



33826 080325

Name	: MRS. POOJA JAMRE	Registration ID	: 33826	Sample Collection	: 08/03/2025 10:22:01
Age/Sex	: 38 Yrs. / F	Printed	: 11/03/2025 18:24:14	Sample Received	: 08/03/2025 10:22:01
Ref. By	: BANK OF BARODA	Sent By	: Arcofemi Healthcare Pvt Ltd	Report Released	: 09/03/2025 10:36:45

COMPLETE BLOOD COUNT *

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 10.9	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 5.58	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 35.9	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 64.3	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 19.5	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 30.4	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 16.70	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 8040	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 59	%	40-75 %
Eosinophils Percentage (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 34	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 05	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 272000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 04	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

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

Note: Tests marked with * are included in NABL scope.

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 09/03/2025 10:36:45)



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





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Age/Sex : 38 Yrs. / F

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Report Released : 09/03/2025 10:36:45

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



NABL MELT-00683

Dr. Santosh Khairnar
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Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 81	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl
<i>Method: GOD-POD</i>			
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 85	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 10/03/2025 16:02:00)

HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.30	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10
<i>EDTA Whole Blood, Method: HPLC</i>			
Estimated Average Glucose (eAG)	: 105.41	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 Association) 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: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 09/03/2025 10:36:49)



Signature
Dr. Santosh Khairnar
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BLOOD GROUP


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'AB' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 09/03/2025 10:35:26)

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Ref. By : BANK OF BARODA	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 09/03/2025 10:36:03

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 122	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 59	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 41	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 69.20	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 11.8	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 1.7		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 3.0		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

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*

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LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.71	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.30	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.41	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 14	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 11	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 63	IU/L	42-98 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 6.9	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.5	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.4	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.88		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 16	U/L	0-38 U/L

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SERUM CREATININE

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.57	mg/dl	0.60-1.1 mg/dl

Serum, Method: Enzymatic

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

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BLOOD UREA NITROGEN (BUN)

Test	Result	Unit	Biological Ref. Range
Urea	: 17.33	mg/dl	13-40 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 8.10 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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SERUM URIC ACID


Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 2.50	mg/dl	2.6-6.0 mg/dl

Serum, Method: Uricase - POD

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

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BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 14.20		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)

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.1	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 8.00	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 1.94	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			


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: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 09/03/2025 10:35:53)

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





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Age/Sex : 38 Yrs. / F	Printed : 11/03/2025 18:24:14	Sample Received : 08/03/2025 10:22:01
Ref. By : BANK OF BARODA	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 09/03/2025 07:53:56

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<u>PHYSICAL EXAMINATION</u>			
Quantity :	30	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.015		1.010 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells :	2 - 3	/ hpf	
Pus cells :	2 - 3	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<u>OTHER FINDINGS</u>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

(Collected At: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 09/03/2025 07:53:56)

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

X RAY CHEST PA VIEW

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.

(Collected At: 08/03/2025 10:22:01, Received At: 08/03/2025 10:22:01, Reported At: 11/03/2025 11:33:19)

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



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-
2009/09/3296





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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

USG ABDOMEN & PELVIS - FEMALE

Liver:- is normal in size, shape and echotexture **and shows two echogenic focus largest measuring 14.2 x 13.2 mm in left lobe of liver.** The portal and hepatic veins are normal. There is no IHBR dilatation seen.

Gall Bladder:- is normally distended **and shows a polyp measuring 2.5 mm.** No GB wall thickening or pericholecystic fluid is seen.
CBD is normal.

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

Spleen:- is normal in size (8.5 cms) 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 – 9.0 x 3.1 cms.

Left kidney – 10.8 x 4.7 cms.

Urinary Bladder:- is well distended and shows normal wall thickness.

There is no intraluminal lesion within.

Uterus:- is anteverted, normal in size and measures 4.8 x 4.6 x 5.5 cms

Myometrium shows homogenous echo pattern. No focal lesion is seen.

ET : 6.4 mm

Ovaries:- appear normal in size, shape & show normal follicular pattern.

Right ovary measures – 2.3 x 2.2 cms.

Left ovary measures – 2.1 x 2.0 cms.

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

No ascites is seen. No significant lymphadenopathy is seen.

IMPRESSION:

- **Liver hemangiomas.**
- **Gall bladder polyp.**

Thanks for the Referral



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-
2009/09/3296





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Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

OPHTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

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MEDICAL EXAMINATION REPORT

Name	Mr./ Mrs./ Miss	Pooja Jambre	
Sex		Male / Female	
Age (yrs.)	38	UHID :	
Date		/ / 20	Bill No :
Marital Status		Single / Married <input checked="" type="checkbox"/> / Widow / Widower :	
		No. of Children : 2	
Present Complaints		Yes NO	
Past Medical History :		2 LSCS	
Surgical History :			
Personal History		Diet : Veg <input checked="" type="checkbox"/> / Mixed <input type="checkbox"/> :	
		Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input checked="" type="checkbox"/> .	
		Any Other : o/c	
Family History		Father = HT / DM / IHD / Stroke / Any Other	
		Mother = HT / DM / IHD / Stroke / Any Other	
		Siblings = HT / DM / IHD / Stroke / Any Other NO	
History of Allergies		Drug Allergy NO	
		Any Other	
History of Medication		For HT / DM / HD / Hypothyroidism NO	
		Any Other	
On Examination (O/E)		G. E. : Normal	
		R. S. : ACBS	
		C. V. S. : S1 S2	
		C. N. S. : normal	
		P/A : soft	
		Any Other Positive Findings : NO	

Height	164 / cms	Weight	52.5 Kgs	BMI	19.5
Pulse (per min.)	74	Blood Pressure (mm of Hg)	110/80		
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 :					
Breast					
Abdomen					
P.S.					
P.V.					
Gynaecology Impression & Recommendation					
Recommendation					
Physician Impression	EXCELLAS CLINICS PVT. LTD B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080.				
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight				

