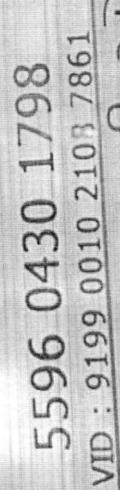
Government of India

हिक्य अधित्कुभार जिलोहीया Kinjal Anchitkumar Bilodiya क्रम्भ तारीभ/DOB: 12/08/1991 सम्भ/ FEMALE



माश्रिक है। मार्शिक



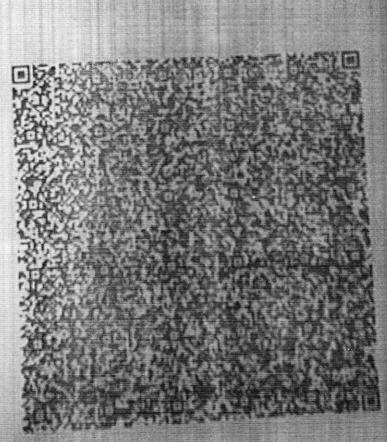
lssue Dale, 26/09/2012

WASSAMA STRAIGHT Induor Authority of India

जुक्सात - 382421 गान ने01, अमूज पेरामाफिट, शाब्दा लेशियटल सामे, सोद्धराष

POOTOSS. Hospital, Near Siddhraj Z Plus, Kudasan,

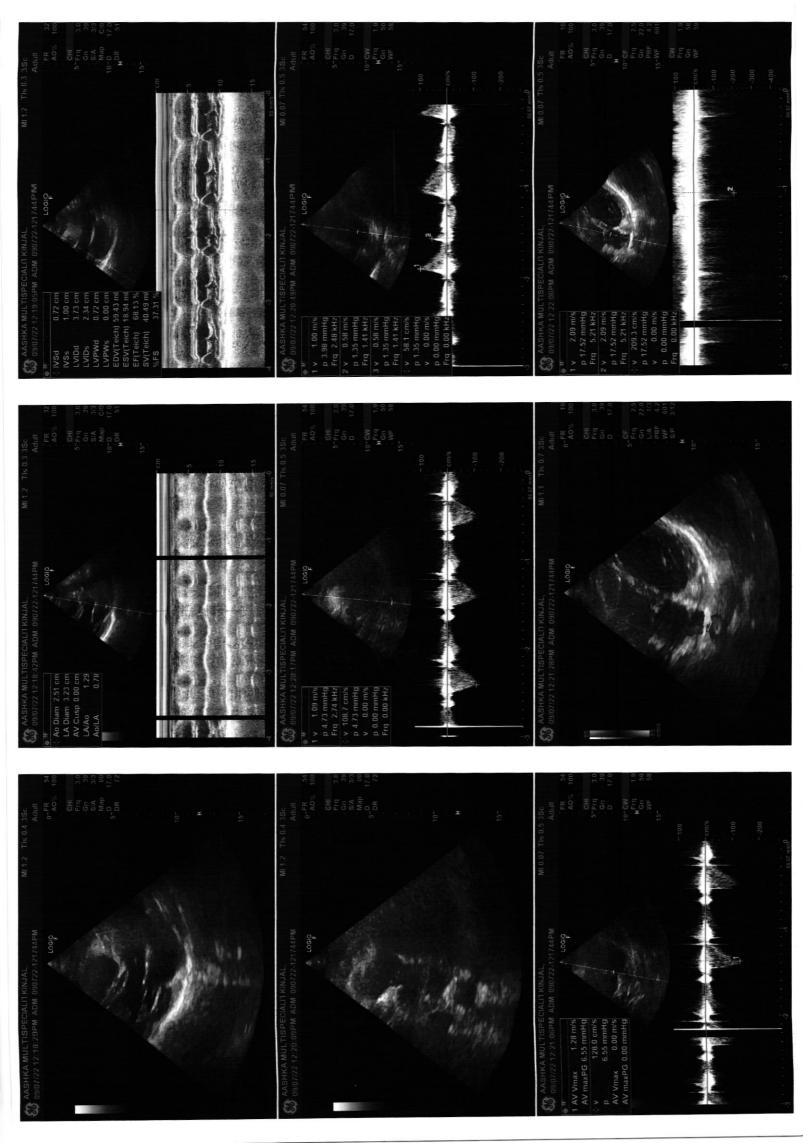
Gandninagar, Gujarat - 382421

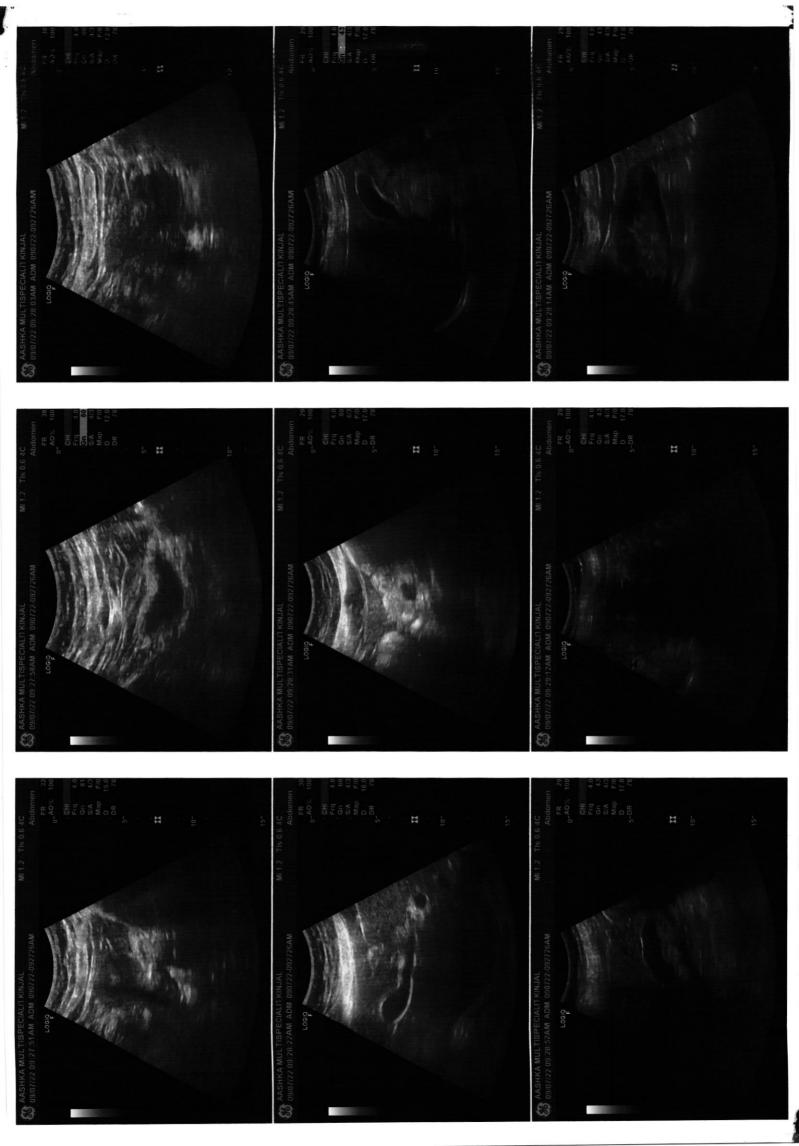


5596 0430 1798











बैंक ऑफ़ बड़ीदा

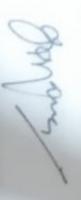
Name

귀

Bilodiya Anchitkumar Mohanbhai Bank of Baroda

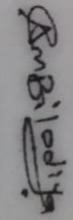
Employee Code No कर्मचारी कूट क्र.

112457



Issuing Auth जारीकर्ता प्राधिकारी





nture of Holder धारक के हस्ताक्षर



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. BILODIYA ANCHITKUMAR MOHANBHAI
EC NO.	112457
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	CHARADA
BIRTHDATE	31-12-1987
PROPOSED DATE OF HEALTH	09-07-2022
CHECKUP	
BOOKING REFERENCE NO.	22S112457100021046E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 28-06-2022 till 31-03-2023 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))





Dear Bilodiya Anchitkumar Mohanbhai,

Please find the confirmation for following request.

