

Health Checkup Service List

Registration No : 101-023-4177-000

Visit No : 2023084090008

Patient Name : Mrs. Dipika Upadhyay Sharma

Age/ Gender : 39 Yrs/ F

Address : GIDC ANKLESHWAR, Ankleshwar, 393001 India

Health Checkup Package : Mediwheel Full Body Health Checkup
Female Above 40

Time Processed Signature

Cardiology Services

- ELECTROCARDIOGRAM (ECG)
- ECHO STUDY

Clinical Pathology

- THYROID PROFILE I
- LIPID PROFILE (D)
- LIVER FUNCTION TEST-1
- BLOOD GLUCOSE FASTING (FBS)
- BLOOD GLUCOSE POST PRANDIAL (PP2BS)
- GLYCOSYLATED HB (HBA1C)
- BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD
- URINE ROUTINE
- STOOL ROUTINE
- CBC
- E.S.R
- URIC ACID
- BLOOD UREA NITROGEN
- CREATININE
- BUN CREATINE RATIO

HCU CONSULTATION

- CONSULTANT - OPHTHALMOLOGY
- CONSULTANT - DENTISTRY
- CONSULTANT - GYNAEC
- CONSULTANT - GENERAL SURGEON

UltraSound

- USG ABDOMEN AND PELVIS (WHOLE ABDOMEN)
- MAMMOGRAPHY

X-RAY

- X-RAY Plate 1



OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Dipika benn UHID Number: - 1177

Consultant Name: - Dr Kaupelli Date: - 8/11/23 Start Time: - 9:44 Age: - 39 (Years)

Sex: - F (M/F) Kaushik

Height: - _____ cms, Weight: - _____ kgs. Temp. _____, Pulse: - _____ (Per minute), SPO2 _____

B.P. :- _____ (mm of Hg), RBS:- _____ First Visit / Follow Up Visit. _____

Nursing Staff Name & Signature: - Vasava Savitri End Time: - _____

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time: - _____

Clinical Findings:-

pt. for Routine check up.
↓
No orthopedic/complains

plmth - 3-5 pmc
24-30

Diagnosis:-

Investigations and Advice:-

SPH/OPD/03

aln = P.A.C.I
3/37/2009 / 22/10/23



OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Dipika : U. Sharma UHID Number: - 4177

Consultant Name: - DR. Kalpesh Vaidya Date: 8/04/20 Start Time: 4:30 Age: 39 (Years)

Sex: - F (M/F)

Height: - _____ cms, Weight: - _____ kgs. Temp. _____, Pulse: - _____ (Per minute), SPO2 _____

B.P. :- _____ (mm of Hg), RBS:- _____ First Visit / Follow Up

Visit. First visit

Nursing Staff Name & Signature: - Sudhey

End Time:-

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

fibroid uterus

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:-

Clinical Findings:-

come for health check up
no abdominal pain @ 70

(S) PA soft
non-tender
AFB

Diagnosis:-

Investigations and Advice:-

USG abdomen



Name : _____

Date : _____

Age : _____ Sex : _____

8/4/23 (Dr Rizwan)

C/O pain in upper left back leg & arm

Sometimes

O/E dec - 6/7

buccally em - 8

Toptr - 7

Adw ÷ ① CF/VCC 6/7
(500x4) (300x2)

② Xray = 7



SARDAR
PATEL HOSPITAL
& HEART INSTITUTE

C/O's routine check up

Name: Dipika Upadhyay

Date: 11/4/23

Age: 39 Sex: F

UCVA's

OD

OS

6/6

6/6

SCD

plano — 6/6

plano — 6/6

MDVA's

MS

MS

ADV

— no need of glasses.

