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CID	: 2308317913
Name	: MRS.RHUTA MANDAR SALGAONKAR
Age / Gender	: 36 Years / Female
Consulting Dr. Reg. Location	: - : Kandivali East (Main Centre)

### Collected :24-N

Reported

### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

	<u>CBC (Complet</u>	<u>e Blood Count), Blood</u>	
<u>PARAMETER</u>	<u>RESULTS</u>	<b>BIOLOGICAL REF RANGE</b>	<u>METHOD</u>
<b>RBC PARAMETERS</b>			
Haemoglobin	11.7	12.0-15.0 g/dL	Spectrophotometric
RBC	4.70	3.8-4.8 mil/cmm	Elect. Impedance
PCV	34.7	36-46 %	Calculated
MCV	73.8	81-101 fl	Measured
MCH	24.9	27-32 pg	Calculated
MCHC	33.7	31.5-34.5 g/dL	Calculated
RDW	16.2	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	5590	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND A	BSOLUTE COUNTS		
Lymphocytes	31.9	20-40 %	
Absolute Lymphocytes	1783.2	1000-3000 /cmm	Calculated
Monocytes	6.5	2-10 %	
Absolute Monocytes	363.4	200-1000 /cmm	Calculated
Neutrophils	57.9	40-80 %	
Absolute Neutrophils	3236.6	2000-7000 /cmm	Calculated
Eosinophils	3.4	1-6 %	
Absolute Eosinophils	190.1	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	16.8	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

### PLATELET PARAMETERS

Platelet Count	239000	150000-410000 /cmm	Elect. Impedance
MPV	9.9	6-11 fl	Measured
PDW	17.3	11-18 %	Calculated
RBC MORPHOLOGY			

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Corporate Identity Number (CIN): U85110MH2002PTC136144



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Age / Gender	: 36 Years /	Female		Use a QR Code Scanner Application To Scan the Code	т	
Consulting Dr.	: -	- Collected		:24-Mar-2023 / 11:23		
Reg. Location	: Kandivali E	ast (Main Centre)	Reported	:24-Mar-2023 / 15:18		
Hypochr	omia	Mild				
Microcyt	osis	Mild				
Macrocy	tosis	-				
Anisocyt	osis	Mild				
Poikilocy	/tosis	Mild				
Polychro	omasia	-				

**Target Cells Basophilic Stippling** Normoblasts Others Elliptocytes-occasional WBC MORPHOLOGY PLATELET MORPHOLOGY COMMENT Specimen: EDTA Whole Blood ESR, EDTA WB-ESR 13 2-20 mm at 1 hr. Sedimentation

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab \*\*\* End Of Report \*\*\*



June Bung

**Dr.VRUSHALI SHROFF** M.D.(PATH) Pathologist

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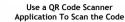
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### MEDIWHEEL FULL BODYHEALTH CHECKUP FEMALE ABOVE 40/TMTPARAMETERRESULTSBIOLOGICAL REF RANGEMETHOD

GLUCOSE (SUGAR) FASTING, 86.6 Fluoride Plasma

GLUCOSE (SUGAR) PP, Fluoride 82.2 Plasma PP/R

Non-Diabetic: < 100 mg/dl Hexokinase Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl

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

Urine Sugar (Fasting) Urine Ketones (Fasting) Absent Absent Absent

Absent

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab \*\*\* End Of Report \*\*\*



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Dr.ANUPA DIXIT M.D.(PATH) Consultant Pathologist & Lab Director

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### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT KIDNEY FUNCTION TESTS

PARAMETER	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
BLOOD UREA, Serum	31.4	19.29-49.28 mg/dl	Calculated
BUN, Serum	14.7	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.62	0.50-0.80 mg/dl	Enzymatic
eGFR, Serum	116	>60 ml/min/1.73sqm	Calculated
Note: eGFR estimation is calculated	using MDRD (Modification of die	t in renal disease study group) equ	ation
TOTAL PROTEINS, Serum	6.9	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.3	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
URIC ACID, Serum	3.0	3.1-7.8 mg/dl	Uricase/ Peroxidase
PHOSPHORUS, Serum	3.3	2.4-5.1 mg/dl	Phosphomolybdate
CALCIUM, Serum	9.2	8.7-10.4 mg/dl	Arsenazo
SODIUM, Serum	137	136-145 mmol/l	IMT
POTASSIUM, Serum	4.6	3.5-5.1 mmol/l	IMT
CHLORIDE, Serum	102	98-107 mmol/l	IMT

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab \*\*\* End Of Report \*\*\*



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Dr.NAMRATA RAUL M.D (Biochem) Biochemist

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: 24-Mar-2023 / 11:23 :24-Mar-2023 / 16:23

### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT GLYCOSYLATED HEMOGLOBIN (HbA1c) RESULTS

### PARAMETER

Glycosylated Hemoglobin 5.2 (HbA1c), EDTA WB - CC Estimated Average Glucose 102.5

**BIOLOGICAL REF RANGE** METHOD HPLC Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 % mg/dl

Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:** 

(eAG), EDTA WB - CC

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

### Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

### Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab \*\*\* End Of Report \*\*\*



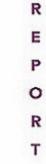


Dr.NAMRATA RAUL M.D (Biochem) **Biochemist** 

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### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT URINE EXAMINATION REPORT

