

Sample Collection: 09/03/2025 08:33

**LAB ID: 327** 

Name: MRS. SONI DEVI Age: 35 Yrs. Sex: F Sample Received: 09/03/2025 08:33 Ref. By: Mediwheel Printed: 13/03/2025 16:00 Report Released : 11/03/2025 11:47

Sent By: Arcofemi Healthcare Pvt Ltd

#### **COMPLETE BLOOD COUNT \***

Test		Result	Unit	Biological Ref Range
Hemoglobin	:	12.9	g/dL	12-14 g/dL
(SLS) Photometric				
Total RBC	:	6.22	10^6/μL	3.0-6.0 10^6/μL
(Electrical Impedence)				
Hematocrit (PCV) (Calculated)	:	42.5	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	:	68.3	fL	78-101 fL
Mean Corpuscular Hemoglobin	:	20.7	pg	27-32 pg
(MCH) (Calculated)				
Mean Corpuscular Hemoglobin	:	30.4	g/dL	31.5-34.5 g/dL
Concentration (MCHC)				
(Calculated)				
Red Cell Distribution Width (RDW-	-:	23.20	%	12-15 %
CV)				
(Electrical Impedence)				
Total Leucocytes Count (Light Scattering)	:	13900	/cumm	4000-11000 /cumm
Neutrophils	:	55	%	40-75 %
(Calculated)				
Eosinophils Percentage	:	04	%	1-6 %
(Calculated)				
Lymphocyte Percentage	:	35	%	20-45 %
(Calculated)				
Basophils Percentage	:	0	%	0-1 %
(Calculated)				
Monocytes Percentage	:	06	%	1-10 %
(Calculated)				
RBC Morphology	:	Microcytosis	+, Anisocytosis++, Po	oikilocytosis+,
WBC Morphology	:	Normal Morp	•	•
. 57			<i>5.</i>	

Platelet Count 150000-450000 /ul

(Electrical Impedence)

Platelets on Smear Increased on smear Adequate

mm at 1hr 0-20 mm at 1hr E.S.R 05

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: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:47:07)









Name : MRS. SONI DEVI

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

**Age** : 35 Yrs. **Sex**: F

Printed: 13/03/2025 16:00

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Dr. Santosh Khairnar



Name: MRS. SONI DEVI

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**LAB ID: 327** 

Printed: 13/03/2025 16:00

Age

Sample Collection: 09/03/2025 08:33

: 35 Yrs. Sex : F

Sample Received: 09/03/2025 08:33

Report Released : 11/03/2025 11:44

HbA1c (Whole Blood)

Test Result Unit Reference Range

HbA1C-Glycosylated Haemoglobin % Non-diabetic: 4-6 6.10 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) 128.37 65.1-136.3 mg/dL 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.

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#### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test Result Unit Biological Ref. Range GLUCOSE (SUGAR) FASTING, 109 Non-Diabetic: < 100 mg/dl mg/dL (Fluoride Plasma Used) Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl

Method: GOD-POD

Fasting Urine Glucose Absent

GLUCOSE (SUGAR) PP, (Fluoride Non-Diabetic: < 140 mg/dl 110 mg/dl

Plasma Used)

Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl

PP Urine Glucose Absent

Absent

Absent

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:47:37)



Dr. Santosh Khairnar



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



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# **BLOOD GROUP**

Test Result Unit Biological Ref. Range

Blood Group : 'B' Rh POSITIVE

Slide and Tube Aggllutination Test

(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:48:08)

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





Dr. Santosh Khairnar



Ref. By: Mediwheel

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Near Optimal: 3.5 - 5.0

High >5.0

|--|

Age: 35 Yrs. Sex: F

Printed: 13/03/2025 16:00

Unit	Biological Ref. Range
mg/dl	Desirable: <200
	Borderline high = 200-239
	High: > 239
mg/dl	Desirable: <161
	Borderline High: 161 - 199
	High: > 200 - 499/ Very High:>499
mg/dl	42.0-88.0 mg/dl
mg/dl	Optimal: <100;
	Near Optimal: 100-129;
	Borderline High: 130-159;
	High: 160-189;
	Very high: >190
mg/dl	5-30 mg/dl
	Optimal: <2.5
	Near Optimal: 2.5-3.5
	High >3.5
	Optimal: <3.5
	mg/dl mg/dl mg/dl

Serum, Method: Calculated

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

- 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
- 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.

