



सत्यमेव जयते  
भारत सरकार



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार

Unique Identification Authority of India  
Government of India

नामांकन क्रम / Enrollment No 1207/80464/11422

To,  
पूजा पाठक  
Pooja Pathak  
D/O: Rajendra Kumar Pathak  
M-316  
gautam nagar  
govindpura  
Huzur  
Govindpura Huzur Bhopal  
Madhya Pradesh 462023  
9617306485

09/02/2013

Ref: 774 / 12C / 871389 / 872771 / P



SH292383689DF



आपका आधार क्रमांक / Your Aadhaar No. :

**5854 2078 3569**

**आधार – आम आदमी का अधिकार**



सत्यमेव जयते

भारत सरकार  
GOVERNMENT OF INDIA



पूजा पाठक  
Pooja Pathak  
जन्म वर्ष / Year of Birth : 1985  
महिला / Female



**5854 2078 3569**

**आधार – आम आदमी का अधिकार**



Scanned with OKEN Scanner

## Laboratory Report

**Patient Name : MRS POOJA PATHAK**



**CPL24/33677**

Age/Gender : 39 Yrs/Female

Registration Date : 13/11/2024 12:39 PM

Ref. Dr. : CMH HOSPITAL

Collection Date : 13/11/2024 12:40 PM

Center : CMH OPD

Report Date : 13/11/2024 02:14 PM



### HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>BLOOD GROUP AND RH FACTOR</b>			
ABO Type	A		
Rh Factor	POSITIVE(+VE)		

### BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>Post-Prandial Blood Sugar</b>	96.0	mg/dl	70 - 140
<i>Method: GOD-POD</i>			
<b>Interpretation:-</b>			
Normal: 70-140			
Impaired Glucose Tolerance:140-200			
Diabetes mellitus: >= 200			
(on more than one occasion)			
<b>BILIRUBIN-SERUM</b>			
Total Bilirubin-Serum	0.83	mg/dl	0.2 - 1.2
Direct Bilirubin-Serum	0.14	mg/dl	0.0 - 0.3
Indirect Bilirubin-Serum	0.7	mg/dl	0.2 - 0.8
<i>Method: DIAZO</i>			



NABL-M(EL)T-02622



9001:2015

*Sushil*

**Dr. Sushil Kumar Sharma**  
 M.D (Pathology)  
 Consultant Pathologist  
 Reg. No.-MP-30165

## Laboratory Report

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BLOOD UREA	22.7	mg/dl	13 - 45
BUN	11		7 - 21

Method: Calculated

### Clinical Significance:

Urea Nitrogen (BUN) - Urea is the principle waste product of protein catabolism. BUN is most commonly measured in the diagnosis and treatment of certain renal and metabolic diseases. Increased BUN concentration may result from increased production of urea due to

- (1) diet or excessive destruction of cellular proteins as occurs in massive infection and fevers,
- (2) reduced renal perfusion resulting from dehydration or heart failure,
- (3) nearly all types of kidney disease, and
- (4) mechanical obstruction to urine excretion such as is caused by stones, tumors, infection, or stricture. Decreased urea levels are less frequent and occur primarily in advanced liver disease and in overhydration.

<b>Serum-Creatinine</b>	0.76	mg/dL	0.4 - 1.50
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Method: Enzymatic

### Interpretation

The primary use of a creatinine test is to better understand how well the kidneys are working. A measurement of creatinine can be employed for screening, diagnosis, and/or monitoring of kidney problems.

<b>SGPT (ALT)- Serum</b>	11.3	unit/L	5 - 45
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Method: IFCC

### Clinical Significance

Alanine Aminotransferase (ALT) (REFL) - Alanine Aminotransferase (ALT) measurements are particularly useful in the diagnosis and management of certain liver diseases, e.g., viral hepatitis and cirrhosis. ALT activity in tissue is generally much lower than aspartate aminotransferase (AST) activity and is found in highest concentrations in the liver. Significant elevations of ALT occur only in diseases of the liver. ALT is often measured in conjunction with AST to determine whether the source of the AST is the liver or the heart. ALT is normally not elevated in cases of myocardial infarction, i.e., a normal ALT, in conjunction with an elevated AST, tends to suggest cardiac disease. However, slight elevations of ALT may occur if an infarct destroys a very large volume of heart muscle.




