

Ms Kavita Phygan

Ht, 163cm

W . 92103

BP: 120180 mmng

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- correct Arabit

- low cuts dist

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Dr. I. U. BAMB M.B.B.S., M.D. (Medicine) Reg. No. 39452





PRECISE TESTING - H

: 8/3/2025 7:38:17PM

Name : Ms. PHUGARE KAVITA KERBA Lab No. : 393834954

Ref By : SELF

Collected : 8/3/2025 9:39:00AM

: 287175

A/c Status : F

ID

Collected at : WALKIN - PUNE LAB, PUNE SATARA ROAD

Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

Panchami Hotel, Pune 411009

Age : 41 Years Gender : Female

Report Status : Interim

Reported

Processed at : PUNE LAB, PUNE SATARA ROAD



MediWheel Full Body Health Female >40/2D ECHO

<u>CBC (Complete Blood Count), Blood</u>

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	11.1	12.0 - 15.0 g/dL	Spectrophotometric
RBC	4.1	3.8 - 4.8 mil/cmm	Elect. Impedance
PCV	34.8	36.0 - 46.0 %	Calculated
MCV	85.0	81.0 - 101.0 fL	Measured
мсн	27.1	27.0 - 32.0 pg	Calculated
MCHC	32.0	31.5 - 34.5 g/dL	Calculated
RDW	14.0	11.6 - 14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	8300	4000 - 10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE C	OUNTS		
Lymphocytes	41.1	20.0 - 40.0 %	
Absolute Lymphocytes	3411.3	1000.0 - 3000.0 /cmm	Calculated
Monocytes	2.8	2.0 - 10.0 %	
Absolute Monocytes	232.4	200.0 - 1000.0 /cmm	Calculated
Neutrophils	52.8	40.0 - 80.0 %	
Absolute Neutrophils	4382.4	2000.0 - 7000.0 /cmm	Calculated
Eosinophils	3.3	1.0 - 6.0 %	
Absolute Eosinophils	273.9	20.0 - 500.0 /cmm	Calculated
Basophils	0.0	0.1 - 2.0 %	
Absolute Basophils	0.0	20.0 - 100.0 /cmm	Calculated





PRECISE TESTING - HEALTHIER LIVING

Name Lab No. : Ms. PHUGARE KAVITA KERBA

Ref By

: 393834954

Reiby

: SELF

Collected

: 8/3/2025 9:39:00AM

A/c Status

; P

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Panchami Hotel, Pune 411009

Age

: 41 Years

Gender

: Female

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Processed at : PL

: PUNE LAB, PUNE SATARA ROAD

ID

: 287175

MediWheel Full Body Health Female >40/2D ECHO <u>CBC (Complete Blood Count), Blood</u>

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PLATELET PARAMETERS			
Platelet Count	187000	150000 - 410000 /cmm	Elect. Impedance
MPV	10.1	6.0 - 11.0 fL	Measured
PDW	18,5	11.0 - 18.0 %	Calculated
RBC MORPHOLOGY			
Hypochromia	-		
Microcytosis	77.1		
Macrocytosis	-		
Anisocytosis	-		
Poikilocytosis			
Polychromasia	**		
Target Cells	40		
Others	Normocytic normochromic		

Specimen: EDTA whole blood





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Lab No.

: 393834954

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Panchami Hotel, Pune 411009

Age

: 41 Years Female

Gender Reported

: 8/3/2025 7:38:24PM

Report Status

; Interim

Processed at

: PUNE LAB, PUNE SATARA ROAD

Corporate ID : 287175

MediWheel Full Body Health Female >40/2D ECHO ERYTHROCYTE SEDIMENTATION RATE (ESR)

PARAMETER

RESULTS

BIOLOGICAL REF RANGE

METHOD

ESR, EDTA WB

33.00

2.00 - 20.00 mm/hr

Sedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1:60(5):1443-50.

