

DIMP JAIL 31/F

BP-90/60 cot-58.1cg NT-5:48 cos

(This is only professional opinion and not the diagnosis, please correlate clinically)

Q Block, South City -II, Sohna Road, Sector-47, Gurgaon, Haryana

Ph.: 0124-4900000 (100 Lines), Toll Free No.: 1800-102-6767, Mob.: 62 62 82 82 35, Email: customercare@parkhospital.in



Dol =

685000

Mars Divya Jain

Roubbe eye checkup Rowhn

VnJ-6/6

unadded

NV I Mc

NV [WG

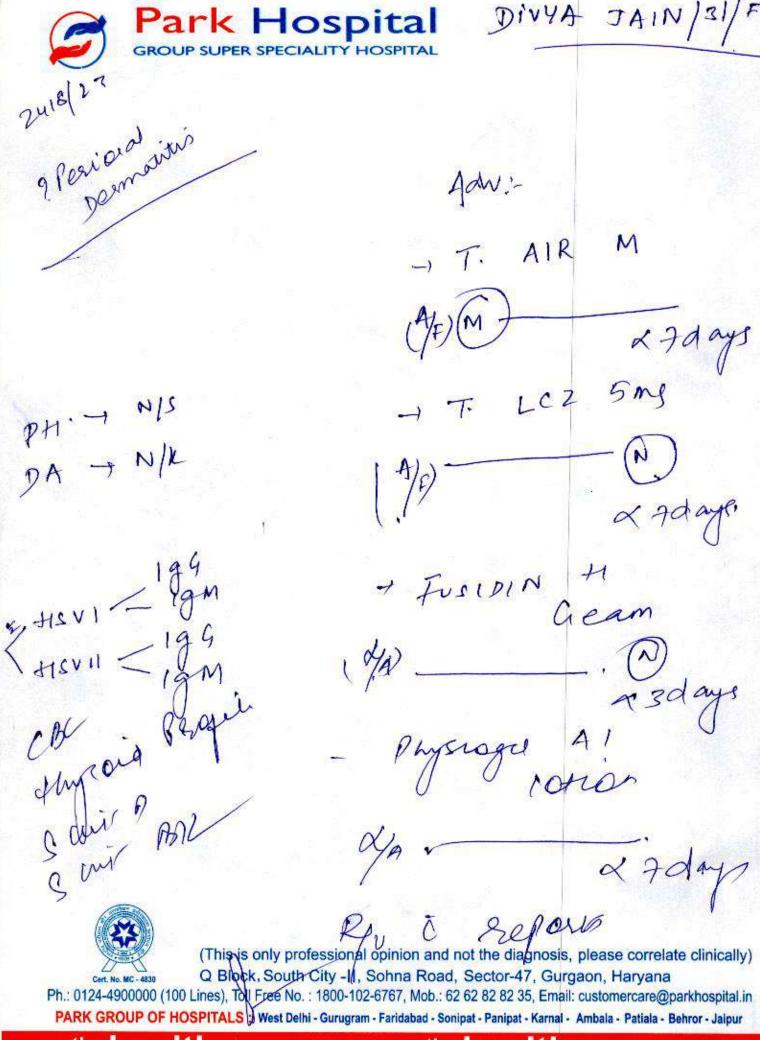
NCT { 20

Cabus Vision - Normal BE

fundus Exam-

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the health care providers

the health care providers



DEPARTMENT OF RADIOLOGY

Patient Name

Mrs. DIVYA JAIN

Billed Date

:24/08/2023

8.48 AM

Reg No

685000

Reported Date

: 24/08/2023

Age/Sex

31 Years 11 Months 29Days / Female

Req. No.

: 24152442

Type

OPD

Consultant Doctor

: Dr. RMO

USG WHOLE ABDOMEN

The real time, B mode, gray scale sonography of the abdominal organs was performed.

<u>LIVER</u>: The liver is normal in size(14.6cm), shape and echotexture. No evidence of any focal lesion. IHBR is not dilated.

GALL BLADDER: The gall bladder is well distended. No evidence any calculus or mass seen.GB wall thickness with in normal limits.No evidence of pericholecystic fluid is seen.

<u>BILE DUCT</u>: The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

SPLEEN: The spleen is normal in size(10.5cm) and shape. Its echotexture is homogeneous. No evidence of focal lesion is noted.

<u>PANCREAS</u>: The pancreas is normal in size, shape, contours and echotexture. No evidence of solid or cystic mass lesion is noted. MPD is not dilated. No evidence of peripancreatic collection.