### PARAMETER RESULTS BIOLOGICAL REF RANGE METHOD PHYSICAL EXAMINATION Color Pale yellow Pale Yellow Reaction (pH) 5.0 4.5 - 8.0 Chemical Indicator Specific Gravity 1.005 1.001-1.030 Chemical Indicator Transparency Clear Clear Volume (ml) 30 **CHEMICAL EXAMINATION** Proteins Absent Absent pH Indicator Glucose Absent Absent GOD-POD Ketones Absent Absent Legals Test Blood Trace Absent Peroxidase Bilirubin Absent Diazonium Salt Absent Urobilinogen Normal Normal Diazonium Salt Nitrite Absent Absent Griess Test **MICROSCOPIC EXAMINATION** Leukocytes(Pus cells)/hpf 1-2 0-5/hpf Red Blood Cells / hpf Occasional 0-2/hpf Epithelial Cells / hpf 0-1 Casts Absent Absent Crystals Absent Absent Amorphous debris Absent Absent Bacteria / hpf 2-3 Less than 20/hpf Others

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

• Protein:(1+ ~25 mg/dl, 2+ ~75 mg/dl, 3+ ~ 150 mg/dl, 4+ ~ 500 mg/dl)

- Glucose:(1+ ~ 50 mg/dl, 2+ ~100 mg/dl, 3+ ~300 mg/dl,4+ ~1000 mg/dl)
- Ketone: (1+ ~5 mg/dl, 2+ ~15 mg/dl, 3+ ~ 50 mg/dl, 4+ ~ 150 mg/dl)

### Reference: Pack insert

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

Bmhaskar

Dr.KETAKI MHASKAR M.D. (PATH) Pathologist

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PRECISE TESTING - NEAL	THER LIVING		A. 2. 2. 5 用	P
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Consulting Dr.	: -	Collected	:	
Reg. Location	: Kandivali East (Main Centre)	Reported	:	

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Name: MRS.RHUTA MANDAR SALGAONKARAge / Gender: 36 Years / FemaleConsulting Dr.: -Reg. Location: Kandivali East (Main Centre)

:2308317913

### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT BLOOD GROUPING & Rh TYPING

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### PARAMETER

### <u>RESULTS</u>

ABO GROUP

**Rh TYPING** 

Positive

А

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

### Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

### Refernces:

- 1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
- 2. AABB technical manual

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

\*\*\* End Of Report \*\*



June Konst

Dr.VRUSHALI SHROFF M.D.(PATH) Pathologist

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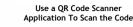
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### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

PARAMETER	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
CHOLESTEROL, Serum	173.9	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	62.9	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric
HDL CHOLESTEROL, Serum	52.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	121.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	108.7	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	12.5	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.1	0-3.5 Ratio	Calculated

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### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	<u>METHOD</u>
Free T3, Serum	4.8	3.5-6.5 pmol/L	CLIA
Free T4, Serum	15.0	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	1.096	0.55-4.78 microIU/ml	CLIA

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PRECISE TESTING - HEAL	THICS LIVING			P
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### Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

### **Clinical Significance:**

1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors

can give falsely high TSH.

2)TSH values may be trasiently altered becuase of non thyroidal illness like severe infections liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non- thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation: 19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

### Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours

following the last biotin administration.

2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

### Reference:

1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)

2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357

3.Tietz , Text Book of Clinical Chemistry and Molecular Biology -5th Edition

4.Biological Variation: From principles to Practice-Callum G Fraser (AACC Press)

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**Dr.ANUPA DIXIT** M.D.(PATH) **Consultant Pathologist & Lab Director** 

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### MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT LIVER FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.56	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.38	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.3	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	18.6	<34 U/L	Modified IFCC
SGPT (ALT), Serum	15.2	10-49 U/L	Modified IFCC
GAMMA GT, Serum	<7.0	<38 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	48.7	46-116 U/L	Modified IFCC

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab \*\*\* End Of Report \*\*\*



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**Dr.ANUPA DIXIT** M.D.(PATH) **Consultant Pathologist & Lab Director** 

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CID#	: 2308317913			0
Name	: MRS.RHUTA MANDAR SALGAONKAR			R
Age / Gender	: 36 Years/Female			Т
Consulting Dr.	:	Collected	: 24-Mar-2023 / 11:02	
Reg.Location	: Kandivali East (Main Centre)	Reported	: 25-Mar-2023 / 10:10	

### PHYSICAL EXAMINATION REPORT

History and Complaints: No

### **EXAMINATION FINDINGS:**

Height (cms):	146 cms	Weight (kg):	64 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg)	: 130/80	Nails:	Normal
Pulse:	72/min	Lymph Node:	Not Palpable

### **Systems**

Cardiovascular:	Normal
Respiratory:	Normal
Genitourinary:	Normal
GI System:	Normal
CNS:	Normal

### **IMPRESSION:**

An reports are arthin @ limits

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ADVICE:

### CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD

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No

No



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CID#	: 2308317913				0
Name	: MRS.RHUTA MANDAR SALGAONK	AR			R
Age / Geno	der : 36 Years/Female				Т
Consulting	Dr. :	C	ollected	: 24-Mar-2023 / 11:02	
Reg.Locati	ion : Kandivali East (Main Centre)	R	eported	: 25-Mar-2023 / 10:10	
3) <b>A</b>	rrhythmia	No			
4) D	iabetes Mellitus	No			
5) <b>T</b> ı	uberculosis	No			
6) <b>A</b>	sthama	No			
7) <b>P</b>	ulmonary Disease	No			
8) <b>TI</b>	hyroid/ Endocrine disorders	No			
9) <b>N</b>	ervous disorders	No			
10) <b>G</b>	il system	No			
11) <b>G</b>	enital urinary disorder	No			
12) <b>R</b>	heumatic joint diseases or symptoms	No			
13) <b>B</b> I	lood disease or disorder	No			
14) Ca	ancer/lump growth/cyst	No			
15) <b>C</b>	ongenital disease	No			
16) <b>Sı</b>	urgeries	LSCS-2019			