Excellas Clinics Pvt Ltd

Besment Vikas Paradise Below Axis Bank Mulund w

310/POOJA JAMRE 38 Yrs/Female 52 Kg/164 Cms

Date: 08-Mar-2025 01:45:11 PM

Ref. By :
Medication : NIL
Objective :

Summary

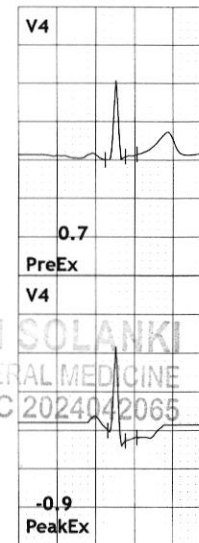
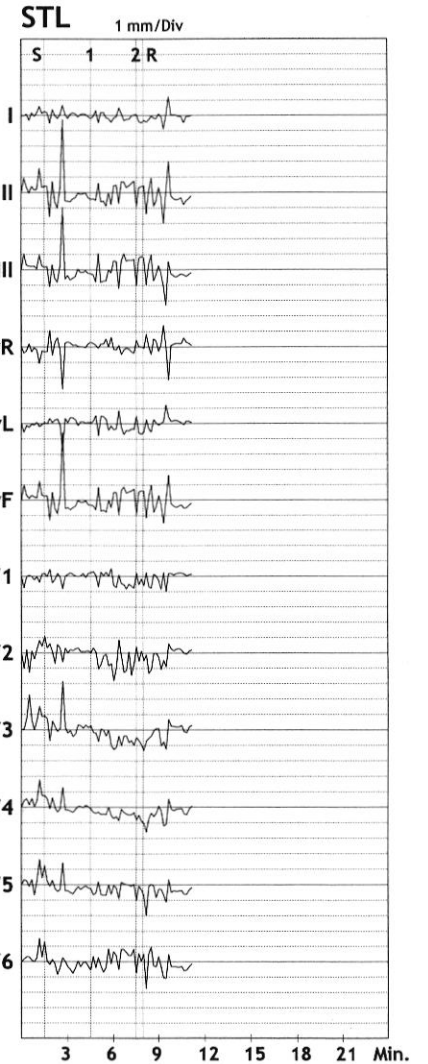
Protocol : BRUCE
History : NIL

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	71	110/80	78	-	
Standing					1.0	72	110/80	79	-	
HV					1.0	69	110/80	75	-	
ExStart					1.0	78	110/80	85	-	
Stage 1	3:01	3:02	1.7	10.0	4.7	120	120/80	144	-	
Stage 2	3:01	6:02	2.5	12.0	7.1	144	130/80	187	-	
PeakEx	0:29	6:30	3.4	14.0	7.6	159	130/80	206	-	
Recovery	1:00		1.1	0.0	1.1	127	130/80	165	-	
Recovery	2:00		0.0	0.0	1.0	78	150/80	116	-	
Recovery	3:00		0.0	0.0	1.0	74	150/80	111	-	
Recovery	3:07		0.0	0.0	1.0	69	150/80	103	-	

Findings :

Exercise Time : 6:29 minutes
 Max HR attained : 159 bpm 87% of Max Predictable HR 182
 Max BP : 150/80(mmHg)
 WorkLoad attained : 7.6 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maxmum Depression: 6:29

Advice/Comments:



Man
DR. MANSI SOLANKI
 MBBS MD GENERAL MEDICINE
 REG. NO. MMC 2024042065

HR: 71 bpm
METS: 1.0
BP: 110/80

MHR: 39% of 182
Speed: 0.0 mph
Grade: 0.0%

12 Lead + Comparison

Raw ECG
BRUCE
(1.0-100)Hz

Ex Time 00:33
BLC :On
Notch :On

SUPINE
10.0 mm/mV
25 mm/Sec.



