



जिला संयुक्त चिकित्सालय, हापुड़

जनपद-हापुड़ (उत्तर प्रदेश)



पंजीकरण सं० 022386

वाह्य रोगी टिकट

दिनांक

(केवल पन्द्रह दिन क लिए मान्य)

नाम Maya Sharma उम्र लिंग - पुरुष महिला अन्य
 पिता/पति का नाम ADJ पता Kot, Hapur

B.P. _____ RBS _____ Pulse _____ SPO₂ _____
 Height _____ Weight _____ Allergic (If any) _____

Investigation (जाँच)	Diagnosis (निदान)	Chief Complaint (मुख्य शिकायत)	Past History (इतिहास)
HB% M.P. WIDAL HIV HBsAG HCV B. UREA B.G.P.T. B.G.O.T. B.SUGAR URINE SUGAR S. CHOLESTROL URINE ALBUMIN BLOOD GROUP	Reports Otolaryngology & ENT ✓	Pharyngitis ± Sinusitis Adh. steam inhalation. - Cap Omeprazole 20mg OD. ✓ Tab Bilastin 10mg BD ✓ N/s. Fluticasone furate 2 puffs BD Review SOS	X-7 days.

- ❖ सभी बच्चों का सम्पूर्ण टीकाकरण समय पर कराये, उन्हें 7 जानलेवा बीमारियों से बचाये।
- ❖ एम0डी0टी0 अपनाएं, कुष्ठ मिटाएं।
- ❖ गर्भवती महिलाओं की जाँच, टीकाकरण व प्रसव सरकारी अस्पताल में कराये।

clo B/L Foot Pain x 10 yrs.

1/4 clo Hypo thyroidism.

taking vit D₃ & Ca Supplements
since 1 wk.

- RBS 127 off scale
- s. uic acid (20)

(17)
US.

M

T. Aciclo 100mg 1-0-1

- C. omeprazol 20/10-0

- T. Seittopelidase 10mg 1-0-1

- T. Mr + Bc 0-1-0

- Dilogetol 100mg

- contrast Bath (3:1)

- soft slippers

} x 7 days

Name	: Ms. CHHAYA SHARMA	Age	: 38 Years
Lab No.	: 177152260	Gender	: Female
Ref By	: Dr. P C SHARMA	Reported	: 10/2/2024 3:28:41PM
Collected	: 9/2/2024 8:13:00PM	Report Status	: Final
A/c Status	: P	Processed at	: LPL-MEERUT LAB
Collected at	: HAPUR F PSC		: 1st Floor, Hall No. 101, 1st Floor of Shree Ram Commercial Complex, Shradhdhapuri, Phase 2, NH-58, Meerut, UP - 250001
	: LPL-Hapur PSC, Near Vijaya Bank, Opp Nagar Palika Parishad, Hapur - 0122-2300-027 HAPUR		



Test Report

Test Name

Results

Units

Bio. Ref. Interval



IMPORTANT INSTRUCTIONS


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(#) Sample drawn from outside source.

If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-49885050, Fax: - +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com



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Test Report

Test Name	Results	Units	Bio. Ref. Interval
URIC ACID, SERUM (Uricase)	3.78	mg/dL	2.60 - 6.00
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Capillary Photometry)	13	mm/hr	0 - 20

Note

1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
2. Test conducted on EDTA whole blood at 37°C.

C-REACTIVE PROTEIN; CRP, SERUM (Immunoturbidimetry)	0.62	mg/L	<5.00
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Comments

CRP is an acute phase reactant which is used in inflammatory disorders for monitoring course and effect of therapy. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis and infections. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc.

RHEUMATOID FACTOR (RA), SERUM (Immunoturbidimetry)	34.16	IU/mL	<14.00
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Comments

Rheumatoid factor is an antibody directed against the Fc portion of the IgG molecule. Polyreactive RF has binding specificity for substances other than IgG like nuclear components. This polyreactive RF is usually of the IgM class with low affinity. RF is not specific only for Rheumatoid arthritis, but it is often seen in cases of chronic infection and other systemic inflammatory conditions. Healthy individuals > 65 years of age may also show positive RF results. In addition to the common IgM RF, both IgA RF & IgG RF have been detected. IgA RF has been related to the more severe form of the disease with erosions.

