#### Dr. Vimmi Goel

Head - Non Invasive Cardiology Incharge - Preventive Health Care MBBS, MD (Internal Medicine) Reg. No: MMC-2014/01/0113 749991305Z



Name:	Mrs	Bhu	mita	Suri	l Idpute		D	ate: 23 09 12	3
Age :	424	Sex : MF	Weight: 62	kg	Height: 157-3	inc	BMI :	25.15	
BP :	100/60	mmH		,		pm	RBS :		mg/dl
			SP02:	100/	<i>'</i>		LMP	27/08/22	



#### **DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mrs. BHUMITA SUNIL IDPATE

Bill No/ UMR No : BIL2324042549/UMR2324021395

Received Dt :23-Sep-23 09:30 am Age / Gender : 42 Y(s)/Female

Referred By : Dr. Vimmi Goel MBBS,MD

**Report Date** :23-Sep-23 10:18 am

<u>Parameter</u> **Specimen** Results Biological Reference **Method** Fasting Plasma Glucose

Plasma 101 < 100 mg/dl Post Prandial Plasma Glucose

55 < 140 mg/dl

GOD/POD,Colorimetric GOD/POD, Colorimetric

**GLYCOSYLATED HAEMOGLOBIN (HBA1C)** 

HbA1c

Non-Diabetic : <= 5.6 % HPLC Pre-Diabetic: 5.7 - 6.4

% Diabetic : >= 6.5 %

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

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100245

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510





#### **DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mrs. BHUMITA SUNIL IDPATE

Age /Gender :42 Y(s)/Female

Bill No/ UMR No : BIL2324042549/UMR2324021395

Referred By : Dr. Vimmi Goel MBBS,MD

**Received Dt** :23-Sep-23 09:31 am

**Report Date** : 23-Sep-23 11:40 am

#### LIPID PROFILE

	<u>Parameter</u>	<u>Specimen</u>	Results		Method		
	Total Cholesterol	Serum	171	< 200 mg/dl	Enzymatic(CHE/CHO/PO D)		
	Triglycerides		76	< 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)		
HDL Cholesterol Direct		32	> 50 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)			
	LDL Cholesterol Direct		112.00	< 100 mg/dl	Enzymatic		
	VLDL Cholesterol		15	< 30 mg/dl	Calculated		
	Tot Chol/HDL Ratio		5	3 - 5	Calculation		
	Intiate therapeutic			Consider Drug therapy	LDC-C		
	CHD OR CHD risk equivalent Multiple major risk factors conf 10 yrs CHD risk>20%	erring	>100	>130, optional at 100-129	<100		
	Two or more additional major r	isk	>130	10 yrs risk 10-20 % >130	<130		
factors,10 yrs CHD risk <20%				10 yrs risk <10% >160			
	No additional major risk or one		>160	>190,optional at 160-189	<160		
L	additional major risk factor						

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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**CONSULTANT PATHOLOGIST** 

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#### CLINICAL DIAGNOSTIC LABORATORY DEPARTMENT OF BIOCHEMISTRY

: Mrs. BHUMITA SUNIL IDPATE **Patient Name** 

Age /Gender : 42 Y(s)/Female

Bill No/ UMR No : BIL2324042549/UMR2324021395

: 23-Sep-23 09:31 am

Referred By : Dr. Vimmi Goel MBBS,MD Report Date

:23-Sep-23 11:40 am

#### LIVER FUNCTION TEST(LFT)

Received Dt

Parameter Total Bilirubin	<b>Specimen</b> Serum	Results 1.00	Biological Reference 0.2 - 1.3 mg/dl	Method Azobilirubin/Dyphylline
Direct Bilirubin		0.24	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.76	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase		51	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		15	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		20	13 - 35 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		6.92	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		4.05	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin		2.87	2.0 - 4.0 gm/dl	Calculated
A/G Ratio		1.41		

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### **DEPARTMENT OF BIOCHEMISTRY**