Besment Vikas Paradise Below Axis Bank Mulund w

310/POOJA JAMRE

38 Yrs/Female

52 Kg/164 Cms

Date: 08-Mar-2025 01:45:11 PM

HR: 72 bpm

METS: 1.0

BP: 110/80

MPHR:39% of 182

Speed: 0.0 mph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:51

BLC :On

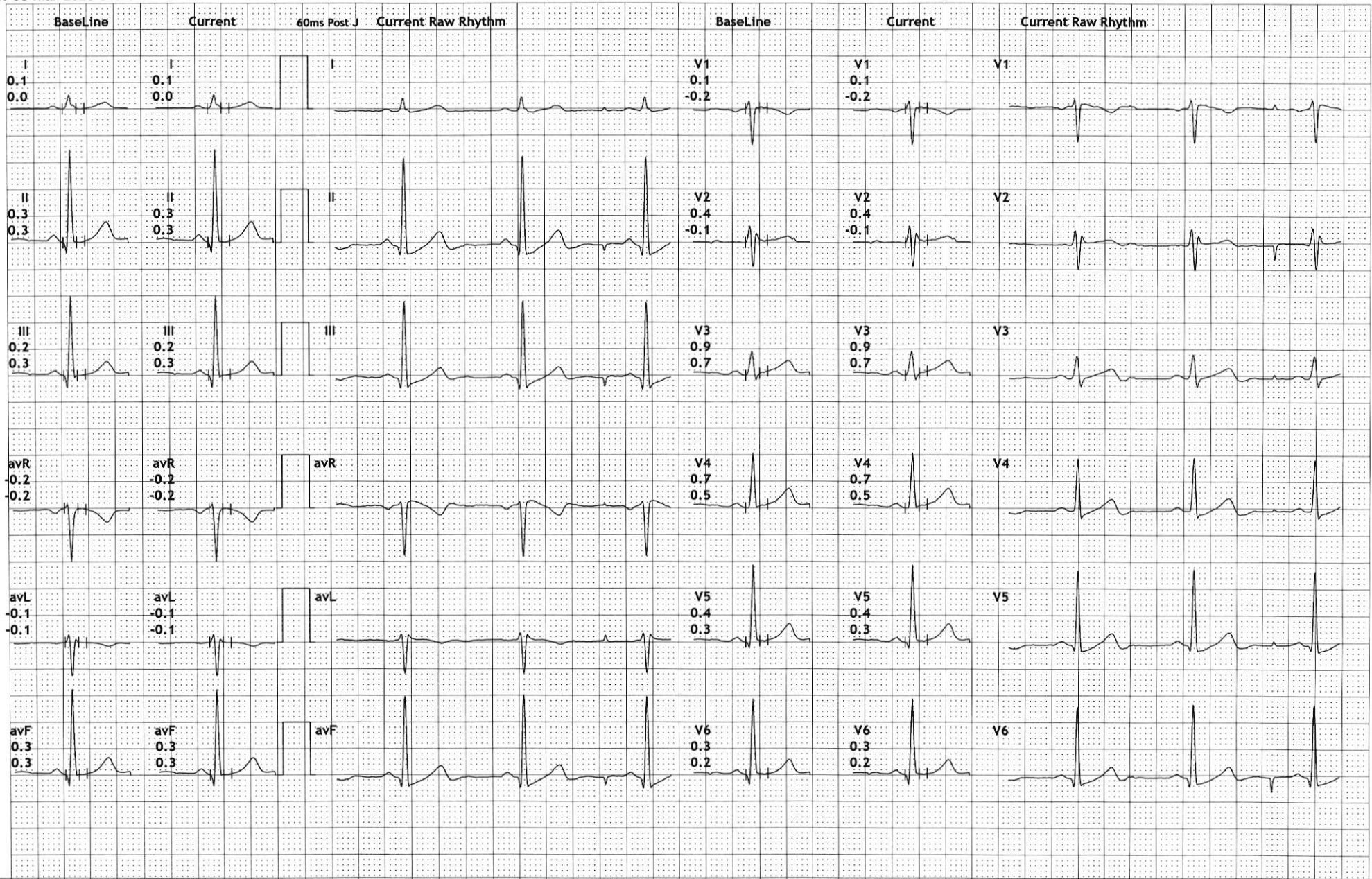
Notch :On

STANDING

10.0 mm/mV

25 mm/Sec.





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Besment Vikas Paradise Below Axis Bank Mulund w