Ankit Jain

Dr Ankit Jain
MD, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

Abhinav Sharma

Dr Abhinav Sharma
MBBS, MD Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

Sandeep Yadav

Dr. Sandeep Yadav
MBBS, MD (Biochemistry)
Consultant Biochemist
Dr Lal PathLabs Ltd

-----End of report-----



Name : Ms. CHHAYA SHARMA	Age : 37 Years
Lab No. : 458307665	Gender : Female
Ref By : SELF	Reported : 3/1/2024 3:27:46PM
Collected : 3/1/2024 8:15:00AM	Report Status : Final
A/c Status : P	Processed at : LPL-MEERUT LAB
Collected at : AVAS VIKAS COLONY-CC 209,Avas vikas colony,Near Dr anuj mudga clinic,Meerut road hapur HAPUR	1st Floor, Hall No. 101, 1st Floor of Shree Ram Commercial Complex, Shraddhapuri, Phase 2, NH-58, Meerut, UP - 250001



Test Report

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE, FREE, SERUM (CLIA)			
Free Triiodothyronine (T3, Free)	3.41	pg/mL	2.60 - 4.80
Free Thyroxine (T4, Free)	0.85	ng/dL	0.61 - 1.12
TSH, Ultrasensitive	7.505	µIU/mL	0.34 - 5.60


Reference Ranges for pregnancy

PREGNANCY	REFERENCE RANGE for TSH in µIU/mL (As per American Thyroid Association)	REFERENCE RANGE for FT3 in pg/mL	REFERENCE RANGE for FT4 in ng/dL
1st Trimester	0.100 - 2.500	2.11-3.83	0.52 -1.08
2st Trimester	0.200 - 3.000	1.96-3.38	0.45 -0.99
3st Trimester	0.300 - 3.000	1.96-3.38	0.48 -0.95

Note

- TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.
- TSH Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals



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Test Report

Test Name	Results	Units	Bio. Ref. Interval
VITAMIN B12; CYANOCOBALAMIN, SERUM (CLIA)	156.00	pg/mL	180.00 - 914.00

Interpretation

Remarks	Result In pg/mL
Normal	180 - 914
Indeterminate	120 - 180
Deficient	< 120

Notes

1. Interpretation of the result should be considered in relation to clinical circumstances.
2. It is recommended to consider supplementary testing with plasma Methylmalonic acid (MMA) or plasma homocysteine levels to determine biochemical cobalamin deficiency in presence of clinical suspicion of deficiency but indeterminate levels. Homocysteine levels are more sensitive but MMA is more specific
3. False increase in Vitamin B12 levels may be observed in patients with intrinsic factor blocking antibodies, MMA measurement should be considered in such patients
4. The concentration of Vitamin B12 obtained with different assay methods cannot be used interchangeably due to differences in assay methods and reagent specificity

Test Name	Results	Units	Bio. Ref. Interval
VITAMIN D, 25 - HYDROXY, SERUM (CLIA)	81.68	nmol/L	75.00 - 250

Interpretation

LEVEL	REFERENCE RANGE IN nmol/L	COMMENTS
Deficient	< 50	High risk for developing bone disease
Insufficient	50-74	Vitamin D concentration which normalizes Parathyroid hormone concentration
Sufficient	75-250	Optimal concentration for maximal health benefit



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Test Report

Test Name	Results	Units	Bio. Ref. Interval
Potential intoxication	>250 High risk for toxic effects		

Note

- The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D.
- 25 (OH)D is influenced by sunlight, latitude, skin pigmentation, sunscreen use and hepatic function.
- Optimal calcium absorption requires vitamin D 25 (OH) levels exceeding 75 nmol/L.
- It shows seasonal variation, with values being 40-50% lower in winter than in summer.
- Levels vary with age and are increased in pregnancy.
- A new test Vitamin D, Ultrasensitive by LC-MS/MS is also available

Comments

Vitamin D promotes absorption of calcium and phosphorus and mineralization of bones and teeth. Deficiency in children causes Rickets and in adults leads to Osteomalacia. It can also lead to Hypocalcemia and Tetany. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs).

