





भारत सरकार
GOVERNMENT OF INDIA



कल्याणी नितीन गिजरे
Kalyani Nitin Gijare

जन्म वर्ष / Year of Birth : 1993
स्त्री / Female



9899 7333 6535

आधार — सामान्य माणसाचा अधिकार



भारतीय विशिष्ट ओळख प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता ए-१/१९ सरिता वैभव,
स.नं.-११९/२, पू. ल. देशपांडे उद्यान
समोर, पर्वती, पुणे सिटी, पुणे, महाराष्ट्र,
411030

Address: A-1/19 Sarita Vaibhav,
S.No.-119/2, Pu.L. Deshpande
udyan Samor, Parvati, Pune City,
S.P. College, Pune, Maharashtra,
411030



1947
1800 180 1947



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www

www.uidai.gov.in



P.O. Box No. 1947,
Bengaluru-560 001



Patient Name : MRS. KALYANI NITIN GIJARE

Age / Gender : 29 Yrs 9 M / Female

Mobile No. : -

Patient ID : 797

Source : MEDIWHEEL

Referral : Mediwheel Full Body Check up

Receiving Time : Apr 17, 2023

Sample ID :



Test Description	Value(s)	Reference Range	
THYROID FUNCTION TEST (TFT)			
T3-Total	1.41	0.6 - 1.80	ng/mL
T4-Total	8.2	4.5 to 10.9	microgm/dl
TSH-Ultrasensitive	2.03	0.35 to 5.55	microU/mL

Method : CLIA

Interpretation

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids .

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 & FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

During pregnancy, T3 T4 can be high and TSH can be slightly low

****END OF REPORT****

DR. RAJENDRA RAMLING SHETE

REG NO: 083463

Scan to Validate





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Test Description	Value(s)	Reference Range
<u>Blood Group Abo & Rh Typing, Blood</u>		
Blood Group (ABO typing) Method : Manual-Hemagglutination	"AB"	
RhD Factor (Rh Typing) Method : Manual hemagglutination	Positive	

END OF REPORT

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Test Description	Value(s)	Reference Range	
LIPID PROFILE			
Cholesterol-Total Method : Spectrophotometry	177	Desirable level < 200 Borderline High 200-239 High >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	129	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	45	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	106.20	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic (Calculated)	25.80	6 - 38	mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	3.93	UP TO 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic	2.36	UP TO 3.5	

Note:

8-10 hours fasting sample is required.

****END OF REPORT****

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Test Description	Value(s)	Reference Range
------------------	----------	-----------------

GLYCOSYLATED HAEMOGLOBIN (GHB / HBA1c)

HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD 6.8 %

Method : (HPLC, NGSP certified)

Estimated Average Glucose : 148.46 - mg/dL

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183

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Test Description	Value(s)	Reference Range
9	212	
10	240	
11	269	
12	298	

END OF REPORT

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Test Description	Value(s)	Reference Range	
<u>LIVER FUNCTION TEST (LFT)</u>			
Total Protein	7.8	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.1	3.2 - 4.6	g/dL
Method : Serum, Bromocresol green			
Globulin	3.70	1.8 - 3.6	g/dL
Method : Serum, EIA			
A/G Ratio	1.11	1.2 - 2.2	
Method : Serum, EIA			
Bilirubin - Total	0.40	0.3 - 1.2	mg/dL
Method : Serum, Jendrassik Grof			
Bilirubin - Direct	0.20	< 0.2	mg/dL
Method : Serum, Diazotization			
Bilirubin - Indirect	0.20	0.1 - 1.0	mg/dL
Method : Serum, Calculated			
SGOT	43	Upto 40	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
SGPT	42	Upto 42	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
Alkaline Phosphatase	70	30 - 120	U/L
Method : PNPP-AMP Buffer/Kinetic			
GGT-Gamma Glutamyl Transpeptidase	35	< 38	U/L
Method : Serum, G-glutamyl-carboxy-nitroanilide			