### PERSONAL HISTORY:

17) Musculoskeletal System

1)	Alcohol	No
2)	Smoking	No
3)	Diet	Mixed
4)	Medication	No

\*\*\* End Of Report \*\*\*

No

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD. Row House No. 3, Aangan, Thakur Village, Kandivali (east), Mumbai - 400101. Tel : 61700500 Dr. Jagruti Dhale MBBS Consultant Physician Reg. No. 69548 R

E

**Dr.JAGRUTI DHALE** 

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E **Authenticity Check** P 0 CID R : 2308317913 Name : Mrs RHUTA MANDAR Т SALGAONKAR Age / Sex : 36 Years/Female Use a OR Code Scanner Application To Scan the Code Ref. Dr . **Reg.** Date : 24-Mar-2023 **Reg.** Location : Kandivali East Main Centre Reported : 24-Mar-2023 / 17:27

### **MAMMOGRAPHY**

### X RAY MAMMOGRAPHY:

Both mammograms have been performed with Cranio-Caudal and Medio-Lateral Oblique views

Mixed fibroglandular pattern is noted in both breasts partly limiting optimal evaluation (Type C).

No evidence of any speculated high density mass lesion / focal asymmetric density / retraction / clusters of microcalcification is seen.

No abnormal skin thickening is seen.

### **SONOMAMMOGRAPHY:**

Both breasts reveal normal parenchymal echotexture.

No focal solid or cystic mass lesion is seen.

No ductal dilatation is seen.

Bilateral axillae appear normal.

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?

sionNo=2023032411030683

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			Authenticity Check	Ρ
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CID	: 2308317913			R
Name	: Mrs RHUTA MANDAR SALGAONKAR			Т
Age / Sex	: 36 Years/Female		Use a QR Code Scanner Application To Scan the Code	
Ref. Dr	:	Reg. Date	: 24-Mar-2023	
Reg. Location	: Kandivali East Main Centre	Reported	: 24-Mar-2023 / 17:27	

### **IMPRESSION:**

### Normal Mammography and Sonomammography of both breasts. ACR BIRADS Category- I (Negative).

Follow-up Mammography after 1 year is suggested. Please bring all the films for comparison.

### ACR BIRADS CATEGORY

- I. Negative
- II. Benign.
- III. Probably benign.
- IV. Suspicious / Indeterminate.
- V. Highly Suggestive of malignancy

-----End of Report-----

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DR. SHRIKANT M. BODKE D.M.R.E., M.B.B.S. Reg. No. 2006/04/2376

Note : Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Mammography is known to have inter-observer variations. False negative rate of Mammography is approximately 10%. Management of palpable abnormality must be based on clinical grounds. Further / Follow-up imaging may be needed in some case for confirmation of findings Please interpret accordingly. Patient has been explained in detail about the Mammography findings and limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. If you detect any lump or any other change in the breast before your next screening, consult your doctor immediately.

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?

sionNo=2023032411030683

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SUBURBA	N 🤹			R
CID	HIER LIVING : 2308317913			P
Name	: Mrs RHUTA MANDAR SALGAONKAR			O R
Age / Sex Ref. Dr Reg. Location	: 36 Years/Female : : Kandivali East Main Centre	Reg. Date Reported	Use a QR Code Scanner Application To Scan the Code : 24-Mar-2023 : 24-Mar-2023 / 17:35	Т

### **X-RAY CHEST PA VIEW**

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

### **IMPRESSION:** NO SIGNIFICANT ABNORMALITY IS DETECTED.

Note: Investigations have their limitations. solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X ray is known to have inter observer variations. Further / follow up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Please interpret accordingly. In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days, post which the center will not be responsible for any rectification. -----End of Report-----

**Authenticity Check** 

DR. SHRIKANT M. BODKE D.M.R.E., M.B.B.S. Reg. No. 2006/04/2376

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023032411030690

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			P
Name: Rlauta	Salgankar	Age/Gender - 36(f	R
Dr. :		Date : _ 24/3/23	т

CHIEF COMPLAINTS :

MARITAL STATUS

**MENSTRUAL HISTORY:** 

(i) MENARCHE :

- (ii) PRESENT MENSTRUAL HISTORY :
- (iii) PAST MENSTRUAL HISTORY :

**OBSTETRIC HISTORY** :

PAST HISTORY :

**PREVIOUS SURGERIES** :

ALLERGIES :

FAMILY HISTORY :

DRUG HISTORY :

BOWEL HABITS :

**BLADDER HABITS :** 

PERSONAL HISTORY Pcos .: aye 16 4 m. narried 134 - Rol sthoay of m.c PIL2A, (Times) 10-2019 father - HT

**Dr.Jagruti** Dhale MBBS Consultant Physician Reg.No.69548

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Name :

Dr. :

Age / Gender

R

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Т

Date :

### **GYNAEC EXAMINATION REPORTS**

### **GENERAL EXAMINATION**

RS :

TEMPERATURE :

PULSE :

BP

TURE: (D) FRS: (MAD) FRS: (MAD) Breasts: MAD Breasts:

Per Abdomen :

Per vaginal

ADVISE :

