



Rajasthani & Gujarati Charitable Foundation's  
**POONA HOSPITAL AND RESEARCH CENTRE**  
27, Sadashiv Peth, Pune 411 030 ☎ 020 6609 6000

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PH00308020 / 2414704  
Ms. SRUSHTI SHITALKUMAR PALANGE  
ICU Ward\ Bed : MEDICAL ICU \ M1-53  
15(Y)/Female  
Dr. VIJAY M RAMANAN  
REPORT NO. : PG-0156134  
LAB NO. : LN-80253  
COLLECTION DATE & TIME : 03/03/2025 7:18 PM  
REPORT DATE & TIME : 04/03/2025 7:16 AM  
ID PROOF : Verified

**LIVER FUNCTION PROFILE REPORT**

| Test                         | Findings | Unit  | Biological Ref. Interval |
|------------------------------|----------|-------|--------------------------|
| <b>UBIN(DIRECT/INDIRECT)</b> |          |       |                          |
| BILIRUBIN, Serum             | 0.74     | mg/dl | 0 - 1                    |
| (to Reagent End Point)       |          |       |                          |
| BILIRUBIN, Serum             | 0.10     | mg/dl | 0 - 0.3                  |
| (to Reagent End Point)       |          |       |                          |
| CT BILIRUBIN, Serum          | 0.64     | mg/dl | 0.01 - 1                 |
| (to Reagent End Point)       |          |       |                          |
| ALBUMIN, Serum               | 10       | U/L   | 14 - 59                  |
| (to Reagent End Point)       |          |       |                          |
| <b>PROTEINS WITH Alb/Glb</b> |          |       |                          |
| PROTEINS, Serum              | 5.36     | gm/dl | 6.4 - 8.2                |
| (to Reagent End Point)       |          |       |                          |
| ALB, Serum                   | 2.49     | gm/dl | 3.4 - 5                  |
| (to Reagent End Point)       |          |       |                          |
| GLOB, Serum                  | 2.87     | gm/dl | 1.9 - 3.5                |
| (to Reagent End Point)       |          |       |                          |
| ALP, Serum                   | 16       | U/L   | 15 - 37                  |
| (to Reagent End Point)       |          |       |                          |
| <b>ALP, Serum</b>            |          |       |                          |
| ALP, Serum                   | 58       | U/L   | 46 - 116                 |
| (to Reagent End Point)       |          |       |                          |
| <b>ALP, Serum</b>            |          |       |                          |
| ALP, Serum                   | 16       | U/L   | 5 - 85                   |
| (to Reagent End Point)       |          |       |                          |

**Remarks :-** Interpretation :  
In asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT.  
In most types of liver disease, ALT activity is higher than that of AST; exception may be seen in Alcoholic Hepatitis,  
Hepatic Cirrhosis, and Liver neoplasia. In a patient with Chronic liver disease, AST:ALT ratio >1 is highly suggestive of  
advanced liver fibrosis.

Dr. A.R. INCHEKAR  
MD MICRO

Dr. C. GHANEKAR  
MD MICRO

Dr. S. SINGH  
MD PATH

Dr. A. HARSHE  
MD PATH

Dr. V. PHATKE  
DNB PATH

Dr. S. MARATHE  
MD PATH

Dr. D. PATEL  
MD PATH (H.O.D.)

\*\*\*\*\* END OF REPORT \*\*\*\*\*

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H-2018-055

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PH00308020 / 2414704  
NAME : **Ms. SRUSHTI SHITALKUMAR PALANGE**  
CATEGORY : ICU Ward, Bed : H WARD (ACU) \ H-10  
AGE/SEX : 15(Y)/Female  
REFERRED BY : Dr. VIJAY M RAMANAN  
REPORT NO. : PG-0156621  
LAB NO. : LN-80517  
COLLECTION DATE & TIME : 04/03/2025 9:24 PM  
REPORT DATE & TIME : 05/03/2025 11:18 AM  
ID PROOF : Verified

