 34.0	g/dL
<b>RDW (Red Cell Distribution Width)</b> <small>Sample - Whole Blood EDTA Method - Calculated</small>	14.8	11.9 - 15.5	%
<b>DLC (Differential Leukocyte Count)</b> <small>Sample - Whole Blood EDTA Method - Flow Cytometry</small>			
<b>Neutrophils</b> <small>Sample - Whole Blood EDTA Method - FCS Technology &amp; Microfluidics</small>	66	40 - 60	%



HEALTHKIND ADVANCE

Page No. 1 of 2



**Client**

**Pathkind Collection Center (Blood Bank)**

Nareetpura, Ghaziabad

Street, Dist. Suranshikha 201305, C/42018446

**Processed By**

**Pathkind Diagnostic Pvt. Ltd.**

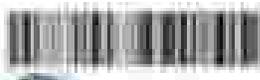
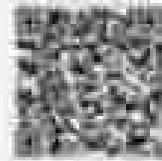
Ground Floor, Das Sagar Lajpura, Kirti Park, Ghaziabad

Dist. Ghaziabad, Uttar Pradesh - 201305, Ph No - 9810407656

<b>Name</b>	1. <b>Mrs. SHALINI SINGH</b>	<b>Testing Date</b>	14/01/2023 10:56:27
<b>Age</b>	- 42 Yrs	<b>Sample Collected on</b>	14/01/2023 11:00:43
<b>Sex</b>	1. Female	<b>Sample Received on</b>	14/01/2023 12:30:36
<b>P-ID No.</b>	- F1205700025523	<b>Report Released on</b>	04/01/2023 15:10:57
<b>Accession No.</b>	1105210111029	<b>Barcode No.</b>	994288582
<b>Referring Doctor</b>	Self	<b>Ref no.</b>	
<b>Referred By</b>	- Dr Rajesh Saxena CO Pathkind CC Blood Bank		

**Report Status - Preliminary Report**

Test Name	Result	Biological Ref. Interval	Unit
<b>Lymphocytes</b> <small>Sample: Whole Blood EDTA Method: CD 45-Fluorescence &amp; Microscopy</small>	33	20-40	%
<b>Eosinophils</b> <small>Sample: Whole Blood EDTA Method: CD 45-Fluorescence &amp; Microscopy</small>	01	01-06	%
<b>Monocytes</b> <small>Sample: Whole Blood EDTA Method: CD 45-Fluorescence &amp; Microscopy</small>	02	02-10	%
<b>Basophils</b> <small>Sample: Whole Blood EDTA Method: CD 45-Fluorescence &amp; Microscopy</small>	06	00-08	%
<b>Absolute Neutrophil Count</b> <small>Sample: Whole Blood EDTA</small>	5940	2000-7000	/mm <sup>3</sup>
<b>Absolute Lymphocyte Count</b> <small>Sample: Whole Blood EDTA</small>	2190	1000-3000	/mm <sup>3</sup>
<b>Absolute Eosinophil Count</b> <small>Sample: Whole Blood EDTA</small>	90	20-500	/mm <sup>3</sup>
<b>Absolute Monocyte Count</b> <small>Sample: Whole Blood EDTA</small>	180 L	200-1000	/mm <sup>3</sup>
<b>Absolute Basophil Count</b> <small>Sample: Whole Blood EDTA</small>	60 L	20-150	/mm <sup>3</sup>
<b>DLC Performed by</b> <small>Sample: Whole Blood EDTA</small>	Dr. R. Saxena		
<b>Platelet Count</b> <small>Sample: Whole Blood EDTA Method: Coulter Counter</small>	280	150-450	thousand/mm <sup>3</sup>
<b>MPV (Mean Platelet Volume)</b> <small>Sample: Whole Blood EDTA Method: Coulter Counter</small>	10.3	8.8-10.9	fL



**Client**

**Pathkind Collection Center (Blood Road)**  
 Name: Pathkind Blood Road  
 Street: DMS, Surajpuri, PIN: 201301, C-12212446

**Processed By**

**Pathkind Diagnostics Pvt. Ltd.**  
 Group/Store: Das Sagar Lab, Kirti Park, Dwarka  
 Dr. Sandeep Arora/Dr. JESSIE, Ph No: 981140765