310/POOJA JAMRE

38 Yrs/Female

52 Kg/164 Cms

Date: 08-Mar-2025 01:45:11 PM

HR: 78 bpm

METS: 1.0

BP: 110/80

MPHR:42% of 182

Speed: 0.0 mph

Grade: 0.0%

12 Lead + Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:00

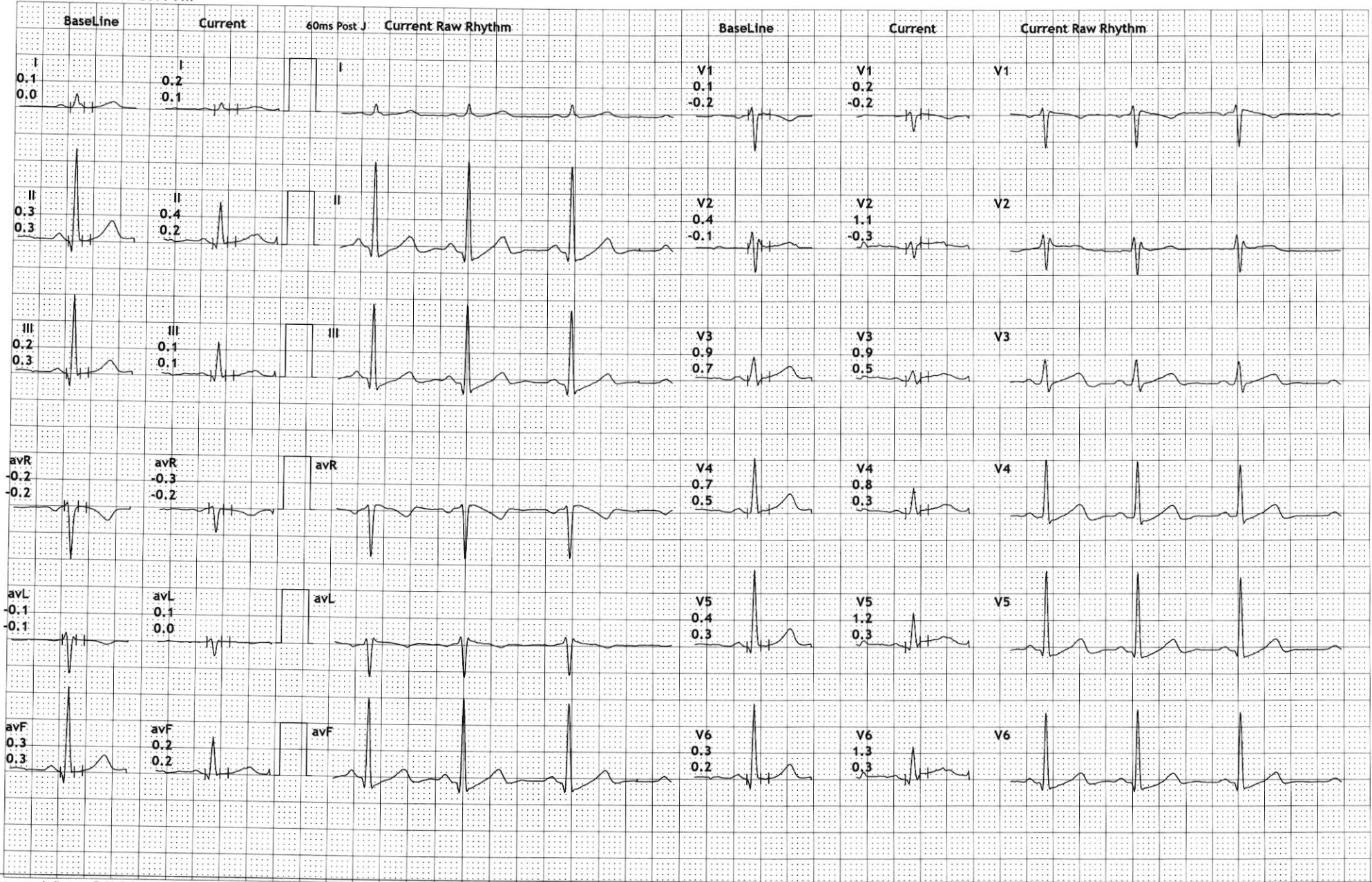
BLC :On

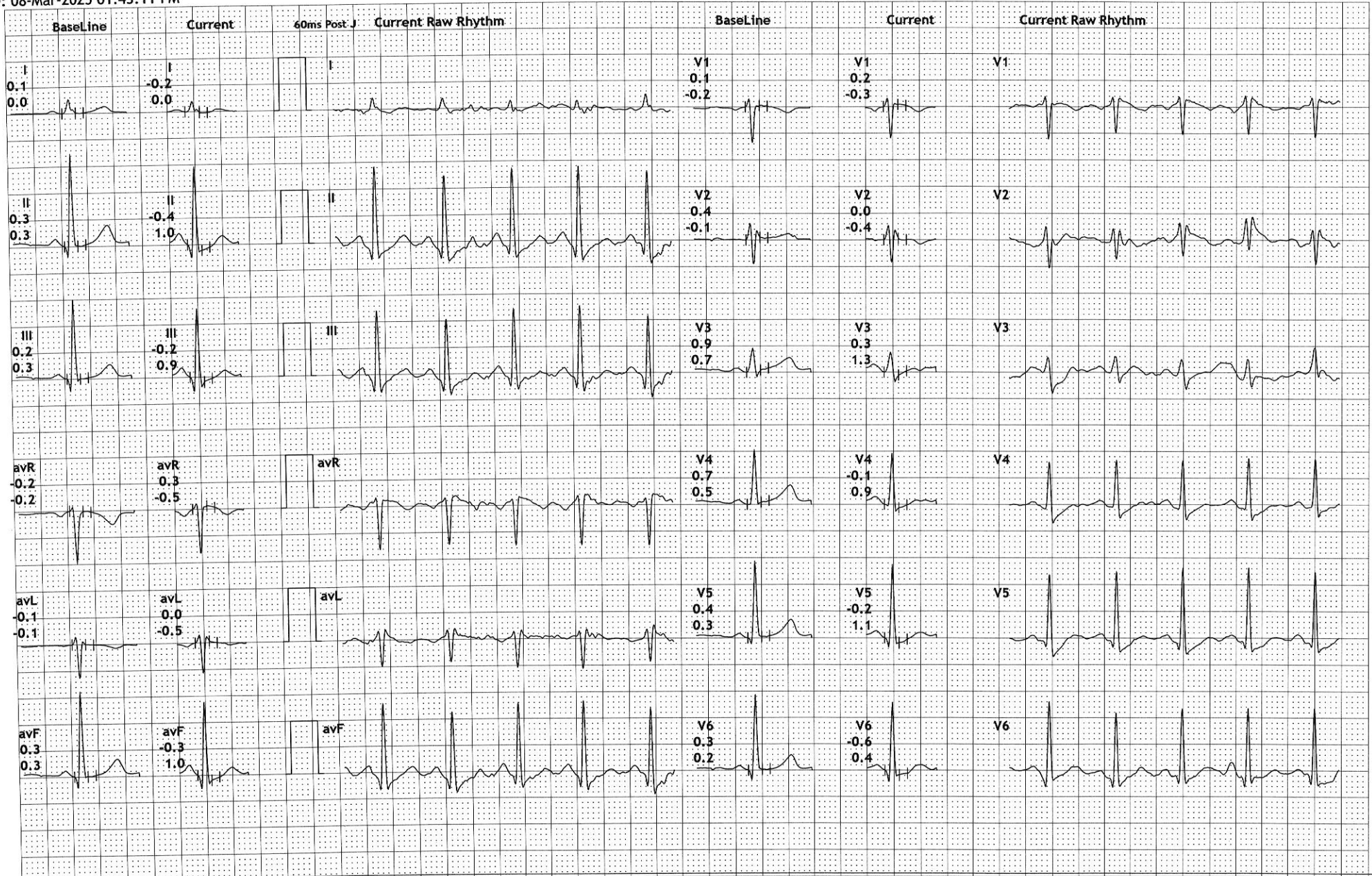
Notch :On