Central Processing Lab: Aston, 2" floor, Sundery





: Ms. PHUGARE KAVITA KERBA

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: SELF

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College Road, Off, Pune - Satara Rd, behind

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ID 287175

PRECISE TESTING . HEALTHIER L

Age : 41 Years Gender : Female

: 8/3/2025 7:38:30PM Reported

Report Status : Interim

Processed at : PUNE LAB, PUNE SATARA ROAD



MediWheel Full Body Health Female >40/2D ECHO

PARAMETER

RESULTS

BIOLOGICAL REF RANGES

METHOD

Hexokinase

GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting

99.50

Non-Diabetic: < 100 mg/dl

Impaired Fasting Glucose:

100-125 mg/dl

Diabetic: >/= 126 mg/dl

Note: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition

GLUCOSE (SUGAR) PP, Fluoride

Plasma PP

106.00

Non-Diabetic: < 140 mg/dl

Impaired Glucose Tolerance:

140-199 mg/dl

Diabetic: >/= 200 mg/dl

Hexokinase

Note: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition





PRECISE TESTING - HEALTHIER LIVING

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Collected at : WALKIN - PUNE LAB, PUNE SATARA ROAD

Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

Panchami Hotel, Pune 411009

Age : 41 Years Gender : Female

Reported : 8/3/2025 7:38:37PM

Report Status : Interim

Processed at : PUNE LAB, PUNE SATARA ROAD



MediWheel Full Body Health Female >40/2D ECHO KIDNEY FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
BLOOD UREA, Serum	17.90	12.80 - 42.80 mg/dL	Urease GLDH
BUN, Serum	8.36	6.00 - 20.00 mg/dL	Calculated
CREATININE, Serum	0.92	0.51 - 0.95 mg/dL	Enzymatic
eGFR, Serum	80.25	(ml/min/1.73sqm) Normal or High: Above 90 Mild decrease: 60-89 Mild to moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure:<15	Calculated
TOTAL PROTEINS, Serum	7.47	6.40 - 8.30 g/dL	Biuret
Albumin Serum	4.54	3.50 - 5.20 g/dL	BCG
GLOBULIN Serum	2.93	2.30 - 3.50 g/dL	Calculated
A/G RATIO Serum	1.55	1.00 - 2.00	Calculated
URIC ACID, Serum	5.54	2.40 - 5.70 mg/dL	Enzymatic
PHOSPHORUS, Serum	3.34	2.70 - 4.50 mg/dL	Molybdate UV
CALCIUM, Serum	9.34	8.60 - 10.00 mg/dL	N-BAPTA
SODIUM, Serum	139.30	135.00 - 148.00 mmol/L	Indirect ISE
POTASSIUM, Serum	4.4	3.50 - 5.30 mmol/L	Indirect ISE
CHLORIDE Serum	103.60	98.00 - 107.00 mmol/L	Indirect ISE

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation





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Gender

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· 8/3/2025 7:38:37PM

: Interim Report Status

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· PUNE LAB, PUNE SATARA ROAD



287175 ID

MediWheel Full Body Health Female >40/2D ECHO GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
Glycosylated Hemoglobin (HbA1c) ,EDTA WB	5.7	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose	116.9	mg/dL	Calculated

Intended use:

(eAG), EDTA WB

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- . The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, plenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach s interpretation of diagnostic tests 10th edition.

Mumbai - 400053





PRECISE TESTING . HEALTHIER LIVI

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Age

Gender

Reported

: 8/3/2025 7:38:37PM

: 41 Years

Female

: Interim Report Status

Processed at : PUNE LAB, PUNE SATARA ROAD

287175 ID

MediWheel Full Body Health Female >40/2D ECHO **FUS and KETONES**

PARAMETER

RESULTS

BIOLOGICAL REF RANGES

METHOD

Urine Sugar (Fasting)

Urine Ketones (Fasting)

Absent Absent

Absent Absent





PRECISE TESTING - HEALTHIE

Name : Ms. PHUGARE KAVITA KERBA Lab No. : 393834954

Lab No. : 3938349 Ref By : SELF

Collected : 08/03/2025 09:39:00AM

287175

A/c Status : P

ID

Collected at : WALKIN - PUNE LAB, PUNE SATARA ROAD

Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

Panchami Hotel, Pune 411009

Age Gender : 41 Years : Female

Reported

: 8/3/2025 7:38:45PM

Report Status : Interim

*

Processed at : PUNE LAB, PUNE SATARA ROAD

MediWheel Full Body Health Female >40/2D ECHO LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
CHOLESTEROL, Serum	154	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	80	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL Serum	48	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymati colorimetric assay
NON HDL CHOLESTEROL, Serum	106	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL Serum	90	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL Serum	16	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2	0-3.5 Ratio	Calculated

Reference:

- Executive Summary of the Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III).
- 2) Pack Insert.