<b>Name</b>	: Mrs. SHALINI SINGH	<b>Testing Date</b>	: 18/01/2023 10:56:27
<b>Age</b>	: 42 Yrs	<b>Sample Collected on</b>	: 18/01/2023 11:00:43
<b>Sex</b>	: Female	<b>Sample Received on</b>	: 18/01/2023 12:00:06
<b>P-ID No.</b>	: F12057000295523	<b>Report Released on</b>	: 04/02/2023 15:00:57
<b>Accession No.</b>	: 11052210111029	<b>Barcode No.</b>	: 00420012L 00420050L 004200504
<b>Referring Doctor</b>	: SELF	<b>Ref No.</b>	
<b>Referred By</b>	: Dr. Rajesh Kumar, CO, Pathkind CC Blood Road		

**Report Status - Preliminary Report**

Test Name	Result	Biological Ref. Interval	Unit
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<b>Erythrocyte Sedimentation Rate (ESR)</b>	28 H	4-2	mm/1st Hour
<small>Wedge Method, West 200 Normal: Female: 0-20</small>			

**BIOCHEMISTRY**

<b>Fasting Plasma Glucose</b>	115 H	74-99	mg/dL
<small>Sample: Fasting Plasma G Reference Interval</small>			

**Lipid Profile Direct**

<b>Total Cholesterol</b>	180	Desirable Level: <200 Borderline: 200-239 High Risk: >=240	mg/dL
<small>Sample: Serum Method: Direct/Chemical/Colorimetric</small>			

<b>Triglycerides</b>	170	Desirable: <150 Borderline High: 150-199 High: 200-499 Very High: >=500	mg/dL
<small>Sample: Serum Method: GPO/BPT</small>			

<b>HDL Cholesterol</b>	56	Low: <40 Optimal: 40-60 High: >=60	mg/dL
<small>Sample: Serum Method: Homozygous Endogenous Triglyceride</small>			

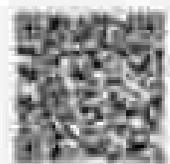
<b>VLDL Cholesterol</b>	27.8	Desirable: 10-15	mg/dL
<small>Sample: Serum Method: Calculated</small>			

<b>Non HDL Cholesterol</b>	124	<130	mg/dL
<small>Sample: Serum</small>			

<b>Total Cholesterol / HDL Ratio</b>	3.21 L	Low Risk: 1.1-1.4 Average Risk: 1.5-1.9 Moderate Risk: 2.1-2.9 High Risk: >=3.0	
<small>Sample: Serum Method: Calculated</small>			

<b>LDL / HDL Ratio</b>	0.80 L	Low Risk: 0.3-1.0 Moderate Risk: 1.1-1.4 High Risk: >=1.5	
<small>Sample: Serum Method: Calculated</small>			

**Liver Function Extended Panel**



Pathkind Medical Lab

Page No. 1/1



**Client**

Pathkind Collection Center (Blood Road)  
 Narayana, Blood Road  
 Blood ID: BUN020010000001\_C162016200

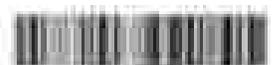
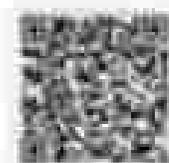
**Processed By**

Pathkind Diagnostics Pvt. Ltd.  
 Ground Floor, Das Sagar Layout, Kulkarni Colony  
 D M Road, Bangalore-560036. Ph No: 76890011

<b>Name</b>	: Mrs. SHALINI SINGH	<b>Booking Date</b>	: 14/01/2023 10:55:27
<b>Age</b>	: 42 Yrs	<b>Sample Collected on</b>	: 14/01/2023 11:00:43
<b>Sex</b>	: Female	<b>Sample Received on</b>	: 14/01/2023 12:30:36
<b>P-ID No.</b>	: P10057000025523	<b>Report Released on</b>	: 14/01/2023 15:10:33
<b>Accession No.</b>	: 11052210111029	<b>Barcode No.</b>	: 004200101 994200101 994200104
<b>Referring Doctor</b>	: SELF	<b>Ref No.</b>	
<b>Referred By</b>	: Dr Rajesh Kumar MD Pathkind CC Blood Road		

