

27 May 2006 00:00:00

# Thanks

## ENDOCRINOLOGY REPORT

### Thyroid Hormones:

▲ **Free T3** (Free Triiodothyronine) : 3.09 pg/mL

▲ **Free T4** (Free Thyroxine) : 1.37 ng/dL

▲ **TSH** (Thyroid Stimulating Hormone) : 5.18 uIU/mL

### Reference Range :

Normal: 2.3 - 4.2 pg/mL

Normal: 0.8 - 1.8 ng/dL

Normal: 0.35 - 5.5 uIU/mL

Doctor's signature:

معاصر ستارز  
للتحاليل الطبية  
Thanks



## REPORT

### LIVER FUNCTIONS

▲ **SGOT** (Aspartate Aminotransferase) : 23 U/L

▲ **SGPT** (Alanine Aminotransferase) : 17 U/L

▲ **AST/ALT Ratio** : 1.35

### KIDNEY FUNCTIONS

▲ **Serum Creatinine** : 0.87 mg/dL

### Reference Range :

Female Up To 40 U/L

Female Up To 45 U/L

Female 1 - 2

Normal: 0.6 - 1.2 mg/dL

Doctor's signature:  
معامل ساررج  
للتحاليل الطبية  
THAKES

## Erythrocyte Sedimentation Rate

▲ First Hour

: 30 mms High

## SERODIAGNOSIS

▲ CRP (C-Reactive Protein)

: Positive 6

## Reference Range :

Normal: Up to 7 mms

Negative < 6.0

Doctor's signature:

معامل ستارز  
للتحاليل الطبية  
Thanks

**REPORT**

**Separate**

▲ **Amylase**

: 29 U/L

**BLOOD GLUCOSE**

▲ **R.B.G.** (Random Blood Glucose)

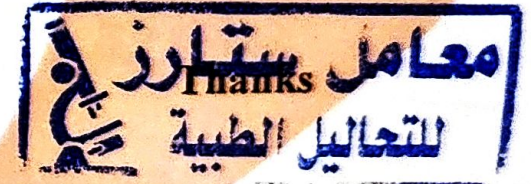
: 85 mg/dL

**Reference Range :**

Normal: 25.0 - 98.0 U/L

Normal: Up To 145 mg/dL

**Doctor's signature:**





# HEMATOLOGY REPORT

## Blood Picture:

## Reference Range :

▲ <b>Hgb</b> (Hemoglobin)	:	10.8	L	12.0-15.5 g/dl
▲ <b>RBCs</b> (Red Blood Cells)	:	4.1		3.8 - 5.1 x 10 <sup>3</sup> Cells/uL
▲ <b>Hct</b> (Hematocrit)	:	34.56	L	35 - 45 %
▲ <b>MCV</b>	:	84.3		80 - 100 fL/cell
▲ <b>MCH</b>	:	26.3	L	27 - 34 pg/cell
▲ <b>MCHC</b>	:	31.2	L	32 - 37 g/dl
▲ <b>Plt</b> (Platelet)	:	262		150 - 440 x 10 <sup>3</sup> /mm <sup>3</sup>
▲ <b>WBCs</b> (Leukocytes)	:	5.4		4.5 - 11.0 x 10 <sup>3</sup> /mm <sup>3</sup>

Test	Relative count %	Absolute count K/uL
▪ <b>Neutrophil</b>	: 63 35.0 - 80.0	3.4 1.8 - 7.7
▪ <b>Lymphocytes</b>	: 33 18 - 44	1.78 0.8 - 4.8
▪ <b>Monocytes</b>	: 4 0 - 10	0.22 0.2 - 0.9

**Comment :** RBCs show mild Normocytic Hypochromic Anemia,  
WBCs show no significant abnormality,  
PLTs show adequated in number and well aggregated

Doctor's signature:  
معامل ستارز  
Thanks  
التعاليل الطبية

Technique:

Post-contrast Multiplanar MSCT of the abdomen & pelvis

~~~~~

MSCT findings:

- Mildly enlarged liver showing homogeneous density and enhancement of its parenchyma. It has smooth contours and rounded borders. No detected hepatic focal lesions or abnormal pattern of enhancement pattern. No intra or extra-hepatic biliary channel dilatation.
- Normal PV as regard caliber and contrast opacification.
- Normal GB wall thickness. Noted radio-opaque stones inside with no mass. Normal CBD.
- Normal size of the spleen with uniform density and enhancement. No focal lesion.
- Normal sized and uniform density of the pancreas with no focal abnormality.
- Normal both suprarenal glands.
- Normal site and size of both kidneys with smooth contour. Normal parenchymal thickness and contrast excretion. No stones, masses or back pressure changes. Both ureters are not dilated.
- Normal UB and pelvic organs with no mass.

Opinion:

Calcular GB.



## Upper Endoscopy Report

Name: Noha Ahmed Date: 18/08/2023 Age: 31 Yrs

Complain: Upper abdominal pain.

Esophagus: Sliding (< 5 cm) HH with lower esophagitis (Biopsies taken for exclusion of specific types of esophagitis and Barrett's).

Cardia: Lax

Stomach: Gastric Diffuse mucosal edema and hyperemia with (Biopsies taken).

Pylorus: Normal and re-active

Duodenum: Normal.

### Diagnosis:

- Sliding HH with lower esophagitis (Biopsies taken)
- Diffuse gastritis (Biopsies taken for h. Pylori and histopathology)

Procedure: Biopsies

Recom...: Medical treatment, Histopathology, H. pylori, further evaluation and follow up.