Dr Sitaya Shah
Consultant Ophthalmologist &
Phaco Surgeon
REG NO:-G 26895

Sardar Patel Hospital & Heart Institute Chikwadi, Opposite Railway Yard, Ankleshwar - 393001

☎ 02646 - 245883 / 246883 / 247883

78 bpm
-- / -- mmHg

Room:

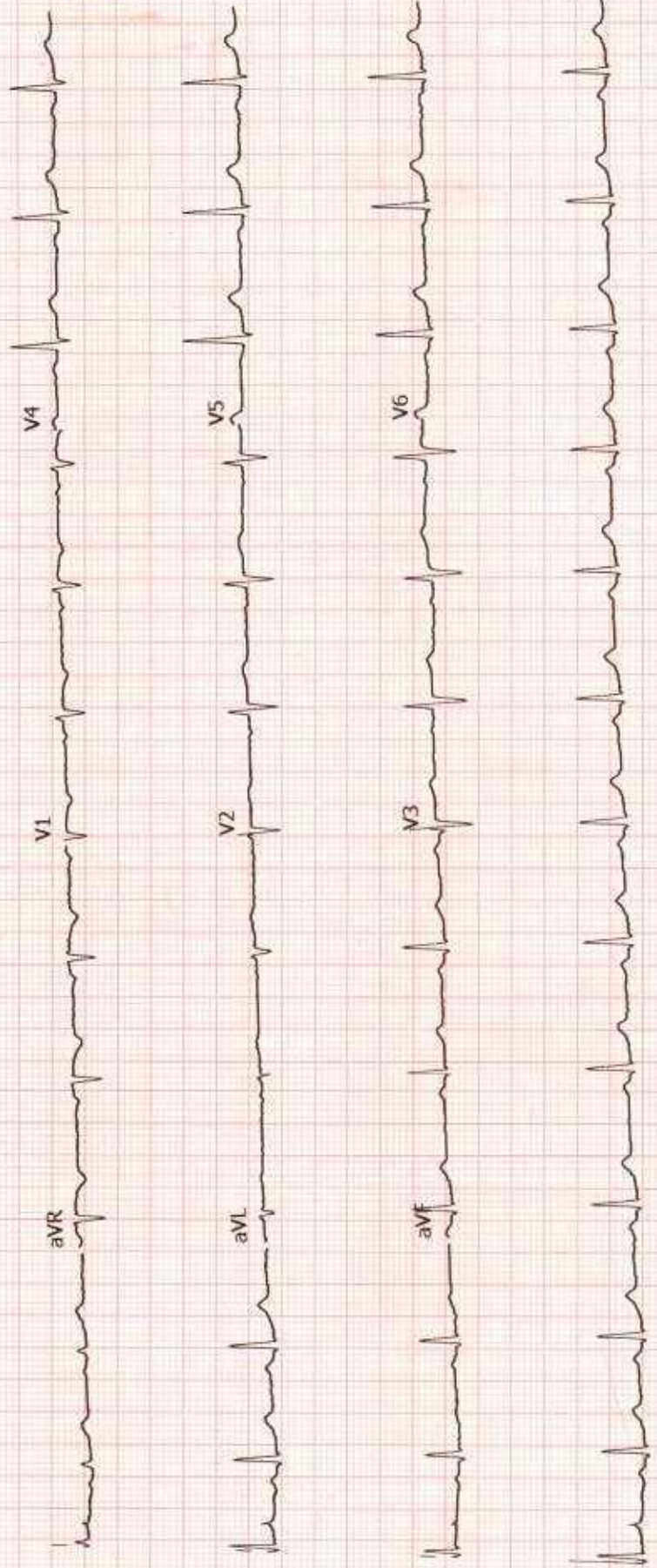
Location:
Order No:
Indication:
Medication 1:
Medication 2:
Medication 3:

25.03.2023 13:04:58
SARDAR PA HOSPITAL
CHEKUNWADI
ANKLESHWAR

Normal sinus rhythm
Normal ECG

Technical:
Ordering #:
Referring #:
Attending #:

QRS : 68 ms
QTcBaz : 360 / 410 ms
PR : 158 ms
P : 100 ms
RR / PP : 772 / 769 ms
pQRS / T : 60 / 78 / 50 degrees





Patient Name : MRS. DIPIKA UPADHAYA SHARMA

Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)