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Age

: 41 Years

Gender Reported : Female : 8/3/2025 7:38:45PM

Report Status : Interim

Processed at

: PUNE LAB, PUNE SATARA ROAD



MediWheel Full Body Health Female >40/2D ECHO THYROID FUNCTION TESTS

	2.9		
PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
Free T3, Serum	5.64	3.50 - 6.50 pmol/L	ECLIA
Free T4 Serum	16.20	11.5-22.7 pmol/L First Trimester:9.0-24.7	ECL!A
sensitiveTSH Serum	2.62	Second Trimester:6.4-20.59 Third Trimester:6.4-20.59 0.35-5.5 microIU/mI	ECLIA
		First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1. TSH Values between high abnormal upto15 microlU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2. TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone recovery phase of nonthyroidal illness, TSH Resistance
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, anti thyroid drugs, tyrosine kinase inhibitors & amiodarone amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine lintake, pregnancy related (hyperemesis gravidarum hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for hyperthy- roidism, drugs like steroids & dopamine, Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.

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MediWheel Full Body Health Female >40/2D ECHO THYROID FUNCTION TESTS

PARAMETER			RESULTS	BIOLOGICAL REF RANGES	METHOD
High	High	High	Interfering anti Amiodarone, Hepar epileptics.	TPO antibodies,Drug interfering, Beta Blockers, steroids	rence: & anti

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

- Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day)
 until atleast 8 hours following the last biotin administration.
- Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely
 elevated or depressed results. this assay is designed to minimize interference from heterophilic
 antibodies.

Reference:

- 1. O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3. Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4. Biological Variation: From principles to Practice-Callum G Fraser (AACC Press)





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Age

: 41 Years

Gender

: Female

Reported

: 8/3/2025 7:38:45PM

Report Status : Interim

Processed at

: PUNE LAB, PUNE SATARA ROAD

MediWheel Full Body Health Female >40/2D ECHO LIVER FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
BILIRUBIN (TOTAL), Serum	0.34	0.10 - 1.20 mg/dL	Colorimetric
BILIRUBIN (DIRECT), Serum	0.18	<0.30 mg/dL	Diazo
BILIRUBIN (INDIRECT), Serum	0.16	0.10 - 1.00 mg/dL	Calculated
TOTAL PROTEINS, Serum	7.47	6.40 - 8.30 g/dL	Biuret
Albumin Serum	4.54	3.50 - 5.20 g/dL	BCG
GLOBULIN Serum	2.93	2.30 - 3.50 g/dL	Calculated
A/G RATIO Serum	1.55	1.00 - 2.00	Calculated
SGOT (AST), Serum	33.00	5.00 - 32.00 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	18.90	5.00 - 33.00 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	23.20	3.00 - 40.00 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	72.00	35.00 - 105.00 U/L	Colorimetric





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: P A/c Status

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Panchami Hotel, Pune 411009

Age

: 41 Years : Female

Gender

Reported

: 8/3/2025 7:38:53PM

Report Status : Interim

Processed at

: PUNE LAB, PUNE SATARA ROAD

: 287175 ID

> MediWheel Full Body Health Female >40/2D ECHO **EXAMINATION OF FAECES**

PARAMETER

RESULTS

BIOLOGICAL REF RANGE

METHOD

PHYSICAL EXAMINATION

EXAMINATION OF FAECES

Sample Not Received

CHEMICAL EXAMINATION

MICROSCOPIC EXAMINATION

astri Nagar, Andheri West, Mumbai - 400053





: Ms. PHUGARE KAVITA KERBA

Lab No.

393834954

Ref By

: SELF

Collected

: 8/3/2025 9:39:00AM

A/c Status

: P

Collected at

: WALKIN - PUNE LAB, PUNE SATARA ROAD

Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

Panchami Hotel, Pune 411009

Age

: 41 Years

Gender

Female

Reported

: 8/3/2025 7:38:58PM

Report Status

: Interim

Processed at

: PUNE LAB, PUNE SATARA ROAD

₹

Corporate ID : 287175

MediWheel Full Body Health Female >40/2D ECHO BLOOD GROUPING & Rh TYPING

PARAMETER

RESULTS

ABO GROUP

AB

Rh Typing

Positive

NOTE: Test performed by Semi-automated column agglutination technology (CAT).

