

Registration ID : 27504 Sample Collection : 23/11/2024 14:39:46 : MRS. PRIYA MANGESH KULKARNI Name Sample Received : 23/11/2024 14:39:46 Printed : 26/11/2024 11:53:46 **Report Released** : 25/11/2024 16:11:30 Age/Sex : 54 Yrs. / F Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

		C	COMPLETE BLO	OD COUNT	
Test		Result	Unit	Biological Ref Range	
Hemoglobin	:	12.8	g/dL	12-14 g/dL	
(SLS) Photometric					
Total RBC	:	4.32	10^6/µL	3.0-6.0 10^6/µL	
(Electrical Impedence) Hematocrit (PCV) (Calculated)	:	39.7	%	36-54 %	
Mean Corpuscular Volume (MCV) (calulated)	:	91.9	fL	78-101 fL	
Mean Corpuscular Hemoglobin (MCH) (Calculated)	:	29.6	pg	27-32 pg	
Mean Corpuscular Hemoglobin Concentration (MCHC)	:	32.2	g/dL	31.5-34.5 g/dL	
(Calculated) Red Cell Distribution Width (RDW- CV)	• :	13.90	%	12-15 %	
(Electrical Impedence) <b>Total Leucocytes Count</b> (Light Scattering)	:	8190	/cumm	4000-11000 /cumm	
Neutrophils	:	50	%	40-75 %	
(Calculated)					
Eosinophils Percentage	:	06	%	1-6 %	
(Calculated)					
Lymphocyte Percentage	:	37	%	20-45 %	
(Calculated)					
Basophils Percentage (Calculated)	•	0	%	0-1 %	
Monocytes Percentage	:	07	%	1-10 %	
(Calculated)					
RBC Morphology	:	Normocytic	, Normochromic		
WBC Morphology	:	Normal Mo	rphology		
Platelet Count	:	353000	/ul	150000-450000 /ul	
(Electrical Impedence)		Adogueta		Adequate	
Platelets on Smear	:	Adequate		Adequate	
E.S.R Sample Type:EDTA whole blood(Westergren)	:	17	mm at 1hr	0-20 mm at 1hr	

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:11:30)





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





24 Registration ID : 27504 : MRS. PRIYA MANGESH KULKARNI

Age/Sex

Name

: 54 Yrs. / F

Ref. By : Mediwheel

Printed

Sent By

: 26/11/2024 11:53:46

----- End Of Report -----

: Arcofemi Healthcare Pvt Ltd

Sample Collection Sample Received Report Released

- : 23/11/2024 14:39:46
- : 23/11/2024 14:39:46
- : 25/11/2024 16:11:30



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27504 231124		Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46
Name :	MRS. PRIYA MANGESH	KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex :	54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 16:12:26
Ref. By :	Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	

Blood S	Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)				
Test		Result	Unit	Biological Ref. Range	
GLUCOSE (SUGAR) FASTING,	:	106	mg/dL	Non-Diabetic: < 100 mg/dl	
(Fluoride Plasma Used)				Impaired Fasting Glucose: 100-	
				125 mg/dl Diabetic: >/= 126 mg/dl	
Method: GOD-POD					
GLUCOSE (SUGAR) PP, (Fluoride	:	146	mg/dl	Non-Diabetic: < 140 mg/dl	
Plasma Used )				Impaired Glucose Tolerance: 140-	
				199 mg/dl Diabetic: >/= 200 mg/dl	

Test Done on - Automated Biochemistry Analyzer (EM 200)

#### \*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:12:26)

HbA1c (Whole Blood)				
Test		Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	:	5.60	%	Non-diabetic: 4-6
				Excellent Control: 6-7
				Fair to good control: 7-8
				Unsatisfactory control: 8-10
				Poor Control: >10
EDTA Whole Blood, Method: HPLC				
Estimated Average Glucose (eAG)	:	114.02	mg/dl	65.1-136.3 mg/dL mg/dl
EDTA Whole Blood, Method: Calculated				

#### Interpretation:

1. The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.

2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Assocation) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HBA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.

3.To estimate the eAG from the HbA1c value, the following equation is used: eAG(mg/dl) =28.7\*A1c-46.7.

4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:13:42)





ULL Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





27504 231124	Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46
Name : MRS. PRIYA MANGESH	I KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex : 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 16:12:26
Ref. By : Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	
		BLOOD GROUP		
Test	Result	Unit	Biolog	ical Ref. Range
Blood Group	: 'O' Rh P	OSITIVE		
Slide and Tube AggIlutination Test				

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:13:35)

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Registration ID : 27504 Sample Collection : 23/11/2024 14:39:46 : MRS. PRIYA MANGESH KULKARNI Sample Received : 23/11/2024 14:39:46 Name Age/Sex : 54 Yrs. / F Printed : 26/11/2024 11:53:46 Report Released : 25/11/2024 16:13:54 Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

	LIP	ID PROFILE	
Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 276	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
Serum, Method: CHOD-PAP			
S. Triglyceride	: 270	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
Serum, Method: GPO-Trinder			
HDL Cholesterol serum,Direct method	: 55	mg/dl	42.0-88.0 mg/dl
LDL Cholesterol	: 167.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
Serum, (Calculated)			
VLDL Cholesterol Serum, Method: Calculated	: <b>54.0</b>	mg/dl	5-30 mg/dl
LDL/HDL Ratio	: 3.0		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
Serum, Method: Calculated			
TC/HDL Ratio	: 5.0		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0

Serum, Method: Calculated

Test Done on - Automated Biochemistry Analyzer (EM 200).

#### Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered

to be abnormal.

2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.

3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

\*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:13:54)

----- End Of Report -----





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





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Name : MRS. PRIYA MANGESH	KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex : 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 16:13:00
Ref. By : Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	

LIVER FUNCTION TEST				
Test		Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	:	0.72	mg/dl	0-2.0 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Direct)	:	0.17	mg/dl	0-0.4 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Indirect)	:	0.55	mg/dl	0.10-1.0 mg/dl
Serum, Method: Calculated				
Aspartate Transaminase (AST/SGOT)	:	19.7	IU/L	0-31 IU/L
Serum, Method: UV Kinetic with P5P				
Alanine Transaminase (ALT/SGPT)	:	24.0	IU/L	0-34 IU/L
Serum, Method: UV Kinetic with P5P				
S. Alkaline Phosphatase	:	98	IU/L	42-98 IU/L
Serum, Method: IFCC with AMP buffer				
Total Proteins	:	7.4	gm/dl	6.4-8.3 gm/dl
Serum, Method: Biuret				
S. Albumin	:	4.2	gm/dl	3.5-5.2 gm/dl
Serum, Method: BCG			<i></i>	
S. Globulin	:	3.2	gm/dl	2.3-3.5 gm/dl
Serum, Method: Calculated				
A/G Ratio	:	1.31		0.90-2.00
Serum, Method: Calculated				
Gamma GT	:	49	U/L	0-38 U/L
Serum, Method: G glutamyl carboxy nitroanilide	(EN 20	201		

Test Done on - Automated Biochemistry Analyzer (EM 200).

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:13:00)

----- End Of Report -----





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





Teet		Decult	الم:4	Dialaa	ical Dat Dange
		S	ERUM CREATININE		
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pv	/t Ltd	
Age/Sex	: 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 16:11:44
Name	: MRS. PRIYA MANG	ESH KULKARNI		Sample Received	: 23/11/2024 14:39:46
27504 231124		Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46

Test		Result	Unit	Biological Ref. Range
S. Creatinine	:	0.86	mg/dl	0.60-1.1 mg/dl
Serum, Method: Enzymatic				

Test Done on - Automated Biochemistry Analyzer (EM 200).

\*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:11:44)

		BLOOD UREA	NITROGEN (BUN)	
Test		Result	Unit	Biological Ref. Range
Urea	:	28.30	mg/dl	21-43 mg/dl
Serum, Method: Urease - GLDH				
Blood Urea Nitrogen	:	13.22	mg/dl	5-18 mg/dl
Test Done on - Automated Biochemis	try Analyzer (EM	200)		
*All Samples Processed At Excellas Clinics	Mulund Centre			

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SERUM URIC ACID					
Test		Result	Unit	Biological Ref. Range	
S. Uric Acid	: :	3.74	mg/dl	2.6-6.0 mg/dl	
Serum, Method: Uricase - POD					

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:11:52)



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DIAGNOSTICS | IMAGING | VACCINATION | CONSULTATIONS | CORPORATE HEALTH CHECK-UPS

LABS



27504 231124	Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46
Name : MRS. PRIYA MANO	GESH KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex : 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 16:11:44
Ref. By : Mediwheel	Sent By	: Arcofemi Healthcare P	vt Ltd	
	BUN	CREAT RATIO (BCR)		
Test	Result	Unit	Biolog	ical Ref. Range
BUN/Creatinine ratio	: 15.37		5-20	

Serum, Method: Calculated

### NOTE:

#### A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:12:10)

----- End Of Report -----



ULL Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





Registration ID : 27504

Sent By

Name: MRS. PRIYA MANGESH KULKARNIAge/Sex: 54 Yrs. / FPrinted

: 26/11/2024 11:53:46 Report Released

 Sample Collection
 : 23/11/2024 14:39:46

 Sample Received
 : 23/11/2024 14:39:46

 Report Released
 : 25/11/2024 16:13:21

Age/Sex : 54 Yrs. / F Ref. By : Mediwheel

: Arcofemi Healthcare Pvt Ltd

		THYROID I	FUNCTION TEST	
Test		Result	Unit	Biological Ref. Range
Total T3	:	1.1	ng/dl	0.70-2.04 ng/dl
Serum, Method: CLIA Total T4	:	12.89	µg/dl	5.1-14.1 µg/dl
Serum, Method: CLIA				
TSH (Thyroid Stimulating Hormone)	:	3.24	µIU/mI	0.27-5.3 µIU/mI