Decreased Levels

- Inadequate exposure to sunlight
- Dietary deficiency
- Vitamin D malabsorption
- Severe Hepatocellular disease
- Drugs like Anticonvulsants
- Nephrotic syndrome

Increased levels

Vitamin D intoxication



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Test Report

Test Name	Results	Units	Bio. Ref. Interval
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End of report



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OUTPATIENT RECORD

Hospital No: MH011701566	Visit No: O18000065538
Name: MRS CHHAYA SHARMA	Age/Sex: 40 Yrs/Female
Doctor Name: DR. RAJESH KUMAR	Specialty: ORTHOPAEDICS MGD
Date: 14/02/2024 03:14PM	

Progress Notes :
POLYARTHRALGIA

VIT.B DEFICIENT
RA FACTOR - 34.16 nmol/L

Rx:-

- ~~TAB.FOLITRAX 15 MG ONCE A WEEK~~
- ~~TAB.FOLVITE 5 MG OD~~
- ~~TAB.NUCOXIA MR BD(15 MINUTES AFTER FOOD-2 TIMES A DAY) →~~
- ~~TAB.PANTOP 40 MG BD(15 MINUTES BEFORE FOOD-2 TIMES A DAY)~~
- ~~TAB.DEFCORT 12 MG BD(45 MINUTES AFTER FOOD-2 TIMES A DAY)~~
- ~~TAB.EVION LC OD(45 MINUTES AFTER LUNCH)~~
- ~~TAB.METHYCOBAL 500 mcg BD(AFTER 15 MINUTES AFTER FOOD-2 TIMES A DAY)~~
- ~~TAB.SHELICAL HD OD(15 MINUTES AFTER LUNCH)~~
- X 10 DAYS
- REVIEW AFTER 10 DAYS

DIET :-

- ~~NAKPRO PLANT PROTEIN - 30 GMS IN 200 ML MILK - MAKE A SHAKE~~

Dr RAJESH KUMAR VERMA
SENIOR CONSULTANT AND HEAD OF DEPARTMENT
JOINT REPLACEMENT AND ARTHROSCOPY
MBBS (MAMC,DELHI)
MS(ORTHO) (MAMC,DELHI)
MCh Orth. ,US
DMC/R/4101

Ph: +91 9711226552

AWARDEE:-

GOLD MEDALLIST

DISTINGUISHED ALUMNI AWARD - MAULANA AZAD MEDICAL COLLEGE,DELHI

DISTINGUISHED SERVICES AWARD - INDIAN MEDICAL ASSOCIATION

SENIOR CITIZEN SERVICES AWARD - DELHI HEALTH SERVICES

RA. Sensitivity ↑↑↑↑
= Ant CCP Specificity ⊖ve. 98%
=



Manipal Hospital Ghaziabad

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad 201 002

0120 3535 353 / +91 88609 45566



URN : MH011701566

Hospital No: MH011701566

Name: MRS CHHAYA SHARMA

Visit No: O18000065538

Doctor Name: DR. RAJESH KUMAR

DR. RAJESH KUMAR

"MBBS,MS (Orthopaedics),MCh (Orthopaedics)"

Reg. No.: 4101



OUTPATIENT RECORD

Hospital No: MH011701566	Visit No: O18000068289
Name: MRS CHHAYA SHARMA	Age/Sex: 40 Yrs/Female
Doctor Name: DR. RAJESH KUMAR	Specialty: ORTHOPAEDICS MGD
Date: 29/02/2024 01:16PM	

BP Systolic: 125 mmHg	BP Diastolic: 77 mmHg	Pulse Rate: 97beats per minute
Saturation(Oxygen): 98%	Height: 154cm	Weight : 63kg
BMI: 26.56	Pain Score: 00	Fall Risk: 01
vulnerable: 01		

Progress Notes :
POLYARTHRALGIA

VIT.B DEFICIENT
RA FACTOR -

Rx:-
TAB.FOLITRAX 15 MG ONCE A WEEK
TAB.FOLVITE 5 MG OD
X TAB.NUCOXIA MR BD(15 MINUTES AFTER FOOD-2 TIMES A DAY)
TAB.PANTOP 40 MG BD(15 MINUTES BEFORE FOOD-2 TIMES A DAY)
TAB.DEFCORT 06 MG BD(45 MINUTES AFTER FOOD 2 TIMES A DAY)
TAB.EVION LC OD(45 MINUTES AFTER LUNCH)
TAB.TOFE 5 MG BD
TAB.COLLASOV OD
TAB.METHYCOBAL 500 mcg BD(AFTER 15 MINUTES AFTER FOOD-2 TIMES A DAY)
TAB.SHELCAJ HD OD(15 MINUTES AFTER LUNCH)
X 15 DAYS
REVIEW AFTER 15 DAYS