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Test Description	Value(s)	Reference Range
------------------	----------	-----------------

Esr, Erythrocyte Sedimentation Rate

ESR - Erythrocyte Sedimentation Rate 14 0-15 mm/hr

Method : EDTA Whole Blood, Manual Westergren

Interpretation:

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

****END OF REPORT****

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Test Description	Value(s)	Reference Range	
RENAL FUNCTION TEST			
Uric Acid Method : Serum, Uricase	3.3	3.2 - 7.2	mg/dL
Creatinine Method : Serum, Jaffe	1.2	0.4 - 1.4	mg/dL
Urea Method : Uricase	15	10 - 50	mg/dL
Blood Urea Nitrogen-BUN Method : Serum, Urease	7.01	8 - 23	mg/dL

Remark:

In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

****END OF REPORT****

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Test Description	Value(s)	Reference Range	
Complete Blood Count			
WBC	8600	4000-10000	cell/cu.mm
Neu%	65	50 - 70	%
Lym%	30	20.0 - 40.0	%
Mon%	03	3.0 - 12.0	%
Eos%	02	0.5 - 5.0	%
Bas%	00	0.0 - 1.0	%
RBC	5.50	4.0 - 5.50	10 ⁶ /uL
HGB	14.0	12.0 - 16.0	g/dL
HCT	41	40.0 - 54.0	%
MCV	73	83 - 101	fL
MCH	25	27 - 32	pg
MCHC	34.1	31.5 - 34.5	g/dL
RDW-CV	12.1	11.0 - 16.0	%
PLT	196	150-450	10 ³ /ul
MPV	11.5	6.5 - 12.0	fL
RBC	Normocytic normochromic		
WBC	Within normal limits		
Platelet	Adequate		

END OF REPORT

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Test Description	Value(s)	Reference Range
<u>FASTING BLOOD SUGAR</u>		
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	95	Normal: 70 - 99 mg/dL Impaired Tolerance: 100-125 Diabetes mellitus: \geq 126 (on more than one occasion) (American diabetes association guidelines 2018)
Urine Fasting	Absent	

****END OF REPORT****

DR. RAJENDRA RAMLING SHETE

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Test Description	Value(s)	Reference Range
PPBS		
Blood Glucose-Post Prandial Method : Hexokinase	115	70 - 140 mg/dL
Urine Post Prandial	Absent	

****END OF REPORT****

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Sample ID :



Test Description	Value(s)	Reference Range
<u>URINE ROUTINE EXAMINATION</u>		
Volume*	20	- ml
Colour*	Pale Yellow	
Transparency (Appearance)*	Clear	
Deposit*	Absent	
Reaction (pH)*	7.5	4.5 - 8
Specific Gravity*	1.025	1.010 - 1.030
<u>Chemical Examination (Automated Dipstick Method) Urine</u>		
Urine Glucose (sugar)*	Absent	
Urine Protein (Albumin)*	Absent	
<u>Microscopic Examination Urine</u>		
Pus Cells (WBCs)*	2-3	0 - 5 /hpf
Epithelial Cells*	3-4	0 - 4 /hpf
Red blood Cells*	Absent	/hpf
Crystals*	Absent	
Cast*	Absent	
Bacteria*	Absent	
Mucus Thread	Absent	

END OF REPORT

DR. RAJENDRA RAMLING SHETE

REG NO: 083463

Scan to Validate





Ms. Kalyani Gijare

Fc Road Wakad Pune Maharashtra India

Gendr/DOB (Age) : Female/05-Jul-1993(29Y 9M)