Booking Date

: 28-06-2022

Package Name

Medi-Wheel Metro Full Body Health Checkup Male Below

Name of

Diagnostic/Hospital

Aashka Multispeciality Hospital

Address of

Diagnostic/Hospital: Between Sargasan & Reliance Cross Road

Contact Details

: 9879752777/7577500900

City

: Gandhi Nagar

State

: Gujarat

Pincode

: 382315

Appointment Date: 09-07-2022

Confirmation

Preferred Time

: Confirmed

Status

: 09:30:AM

Comment

: APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- 1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000 Emergency No.: +91-7575007707 / 9879752777 www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR.UNNATI SHAH
B.D.S. (DENTAL SURGEON)
REG. NO. A-7742
MO.NO- 9904596691

UHID:			Date: 9/7/8	Time:	
Patient Name:	Kinjal	A.	Bilodiga	Age /Sex: 3 / /.F Height: Weight:	
History:	80		9		
Examination:	calcula	. +			
	calculo som of lempto		2 / 8 Th 7		
Diagnosis:	-				
		×			

Treatment:

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DR. JIGISHA VADODARIYA M.D., IDCCM. CRITICAL CARE MEDICINE R.NO.G-27131

UHID: WWW BIOD	Date:	7 2002 Ti	me! 114
Patient Name:	/	Height:	, -
Age /Sex: 3/ LMP:		Weight:	
History:	T		
Medical History:	Surgical History:	C/C/O:	
COPD CKD	1	, .	
HypothyroidismCAD	NO	Konto	ne
		foll	DW
	Others:	0	
		U	P.
Allergy History:		diction:	
Nutritional Screening: Well-Nourishe	d / Malnourished / O	bese	
Examination:			Temp
RS:	CNS:	General:	Pulse 10 Wil
BLAF (F)			BP 1/0/20
			SPO2
cvs:	PA:		
4			
5,547.			
Provisional Diagnosis:			
Phys	icaly Lit		

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Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID:	Date: 9 7 22 Time:	17.5
Patient Name: kmsulber	Age /Sex: 30 Height:	
	Weight:	
Pufur Church of Ch		
D. V. G16		
0 (0		
Allergy History:		
Nutritional Screening: Well-Nourished / Malr	nourished / Obese	
Examination:		
Diagnosis:		

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Emergency No.: +91-7575007707 / 9879752777 www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



DATE:09/07/22

PATIENT NAME: KINJAL ANCHITKUMAR BILODIYA

GENDER/AGE: Female / 30 Years

DOCTOR: DR. HASIT JOSHI

OPDNO:OSP28199

2D-ECHO

MITRAL VALVE

: NORMAL

AORTIC VALVE

: NORMAL

TRICUSPID VALVE

: NORMAL

PULMONARY VALVE

: NORMAL

AORTA

: 25mm

LEFT ATRIUM

: 32mm

LV Dd / Ds

: 37/23mm

EF 68%

IVS / LVPW / D

: 7.2/7.2mm

IVS

: NORMAL

IAS

: NORMAL

RA

: NORMAL

RV

: NORMAL

PA

: NORMAL

PERICARDIUM

: NORMAL

VEL

PEAK

MEAN

M/S

.

Gradient mm Hg

Gradient mm Hg

MITRAL

: 1/0.6m/s

AORTIC

: 1.3m/s

PULMONARY

: 1.08m/s

COLOUR DOPPLER

: MILD TR

RVSP

: 27mmHg

CONCLUSION

: NORMAL LV SIZE SYSTOLIC FUNCTION;

MILD TR, NO PAH.