Dr.Jagruti Dhale **MBBS Consultant Physician** Reg.No.69548

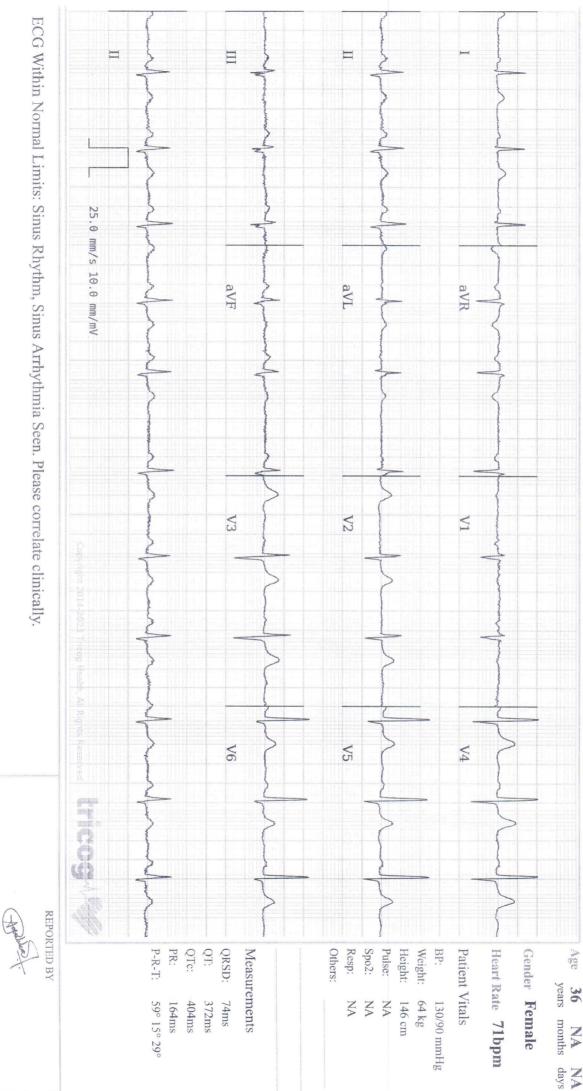
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## SUBURBAN DIAGNOSTICS - KANDIVALI EASI

Patient ID: Patient Name: RHUTA SALGAONKAR 2308316990 Date and Time: 24th Mar 23 9:44 AM

PRECISE TESTING . HEALTHIER LIVING DIAGNOSTICS - 67

SUBURB,



Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

DR AKHIL PARULEKAR MBBS.MD. MEDICINE, DNB Cardiology Cardiologist 2012082483



Date: - 24 3 23

CID: 2308 3/7913

Sex/Age: P/36

Name:- Mrs Rhita Salgeonker

EYE CHECK UP

Chief complaints: Portine ch-up			
Systemic Diseases: 🔊	HO ST		
Past history: No Ho	Ocular stinju	צת	
Unaided Vision:	616	616	
Aided Vision:	-	~	

Refraction:

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	(Rig	ht Eye)				(Le	eft Eye)	
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	-PL	ino -		clo	- P	lano	-	olc
Near				pla				1016

Colour Vision: Normal / Abnormal

Remark: Vn within normal limit

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### **KAJAL NAGRECHA OPTOMETRIST**

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EMail:	SUBURBAN
	DIAGNOSTICS
	KANDIVALI EAST



Date: 24 / 03 / 2023 11:20:08 AM Refd By : MEDIWHEEL Examined By: DR.AKHIL PARULEKAR 1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg

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							lieved	, Heart Rate Achieved	; H	asons	Test End Reasons
									: 05.2	nill Score	Duke Treadmill Score
				× 11		tress	7.4 Fair response to induced stress	Fair respons	. /.4	ad Attained	Max WorkLoad Attained
			(mm/mg)	Attained 190/80 (mm/ng)	Max BP Att	5 ) )		130/90 (mm/Hg)		xStrt)	Initial BP (ExStrt)
		get 184	m 87% of Tar	Attained 160 bpm 87% of Target 184			Target 184	: 96 bpm 52% of Target 184	: 96 bp	xStrt)	Initial HR (ExStrt)
								5	8		•
											FINDINGS :
	00	000	/	0 %	000	00.0				08:21	Recovery
	00	175	150/80	64 %	117	01.1	00.0	00.2	1:00	08:13	Recovery
	00	240	150/80	87 %	160	07.4	14.0	05.5	0:19	07:13	PeakEx
	00	201	130/90	84 %	155	07.1	12.0	04.0	3:00	06:54	BRUCE Stage 2
	00	167	130/90	70 %	129	04.7	10.0	02.7	3:00	03:54	BRUCE Stage 1
	00	124	130/90	52 %	960	01.0	00.0	00.0	0:17	00:54	ExStart
	00	127	130/90	53 %	860	01.0	00.0	00.0	0:06	00:37	HV
	00	113	130/90	47 %	087	01.0	00.0	00.0	0:24	00:31	Standing
	00	106	130/90	45 %	082	01.0	00.0	00.0	0:07	00:07	Supine
	PVC	RPP	Bp	% THR	Rate	METS	Speed(Kmph) Elevation	Speed(Km	Duration	Time	Stage

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EMail: F / 146 Cms / 64 Kg Date: 24 / 03 / 2023 11:20:08 AM Refd By : MEDIWHEEL