Medico ID : 23041701374076

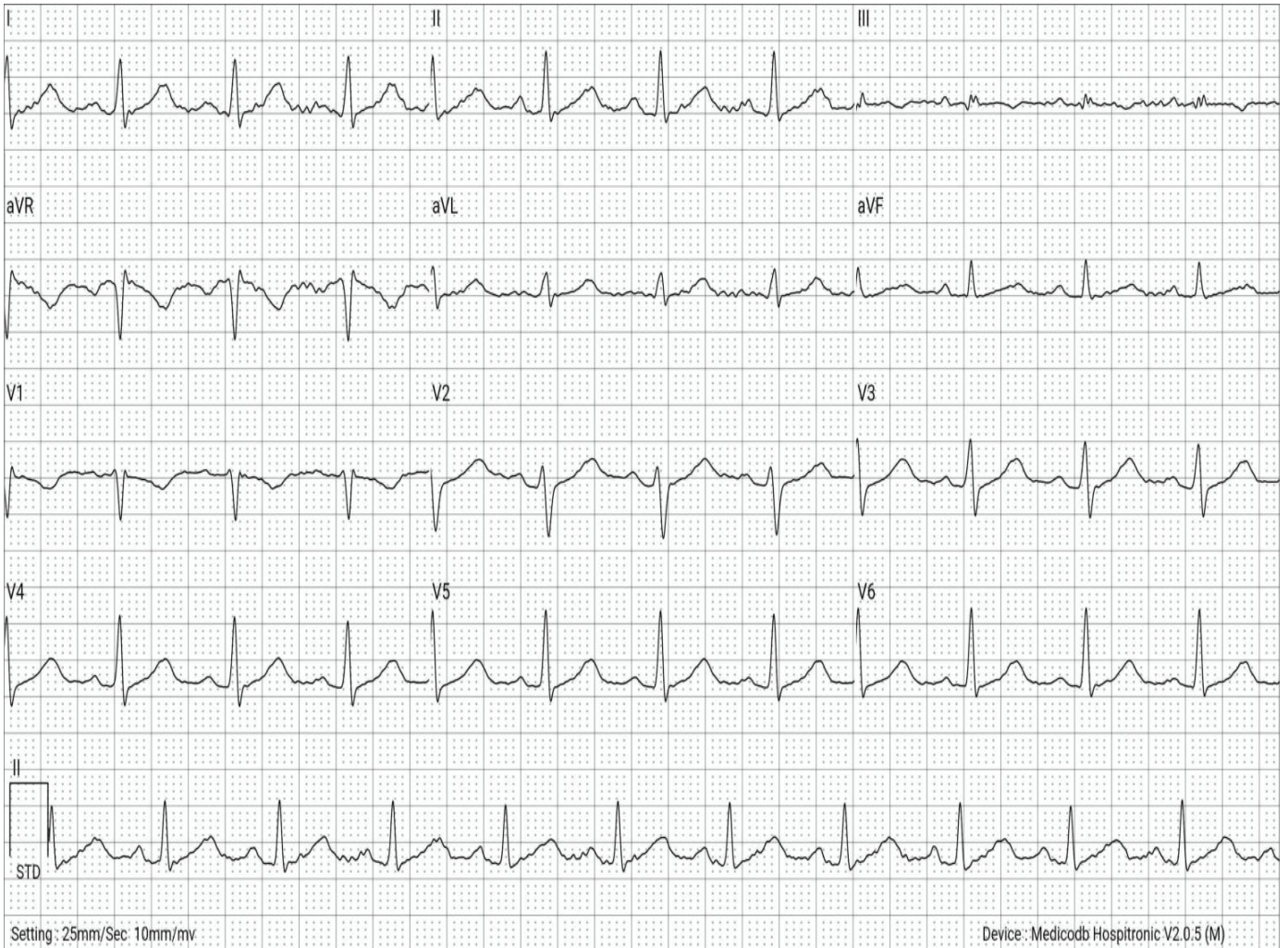
Referred By :

Date

: 17-Apr-2023 / 01:24 PM

History :

REPORT ON ECG



VITALS	:	TEMP	: - (F)	PULSE RATE	: - /MIN	RBS	: - mg/dL
	:	HR	: 98 /MIN	BP	: 150 / 90 mmHg	SPO2	: 99.0 %

MEASUREMENTS*	:	PR	: 160.0 ms	QT	: 386.81 ms	P	: 43.31 deg
(ECG Parameters)	:	ST	: 0.65 ms	QTc	: 492.57 ms	QRs	: 39.03 deg
	:	R-R	: 616.67 ms	QRS	: 95.83 ms	T	: 17.74 deg

FINDINGS	:	NORMAL SINUS RHYTHM. NO SIGNIFICANT ST CHANGES NOTED
IMPRESSION	:	THIS ECG IS FOUND TO BE WITHIN NORMAL LIMITS.
RECOMMENDATION	:	CLINICAL CORRELATION

This is electronically authenticated report; hence doesn't require signature.