Serum, Method: CLIA

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 16:13:21)

----- End Of Report -----



M.D. (Pathologist) Reg. No.-2000/08/2926





		EXA		<b>/INATION OF URINE</b>		
Ref. By	: Mediwheel	Sent By	:	: Arcofemi Healthcare Pvt	Ltd	
Age/Sex	: 54 Yrs. / F	Printed		: 26/11/2024 11:53:46	Report Released	: 24/11/2024 13:57:11
Name	: MRS. PRIYA MANGESH	KULKARNI			Sample Received	: 23/11/2024 14:39:46
27504 231124		Registration ID		: 27504	Sample Collection	: 23/11/2024 14:39:46

Test		Result	Unit	Biological Ref. Range
PHYSICAL EXAMINAT	<u>ION</u>			
Quantity	:	30	ml	
Colour	:	Pale yellow		
Appearance	:	Slightly Hazy		
Reaction (pH)	:	6.0		4.5 - 8.0
Specific Gravity	:	1.015		1.010 - 1.030
CHEMICAL EXAMINA	<u>TION</u>			
Protein	:	Absent		Absent
Glucose	:	Present (+++)		Abesnt
Ketones Bodies	:	Absent		Abesnt
Occult Blood	:	Absent		Absent
Bilirubin	:	Absent		Absent
Urobilinogen	:	Absent		Normal
MICROSCOPIC EXAM	INATION			
Epithelial Cells	:	2 - 3	/ hpf	
Pus cells	:	2 - 3	/ hpf	
Red Blood Cells	:	Absent	/ hpf	
Casts	:	Absent	/ lpf	Absent / lpf
Crystals	:	Absent		Absent
OTHER FINDINGS				
Yeast Cells	:	Absent		Absent
Bacteria	:	Absent		Absent
Mucus Threads	:	Absent		
Spermatozoa	:	Absent		
Deposit	:	Absent		Absent
Amorphous Deposits	:	Absent		Absent
sample type:Urine				
Mathad:\/iaual and Miar	ocochio			

### Method:Visual and Microscopic

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 24/11/2024 13:57:11)

----- End Of Report -----





Dr. Santosh Khairnar M.D. (Pathologist) Reg. No.-2000/08/2926





Registration ID : 27504 : MRS. PRIYA MANGESH KULKARNI Name : 54 Yrs. / F

Age/Sex Ref. By : Mediwheel Printed

Sent By : Arcofemi Healthcare Pvt Ltd

: 26/11/2024 11:53:46

Sample Received Report Released

Sample Collection

: 23/11/2024 14:39:46

: 23/11/2024 14:39:46

: 25/11/2024 12:50:38

**X RAY CHEST PA VIEW** 

### **CLINICAL PROFILE : NO COMPLAINTS.**

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

### IMPRESSION:

No significant abnormality detected.





っきぃ Dr. Raj Shah DMRE, M.B.B.S REG. NO. 2019/05/3609



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Name	: MRS. PRIYA MANGESH	KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex	: 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 12:50:38
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt I	Ltd	



(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 12:50:38)

----- End Of Report -----



**Dr. Raj Shah** DMRE , M.B.B.S REG. NO. 2019/05/3609





27504 231124		Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46
Name	: MRS. PRIYA MANGESH	I KULKARNI		Sample Received	: 23/11/2024 14:39:46
Age/Sex	: 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 11:18:18
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	

### **USG ABDOMEN & PELVIS - FEMALE**

**Liver:-** is normal in size(14.6 cm) and **shows raised echotexture.** No focal or diffuse lesion is seen. The portal and hepatic veins are normal. There is no IHBR dilatation seen.

**Gall Bladder:-** is partially distended. No calculus or mass lesion is seen. No GB wall thickening or pericholecystic fluid is seen.

Visualised **CBD** is normal.

Pancreas:-is normal in size, shape and echotexture. There is no focal lesion seen.

Spleen:- is normal in size (8.6 cm) and echotexture. No focal lesion is seen.

**Kidneys:-** Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 9.3 x 3.8 cms.

Left kidney – 9.9 x 4.0 cms.

**Urinary Bladder:-** is well distended and shows normal wall thickness. There is no intraluminal lesion within.

Uterus:- Post menopausal status.

Both adnexae appear normal. No e/o of free fluid noted in POD.

No ascites is seen. No significant lymphadenopathy is seen.