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



Dr. Santosh Khairnar



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**LAB ID:** 327

Sent By: Arcofemi Healthcare Pvt Ltd

LIVER FUNCTION TEST				
Test		Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	:	0.59	mg/dl	0-2.0 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Direct)	:	0.25	mg/dl	0-0.4 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Indirect)	:	0.34	mg/dl	0.10-1.0 mg/dl
Serum, Method: Calculated				
Aspartate Transaminase (AST/SGOT)	:	26	IU/L	0-31 IU/L
Serum, Method: UV Kinetic with P5P				
Alanine Transaminase (ALT/SGPT)	:	30	IU/L	0-34 IU/L
Serum, Method: UV Kinetic with P5P				
S. Alkaline Phosphatase	:	106	IU/L	42-98 IU/L
Serum, Method: IFCC with AMP buffer				
Total Proteins	:	8.9	gm/dl	6.4-8.3 gm/dl
Serum, Method: Biuret				
S. Albumin	:	4.1	gm/dl	3.5-5.2 gm/dl
Serum, Method: BCG				
S. Globulin	:	4.8	gm/dl	2.3-3.5 gm/dl
Serum, Method: Calculated				
A/G Ratio	:	0.85		0.90-2.00
Serum, Method: Calculated				
Gamma GT	:	42	U/L	0-38 U/L
Serum, Method: G glutamyl carboxy nitroanilide	/EM 2	100)		
Test Done on - Automated Biochemistry Analyzer	(EM 2	00).		

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





<sup>\*</sup>All Samples Processed At Excellas Clinics Mulund Centre .

<sup>(</sup>Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:44:26)



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#### **SERUM CREATININE**

Test Result Unit Biological Ref. Range

Age

S. Creatinine 0.63 mg/dl 0.60-1.1 mg/dl

Serum, Method: Enzymatic

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

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(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:44:45)

#### **BLOOD UREA NITROGEN (BUN)**

Test Result Unit Biological Ref. Range

Urea 19.47 mg/dl 13-40 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen 9.10 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:45:02)

#### **SERUM URIC ACID**

Test Result Unit Biological Ref. Range

S. Uric Acid 2.6-6.0 mg/dl 5.10 mg/dl

Serum, Method: Uricase - POD

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

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Dr. Santosh Khairnar

<sup>\*</sup>All Samples Processed At Excellas Clinics Mulund Centre



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Sent By: Arcofemi Healthcare Pvt Ltd

**BUN CREAT RATIO (BCR)** 

Test Result Unit Biological Ref. Range

BUN/Creatinine ratio : 14.40 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: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:45:26)

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





Dr. Santosh Khairnar



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	THI KOID FUNCTION 1EST					
Test		Result	Unit	Biological Ref. Range		
Total T3	:	1.3	ng/dl	0.70-2.04 ng/dl		
Serum, Method: CLIA						
Total T4	:	6.50	μg/dl	5.1-14.1 μg/dl		
Serum, Method: CLIA						
TSH (Thyroid Stimulating Hormone)	:	5.37	μlU/ml	0.27-5.3 μIU/ml		

TSH (Thyroid Stimulating Hormone) 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.

	End Of	Report
(Collected At: 09/03/2025 08:33:25,	Received At: 09/03/2025 08:33:25,	Reported At: 11/03/2025 11:47:21)







 LAB ID: 327
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Sent By: Arcofemi Healthcare Pvt Ltd

EXAMIN	IATION	OF L	JRINE
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Test Result Unit Biological Ref. Range

PHYSICAL EXAMINATION

Quantity : 15 ml

Colour : Pale yellow

Appearance : Clear

Reaction (pH) : 6.0 4.5 - 8.0 Specific Gravity : 1.015 1.010 - 1.030

**CHEMICAL EXAMINATION** 

Protein Absent Absent Glucose Absent Abesnt **Ketones Bodies** Absent Abesnt Occult Blood Absent Absent Bilirubin Absent Absent Urobilinogen Absent Normal