**HAEMOGRAM REPORT**

| Test                        | Findings                                                                                                                                                                                           | Unit         | Biological Ref. Interval |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------|
| <b>HAEMOGRAM</b>            |                                                                                                                                                                                                    |              |                          |
| <b>COMPLETE BLOOD COUNT</b> |                                                                                                                                                                                                    |              |                          |
| HEMOGLOBIN                  | 11.7                                                                                                                                                                                               | g/dl         | 12 - 15                  |
| <b>MC INDICES</b>           |                                                                                                                                                                                                    |              |                          |
| C.V.                        | 36.1                                                                                                                                                                                               | %            | 36 - 45                  |
| M.C. COUNT                  | 4.37                                                                                                                                                                                               | million/cumm | 4.5 - 5.1                |
| M.C.V.                      | 82.6                                                                                                                                                                                               | fL           | 80 - 96                  |
| M.C.H.                      | 26.8                                                                                                                                                                                               | pg           | 27.5 - 33.2              |
| M.C.H.C.                    | 32.4                                                                                                                                                                                               | g/dl         | 32 - 36                  |
| RDW CV                      | 16.5                                                                                                                                                                                               | %            | 11.6 - 14                |
| <b>WBC COUNT.</b>           |                                                                                                                                                                                                    |              |                          |
| W.B.C. COUNT                | 15741                                                                                                                                                                                              | /cumm        | 4000 - 11000             |
| <b>DIFFERENTIAL COUNT</b>   |                                                                                                                                                                                                    |              |                          |
| NEUTROPHILS                 | 80                                                                                                                                                                                                 | %            | 40 - 80                  |
| LYMPHOCYTES                 | 12                                                                                                                                                                                                 | %            | 20 - 40                  |
| EOSINOPHILS                 | 00                                                                                                                                                                                                 | %            | 1 - 6                    |
| MONOCYTES                   | 08                                                                                                                                                                                                 | %            | 2 - 8                    |
| BASOPHILS                   | 00                                                                                                                                                                                                 | %            | 0 - 1                    |
| <b>PLATELETS.</b>           |                                                                                                                                                                                                    |              |                          |
| PLATELETS                   | 1.04                                                                                                                                                                                               | lacs/cumm    | 1.5 - 4.5                |
| <b>PERIPHERAL SMEAR</b>     |                                                                                                                                                                                                    |              |                          |
| RBC                         | Normocytic Normochromic, microcytes (+).<br>Neutrophilic leucocytosis with mild shift to left & mild toxic granulation with monocytosis.<br>Platelets are decreased on smear, giant platelets (+). |              |                          |
| WBC                         |                                                                                                                                                                                                    |              |                          |
| PLATELET                    |                                                                                                                                                                                                    |              |                          |

Remarks :- Sample : Venous EDTA Blood.  
Method: Automated Cell Counter - XN1000/XN330 by SLS/Electrical impedance(dc detection)/Fluorescent flow cytometry.

mona  
TECHNICIAN

Dr. A.R. INCHEKAR  
MD MICRO

Dr. C. GHANEKAR  
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\*\*\*\*\* END OF REPORT \*\*\*\*\*

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**POONA HOSPITAL AND RESEARCH CENTRE**  
27, Sadashiv Path, Pune 411 030 ☎ 020 8609 6000

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PH00308020 / 2414704  
REPORT NO. PG-0156623  
LAB NO. LN-80517  
COLLECTION DATE & TIME : 04/03/2025 9:24 PM  
REPORT DATE & TIME : 05/03/2025 7:31 AM  
ID PROOF : Verified  
NAME : **Ms. SRUSHTI SHITALKUMAR PALANGE**  
CATEGORY : ICU Ward\ Bed : H WARD (ACU) \ H-10  
AGE/SEX : 15(Y)/Female  
REFERRED BY : Dr. VIJAY M RAMANAN

**CREATININE**

| Test                                               | Findings | Unit  | Biological Ref. Interval |
|----------------------------------------------------|----------|-------|--------------------------|
| <b>CREATININE</b>                                  | 3.52     | mg/dl | 0.55 - 1.02              |
| CREATININE, Serum<br>(by Modified Jaffe's Kinetic) |          |       |                          |

**ELECTROLYTES Na,K & Cl REPORT**

| Test                                  | Findings | Unit  | Biological Ref. Interval |
|---------------------------------------|----------|-------|--------------------------|
| <b>ELECTROLYTES Na,K &amp; Cl</b>     | 140      | mEq/L | 136 - 145                |
| IODINE, Serum<br>(By ISE Indirect)    | 4.3      | mEq/L | 3.5 - 5.1                |
| POTASSIUM, Serum<br>(By ISE Indirect) | 100      | mEq/L | 98 - 107                 |
| CHLORIDE, Serum<br>(By ISE Indirect)  |          |       |                          |

*Praty*  
TECHNICIAN

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*Dr. D. Patel*  
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\*\*\*\*\* END OF REPORT \*\*\*\*\*

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H-2018-0553

Certificate No.



