

Patient Name : Ms.GEETA MISHRA	Visit No : CHA250041974
Age/Gender : 45 Y/F	Registration ON : 08/Mar/2025 03:07PM
Lab No : 10139269	Sample Collected ON : 08/Mar/2025 03:09PM
Referred By : Dr.NATIONAL HOSPITAL	Sample Received ON : 08/Mar/2025 03:28PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 08/Mar/2025 04:28PM
Doctor Advice : USG WHOLE ABDOMEN,CHEST PA,CRP (Quantitative),RANDOM,CREATININE,UREA,NA+K+,LFT,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
CRP-QUANTITATIVE				
CRP-QUANTITATIVE TEST	6.7	MG/L	0.1 - 6	

Method: Immunoturbidimetric

(Method: Immunoturbidimetric on photometry system)

SUMMARY : C - reactive protien (CRP) is the best known among the acute phase protiens, a group of protien whose concentration increases in blood as a response to inflammatory disorders.CRP is normally present in low concentration in blood of healthy individuals (< 1mg/L). It is elevated up to 500 mg/L in acute inflammatory processes associated with bacterial infections, post operative conditions tissue damage already after 6 hours reaching a peak at 48 hours.. The measurment of CRP represents a useful aboratory test for detection of acute infection as well as for monitoring inflammtory proceses also in acute rheumatic & gastrointestinal disease. In recent studies it has been shows that in apparently healthy subjects there is a direct orrelation between CRP concentrations & the risk of developing oronary heart disease (CHD).

hsCRP cut off for risk assessment as per CDC/AHA

Level	Risk
<1.0	Low
1.0-3.0	Average
>3.0	High

All reports to be clinically corelated

CHARAK

[Checked By]

Print.Date/Time: 08-03-2025 17:21:27

*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
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DR. ADITI D AGARWAL
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Referred By : Dr.NATIONAL HOSPITAL	Sample Received ON : 08/Mar/2025 03:59PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 08/Mar/2025 04:47PM
Doctor Advice : USG WHOLE ABDOMEN,CHEST PA,CRP (Quantitative),RANDOM,CREATININE,UREA,NA+K+,LFT,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	13.3	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	5.10	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	43.3	%	36 - 45	Pulse hieght detection
MCV	85.1	fL	80 - 96	calculated
MCH	26.1	pg	27 - 33	Calculated
MCHC	30.7	g/dL	30 - 36	Calculated
RDW	14.6	%	11 - 15	RBC histogram derivation
RETIC	1.0 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	15790	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	82	%	40 - 75	Flowcytometry
LYMPHOCYTES	14	%	25 - 45	Flowcytometry
EOSINOPHIL	1	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	194,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	194000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	12,948	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,211	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	158	/cmm	20-500	Calculated
Absolute Monocytes Count	474	/cmm	200-1000	Calculated
Mentzer Index	17			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic. Platelets are adequate.WBCs show neutrophilic leucocytosis. No parasite seen.



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Refer Lab/Hosp : CHARAK NA Report Generated ON : 08/Mar/2025 04:15PM
Doctor Advice : USG WHOLE ABDOMEN,CHEST PA,CRP (Quantitative),RANDOM,CREATININE,UREA,NA+K+,LFT,CBC (WHOLE BLOOD)



Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD SUGAR RANDOM				
BLOOD SUGAR RANDOM	89.2	mg/dl	70 - 170	Hexokinase
NA+K+				
SODIUM Serum	136.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.3	MEq/L	3.5 - 5.5	ISE Direct
BLOOD UREA				
BLOOD UREA	24.40	mg/dl	15 - 45	Urease, UV, Serum
SERUM CREATININE				
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.42	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.12	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.30	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	149.20	U/L	30 - 120	PNPP, AMP Buffer
SGPT	48.0	U/L	5 - 40	UV without P5P
SGOT	42.0	U/L	5 - 40	UV without P5P

*** End Of Report ***

CHARAK



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ULTRASOUND STUDY OF WHOLE ABDOMEN

Excessive gaseous abdomen

- **Liver** is mildly enlarged in size (~160mm) and shows increased echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** is partially distended (post prandial) visualized part appear normal.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. No calculus or mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 93 x 42 mm in size. Left kidney measures 95 x 48 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- **Uterus** is not visualized (post operative).
- No adnexal mass lesion is seen.

OPINION:

- MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.

(Possibility of acid peptic disease could not be ruled out).

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya



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SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Borderline cardiomegaly is present.
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

OPINION

- **BORDERLINE CARDIOMEGALY.**

Clinical correlation and Cardiac evaluation is needed.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by R R...

*** End Of Report ***