CARDIOLOGIST

DR.HASIT JOSHI (9825012235)

Cytological examination- Pap smear request form	
Name: Kinjal A. Bilodiye Age: 3045. 9/7/22	\$ # # # # # # # # # # # # # # # # # # #
Complaints:	
No of deliveries: Wild. ND Last Delivery: 2/2 ys.	
History of abortion: H/O medical conditions associated:	
Last abortions: DM HTN Thyroid	
MH: rp. 3) Reg: NF Paint 1 n day LMP: 26.6.22. P/A: 501 Breakt-Nag	
P/S: On Thinimal EroRin Arthip.	
P/V: ut NS,7, drawnup, or, FP	
Sample:- Vagina Cervix Vagina Cervix Vagina Cervix	NT55
Doctors Sign:- Malleman: 9/7/22	NES Weist

AHL/GNR/MR/56

Contrast 226 166 05 0459 LOT D 942 # Balodiya, Kinjal a 09.07.2022 10:14:04 AM AASHKA HOSPITAL LTD. SARGASAN GANDHINAGAR Room: Location: 1 **76** bpm Order Number: Indication: -- / -- mmHg Medication 1: Medication 2: Medication 3: Technician: Ordering Ph: Referring Ph: Attending Ph: QRS: 86 ms 374 / 420 ms Normal sinus rhythm Normal ECG QT / QTcBaz : PR: 136 ms 74 ms RR / PP: 790 / 789 ms P/QRS/T: 40 / 33 / 31 degrees aVR aVL Unconfirmed GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz 4x2.5x3_25_R1 1/1

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Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



PATIENT NAME:KINJAL ANCHITKUMAR BILODIYA

GENDER/AGE: Female / 30 Years

DATE:09/07/22

DOCTOR:

OPDNO:OSP28199

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.

No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

DR. SNEHALARAJAPATI

CONSULTANT RADIOLOGIST

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



PATIENT NAME:KINJAL ANCHITKUMAR BILODIYA

GENDER/AGE: Female / 30 Years

DATE:09/07/22

DOCTOR:

OPDNO:OSP28199

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicals appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 9.2 x 4.0 cms in size.

Left kidney measures about 9.6 x 3.8 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

Aorta, IVC and para aortic region appears normal.

No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 90 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 7 mm. No evidence of uterine mass lesion is seen.

OVARIES: Both ovaries appear normal in size, shape and position. No evidence of solid or cystic ovarian mass lesion is seen. No other pelvic mass lesion is seen. No evidence of free fluid in cul-de-sac is seen.

COMMENT: Gas and fecal loaded large bowel loops seen.

Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder, uterus and ovaries.

DR. SNEHAL PRAJAPATI CONSULTANT RADIOLOGIST

Name

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India Phone: 079-29750750, +91-7575006000 / 9000

Emergency No.: +91-7575007707 / 9879752777

: KINJAL ANCHITKUMAR BILODIYA

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



LABORATORY REPORT

Sex/Age : Female/ 31 Years 20702200244

: HOSPITAL, Pt ID 2159607 Ref.By Dis. At :

Bill. Loc. : Aashka hospital Pt. Loc

: 09-Jul-2022 08:44 Sample Type : Whole Blood EDTA Mobile No : 9904038012 Reg Date and Time

Sample Date and Time : 09-Jul-2022 08:45 Sample Coll. By : Ref Id1 · OSP28199 Report Date and Time : 09-Jul-2022 09:11 Acc. Remarks · Normal Ref Id2 : O22232421

TEST UNIT BIOLOGICAL REF. INTERVAL RESULTS REMARKS

HAEMOGRAM REPORT

HB AND INDICES				
Haemoglobin (Colorimetric)	L	11.5	G%	12.00 - 15.00
RBC (Electrical Impedance)		4.44	millions/cumm	3.80 - 4.80
PCV(Calc)		36.99	%	36.00 - 46.00
MCV (RBC histogram)		83.3	fL	83.00 - 101.00
MCH (Calc)	L	25.9	pg	27.00 - 32.00
MCHC (Calc)	L	31.1	gm/dL	31.50 - 34.50
RDW (RBC histogram)		15.10	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	9710	/µL	4000.00 - 10000.	.00	
Neutrophil	[%] 70.0	%	EXPECTED VALUES 40.00 - 70.00	[Abs] 6797	EXPECTED VALUES /μL 2000.00 - 7000.00
Lymphocyte	24.0	%	20.00 - 40.00	2330	/µL 1000.00 - 3000.00
Eosinophil	1.0	%	1.00 - 6.00	97	/µL 20.00 - 500.00
Monocytes	4.0	%	2.00 - 10.00	388	/µL 200.00 - 1000.00
Basophil	1.0	%	0.00 - 2.00	97	/uL 0.00 - 100.00

LATELET COUNT (Optical)

Platelet Count 287000 /µL 150000.00 - 410000.00

0.78 - 3.53Neutrophil to Lymphocyte 2.92

Ratio (NLR)

SMEAR STUDY

RBC Morphology Normocytic Hypochromic RBCs.

