



भारत सरकार
GOVERNMENT OF INDIA



Neelam Kumari
Year of Birth : 1991
Female



7961 9008 3107

आधार — आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

Address:

D/O Mahesh Kumar, vill.pipal wali dhani
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Jhunjhunun, Rajasthan, 333032



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श्रीलक्ष्मी
 GOVERNMENT OF INDIA


 Neelam Kurnati
 Year of Birth : 1991
 Female

7961 9008 3107




भारत — श्रीलक्ष्मी का अधिकार





Rajasthani Diagnostic &
 Medical Research Centre
 Jhunjhunu

(Handwritten Signature)

Dr. Subham
 @9555522902


श्रीलक्ष्मी
 UNDER IDENTIFICATION AUTHORITY OF INDIA

Address:
 D/O Mahesh Kurnati, Vill. Chhal wali dhani,
 post. Bhoni via. Gadhia 909, Bhoni, Jhunjhunu,
 Rajasthan, Rajasthan, 333032

16.11.2024 10:53:27
RAJASTHANI DIAGNOSTIC CENTRE
Indira nagar
Jhunjhunu

Female

Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

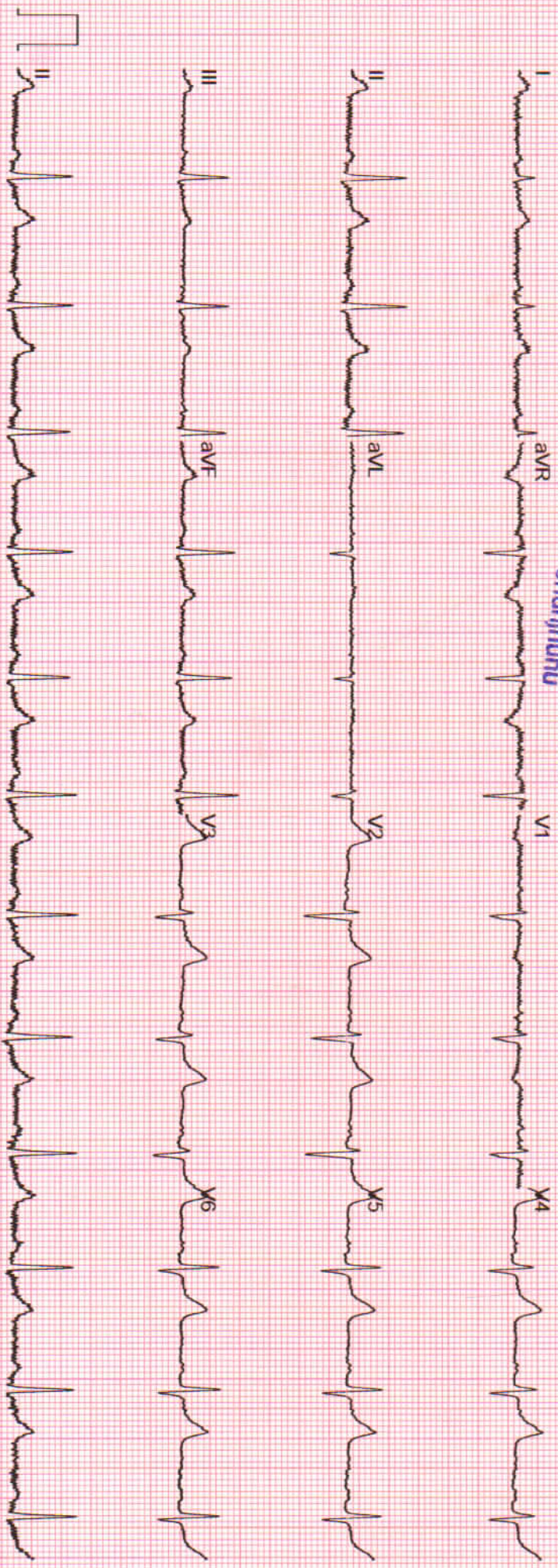
73 bpm
- / - mmHg

QRS : 76 ms
QT / QTcBaz : 414 / 456 ms
PR : 158 ms
P : 98 ms
RR / PP : 816 / 821 ms
P / QRS / T : 58 / 77 / 63 degrees