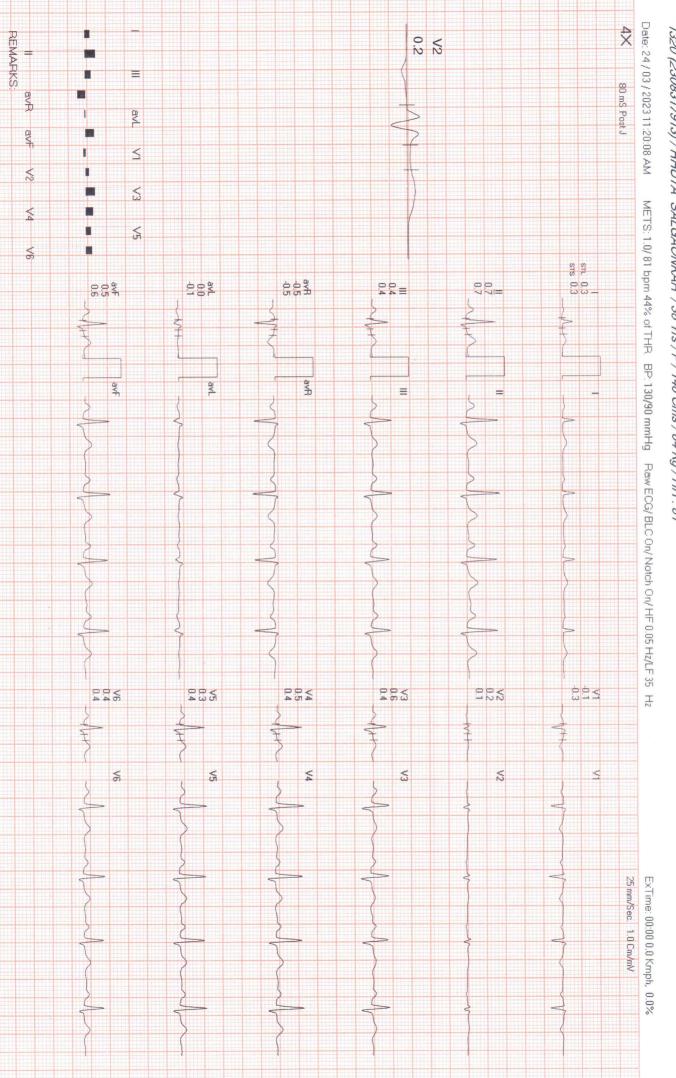
	is mandatory.	DISCLAIMER Negative stress test does not rule out coronary arten	FINAL IMPRESSION	CHRONOTROPIC RESPONSE	HAEMODYNAMIC RESPONSE	EXERCISE INDUCED ARRYTHMIAS	EXERCISE TOLERANCE : 0	REASON FOR TERMINATION	MEDICATION	ACTIVITY	RISK FACTOR	TEST OBJECTIVE		
Doctor : DR.AKHIL PARULEKAR	Dr. Akhi P. Parulekar.	DISCLAIMER Negative stress test does not rule out coronary artery diseas. Positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical corellation	NO SIGNIFICANT ST T CHANGES NOTED STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE.					HEART RATE ACHIEVED		MODERATE ACTIVE		ROUTINE CHECK UP	Heart Rate 87% of 184	

### SUBURBAN DIAGNOSTICS KANDIVALI EAST

SUPINE (00:07)



1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR : 81

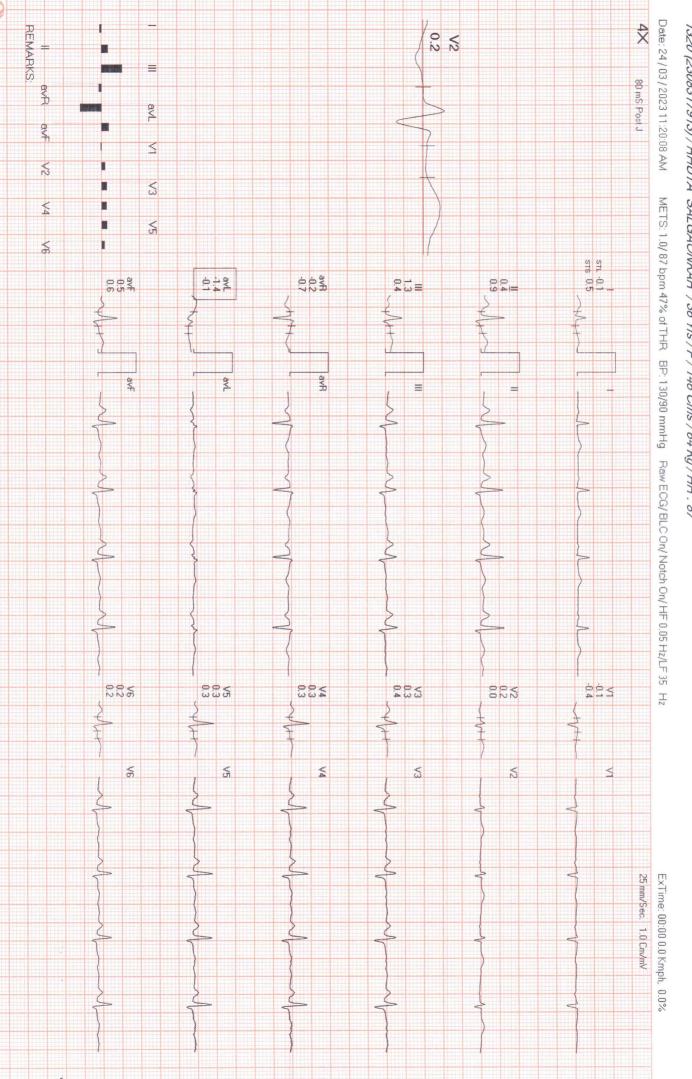




STANDING (00:24)