WBC Morphology Total WBC count within normal limits.

Platelet Platelets are adequate in number.

Malarial Parasite not seen on smear. **Parasite**

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah

Dr. Shreya Shah

M.D. (Path. & Bact.)

M.D. (Pathologist)

Page 1 of 13

Between Sargasan and Reliance Cross Roads Sargasan, Gandhinagar - 382421. Gujarat, India

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LABORATORY REPORT

Ref Id2

: 022232421

Name : KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years Case ID : 20702200244

Pt. ID : 2159607 : HOSPITAL, Ref.By Dis. At :

Pt. Loc Bill. Loc. : Aashka hospital

Reg Date and Time : 09-Jul-2022 08:44 Sample Type : Whole Blood EDTA Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45 Sample Coll. By ; Ref ld1 : OSP28199

· Normal Report Date and Time : 09-Jul-2022 09:11 Acc. Remarks

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www.aashkahospitals.in CIN: L85110GJ2012PLC072647



LABORATORY REPORT

Name : KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years

Case ID 20702200244

Ref.By : HOSPITAL, Dis. At :

Pt. ID : 2159607

Bill. Loc. : Aashka hospital

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

: Whole Blood EDTA

Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Report Date and Time : 09-Jul-2022 11:10

Sample Coll. By : Acc. Remarks : Normal

Sample Type

Ref Id1 : OSP28199 Ref Id2 : O22232421

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

HAEMATOLOGY INVESTIGATIONS

ESR

10

mm after 1hr 3 - 20

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist)

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www.aashkahospitals.in CIN: L85110GJ2012PLC072647



LABORATORY REPORT

; KINJAL ANCHITKUMAR BILODIYA Name

Sex/Age : Female/ 31 Years

Case ID : 20702200244

Ref.By : HOSPITAL, Dis. At :

Pt. ID : 2159607

Bill. Loc. ; Aashka hospital

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

Sample Type

: Whole Blood EDTA

Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Sample Coll. By :

Ref Id1

: OSP28199

Report Date and Time : 09-Jul-2022 09:31

: Normal Acc. Remarks

Ref Id2

: 022232421

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type

0

Rh Type

POSITIVE

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.)

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LABORATORY REPORT

Name KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years

Case ID 20702200244

Ref.By : HOSPITAL, Dis. At :

Pt. ID : 2159607

Bill. Loc. : Aashka hospital

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

Sample Type : Spot Urine

Sample Coll. By :

Mobile No · 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Ref Id1

· OSP28199

Report Date and Time : 09-Jul-2022 11:32

Acc. Remarks Normal Ref Id2

: O22232421

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE REMARKS

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour

Pale yellow

Transparency

Clear

Chemical Examination By Sysmex UC-3500

1.025

1.005 - 1.030

Sp.Gravity Hq

6.50

5 - 8

Leucocytes (ESTERASE)

Ketone Bodies Urine

Trace

Negative

Protein

Negative

Negative

Glucose

Negative

Negative

Urobilinogen

Negative

Negative

Bilirubin

Negative

Negative

Blood

Negative

Negative

Negative

Negative

Nitrite

Negative

Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte

1-2

/HPF

Nil

Red Blood Cell

Nil

/HPF

Nil

Epithelial Cell

Present +

/HPF

Present(+)

Bacteria

Nil

/ul

Nil

Negative

Yeast Cast

Crystals

Nil Nil

Negative

/ul /LPF Nil Nil

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah

M.D. (Pathologist)

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Emergency No.: +91-7575007707 / 9879752777

www.aashkahospitals.in CIN: L85110GJ2012PLC072647



LABORATORY REPORT

Name : KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years

Case ID 20702200244

Ref.By : HOSPITAL,

Dis. At :