OXFORD STRETCHING REGIME

DIET :-
NAKPRO PLANT PROTEIN - 30 GMS IN 200 ML MILK - MAKE A SHAKE

Dr RAJESH KUMAR VERMA
SENIOR CONSULTANT AND HEAD OF DEPARTMENT
JOINT REPLACEMENT AND ARTHROSCOPY
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URN : MH011701566

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Hospital No: MH011701566	Visit No: O18000068289
Name: MRS CHHAYA SHARMA	Doctor Name: DR. RAJESH KUMAR
DISTINGUISHED SERVICES AWARD - INDIAN MEDICAL ASSOCIATION	
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DR. RAJESH KUMAR
"MBBS,MS (Orthopaedics),MCh (Orthopaedics)"
Reg. No.: 4101

Name : Ms. CHHAYA SHARMA
Lab No. : 178404813
Ref By : SELF
Collected : 29/2/2024 9:54:00AM
A/c Status : P
Collected at : HAPUR F PSC
LPL-Hapur PSC, Near Vijaya Bank, Opp Nagar
Palika Parishad, Hapur - 0122-2300-027
HAPUR

Age : 38 Years
Gender : Female
Reported : 29/2/2024 3:55:58PM
Report Status : Final
Processed at : LPL-MEERUT LAB
1st Floor, Hall No. 101, 1st Floor of Shree
Ram Commercial Complex, Shradhdhapuri,
Phase 2, NH-58, Meerut, UP - 250001



Test Report

Test Name	Results	Units	Bio. Ref. Interval
ANTI CCP (CYCLIC CITRULLINATED PEPTIDE), SERUM (ECLIA)	<8.00	U/mL	<17.00

Note

- Sensitivity of this assay is 70.6% and specificity is 98.2%
- Specificity of Anti CCP antibodies in Juvenile arthritis patients has not been established

Comments

Anti CCP antibodies are useful for evaluating patients suspected of Rheumatoid arthritis. Positive results occur in 60-80% of Rheumatoid arthritis patients depending on disease severity. The positive predictive value of Anti CCP antibodies for Rheumatoid arthritis is far greater than Rheumatoid factor. False positive results are uncommon. Upto 30% patients with seronegative Rheumatoid arthritis also show Anti CCP antibodies.

Clinical Uses

- For diagnosis of early Rheumatoid arthritis - Anti CCP antibodies are detected in approximately 50-60% patients of Rheumatoid arthritis usually after 3-6 months of symptoms
- Prediction of severity of disease - Early Rheumatoid arthritis patients with Anti CCP positivity may develop a more erosive form of the disease as compared with Anti CCP negative patients
- To differentiate elderly onset Rheumatoid arthritis from Polymyalgia rheumatica and erosive SLE





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Test Report

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE, FREE, SERUM (CLIA)			
Free Triiodothyronine (T3, Free)	3.27	pg/mL	2.60 - 4.80
Free Thyroxine (T4, Free)	1.04	ng/dL	0.61 - 1.12
TSH, Ultrasensitive	2.378	µIU/mL	0.34 - 5.60

Reference Ranges for pregnancy

PREGNANCY	REFERENCE RANGE for TSH in µIU/mL (As per American Thyroid Association)	REFERENCE RANGE for FT3 in pg/mL	REFERENCE RANGE for FT4 in ng/dL
1st Trimester	0.100 - 2.500	2.11-3.83	0.52 -1.08
2st Trimester	0.200 - 3.000	1.96-3.38	0.45 -0.99
3st Trimester	0.300 - 3.000	1.96-3.38	0.48 -0.95

Note

- TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.
- TSH Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals

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OUTPATIENT RECORD

Hospital No: MH011701566	Visit No: O18000071657	
Name: MRS CHHAYA SHARMA	Age/Sex: 40 Yrs/Female	
Doctor Name: DR RAJESH KUMAR VERMA	Specialty: ORTHOPAEDICS MGD	
Date: 18/03/2024 02:21PM		
BP Systolic: 135 mmHg	BP Diastolic: 88 mmHg	Pulse Rate: 98beats per minute
Saturation(Oxygen): 99%	Height: 154cm	Weight : 63kg
BMI: 26.56	Pain Score: 00	Fall Risk: 01
Vulnerable: 01		