Rajasthani & Gujarati Charitable Foundation's  
**POONA HOSPITAL AND RESEARCH CENTRE**  
27, SADASHIV PETH, PUNE 411 030 ☎ : 6609 6000

**DEPARTMENT OF CARDIOLOGY**

C  
A  
R  
D  
I  
O  
L  
O  
G  
Y

Ms. PALANGE SRUSHTI  
F  
15 Y  
Hptal ID: ACU-2414704

Ref By: Dr. RAMANAN VIJAY  
Date: 04-Mar-2023  
Study: PORTABLE 2D ECHO

2D-ECHO PORTABLE

chycardia noted during study.

Normal cardiac chambers,,,  
Well preserved LV systolic function . (LVEF 60%)  
Normal cardiac valves  
No mitral regurgitation  
No tricuspid regurgitation  
No pulmonary hypertension. RVSP- 20 mmHg  
Normal IVC-10 mm, collapsible  
The IAS & IVS are intact  
There is no clot / vegetation / pericardial effusion.

DR. MADHUSUDAN ASAWA  
DNB (MED), DNB (CARD), FESC  
INTERVENTIONAL CARDIOLOGIST  
HEAD, DEPT. OF CARDIOLOGY



ISO 9001:2015 Certified Hospital



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**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PHN : PH00308020 / 2414704  
NAME : **Ms. SRUSHTI SHITALKUMAR PALANGE**  
CATEGORY : ICU Ward\ Bed : MEDICAL ICU \ MI-53  
AGE/SEX : 15(Y)/Female  
REFERRED BY : Dr. VIJAY M RAMANAN  
REPORT NO. : PG-0156179  
LAB NO. : LN-80261  
COLLECTION DATE & TIME : 03/03/2025 8:57  
REPORT DATE & TIME : 04/03/2025 3:23 A  
ID PROOF : Verified

**BLOOD GAS ANALYSIS REPORT**

| Lab Test                | Findings    | Unit   | Biological Ref. Interval |
|-------------------------|-------------|--------|--------------------------|
| <b>ABG WITH LACTATE</b> | <b>7.07</b> |        | 7.35 - 7.45              |
| PH                      | <b>34</b>   | mm Hg  | 35 - 45                  |
| PCO2                    | <b>27</b>   | mm Hg  | 80 - 100                 |
| PO2                     | <b>9.9</b>  | mmol/L | 20 - 26                  |
| HCO3                    | -19.2       | mmol/L |                          |
| BB                      | -20.2       | mmol/L |                          |
| BE ed                   | <b>26</b>   | %      | 95 - 100                 |
| O2 sat                  | >135        | mg/dl  | 5 - 13                   |
| LACTATE                 |             |        |                          |

Remarks : Method: Radiometer ABL80-ISE/ IL-GEM 3500-ISE

*Sakshi*  
TECHNICIAN

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\*\*\*\*\* END OF REPORT \*\*\*\*\*

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H-2018-0553

A/P, Indapur  
Address Dist - Pune Sex female

Date : Adm. : 9/9/10 Disch. : 11/9/10

Ref. by

DIAGNOSIS

Factor I deficiency

Weight : On adm. 7.6 kg At discharge 7.6 kg.

Height

Nutritional Status

fair

#### CLINICAL DETAILS

6 month old fch, 1st child of  
Hindu to Indapur b/hy parents

excessive bleeding from - 2 days  
injection site back

For the above complaints, pt has been  
worked up and found to have prolonged  
bleeding time

Past Hx : excessive bleeding from  
umbilical cord site for  
10-12 days - from 5 day of life

excessive bleeding from IV site

O/c - VS

PPWT =

CVS - S1 S2

No murmur

RS : AFB  
Clear

PIA soft

CNS : NAD



# YASHODA HEMATOLOGY CLINIC

**Dr. VIJAY RAMANAN M.**

M.D., D.M. (Clinical Hematology / Hemato-oncology, CMC Vellore)  
Bone Marrow Transplant Physician

Chairman : Bone Marrow Transplant, Ruby Hall Clinic  
Director : Red Cross Thalassemia Centre, Pune

Member : American Society Of Hematology  
Member : ISHTR  
Patron: EBMT

Hon. Consultant : Ruby Hall Clinic  
Panel Consultant : KEM, Poona Hospital, Joshi Hospital  
Assistant Professor : Hematology, Sassoon Hospital and  
B.J. Medical College