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the
 first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of
 adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

Refernces:

 Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia

Central Processing Lab: Aston, 2" floor, Sundervan Complet, Opp. Shipinganic Above Welced

Page 13 of 15





Name : Ms. PHUGARE KAVITA KERBA

Lab No. : 393834954

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Collected : 8/3/2025 9:39:00AM A/c Status : P

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OTHERS

Collected at : WALKIN - PUNE LAB, PUNE SATARA ROAD

: 287175

Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

Panchami Hotel, Pune 411009

Age

: 41 Years

Gender : Female : 8/3/2025 7:39:02PM

Reported

Processed at

Report Status : Interim

: PUNE LAB, PUNE SATARA ROAD



URINE EXAMINATION REPORT

PARAMETER	DESULTS	THE PROPERTY OF THE PARTY OF TH	
	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale Yellow	Pale Yellow	*
Transparency	Clear	Clear	*
CHEMICAL EXAMINATION			
Specific Gravity	1.01	1.002-1.035	Chemical Indicator
Reaction (pH)	5.0	5-8	Chemical Indicator
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Negative	Griess Test
MICROSCOPIC EXAMINATION			
(WBC)Pus cells / hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2	0-5/hpf	
Hyaline Casts	Absent	Absent	
Pathological cast	Absent	Absent	
Calcium oxalate monohydrate crystals	Absent	Absent	
Calcium oxalate dihydrate crystals	Absent	Absent	
Triple Phosphate crystals	Absent	Absent	
Uric acid crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-4	0-20/hpf	

Leucocyte esterase : Absent

Page 14 of 15





PRECISE TESTING - HEALTHIER L

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> Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off, Pune - Satara Rd, behind

> > MD Pathology

Chief of Lab

Panchami Hotel, Pune 411009

: 41 Years Age

Gender · Female

: 8/3/2025 7:39:02PM Reported

: Interim Report Status

: PUNE LAB, PUNE SATARA ROAD Processed at



URINE EXAMINATION REPORT

RESULTS

BIOLOGICAL REF RANGE

METHOD

PARAMETER

ID

Dr Atiya Shaikh MD Pathology Consultant Pathologist





Result/s to follow:

CYTOLOGY(PAP SMEAR), GENITAL, FEMALE, CONVENTIONAL

IMPORTANT INSTRUCTIONS

The published test results relate to the submitted specimen. All test results are dependent on the quality of the sample received by the laboratory Laboratory tests should be clinically correlated by a physician and are merely a tool to help arrive at a diagnosis. Unforeseen circumstances may cause a delay in the delivery of the report. Inconvenience is regretted. Certain tests may require further testing at an additional cost for derivation of exact value. Kindly submit the request within 72 hours post-reporting. The Court/Forum at Mumbal shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of the test(s). Test results are not valid for medico-legal purposes. This computer-generated medical diagnostic report has been verified by a doctor or an authorized medical professional. A physical signature is not required for this report. (#) sample drawn from an external source.

If test results are alarming or unexpected, the client is advised to contact customer care immediately for possible remedial action.

Tel: 022-61700000, Email: com com com com com customerservice@suburbandiagnostics.com customerservice@suburbandiagnostics.com

West Reference Lab, Mumbai, is a CAP (8036028) Accredited laboratory.



Patient Name: Mrs.Kavita Phugare Ref:

Age /Sex: 41/F Date: 10/03/2025

2D ECHO REPORT

Findings:-

- > Normal chamber dimensions
- No Regional wall motion abnormality.
- No concentric LVH
- Good LV systolic function, LVEF-60%
- > Normal cardiac valves
- > Intact IAS/IVS.
- > No LV Clot /PE/Vegetation.

