

LAXMI

	BEFORE	AFTER GRAD
Hospital Name	Maharana Bhopati Hospital, Udaipur and then shifted to RR Army hospital, Delhi.	HIIMS Dera Dassi
Medical Condition	Dialysis Dependent CKD Patient	Dialysis Free
Medications Taken	Autrin, Sodium bi carbonate 500, Shelcal, Sevelamer 800mg, Dytor, pantoprazole	100% GRAD Therapy, DIP Diet-60%, Sevelamer
Physical Discomforts/ symptoms	Swelling in legs & in body, indigestion, vomiting, anxiety, itching	Nil
Frequency of Dialysis	3 per week till 1 may 2022	Dialysis Free for past 1 year 5 months
Investigation	KFT Creatinine-21.3, BP normal - 10.4, urea 268	KFT Creatinine -4.6

012204300046 / 10133382

Self
30/Apr/2022 11:47AM

WARDNO : 7786350
ARMY ID : W/O K L GURJAR
RELATION : NK
RANK : NK
REPORT DATE : 30/Apr/2022 12:11PM

Test Name	Result	Status	Ref. Range	Unit
Urea, Blood Endpoint/Colorimetric - Urease	89.00	H	19.0-44.0	mg/dL
Creatinine Twopoint Rate-Creatinine Aminohydroflase	10.70	H	0.66-1.25	mg/dL
Bilirubin, Total Colorimetric- Dual Wavelength - Reflectance Spectrophotometry	0.80	N	0.20-1.30	mg/dL
Bilirubin, Direct Dual Wavelength - Reflectance Spectrophotometry	0.70	N	0.0-0.6	mg/dl
Bilirubin, Indirect	0.10	N	0.0-1.1 mg/dl	mg/dl
SGOT (AST) Multipoint Rate With P-5-P	22.00	N	17.0-59.0	U/L
SGPT (ALT), Serum Multipoint-Rate/UV with P-5-P (pyridoxa-5-phosphate)	14.00	L	21.0-72.0	U/L
Protein, Total Biuret	8.10	N	6.0-8.4	g/dL
Albumin, Serum Bromo Cresol Green (BCG)	4.40	N	3.5-5.0	g/dL
Globulin	3.70	N	2.3-3.70	g/dL
A/G Ratio	1.19	N		
Sodium, Serum Direct ISE-Potentiometric	145.0	N	137.0-145.0	mEq/L
Potassium, Serum Direct ISE-Potentiometric	4.00	N	3.50-5.10	mEq/L

Kindly Correlate Clinically. Repeat, if required.

✓
Case, plan
Pgs
LHM,
Urine Exam
Sp

Case POU
LHM

ASD

G SHINWAR
MAJ
RESIDENT MEDICINE
ARMY HOSPITAL (R&R)

ICATION RESULT(S)

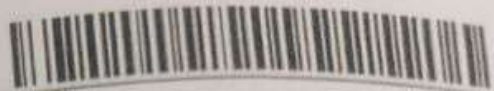
BASE HOSPITAL DELHI CANTT
BIOCHEMISTRY, TRAUMA CENTRE



Mr. W/O K L GURJAR	WARDNO	:
:24 Y/Male	ARMY ID	:7786350
QUEST ID :012204300086 / 10133422	RELATION	:W/O K L GURJAR
:Self	RANK	:NK
SIMEN DATE :30/Apr/2022 04:20PM	REPORT DATE	:30/Apr/2022 04:43PM

Test Name	Result	Status	Ref. Range	Unit
Alkaline Phosphatase (ALP), Serum Multipoint-Rate-p-nitrophenyl Phosphate,AMP buffer	84.0	N	38-126	U/L
Calcium Colorimetric - Aresenazo	9.40	N	8.4-10.2	mg/dl
Phosphorous Colorimetric - Phosphomolybdate Formation	7.20	H	2.5-4.5	mg/dl
LDH Serum Multipoint Rate-Pyruvate to Lactate	508.00	H	120-246	U/L

Kindly Correlate Clinically. Repeat, if required.