Progress Notes :

POLYARTHRALGIA

VIT.B DEFICIENT

RA FACTOR - POSITIVE

Rx:-

✓ TAB.FOLITRAX 7.5 MG ONCE A WEEK

✓ TAB.FOLVITE 5 MG OD

✓ TAB.NUCOXIA MR BD(15 MINUTES AFTER FOOD-2 TIMES A DAY)

✓ TAB.PANTOP 40 MG BD(15 MINUTES BEFORE FOOD-2 TIMES A DAY)

✓ TAB.DEFCORT 06 MG BD(45 MINUTES AFTER FOOD-2 TIMES A DAY)

✓ TAB.EVION LC OD(45 MINUTES AFTER LUNCH)

✓ TAB.TOFE 5 MG BD*

✓ TAB.COLLASOV OD

✓ TAB.METHYCOBAL 500 mcg BD(AFTER 15 MINUTES AFTER FOOD-2 TIMES A DAY)

✓ TAB.SHELCAL HD OD(15 MINUTES AFTER LUNCH)

X 15 DAYS

REVIEW AFTER 15 DAYS

OXFORD STRETCHING REGIME

DIET :-

NAKPRO PLANT PROTEIN - 30 GMS IN 200 ML MILK - MAKE A SHAKE

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JOINT REPLACEMENT AND ARTHROSCOPY

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Doctor Name: DR RAJESH KUMAR VERMA

DISTINGUISHED ALUMNI AWARD - MAULANA AZAD MEDICAL COLLEGE, DELHI

DISTINGUISHED SERVICES AWARD - INDIAN MEDICAL ASSOCIATION

SENIOR CITIZEN SERVICES AWARD - DELHI HEALTH SERVICES

DR RAJESH KUMAR VERMA

"MBBS,MS (Orthopaedics),MCh (Orthopaedics)"

Reg. No.: 4101



OUTPATIENT RECORD

Hospital No: MH011701566	Visit No: O18000075082
Name: MRS CHHAYA SHARMA	Age/Sex: 40 Yrs/Female
Doctor Name: DR RAJESH KUMAR VERMA	Specialty: ORTHOPAEDICS MGD
Date: 05/04/2024 12:33PM	

Progress Notes :

POLYARTHRALGIA

VIT.B DEFICIENT
RA FACTOR - POSITIVE

ADV:-
ESR
CRP
RA FACTOR

Rx:-
✓ TAB.FOLITRAX 7.5 MG ONCE A WEEK
✓ TAB.FOLVITE 5 MG OD
✓ TAB.NUCOXIA MR BD(15 MINUTES AFTER FOOD-2 TIMES A DAY) (20)
✓ TAB.PANTOP 40 MG BD(15 MINUTES BEFORE FOOD-2 TIMES A DAY)
✓ TAB.DEFCORT 06 MG OD(45 MINUTES AFTER LUNCH)
✓ TAB.EVION LC OD(45 MINUTES AFTER LUNCH)
✓ TAB.TOFFE 5 MG BD(45 MINUTES AFTER FOOD-2 TIMES A DAY) (30)
✓ TAB.COLLASOV OD
✓ TAB.METHYCOBAL 500 meg BD(AFTER 15 MINUTES AFTER FOOD-2 TIMES A DAY); INEED TO TAKE OD
✓ TAB.SHEL CAL HD OD(15 MINUTES AFTER LUNCH)
✓ TAB.GABAPIN NT 100/10 HS(AT NIGHT)
X 15 DAYS
REVIEW AFTER 15 DAYS

OXFORD STRETCHING REGIME
CALF RAISES - 12 REPS X 3 SETS

DIET :-
NAKPRO PLANT PROTEIN - 30 GMS IN 200 ML MILK - MAKE A SHAKE

Dr RAJESH KUMAR VERMA
SENIOR CONSULTANT AND HEAD OF DEPARTMENT
JOINT REPLACEMENT AND ARTHROSCOPY
MBBS (MAMC,DELHI)
MS(ORTHO) (MAMC,DELHI)
MCh.Orth. ,US
DMC/R/4101

Ph: +91 9711226552



Manipal Hospital Ghaziabad

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad 201 002
0120 3535 353 / +91 88609 45566