**Report Status - Preliminary Report**

Test Name	Result	Biological Ref. Interval	Unit
<b>Bilirubin Total</b> <small>Serum Bilirubin Hemochemistry</small>	0.1	0.0-1.1	mg/dL
<b>Bilirubin Direct</b> <small>Serum Bilirubin Hemochemistry</small>	0.1	0.0-0.2	mg/dL
<b>Serum Bilirubin (Indirect)</b> <small>Serum Bilirubin Hemochemistry</small>	0.08	<0.30	mg/dL
<b>SGOT / AST</b> <small>Serum Aspartate Aminotransferase (AST) Hemochemistry</small>	23	0-37	U/L
<b>SGPT / ALT</b> <small>Serum Alanine Aminotransferase (ALT) Hemochemistry</small>	25	0-35	U/L
<b>Alkaline Phosphatase (ALP)</b> <small>Serum Alkaline Phosphatase (ALP) Hemochemistry</small>	79	0-98	U/L
<b>Total Protein</b> <small>Serum Total Protein Hemochemistry</small>	8.1	6.4-8.3	g/dL
<b>Albumin</b> <small>Serum Albumin Hemochemistry</small>	3.7	3.5-4.9	g/dL
<b>Globulin</b> <small>Serum Globulin Hemochemistry</small>	4.4 H	1.8-3.7	g/dL
<b>Albumin Globulin A/G Ratio</b> <small>Serum Albumin Globulin (A/G) Ratio Hemochemistry</small>	0.8 L	1.0-2.1	
<b>Kidney Function Test</b>			
<b>Blood Urea Nitrogen (BUN)</b> <small>Serum Blood Urea Nitrogen (BUN) Hemochemistry</small>	12.0	1.00-20.00	mg/dL



**Client**

**Pathkind Collective Center (Blood Road)**  
 Narainpura, Blood Road  
 Blood Donor, Suriname-5000200, C-120104046

**Presented By**

**Pathkind Diagnostic Pvt. Ltd.**  
 Ground Floor, One Stop Labs, Kirti Park, Dwarka  
 Dr. Sandeep Anandharam - JEN02, Ph No - 987040766

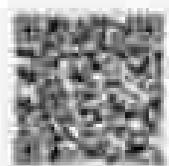
<b>Name</b>	1. <b>Mrs. SHAJIBI SINGH</b>	<b>Booking Date</b>	18/01/2023 10:55:27
<b>Age</b>	- 42 Yrs	<b>Sample Collected on</b>	18/01/2023 11:00:43
<b>Sex</b>	2. Female	<b>Sample Received on</b>	18/01/2023 12:00:06
<b>P-ID No.</b>	- F12057000025523	<b>Report Released on</b>	04/02/2023 15:10:57
<b>Accession No.</b>	1. <b>11052210111029</b>	<b>Barcode No.</b>	00420512L 00420508L 00420504
<b>Referring Doctor</b>	SELF	<b>Ref No.</b>	-
<b>Referred By</b>	- Dr. Rajesh Kumar-CP Pathkind CC Blood Road		

**Report Status - Preliminary Report**

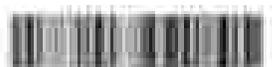
Test Name	Result	Biological Ref. Interval	Unit
<b>Urea</b> <small>Serum Urea Random Collection</small>	28.00	15.00 - 40.00	mg/dL
<b>Creatinine</b> <small>Serum Creatinine Random Collection</small>	0.89	0.60 - 1.10	mg/dL
<b>BUN Creatinine Ratio</b> <small>Serum BUN Random Collection</small>	31	10 - 20	
<b>Uric Acid</b> <small>Serum Uric Acid Random Collection</small>	5.4	2.6 - 8.0	mg/dL
<b>Sodium</b> <small>Serum Sodium Random Collection</small>	141	136 - 145	mmol/L
<b>Potassium</b> <small>Serum Potassium Random Collection</small>	4.4	3.5 - 5.1	mmol/L
<b>Chloride</b> <small>Serum Chloride Random Collection</small>	108 H	97 - 107	mmol/L
<b>#Calcium</b> <small>Serum Calcium Random Collection</small>	8.7	8.6 - 10.0	mg/dL

**SEROLOGY**

<b>Hepatitis B Surface Antigen (HBsAg) Rapid Card</b> <small>Serum HBsAg Rapid Antigen Assay</small>	Non-Reactive	Non-Reactive
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**Client**  
**Pathkind Collection Center (Blood Road)**  
 Naraina Park, Ghazi Road  
 Street, Dist. Surajpattana UP-201301, C-120102446

**Processed By**  
**Pathkind Diagnostic Pvt. Ltd.**  
 Ground Floor, One Stop Labs, Kirti Park, Dwarka  
 D/F, Road, Surajpattana - 201301, Ph No - 01202393333

<b>Name</b>	1. <b>Mrs. SHALINI SINGH</b>	<b>Booking Date</b>	18/01/2023 10:56:27
<b>Age</b>	- 42 Yrs	<b>Sample Collected on</b>	18/01/2023 11:00:43
<b>Sex</b>	1. Female	<b>Sample Received on</b>	18/01/2023 12:30:36
<b>P-ID No.</b>	- F1205700025523	<b>Report Released on</b>	04/01/2023 15:10:57
<b>Accession No.</b>	1. <b>11052210111029</b>	<b>Barcode No.</b>	994296576_994296582_994296583_994296584
<b>Referring Doctor</b>	SELF	<b>Ref No.</b>	-
<b>Referred By</b>	- Dr Rajesh Saxena-CP Pathkind CC Blood Road		