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### CLINICAL BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>Fasting Blood Sugar</b> <i>Method: GOD-POD</i>	96.0	mg/dl	Normal: 70-110 Impaired Fasting Glucose(IFG): 100-125

Diabetes mellitus:  $\geq 126$

**Note:-** An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.




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### URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>URINE ROUTINE</b>			
<b>General Examination</b>			
Colour	Pale Yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.025		-1.005-1.030
<b>Chemical Examination</b>			
Urine Albumin	Absent		Absent
Urine Ketones	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative
<b>Microscopic Examination</b>			
RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Bacteria	Not seen		Not seen
Yeast Cells	Not seen		Not seen

**Note:** 1. Chemical examination through Dipstick includes test methods such as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method).. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from the vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight.




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Test Description	Result	Unit	Biological Reference Ranges
<b>COMPLETE BLOOD COUNT</b>			
Haemoglobin	<b>10.8</b>	gm/dL	11.0 - 15.0
RBC Count	4.32	mil/cu.mm	3.50 - 5.50
Hematocrit HCT	<b>34.4</b>	%	37.0 - 47.0
Mean Corp Volume MCV	<b>79.6</b>	fL	80.0 - 100.0
Mean Corp Hb MCH	<b>25.0</b>	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	31.4	gm/dL	32.0 - 36.0
Platelet Count	2.61	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	8.7	10 <sup>3</sup> /cu.mm	4.0 - 11.0
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>			
Neutrophils	<b>72</b>	%	40 - 70
Lymphocytes	23	%	20 - 40
Monocytes	03	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01
<b>Absolute Differential Count</b>			
Absolute Neutrophils Count	6.3	thou/mm <sup>3</sup>	2.00 - 7.00
Absolute Lymphocyte Count	2.0	thou/mm <sup>3</sup>	1.00 - 3.00
Absolute Monocytes Count	0.3	thou/mm <sup>3</sup>	0.20 - 1.00
Absolute Eosinophils Count	0.2	thou/mm <sup>3</sup>	0.02 - 0.50

**EDTA Whole Blood** - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.




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Test Description	Result	Unit	Biological Reference Ranges
------------------	--------	------	-----------------------------