No : 012204260040
Reg No : 11038014
Name : Miss. LAXMI
Age : 24 YRS
Sex : FEMALE
Reg Date : 26/Apr/2022 08:16AM
Report Date : 26/Apr/2022 04:38PM
Print Date : 26/Apr/2022 04:38PM
Barcode No : 01260040
Referred By : Self

Test Name	Result	Unit	Biological Ref. Interval
<u>Blood Glucose Fasting</u>	84.20	mg/dL	70.00 - 110.00
RFT (Renal Function Test-UREA, CREATININE, URIC ACID)			
Urea	256.90 ✓	mg/dL	15-40
S. Creatinine	21.32 ✓	mg/dL	0.6-1.8
Uric Acid	15.20 ✓	mg/dL	3-7
<u>Sodium</u>	139.00	mEq/L	135.00 - 145.00
<u>Potassium</u>	5.20	mEq/L	3.5-5.5
<u>Chloride</u>	103.00	mEq/L	95.00 - 105.00
<u>Calcium</u>	8.02	mg/dL	8.50 - 11.00
<u>Phosphorous</u>	3.2	mg/dL	2.5-4.5

Test Name	Result	Unit	Biological Ref. Interval
LFT (BILIRUBIN-T, D, I, SGOT, SGPT, ALKALINE PHOSPHATE, TOTAL PROTEIN, ALBUMIN, GLOBULIN, A/G RATIO)			
Bilirubin (Total)	0.34	mg/dl	0.6 - 1.6
Bilirubin (Direct)	0.08	mg/dl	0.1-0.4
Bilirubin (Indirect)	0.25	U/L	5-46
SGOT (AST)	51.50	U/L	5-49
SGPT (ALT)	24.40	U/L	Men: 80-306 Women: 65-306 Children: Up to 645
Alkaline Phosphatase	108.00	U/L	6.4 - 8.2
Total Protein	7.0	gm/dl	3.50 - 5.50
Albumin	3.91	gm/dl	2.00-3.50
Globulin	3.1	gm/dl	
A/G Ratio	1.27		

Lipid Profile
Total Cholesterol : 225.30 ✓
mg/dL
Optimal <200
Borderline high 200-239
High ≥240

Dr. S. K. Mehra

Dr. S.S. Surana
Pathologist
MD (Pathology)

Dr. C. R. Vyas
Biochemistry
M.Sc, PhD Biochemistry

**BASE HOSPITAL DELHI CANTT-10
DEPARTMENT OF NEPHROLOGY
DISCHARGE SUMMARY**

1 NAME : LAXMI W/O KL GURJAR	2.RANK- NK	3. DOA: 30 Apr 22
4.ServiceNo- 7786350F	Age: 25 years	5.UNIT- 9 SECTOR RR
		6. DOD: 10 May 22

7.DIAGNOSIS	1. ACUTE CORTICAL NECROSIS
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HISTORY COURSE IN HOSPITAL / This 25 years old wife of serving soldier, P1L1A2, had miscarriage on 09 Apr 22 at 5 month POG for which she was managed by civil practitioner. On 15 Apr 22, she developed swelling of face and feet for which she consulted civil practitioner on 23 Apr 22. On evaluation, she had severe anemia (Hb 4.9g/dl). She was managed with 2 units PRBC transfusion. Patient developed nausea vomiting for which she was evaluated at AIIMS Jodhpur. On investigation, Hb 6.8 g/dl, TLC 9800/cumm. Platelets 337000/cumm, blood urea/ Serum creatinine 259.21,3 mg/dl, Na/K 139/5.2 meq/l, Ca/P 8.0/3.2 mg/dl, HBsAg/antiHCV- negative, Urine RE, ME- pus cells 8-10/hpf, protein 1+, , USG abdomen (26 Apr 22) – bilateral normal size kidneys, no RPOC, ANA/anti dsDNA/ANCA(c&p)- negative. She was managed with 2 sessions of hemodialysis(27 Apr 22 & 28 Apr 22)with access being rt DLJC. Patient was referred to this centre for further management. She had urine output of 300-500 ml/d at the time of admission. On examination at BHDC: vitals were stable, pallor was present and systemic examination was unremarkable. On investigation, she had anemia, advanced azotemia, hyperphosphatemia and normal size kidneys on ultrasound of abdomen. She was managed with multiple sessions of hemodialysis, broad spectrum antibiotics, hematinics and other conservative measures. She underwent kidney biopsy on 04 May 22. Kidney biopsy was reported to have diffuse cortical necrosis. Her urine output has improved(Urine output 1800 ml/d) and hemodialysis was withheld. She is stable at present. Fit for discharge.