: Mrs. BHUMITA SUNIL IDPATE **Patient Name** 

Age / Gender : 42 Y(s)/Female

Bill No/ UMR No : BIL2324042549/UMR2324021395 Received Dt : 23-Sep-23 09:31 am

**Report Date** :23-Sep-23 11:40 am

Referred By : Dr. Vimmi Goel MBBS,MD

RFT

<u>Parameter</u> <u>Specimen</u>		Result Values	<b>Biological Reference</b>	<u>Method</u>
Blood Urea	Serum	14	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine		0.61	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		114.4		Calculation by CKD-EPI 2021
Sodium		138	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.13	3.5 - 5.1 mmol/L	Direct ion selective electrode
		*** End Of Rep	oort ***	

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### **DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** 

: Mrs. BHUMITA SUNIL IDPATE

Bill No/ UMR No : BIL2324042549/UMR2324021395

Received Dt

:23-Sep-23 09:31 am

Age /Gender : 42 Y(s)/Female

Referred By : Dr. Vimmi Goel MBBS,MD

Mathod

:23-Sep-23 11:40 am **Report Date** 

#### THYROID PROFILE

	Specimen	Results	<u>Biologicai</u>	Reference	Piction
<u>Parameter</u> T3	Serum	1.21	0.55 - 1.70	ng/ml	Enhanced chemiluminescence
Free T4		1.18	0.80 - 1.70	ng/dl	Enhanced Chemiluminescence
тѕн		1.77	0.50 - 4.80	uIU/ml	Enhanced chemiluminescence
		*** End Of Rei	port ***		

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### **DEPARTMENT OF PATHOLOGY**

: Mrs. BHUMITA SUNIL IDPATE **Patient Name** 

Bill No/ UMR No : BIL2324042549/UMR2324021395

Received Dt : 23-Sep-23 10:41 am Age /Gender : 42 Y(s)/Female

Referred By : Dr. Vimmi Goel MBBS,MD

Report Date :23-Sep-23 11:40 am

#### **URINE MICROSCOPY**

Parameter PHYSICAL EXAMINATION	<u>Specimen</u>	Results		<u>Method</u>
Volume Colour. Appearance CHEMICAL EXAMINATION Reaction (pH) Specific gravity Urine Protein	Urine	40 ml Pale yellow Clear 7.0 1.005 Negative	4.6 - 8.0 1.005 - 1.025	Indicators ion concentration
Sugar Bilirubin Ketone Bodies Nitrate Urobilinogen		Negative Negative Negative Negative Normal		protein error of pH indicator GOD/POD Diazonium Legal's est Principle
MICROSCOPIC EXAMINAT Epithelial Cells R.B.C. Pus Cells Casts	ION	0-1 Absent 0-1 Absent	0 - 4 /hpf 0 - 4 /hpf 0 - 4 /hpf	Ehrlich's Reaction Manual Manual Manual Manual

Page 1 of 2





#### DEPARTMENT OF PATHOLOGY

: Mrs. BHUMITA SUNIL IDPATE

Age /Gender : 42 Y(s)/Female

Bill No/ UMR No : BIL2324042549/UMR2324021395

:23-Sep-23 10:41 am

Referred By : Dr. Vimmi Goel MBBS,MD

**Report Date** 

:23-Sep-23 11:40 am

**Parameter** Crystals

**Received Dt** 

**Patient Name** 

**Specimen** Results

Absent

**Method** 

Manual

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

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100731

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Page 2 of 2

CONSULTANT PATHOLOGIST

Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510





#### DEPARTMENT OF BIOCHEMISTRY

Age / Gender : 42 Y(s)/Female : Mrs. BHUMITA SUNIL IDPATE **Patient Name** 

Referred By : Dr. Vimmi Goel MBBS,MD Bill No/ UMR No : BIL2324042549/UMR2324021395

Report Date : 23-Sep-23 12:54 pm :23-Sep-23 12:16 pm Received Dt

**URINE SUGAR** 

<u>Parameter</u>

**Urine Glucose** 

**Result Values** 

Negative

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### **DEPARTMENT OF BLOOD BANK**

Patient Name : Mrs. BHUMITA SUNIL IDPATE

Age /Gender :42 Y(s)/Female

Bill No/ UMR No : BIL2324042549/UMR2324021395

Referred By : Dr. Vimmi Goel MBBS,MD

Report Date : 23-Sep-23 11:40 am

**Parameter** 

**Received Dt** 

Specimen Results

**BLOOD GROUPING AND RH** 

BLOOD GROUP.