**Report Status - Preliminary Report**

Test Name	Result	Biological Ref. Interval	Unit
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**CLINICAL PATHOLOGY**

**Urine Routine & Microscopic Examination**

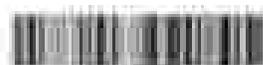
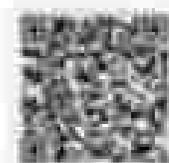
*(Urine) (Random) (Morning)*

**Physical Examination**

<b>Colour</b> <i>Urine (Urine)</i> <i>Method: Physical Examination</i>	Yellow	Pale Yellow
<b>Appearance</b> <i>Urine (Urine)</i> <i>Method: Physical Examination</i>	Clear	Clear
<b>Specific Gravity</b> <i>Urine (Urine)</i> <i>Method: At home (2-10 minutes) (Automated)</i>	1.025	1.003-1.035
<b>pH</b> <i>Urine (Urine)</i> <i>Method: Dipstick (pH) (pH)</i>	5.5	4.7-7.5

**Chemical Examination**

<b>Glucose</b> <i>Urine (Urine)</i> <i>Method: Urine (Glucose) (Glucose)</i>	Not Detected	Not Detected
<b>Protein</b> <i>Urine (Urine)</i> <i>Method: Protein (Protein) (Protein)</i>	Not Detected	Not Detected
<b>Ketones</b> <i>Urine (Urine)</i> <i>Method: Ketone (Ketone) (Ketone)</i>	Not Detected	Not Detected
<b>Blood</b> <i>Urine (Urine)</i> <i>Method: Hematuria (Hematuria)</i>	Not Detected	Not Detected
<b>Bilirubin</b> <i>Urine (Urine)</i> <i>Method: Bilirubin (Bilirubin)</i>	Not Detected	Not Detected



**Client**

**Pathkind Collection Center (Blood Road)**  
 Naraina Park, Blood Road  
 Street, Dist. Gurugram, PINCODE: 122008

**Processed By**

**Pathkind Diagnostics Pvt. Ltd.**  
 Ground Floor, One Stop Labs, Saket Park, Dwarka  
 Dist. West, Gurugram - 122002, Ph No - 9873407656

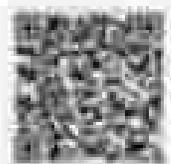
<b>Name</b>	1. <b>Mrs. SHALINI SINGH</b>	<b>Billing Date</b>	18/01/2023 10:55:27
<b>Age</b>	- 42 Yrs	<b>Sample Collected on</b>	18/01/2023 11:00:43
<b>Sex</b>	1. Female	<b>Sample Received on</b>	18/01/2023 12:00:06
<b>P-ID No.</b>	- P1205700025523	<b>Report Released on</b>	04/02/2023 15:10:17
<b>Accession No.</b>	1. <b>11052210111029</b>	<b>Barcode No.</b>	994296576 994296582 994296583 994296584
<b>Referring Doctor</b>	SELF	<b>Ref No.</b>	
<b>Referred By</b>	Dr Rajesh Kumar MD Pathkind CC Blood Road		

**Report Status - Preliminary Report**

Test Name	Result	Biological Ref. Interval	Unit
<b>Urobilinogen</b> <small>Serum (mg/dl)</small> <small>Normal (Males) 0.0-0.2</small>	Normal	Normal	
<b>Nitrite</b> <small>Serum (mg/dl)</small> <small>Normal (Males) 0.0-0.02</small>	Not Detected	Not Detected	
<b>Microscopic Examination</b> <small>Serum (High Power)</small>			
<b>Pus Cells</b> <small>Serum (per HPF)</small>	1-2	0-5	/HP
<b>RBC</b> <small>Serum (per HPF)</small>	Not Detected	Not Detected	/HP
<b>Epithelial Cells</b> <small>Serum (per HPF)</small>	2-4	0-5	/HP
<b>Cells</b> <small>Serum (per HPF)</small>	Not Detected	Not Detected	/HP
<b>Crystals</b> <small>Serum (per HPF)</small>	Calcium Oxalate	Not Detected	/HP
<b>Bacteria</b> <small>Serum (per HPF)</small>	Not Detected	Not Detected	/HP
<b>Remarks</b> <small>Serum (per HPF)</small>			

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

  
**Dr. Fahem Javed**  
 MD Pathology  
 Lab Head



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