	Admission	Discharge	ADVICE :
Hb(g/dl)	10.4	10.1	1. DTH
TLC(/cumm)	10500	8400	2. Salt restricted diet
Plt(/cumm)	324000	219000	3. Avoid NSAIDs, Nephrotoxic drugs
BI Urea/ SCr(mg/dl)	89/10.7	75/6.9	4. Intake= Urine output
Na/K (meq/l)	145/4.0	130/3.6	5. HD 2/week
T Bil/AST/ALT	0.7/22/14		6. Cap Atrin BD
Total Protein/Albumin(g/dl)	8.1/4.4		7. Tab Sodium bicarbonate 500 mg BD
Blood sugar F/PP(mg/dl)	96/109		8. Tab Shelcal 500 mg BD
Ca/P(mg/dl)	9.4/7.2		9. Tab Sevelamer 800 mg TDS with meals
Urine RE, ME	Pro 2+, blood 3+		10. Tab Dytor 20 mg OD
Sp0t urine protein creatinine ratio	10.9		11. Tab B/C OD
COVID 19 by RTPCR: Negative PBS- normocytic, normochromic, no evidence of hemolysis ECG- NAD HBsAg/AntiHCV/HIV- Negative Chest XrayPA view: NAD USG abdomen: Bilateral normal size kidneys, bilateral raised echotexture with normal CMD, no evidence of RPOC Kidney Biops(Lal Path lab dt 04 May 22):			12. Tab Pantoprazole 40 mg OD 13. Review on Friday in Nephrology OPD with CBC, KFT report



Note:

LIVER FUNCTION TEST

TEST	RESULT	REFERENCE RANGE
SERUM BILIRUBIN (TOTAL)	0.21 mg/dl	(0.2-1.0) mg/dl
SERUM BILIRUBIN (DIRECT)	0.13 mg/dl	(<0.3) mg/dl
INDIRECT BILIRUBIN	0.08 mg/dl	<0.7 mg/dl
SGOT (AST)	14.68 IU/L	(5-38) IU/L
SGPT (ALT)	16.16 IU/L	(5-40) IU/L
SERUM ALKALINE PHOSPHATASE	97.92 IU/L	(30-306) IU/L
SERUM PROTEINS	7.68 gm/dl	(6.4-7.8) gm/dl
SERUM ALBUMIN	3.99 gm/dl	(3.7-5.3) gm/dl
SERUM GLOBULIN	3.69 gm/dl	(2.3-3.6) gm/dl
A/G RATIO	1.08	(1.0-2.3)

Note:

LIPID PROFILE

TEST	RESULT	REFERENCE RANGE
Total Cholesterol	166.94 mg/dl	(150-250) mg/dl
Triglycerides	73.32 mg/dl	(M:- 60-165) , (F:- 40-140) mg/dl
HDL Cholesterol (D)	84.18 mg/dl	(M:- 30-55) , (F:- 45-65) mg/dl
LDL Cholesterol (D)	90.58 mg/dl	(<150) mg/dl
VLDL Cholesterol	14.66 mg/dl	(25-45) mg/dl
Chol/HDL Ratio	1.98	(high risk if > 6.0)
LDL/HDL Ratio	0.81	(< 3.0)

Note:



		(M:- 12.5-14.5)
HEMOGLOBIN	10.4 gm/dl	gm/dl
		(F:- 11.5-13.5) gm/dl
H C T	34.3 %	(40-59) %
TOTAL		(M:- 4.5-5.5) 10 ⁶ /
ERYTHROCYTE	3.52 10 ⁶ /μL	μL
COUNT		(F:- 3.8-4.8) 10 ⁶ /μL
M C V	97.4 fL	(80-96) fL
M C H	29.5 pg	(26-35) pg
M C H C	30.3 g/dL	(29-37) g/dL
R D W-CV	15.5 %	(11-14) %
TOTAL		
LEUCOCYTE	7.14 10 ³ /μL	(4-11) 10 ³ /μL
COUNT		
NEUTROPHILS	56.0 %	(40-75) %
LYMPHOCYTES	34.9 %	(20-45) %
MONOCYTES	5.9 %	(2-10) %
EOSINOPHILS	2.4 %	(1-6) %
BASOPHILS	0.8 %	(<1) %
PLATELET COUNT	232 10 ³ /μL	(150-450) 10 ³ /μL
P D W	12.1 fl	(8.3-25.0) fl
M P V	10.9 fl	(8-9.5) fl
P C T	0.25 %	(0.15-0.62) %

Note:

KIDNEY FUNCTION TEST

TEST	RESULT	REFERENCE RANGE
Blood Urea	74.26 mg/dl	(15-40) mg/dl (Men : 0.7 - 1.2)
Serum Creatinine	4.00 mg/dl	mg/dl (Women: 0.5 - 0.9)
Uric Acid	5.06 mg/dl	(M:- 2.5-6.0) mg/dl (F :- 3.5-7.2) mg/dl
Remark	REPEAT RFT	

Note:



**DISTRICT GOVT. HOSPITAL-
MANDSAUR****CENTRAL PROCESSING LAB**

Madhya Pradesh State Highway 31,
Mhow Neemuch Road
Mandsaur MADHYA PRADESH (462016)
PHONE NO. -)