<u>KIDNEYS</u>: The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentation is maintained. There is no evidence of obvious calculus or hydronephrosis. <u>URINARY BLADDER</u>: The urinary bladder is patially distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

<u>UTERUS</u>: The uterus is anteverted. It measures 6.8x4.2x3.4cms. in the longitudinal, anteroposterior and transverse dimensions respectively. The uterine margins are smooth and does not reveal any contour abnormalities.

The uterine myometrium shows homogeneous echotexture.

No evidence of leiomyoma is noted. No solid or cystic mass lesion is noted.

The endometrial echo is in the midline and measures 3mm.

The ovaries on the either side show normal echotexture.

No adnexal mass is seen. No cyst is seen in ovaries.

No evidence of ascites or interbowel free fluid is seen.

No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.

IMPRESSION- No obvious abnormalities noted.

To be correlated clinically.

Dr.ANSHU K.SHARMA MBBS,MD CONSULTANT RADIOLOGIST Dr,MANJEET SEHRAWAT MBBS,MD,PDCC CONSULTANT RADIOLOGIST Dr. NEENA SIKKA MBBS,DNB CONSULTANT RADIOLOGIST



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NAME	- 1	MRS. DIVYA JAIN	DATE		24 / 3 / 2023
Age Sex		31 Years / Female	Inpatient No		685000
PERFORMED BY	:	Dr. ELA MADAAN	BILL NO.	:	24152442

TRANS THORACIC ECHO CARDIOGRAPHY REPORT

MITRAL VALVE

Morphology AML: Normal / Thickening /Calcification/Flutter/Vegetation/Non significant Prolapse/SAM

PML: Normal / Thickening / Calcification/Prolapse/ Paradoxical Motion / Fixed.

Subvalvular deformity: Present / Absent

Doppler Normal / Abnormal

Mitral Stenosis Present / Absent

Mitral Regurgitation; Absent / Normal / Mild /Trace / Moderate / Severe.

TRICUSPID VALVE

Morphology Normal / Atresia / Thickening / Clacification / Prolapse / Vegetation / Doming.

Doppler Normal / Abnormal

Tricuspid Stenosis: Present / Absent.

Tricuspid Regurgitation: Absent / Mild / Trace / Moderate

PULMONARY VALVE

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

Doppler Normal / Abnormal.

Pulmonary Stenosis: Present / <u>Absent</u> Pulmonary regurgitation: Present / <u>Absent</u>

AORTIC VALVE

Morphology Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening

No. of Cusps 1/2/3/4

Doppler Normal / Abnormal

Aortic Stenosis : Present / Absent

Aortic regurgitation: Present / Absent / Mild / Trace

Cert. No. H-2016-0369

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Measurements		3	Normal Values	Measurements			Normal Value
IVSD		1.0cm	(0.6-1.1cm)	LA		3.2cm	(1.9-4.0cm)
LVID	•	4.9cm	(3.7-5.6cm)	LVOT		1.6cm	
LVPW	:	0.9cm	(0.6-1.1cm)	AORTA		3.0cm	(2.0-3.7cm)
EF		60%	(55% - 80%)	IVSmotion	:		Normal / Flat / Paradoxical
Any Other							1 diddoxioui

Any Other

CHAMBERS:-

LV Normal / Enlarged / Clear / Thrombus /

Contraction Normal LV shows concentric LVH, no gradient across LVOT /Inetic / Intra capillary Regional wall motion abnormality: Absent/ Present

LA Normal /Enlarged / Clear /Thrombus / Myxoma; LAA: Clear / Thrombus

RA Normal / Clear / Thrombus, Dilated.

RV Normal / Mildly Dilated / Enlarged / Clear / Thrombus / Hypertrophied/

PERICARDIUM Normal / Thickening / Calcification / Effusion.

COMMENTS & SUMMARY:-

- · All Cardiac Chamber Dimensions are within normal limits.
- Global LVEF 60%
- No RWMA
- NORMAL LV FUNCTION
- NO MR / NO TR / NO AR
- GOOD RV FUNCTION
- IAS/IVS. No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.

Please correlate charcally

Dr. ELA MADA ORGAON MBBS, PGDCC

Fellowship in non Invasive

Cardiology

Dr. JOGINDER S. DUHAN

M.D.(Medicine)

D.M (Cardiology)

Dr. SACHIN BANSAL

M.D.(Medicine)

D.M (Cardiology)

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Patient Name

Mrs. DIVYA JAIN

MR No

Test

685000

Age/Sex

31 Years 11 Months 29 Days / Female

Type

TPA/Corporate

MEDIWHEEL PVT LTD

BIII Date

24/08/2023

Reporting Date Sample ID

24/08/2023

Bill/Req. No.

179876

Ref Doctor

24152442

Result

Bio. Ref. Interval

Units

Dr.RMO Method

BLOOD SUGAR 2 HR. PP

BLOOD SUGAR P.P.