* Software calculated values; to be verified manually.

Printed By : Madyoasis Medical SPL ECG Technician On 17-Apr-2023 / 01:25 PM
(Rs. 0.00/- Received for this ECG)

Reported By

Express Diagnostics HQ

(Dr. Deepak N Vora (MD)) Reg. No : G-16048

DR. CHANDRASHEKHAR M. BHAVE

• M. D. (Rad.), D. M. R. D., D. M. R. T. (Bom.).

DIGITAL X-RAY

& COLOUR DOPPLER CLINIC

• Tel. Nos. : (C) 2553 2346. / (R) 2551 0438.

• Mobile : 98220 90203.

CONSULTING RADIOLOGIST, SONOLOGIST
& RADIOTHERAPIST.

1221 / B - 1, WRANGLER-PARANJPE ROAD,
HOTEL VAISHALI LANE, GROUND FLOOR,
OFF FERGUSSON COLLEGE ROAD,
OPP. VIVEKANAND HALL, SHIVAJINAGAR, PUNE - 411 004.

17-APR-2023.

MRS. KALYANI GIJARRE.
C / O MADYOASIS SERVICES PVT. LTD.
USG - ABDOMEN & PELVIS.

Realtime USG study of abdomen & pelvis has been done.
Liver shows diffuse fatty infiltration. No focal lesion is seen. No intra- hepatic biliary duct dilation is noted. Portal & hepatic vein radicles look normal. CBD & PV are of normal calibre at porta hepatis.
Gall bladder is well distended, shows clear contents & smooth walls. No echo reflective gall stones are seen. No evidence of cholecystitis is noted.
Spleen shows normal size & echotexture. No evidence of focal lesion.
Pancrease shows normal echo-appearance. No evidence of pancreatitis; pancreatic calculi or mass lesion is seen.
Both kidneys show normal size, shape, position; sinus echoes & C - M differentiation. No evidence of renal calculus or HDN noted.
Right kidney measures 115 x 41 mm.
Left kidney measures 112 x 40 mm.
Ureters are undilated. U-V regions are clear.
Bladder shows normal contours. No intrinsic mass or calculus is noted. No cystitis.
Pre void volume - 230 ml. While post void volume - 28 ml. (Not significant).
Uterus is AV, non - gravid, measures 77 x 38 x 41 mm in size & shows thin (3 mm) endometrial echo. No fibroid.
Ovaries show normal size & echotexture.
Right ovary - 27 x 22 mm. Left ovary - 26 x 22 mm.
No adnexal mass or cyst noted.
No evidence of free fluid is seen in the cul - de - sac.
No evidence of ascites or lymphadenopathy is noted. Aorta & I.V.C look normal.
No sonographically detected bowel pathology is seen.

IMPRESSION :- Liver shows diffuse fatty infiltration.

No chole / urolithiasis.

Normal uterus & ovaries.

Post void residue - 28 ml (not significant).

(DR. CHANDRASHEKHAR. M. BHAVE).

MD(RAD), DMRD, DMRT(BOM).

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HITACHI ALOKA DR. C.M. BHAVE SONOGRAPHY CLINIC. 235/23 : 28Y : F 17-04-'23 12:31:40 100%



AP BH SCI

GS R22.0 G56 D54

Full Screen Loop Frame Speed Image Full Screen Line Image Reset

This block contains the control interface of the ultrasound machine. It includes several buttons and sliders: 'Full Screen' (circular button), 'Loop' (slider), 'Frame' (slider), 'Speed' (slider), 'Image' (slider), and another 'Full Screen' button with a 'Line Image Reset' option below it. Technical parameters 'AP BH SCI' and 'GS R22.0 G56 D54' are also visible.