DOPPLER:-

- > No LV DD
- No PH,RVSP- 20 mm HG
- No AS/AR/Trivial MR/Grade I TR

Measurements (mm):-AO-27, LA-31, IVS-09, PW-09, LVIDd-42, LVIDs-28, LVEF-60%

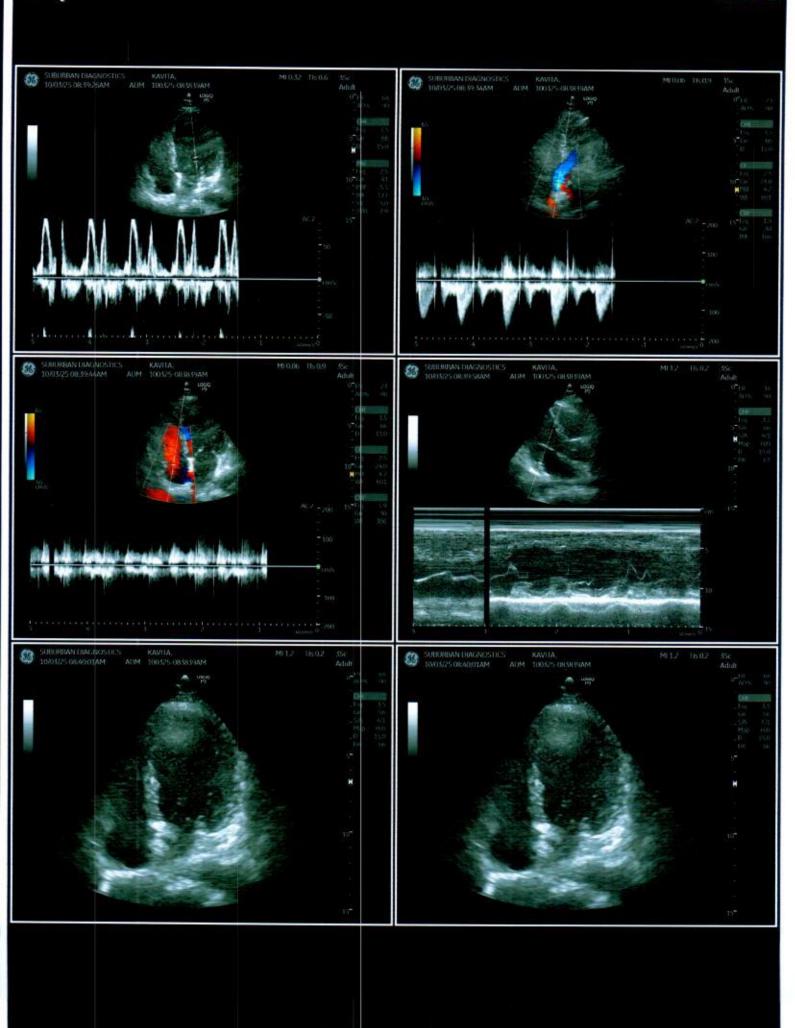
End of Report--

Impression: NORMAL STUDYWITH GOOD LV FUNCTION (LVEF-60%)

Dr RAJESH WAGH

MD (MEDICINE), DM (CARDIOLOGY).

Reg.No.2006/03/1928



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Name: Phugax Kovita
CID: 393834954

Sex/Age: 41917

Date: 8/3/25

EYE EXAMINATION

VISION

Distance Vision Without Glasses	Right Eye	Left Eye
Distance Vision With Glasses	Right Eye 676	Left Eye 6 16
Near Vision Without Glasses	Right Eye	Left Eye A
Near Vision With Glasses	Right Eye	Left Eye

GENERAL EXAMINATION:

LIDS CORNEA CONJUCTIVAE EYE MOVEMENTS COLOUR VISION

DR LU.BAMB

M.B.B.S MD (Medicine)