Maharashtra / Goa / Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 02:05 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
CBC			
Complete Blood Count (CBC)			
Hemoglobin (Hb)*	12.4	gm/dL	12.0 - 15.0
Method : Cymmeth Photometric Measurement			
Erythrocyte (RBC) Count*	4.24	mil/cu.mm	3.8 - 4.8
Method : Electrical Impedance			
Packed Cell Volume(Hematocrit)	35.7	%	36 - 46
Method : Calculated			
Red cell Indices			
Method - Calculated/Electrical Impedance			
MCV	84.20	fL	83 - 101
MCH	29.25	pg	27 - 32
MCHC	34.73	gm/dL	31.5 - 34.5
RDW - CV	12.4	%	11.6 - 14.0
Total and Differential count			
Method - Electrical Impedance and VCSN Technology			
Total Leucocytes (WBC) Count*	5300	cell/cu.mm	4000-10000
Neutrophils	58	%	40 - 80
Lymphocytes	34	%	20 - 40
Monocytes	06	%	2 - 10
Eosinophils*	02	%	1 - 6
Basophils	00	%	0 - 2
Platelet Count	226	10 ³ /ul	150 - 450
Method : Electrical Impedance			
Sample Type : EDTA Whole Blood.			

E.S.R

Erythrocyte Sedimentation Rate 20 mm/hr <20

Method : EDTA Whole blood, modified westerngren

Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

END OF REPORT

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Scan to Validate





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& HEART INSTITUTE**

Patient Name : MRS. DIPIKA UPADHAYA SHARMA
Age / Gender : 39 years / Female
Patient ID : 21279
Source : Sardar Patel Hospital (OPD)



Referral : Dr Mediwheel Full body Health Checkup
Collection Time : 25/03/2023, 09:47 AM
Reporting Time : 25/03/2023, 01:34 PM
Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
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BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD

Blood Group	"B"		
Method : Forward and Reverse By Tube Method			
RH Factor	Positive		

Methodology

This is done by forward and reverse grouping by tube Agglutination method.

Interpretation

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

****END OF REPORT****

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Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)

Maharashtra / Goa / Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 12:46 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
CREATININE			
Creatinine Method : Enzymatic	0.71	mg/dL	0.6 - 1.2 mg/dl
URIC ACID			
Uric Acid* Method : Uricase, POD	4.2	mg/dL	2.5 - 6.8 mg/dL
BLOOD UREA NITROGEN			
Urea * Method : Serum, Urease	23.2	mg/dL	17 - 43
Blood Urea Nitrogen-BUN* Method : Calculated	10.84	mg/dL	7 - 25 mg/dL
BUN CREATININE RATIO			
Urea	23.2	mg/dL	17 - 43
Blood urea nitrogen	10.84	mg/dL	7 - 25
Creatinine	0.71	mg/dL	0.6 - 1.2
BUN/Creatinine ratio	15.27	Ratio	6 - 22
THYROID FUNCTION TEST 1			
T3-Total Method : Serum, CLIA	1.47	ng/mL	0.69 - 2.15 ng/mL
T4-Total Method : Serum, CLIA	9.03	ug/dL	5.2 - 12.7 ug/dL
TSH Method : Serum, CLIA	2.85	uIU/mL	0.3 - 4.5 uIU/mL
Interpretation			

END OF REPORT

Bholiya

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Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full Body Health Checkup

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 12:11 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
<u>BLOOD GLUCOSE FASTING (FBS)</u>			
Glucose fasting Method : GOD-POD	106.4	mg/dL	Normal: 70 - 99 Impaired Tolerance: 100-125 Diabetes mellitus: >= 126 (on more than one occasion) (American diabetes association guidelines 2018)
Urine Fasting	Absent		
<u>BLOOD GLUCOSE POST PRANDIAL (PP2BS)</u>			
Blood Glucose-Post Prandial Method : GOD-POD	143.3	mg/dL	70 - 140
Urine Post Prandial	Absent		
<u>GLYCOSYLATED HB (HBA1C)</u>			
Glyco Hb (HbA1C)	5.1	%	Non-Diabetic: <=5.6 Pre Diabetic: 5.7-6.4 Diabetic: >=6.5
Estimated Average Glucose :	99.67		mg/dL
Interpretations			
1. HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%			
2. Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.			
3. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.			
Excellent control-6-7 %			
Fair to Good control - 7-8 %			
Unsatisfactory control - 8 to 10 %			
Poor Control - More than 10 %			

