

Fwd: Please note the following health check-up booking summary on 11/03/2023

Amrendra Nath Dubey <amrendra.nathduby@narayanahealth.org>

Wed 3/15/2023 1:06 PM

To: Dilip Kumar <dilip.kumar01@narayanahealth.org>

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Member Name	Member Age	Package Name	Mobile
MR. TOMAR RAVINDRA SINGH	44	Medi-Wheel Metro Full Body Health Checkup Male Above 40	88263 79866
MRS. KUMARI ALKA	31	Medi-Wheel Metro Full Body Health Checkup Female Below 40	8384038029
MRS. SACHAN SAUMYA	34	Medi-Wheel Metro Full Body Health Checkup Female Below 40	9910671780
Rajiv kumar bhagat	35	Medi-Wheel Metro Full Body Health Checkup Male Below 40	8384038029
Saiswari Gochhayat	43	Medi-Wheel Metro Full Body Health Checkup Female Above 40	8447370826
Vipin rani tomar	43	Medi-Wheel Metro Full Body Health Checkup Female Above 40	88263 79866
Ashutosh sachan	37	Medi-Wheel Metro Full Body Health Checkup Male Below 40	9910671780
Mansukha Farhat	35	Medi-Wheel Metro Full Body Health Checkup Female Below 40	8511530035
MR. GOCHHAYAT MANOJA KUMAR	43	Medi-Wheel Metro Full Body Health Checkup Male Above 40	8447370826
MR. JAMAL SHAHID IZRAIL MANSOORI	42	Medi-Wheel Metro Full Body Health Checkup Male Above 40	8511530035



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PATIENT HELPLINE

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)
 Collected On : 11/03/2023 09:36 AM Received On : 11/03/2023 09:54 AM Reported On : 11/03/2023 04:03 PM
 Barcode : D72303110087 Specimen : Whole Blood - ESR Consultant : Dr. Gaurav Jain(GENERAL MEDICINE)
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8447386482

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	20	mm/hr	0.0-20.0
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Spectrophotometry)	12.8	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	5.27	10 ⁶ /mm ³	4.5-6.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.5	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	75 L	μm ³	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	24.3 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.4	g/dL	32.0-36.0
Red Cell Distribution Width (RDW) (Calculated)	13.4	%	11.5-14.0
Platelet Count (Electrical Impedance)	187	10 ³ /mm ³	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	6.6	10 ³ /mm ³	4.0-11.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (DHSS)	58.5	%	40.0-80.0
Lymphocytes (DHSS)	37.1	%	20.0-40.0
Monocytes (DHSS)	2.7	%	2.0-10.0
Eosinophils (DHSS)	1.3	%	1.0-6.0

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)

Basophils (DHSS)	0.4	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	3.87	10 ³ /mm ³	2.0-7.5
Absolute Lymphocyte Count (Calculated)	2.45	x10 ³ cells/μl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.18 L	x10 ³ cells/μl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.09	x10 ³ cells/μl	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	x10 ³ cells/μl	0.02-0.1

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

Prachi

Dr. Prachi
 MBBS, MD Pathology
 JUNIOR CONSULTANT

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (GOD/POD)	94	mg/dL	74.0-106.0
Post Prandial Blood Sugar (PPBS) (Enzyme Method (GOD/POD))	80 L	mg/dL	100.0-140.0
Repeat if clinically required.			
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Non LDL Selective Elimination, CHOD/POD)	189.5	mg/dL	<200.0
Triglycerides (LIPASE/GK/GPO/POD)	103.1	mg/dL	<150.0
HDL Cholesterol (HDLC) (Colorimetric (Phosphotungstic Acid Method))	67.1 H	mg/dL	40.0-60.0
Non-HDL Cholesterol	122.4	mg/dL	<130.0

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)