Pt. ID : 2159607

Bill. Loc. : Aashka hospital

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

Sample Type : Spot Urine

Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Sample Coll. By :

Ref Id1

: OSP28199

Report Date and Time : 09-Jul-2022 11:32

· Normal Acc. Remarks

Ref Id2

: O22232421

Parameter	Unit	Expected value		Resu	It/Notations		
			Trace	+	++	+++	++++
рн	-	4.8-7.4		-			
SG		1.016-1.022					T
Protein	mg/dL	Negative (<10)	10	25	75	150	50
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	1 -
Ketone	mg/di_	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value		Result	t/Notification	s	
			Trace	÷	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	1 -
Nitrite(Strip)		Negative			•		
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5					1 -
Red blood cells (Microscopic)	/bef	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	T -

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah

Dr. Shreya Shah

M.D. (Path. & Bact.)

M.D. (Pathologist)

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www.aashkahospitals.in CIN: L85110GJ2012PLC072647



LABORATORY REPORT

; KINJAL ANCHITKUMAR BILODIYA Name

Sex/Age : Female/ 31 Years

: 20702200244 Case ID

Ref.By : HOSPITAL, Dis. At :

Pt. ID

Pt. Loc

: 2159607

Bill. Loc. ; Aashka hospital

Sample Type

Plasma Fluoride F, Plasma

Reg Date and Time

: 09-Jul-2022 08:44

Fluoride PP

Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Sample Coll. By :

Ref Id1

: OSP28199

Report Date and Time

· 09-Jul-2022 13:39

Normal

Ref Id2

022232421

TEST

Acc. Remarks **RESULTS**

UNIT

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F

94.6

mg/dL

70.0 - 100

Plasma Glucose - PP

114.3

mg/dL

70.0 - 140.0

Referance range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist)

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CIN: L85110GJ2012PLC072647

LAROR	ATORY	REPORT	
	$\mathcal{A} \cup \mathcal{A} \cup $		

; KINJAL ANCHITKUMAR BILODIYA Name

Sex/Age : Female/ 31 Years

Case ID

20702200244

Ref.By : HOSPITAL, Dis. At :

Pt. ID

: 2159607

Bill. Loc. : Aashka hospital

TEST

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

: Serum

Mobile No : 9904038012

: O22232421

Report Date and Time : 09-Jul-2022 10:23

Sample Date and Time : 09-Jul-2022 08:45

Sample Coll. By :

Sample Type

Acc. Remarks

Normal Ref Id2

Ref Id1 : OSP28199

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol		145.44	mg/dL	110 - 200
HDL Cholesterol	L	34.15	mg/dL	48 - 77
Triglyceride		135.56	mg/dL	40 - 200
VLDL Calculated		27.11	mg/dL	10 - 40
Chol/HDL Calculated	Н	4.26		0 - 4.1
LDL Cholesterol (Direct)	Н	107.35	mg/dL	65 - 100

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	*	High 200-499
High 160-189	-	-	

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

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Bilirubin Conjugated

Bilirubin Unconjugated Calculated



LABORATORY REPORT Name : KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years 20702200244 Case ID Ref.By : HOSPITAL. Dis. At : Pt. ID 2159607 Bill. Loc. : Aashka hospital Pt. Loc : 09-Jul-2022 08:44 Mobile No : 9904038012 Reg Date and Time Sample Type : Serum Sample Date and Time : 09-Jul-2022 08:45 Sample Coll. By : Ref Id1 : OSP28199 Report Date and Time : 09-Jul-2022 10:24 Acc. Remarks · Normal Ref Id2 : O22232421 **RESULTS** UNIT **BIOLOGICAL REF RANGE** REMARKS **TEST BIOCHEMICAL INVESTIGATIONS Liver Function Test** S.G.P.T. 17.06 U/L 0 - 31S.G.O.T. 15.54 U/L 15 - 37U/L Alkaline Phosphatase 46.09 35 - 105 Gamma Glutamyl Transferase 14.29 U/L 5 - 36 6.88 6.4 - 8.2Proteins (Total) gm/dL 4.03 3.4 - 5 Albumin gm/dL Globulin 2.85 gm/dL 2 - 4.1 A/G Ratio Calculated 1.4 1.0 - 2.10.26 0.2 - 1.0**Bilirubin Total** mg/dL

mg/dL

mg/dL

0 - 0.8

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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0.13