### **IMPRESSION:**

### - Grade I fatty liver.

Thanks for the Referral

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 11:18:18)



**Dr. Raj Shah** DMRE , M.B.B.S REG. NO. 2019/05/3609





		U	SG BOTH BREAST		
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt I	_td	
Age/Sex	: 54 Yrs. / F	Printed	: 26/11/2024 11:53:46	Report Released	: 25/11/2024 11:18:18
Name	: MRS. PRIYA MANGESH	KULKARNI		Sample Received	: 23/11/2024 14:39:46
27504 231124		Registration ID	: 27504	Sample Collection	: 23/11/2024 14:39:46

- Both breasts show normal fibroglandular & fibro fatty parenchyma.
- There is no solid, cystic lesion or abnormal dilatation of ducts noted on either side.
- No significant axillary lymphadenopathy is seen.

### **IMPRESSION**:

• No significant abnormality is seen

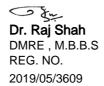
### Thanks for referral

BIRADS CATEGORY : (0 = requires additional evaluation , 1 = Negative , 2 = benign findings , 3 = probably benign findings , 4 = suspicious abnormality , 5 = highly suggestive of malignancy).

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 11:06:52)

----- End Of Report -----









Registration ID : 27504

Sample Collection Sample Received

: 23/11/2024 14:39:46

Age/Sex

Name

: MRS. PRIYA MANGESH KULKARNI

: 26/11/2024 11:53:46

: Arcofemi Healthcare Pvt Ltd

Report Released

: 23/11/2024 14:39:46

: 23/11/2024 16:14:09

: 54 Yrs. / F Ref. By : Mediwheel

Printed Sent By

### **OPTHALMIC EVALUATION**

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Nor	mal
Remarks	Nor	mal

(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 23/11/2024 16:14:09)







Registration ID : 27504

: MRS. PRIYA MANGESH KULKARNI Name Age/Sex : 54 Yrs. / F

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: 23/11/2024 14:39:46

: 23/11/2024 16:14:09

Ref. By : Mediwheel

Printed

Report Released

: 26/11/2024 11:53:46

Sent By

: Arcofemi Healthcare Pvt Ltd

## CERVICAL CYTOLOGY REPORT

## **PAPANICOLAOU SMEAR (CONVENTIONAL)**

Specimen :- 2 unstained air dried smear received

Stained with papanicolaou method and examined.

Smear shows :

Moderately cellular smears show mainly superficial squamous, many squamous metaplastic cells and few parabasal cells with degenerative changes.

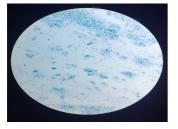
Background shows mild inflammatory cells.

No intraepithelial lesion or malignancy.

IMP: Postmenopausal pap smear.

#### Comments:

The smears are reported using bethesda system for cervical cytology(2014) (Interpretation(s)



(Collected At: 23/11/2024 14:39:46, Received At: 23/11/2024 14:39:46, Reported At: 25/11/2024 15:28:39)

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ME	DICAL EXAMINATION		Pulse (per miner
Name Mr./ Mrs./ Miss	Pripa Eulkarna		
Sex	Male / Female		Examined by
Age (yrs.) 54	UHID :		Complaint & Durati
Date	23,11) 1202g	Bill No :	Other Symplian 4 (Mict. bowels atu)
Marital Status	Single / Married / Widow / W No. of Children :	idower :	Menstruar History
Present Complaints		NE E	E.
Past Medical History : Surgical History :	and 278) ( 278)	^ )	9
Personal History	Diet : Veg 1 / Mixed □ : Addiction : Smoking □ / Tobac Any Other : №	cco Chewing □ / Alc	ohol 🗆 :
Family History	Father = HT / DM / IHD / Stro Mother = HT / DM / IHD / Stro Siblings = HT / DM / IHD / Str	oke / Any Other	
History of Allergies	Drug Allergy No Any Other		na secolecjy <sup>tra</sup> n 70 - ann - Cétter
History of Medication	For HT / DM / HD / Hypothyro Any Other Dimicron		Tala - Migagi I
On Examination (O/E)	G. E. : faio R. S. : AEBE C. V. S. : 652 (N)		n high dias ú spéin 
	C. N. S. : Conconent P/A: Soft nentander Any Other Positive Findings :		Wei gen uiter 1

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Height 15-6 / cms	Weight 68-5 Kgs BMI 2.8.)
Pulse (per min.)	Blood Pressure (mm of Hg) 130/80 mm
1744	Gynaecology
Examined by	Dr.
Complaint & Duration	
Other Symptoms (Mict, bowels etc)	
Menstrual History	Menarche Cycle Loss
	Pain I.M.B P.C.B
	L.M.P Vaginal Discharge
	Cx. Smear Contraception
Obstetric History	
Examination :	Primanal Haranse
Breast	en an
Abdomen	
180 P.S. 1	Heldrich VOH
P.V	<ul> <li>India = Fin. (JM/ IHD / Shrife)</li> </ul>
Gynaecology Impression & Recommendation	
Recommendation	reiho tropoleti, Lieto i no otismista i fi kosten 18 19 - El 19 1 - El 19
Physician Impression	
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight