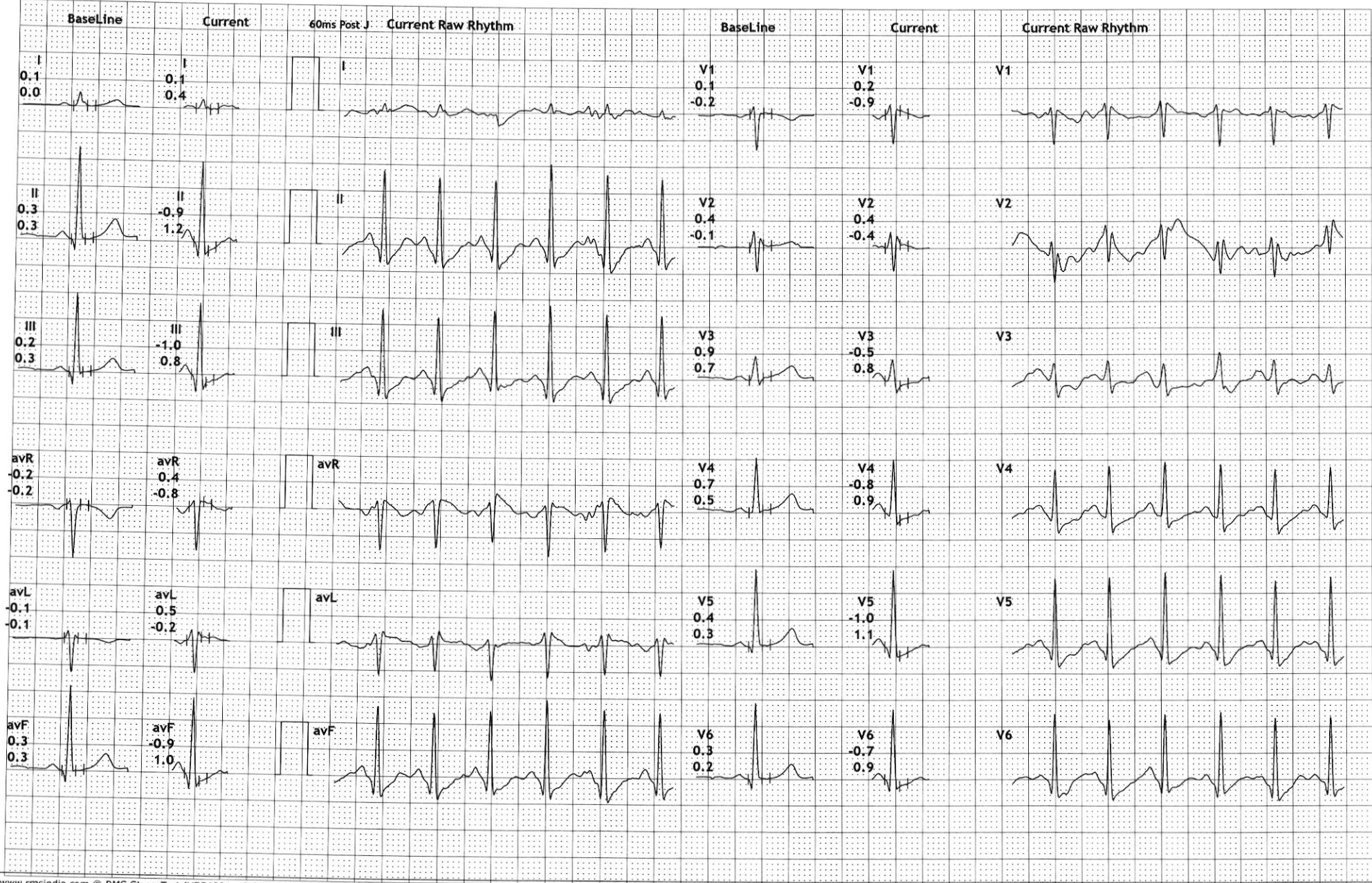
ExStart

10.0 mm/mV

25 mm/Sec.







HR: 159 bpm

METS: 7.6

BP: 130/80

MpHR: 87% of 182

Speed: 3.4 mph

Grade: 14.0%

12 Lead + Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:28

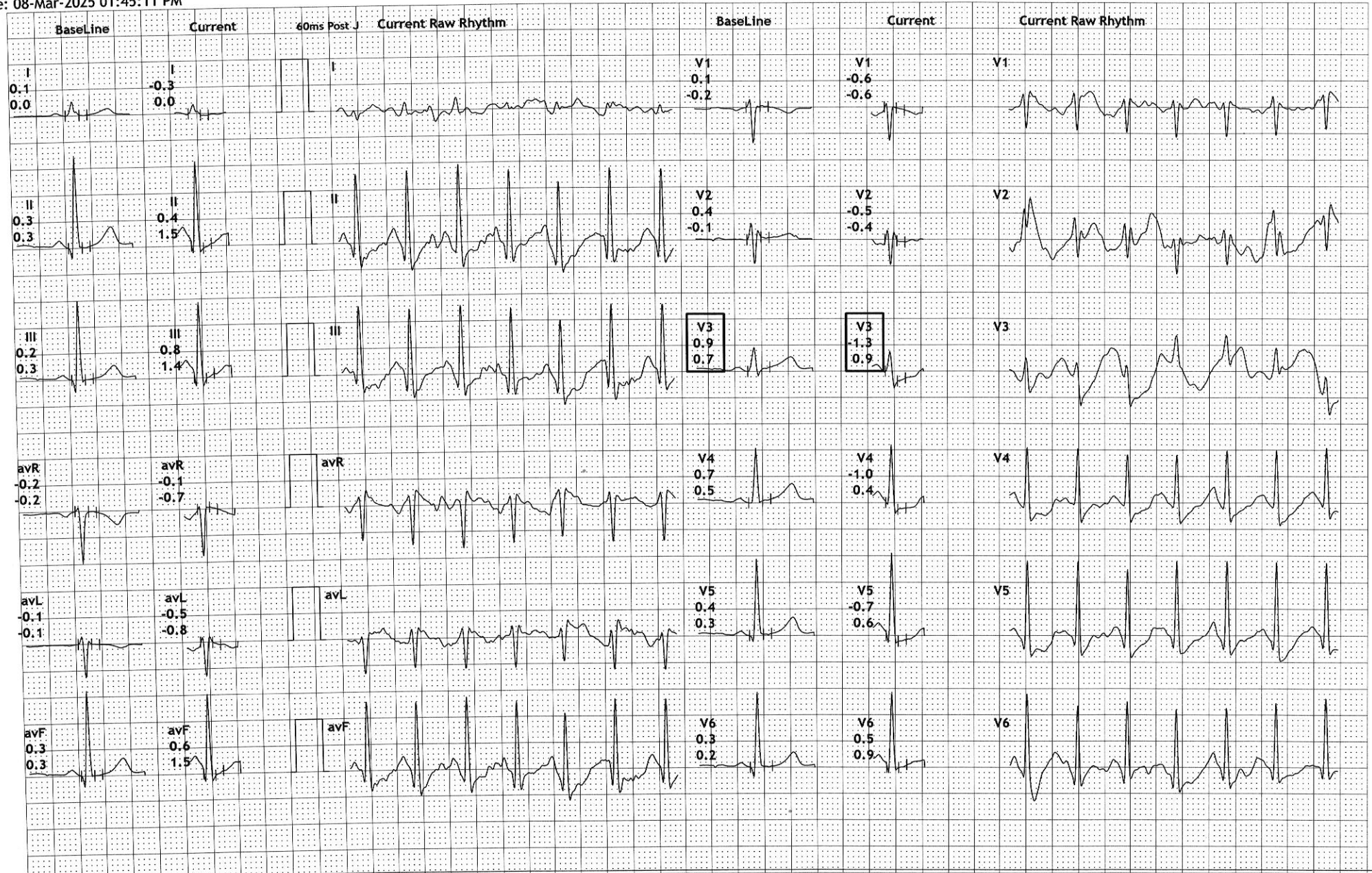
BLC :On

Notch :On

PeakEx

10.0 mm/mV

25 mm/Sec.