Normal sinus rhythm
Normal ECG

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

[Signature]
Rajasthan Diagnostic &
Medical Research Centre
Jhunjhunu



Unconfirmed





RAJASTHANI DIAGNOSTIC & MR CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME	NEELAM KUMARI	AGE-	SEX: F
REF/BY:	BOB HEALTH CHECKUP	DATE	16-Nov-24

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver: is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

Gall bladder: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

Pancreas: is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

Rt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Lt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Spleen: is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

Urinary Bladder: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

Uterus: is normal in size, regular in shape and outline. Uterus is anteverted and ante flexed. Endometrium is normal in thickness. No sonolucent or echogenic mass lesion seen.

Adenexa: Both adenexal regions are seen normal. No focal mass or lesion is seen. Bilateral ovaries are normal in appearance.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

IMPRESSION:

❖ NORMAL SONOGRAPHY STUDY.

Advised: clinicopathological correlation

DR. ANUSHA MAHALAWAT
MD RADIODIAGNOSIS

Dr. Anusha Mahalawat
MD (Radiodiagnosis)
(RMC. 38742/25437)



आपातकालीन सेवाएं

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FULLY COMPUTERISED PATHOLOGY LABORATORY

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Patient ID		Patient Name	NEELAM KUMARI
Age	33 Yrs	Date	16-Nov-24
Gender	FEMALE	Ref Doctor	SELF

CHEST X RAY (PA VIEW)

OBSERVATION:

Both lung fields appear clear.

Both costo-phrenic angles appear clear.

Cardiothoracic ratio is normal.

Both domes of diaphragm appear normal.

Thoracic soft tissue and skeletal system appear unremarkable.

IMPRESSION:

➤ No Significant abnormality is noted.

ADVICE: Please Correlate Clinically.

This Report is not valid for any medico legal purpose. This report is prepared on the basis of digital DICOM images transmitted via internet without identification of patient, not on the films or plates provided to the patient.

DR. BALAJI BALIRAM KALE
MBBS, DMRD, DNB (Radiodiagnosis)
Registration number - 2015063398

Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests.



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B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977



Name	:NEELAM KUMARI	Father/Husband	:VIJAY SINGH	IPD/OPD status	:OPD
Age/Sex	:32 Y/Female	Reg. No.	:OutSide	Catagory	:CASH
Consultant	:M. S. MEEL	Accession No.	:20241116024	Bed No.	:-
		BILL NO	:2403160925	Date	:16/11/2024 11:58:36 AM

TRANSTHORACIC ECHO-DOPPLER TEST REPORT

MITRAL VALVE-

Morphology AML-Normal/Thickening/Calcification/Flutter/Restricted mobility/SAM/Doming.
PML-Normal/Thickening/Calcification/Prolapse/Fixed/Restricted Mobility/Flutter.

Doppler- Normal/Abnormal

Mitral Regurgitation

Mitral Stenosis

Absent/Trace/Mild/Moderate/Severe.

Absent/Present.

Mitral E/A Velocity= 94/72 (cm/sec).

TRICUSPID VALVE-

Morphology -Normal/Atresia/Thickening/Calcification/Prolapse/Doming.

Doppler- Normal/Abnormal

Tricuspid Regurgitation

Tricuspid Stenosis

Absent/Trace/Mild/Moderate/Severe.

Absent/Present.

PULMONARY VALVE-

Morphology -Normal/Atresia/Thickening/Doming/Vegetation.

Doppler- Normal/Abnormal

Pulmonary Regurgitation

Pulmonary Stenosis

Pulmonary Velocity = 79 (cm/sec)

Absent/Trace/Mild/Moderate/Severe.