-Union

### DAWADI, SONAR PADA DOMBIVLI.

### Ms. MRS PRIYA KULKARNI

Age : 54/F Ref. by : MEDIWHEEL Indication1 : Indication2 : Indication3 :

4,407

-

ID : 70 Ht/Wt : 156/68 Recorded : 23-11-2024 12:17 TREADMILL TEST SUMMARY REPORT Protocol: BRUCE History: SUGAR Medication1 : Medication2 : Medication3 :

5

						B.P.	RPP		ST LEVEL (mr	n)		METS
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	(mmHg)	X100	II	V2	√5		
			-		112	130/80	145	-0.6	0.2	-0.3 -0.5	3	
SUPINE HYPERVENT	0:01	0:01			109	130/80	141	-0.8 -0.8	0.2	-0.5	5	
STANDING	0.01				108	130/80	140					4.80
STAGE 1	2:59	2:59	2.70	10.00	142	130/80	184	-1.8 -2.1	0.3	-1.2		6.33
STAGE 2	4:59	1:59	4.00	12.00	144	140/80	201			1000		
PEAK EXER	5:07	2:07			145	140/80	203	-2.1	0.6	-1.4	4	6.43
ESULTS												
xercise Duration	:	5:07 Minutes		100 harr								
ax Heart Rate		145 bpm 87 %	of target heart rate	e 166 ppm								
ax Blood Pressure		140/80 mmHg 6.43 METS										
ax Work Load eason of Terminati	ion :	Achieved THR				· · · · · · · · · · · · · · · · · · ·						
cason of remina									8	- 44		
APRESSIONS	:				SPONCE.	ST		~		- 47		
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.		er x		- 47		
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.		, er x		- 15		
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.				- 15		
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	IST.	R	$\bigcirc$				
MPRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.	R	$\bigcirc$	HIRAY			
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.	Dr.	VINAY	HIRAY DNB MED			
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.	Dr.	VINAY	HIRAY DNB MED			
MPRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.	Dr.	$\bigcirc$	HIRAY DNB MED 2/09/2681			
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	:ST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
IPRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE.	IST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
IPRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	:ST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
IPRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE.	IST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE. AT PEAK OF TE	ST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
APRESSIONS	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE.	IST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			
MPRESSIONS BOOD EFFORT TO IO ANGINA/ARRY EST IS NEGATIVE	LERANCE,	NORMAL IONOTI	NO SIGNIFICANT	SICHANGESI	SPONCE.	IST.	Dr.	VINAY	HIRAY DNB MED 2/09/2681			