EDTA Whole

" B "

Gel Card Method

Blood & Plasma/ Serum

: 23-Sep-23 09:31 am

Rh (D) Typing.

" Positive "(+Ve)

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

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#### DEPARTMENT OF PATHOLOGY

**Patient Name** : Mrs. BHUMITA SUNIL IDPATE

Bill No/ UMR No : BIL2324042549/UMR2324021395

**Received Dt** :23-Sep-23 09:31 am Age / Gender : 42 Y(s)/Female

Referred By : Dr. Vimmi Goel MBBS,MD

Report Date :23-Sep-23 11:40 am

	_				
	<u>Parameter</u>	<u>Specimen</u>	Results	Biological Reference	Method
	HAEMOGRAM				
	Haemoglobin		10.7 gm%	12.0 - 15.0 gm%	Obstantia
	Haematocrit(PCV)		35.1 %	36.0 - 46.0 %	Photometric Calculated
	RBC Count		4.78 Millions/cum	in 8.8 - 4.8 Millions/cumm	Photometric
	Mean Cell Volume (MCV)		73 fl	83 - 101 fl	Calculated
	Mean Cell Haemoglobin (MCH)		22.3 pg	27 - 32 pg	Calculated
Q	Mean Cell Haemoglobin Concentration (MCHC)		30.4 g/l	31.5 - 35.0 g/l	Calculated
	RDW		18.1 %	11.5 - 14.0 %	Calculated
	Platelet count		406 10^3/cumm	150 - 450 10^3/cumm	Impedance
	WBC Count			m4000 - 11000 cells/cumm	Impedance
	DIFFERENTIAL COUNT		·		····poddiios
	Neutrophils	Blood	51.9 %	50 - 70 %	Flow Cytometry/Light microscopy
	Lymphocytes		37.9 %	20 - 40 %	Flow Cytometry/Light microscopy
	Eosinophils		2.0 %	1 - 6 %	Flow Cytometry/Light microscopy
	Monocytes		8.2 %	2 - 10 %	Flow Cytometry/Light microscopy
	Basophils		0.0 %	0 - 1 %	Flow Cytometry/Light microscopy
	Absolute Neutrophil Count		2024.1 /cumm	2000 - 7000 /cumm	Calculated
	Absolute Lymphocyte Count		1478.1 /cumm	1000 - 4800 /cumm	Calculated
	Absolute Eosinophil Count		78 /cumm	20 - 500 /cumm	Calculated
	Absolute Monocyte Count		319.8 /cumm	200 - 1000 /cumm	Calculated
0	Absolute Basophil Count		0 /cumm	0 - 100 /cumm	Calculated
C	PERIPHERAL SMEAR		-		
	Microcytosis	Blood	Microcytosis +(F	ew)	
	Platelets		Adequate		
	ESR		16 mm/hr	0 - 20 mm/hr	Automated Westergren's Method
			*** End Of Re	oort ***	

Suggested Clinical Correlation \* If neccessary, Please

discuss

Verified By:: 11100245

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#### DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	BHUMITA SUNIL IDPATE	STUDY DATE	23-09-2023 10:27:16	
AGE/ SEX	42Y / F	HOSPITAL NO.	UMR2324021395	
ACCESSION NO.	BIL2324042549-9	MODALITY	DX	
REPORTED ON	23-09-2023 12:44	REFERRED BY	Dr. Vimmi Goel	

#### X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

IMPRESSION:

No pleuro-parenchymal abnormality seen.

DR NAVEEN PUGALIA MBBS, MD [076125]

SENIOR CONSULTANT RADIOLOGIST.