PRN: YH0015921

Name: Shrushti Palsode

Age: 14 Yrs

Gender: Female

Dated: Nov 21, 2024

Phone: 6010397313

Weight: 60 kg

**Diagnosis:** Factor I Deficiency, ?Thalassemia Minor  
Bleeding reduced from 12 pads to 2 pads per day after stopping rbc

**Complains:** Gyn dysmenorrhea

**On General Examination:** No hepatosplenomegaly

**Investigations:** No recent reports.  
29/04/2024 Hb 10.9 MCV 71 TLC 6600 N 68 L 25 PLT 230000  
B/T 0.5 SGPT 30 SGOT 20 ALP 64 AL 4.8 GL 3.5 TP 8.3  
Creatinine 0.8 Ferritin 21

## Prescription:

| Medicine                                         | Dosage | Timing, Freq. & Duration                  |
|--------------------------------------------------|--------|-------------------------------------------|
| T Xictra 250mg                                   | 1-1-1  | After Food 5 days per month during menses |
| T Ivermectin 12 mg                               | 1-0-0  | After Food 1 stat and 1 after 10 days     |
| Fibrinogen 1 concentrate 1 vial in 100 NS<br>SOS |        |                                           |
| C Danazol 200 mg                                 | 1-0-1  | After Food 5 days per month               |
| T Livogen                                        | 1-0-0  | After Food Mon, Wed, Fri                  |
| T Homo 16 D                                      | 0-0-1  | After Food Daily                          |

## Advice:

Prescription for 6 Months  
DO NOT DISPENSE MEDICATION ON EXPIRED PRESCRIPTION. These may be Schedule H drugs.  
The Pharmacist is responsible for all consequences of medicines dispensed on expired prescription.  
PLEASE FOLLOW UP REGULARLY. Please DO NOT DISPENSE MEDICINES on EXPIRED PRESCRIPTION.

## Tests to be done:

- CBC/Hemogram
- Creatinine
- LFTs
- Sr. Ferritin
- Fibrinogen

Please follow up on **Jun 9, 2025**. The prescription is not valid after this date.

Dr. Vijay Ramanan  
M.D., D.M., CLIN HEMAT  
Regn. No. 81590

109, Mangalwade Complex,  
Hirabai Chowk, Tilak Road,  
Pune 411002

For Appointment: ✓  
020 41315541 / 7507753737  
email: info@hematologyclinic.com

OPD: days  
Monday To Thursday

Website:  
www.vijayramanan.com

Download - Appment patient  
App from playstore

## MANAGEMENT

Pt was admitted for evaluation  
oncerning bleeding from pri  
site, was found to have  
↓ fibrinogen, we gave

cryoprecipitate,

- n Paise 100 mg. 6 wks.

- Child is now stable accept  
feels well, hence  
discharged.

Blood Products \_\_\_\_\_

Condition at Discharge \_\_\_\_\_

VS

PRWF

RS

cr / NAD

DIA soft

CL and

## INVESTIGATIONS

Hb \_\_\_\_\_ CBC : TLC \_\_\_\_\_ P \_\_\_\_\_ L \_\_\_\_\_ E \_\_\_\_\_ M \_\_\_\_\_

Blood Group

PBS \_\_\_\_\_ Platelets \_\_\_\_\_

Urine \_\_\_\_\_

Biochemistry \_\_\_\_\_

HMC<sub>1</sub> : 10.6 | 25000 | 7.63

Clotting > 60 min

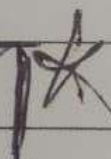
PT > 5

PTTIC > 5 min

Thrombin > 3

VWF > 117.2 %

Plasma. fibrinogen : < 30 mg %



Imaging \_\_\_\_\_

Other Investigations \_\_\_\_\_

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PH00308020 / 2414704  
**Ms. SRUSHTI SHITALKUMAR PALANGE**  
 CATEGORY : ICU Ward\ Bed : H WARD (ACU) \ H-10  
 /SEX : 15(Y)/Female  
 REFERRED BY : Dr. VIJAY M RAMANAN

REPORT NO. : PG-0156343  
 LAB NO. : LN-80314  
 COLLECTION DATE & TIME : 04/03/2025 7:26 AM  
 REPORT DATE & TIME : 04/03/2025 11:51 AM  
 ID PROOF : Verified

**PROCALCITONIN REPORT**

| Test          | Findings | Unit  | Biological Ref. Interval                                                                                                                                  |
|---------------|----------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| PROCALCITONIN | 6.26     | ng/ml | < 0.5 Local bacterial infection possible. Sepsis not likely<br>≥ 0.5 - < 2 Sepsis possible<br>≥ 2 - < 10 Sepsis likely<br>≥ 10 Severe Sepsis/Septic shock |

Remarks :- TEST METHOD(s): Serum, PCT, CMIA-Architect/ELFA-Vidas

INTERPRETATION: Increased Procalcitonin levels may not always be related to systemic infection.  
 Infectious causes are :- First day after major trauma/ surgery, treatment with anti-TNF antibodies, small cell carcinoma, medullary c-cell carcinoma thyroid, in neonates < 48 hrs life and in patients with severe cardiogenic shock.