**ESR - ERYTHROCYTE  
SEDIMENTATION RATE**

16

mm/hr

0 - 20

Method: Wintrobess

### INTERPRETATION :

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

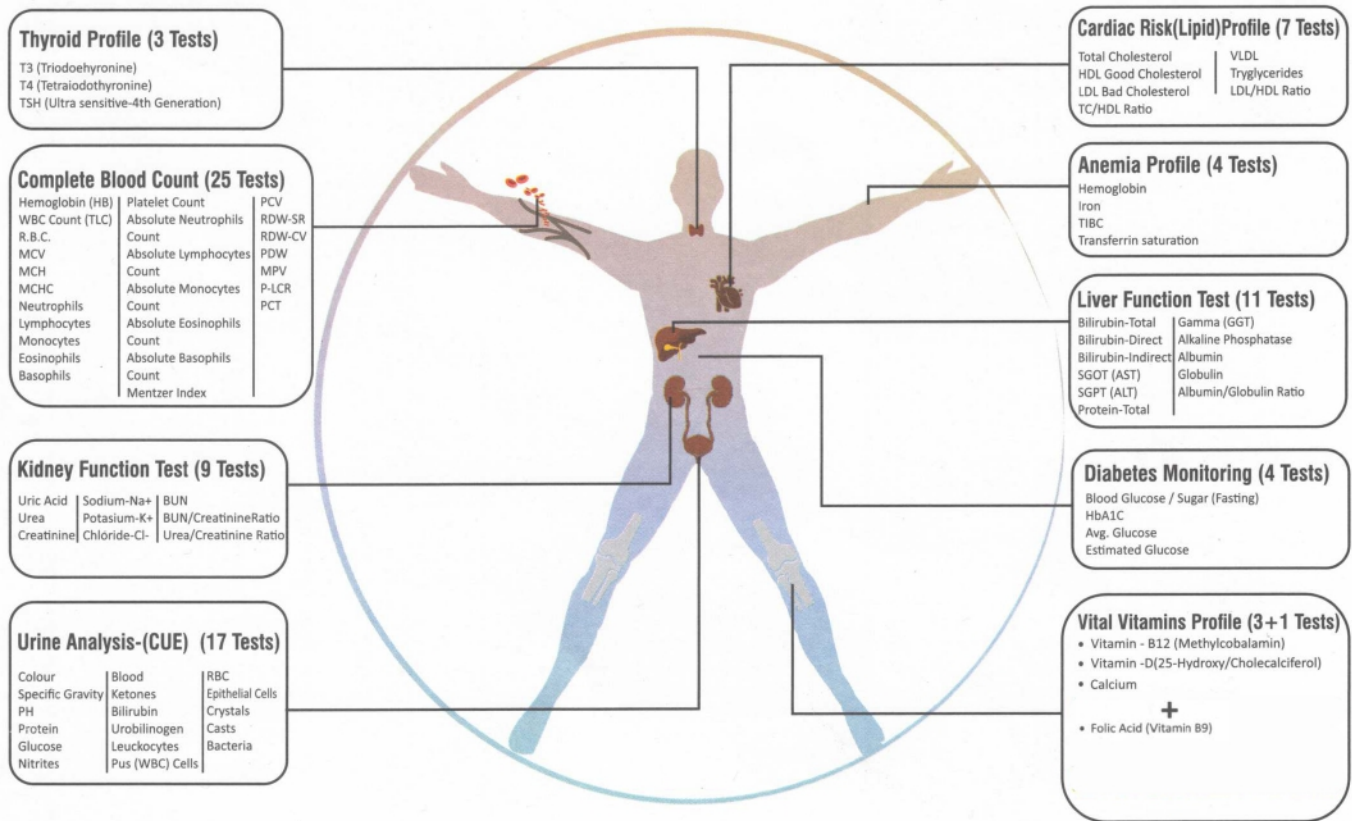
\*\*\*\* End of the report\*\*\*\*

*This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.*




**Dr. Sushil Kumar Sharma**  
**M.D (Pathology)**  
**Consultant Pathologist**  
**Reg. No.-MP-30165**

# BODY CARE



## CONDITIONS OF REPORTING

- Individual laboratory investigations should not be considered as conclusive and should be used along with other relevant clinical examinations to achieve the final diagnosis. Therefore these reported results are for the information of referring clinician only
- The values of a laboratory investigation are dependent on the quality of the sample as well as the assay procedures used. Further all samples collected outside Citi Pathlabs labs / patient centers are required to be prepared, stored, labelled and brought as per the guidelines of Citi Pathlabs. Citi Pathlabs cannot be held liable for incorrect results of any samples which are not as per the guidelines issued
- Electronic images in the report are created by electronic processing . Citi Pathlabs makes no expressed or implied warranties or representations with respect to it and takes no responsibility for the authenticity , quality and size of the image , affected possibly due to a computer virus or other contamination
- Citi Pathlabs confirms that all tests have been carried out with reasonable care, clinical safety & technical integrity  
**A.** However due to certain factors such as reagent inconsistency , machine breakdown etc. beyond its control which could affect the testing , it does not make any representation or give any warranty about the accuracy of the reported results  
**B.** The test results are to be used for help in diagnosing / treating medical diseases & not for forensic applications. Hence these results cannot be used for medico - legal purposes
- Partial representation of report is not allowed.
- All dispute / claims concerning to this report are subject to Bhopal jurisdiction only.