URN : MH011701566

Hospital No: MH011701566

Visit No: O18000075082

Name: MRS CHHAYA SHARMA

Doctor Name: DR RAJESH KUMAR VERMA

AWARDEE:-

GOLD MEDALLIST

DISTINGUISHED ALUMNI AWARD - MAULANA AZAD MEDICAL COLLEGE, DELHI

DISTINGUISHED SERVICES AWARD - INDIAN MEDICAL ASSOCIATION

SENIOR CITIZEN SERVICES AWARD - DELHI HEALTH SERVICES

DR RAJESH KUMAR VERMA

"MBBS, MS (Orthopaedics), MCh (Orthopaedics)"

Reg. No.: 4101

Name : Ms. CHHAYA SHARMA
 Lab No. : 443010256
 Ref By : DR RAJESH KUMAR VERMA
 Collected : 27/4/2024 10:19:00AM
 A/c Status : P
 Collected at : HAPUR F PSC
 LPL-Hapur PSC, Near Vijaya Bank, Opp Nagar
 Palika Parishad, Hapur - 0122-2300-027
 HAPUR

Age : 38 Years
 Gender : Female
 Reported : 27/4/2024 5:57:32PM
 Report Status : Final
 Processed at : LPL-MEERUT LAB
 1st Floor, Hall No. 101, 1st Floor of Shree
 Ram Commercial Complex, Shradhdhapuri,
 Phase 2, NH-58, Meerut, UP - 250001



Test Report

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE, TOTAL, SERUM (CLIA)			
T3, Total	1.30	ng/mL	0.70 - 2.04
T4, Total	8.46	µg/dL	5.74 - 13.03
TSH	1.21	µIU/mL	0.34 - 5.60

Interpretation

PREGNANCY	REFERENCE RANGE FOR TSH IN µIU/mL (As per American Thyroid Association)
1st Trimester	0.100 - 2.500
2nd Trimester	0.200 - 3.000
3rd Trimester	0.300 - 3.000

Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals

Ankit Jain

Dr Ankit Jain
 MD, Pathology
 Chief of Laboratory
 Dr Lal PathLabs Ltd

Abhinav Sharma

Dr Abhinav Sharma
 MBBS, MD Pathology
 Consultant Pathologist
 Dr Lal PathLabs Ltd

Sandeep Yadav

Dr Sandeep Yadav
 MBBS, MD (Biochemistry)
 Consultant Biochemist
 Dr Lal PathLabs Ltd





Name : Ms. CHHAYA SHARMA	Age : 38 Years
Lab No. : 443010256	Gender : Female
Ref By : DR RAJESH KUMAR VERMA	Reported : 27/4/2024 5:57:32PM
Collected : 27/4/2024 10:19:00AM	Report Status : Final
A/c Status : P	Processed at : LPL-MEERUT LAB
Collected at : HAPUR F PSC LPL-Hapur PSC, Near Vijaya Bank, Opp Nagar Paliika Parishad, Hapur - 0122-2300-027 HAPUR	1st Floor, Hall No. 101, 1st Floor of Shree Ram Commercial Complex, Shraddhapuri, Phase 2, NH-58, Meerut, UP - 250001

Test Report

Test Name	Results	Units	Bio. Ref. Interval
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Capillary Photometry)	11	mm/hr	0 - 20

Note

1. Test conducted on EDTA whole blood at 37°C
2. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

C-REACTIVE PROTEIN; CRP, SERUM (Immunoturbidimetry)	0.68	mg/L	<5.00
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Comments

CRP is an acute phase reactant which is used in inflammatory disorders for monitoring course and effect of therapy. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis and infections. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc.

RHEUMATOID FACTOR (RA), SERUM (Immunoturbidimetry)	22.07	IU/mL	<14.00
---	-------	-------	--------

Comments

Rheumatoid factor is an antibody directed against the Fc portion of the IgG molecule. Polyreactive RF has binding specificity for substances other than IgG like nuclear components. This polyreactive RF is usually of the IgM class with low affinity. RF is not specific only for Rheumatoid arthritis, but it is often seen in cases of chronic infection and other systemic inflammatory conditions. Healthy individuals > 65 years of age may also show positive RF results. In addition to the common IgM RF, both IgA RF & IgG RF have been detected. IgA RF has been related to the more severe form of the disease with erosions.