HITACHI ALOKA DR. C.M. BHAVE SONOGRAPHY CLINIC.

235/23 : MRS KALYANI GIJARE 28Y : F

17-04-'23 12:23:53

236/236 27Hz

100%

100%

86/86 27Hz

LEFT KIDNEY 111

SPLEEN

R22.0 G62 D54

R22.0 G62 D54

Full Screen

Loop

Frame

Speed

Image

Full Screen

Line Image Reset

TB

Conducted for detection of...
before or after conception of...
inference and person...
involvement upto 3 years...
3 years

17-04-'23
12:21:04

HITACHI ALOKA DR. C.M. BHAVE SONOGRAPHY CLINIC.

:235/23 : 28Y :F
:MRS KALYANI GIJARE

252/252
27Hz

100%

100%
188/188
27Hz



2.00MS R22.0 G63 D54

2.00MS R22.0 G63 D54

Full Screen

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HITACHI ALOKA DR. C.M. BHAVE SONOGRAPHY CLINIC.

:235/23 : 28Y :F
:MRS KALYANI GIJARE

17-04-'23
12:25:48

100%

559/559
27Hz

100%

960/960
27Hz



2.00MS R22.0 G61 D54

2.00MS R22.0 G61 D54

Full Screen

Loop

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Reset

TB

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HITACHI ALOKA DR. C.M. BHAVE SONOGRAPHY CLINIC.

:235/23 : 28Y :F
:MRS KALYANI GIJARE

17-04-'23
12:22:19

100%

186/186
27Hz

369/371
27Hz

GB
LIV
LIVER-GB-PORTA

LIV
RIGHT KIDNEY

2:00MS R22.0 G63 D54

2:00MS R22.0 G62 D54

Full Screen Loop Frame Speed Image Full Screen Line Image Reset

TB

DEPARTMENT OF RADIOLOGY

Patient Name:	<i>Ms. Kalyani Gijare</i>	Referring Physician:	<i>Mediwheel</i>
Age:	<i>28Y</i>	Sex:	<i>Female</i>
Patient ID:	<i>R-4</i>	Study Date:	<i>17/04/2023</i>

X Ray Chest PA View

Lung & Pleural sinuses are clear.

Heart Size & Aorta appears clear.

Both costophrenic sinuses appears clear.

Bony thorax appears normal.

IMPRESSION: NORMAL STUDY.

Best

BHAVE X-RAY & SONOGRAPHY CLINIC
DR. CHANDRASHEKHAR M BHAVE
M.D., D.M.R.D., D.M.R.T.(BOM)
CONSULTANT RADIOLOGIST & SONOLOGIST
Reg. No. MMC - 33671





MADYOASIS DIAGNOSTICS

First Floor, Deendayal Hospital Complex,
926, FC Road, Shivajinagar Pune,
Maharashtra 411004