0.13

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Uric Acid

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2	LABORATORY REPORT							
Name KINJAL ANCHITKUMAR BILODIYA			Sex/Age	Female/ 31 Years	Case ID	20702200244		
Ref.By : HOSPITAL,			Dis. At :		Pt. ID	: 2159607		
Bill. Loc. ; Aashka hosp	ital				Pt. Loc	•		
Reg Date and Time	: 09-Jul-2022 08:44	Sample Type	: Serum		Mobile No	: 9904038012		
Sample Date and Time	: 09-Jul-2022 08:45	Sample Coll. B	у :		Ref ld1	: OSP28199		
Report Date and Time	: 09-Jul-2022 10:24	Acc. Remarks	: Normal		Ref Id2	: O22232421		
TEST	RESU	LTS	UNIT	BIOLOGICAL REF	RANGE	REMARKS		
BIOCHEMICAL INVESTIGATIONS								
BUN (Blood Urea Nitrog	gen) 7.70		mg/dL	6.00 - 20.00				
Creatinine	0.79		mg/dL	0.50 - 1.50				

mg/dL

2.6 - 6.2

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Dr. Shreya Shah

5.06

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LABORATORY REPORT

: KINJAL ANCHITKUMAR BILODIYA Name

Sex/Age : Female/ 31 Years

Case ID 20702200244

Ref.By : HOSPITAL, Dis. At :

Pt. ID : 2159607

Bill. Loc. : Aashka hospital

Pt. Loc

Reg Date and Time

: 09-Jul-2022 08:44

Sample Type

: Whole Blood EDTA

Mobile No : 9904038012

Sample Date and Time : 09-Jul-2022 08:45

Sample Coll. By :

Ref Id1

· OSP28199

Report Date and Time : 09-Jul-2022 10:55

· Normal Acc. Remarks

Ref Id2

: 022232421

TEST

RESULTS

UNIT

BIOLOGICAL REF RANGE

REMARKS

BIOCHEMICAL INVESTIGATIONS

Glycated Haemoglobin Estimation

HbA1C

5.35

% of total Hb <5.7: Normal

5.7-6.4: Prediabetes

>=6.5: Diabetes

Avg. Pl Glucose (Last 3 Months)

106.84

mg/dL

80.00 - 140.00

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation:

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Manoj Shah M.D. (Path. & Bact.)

Dr. Shreya Shah M.D. (Pathologist)

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LABORATORY REPORT

KINJAL ANCHITKUMAR BILODIYA Name Sex/Age : Female/ 31 Years Case ID 20702200244

Ref.By : HOSPITAL, Dis. At : Pt. ID 2159607

Bill. Loc. : Aashka hospital Pt. Loc

: 09-Jul-2022 08:44 Sample Type Mobile No : 9904038012 Reg Date and Time : Serum

Sample Date and Time : 09-Jul-2022 08:45 Sample Coll. By Ref Id1 : OSP28199 · Normal Report Date and Time : 09-Jul-2022 09:50 Acc. Remarks Ref Id2 022232421

TEST RESULTS UNIT BIOLOGICAL REF RANGE TEST REMARK

Thyroid Function Test

70 - 204 Triiodothyronine (T3) 99.83 ng/dL Thyroxine (T4) 8.2 ng/dL 5.5 - 11.02.3785 µIU/mL 0.4 - 4.2

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests: T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hypothyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations

Normal ranges of TSH & thyroid hormons vary according trimesper in pregnancy.