Absent/Present.

AORTIC VALVE-

Morphology -Normal/Thickening/Calcification/Flutter/Sclerosis/Doming.

No of Cusps- 1/2/3.

Doppler- Normal/Abnormal

Aortic Regurgitation

Aortic Stenosis

Aortic Velocity = 104 (cm/sec)

Absent/Trace/Mild/Moderate/Severe.

Absent/Present.

Aorta = 2.6cm (2.0 – 3.7cm)

Left-Atrium = 4.5 cm (1.9 – 4.0 cm)

LV measurement

Diastole

Systole

IVS

0.6 cm (0.6-1.1cm)

0.9 cm

LVID

5.4 cm (3.7-5.6cm)

3.5 cm (2.2 – 4.0 cm)

LVPW

1.06 cm (0.6-1.1cm)

1.09 cm

LV

Normal/Enlarged/Clear/Thrombus/Hypertrophy.

Contraction Normal/Reduced.

Regional wall motion abnormality : Present/Absent.

LA Normal/Enlarged/Clear/Thrombus.

RA Normal/Enlarged/Clear/Thrombus.

RV Normal/Enlarged/Clear/Thrombus.



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(कृपया अपनी पुरानी रिपोर्ट साथ लावें)

भूल भिन्न परीक्षण कराने व कसबाबा दण्डनीय उपचार हे
उपरोक्त शिवालय 104 टोल फ्री सेवा पर की जा सकती है

MAHAVIR HOSPITAL

Health & Hygiene

D-15, Indira Nagar, Subhash Marg, JHUNJHUNU (Raj.)



Tel. : 01592-232361
9680960962

MAHAVIR HOSPITAL

COMMENTS & SUMMARY-

ECHO window-Good/Fair/Poor.

No regional wall motion abnormality seen, LVEF=55%.

Normal cardiac chamber dimensions seen.

Mild MR, trace TR, no PAH.

Normal systolic function.

Normal diastolic function.

No I/C clot/vegetation.

Intact IAS/IVS & No CoA, no pericardial effusion.

Dr M S Meel
MD Medicine
Senior Physician

Dr Pallavi Choudhary
MD Paediatrics
Consultant



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(कृपया अपनी पुरानी रिपोर्ट साथ लावें)

यूएन विलिंग पीरियड कानून व कारवाला दण्डनीय अपराध है
इसकी शिकारवा 104 टोल फ्री सेवा पर की जा सकती है

MAHAVIR HOSPITAL

Health & Hygiene

D-15, Indira Nagar, Subhash Marg, JHUNJHUNU (Raj.)



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Dr M S Meel
MD Medicine
Senior Physician

Dr Pallavi Choudhary
MD Paediatrics
Consultant



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(कृपया अपनी पुरानी रिपोर्ट साथ लावें)



भूयः शिक्षण परीक्षण कक्षा व कार्यालय एमडब्ल्यू जयराय है
इसका पता 104 टोल फ्री सेवा वा की जा सकती है



RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

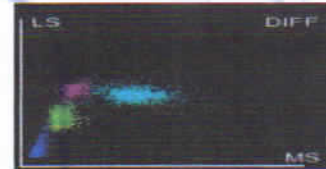
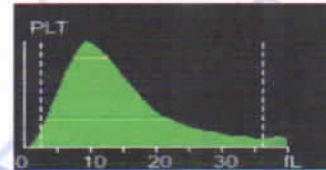
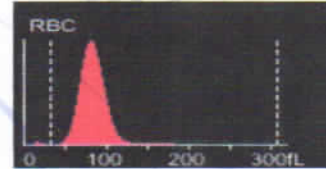
MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Hematology Analysis Report

First Name: NEELAM KUMARI Sample Type: Sample ID: 7
 Last Name: Department: Test Time: 16/11/2024 11:12
 Gender: Female Med Rec. No.: Diagnosis:
 Age: 33 Year