Besment Vikas Paradise Below Axis Bank Mulund w

310/POOJA JAMRE

38 Yrs/Female

52 Kg/164 Cms

Date: 08-Mar-2025 01:45:11 PM

HR: 118 bpm

METS: 1.1

BP: 130/80

MPHR:64% of 182

Speed: 1.1 mph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:28

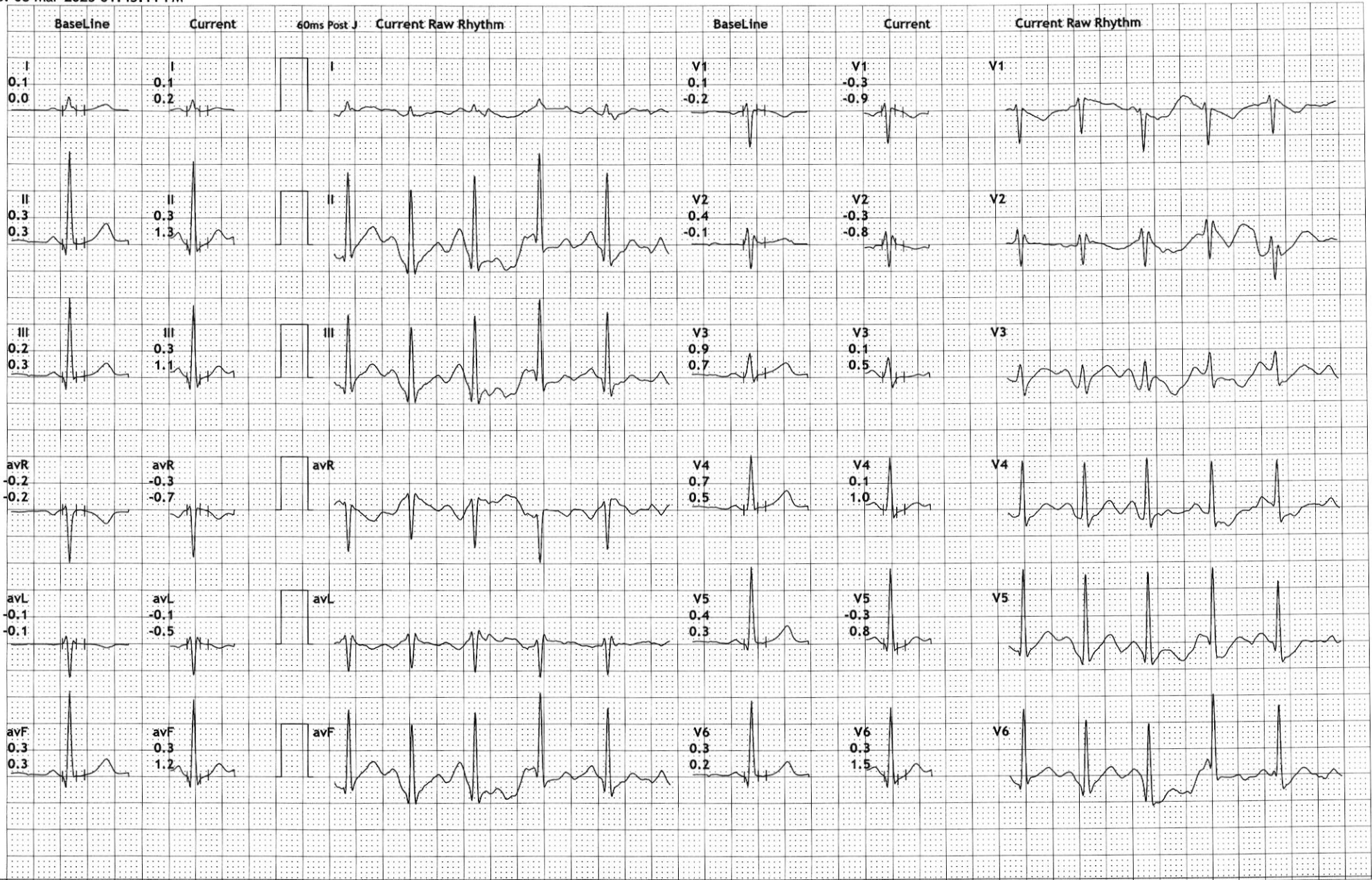
BLC :On

Notch :On

Recovery : (01:00)

10.0 mm/mV

25 mm/Sec.