LDL Cholesterol (Turbidometric /Microtip)	102.16 H	mg/dL	<100.0
VLDL Cholesterol (Calculated)	20.6	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	2.9	-	<4.5
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (ECLIA/ ELFA)	2.03	nmol/L	1.49-2.6
Thyroxine (T4) (ECLIA/ ELFA)	108	nmol/L	71.2-141.0
TSH (Thyroid Stimulating Hormone) (Electrochemiluminescence (ECLIA))	1.90	uIU/ml	0.465-4.68
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Azobilirubin Dyphylline)	0.57	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength Reflectance)	0.18	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.38	mg/dL	0.1-1.0
Total Protein (Biuret Method)	7.87	gm/dL	6.3-8.2
Serum Albumin (Bromcresol Green (BCG))	4.72	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.14	gm/dL	2.3-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.50	-	0.9-2.0
SGOT (AST) (P - Phosphate)	28.0	U/L	14.0-36.0
SGPT (ALT) (P - Phosphate)	20.7	U/L	<35.0
Alkaline Phosphatase (ALP) (PNPP With Amp Buffer)	106.6	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (GCNA)	19.0	U/L	12.0-43.0

--End of Report--

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)



Dr. Amit Samadhiya
MBBS, MD Biochemistry
JUNIOR CONSULTANT

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)
 Collected On : 11/03/2023 09:36 AM Received On : 11/03/2023 09:57 AM Reported On : 11/03/2023 03:21 PM
 Barcode : D62303110117 Specimen : Whole Blood Consultant : Dr. Gaurav Jain(GENERAL MEDICINE)
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8447386482

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (Enzymatic Method)	5.1	%	Normal: 4.0-5.6 Pre Diabetes: 5.7-6.4 Diabetes: => 6.5 ADA Recommendation 2017
Estimated Average Glucose	99.67	-	-

Interpretation:

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

Interpretation Notes

- 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. Target goals of < 7.0 % may be beneficial in patients. Please co-relate with Blood Sugar Fasting.

RENAL PACKAGE - 2 (RFT FASTING)

Fasting Blood Sugar (FBS) (GOD/POD)	90.2	mg/dL	74.0-106.0
Blood Urea Nitrogen (BUN) (Urease, UV)	7.6	mg/dL	7.0-17.0

SERUM CREATININE

Serum Creatinine (Enzymatic Two Point Rate - Creatinine Amidohydrolase)	0.60	mg/dL	0.5-1.04
eGFR (Calculated)	109.2	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.

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Dharamshila Narayana Superspeciality Hospital

(A Unit of Dharamshila Cancer Foundation and Research Centre)
 (Hospital Reg No : DHS/NH/144 | PAN No. AAATD0451G | GST No.: 07AAATD0451G1Z7)

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Appointments
1800-309-0309

Emergencies
73700-73700

Patient Name : Ms Salswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)			
Serum Sodium (ISE Direct)	143.0	mmol/L	137.0-145.0
Serum Potassium (ISE Direct)	5.39 H	mmol/L	3.5-5.1
Serum Chloride (ISE Direct)	109.9 H	mmol/L	98.0-107.0
Serum Bicarbonate Level (Phosphoenolpyruvate Carboxylase /Mdh Enzymatic End Piont Assay)	20.9 L	mmol/L	22.0-30.0
Serum Calcium (Arsezano III Dye Binding Method)	9.28	mg/dL	8.4-10.2
Serum Magnesium (Formazan Dye)	2.30	mg/dL	1.6-2.3
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	4.36	mg/dL	3.5-8.5
Serum Phosphorus (Phosphomolybdate Reduction)	3.57	mg/dL	2.5-4.5



Dr. Amit Samadhiya
 MBBS, MD Biochemistry
 JUNIOR CONSULTANT

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	Pale Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Double Indicator Method)	6.0	-	4.8-7.5
Sp. Gravity (PKa Change Ionic Concentration Method)	1.010	-	1.002-1.030

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)

Protein (Protein Error Method)	Nil	-	Nil
Urine Glucose (GOD/POD)	Nil	-	Nil
Ketone Bodies	Negative	-	-
Blood Urine (Pseudo Peroxidase Method)	Nil	-	-
MICROSCOPIC EXAMINATION			
Pus Cells	1-2	/hpf	1-2
RBC	Nil	/hpf	0 - 3
Epithelial Cells	1-2	/hpf	2-3
Urine For Sugar (Fasting)	Nil	-	-
Urine For Sugar (Post Prandial)	Nil	-	-