Reg No 39452

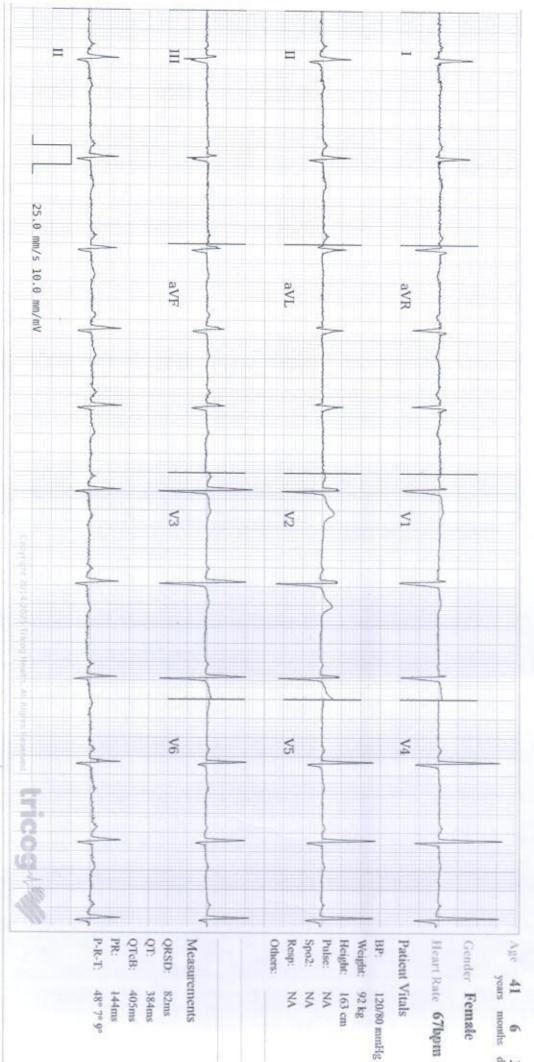
SUBURBAN DIAGNOSTICS - SWARGATE, PUNE



Patient Name: PHUGARE KAVITA KERBA Patient ID: 393834954

Date and Time: 8th Mar 25 10:55 AM

30 days



ECG Within Normal Limits: Sinus Rhythm Within Normal Limit except Sinus Arrhythmia. Please correlate clinically.

Suburban DIAGNOSTICS PVT. LTD. Suraph Cuntre, Opp. Pentagon Mall, Near Panchami Hotel, Shahu College Road, Pune-411 009,

Tel: 020-41094509

U. BAMB
W.D. (MedPatsiyarial aam

M.B.B.S., M.D. (Med Miles) (MEDICINE)
Reg. No. 39452 Cartiologic Cartiologic



CID

: 393834954

Name

: Ms. PHUGARE KAVITA KERBA

Age / Sex

Reg. Location

: 41 Years/Female

Ref. Dr

: self

: Swargate, Pune Main Centre

Reg. Date

: 08-Mar-2025

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Reported : 08-Mar-2025 / 15:17

MAMMOGRAPHY

Examination: Bilateral Digital X-ray Mammography & Screening Sonomammography

Findings: Bilateral film screen mammography was performed in craniocaudal and mediolateral oblique views. Both breasts show moderately dense fibroglandular parenchyma.

No evidence of any dominant mass, clusters of microcalcification, nipple retraction, skin thickening is seen in either breast.

Screening sonomammography showed few very small cystic lesions in both breasts, largest measuring 4.5 x 4 mm. No solid or larger cystic breast lesion is seen. No axillary enlarged lymph nodes seen.

IMPRESSION:

No significant abnormality is seen. (BI-RADS category 1).

Routine follow up is recommended. Please bring this film and report at the time of follow up for comparison.

ACR BIRADS CATEGORY

[American college of radiology breast imaging reporting and data system].

I Negative IV Suspicious (Indeterminate).

II Benign finding V Highly suggestive of malignancy.

III Probably benign finding.

Not all breast abnormalities show up on mammogram. The false negative rate of mammography is 10-15%. The management of a palpable abnormality must be based on clinical grounds. If you detect a lump or any other change in your breast before your next screening mammogram, consult your doctor immediately.

Dr. ANURADHA KELKAR MD Radiologist

Reg. No. 42497

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CID

: 393834954

Name

: Ms. PHUGARE KAVITA KERBA

Age / Sex

Reg. Location

: 41 Years/Female

Ref. Dr

: self

: Swargate, Pune Main Centre

Reg. Date Reported : 08-Mar-2025

: 08-Mar-2025 / 11:48

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ULTRASOUND ABDOMEN & PELVIS

LIVER: Normal in size (measures 14.5 cm) and shows generalised increased echogenicity. No IHBR dilatation. Hepatic veins appear normal. Portal vein and common bile duct show normal caliber.

GALL BLADDER: Contracted. No evidence of any pericholecystic collection.

PANCREAS: Normal in size and echotexture. Pancreatic duct is normal.