**MICROSCOPIC EXAMINATION** 

Epithelial Cells : 2 - 3 / hpf
Pus cells : 2 - 3 / hpf

Red Blood Cells : Absent / hpf
Casts : Absent / lpf

Casts : Absent / lpf Absent / lpf Crystals : Absent Absent

OTHER FINDINGS

Yeast Cells : Absent Absent Bacteria : Absent Absent Absent

Mucus Threads : Absent Spermatozoa : Absent

Deposit : Absent Absent Absent Absent Absent

sample type:Urine

Method: Visual and Microscopic

(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 11/03/2025 11:47:58)

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



Dr. Santosh Khairnar



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Age: 35 Yrs. Sex: F

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Sample Collection: 09/03/2025 08:33

Sample Received: 09/03/2025 08:33

Report Released : 10/03/2025 17:10

#### X RAY CHEST PA VIEW

#### Cardiac apex is seen on the left side - Dextrocardia.

Both the lung fields appear normal.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

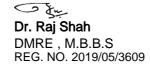
Bony thorax appears normal.

Soft tissues appear normal.

#### **IMPRESSION:**

Cardiac apex is seen on the left side - Dextrocardia.







Name : MRS. SONI DEVI

Ref. By: Mediwheel

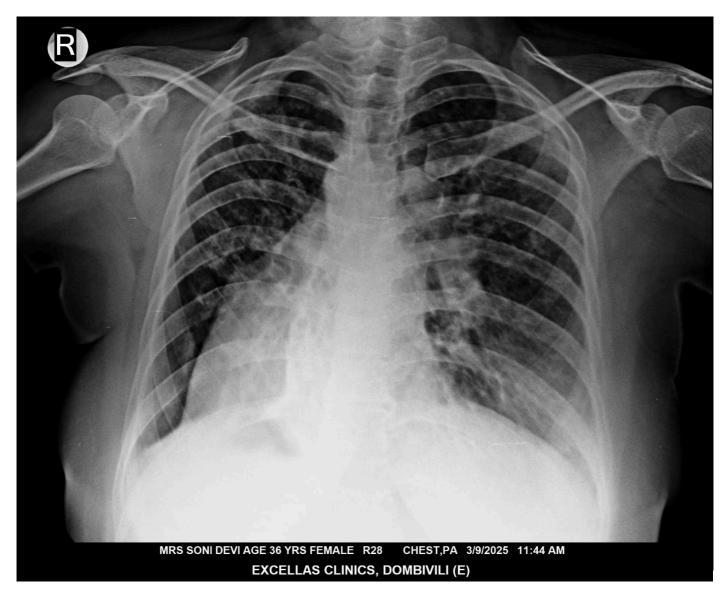
Sent By: Arcofemi Healthcare Pvt Ltd

LAB ID: 327

**Age** : 35 Yrs. **Sex**: F **Sample Received** : 09/03/2025 08:33

**Printed**: 13/03/2025 16:00 **Report Released**: 10/03/2025 17:10

Sample Collection: 09/03/2025 08:33



(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 10/03/2025 17:10:13)

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





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



Name: MRS. SONI DEVI

Ref. By: Mediwheel Sent By: Arcofemi Healthcare Pvt Ltd **LAB ID: 327** 

Age: 35 Yrs. Sex: F

Printed: 13/03/2025 16:00

Sample Collection: 09/03/2025 08:33

Sample Received: 09/03/2025 08:33

Report Released : 10/03/2025 14:48

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

LMP: 28 /02/2025

Liver:- is enlarged in size(17.0 cm). 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 (10.5 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  $-9.9 \times 4.1 \text{ cms}$ .

Left kidney – 10.2 x 4.3 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 8.4 x 5.6 x 4.8 cms. A fibroid measuring 8.0 x 4.0 mm is seen in the anterior wall of the uterus.

ET: 11 mm(mildly thickened). Minimal fluid is seen in the endometrium.

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

Right ovary measures – 1.7 x 2.2 cms.

Left ovary measures – 1.9 x 2.8 cms.

A cystic lesion with internal septations and echoes is seen in the left ovary measuring 2.5 x 3.5 cm. - ovarian hemorrhaegic cyst.

Right adnexae appear normal.

No ascites is seen. No significant lymphadenopathy is seen.

<u>Liver is seen on the left side and spleen is seen on the right side – situs inversus.</u>









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Sample Collection: 09/03/2025 08:33

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**Report Released**: 10/03/2025 14:48

#### **IMPRESSION:**

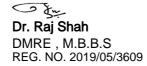
- Hepatomegaly.
- Uterine fibroid.
- Left ovarian hemmorhaegic cyst.
- Mildly thickened endometrium with minimal endometrial fluid.
- Situs inversus.

