Dr. Vimmi Goel MBBS, MD (Internal Medicine) Sr. Consultant Non Invasive Cardiology Reg. No: MMC- 2014/01/0113 Reg. No: MMC- 2014/01/0113 Magpur Phone No.: 7499913052	Medi-Wheel Rlo-Nagpor KIMS-KINGSWAY HOSPITALS
Name: Mrs. Mg22ing Sontukre	Date: 23/12/23
Age: 444 Sex: MF Weight: 72-6 kg Height: 151-6	inc BMI:31.6
$BP: 124(7) mmHg Pulse: 87(M) \\ SP62'. 99'.$	bpm RBS:mg/dl しかに-14 12]23。

1



Name: Mrs. Mazzina Sontakke Date: 23/12/23.
Age : Sex : M/P Weight : kg Height : inc BMI :
BP :mmHg Pulse :bpm RBS :mg/di
Routine dental checkup.
PMH: - Thyraid .
POH: - Operated care of satirary duct calculus.
0 E:- Stains +
Calculus +
Adrice: - Complete oral prophylanis.
Rya
Vantej Toothpaste D
T. Mugha



DEPARTMENT OF PATHOLOGY

Patient Name	: Mrs. MAZZIMA SONTAKKE
Bill No/ UMR No	:BIL2324064577/UMR2324031589
Received Dt	:23-Dec-23 08:42 am

Age /Gender:44 Y(s)/FemaleReferred By:Dr. Vimmi Goel MBBS,MDReport Date:23-Dec-23 10:31 am

HAEMOGRAM

ParameterHaemoglobinHaematocrit(PCV)RBC CountMean Cell Volume (MCV)Mean Cell Haemoglobin (MCH)Mean Cell HaemoglobinConcentration (MCHC)RDWPlatelet countWBC Count DIFFERENTIAL COUNT NeutrophilsLymphocytesEosinophils	<u>Specimen</u> Blood	11.7 35.8 5.01 71 23.4 32.8 18.3 318 6700 50.9 38.4	Biological Reference 12.0 - 15.0 gm% 36.0 - 46.0 % 3.8 - 4.8 Millions/cumm 83 - 101 fl 27 - 32 pg 31.5 - 35.0 g/l 11.5 - 14.0 % 150 - 450 10^3/cumm 4000 - 11000 cells/cumm	Method Photometric Calculated Photometric Calculated Calculated Calculated Calculated Impedance Impedance Flow Cytometry/Light microscopy Flow Cytometry/Light
		8003.88	20 - 40 % 1 - 6 % 2 - 10 % 0 - 1 %	microscopy
			2000 - 7000 /cumm	Calculated

Page 1 of 2



DEPARTMENT OF PATHOLOGY

Patient Name: Mrs. MAZZIMA SONTAKKEBill No/ UMR No: BIL2324064577/UMR2324031589Received Dt: 23-Dec-23 08:42 am		Age /Gender : 44 Y(s)/Female Referred By : Dr. Vimmi Goel MBBS,MD		
		n		c-23 10:31 am
Parameter Absolute Lymphocyt Absolute Eosinophil Absolute Monocyte Absolute Basophil C PERIPHERAL SM	Count Count ount	Results 2572.8 268 448.9 0	Biological Referen 1000 - 4800 /cumm 20 - 500 /cumm 200 - 1000 /cumm 0 - 100 /cumm	nce Method Calculated Calculated Calculated Calculated
RBC		Microcytosis +(Few), Hypochromia +(Few), Anisocytosis +(Few) As Above		Light microscopy
Platelets E S R		Adequate 31 *** End Of R	0 - 20 mm/hr	Automated Westergren's Metho

Page 2 of 2

Suggested Clinical Correlation * If neccessary, Please

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Dr. PURVA JAISWAL, MBBS, MD, DNB CONSULTANT PATHOLOGIST



DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. MAZZIMA SONTAKKE : BIL2324064577/UMR2324031589 : 23-Dec-23 08:41 am		Age /Gender	:44 Y(s)/F	emale
Bill No/ UMR No			Referred By : Dr. Vimmi Goel MB		ni Goel MBBS,MD
Received Dt			Report Date :23-Dec-23 10:31 a		23 10:31 am
Parameter	Specimen	Results	Biological Re	ference	Method
Fasting Plasma Gluco	se Plasma	108	< 100 mg/dl		GOD/POD,Colorimetric
GLYCOSYLATED	HAEMOGLOBIN (H	IBA1C)			
HbA1c		6.1	Non-Diabetic : Pre-Diabetic : % Diabetic : >= (5.7 - 6.4	HPLC
COMMENT		In view of S-win advised HPLC to	ndow of 36.3 % in H o rule out hemoglobi	bA1c graph, nopathy.	
		*** End Of Re			

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Dr. PURVA JAISWAL, MBBS, MD, DNB 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India.

Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510



DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. MAZZIMA SONTAKKE	Age /Gender	:44 Y(s)/Female
Bill No/ UMR No	: BIL2324064577/UMR2324031589	Referred By	: Dr. Vimmi Goel MBBS, MD
Received Dt	:23-Dec-23 10:51 am	Report Date	:23-Dec-23 12:24 pm

Parameter	Specimen	Results	Biological Reference	Method
Post Prandial Plasma Glucose	Plasma	109	< 140 mg/dl	GOD/POD, Colorimetric
Interpretation:				
Clinical Decision Value	as per ADA	A Guidelines 20	021	
I	Diabetes M	ellites If,		
F	asting =/>	>126 mg/dl		
		lrs.OGTT=/>2	00 ma/dl	
1	Impaired Fa	asting = $100-1$	25 mg/dl	
1	mpaired G	lucose Toleran	ce = 140-199 mg/dl	

*** End Of Report ***

Suggested Clinical Correlation * If neccessary, Please Verified By : : 11100026

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KIMS-KINGSWAY

CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF BIOCHEMISTRY

Patient Name: Mrs. MAZZIBill No/ UMR No: BIL2324064Received Dt: 23-Dec-23	4577/UMF	2324031589		emale Goel MBBS,MD 3 10:32 am
LIPID PROFILE				5 10.52 am
Total Chalastand	ecimen ^{rum}	<u>Results</u> 273	< 200 mg/dl	Method Enzymatic(CHE/CHO/PC
Triglycerides		156	< 150 mg/dl	D) Enzymatic
HDL Cholesterol Direct		37	> 50 mg/dl	(Lipase/GK/GPO/POD) Phosphotungstic
LDL Cholesterol Direct VLDL Cholesterol		174.93 31	< 100 mg/dl < 30 mg/dl	acid/mgcl-Enzymatic (microslide) Enzymatic
Tot Chol/HDL Ratio		7	3 - 5	Calculated Calculation
CHD OR CHD risk equivalent Multiple major risk factors conferrie		>100	Consider Drug therapy >130, optional at 100-129	LDC-C
Two or more additional major risk	Ig			<100
factors,10 yrs CHD risk <20% No additional major risk or one		>130	10 yrs risk 10-20 % >130 10 yrs risk <10% >160	<130
additional major risk factor		>160	>190,optional at 160-189	<160

* End Of Report ***

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DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. MAZZIMA SONTAKKE		Age /Gender :44	Y(s)/Female
Bill No/ UMR No	: BIL2324064577/U	MR2324031589		. Vimmi Goel MBBS,MD
Received Dt	:23-Dec-23 08:42	am		-Dec-23 10:32 am
THYROID PRO	OFILE			
Parameter	Specime	<u>n Results</u>	Biological Referen	<u>ce Method</u>
тз	Serum	1.07	0.55 - 1.70 ng/ml	Enhanced
Free T4		1.13	0.80 - 1.70 ng/dl	chemiluminescence
тѕн		1.93		Enhanced Chemiluminescence
		17.05.05	0.50 - 4.80 uIU/ml	Enhanced
		*** End Of R	eport ***	chemiluminescence

Suggested Clinical Correlation * If neccessary, Please

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HOSPITALS

Dr. PURVA JAISWAL, MBBS, MD, DNB CONSULTANT PATHOLOGIST



DEPARTMENT OF BIOCHEMISTRY

Patient	tient Name : Mrs. MAZZIMA SONTAKKE		Age /Gender :44 Y(s)/Female		
Bill No/ UMR No : BIL2324064577/UMR2324031589		Referred By :Dr. Vimmi	Goel MBBS,MD		
Receiv	red Dt : 23-0	Dec-23 08:42 am		Report Date : 23-Dec-2	3 10:32 am
Param	neter	Specimen	Result Values	Biological Reference	Method
RFT					
Blood U	Jrea	Serum	13	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatin	ine		0.6	0.52 - 1.04 mg/dl	Enzymatic (creatinine amidohydrolase)
GFR			113.4	>90 mL/min/1.73m square.	
Sodium			139	136 - 145 mmol/L	Direct ion selective electrode
Potassi	um		4.49	3.5 - 5.1 mmol/L	Direct ion selective electrode
LIVE	R FUNCTION TE	ST(LFT)			
Total B	ilirubin		0.52	0.2 - 1.3 mg/dl	Anabilizatio (D. 1. 11)
	Bilirubin		0.24	0.1 - 0.3 mg/dl	Azobilirubin/Dyphylline Calculated
Indirec	t Bilirubin		0.28	0.1 - 1.1 mg/dl	Duel wavelength
Alkalin	e Phosphatase		97		spectrophotometric
SGPT/			25	38 - 126 U/L	pNPP/AMP buffer
SGOT/	ACT		25	13 - 45 U/L	Kinetic with pyridoxal 5
3001/	ASI		31	13 - 35 U/L	phosphate Kinetic with puridents
Serum	Total Protein		7.74		Kinetic with pyridoxal 5 phosphate
Albumi	in Serum			6.3 - 8.2 gm/dl	Biuret (Alkaline cupric
			4.04	3.5 - 5.0 gm/dl	sulphate)
Globuli			3.70		Bromocresol green Dye Binding
A/G Ra	atio .		1.1	2.0 - 4.0 gm/dl	Calculated
			*** End Of Bon		