Besment Vikas Paradise Below Axis Bank Mulund w

310/POOJA JAMRE

38 Yrs/Female

52 Kg/164 Cms

Date: 08-Mar-2025 01:45:11 PM

HR: 76 bpm

METS: 1.0

BP: 150/80

MPHR:41% of 182

Speed: 0.0 mph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:28

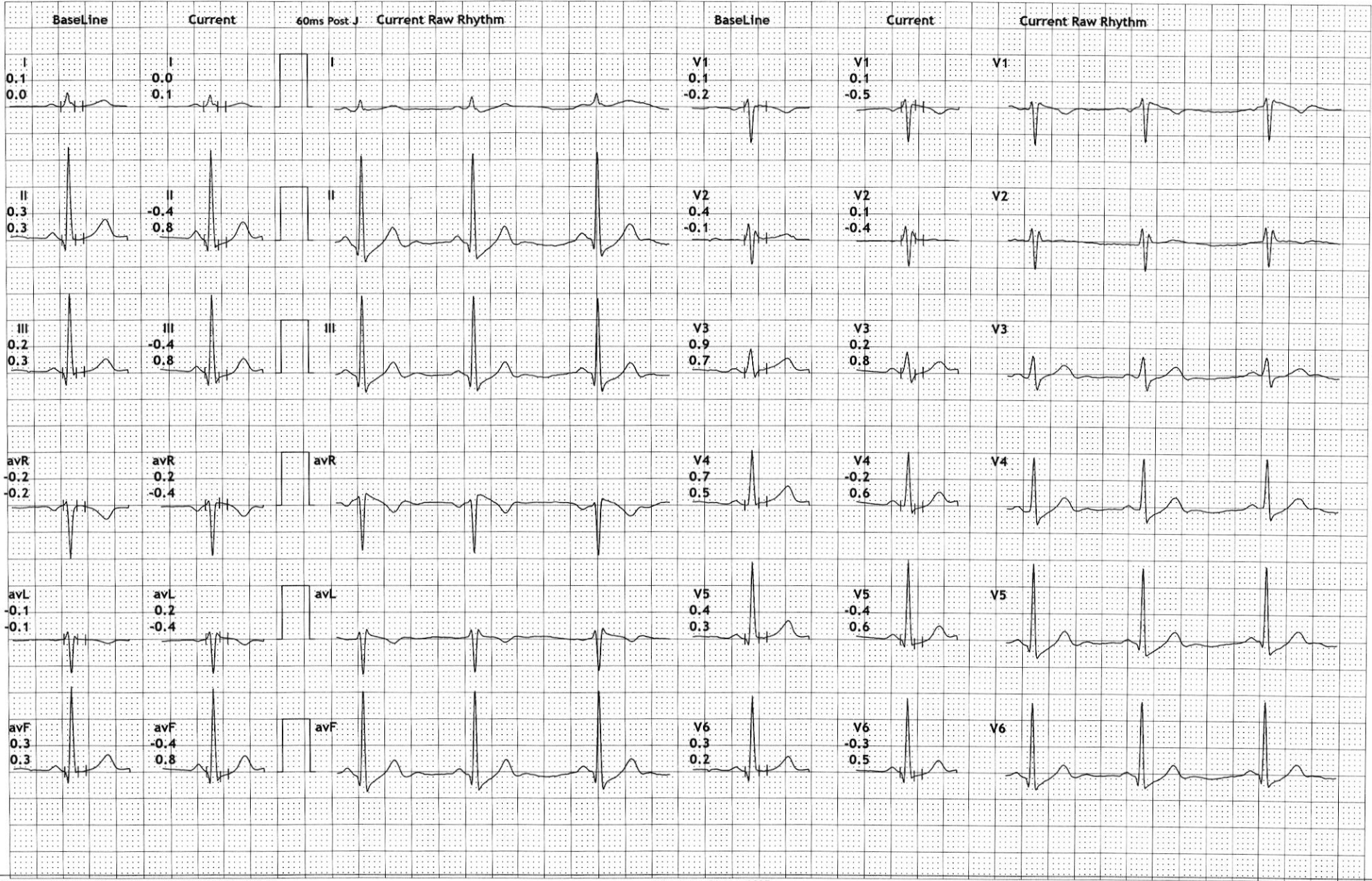
BLC :On

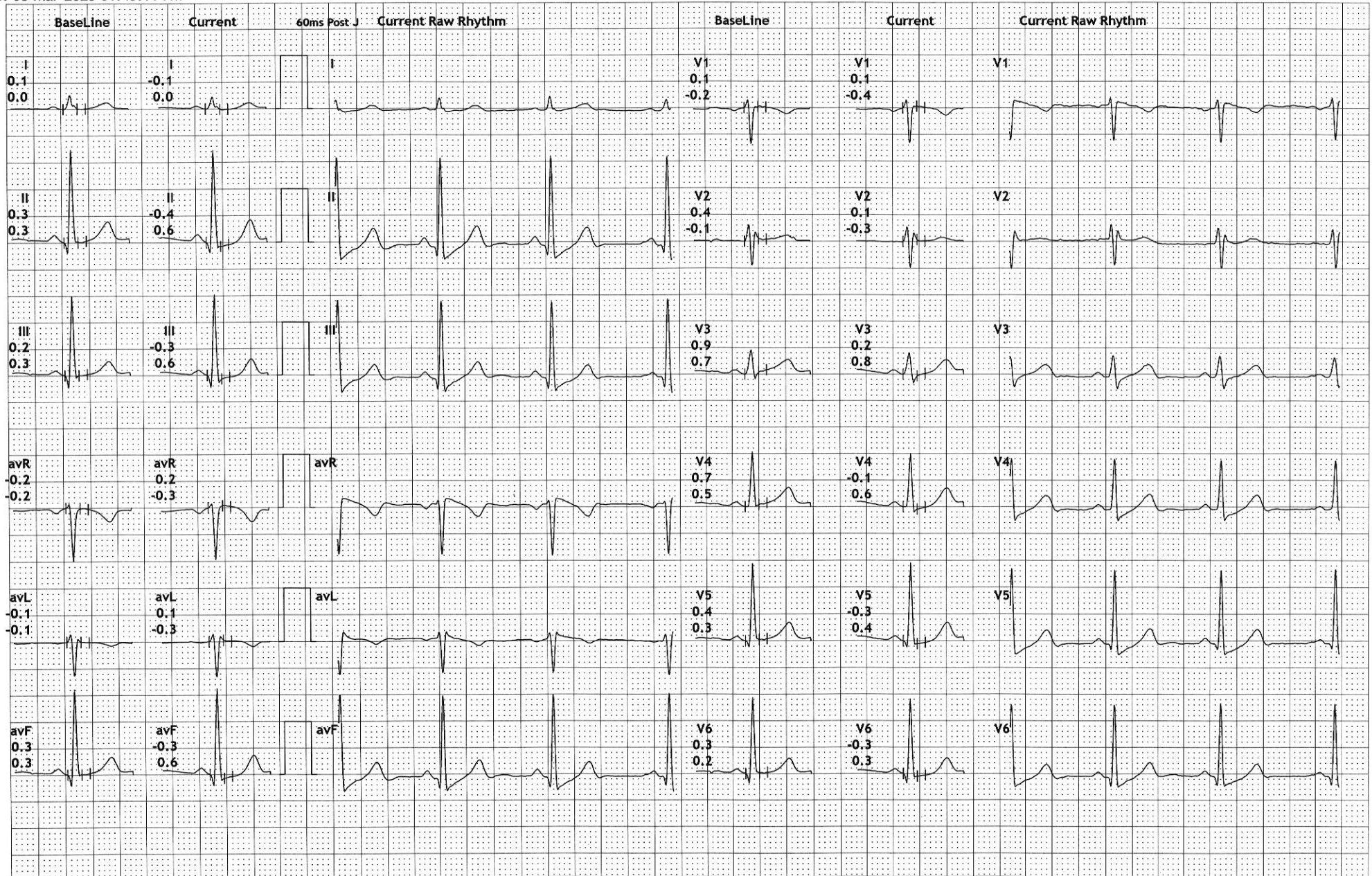
Notch :On

Recovery : (02:00)

10.0 mm/mV

25 mm/Sec.





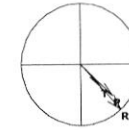