Thanks for the Referral

(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 10/03/2025 14:48:23)

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







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Report Released : 10/03/2025 11:39

## **OPTHALMIC EVALUATION**

Examination	Right Eye	Left Eye
Distance Vision	6/12	6/12
Near Vision	N/6	N/6
Color Vision	Noi	rmal
Remarks		

	End Of	Report	
(Collected At: 09/03/2025 08:33:25,	Received At: 09/03/2025 08:33:25,	Reported At: 10/03/2025 11:39:28	3)





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Report Released : 13/03/2025 08:41

#### **CERVICAL CYTOLOGY REPORT**

# PAPANICOLAOU SMEAR (CONVENTIONAL)

## Specimen:-

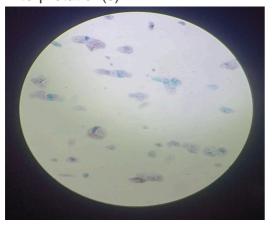
- 1. 2 unstained air dried smear received.
- 2. Stained with papanicolaou method and examined.

#### Smear shows:

- Many superficial squamous, intermediate squamous and few squamous metaplastic cells.
- Background shows few endocervical cells alongwith mild inflammatory infiltrate.
- · No cellular atypia or malignancy noted.

## Impression: Essentially Normal Pap smear.

**Comments:** The smears are reported using bethesda system for cervical cytology(2014) Interpretation(s).



(Collected At: 09/03/2025 08:33:25, Received At: 09/03/2025 08:33:25, Reported At: 13/03/2025 08:41:36)

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



Dr. Santosh Khairnar





ME	DICAL EXAMINATION I	REPORT	
Name Mr./ Mrs./ Miss	Soni deri	-14	
Sex	Male / Female	10	An condition
Age (yrs.)	UHID :	. ×	Completed & Duration
Date	91312025	Bill No :	Other Symptoms
Marital Status	Single / Married Widow / W No. of Children: 0 /	idower :	vioteiA lauteneM
Present Complaints		Pair	
Past Medical History : Surgical History :	Small No Marketon		
Personal History	Diet: Veg □ / Mixed □:		Obstatric History
	Addiction : Smoking □/ Toba	cco Chewing 🗆 / A	Alcohol 🗆 :
	Any Other:	Breast	
Family History	Father = HT / DM / IHD / Stro	oke / Any Other	1
	Mother = HT / DM / IHD / Str	oke / Any Other	
	Siblings = HT / DM / IHD / St	roke / Any Other	₩1
History of Allergies	Drug Allergy Any Other	. А пов	Cynaecology Impres Recommendation
History of Medication	For HT / DM / HD / Hypothyr	oidism /	Rucominendation
	Any Other	J	
On Examination (O/E)	G.E.: Fax		•
	R. S.: oceanion who	ere on croon	w remain AEBCE
	C. V. S. :	9	
	C. N. S. :		
	P/A: /~~~	NU- "	
	Any Other Positive Findings	: Paller A)	

Height // / cms	Weight SD Kgs	BMI 23-8
Pulse (per min.)	Blood Pressure (mm of Hg) // 6	128
	Gynaecology	Name Mr. Mrs Mics
Examined by	Dr.	- 1 No
Complaint & Duration		Age Tyrs )
Other Symptoms (Mict, bowels etc)	me' // 1s.05 ) = \ P	Date Otatus
Menstrual History	Menarche Cycle	
	PainI.M.B.	
	L.M.P Vaginal Discharg	ge
	Cx. Smear Contraception	Past Medical History no surgical History
Obstetric History	Dist: Veg □ / Mixed i⊆c	Personal History
Examination:	Addiction , Smoking 🗆/ Tobacco Ch	
Breast	Any-Other . will	
Abdomen	Father = HT / DM / IHD / Stroke / Ar	Family History
P.S.	Mother = HT / DM / IHD / Stroke / N	
P.V.	Siblings = HT / DM / IHD / Stroke /	
Gynaecology Impression & Recommendation	Drug Allergy Any Other	History of Allergies
Recommendation	For HT / DM / HD / Hypothymidians Any Others:	History of Medication
	G.E. CEL	On Examination (O/E)
Physician Impression	R.S. C.V.S.	
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weigh	t