*Sujal*  
 TECHNICIAN

Dr. A. R. INCHEKAR  
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Dr. S. SINGH  
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 Dr. V. PHATKE  
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\*\*\*\*\* END OF REPORT \*\*\*\*\*

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H-2018-0551

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

|             |                                          |                        |                       |
|-------------|------------------------------------------|------------------------|-----------------------|
| IN          | : PH00308020 / 2414704                   | REPORT NO.             | : PG-0156393          |
| NAME        | : <b>Ms. SRUSHTI SHITALKUMAR PALANGE</b> | LAB NO.                | : LN-80388            |
| CATEGORY    | : ICU Ward \ Bed : H WARD (ACU) \ H-10   | COLLECTION DATE & TIME | : 04/03/2025 9:59 AM  |
| AGE/SEX     | : 15(Y)/Female                           | REPORT DATE & TIME     | : 04/03/2025 12:04 PM |
| REFERRED BY | : Dr. VIJAY M RAMANAN                    | ID PROOF               | : Verified            |

**PTTK REPORT**

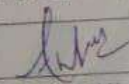
| Lab Test                                 | Findings | Unit | Biological Ref. Interval |
|------------------------------------------|----------|------|--------------------------|
| <b>PTTK</b>                              |          |      |                          |
| <b>ARTIAL THROMBOPLASTIN TIME (PTTK)</b> |          |      |                          |
| PTTK, CITRATED PLASMA-PATIENT            | 37.1     | secs | 21.59 - 40.44            |
| PTTK-CONTROL VALUE                       | 29.5     | secs |                          |

**PT(Prothrombin Time) REPORT**

| Lab Test                                        | Findings | Unit | Biological Ref. Interval |
|-------------------------------------------------|----------|------|--------------------------|
| <b>PT(PROTHROMBIN TIME)</b>                     |          |      |                          |
| <b>PROTHROMBIN TIME(PT)</b>                     |          |      |                          |
| PROTHROMBIN TIME, CITRATED PLASMA-PATIENT VALUE | 36.2     | secs | 11.7 - 15.3              |
| MEAN NORMAL PROTHROMBIN TIME(MNPT)              | 14.5     | secs |                          |
| INR VALUE                                       | 2.66     |      | 0.83 - 1.11              |

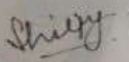
Remarks :- Sample: Venous Citrate Blood, Viscosity Based Mechanical Automated Coagulation Analyzer-STA Stago Satellite Max  
Suggested Therapeutic Range Of INR For Patients on Anticoagulants Is 2 - 3.5

Interpretation:  
The prothrombin time (PT) and international normalized ratio (INR) are measures of the extrinsic pathway of coagulation. The INR is used only for patients on stable oral anticoagulant therapy. It makes no significant contribution to the diagnosis or treatment of patients whose PT is prolonged for other reasons.  
Increased PT may be due to : Factor deficiencies (X, II, V, I) Coumarin (Warfarin) therapy, liver disease (Bile duct obstruction, Cirrhosis, Hepatitis) Hemorrhagic Disease of the newborn, DIC, malabsorption, Fibrinolysis, Vitamin K deficiency.  
Interference in PT/INR: Alcohol, antibiotics, aspirin, cimetidine, thrombin inhibitors (Increase PT) Barbiturates, oral contraceptives, hormone-replacement therapy (HRT), and vitamin K (decrease PT).