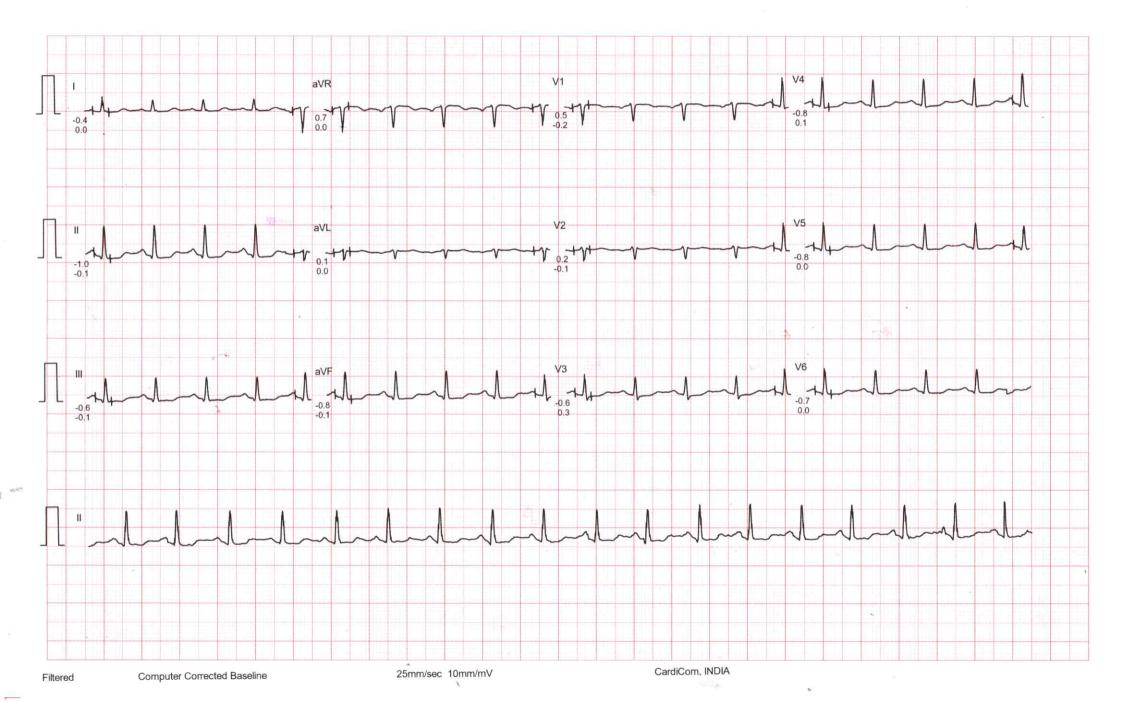
X

Ms. MRS PRIYA KULKARNI I.D. : 70 AGE/SEX : 54/F RECORDED : 23-11-2024 12:17

RATE : 111 BPM B.P. : 130/80 mmHg

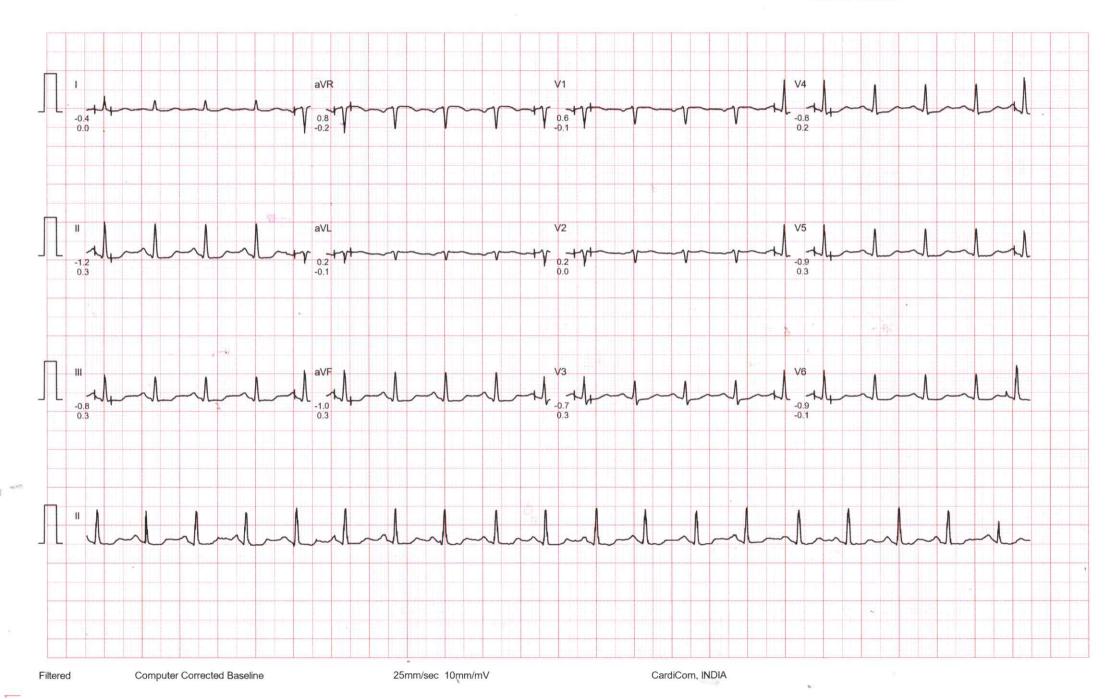
#### BRUCE RECOVERY PHASE TIME : 2:59

ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %



BRUCE RECOVERY PHASE TIME : 1:59 ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %

LINKED MEDIAN



 Ms. MRS PRIYA KULKARNI

 I.D. : 70

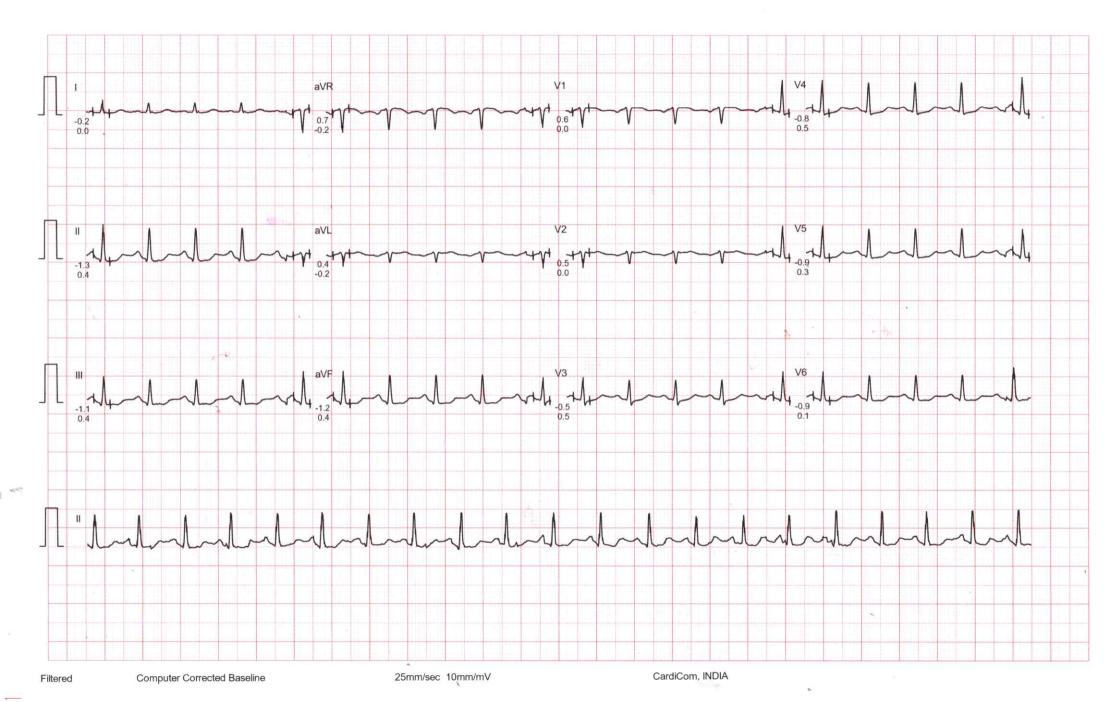
 AGE/SEX : 54/F
 R

 RECORDED : 23-11-2024 12:17
 B

RATE : 114 BPM B.P. : 130/80 mmHg

BRUCE RECOVERY PHASE TIME : 0:59 ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %

LINKED MEDIAN



 Ms. MRS PRIYA KULKARNI

 I.D. : 70

 AGE/SEX : 54/F
 RA

 RECORDED : 23-11-2024 12:17
 B.F

RATE : 123 BPM B.P. : 140/80 mmHg

Ms. MRS PRIYA KULKARNI I.D. : 70

AGE/SEX : 54/F

RATE: 145 BPM B.P. : 140/80 mmHg RECORDED : 23-11-2024 12:17

#### BRUCE PEAK EXER PHASE TIME: 5:07 STAGE TIME: 2:07

ST @ 10mm/mV 80ms PostJ SPEED: 4.0 Km./Hr. GRADE : 12.0 %



Ms. MRS PRIYA KULKARNI I.D. : 70 AGE/SEX : 54/F RECORDED : 23-11-2024 12:17

RATE : 142 BPM B.P. : 130/80 mmHg

#### BRUCE EXERCISE 1 PHASE TIME : 2:59 STAGE TIME : 2:59

ST @ 10mm/mV 80ms PostJ SPEED: 2.7 Km./Hr. GRADE: 10.0 %



#### EXCELLAS CLINICS-DOMBIVLI STANDING PRETEST

ST @ 10mm/mV 80ms PostJ

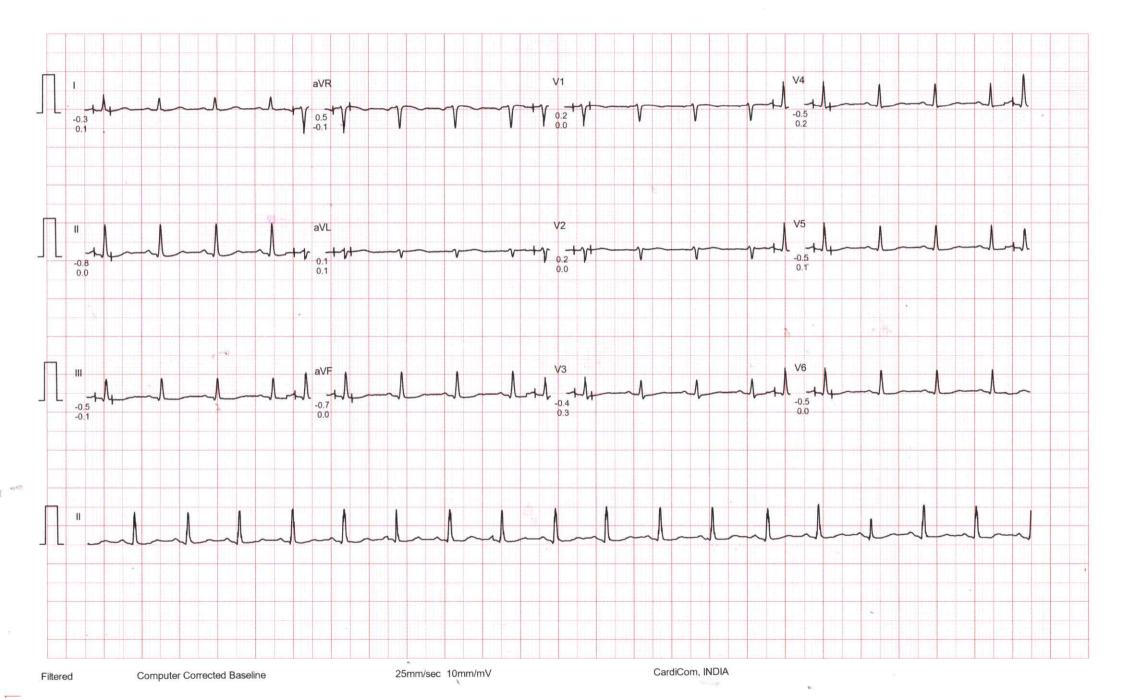
 Ms. MRS PRIYA KULKARNI

 I.D. : 70

 AGE/SEX : 54/F
 RATE

 RECORDED : 23-11-2024 12:17
 B.P. : 1

RATE : 108 BPM B.P. : 130/80 mmHg



#### EXCELLAS CLINICS-DOIVIDIVLI HYPERVENTILATION

Ms. MRS PRIYA KULKARNI

I.D. : 70 AGE/SEX : 54/F RECORDED : 23-11-2024 12:17

RATE : 109 BPM B.P. : 130/80 mmHg

STAGE TIME: 0:01

PRETEST

ST @ 10mm/mV 80ms PostJ



## SUPINE PRETEST

ST @ 10mm/mV 80ms PostJ

 Ms. MRS PRIYA KULKARNI

 I.D. : 70

 AGE/SEX : 54/F
 RATE : 112 BPM

 RECORDED : 23-11-2024 12:17
 B.P. : 130/80 mmHg

RAW E.C.G.

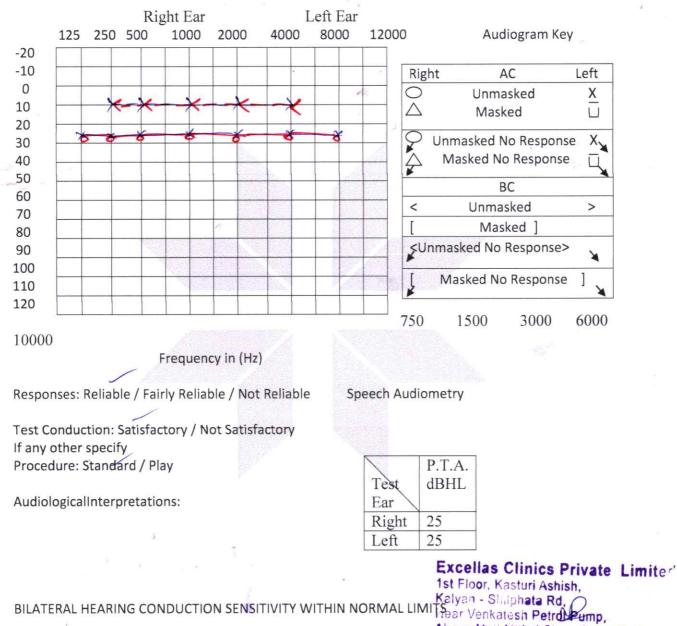




## NAME : MRS.PRIYA KULKARNI **REF BY: MEDIWHEEL**

AGE: 54YRS / FEMALE DATE: 23/11/2024

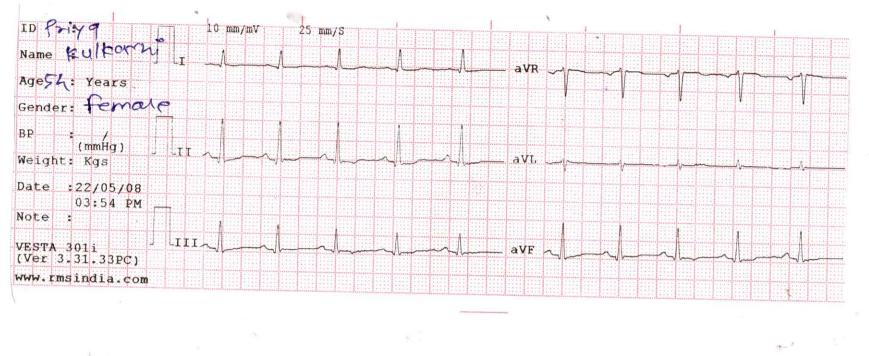
#### **AUDIOGRAM**

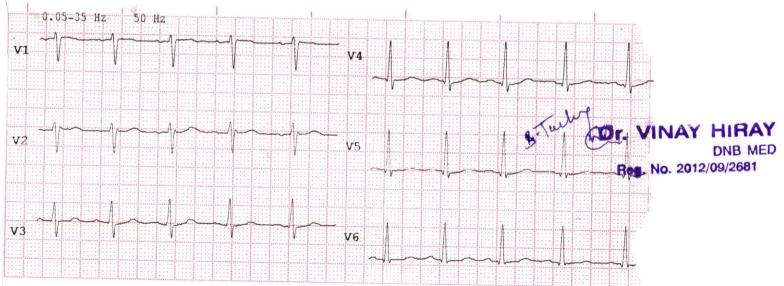


Above Moti Mithai Shop, Sonar Pada. Dombivli East, Maharashtra 421201 M - 9930058716

AUDIOLOGIST







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