****END OF REPORT****

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Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)

Referral : Dr Mediwheel Full body Health Checkup
Maharashtra / Goa / Gujarat

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 12:34 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
LIVER FUNCTION TEST-1			
Bilirubin - Total Method : Diazotization	0.57	mg/dL	0.3 - 1.2
Bilirubin - Direct Method : Serum, Diazotization	0.28	mg/dL	Adults and Children: 0.0 - 0.4
Bilirubin - Indirect Method : Calculated	0.29		
SGOT Method : Serum, UV without P5P	36.2	U/L	< 50
SGPT Method : Serum, UV without P5P	48.3	U/L	< 50
Alkaline Phosphatase-ALPI Method : Serum, PNPP, AMP Buffer, IFCC 37 degree	64.0	U/L	30-120
Total Protein Method : Serum, Biuret, reagent blank end point	6.66	g/dL	6.6 - 8.3
Albumin Method : Serum, Bromocresol green	4.09	g/dL	Adults: 3.5 - 5.2
Globulin Method : Calculated	2.47	g/dL	1.8 - 3.6
A/G Ratio Method : Calculated	1.66	ratio	1.2 - 2.2

END OF REPORT

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Patient Name : MRS. DIPIKA UPADHAYA SHARMA

Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)



Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 12:09 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
LIPID PROFILE (D)			
Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	167.0	mg/dL	Desirable: <= 200 Borderline High: 201-239 High: > 239
Triglycerides Method : Serum, Enzymatic, endpoint	104.2	mg/dL	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	52.6	mg/dL	Normal: > 40 Major Heart Risk: < 40
LDL Cholesterol Method : Calculated	93.56	mg/dL	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190
Non - HDL Cholesterol, Serum Method : calculated	114.40	mg/dL	Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL Very High: > or = 190 mg/dL
VLDL Cholesterol Method : calculated	20.84	mg/dL	6 - 38
CHOL/HDL RATIO Method : calculated	3.17	ratio	3.5 - 5.0
LDL/HDL RATIO Method : calculated	1.78	ratio	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0
HDL/LDL RATIO Method : calculated	0.56	ratio	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0

Note: 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs (such as androgenic and related steroids), and insulin therapy etc. 12 hours fast is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for at least 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for at least 24 hours before testing (On Doctors Advice). Intraindividual variations, seasonal as well as positional variations (levels lower when sitting compared to standing etc.) have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

****END OF REPORT****

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

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Fidelity Diagnostics Pvt. Ltd., Chikwadi, Opp. Railway Yard, Ankleshwar - 393001

Ph. No.: +91 6353565992 , 7227038845 | www.fidelitydiagnostics.com



Patient Name : MRS. DIPIKA UPADHAYA SHARMA

Age / Gender : 39 years / Female

Patient ID : 21279

Source : Sardar Patel Hospital (OPD)

Maharashtra, Goa, Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 25/03/2023, 09:47 AM

Reporting Time : 25/03/2023, 12:33 PM

Sample ID :



002008423

Test Description	Value(s)	Unit(s)	Reference Range
URINE ROUTINE			
Volume*	20	ml	ml -
Colour*	Pale Yellow		Pale Yellow
Transparency (Appearance)*	Clear		Clear
Deposit*	Absent		Absent
Reaction (pH)*	5.5		4.5 - 8
Specific Gravity*	1.010		1.010 - 1.030
Chemical Examination (Automated Dipstick Method) Urine			
Urine Glucose (sugar)*	Absent		Absent
Urine Protein (Albumin)*	Absent		Absent
Urine Ketones (Acetone)*	Absent		Absent
Blood*	Absent		Absent
Bile pigments*	Absent		Absent
Nitrite*	Absent		Absent
Microscopic Examination Urine			
Pus Cells (WBCs)*	2-4	/hpf	0 - 5
Epithelial Cells*	6-8	/hpf	0 - 4
Red blood Cells*	Absent	/hpf	Absent
Crystals*	Absent		Absent
Cast*	Absent		Absent
Trichomonas Vaginalis*	Absent		Absent
Yeast Cells*	Absent		Absent
Amorphous deposits*	Absent		Absent
Bacteria*	Absent		Absent