SPLEEN: Normal in size and echopattern. No focal lesion. Splenic vein is normal.

RIGHT KIDNEY: Measures 10.0 x 4.2 cm. Normal in size and echogenicity. No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

LEFT KIDNEY: Measures 10.2 x 4.4 cm. Normal in size and echogenicity. No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

Retroperitonium, paraaortic and flanks obscured due to excessive bowel gas. Prominent bowel loops seen in the abdomen.

Paraaortic and paracaval region appears to be normal.

No evidence of lymphnodes noted.

No free fluid in abdomen.

URINARY BLADDER: Well distended, No calculi, Wall thickness is normal.

UTERUS: Anteverted normal in size, measures 7.5 x 3.7 x 3.5 cm. No area of increased or decreased echogenicity. Endometrial echoes are normal. Endometrial thickness is 3.9 mm. Both the ovaries are normal in size shape and echotexture.

No obvious abnormal ovarian or adnexal mass lesion.

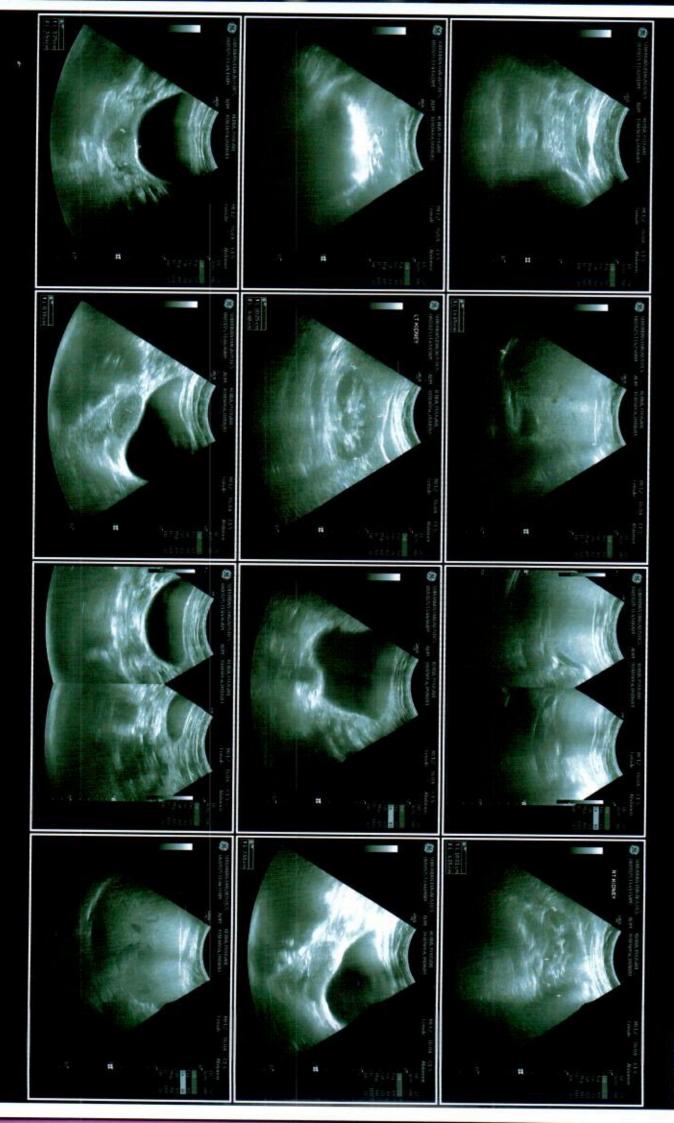
No free fluid noted in the POD.

IMPRESSION: Normal size liver with fatty changes.

DR. NIKHIL G. JOSHI M.B.B.S., D.M.R.E. REG. NO. 2001/02/397

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: sen

: Swargate, Pune Main Centre

Reg. Date

: 08-Mar-2025

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Reported : 08-Mar-2025 / 11:23

X-RAY CHEST PA VIEW

The lung fields are clear with no parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal.

The domes of the diaphragm are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal.

IMPRESSION: Essentially normal X-ray of the chest.

Clinical correlation is indicated.

---End of Report-----

DR. NIKHIL G. JOSHI M.B.B.S., D.M.R.E. REG. NO. 2001/02/397

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