80 - 150

mg/dl

***** END OF THE REPORT *****



Dr. SONIA KUMARI MBBS, MD (PATHOLOGY) Gold medalist Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST

USER NM

MANOJ2

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PARK GROUP OF HOSPITALS: West Delhi - Gurugram - Faridabad - Sonipat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur

th care providers

nealth care providers



Patient Name

: Mrs. DIVYA JAIN

MR No

685000

Age/Sex

31 Years 11 Months 29 Days / Female

Type

TPA/Corporate :

MEDIWHEEL PVT LTD

Bill Date SampleCol Dt/Tm : 24/08/2023

: 24/08/2023

8.48 AM

09:56 am

SamplecRec Dt/Tm: 24/08/2023

09:56 am

Reporting Date

: 2023-08-24 0020028008-01 14.43

Sample ID

: 179876

Bill/Reg. No.

: 24152442

Ref Doctor Test

Dr.RMO

Result

Bio. Ref. Interval

Units

Method

BLOOD SUGAR FASTING

PLASMA GLUCOSE FASTING

85.7

60 - 110

mg/dl

GOD TRINDERS

***** END OF THE REPORT *****

Dr.PRADIP KUMAR Consultant (Microbiology)

Dr.SONIA KUMARI MD Pathology (Gold Medalist)

Dr.NISHA TIWARI MBBS, MD (Microbiology)

USER NM

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PARK GROUP OF HOSPITALS: West Delhi - Gurugram - Faridabad - Sonipat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur

n care providers



DEPARTMENT OF HAEMOTOLOGY

Patient Name : Mrs. DIVYA JAIN

MR No : 685000

Age/Sex : 31 Years 11 Months 29 Days / Female

Type : OPD

Test

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date

24/08/2023

Reporting Date :

24/08/2023

Sample ID :

179876

Bill/Req. No.

24152442

Ref Doctor

Dr.RMO

1100011

Bio. Ref. Interval

Units

Method

BLOOD GROUPING AND RH FACTOR

BLOOD GROUP "B"RH POSITIVE

ABO/Rh (D) SLIDE

***** END OF THE REPORT *****



Dr. SONIA KUMARI
MBBS, MD (PATHOLOGY) Gold medalist

Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST

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DEPARTMENT OF HAEMOTOLOGY

Patient Name : M

Mrs. DIVYA JAIN

MR No

685000

Age/Sex

31 Years 11 Months 29 Days / Female

Type

OPD

TPA/Corporate

: MEDIWHEEL PVT LTD

Bill Date

24/08/2023

Reporting Date :

24/08/2023

Sample ID

179876

Bill/Req. No.

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24152442

				Ref Doctor : 1	Dr.RMO
Test	Result		Bio. Ref. Interval	Units	Method
***************************************			CBC		
HAEMOGLOBIN	10.9	ī	12 - 15	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	7000	-	4000-11000	/µL	ELECTRICAL
DIFFERENTIAL COUNT				,μ.	ELECTRICAL
NEUTROPHILS	55		40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	35		20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	07		3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	03		0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00		0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	3,53		3.5 - 5.5	millions/µL	ELECTRICAL
PACKED CELL VOLUME	29.7	L	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	84.1		83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	30.9		27 - 31	Picogrames	CALCULATED
MEAN CORPUSCULAR HB CONC	36.7		33 - 37	g/dl	CALCULATED
PLATELET COUNT	283		150 - 350	thow/µL	ELECTRICAL
RDW	15.1	H	11.6 - 14.5	%	CALCULATED

***** END OF THE REPORT *****



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DEPARTMENT OF HAEMOTOLOGY

Patient Name

: Mrs. DIVYA JAIN

MR No

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Age/Sex

31 Years 11 Months 29 Days / Female

Type

TPA/Corporate

MEDIWHEEL PVT LTD

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24/08/2023

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24/08/2023

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179876

Bill/Req. No.

24152442

Ref Doctor

Dr.RMO

Test

Result

Bio. Ref. Interval

Units

Method

ESR (WESTERGREN)

E.S.R. - ILHR.

16

mm II Hr.

Westergren

***** END OF THE REPORT *****



Sample no.

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PARK GROUP OF HOSPITALS: West Delhi - Gurugram - Faridabad - Sonipat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur

care providers

care providers



DEPARTMENT OF IMMUNOLOGY

Patient Name

: Mrs. DIVYA JAIN

MR No-

685000

Age/Sex

31 Years 11 Months 29 Days / Female

Туре

Test

OPD

TPA/Corporate

MEDIWHEEL PVT LTD

Bill Date

24/08/2023

Reporting Date

24/08/2023

Sample ID

179876

Bill/Req. No.