Parameter	Result	Ref. Range	Unit
1 WBC	4.07	4.00-10.00	10 ³ /uL
2 Neu%	43.6 L	50.0-70.0	%
3 Lym%	46.3 H	20.0-40.0	%
4 Mon%	7.8	3.0-12.0	%
5 Eos%	1.8	0.5-5.0	%
6 Bas%	0.5	0.0-1.0	%
7 Neu#	1.77 L	2.00-7.00	10 ³ /uL
8 Lym#	1.89	0.80-4.00	10 ³ /uL
9 Mon#	0.32	0.12-1.20	10 ³ /uL
10 Eos#	0.07	0.02-0.50	10 ³ /uL
11 Bas#	0.02	0.00-0.10	10 ³ /uL
12 RBC	4.01	3.50-5.50	10 ⁶ /uL
13 HGB	9.8 L	11.0-16.0	g/dL
14 HCT	35.0 L	37.0-54.0	%
15 MCV	87.4	80.0-100.0	fL
16 MCH	24.5 L	27.0-34.0	pg
17 MCHC	28.1 L	32.0-36.0	g/dL
18 RDW-CV	14.2	11.0-16.0	%
19 RDW-SD	51.7	35.0-56.0	fL
20 PLT	262	100-300	10 ³ /uL
21 MPV	10.1	6.5-12.0	fL
22 PDW	12.0	9.0-17.0	%
23 PCT	0.266	0.108-0.282	%
24 P-LCR	36.9	11.0-45.0	%
25 P-LCC	97 H	30-90	10 ³ /uL



Dr. Mamta Khuteta
M.D. (Path.)
RMC No : 4720/16260

Submitter: Operator: admin Approver:
 Draw Time: 16/11/2024 11:11 Received Time: 16/11/2024 11:11 Validated Time:
 Report Time: 17/11/2024 12:48 Remarks:

*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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RAJASTHANI DIAGNOSTIC & MRI CENTRE




FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: **NEELAM KUMARI**
Sr. No. : **15746**
Patient ID No.: **11831**
Age : **33** Gender : **FEMALE**
Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : **16-11-2024 11:11 AM**
Collected On : **16-11-2024 11:11 AM**
Received On : **16-11-2024 11:11 AM**
Reported On : **17-11-2024 12:49 PM**
Bar Code 
LIS Number **7 8 4 8**

LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol (Method : CHOD-PAP)	169.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	45.00	mg/dL	35--88
Triglycerides (Method : GPO)	114.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	101.20	mg/dL	0--150
VLDL Cholesterol	22.80	mg/dL	0--35
TC/HDL Cholesterol Ratio	3.76	Ratio	2.5--5
LDL/HDL Ratio	2.25	Ratio	1.5--3.5

HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	15	mm/hr	20
BLOOD GROUPING (ABO & Rh)	A+ Positive		

Ashish sethi

Dr. Ashish Sethi
Consultant Biochemist

24/7

EMERGENCY SERVICE BIOLOGIST

Kamini Khulela

Dr. Kamini Khulela
M.D. (Path.)

DMIC No. : 4733116280

PATHOLOGIST



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FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.
MC-5346

Patient Name: **NEELAM KUMARI**
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HAEMATOLOGY

HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	5.00	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	96.80	mg/dL	
eAG (Estimated Average Glucose)	5.37	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-

Fully Automated (EM 200) ERBA MANNHEIM.

Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

Ashish Sethi

Dr. Ashish Sethi
Consultant Biochemist

24/7
EMERGENCY SERVICE
BIOLOGIST

Namita Khule

Dr. Namita Khule
B.Sc (Path)
M.Sc (Path)

PATHOLOGIST



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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.
MC-5346

Patient Name: **NEELAM KUMARI**
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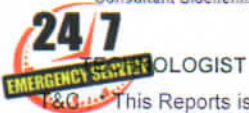
BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
Glucose Fasting (Method: GOD-POD)	94.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born, >1d: 50-80 Child: . 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121
Blood Sugar PP (Method: GOD-POD)	112.00	mg/dL	Glucose 2 h Postparandial: <120

KIDNEY FUNCTION TEST

Test Name	Observed Values	Units	Reference Intervals
Blood Urea (Method: Urease-GLDH)	24.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method: Enzymatic-Creatinase)	0.89	mg/dL	0.4--1.40
Calcium	9.88	mg/dL	8.5--11
Uric Acid (Method: Uricase-POD)	4.15	mg/dL	2.4--7.2

Ashish Sethi
Dr. Ashish Sethi
Consultant Biochemist



Kamta Khulela
Dr. Kamta Khulela
M.D (Path.)
TMC No. : 4720/16260

PATHOLOGIST



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आपका कालीन हिस्सा इस रिपोर्ट का हिस्सा नहीं है। यह रिपोर्ट केवल चिकित्सा उद्देश्यों के लिए है।



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BIO-CHEMISTRY Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.: -UV Kinetic)	36.00	U/L	5--40
SGPT/ALT(Tech.: -UV Kinetic)	25.00	U/L	5--40
Bilirubin(Total) (Method : Diazo)	0.78	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day : 1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.15	mg/dL	0--0.3
Bilirubin(Indirect)	0.63	mg/dL	0.1--1.0
Total Protein (Method : BIURET Method)	7.01	g/dL	Adults : 6.4 - 8.3 Premature : 3.6 - 6.0 Newborn : 4.6 - 7.0 1 Week : 4.4 - 7.6 7-12 months : 5.1 - 7.3 1-2 Years : 5.6 - 7.5 > 2 Years : 6.0 - 8.0
Albumin(Tech.: -BCG) (Method : BCG)	3.90	gm/dL	0-4 days: 2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y : 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Globulin(CALCULATION)	3.11	gm/dL	2.5--4.5
A/G Ratio(Tech.: -Calculated)	1.25		1.2 -- 2.5
Alkaline Phosphatase(Tech.: -Pnp Amp Kinetic)	214.00	U/L	108-306

Ashish Sethi

Dr. Ashish Sethi
Consultant Biochemist

24/7

EMERGENCY SERVICE

PHYSIOLOGIST

Mamta Khule

Dr. Mamta Khule
M.D. (Path.)
S.M.C. No. : 4720/16200

S.M.C. No. : 4720/16200

PATHOLOGIST



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THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.89	ng/ML	0.6 - 1.8 ng/ML
T4 (TotalThyroxine)	8.50	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	1.69	µIU/mL	0.35-5.50

Sample Type : **Serum**

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (**ARCHITECT- i1000 PLUS**) Abbott USA

Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

Ashish Sethi

Dr. Ashish Sethi
Consultant Biochemist



PHYSICIAN

Namita Khushu

Dr. Namita Khushu
M.D. (Path.)

DMC No. : 4720/1998



PATHOLOGIST

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B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977



RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: **NEELAM KUMARI**
Sr. No. : 15746
Patient ID No.: 11831
Age : 33 Gender : FEMALE
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 16-11-2024 11:11 AM
Collected On : 16-11-2024 11:11 AM
Received On : 16-11-2024 11:11 AM
Reported On : 17-11-2024 12:49 PM
Bar Code
LIS Number 7 8 4 8

URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
PHYSICAL			
Quantity	20	ml	
Colour	Pale Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.020		
PH	6.0		4.5-6.5
CHEMICAL			
Reaction	Acidic		
Albumin	trace		
Urine Sugar	Nil		
MICROSCOPIC			
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	3-5	/h.p.f.	
Epithelial Cells	1-2	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	
Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

Note: This report is not valid for medico legal purposes.

Ashish Sethi

Dr. Ashish Sethi
Consultant Biochemist



PATHOLOGIST

Namita Khule

Dr. Namita Khule
M.D. (Path.)
D.V.C. (U.S.)



PATHOLOGIST

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