Prachi

Dr. Prachi
 MBBS, MD Pathology
 JUNIOR CONSULTANT

BLOOD BANK LAB

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	"B"	-
RH Typing	Positive	-

--End of Report--

Patient Name : Ms Saiswari Gochhayat MRN : 15050000146836 Gender/Age : FEMALE , 43y (20/04/1979)



Dr. Manoj Rawat
Consultant & HOD, Blood Bank Center
Consultant & HOD Blood Center

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



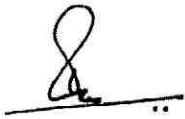
Patient Name	Saiswari Gochhayat	Requested By	DR. GAURAV JAIN
MRN	15050000146836	Procedure DateTime	2023-03-11 12:14:04
Age/Sex	43Y 10M/Female	Hospital	NH-Dharamshila

Inv. No.: 6606

X-RAY CHEST (PA)

- Lung fields are clear.
- Costophrenic angles are clear.
- Both domes of diaphragm are normal.
- Mediastinum and both hila are within normal limits.
- Cardiac size is normal.
- Bones under review are unremarkable.

Impression: Normal Study.



Dr. (Col.) Vikas Rastogi
MBBS, MD
SR. CONSULTANT RADIOLOGIST
DML 89340

Patient Name	Saiswari Gochhayat	Requested By	GAURAV JAIN
MRN	15050000146836	Procedure DateTime	2023-03-13 10:12:46
Age/Sex	43Y 10M/Female	Hospital	NH-Dharamshila

Inv. No: 98

X-RAY MAMMOGRAPHY BOTH BREASTS

(CC & Medio-Lateral views)

Report :

Bilateral parenchyma shows mildly dense glandular tissue ACR Type 'B'.

No mass lesion, microcalcification or architectural distortion seen.

Skin and nipple areolar complex are normal.

Axillary lymph nodes seen are non specific.

Impression: BIRADS I.

Previous study not provided for comparison.

Parenchyma ACR Type:

- a. Entirely fatty
- b. Scattered areas of fibro glandular density.
- c. Heterogeneously dense may obscure small mass.
- d. Extremely dense lowering sensitivity.

BIRADS Category :

0. Need Additional Imaging Evaluation or Prior Mammograms for comparison
1. Negative – There is nothing to comment on.
2. Benign finding
3. Probably benign finding (<2% malignant). Initial Short Interval Follow Up Suggested.
4. Suspicious Abnormality (2 – 95 % malignant). Biopsy Should Be Considered.
5. Highly Suggestive of Malignancy (> 95 % malignant). Appropriate Action Should be taken
6. Known Biopsy-proven malignancy.

GENERAL INFORMATION: -

- Whilst mammography is the single best way of detecting breast cancer, particularly in its early stages, it cannot identify every single case of breast cancer.
- Sensitivity of the mammogram goes down considerably if the breast has dense parenchyma.
- Base line mammography is recommended for all women above the age of 40. Regular breast self examination should be done subsequently on a monthly basis.
- Annual mammography is recommended in all women above 40 who have a family history of carcinoma breast.
- Follow up mammography of the opposite breast / both breasts is recommended in all women who have been treated surgically for carcinoma breast.
- Upto 10% of tumours may not show on the mammogram, if you discover a lump, consult your doctor. Further investigation & FNAC are strongly recommended.
- Please bring all previous mammographic films and reports to every mammographic examination.



Dr. ANJANA CHANDRA
MBBS MD (Radiodiagnosis)
SR. CONSULTANT RADIOLOGIST

Patient Name	Saiswari Gochhayat	Requested By	DR. GAURAV JAIN
MRN	15050000146836	Procedure DateTime	2023-03-11 10:51:30
Age/Sex	43Y 10M/Female	Hospital	NH-Dharamshila

Investigation No. 1974

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver : Shows a normal contour & echopattern. Normal sized intrahepatic biliary and vascular channels are seen.

Gall bladder : Normal in size with normal wall thickness and contents. The common hepatic duct & common bile duct and portal vein are normal.

The pancreas : The pancreas shows normal contour, echogenicity and size.