  
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\*\*\*\*\* END OF REPORT \*\*\*\*\*

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**POONA HOSPITAL AND RESEARCH CENTRE**

27, Sadashiv Peth, Pune 411 030 ☎ 020 6609 8000

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

PH00308020 / 2414704  
**Ms. SRUSHTI SHITALKUMAR PALANGE**  
 CATEGORY : ICU Ward\ Bed : H WARD (ACU) \ H-10  
 /SEX : 15(Y)/Female  
 REPORTED BY : Dr. VIJAY M RAMANAN  
 REPORT NO. : PG-0156288  
 LAB NO. : LN-80314  
 COLLECTION DATE & TIME : 04/03/2025 7:26 AM  
 REPORT DATE & TIME : 04/03/2025 9:34 AM  
 ID PROOF : Verified

**URINE ROUTINE REPORT**

| Test                           | Findings       | Unit | Biological Ref. Interval |
|--------------------------------|----------------|------|--------------------------|
| <b>URINE ROUTINE</b>           |                |      |                          |
| <b>PHYSICAL EXAMINATION</b>    |                |      |                          |
| COLOR                          | REDDISH        |      | PALE YELLOW              |
| APPEARANCE                     | HAZY           |      | CLEAR                    |
| SPECIFIC GRAVITY               | 1.020          |      | 1 - 1.03                 |
| REACTION(PH)                   | 6.0            |      | 4.6 - 8                  |
| <b>CHEMICAL EXAMINATION</b>    |                |      |                          |
| PROTEIN                        | PRESENT (++)   |      | ABSENT                   |
| Tetra-bromphenol Blue(SSA)     | ABSENT         |      | ABSENT                   |
| GLUCOSE                        |                |      | ABSENT                   |
| (GOD/POD)                      | TRACE          |      | ABSENT                   |
| KETONE BODIES                  |                |      | ABSENT                   |
| (Rothera's)                    | ABSENT         |      | ABSENT                   |
| BILE PIGMENT                   |                |      | NORMAL                   |
| (Diazo/Fouchet)                | NORMAL         |      | ABSENT                   |
| BILIRUBINOGEN                  |                |      | ABSENT                   |
| (Ehrlich)                      | PRESENT (++++) |      | ABSENT                   |
| BLOOD                          |                |      | ABSENT                   |
| (Benzidine)                    | ABSENT         |      | ABSENT                   |
| NITRITE                        |                |      | ABSENT                   |
| (Nitrate-Nitrite conversion)   | ABSENT         |      | ABSENT                   |
| <b>MICROSCOPIC EXAMINATION</b> |                |      |                          |
| LEUCOCYTES                     |                |      | 0 - 5                    |
| (Leucocyte esterase)           | 2-4            | /hpf | 0 - 2                    |
| WBC CELLS                      | ABUNDANT       | /hpf | 0 - 5                    |
| R.B.C.s                        | 2-4            | /hpf | ABSENT                   |
| EPITHELIAL CELLS               | ABSENT         |      | ABSENT                   |
| CRYSTALS                       | ABSENT         |      | ABSENT                   |
| CASTS                          | ABSENT         |      | ABSENT                   |
| OTHERS                         | ABSENT         |      | ABSENT                   |
| BACTERIA                       |                |      |                          |

Remarks :-Method: Multistix Reagent Strip for Urine analysis (CLINITEK Advantus) Analyzer

Kaulita  
 TECHNICIAN

Dr. A.R. INCHEKAR  
 MD MICRO

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Shirgy  
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 MD PATH

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H-2018-0553

Certificate No

ISO 9001:2015 Certified Hospital

**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

|             |                                          |                        |                      |
|-------------|------------------------------------------|------------------------|----------------------|
| PHN         | : PH00308020 / 2414704                   | REPORT NO.             | : PG-0156654         |
| NAME        | : <b>Ms. SRUSHTI SHITALKUMAR PALANGE</b> | LAB NO.                | : LN-80517           |
| CATEGORY    | : ICU Ward\ Bed : H WARD (ACU) \ H-10    | COLLECTION DATE & TIME | : 04/03/2025 9:24 PM |
| AGE/SEX     | : 15(Y)/Female                           | REPORT DATE & TIME     | : 05/03/2025 8:06 AM |
| REFERRED BY | : Dr. VIJAY M RAMANAN                    | ID PROOF               | : Verified           |

**PTTK REPORT**

| Lab Test                                  | Findings | Unit | Biological Ref. Interval |
|-------------------------------------------|----------|------|--------------------------|
| <b>PTTK</b>                               |          |      |                          |
| <b>PARTIAL THROMBOPLASTIN TIME (PTTK)</b> |          |      |                          |
| PTTK, CITRATED PLASMA- PATIENT VALUE      | 34.9     | secs | 21.59 - 40.44            |
| PTTK-CONTROL VALUE                        | 29.5     | secs |                          |