### For Any Enquiry

Citi Pathlabs  
 Flat No. 004, Shivaay South City Complex,  
 Phase-2, G-3 Gulmohar Colony, Bhopal (M.P.)  
 citipathlabs@gmailcom  
 9454786340, 9407658222



MER- MEDICAL EXAMINATION REPORT

Date of Examination	13-11-2024.		
NAME	POOJA PATHAK		
AGE	39	Gender	F
HEIGHT(cm)	157	WEIGHT (kg)	81.5
B.P.	110/70		
ECG	WNL		
X Ray	Normal		
Vision Checkup	Color Vision : Normal		
	Far Vision Ratio : No		
	Near Vision Ratio : No		
Present Ailments	No Any Present Ailment's.		
Details of Past ailments (If Any)	No Any Past Ailments.		
Comments / Advice : She /He is Physically Fit	She is Physically fit		

Dr. Sabyasachi Gupta  
 MBBS (Gold Medalist) MD (Med.) RGP (UK)  
 Reg No.: 11671

Signature with Stamp of Medical Examiner







# CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755 - 4250134  
Mobile No. : 7771008660, 8319214664, 9303135719

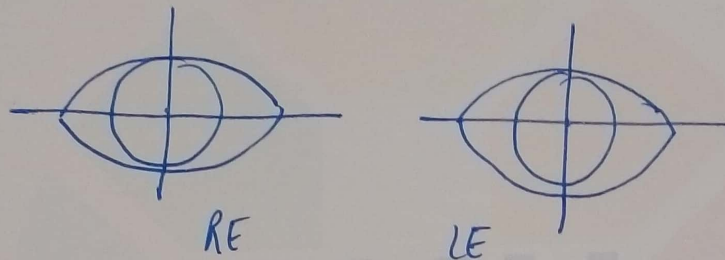


POOJA PATHAK  
39Y/F

13/11/24

c/o

No complaints



RE } NAD  
LE }

- Both the eyes have normal & clear vision.
- No colour blindness.
- No itching.
- No watery discharge in any eye.