1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR : 87

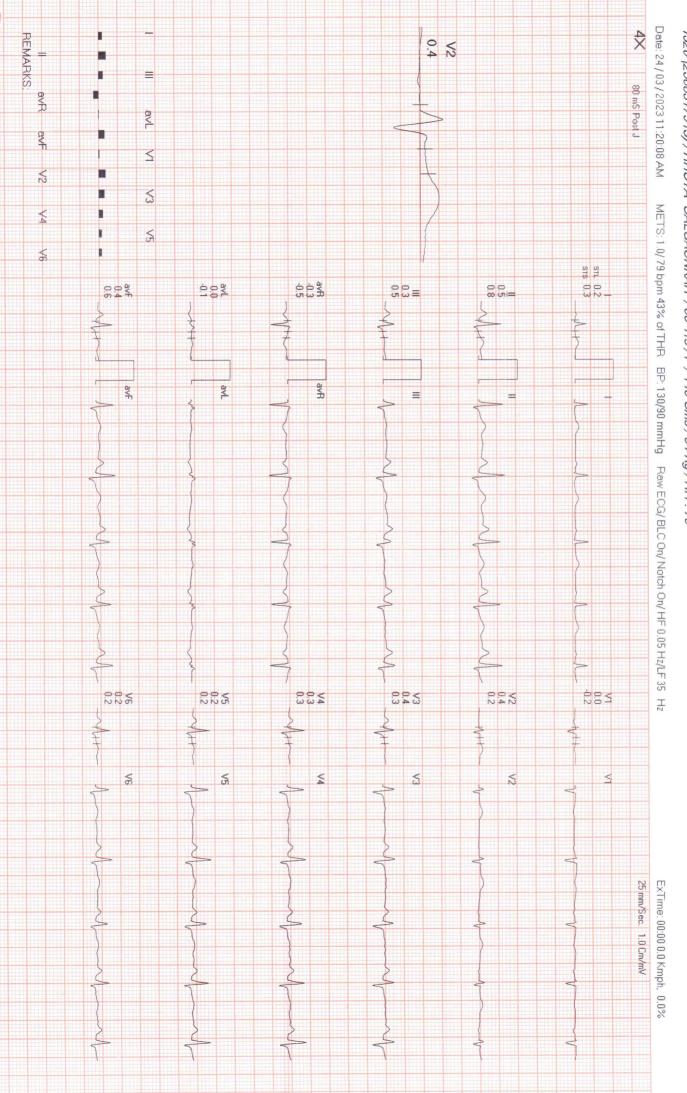




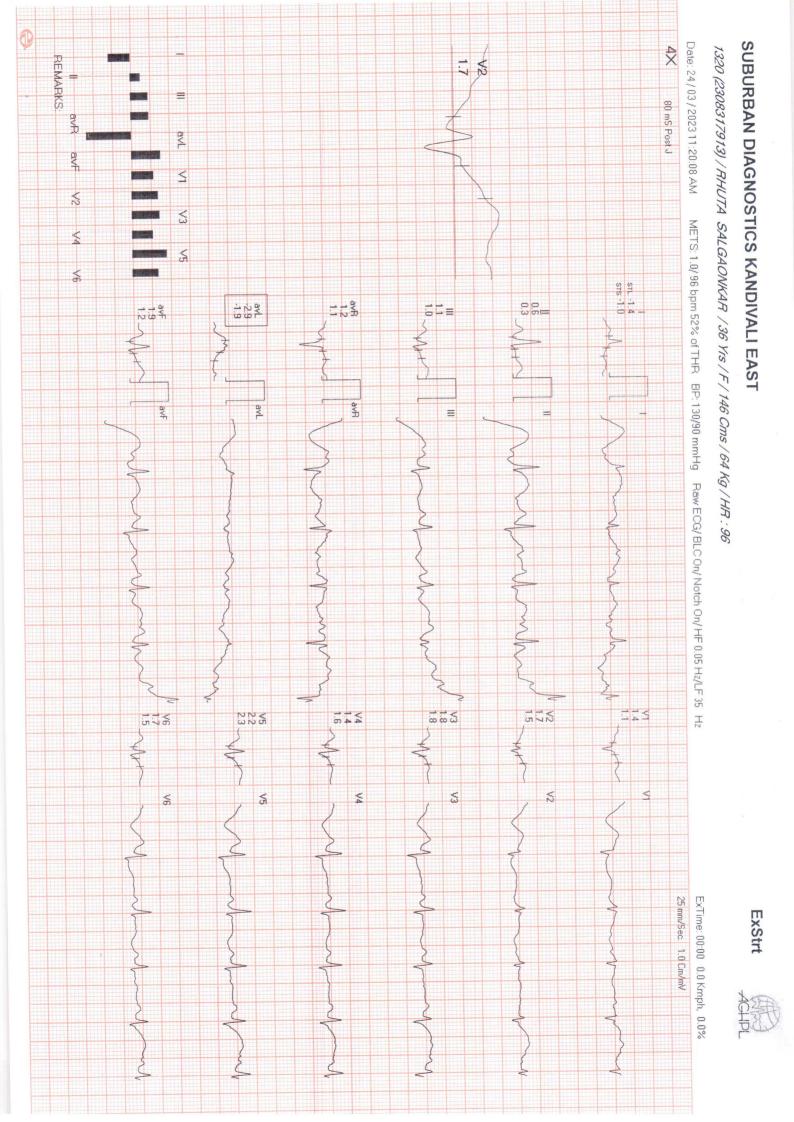
HV (00:06)



# 1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR : 79



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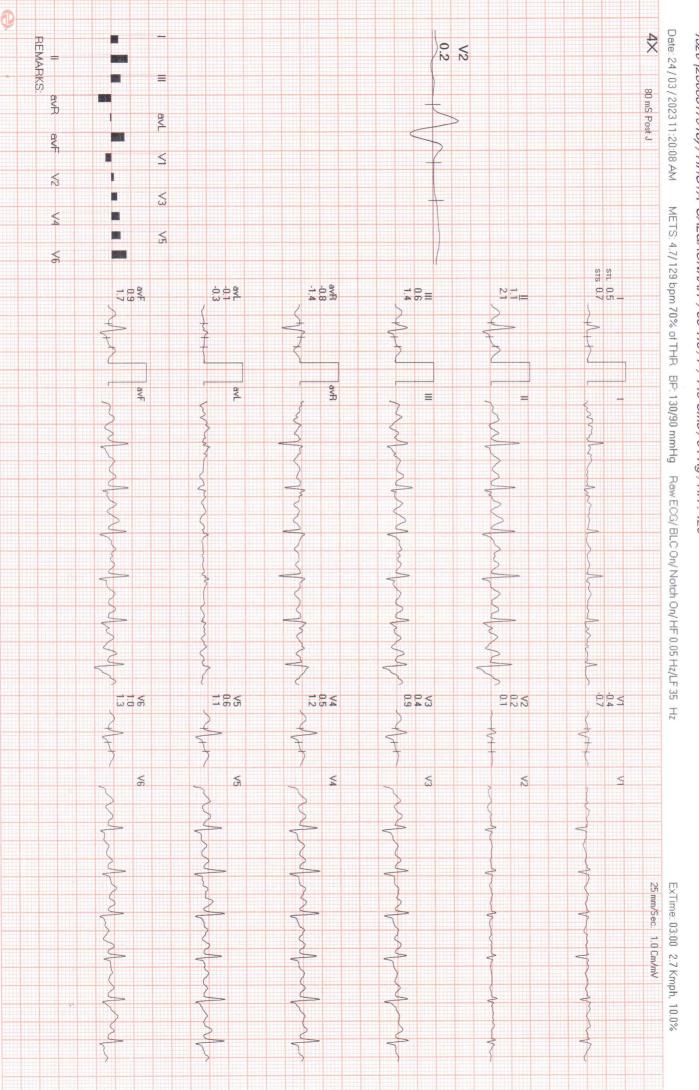