*** End Of Report ***

Suggested Clinical Correlation * If neccessary, Please Verified By : : 11100026

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510





DEPARTMENT OF PATHOLOGY

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-				
Patient Name Bill No/ UMR No Received Dt	: Mrs. MAZZIMA SON : BIL2324064577/UM : 23-Dec-23 09:47 at	R2324031589	Referred By	:44 Y(s)/Female :Dr. Vimmi Goel MBBS,MD
URINE MICRO			Report Date	:23-Dec-23 11:19 am
<u>Parameter</u> <u>PHYSICAL EXAM</u> Volume	Specimen	<u>Results</u> 10 ml		Method
Colour. Appearance CHEMICAL EXAM	INATION	Pale yellow Clear	Clear	
Reaction (pH) Specific gravity Urine Protein Sugar Bilirubin Ketone Bodies Nitrate Urobilinogen <u>MICROSCOPIC E)</u> Epithelial Cells	<u>CAMINATION</u>	5 1.015 Negative Negative Negative Negative Negative Normal	4.6 - 8.0 1.005 - 1.025 Negative Negative Negative Negative Negative Normal	Indicators ion concentration protein error of pH indicator GOD/POD Diazonium Legal's est Principle Ehrlich's Reaction
R.B.C. Pus Cells Casts		0-1 Absent 0-1 Absent	0 - 4 /hpf 0 - 4 /hpf 0 - 4 /hpf Absent	Manual Manual Manual Manual

Page 1 of 2



DEPARTMENT OF PATHOLOGY

<u>Parameter</u> Crystals	Specimen Results Absent		<u>Method</u> Manual
Received Dt	:23-Dec-23 09:47 am	Report Date	:23-Dec-23 11:19 am
Bill No/ UMR No	: BIL2324064577/UMR2324031589	Referred By	: Dr. Vimmi Goel MBBS, MD
Patient Name	: Mrs. MAZZIMA SONTAKKE	Age /Gender	:44 Y(s)/Female

*** End Of Report ***

Page 2 of 2

Suggested Clinical Correlation * If neccessary, Please discuss

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Dr. PURVA JAISWAL, MBBS, MD, DNB CONSULTANT PATHOLOGIST



DEPARTMENT OF PATHOLOGY

Patient Name	: Mrs. MAZZIMA SONTAKKE	Age /Gender	:44 Y(s)/Female
Bill No/ UMR No	:BIL2324064577/UMR2324031589		Dr. Vimmi Goel MBBS,MD
Received Dt	:23-Dec-23 09:49 am		:23-Dec-23 11:56 am

STOOL ROUTINE EXAMINATION

Parameter PHYSICAL EXAMIN	Specimen	Results	Normal Ranges	Method
Colour. Consistency Mucus Blood (Gross) <u>CHEMICAL EXAMI</u>	Stool	Brownish Semi solid Absent Absent	Formed Absent	Manual Manual Manual
Reaction. (pH) Parasite/ part <u>MICROSCOPIC EX/</u>	MINATION	Alkaline Absent	Variable Absent	Manual Manual
Leucocytes (Pus cell Erythrocytes (RBC) Epithelial Cells Fat globules Vegatable fiber Cysts Ova Others	s)	Absent Absent Absent Absent Absent Absent	0 - 3 /hpf 0 - 4 /hpf Absent Absent Absent Absent	Microscopy Manual Manual Light microscopy Light microscopy Microscopy Microscopy



Page 1 of 2



DEPARTMENT OF PATHOLOGY

Patient Name	: Mrs. MAZZIMA SONT	AKKE	Age /Gender	:44 Y(s)/F	emale
Bill No/ UMR No	yed Dt : BIL2324064577/UMR2324031589 : 23-Dec-23 09:49 am		Referred By		
Received Dt			Report Date :23-Dec-23 11:56 a		0.50
<u>Parameter</u> NOTE	<u>Specimen</u>	with a light micro infection of intest in stool is sugges Inflammation.	Normal R Intestinal protozoa (h eggs can be obser scope, and it indicat tinal tract. Presence tive of Infection &/o s in stool is suggest il tract.	trophozoites rved directly es parasite of leukocyte	<u>Method</u> or s

