

Medi-wheel

Rlo-Nagpur

Dr. Vimmi Goel  
MBBS, MD (Internal Medicine)  
Sr. Consultant Non Invasive Cardiology  
Reg. No: MMC-2014/01/0113



7499913052

Name: Mrs. Anjali Landge Date: 28/10/23

Age: 244 Sex: M/F Weight: 52.1 kg Height: 156.0 Inc BMI: 21.37


BP: 113/71 mmHg Pulse: 70/m bpm RBS: mg/dl  
SPO2: 99% LMP: 13/10/23

- 24/F
- Mild Anemia
- FHM - Mother - DM
- NO H/O abn blood loss

D/E  
 JUP<sup>o</sup>  
 Ch  
 L<sub>n</sub>  
 P/A / N

- Adv-
- Diet as advised
  - Steady walking.

Imw → noted

  
 Dr. VIMMI GOEL  
 MBBS, MD  
 Sr. Consultant Non Invasive Cardiology  
 Reg. No: MMC-2014/01/0113



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age / Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 28-Oct-23 09:18 am	<b>Report Date</b> : 28-Oct-23 11:40 am

**HAEMOGRAM**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	<b>10.8</b>	12.0 - 15.0 gm%	Photometric
Haematocrit(PCV)		<b>35.8</b>	36.0 - 46.0 %	Calculated
RBC Count		<b>5.11</b>	3.8 - 4.8 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>70</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>21.1</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		<b>30.2</b>	31.5 - 35.0 g/l	Calculated
RDW		<b>16.4</b>	11.5 - 14.0 %	Calculated
Platelet count		303	150 - 450 10 <sup>3</sup> /cumm	Impedance
WBC Count		5500	4000 - 11000 cells/cumm	Impedance
<b><u>DIFFERENTIAL COUNT</u></b>				
Neutrophils		51.3	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		<b>42.9</b>	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils		2.4	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes		3.3	2 - 10 %	Flow Cytometry/Light microscopy
Basophils		0.1	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count		2821.5	2000 - 7000 /cumm	Calculated



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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		2359.5	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		132	20 - 500 /cumm	Calculated
Absolute Monocyte Count		<b>181.5</b>	200 - 1000 /cumm	Calculated
Absolute Basophil Count		5.5	0 - 100 /cumm	Calculated
<b><u>PERIPHERAL SMEAR</u></b>				
RBC		Microcytosis +(Few), Hypochromia +(Few), Anisocytosis ++(11%-20%)		Light microscopy
WBC		As Above		
Platelets		Adequate		
<b>E S R</b>		12	0 - 20 mm/hr	Automated Westergren's Method
*** End Of Report ***				

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100245

Test results related only to the item tested.

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



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age / Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 28-Oct-23 09:17 am	<b>Report Date</b> : 28-Oct-23 11:29 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	97	< 100 mg/dl	GOD/POD, Colorimetric
Post Prandial Plasma Glucose		106	< 140 mg/dl	GOD/POD, Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>				
<b>HbA1c</b>		5.4	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

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

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CIN: U74999MH2018PTC303510





**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age /Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
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**LIPID PROFILE**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
Total Cholesterol	Serum	164 < 200 mg/dl	Enzymatic(CHE/CHO/POD)
Triglycerides		45 < 150 mg/dl	Enzymatic
HDL Cholesterol Direct		50 > 50 mg/dl	(Lipase/GK/GPO/POD) Phosphotungstic acid/mgdl-Enzymatic (microslide)
LDL Cholesterol Direct		<b>106.83</b> < 100 mg/dl	Enzymatic
VLDL Cholesterol		9 < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		3 3 - 5	Calculation

<u>Intiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%		<100
Two or more additional major risk factors, 10 yrs CHD risk <20%	>130	10 yrs risk 10-20 % >130
No additional major risk or one additional major risk factor	>160	10 yrs risk <10% >160 >190, optional at 160-189
		<160

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

Suggested Clinical Correlation \* If neccessary, Please discuss

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



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age / Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 28-Oct-23 09:18 am	<b>Report Date</b> : 28-Oct-23 11:29 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
<b>RFT</b>				
Blood Urea	Serum	<b>12</b>	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine		<b>0.51</b>	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		133.6		Calculation by CKD-EPI 2021
Sodium		141	136 - 145 mmol/L	Direct ion selective electrode
Potassium		4.07	3.5 - 5.1 mmol/L	Direct ion selective electrode