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Phase 2, NH-58, Meerut, UP - 250001



Test Report

Test Name	Results	Units	Bio. Ref. Interval
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-----End of report-----



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(#) Sample drawn from outside source.

If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-49885050, Fax: +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com





DISTRICT COMBINED HOSPITAL HAPUR

Dastoi Road, Hapur, Uttar Pradesh, India

CR No: 992612300291076

OUT PATIENT CARD



Patient Name: CHHAYA

Age/Sex: 38 Yr/F

W/O: HIMANSHU

ABDM Health ID: NA

Address: Hapur, Uttar Pradesh, India Mobile: 9560502227

ABDM User ID :NA

Category: General

Fees: ₹1.00/-

Department/RoomNo: E N T / 13

OPD Days: Mon, Tue, Wed, Thu, Fri, Sat

Doctor/Unit: ENT General

Visit Date & Time: 20-May-2023 10:28

Valid Till: 04-Jun-2023

Pharyngitis & Sinusitis

Adv

Steam inhalation.
 Cap. Omeprazole 20 mg OD.
 Tab. Bilastin 10 mg BD.
 N/s. Fluticasone furoate 2 puffs
 BD.
 Syp. Sueraffate 1 tsf tsd
 x 7 days
 Remi SOS

UP T - Negative
 (20/5/23)

Adv - USG lower abdomen.
 at EHC.



स्टार

इमेजिंग एण्ड पैथ लैब (प्रा०) लि०
1978 से गुणवत्ता में सक्षम
(सह-व्यवस्था पार्टनर : सिद्धि इन्टरप्राइजेज)



निःशुल्क सी०टी० स्कैन

सामुदायिक स्वास्थ्य केन्द्र, हापुड़ रोड़,
साकेत कॉलानी, हापुड़, उ० प्र० 245101

8287955166



PATIENT NAME	: Mrs. CHHAYA SHARMA	AGE/SEX	: 39.3 YRS / F
LAB SERIAL NO	: 412305160010	REGISTERED	: 16-May-2023 10:26AM
REFERRED BY	: Dr. RAJENDER GUPTA	SCAN TIME	: 16-May-2023 12:28PM
SAMPLE ID	: 4116010	REPORTED	: 16-May-2023 02:46PM

CT-SCAN

C.T.SCAN OF PARANASAL SINUSES

Protocol:

Serial coronal sections in helical mode taken including the frontal sinus upto the sphenoid sinus.

Observations:

- Complex fluid density present in left maxillary , right frontal , and bilateral sphenoid sinuses
- Nasal septum is mildly deviated to right.
- The lamina papyracea are normal.
- The cribriform plate and fovea ethmoidalis are normal.
- The nasal bones are normal.

IMPRESSION:

- Complex fluid density present in left maxillary , right frontal , and bilateral sphenoid sinuses ? Sinusitis.
- Nasal septum is deviated to right.

Anit Goyal
DR ANIT GOYAL
MBBS, MD (RADIO DIAGNOSIS)
REG No - 21785

*** End of Report ***

सोमवार से शनिवार सुबह 8 बजे से शाम 6 बजे तक

16-May-23 02:58 PM

नैदानिक सहसम्बन्ध अंतिम निदान के लिए आवश्यक है। यदि रिपोर्ट असंतोषजनक है तो कृपया कर फोन पर संपर्क करें

• यह रिपोर्ट केवल चिकित्सकों के लिए है।

OM ENT HOSPITAL & RESEARCH CENTRE PVT. LTD.

Regd. Off. : 1899-B, Kotla Mubarak Pur, South Ex.-I, New Delhi.

R-2/11, Raj Nagar, GHAZIABAD -201002

Regd. No. GZB / 02650

CIN -U85110DL2003PTC119570

Dr. Ombir Singh

M.B.B.S. (Gold Medalist)
M.S. (P.G.I. Chandigarh)
D.N.B. FICS (USA)
Consultant E.N.T. Surgeon
Neuro Otologist Head & Neck Cancer Surgeon
Regd. No. 30119

Dr. Manju Singh

M.D. (Padiatrics)
Consultant Child Specialist
Ex Senior Registrar P.G.I. Chandigarh

Dr. Neha Singh

MBBS, MS (ENT.)
Gold Medalist (KMC Manipal)
DNB, MNAMS
Ex Sr. Registrar Neurootology
S.G.P.G.I, Lucknow
Regd no. 86103

CLINIC : R - 2/11 Raj Nagar, Ghaziabad. Phone No. : 2826034, 2822499 Mob. : 9205912306

Morning Hours : 10.30 A.M. - 2.00 P. M. } (Mon. to Friday)

Evening Hours : 7.30 P.M. To 9.00 P. M. }

Sunday : 10 A.M. - 3 P.M.