END OF REPORT

B. Dholiya

Dr. Bheika Dholiya
M. D. Pathology
Registration No: G-32571

Scan to Validate



Patient's Name:-	DIPIKA UPADHYAY SHARMA	Date :-	01/04/2023
Age & Sex :-	39Y F		
Referred By :-	HEALTH CHECKUP		

USG ABDOMEN & PELVIS

LIVER : normal in size shape and normal echotexture.

No focal solid or cystic mass seen.

Portal & biliary radicals normal.

PV & CBD normal.

G.B. : Severly contracted and show wall shadow echo complex. Advice : NBM study.

PANCREAS : visualised reveals normal echotexture. No mass, calcification or pancreatitis.

SPLEEN : Normal in size & reveals normal echotexture. No other focal mass seen.

BOTH KIDNEY : RK: -- 94 x 33 mm. , LK : --97 x42 mm.

Both kidneys are normal size with normal cortical thickness.

No focal solid or cystic mass seen. No calculus. No hydronephrosis seen.

C.M differentiation is preserved. No parenchymal abnormality seen.

U. BLADDER : Well distended & normal.No mass or filling defect seen.

UTERUS : Anteverted, Enlarged in size measures (69 x52 x55) (AP X ML X SI)mm and show multiple(6 to 7) intramural fibroids , largest measures (54 x34) mm in posterior myometrial wall and (19 x12) mm in anterior myometrial wall.

Endometrial cavity Empty. ET **-6.6 mm**. No focal lesion seen.

BOTH OVARIES: appears normal size. Multiple small follicle within. No adnexal mass.

Rt ovary : --(31 x24) mm, Lt ovary : --(97 x42) mm

BOWEL LOOPS : Peristaltic bowel loops seen in lower abdomen. Bowel loops are normal calibre (Visualized).

No free fluid seen. No enlarged lymphnodes seen.

IMPRESSION:

Mutiple intramural fibroids as mentioned.

Dr. Chaitali
**DR. CHAITALI
MDRD**

Thanks for reference. Please co-relate clinically.



2D ECHO CARDIOGRAPHY REPORT

Name : Mrs dipika u sharma UHID : 4177
Age / Sex : 39 Yrs. /f Date : 25.3.2023
Done By: Dr. Milan Mehta

- All cardiac chambers are normal in dimension
- Normal LV Systolic function at Rest, LVEF = 60 %
- No RWMA at Rest.
- Grade I LV diastolic dysfunction
- MV – Normal, No MS/ Trivial MR AV –mildly sclerotic, No AS/Mild AR
- TV – Normal , No TS/ Trivial TR PV – No PS / PR
- No significant Pulmonary Hypertension, RVSP = 30 mmHg
- IAS / IVS appear Intact
- No e/o Clot / Vegetation /pericardial effusion
- IVC normal diameter and collapse > 50 % with respiration

IMPRESSION: NORMAL LVEF, NO RWMA, GRADE I LVDD

Dr.Milan Mehta
D.Card (Mumbai)
Non-Invasive cardiology

Dr. Jayveer Alodiaiya
MD, DM, CARDIOLOGY
Consultant: Interventional Cardiology

Patient Name:-	DIPIKA UPADHAYAY SHARMA		Date :-	25/03/2023
Age & Sex :-	39	F		
Referred By :-	HEALTH CHECK UP			

X-RAY CHEST PA VIEW

Both lung zones are clear.

Cardiac silhouette is normal

Both costophrenic angles are clear.

Both domes of diaphragm are at normal level.

Bony thorax is unremarkable

Impression-No significant abnormality in present study.

Please correlate with clinical findings and relevant investigations.



Dr. Vivek Chaudhari
D.M.R.E.
Consultant Radiologist