BRUCE : Stage 1 ( 03:00 )



# 1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR : 129

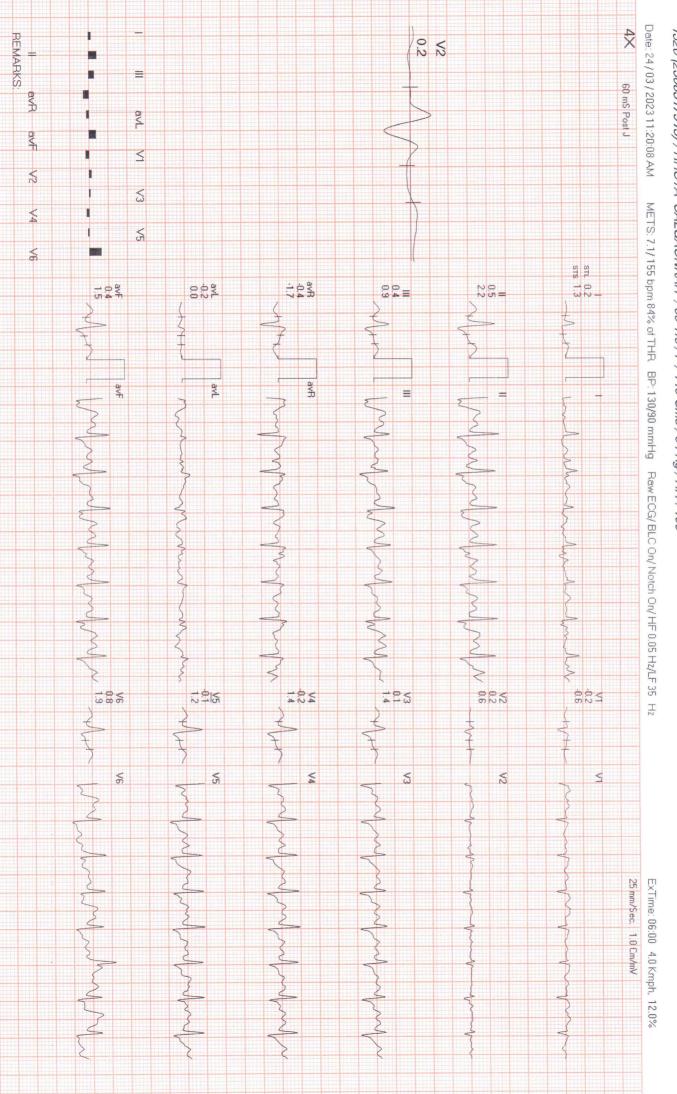




BRUCE : Stage 2 ( 03:00 )



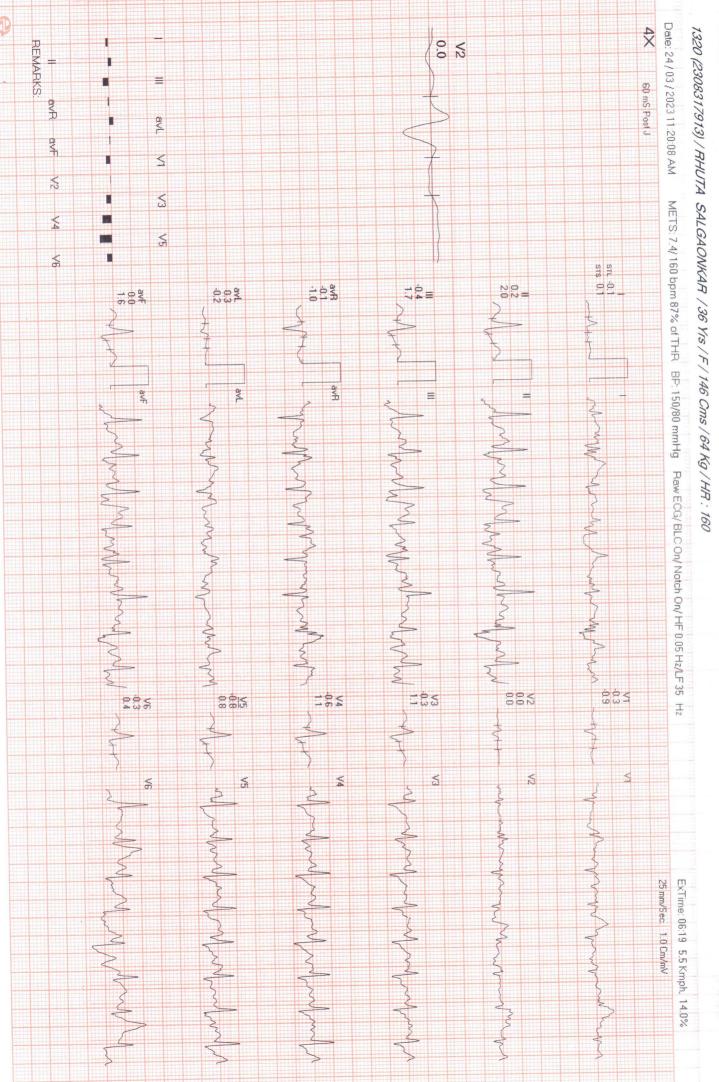
1320 (2308317913) / RHUTA\_SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR : 155