Patient Name..... CHAYU Date... 20/12/23.....

. URST
• LARYNGITIS

STEDM in halaku

1 UO WOT 201 112

1705 LINU 60BT
600 112

1705 UO WOT 112
120 00 112

• FLUTIFLO FT NASAL 62

120 0 112

9
271123

20/1/24

* STEDM in halaku

• FLUTIFLO FT NASAL

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==

1705 clarwin

120
112
==

1705 Ambrophyll-30 112

शनिवार पूर्ण अवकाश एवं रविवार शाम को बन्द रहेगा

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Patient Name..... SHARVIL Date 20/12/23...

OSAS

Adenotomylia

*Sjb BACTOCL DI

200 → 116

*Sjb JENCOV

50 → 114

* NAZANAC - M NASU 64

137 → 114

E

* 1mm

f

27 12/23

29/1/24

* NAZANAC - M NASU 64

137

226

*Sjb MIECOMUNE-2

* NIKE-P

NASU

116

*Sjb BACTOCL DI

200 → 116

*Sjb UENGL-D

116

f
29/1/24

शनिवार पूर्ण अवकाश एवं रविवार शाम को बन्द रहेगा

Name : SHARVIN
Lab No. : 444293222
Ref By : DR LOKESH KAUSHALYA MD
Collected : 8/5/2023 8:56:00AM
A/c Status : P
Collected at : HAPUR COLLECTION CENTRE
DR.LAL COLLECTION CENTRE, NEAR JAINA TAK
IJ,RAILWAY ROADHAPUR, UTP 245101
HAPUR

Age : 3 Years
Gender : Male
Reported : 8/5/2023 4:01:58PM
Report Status : Final
Processed at : LPL-MEERUT LAB
1st Floor, Hall No. 101, 1st Floor of Shree
Ram Commercial Complex, Shraddhapuri,
Phase 2, NH-58, Meerut, UP - 250001

Test Report

Test Name	Results	Units	Bio. Ref. Interval
IMMUNOGLOBULIN IgE, SERUM (ECLIA)	210.30	IU/mL	0.00 - 60.00

- Note: 1. Normal levels of IgE do not rule out possibility of IgE dependent allergies as the diagnostic sensitivity of the test depends upon elapsed time between exposure to an allergen and testing, patient age and affected target organs.
2. No close correlation has been demonstrated between severity of allergic reaction and IgE levels.

Comments

Immunoglobulin E (IgE) is the most important trigger molecule for allergic information. The level of IgE is low during the first year of life, gradually increases with age and reaches adult levels after 10 years. As IgE is a mediator of allergic response, quantitative measurement can provide useful information for differential diagnosis of atopic and non-atopic disease. Patients with atopic diseases like Allergic asthma, Allergic rhinitis & Atopic dermatitis have moderately elevated IgE levels.

Increased Levels - Atopic/Non-atopic allergy, Hyper IgE syndrome, Parasitic infections, IgE Myeloma, Pulmonary Aspergillosis, Immunodeficiency states & Autoimmune diseases

Uses

- Evaluation of children with strong family history of allergies and early clinical signs of disease
- Evaluation of children and adults suspected of having allergic respiratory disease to establish the diagnosis and define the allergens
- To confirm clinical expression of sensitivity to foods in patients with Anaphylactic sensitivity or with Asthma, Angioedema or Cutaneous disease
- To evaluate sensitivity to insect venom allergens particularly as an aid in defining venom specificity in those cases in which skin tests are equivocal
- To confirm the presence of IgE antibodies to certain occupational allergens

Ankit Jain

Dr Ankit Jain
MD, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd



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- The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s).
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- Contact customer care Tel No. +91-11-39885050 for all queries related to test results.
- (#) Sample drawn from outside source.

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Test Report

Test Name

Results

Units

Bio. Ref. Interval

End of report



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