**Department of HAEMATOLOGY**Patient Name: **LAXMI OPD W/O KANHAIYALAL**

Age/ Gender : **27 Y / Female** Mobile : **9596884812** SHUHID No.:
**1612302/
002007**

Order No.: **161110223/
00096962** Visit Type : **OPD** OPD/IPD/ANC #:
OPD

Referred Dept: Referred By: **dr. aayush malvi** Ordered On: **11-
Feb-2023 01:19
PM**

Sample Collection : Reported On: **11-
11-Feb-2023 01:19
PM** **Feb-2023 05:42
PM**

CBC

TEST	RESULT	REFERENCE RANGE
HEMOGLOBIN	10.4 gm/dl	(M:- 12.5-14.5) gm/dl (F:- 11.5-13.5) gm/dl
H C T	34.3 %	(40-59) %
TOTAL ERYTHROCYTE COUNT	3.52 10 ⁶ /μL	(M:- 4.5-5.5) 10 ⁶ / μL (F:- 3.8-4.8) 10 ⁶ /μL
M C V	97.4 fL	(80-96) fL
M C H	29.5 pg	(26-35) pg
M C H C	30.3 g/dl	(30-37) g/dl





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DEPARTMENT OF NUCLEAR MEDICINE & MOLECULAR PET-CT IMAGING

Patient Name: - MRS. LAXMI, 26 Y / F

DATE: -19.04.2023

Injected Activity (in mCi): 04.80 mCi of DTPA (Diuretic renogram)

Name of study : DIURETIC RENAL SCAN

Ref by: DR. LT. COL. SHRIWASTAV

Nuclear scan findings:

- 04.80 mCi Tc-99m- EC (tubular) injected L/V., in F-15 Diuretic protocol.
- Functional size of Right kidney is 9.8 X 4.5 cm and small sized Left kidney is 7.7 X 2.9 cm.
- Small sized Left kidney with moderate to severe cortical dysfunction (Rel. uptake is 27.32 %). Time to peak is delayed and intra-renal transit time is prolonged. Diuretic renogram is of parenchymal dysfunction pattern. Delayed images show prolonged drainage pattern.
- Apparently normal perfusion & tubular uptake of Right kidney (Rel. uptake is 72.68 %), with normal time to peak (TTP is 1.35 min.) and intrarenal transit time is prolonged. Diuretic renogram is of prolonged excretory pattern.

➤ Total GFR: 76.36 ml/min.

- RIGHT KIDNEY GFR = 55.50 ml/min
- LEFT KIDNEY GFR = 20.86 ml/min

CONCLUSION:

- Small sized Left kidney with moderate to severe cortical dysfunction (Rel. uptake is 27.32 %). Diuretic renogram and delayed image show prolonged drainage pattern .
- Normal sized Right kidney with good cortical function (Rel. uptake is 72.68 %) . Diuretic renogram and delayed image show prolonged drainage pattern.

Advised: Clinical Correlation.

DR. ARUN CHOUHAN
Consultant, NMD & PET - CT

NOTE : Reporting has been done as per the functional images (functional information of organs).
These may please be correlated clinically with other relevant investigation for interpretation.
This report is not valid for the purpose of Medico-legal-case.

Pashupatinath Diagnostic Center

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07422-495969 Helpline 9098481308
pdcmandsaur@gmail.com



Name	: Mrs. LAXMI GURJAR	Reg. No.	: PDC71589	IPD/OPD Status	: OPD
Age/Sex	: 26 Y/Female	Lab No.	: 0230709014	consultant	: SELF
Ref. Dr.	: MOTILAL GURJAR	Receipt no	: 082309521	Aadhaar No.	

Sample Collected at: 09/07/2023 12:53:00



Accession No.

BIOCHEMISTRY

Report Gen at: 09/07/2023 13:33:24



Registration No.

SAMPLE TYPE : SERUM

Investigations	Result	Unit	Biological Reference Interval
*B. UREA	69.1	mg/dl	15-45
CREATININE	4.6	mg/dl	0.66-1.30
TOTAL PROTEIN	6.4	g/dL	6.3-8.3
ALBUMIN	4.0	g/dl	3.5-5.0
GLOBULIN	2.40	g/dl	2.8-3.2
A/G RATIO	1.67		1.25-1.56:1

*** End of Report ***

TEST DONE BY VITROS 250 CHEMISTRY
Creatinine test is performed by vitros 250 dry biochemistry analyzer.

TECHNOLOGIST

DR. Ashok kumar gupta
MBBS.DCP. (Pathology
Consultant Pathologist

THIS REPORT IS NOT VALID FOR MEDICO-LEGAL PURPOSE