PATIENT NAME:	MRS. BHUMITA SUNIL IDPATE	AGE /SEX:	42Y/F
REFERRED BY:	DR. VIMMI GOEL	REPORT DATE:	23/09/2023
REG NO:	2324021395	BILL NO:	232402549

## **USG OF BOTH BREASTS**

## OBSERVATION:

Right breast:

# Both breast show dense fibro-glandular parenchyma.

Fairly well-defined simple anechoic cyst of size  $1.7 \times 0.8$  cm is seen at 11 o'clock position withouttissue/echoes, average maximum diameter measuring 3.6 mm. Few focal tubular anechoic structures are seen at 10 o'clock position without internal soft

internal soft tissue/echoes.

Nipple areolar complex appears normal.

No enlarged axillary nodes seen.

### Left breast:

No focal lesion is seen.

No dilated ducts.

No enlarged axillary nodes seen. Nipple areolar complex appears normal.

Few reactive nodes are seen in bilateral axillary region.

# IMPRESSION: USG reveals

- tissue/echoes Few focal tubular anechoic structures at 10 o'clock position without internal soft
- Fairly well-defined simple anechoic cyst at 11 o'clock position without internal soft tissue/echoes.

ACR BIRADS – 2 – Benign

Reg no: 2017094427 DR. ANIKET KUSRAM

MBBS, MD, DNB (Radio-diagnosis)

44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India. Phone: +91 0712 6789100 SPANV Medisearch Lifesciences Private Limited



PATIENT NAME:	MRS. BBHUMITA IDPATE	AGE /SEX:	42 YRS/F
UMR NO:	2324021395	BILL NO:	23240042549
REF BY	DR. VIMMI GOEL	DATE:	23/09/2023

#### USG WHOLE ABDOMEN

LIVER is normal in size, shape and echotexture.

No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated.

PORTAL VEIN and CBD are normal in course and caliber.

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 shape, size and echotexture. No focal lesion seen.

Right kidney measures 10.4 x 4.1 cm. Left kidney measures 9.5 x 4.6 cm. Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

BLADDER is partially distended. No calculus or mass lesion seen.

Uterus is anteverted and normal.

No focal myometrial lesion seen.

Endometrial echo-complex appear normal. ET- 8.8 mm.

No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION -No significant abnormality seen. Suggest clinical correlation / further evaluation.

DR. ANIKET KUSRAM

MBBS, MD, DNB (Radio-diagnosis)

Reg no: 2017094427

Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510



# 2D ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

Patient Name: Mrs. Bhumita Sunii Idpate

Age 42 years / Female

Date DIHO UMR2324021395

Done by NSR, WNL 22/09/2023 Dr. Vimmi Goel

Blood pressure: 100/60 mm Hg (Right arm, Supine position) BSA : 1.65 m²

### Impression:

Good LV systolic function, LVEF 69% No RWMA of LV at rest LA is enlarged Normal LV dimensions

Normal LV diastolic function

Valves are normal E/E' is 8.3 (Normal filling pressure)

Trivial TR, No pulmonary hypertension IVC is normal in size and collapsing well with respiration Trivial MR

IAS aneurysm seen with concavity towards LA No clots or pericardial effusion

Comments:

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 Sector echocardiography was performed in senlarged. There is no RWMA of LV seen at rest. CH and 5 CH views). LV size normal. LV diastolic function. E Velocity is 95 cm/s, A Good LV systolic function. L/A is 1.4. Valves are normal. Trivial MR. Trivial TR. No Pulmonary Velocity is 67 cm/s. E/A is 1.4. Valves are normal. Trivial MR. Trivial TR. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen.

E' at medial mitral annulus is 10.9 cm/sec & at lateral mitral annulus is 12 cm/sec E/E' is 8.3 (Average).

M Mode echocardiography and dimension:

	Fractional Shortening	LVEE %	IVBW (d)	IVS (d)	IVIDS	VIDd	Aprilic root	Left atrium		
P.T.O		~ 60% ~60%	6-11 4-8	6-11 4-8	23-39 6-28	35-55 8-47	20-37 7-28	19-40 7-37	(adults) (children)	Normal range (mm)
Dr. Vimmi Goel MD, Sr. Consultant Non-invasive Cardiology	38%	69%	09	09	28	46	26	40		Observed (mm)

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2