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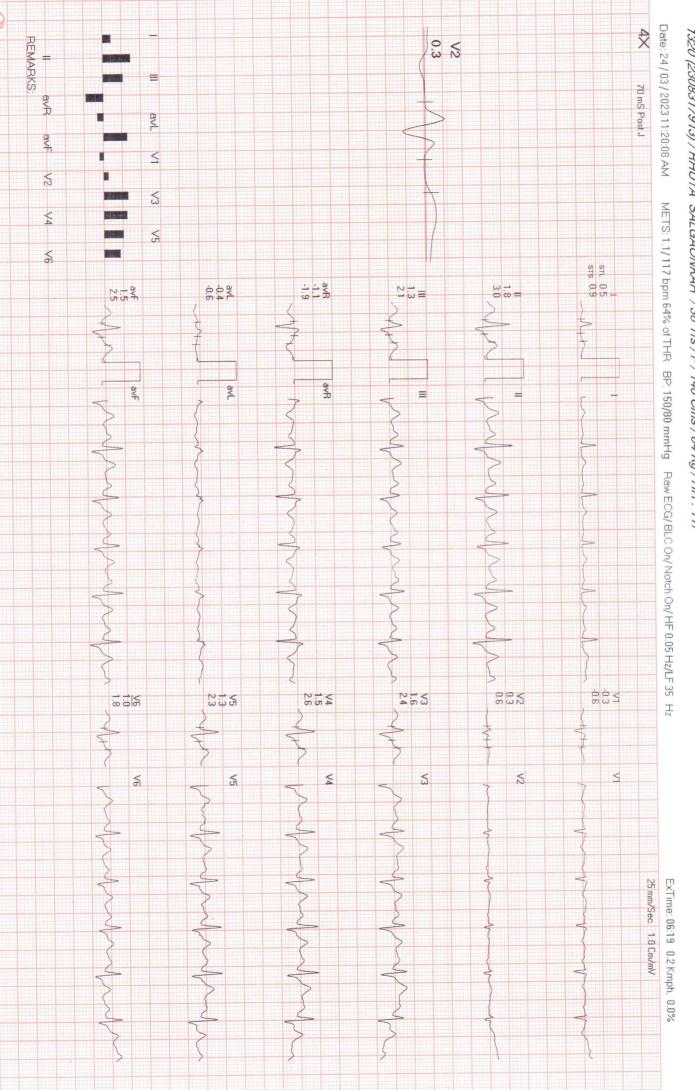




Recovery : (01:00)





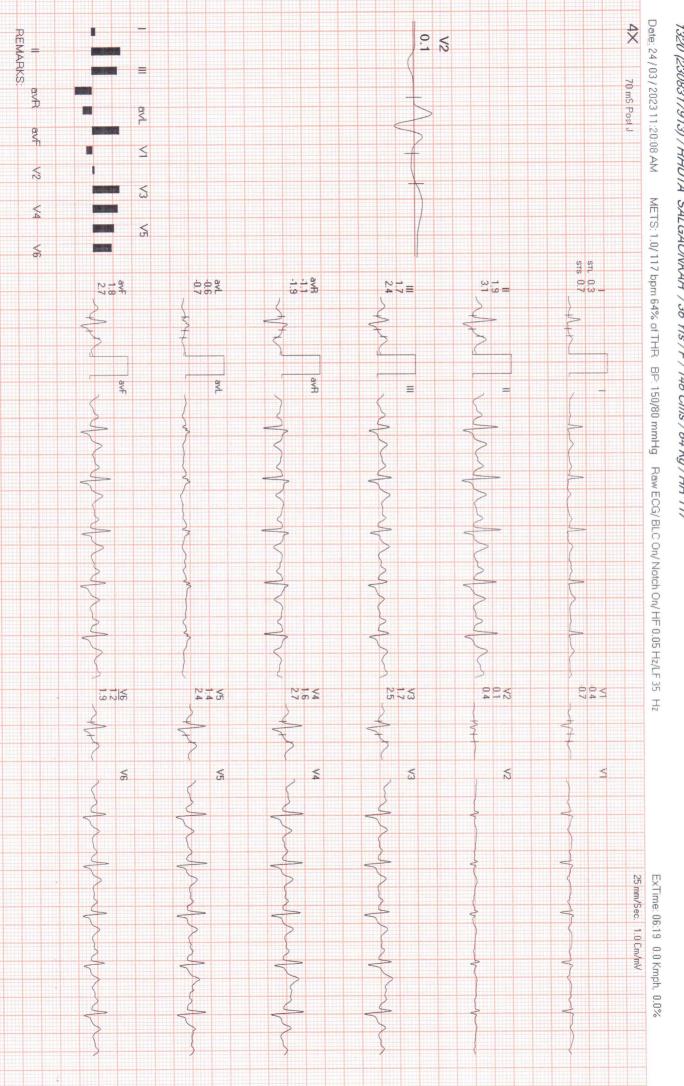


### SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (01:08)



1320 (2308317913) / RHUTA SALGAONKAR / 36 Yrs / F / 146 Cms / 64 Kg / HR 117



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