**PT(Prothrombin Time) REPORT**

| Lab Test                                         | Findings | Unit | Biological Ref. Interval |
|--------------------------------------------------|----------|------|--------------------------|
| <b>PT(PROTHROMBIN TIME)</b>                      |          |      |                          |
| <b>PROTHROMBIN TIME(PT)</b>                      |          |      |                          |
| PROTHROMBIN TIME, CITRATED PLASMA- PATIENT VALUE | 39.9     | secs | 11.7 - 15.3              |
| MEAN NORMAL PROTHROMBIN TIME(MNPT)               | 14.5     | secs |                          |
| INR VALUE                                        | 2.96     |      | 0.83 - 1.11              |

Remarks :- Sample: Venous Citrate Blood, Viscosity Based Mechanical Automated Coagulation Analyzer- STA Stago Satellite Max  
Suggested Therapeutic Range Of INR For Patients on Anticoagulants Is 2 - 3.5

**Interpretation:**

The prothrombin time (PT) and international normalized ratio (INR) are measures of the extrinsic pathway of coagulation. The INR is used only for patients on stable oral anticoagulant therapy. It makes no significant contribution to the diagnosis or treatment of patients whose PT is prolonged for other reasons.

Increased PT may be due to : Factor deficiencies (X, II, V, I) Coumarin (Warfarin) therapy, liver disease (Bile duct obstruction, Cirrhosis, Hepatitis) Hemorrhagic Disease of the newborn, DIC, malabsorption, Fibrinolysis, Vitamin K deficiency.

Interference in PT/INR: Alcohol, antibiotics, aspirin, cimetidine, thrombin inhibitors (Increase PT) Barbiturates, oral contraceptives, hormone-replacement therapy (HRT), and vitamin K (decrease PT).

*Mandali*  
TECHNICIAN

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MD MICRO

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**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

|             |                                          |                        |                      |
|-------------|------------------------------------------|------------------------|----------------------|
| PHN         | : PH00308020 / 2414704                   | REPORT NO.             | : PG-0156716         |
| NAME        | : <b>Ms. SRUSHTI SHITALKUMAR PALANGE</b> | LAB NO.                | : LN-80564           |
| CATEGORY    | : ICU Ward\ Bed :H WARD (ACU) \ H-10     | COLLECTION DATE & TIME | : 05/03/2025 5:49 AM |
| AGE/SEX     | : 15(Y)/Female                           | REPORT DATE & TIME     | : 05/03/2025 8:52 AM |
| REFERRED BY | : Dr. VIJAY M RAMANAN                    | ID PROOF               | : Verified           |

**PT(Prothrombin Time) REPORT**

| Lab Test                                       | Findings    | Unit | Biological Ref. Interval |
|------------------------------------------------|-------------|------|--------------------------|
| <b>PT(PROTHROMBIN TIME)</b>                    |             |      |                          |
| <b>PROTHROMBIN TIME(PT)</b>                    |             |      |                          |
| PROTHROMBIN TIME,CITRATED PLASMA-PATIENT VALUE | <b>40.9</b> | secs | 11.7 - 15.3              |
| MEAN NORMAL PROTHROMBIN TIME(MNPT)             | 14.5        | secs |                          |
| INR VALUE                                      | <b>3.04</b> |      | 0.83 - 1.11              |

Remarks : -Sample: Venous Citrate Blood, Viscosity Based Mechanical Automated Coagulation Analyzer-STA Stago Satellite Max  
Suggested Therapeutic Range Of INR For Patients on Anticoagulants Is 2 - 3.5  
Interpretation:

The prothrombin time (PT) and international normalized ratio (INR) are measures of the extrinsic pathway of coagulation. The INR is used only for patients on stable oral anticoagulant therapy. It makes no significant contribution to the diagnosis or treatment of patients whose PT is prolonged for other reasons.  
Increased PT may be due to : Factor deficiencies(X,II,V,I) Coumarin (Warfarin) therapy, liver disease (Bile duct obstruction, Cirrhosis, Hepatitis) Hemorrhagic Disease of the newborn, DIC, malabsorption, Fibrinolysis, Vitamin K deficiency.  
Interference in PT/INR: Alcohol, antibiotics, aspirin, cimetidine, thrombin Inhibitors (Increase PT) Barbiturates, oral contraceptives, hormone-replacement therapy (HRT), and vitamin K (decrease PT).