Units

24152442

Method

Ref Doctor

Dr.RMO

THYROID	PRC	FILE

TRI-IODOTHYRONINE (T3) THYROXINE (T4)

NINE (T3) 0.75

THYROID STIMULATING HORMONE

10.1 4.76 SERUM

Result

0.60 - 1.81 5.01 - 12.45 0.5-5.50

Bio. Ref. Interval

ng/ml µg/dL

µIU/ml

Chemiluminescence Chemiluminescence

SPECIMEN TYPE

Method: chemiluminescent immunoassay

Note: Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid.TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-

suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, su ch as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory p olicy.

Note: Please correlate with clinical condition

***** END OF THE REPORT *****

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Dr. SONIA KUMARI MBBS, MD (PATHOLOGY) Gold medalist

Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST

USER NM

PAWAN

- 100 MC - 4830

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3.7

1.08

DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. DIVYA JAIN

IR No : 685000

Age/Sex : 31 Years 11 Months 29 Days / Female

Type : OPD

GLOBULIN

A/G RATIO

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date

24/08/2023

Reporting Date :

24/08/2023

Sample ID

179876

Bill/Req. No.

g/dL

24152442

Ref Doctor

Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
	LFT (LI	VER FUNCTION TEST)		
LFT ,				
TOTAL BILIRUBIN	0.36	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.17	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.19	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	25.0	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	22.9	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	108.1	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	7.7	6.4 - 8.0	g/dL	BIURET
ALBUMIN	4.0	3.3 - 5.5	g/dL	BCG DYE

23-45

1.1 - 2.2

***** END OF THE REPORT *****



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MBBS, MD (PATHOLOGY) Gold medalist

Dr.ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

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CALCULATED

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the health care providers

the health care providers



Patient Name Mrs. DIVYA JAIN

MR No.

Age/Sex 31 Years 11 Months 29 Days / Female

Type

TPA/Corporate : MEDIWHEEL PVT LTD Bill Date

24/08/2023

Reporting Date :

24/08/2023

Sample ID

Bill/Reg. No.

179876

24152442

***************************************			Ref Doctor :	Dr.RMO
Test	Result	Bio. Ref. Interval	Units	Method
1000	KFI	(RENAL PROFILE)		
KFT				***************************************
SERUM UREA	21.0	10 - 45	mg/dL	UREASE-GLDH
SERUM CREATININE	0.8	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	3.2	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	139	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.2	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	8.9	8.5 - 10.5	mg/dL	ARSENAZO III
SERUM PHOSPHORUS	4.5	2.5 - 4.5	mg/dL	AMMONIUM

***** END OF THE REPORT *****



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CONSULTANT CLINICAL MICROBIOLOGIST

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Patient Name Mrs. DIVYA JAIN

MR No

Age/Sex 31 Years 11 Months 29 Days / Female

Type

TPA/Corporate MEDIWHEEL PVT LTD Bill Date

24/08/2023

Reporting Date

24/08/2023

Sample ID Bill/Req. No. 179876

Ref Doctor

24152442

			Kel Doctor	: Dr.RMO
Test	Result	Bio. Ref. Interval	Units	Method
S. Life Co. Sec. Sec. Sec.		LIPID PROFILE		
LIPID PROFILE				
TOTAL CHOLESTEROL	173.1	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	143.7	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	54.1	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	28.74	6 - 32	mg/dL	calculated
LDL	90.26	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	1.67	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	3.2	2.0 - 5.0	mg/dl	calculated

***** END OF THE REPORT *****



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DEPARTMENT OF MICROBIOLOGY

Bio. Ref. Interval

Patient Name

Mrs. DIVYA JAIN

MR No

685000

Age/Sex Type

Test

31 Years 11 Months 29 Days / Female

Result

TPA/Corporate

MEDIWHEEL PVT LTD

Bill Date

24/08/2023

Reporting Date

26/08/2023

Sample ID

179876

Bill/Req. No.

Units

24152442

Ref Doctor

Dr.RMO

URINE C/S

NAME OF SPECIMEN ORGANISM IDENTIFIED

URINE (Uncentrifuged)

NO ORGANISM

GROWN IN CULTURE AFTER 48HRS OF INCUBATION AT 37 C

DEGREE

Aerobic culture

Method

Method: .

Note: URINE CULTURE:

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in sympto matic patients or urine sample collection from catheter or patients with indwelling catheters, even a smaller count of b acteria may signify infection (100-10000cfu/ml). Kindly correlate clinically.

***** END OF THE REPORT *****

Sample no.

Dr. SONIA KUMARI MBBS, MD (PATHOLOGY) Gold medalist

Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST

USER NM

PARDEEP

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