Suggested Clinical Correlation * If neccessary, Please

Verified By : : 11100415

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Page 2 of 2

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Dr. Anuradha Deshmukh, MBBS,MD CONSULTANT MICROBIOLOGIST



DEPARTMENT OF IMMUNO HAEMATOLOGY

Patient Name : Mrs. MAZZIMA SONTAKKE Age / Gender : 44 Y(s)/Female Bill No/ UMR No : BIL2324064577/UMR2324031589 Referred By : Dr. Vimmi Goel MBBS, MD **Received Dt** : 23-Dec-23 08:42 am Report Date :23-Dec-23 10:26 am

BLOOD GROUPING AND RH

-	<u>Parameter</u>	Specimen	Results	
BLC	BLOOD GROUP.	EDTA Whole Blood & Plasma/ Serum		Gel Card Method
	Rh (D) Typing.		" Positive "(+Ve)	
			*** End Of Report ***	

Suggested Clinical Correlation * If neccessary, Please Verified By : : 11100400

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Dr. PURVA JAISWAL, MBBS, MD, DNB CONSULTANT PATHOLOGIST



DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	MAZZIMA SONTAKKE	STUDY DATE	23-12-2023 09:37:30
AGE/ SEX	44Y / F	HOSPITAL NO.	UMR2324031589
ACCESSION NO.	BIL2324064577-9	MODALITY	DX
REPORTED ON	23-12-2023 10:11	REFERRED BY	Dr. Vimmi Goel

X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

th hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

IMPRESSION -No pleuro-parenchymal abnormality seen.

R.R KHANDELWAL

SENIOR CONSULTANT

MD, RADIODIAGNOSIS [MMC-55870]

N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations 789100 Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness. CIN: U74999MH2018PTC303510



Patient Name:	MRS.MAZZIMA SONTAKKE	Date: 23/12/2023
Age/Sex:	44 YRS/F	BIL NO: 2324064577
Referred By:	Dr. VIMMI GOEL	REG NO: 2324031589

USG WHOLE ABDOMEN

LIVER is normal in shape, size but shows mild increase in echotexture. No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated. PORTAL VEIN and CBD are normal in course and calibre.

GALL BLADDER is physiologically distended. No stones or sludge seen within it. Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size shape and echotexture. No focal lesion seen.

Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

Uterus is anteverted and normal in size shape and echotexture. No focal myometrial lesion seen. Endometrial echo-complex appears normal and measures 8mm. Both ovaries appear slightly bulles event

Both ovaries appear slightly bulky , contains small cystic lesion measuring 2-3 mm? PCOD.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION -

No significant visceral abnormality seen. Suggest clinical correlation / further evaluation.

DR. R.R. KHANDELWAL SENIOR CONSULTANT MD RADIO DIAGNOSIS [MMC-55870]



2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

Patient Name : Mrs. Mazzima Sontakke

Age	: 44 years / Female
UMR	: 2324031589
Date	: 23/12/2023
Done by	: Dr. Vimmi Goel
ECG	: NSR, WNL

Impression: Normal 2D Echocardiography Study

Normal chambers dimensions No RWMA of LV at rest Good LV systolic function, LVEF 65% Normal LV diastolic function E/A is 1.4 E/E' is 8.6 (Normal filling pressure) Valves are normal No pulmonary hypertension IVC is normal in size and collapsing well with respiration No clots or pericardial effusion

Comments:

Sector echocardiography was performed in various conventional views (PLAX, SSAX, CH and 5 CH views). LV size normal. There is no RWMA of LV seen at rest. Good LV syst function. LVEF 70%. Normal LV diastolic function. E Velocity is 88 cm/s, A Velocity is cm/s. E/A is 1.4. Valves are normal. No Pulmonary Hypertension. IVC normal in size collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion se E' at medial mitral annulus is 8.7 cm/sec & at lateral mitral annulus is 12.7 cm/sec.

M Mode echocardiography and dimension:

Left atrium Aortic root LVIDd LVIDs IVS (d) LVPW (d) LVEF % Fractional Shortening	Normal ra (adults) (d 19-40 20-37 35-55 23-39 6-11 6-11 ~ 60%	nge (mm) children) 7-37 7-28 8-47 6-28 4-8 4-8 ~60%	Observed (mm) 23 25 40 27 10 10 65% 35%
Fractional Shortening	0070	~60%	65% 35% Dr. Vimmi Goel

P.T.O

MD, Sr. Consultant Non-invasive Cardiolo

SPANV Medisearch Lifesciences Private Limited <u>Two Dimensional Echocardiography</u>way, Nagpur - 440 001, Maharashtra, India. Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510