+91 74100 01781 | Time: 9 am to 9 pm
md.fcroad@madyoasis.in
www.madyoasis.in

Eye Checkup

Name: Kalyani^o Nitin Bijare Gender: female
Age: 28 Date: 17-04-2023

HISTORY:- NO

EXAMINATIONS:- eye

VISION:-

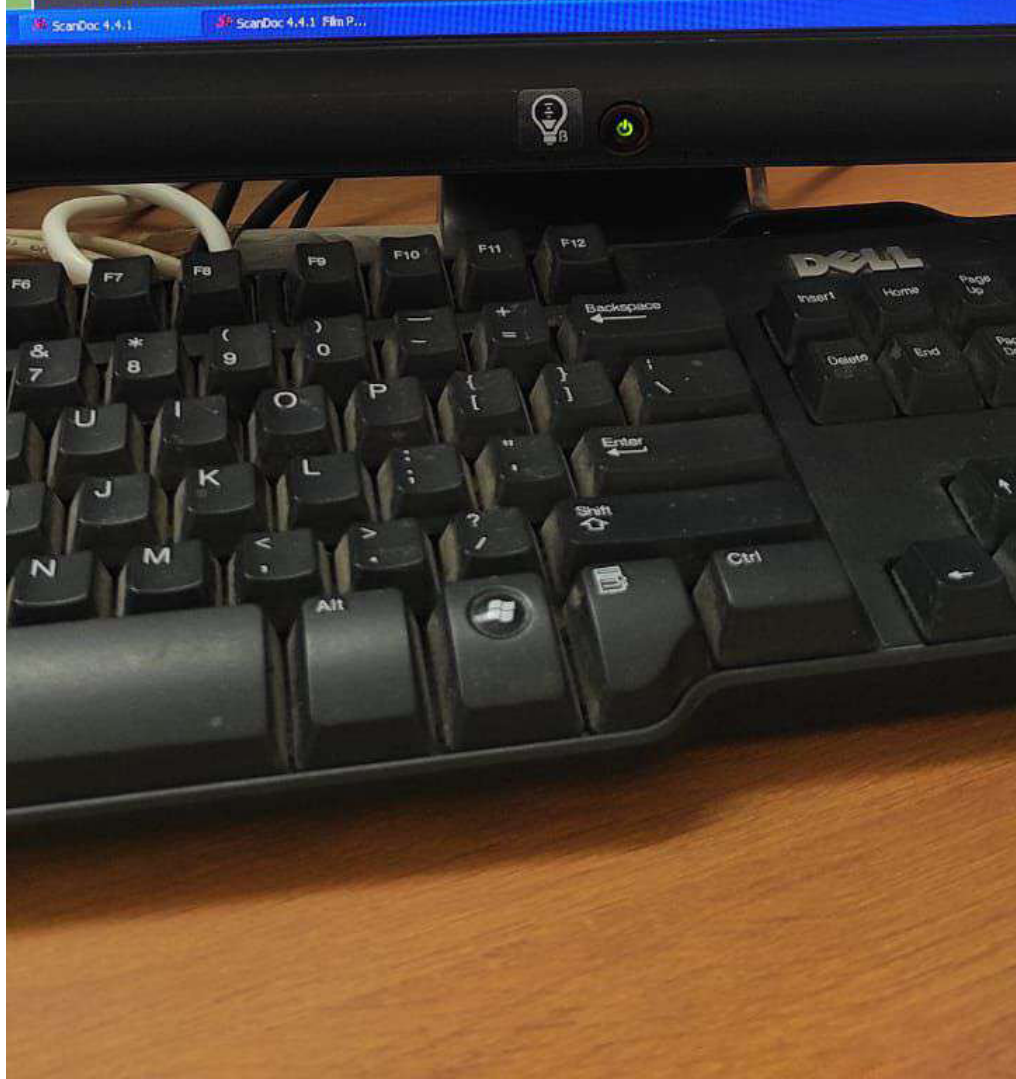
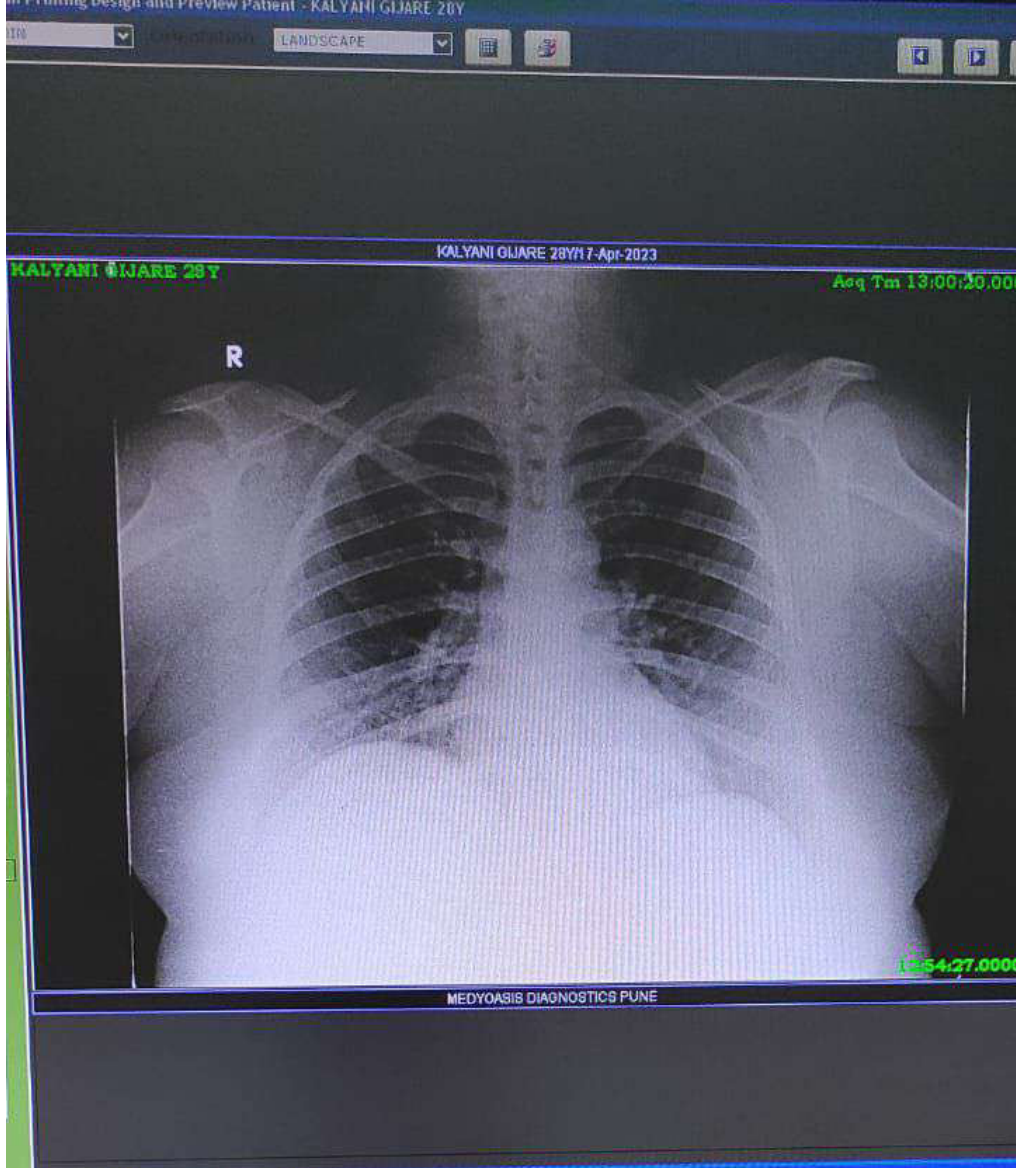
	Near	Distance
Right Eye	<u>6/6</u>	<u>6/6</u>
Left Eye	<u>6/6</u>	<u>6/6</u>

COLOUR VISION (Tick Only):-

Normal	
Partial: Red / Green Deficiency	
Complete: Red / Green Deficiency	

Doctor Signature
DR. RAJESH MAILAGIRE
General Physician (MBBS)
Reg No. 2018/04/1055
www.madyoasis.in





To.

Date = 17/4/23

Medyoasis Diagnosis
Services Pvt Ltd.

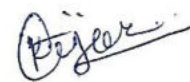
Pune.

Sub :- Not Opted for following tests.

I, Kalyani Ninit Gijare, hereby declare that, I have high B.P. & overweight issue, I have not opted for TMT & I have already done 2D ECHO test in last month.

Hence I request you to process further without TMT test, stress test & 2D Echo test as mentioned above.

Regards.



Kalyani Gijare