The spleen : The spleen is normal in size, contour and echopattern.

The right kidney : The right kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system. It measures ~8.8 x 4.0 cm.

The left kidney : The left kidney has a normal contour & echopattern in the cortex, medulla and pelvicalyceal system. It measures ~9.5 x 4.3 cm.

Urinary bladder is normal in wall & contents.

Uterus is normal in size and echogenicity of the myometrium. It measures 7.7 x 3.9 x 4.9 cm.

Both the ovaries are normal in size and echopattern.

Adnexa are clear.

No ascites.

Impression: Normal Study.



Dr. ANJANA CHANDRA
MBBS MD (Radiodiagnosis)
SR. CONSULTANT RADIOLOGIST

Transthoracic Echo color Doppler Report

Patient's Name	Ms. Saiswari Gochhayat	Age/Sex	43Years/Female
Ref By:	Dr. Gaurav Jain	Date:	11/03/2023
MRN No.	15050000146836	PVT/MRD/IPD	Mediwheel full body Health Check Up

Final Interpretation

1. Normal sized cardiac chamber dimensions.
2. No Regional wall motion abnormality, LVEF = 55%.
3. MIP - Diastolic Dysfunction Grade I
4. Normal RV systolic function.
5. No MR, No AR, No PR, Trace TR (PASP - 17mmHg).
6. No clot/vegetation/pericardial effusion.
7. IVC normal with >50% collapsibility with respiration.

Morphology :-

- ❖ Left Ventricle: It is normal sized.
- ❖ Left Atrium: It is normal sized.
- ❖ Right Atrium: It is normal sized.
- ❖ Right Ventricle: It is normal sized. RV systolic function is normal.
- ❖ Aortic Valve: Aortic valve appears tricuspid & cusps are normal.
- ❖ Mitral Valve: open normally, Subvalvular apparatus appears normal.
- ❖ Tricuspid valve: It appears normal.
- ❖ Pulmonic Valve: It appears normal.
- ❖ Main Pulmonary artery & its branches: Appear normal.
- ❖ Pericardium: There is no pericardial effusion.

DOPPLER/COLOUR FLOW

<u>VALVE</u>	<u>MAX. VELOCITY cm/sec</u>	<u>PG/MG mmHg</u>	<u>REGURGITATION</u>
MITRAL	E- 83cm/sec, A- 99cm/sec		No MR
AORTIC	125		No AR
TRICUSPID	172	(PASP – 17mmHg)	Trace TR
PULMONARY	83		No PR

Contd.....

M MODE & 2D Measurements

	Observed values	Normal values
Aortic root diameter	28	20-34(mm)
Left atrium size	27	19-40(mm)
Left Ventricular Size diastole	37	ED 37-56(mm)
Left Ventricular Size systole	25	ES 22-40 (mm)
Inter ventricular Septum diastole	10	ED 6-10(mm)
Posterior Wall thickness diastole	08	ED 6-10(mm)
End Diastolic Volume	58	
End Systolic Volume	23	
LV Ejection Fraction (%)	55%	55%-75%

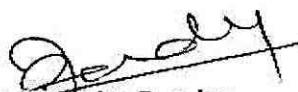
2D EXAMINATION DESCRIPTION

2D and M Mode examination done in multiple views revealed fair movement of both mitral leaflets. Aortic valve has three cusps & cusps are normal. Tricuspid valve leaflets move normally. Pulmonary valve is normal. Ascending Aorta is normal. Interatrial septum and interventricular septum are intact.

Dimension of left atrium and left ventricle are normal. No regional wall motion abnormality seen. Global LVEF is 55%. No intracardiac mass or thrombus seen.

Dr. Anand PandeySr. Consultant & Head
Cardiologist**Dr. Sajal Gupta**

Head Consultant Cardiologist


Dr. Anandendra Pandey
Consultant Cardiology**Dr. Rakesh Bachloo**

Consultant - Cardiology

Note:- This is a professional opinion based on imaging finding and not the diagnosis. Not valid for medico-legal purposes. In case of any discrepancy due to machine error or typing error, please get it rectified immediately.