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat

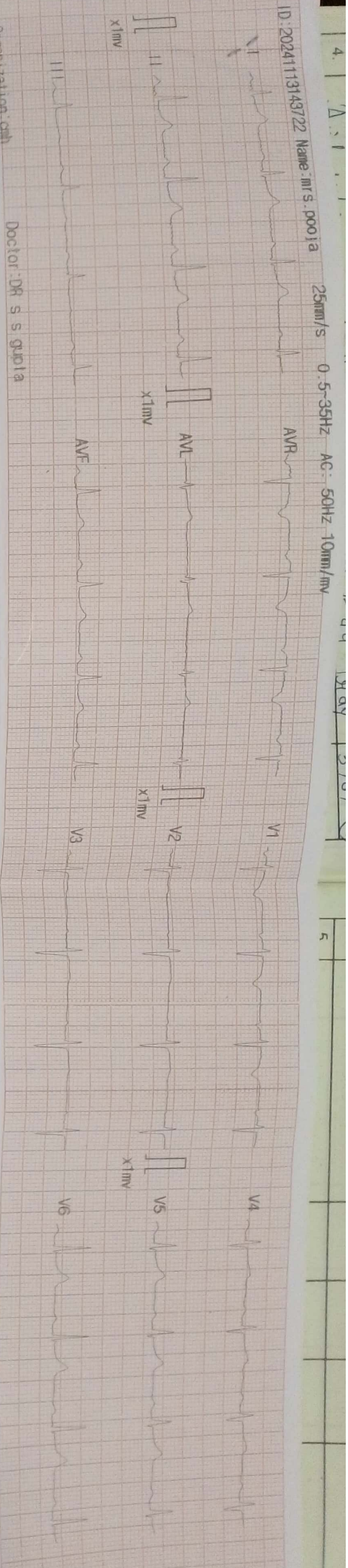


ID: 2024113143722 Name: m.s. pooja

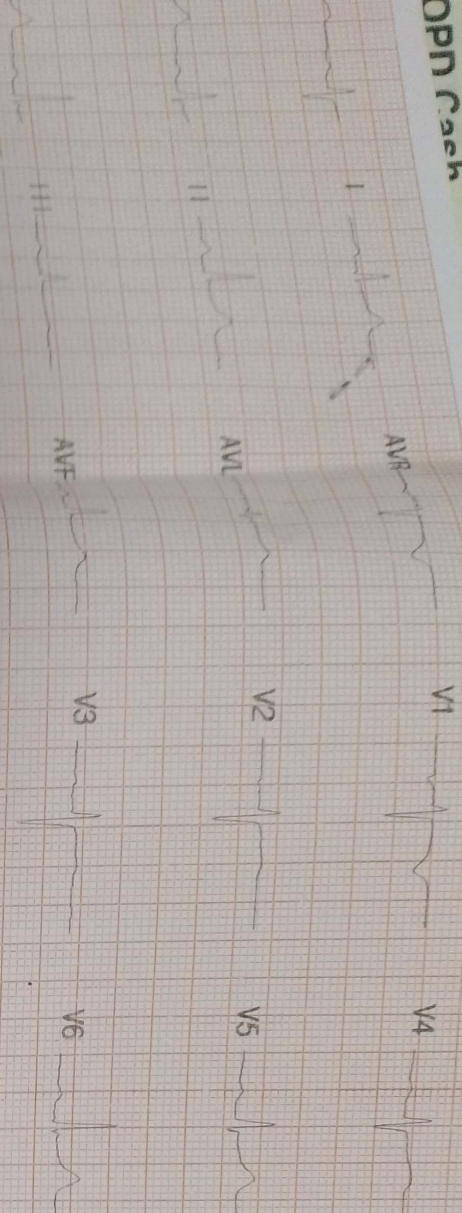
25mm/s 0.5-35Hz AC: 50Hz 10mm/mV

Organization: cml

Doctor: DR. S. Gupta







ID : 20241113143722  
Name : Mrs. pooja  
Sex : Female  
Age : 39  
HR : 70  
R-R : 854  
P-R : 206  
QRS : 82  
QT/QTc : 416/449  
P/QRS/T : 55/ 62/ 45  
RV5/SV1 : 0.493/-0.517 mV  
RV5+SV1 : -0.084 mV  
QTcf : 0.487

001: Sinus Rhythm  
171: Normal ECG

Dr. Sabyasachi Gupta  
MBBS (Gold Medalist) RPPGP (UK)  
Reg No.: 11671

Reference Report confirmed by:

*Pooja*  
13/11/2024





Triage Category	Priority	Color	Conditions
Immediate	1	RED	Chest Pain, Stroke, Fracture, 7.2 hours
Delayed	2	YELLOW	Minor trauma, Head injury, 7.2 hours
Minor	3	GREEN	Minor trauma, Head injury, 7.2 hours
Expectant	4	BLACK	Death, 7.2 hours

सुप्त स्थिति  
कीवलाप  
धरम नहीं होता है  
कामाचारी  
की  
कामाचारी



 GPS Map Camera



भोपाल, मध्य प्रदेश, भारत

M216, गौतम नगर, हाऊसिंग बोर्ड कॉलोनी, भोपाल, मध्य प्रदेश


462024, भारत

Lat 23.235088° Long 77.441146°

13/11/24 11:24 AM GMT +05:30





 GPS Map Camera



भोपाल, मध्य प्रदेश, भारत

M216, गौतम नगर, हाऊसिंग बोर्ड कॉलोनी, भोपाल, मध्य प्रदेश

462024, भारत

Lat 23.235088° Long 77.441146°

13/11/24 11:24 AM GMT +05:30





Patient Name :	MRS. POOJA PATHAK	Age /sex :	39 Y/F
Referred .By:	INS	Date	13.11.2024

## X-RAY CHEST PA VIEW

- Bilateral lungs Appear Clear.
- Bilateral Hilar Shadows Appear Clear .
- Bilateral CP Angels Appear Clear .
- Both The Domes of Diaphragm Appear normal in Shape and position
- Visualized bony cage and soft tissue appear normal .

## IMPRESSION

-NO SIGNIFICANT ABNORMALITY SEEN.

Dr. DADHANIA PRINALBEN  
MD RADIODIAGNOSIS  
CONSULTANT RADIOLOGIST



RT

PA

Name: MRS. POOJA PATHAK 39Y/F  
Sex: F

13.11.2024

Signature