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TECHNICIAN

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**DEPARTMENT OF PATHOLOGY AND MICROBIOLOGY**

|             |                                          |                        |                      |
|-------------|------------------------------------------|------------------------|----------------------|
| HN          | : PH00308020 / 2414704                   | REPORT NO.             | : PG-0156634         |
| NAME        | : <b>Ms. SRUSHTI SHITALKUMAR PALANGE</b> | LAB NO.                | : LN-80517           |
| CATEGORY    | : ICU Ward\ Bed : H WARD (ACU) \ H-10    | COLLECTION DATE & TIME | : 04/03/2025 9:24 PM |
| AGE/SEX     | : 15(Y)/Female                           | REPORT DATE & TIME     | : 05/03/2025 2:15 AM |
| REFERRED BY | : Dr. VIJAY M RAMANAN                    | ID PROOF               | : Verified           |

**BLOOD GAS ANALYSIS REPORT**

| Lab Test               | Findings | Unit   | Biological Ref. Interval |
|------------------------|----------|--------|--------------------------|
| <b>BG WITH LACTATE</b> |          |        |                          |
| pH                     | 7.39     |        | 7.31 - 7.41              |
| pCO <sub>2</sub>       | 51       | mm Hg  | 41 - 51                  |
| pO <sub>2</sub>        | 24       | mm Hg  | 30 - 40                  |
| tCO <sub>3</sub>       | 30.9     | mmol/L | 23 - 29                  |
| BE                     | 4.9      | mmol/L |                          |
| BE ECF                 | 5.9      | mmol/L |                          |
| O <sub>2</sub> SAT.    | 42       | %      | 70 - 80                  |
| LACTATE                | 15       | mg/dl  | 5 - 13                   |

Remarks :- Method: Radiometer ABL80-ISE/ IL-GEM 3500-ISE

*Sakshi*  
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# INDAPUR CRITICARE CENTRE PATHOLOGY LABORATORY

indapurcriticarecentre@gmail.com

Dr. L. S. Kadam | Dr. Sagar Doshi | Dr. Sameer Magar | Dr. Rushikesh Garde | Dr. Kalpana Khade | Dr. Komal Garde | Dr. Raghunath  
M.D. Pediatrician | Consulting Physician | M.B.B.S (D.Ortho) | M.D. Medicine | M.B.B.S (D.G.O) | M.D. Path | B.A.M.S

Patients Name : Miss Shruti Palange

Date : 03/03/2025

Ref. By Dr : ICC

Sex : F

## BLOOD EXAMINATION

|  | Result | Units | N . Value. |
|--|--------|-------|------------|
|--|--------|-------|------------|

### ERYTHROCYTES.

|            |        |         |            |
|------------|--------|---------|------------|
| Hemoglobin | : 6.7  | gms%    | 12.0 to 16 |
| R.C. Count | : 2.59 | mi/cmm. | 3.5 to 6   |

### LEUCOCYTES

|                  |          |       |                |
|------------------|----------|-------|----------------|
| Total Leucocytes | : 13,800 | /cumm | 5000 to 10,000 |
|------------------|----------|-------|----------------|

### Differential Count .

|              |      |   |          |
|--------------|------|---|----------|
| Erythrophil  | : 60 | % | 40 to 70 |
| Lymphocytes. | : 33 | % | 20 to 40 |
| Monophil     | : 05 | % | 01 to 06 |
| Eosinocytes  | : 02 | % | 01 to 08 |
| Neutrophils. | : 00 | % | 00 to 01 |

### Peripheral Smear Finding.

|                 |                |
|-----------------|----------------|
| R.C. Morphology | : Leukocytosis |
| R.C. Morphology | : Hypochromic  |
| Parasite        | : Not Seen     |

|                |        |       |            |
|----------------|--------|-------|------------|
| Platelet Count | : 1.04 | Lakhs | 1.5 to 4.5 |
| Hb             | : 40.1 | %     | 34 - 48    |
| Hct            | : 82.8 | fl    | 80 - 100   |
| Hb             | : 33.4 | pg    | 27 - 32    |
| HbC            | : 34.1 | g/dl  | 32 - 36    |
| HbW            | : 12.5 | %     | 11.5- 14.5 |
| HbT            | : 0.10 | %     | 0.16 -0.33 |
| HbV            | : 8.3  | fl    | 6 - 10     |
| HbW            | : 8.1  | %     | 10 -15     |

Note :- These readings are only based on technical analysis & no opinion is indicated

  
Lab Technician.

S.S.No - A44, Behind S.B.I.Bank, National Highway, Indapur Dist-Pune 413106