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B-1, Vikas Paradise Com, LBS Marg, Mulund W, Mumbai - 400080

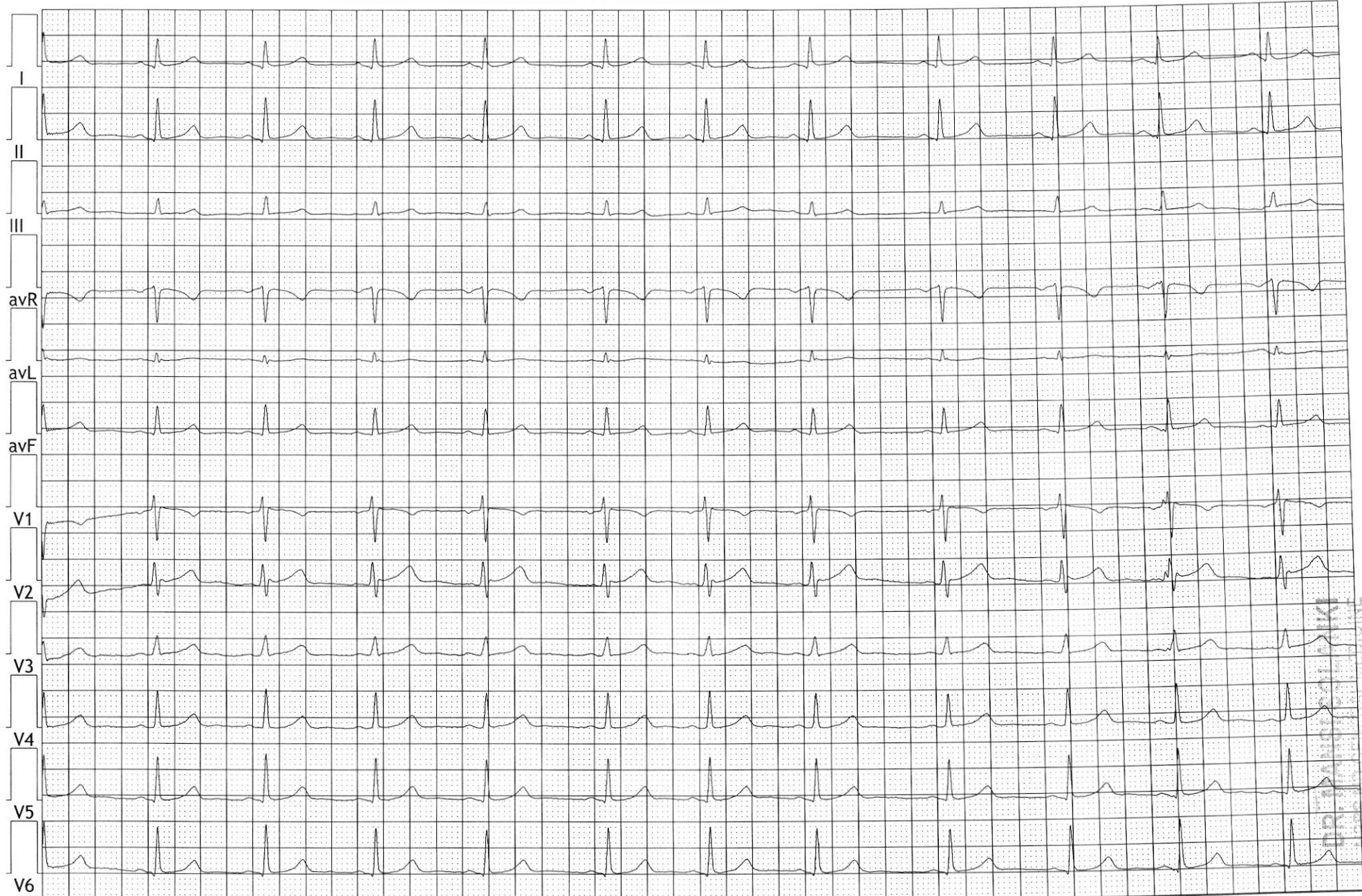
44593/Pooja Jamre 38Yrs/Female Kgs/ Cms BP: ___/___ mmHg

HR: 71 bpm

Ref.: Test Date: 08-Mar-2025(14:14:56) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec



PR Interval: 132 ms
QRS Duration: 86 ms
QT/QTc: 399/434ms
P-QRS-T Axis: 43 - 47 - 47 (Deg)



NSR Co M
Correlate clinically

DR. MANOJ K. JAIN
MBBS MD GENERAL MEDICINE

REG. NO. MMC 2024042065