TSH ref range in Pregnacy

Reference range (microlU/ml)

First triemester

Second triemester

0.24 - 2.00
0.43-2.2 Third triemester

		The second secon	
	Т3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	^	↑
Grave's Thyroiditis	^	↑	^
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	1	J	^
Secondary Hypothyroidism	4	¥	\
Subclinical Hypothyroidism	N	N	^
Patient on treatment	· N	N/↑	4

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

Dr. Manoj Shah

M.D. (Pathologist) M.D. (Path. & Bact.) Page 12 of 13

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	LABORATORY REPORT				
Name : KINJAL ANG	CHITKUMAR BILODIY	'A	Sex/Age : Female/ 31 Years	Case ID	: 20702200244
Ref.By : HOSPITAL,			Dis. At :	Pt. ID	: 2159607
Bill. Loc. ; Aashka hosp	oital			Pt. Loc	:
Reg Date and Time	: 09-Jul-2022 08:44	Sample Type	: Serum	Mobile No	: 9904038012
Sample Date and Time	: 09-Jul-2022 08:45	Sample Coll. By	1	Ref ld1	: OSP28199
Report Date and Time	: 09-Jul-2022 09:50	Acc. Remarks	: Normal	Ref Id2	: O22232421

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

-- End Of Report -----

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah M.D. (Pathologist)

Dr. Manoj Shah M.D. (Path. & Bact.) Printed On: 09-Jul-2022 15:15

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Emergency No.: +91-7575007707 / 9879752777 www.aashkahospitals.in CIN: L85110GJ2012PLC072647 LABORATORY REPORT :KINJAL ANCHITKUMAR BILODIYA Sex/Age : Female/ 31 Years H.ID : C2106132 Name Case ID : 20702200244

Ref By :HOSPITAL. Dis.Loc. Pt ID : 2159607 Bill. Loc. :Aashka hospital Pt. Loc.

Registration Date & Time : 09-Jul-2022 08:44 Sample Type : PAP Smear Ph# : 9904038012 Sample Date & Time : 09-Jul-2022 11:40 Sample Coll. By Ref Id : OSP28199

Report Date & Time : 10-Jul-2022 10:34 Acc. Remarks Ref Id2 : O22232421

Cytopathology Report

Specimen:

PAP smear for cytology (LBC PAP)

Clinical Details:

minimal erosion on anterior lip, LMP:-26/6/22

Macroscopic Examination:

Received one container with 20 ml LBC fixative and brush. One smear prepared.

Smear - 1 [PAP]

Microscopic Examination:

See below in diagnosis

Impression:

The Bethesda System (TBS 2014) (LBC Pap)

Specimen type: LBC Pap smear.

Specimen adequacy: Satisfactory for evaluation with partially obscuring inflammation

Transformation zone elements: present

Infection associated changes: Trichomonas or Monilia are not seen.

Reactive cellular changes: Nil pithelial cell abnormality: Nil

Other cells: Nil

Interpretation/result: Negative for intraepithelial lesion or malignancy.

Pap test is a screening test for cervical cancer with inherent false negative results.

Grossing By : Dr. Shraddha Mehta

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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Dr. Shraddha Mehta

M.D., D.N.B. G-22635

Dr. Bhavna Mehta

Printed On : 10-Jul-2022 12:30

M.D. (P.D.C.C) G-56686 (Histo & Renal pathologist)

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CIN: L85110GJ2012PLC072647		LABORATORY REPORT							
Name	:KINJAL ANCHIT	KUMAR BILODIYA	Sex/Age	: Female/	31 Years	H.ID	: C2106132	Case ID	: 20702200244
Ref By	:HOSPITAL,		Dis.Loc.	:				Pt ID	: 2159607
Bill. Loc.	:Aashka hospita	al						Pt. Loc.	:
Registratio	n Date & Time	: 09-Jul-2022 08:44	Sampl	е Туре	: PAP Sr	near		Ph#	: 9904038012
Sample Da	te & Time	: 09-Jul-2022 11:40	Samp	le Coll. By	:			Ref Id	: OSP28199
Report Da	te & Time	: 10-Jul-2022 10:34	Acc. F	Remarks	:			Ref Id2	: O2 223 242 1

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

Grossing By : Dr. Shraddha Mehta

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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Dr. Shraddha Mehta M.D., D.N.B. G-22635 Dr. Bhavna Mehta M.D. (P.D.C.C) G-56686 (Histo & Renal pathologist)