**LIVER FUNCTION TEST(LFT)**

Total Bilirubin	0.33	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin	0.14	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin	0.19	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase	46	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT	17	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST	22	13 - 35 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein	7.01	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum	3.90	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin	3.11	2.0 - 4.0 gm/dl	Calculated
A/G Ratio	1.25		

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

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CIN: U74999MH2018PTC303510



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age / Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 28-Oct-23 12:35 pm	<b>Report Date</b> : 28-Oct-23 02:01 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	
<b>URINE SUGAR</b>			
Urine Glucose		Negative	
<b>THYROID PROFILE</b>			
T3		1.44	0.55 - 1.70 ng/ml
Free T4		0.86	0.80 - 1.70 ng/dl
TSH		2.28	0.50 - 4.80 uIU/ml
*** End Of Report ***			

Suggested Clinical Correlation \* If necessary, Please discuss

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 CIN: U74999MH2018PTC303510



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. ANJALI LANDGE	<b>Age /Gender</b> : 24 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324051199/UMR2324025991	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 28-Oct-23 09:57 am	<b>Report Date</b> : 28-Oct-23 12:00 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<b>URINE MICROSCOPY</b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
Volume	Urine	30 ml	
Colour.		Pale yellow	
Appearance		Clear	
<b><u>CHEMICAL EXAMINATION</u></b>			
Reaction (pH)	Urine	6	4.6 - 8.0
Specific gravity		1.010	1.005 - 1.025
Urine Protein		Negative	Indicators ion concentration
Sugar		Negative	protein error of pH indicator
Bilirubin		Negative	GOD/POD
Ketone Bodies		Negative	Diazonium
Nitrate		Negative	Legal's est Principle
Urobilinogen		Normal	Ehrlich's Reaction
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells	Urine	0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	Manual
Crystals		Absent	Manual
<b><u>USF(URINE SUGAR FASTING)</u></b>			
Urine Glucose	Urine	Negative	GOD/POD

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

Suggested Clinical Correlation \* If neccessary, Please discuss

Verified By : : 11100354

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF IMMUNO HAEMATOLOGY**

Patient Name : Mrs. ANJALI LANDGE  
Bill No/ UMR No : BIL2324051199/UMR2324025991  
Received Dt : 28-Oct-23 09:18 am  
Age / Gender : 24 Y(s)/Female  
Referred By : Dr. Vimmi Goel MBBS,MD  
Report Date : 28-Oct-23 01:31 pm

**BLOOD GROUPING AND RH**

Parameter

BLOOD GROUP.

Specimen Results

EDTA Whole " A "  
Blood &  
Plasma/  
Serum

Rh (D) Typing.

Gel Card Method

" Positive "(+Ve)  
\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100245

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

**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	ANJALI LANDGE	STUDY DATE	28-10-2023 12:43:02
AGE/SEX	24Y7M5D / F	HOSPITAL NO.	UMR2324025991
ACCESSION NO.	BIL2324051199-10	MODALITY	DX
REPORTED ON	28-10-2023 14:24	REFERRED BY	Dr. Vimmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal.

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.**

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

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Phone: +91 0712 6789100  
CIN: U74999MH2018PTC303510

PATIENT NAME:	MRS. ANJALI LANDGE	AGE /SEX:	24 YRS /F
REG NO	2324025991	BILL NO	2324051199
REFERRED BY	DR. VIMMI GOEL	DATE	28/10/2023

**USG WHOLE ABDOMEN**

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

GALL BLADDER is physiologically distended. No sludge or calculus seen.  
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.

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. It measures 8.4 x 3.6 x 4.9 cm.  
No focal myometrial lesion seen.  
Endometrial echo-complex appear normal. ET – 6 mm.  
Both ovaries are seen.  
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 NAVEEN PUGALIA.  
MBBS, MD [076125]  
SENIOR CONSULTANT RADIOLOGIST**



Kingsway Hospitals  
44 Kingsway, Mohan Nagar,  
Near Kasturchand Park, Nagpur

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: Mrs. Anjali, Landge  
Patient ID: 025991  
Height:  
Weight:  
Study Date: 28.10.2023  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

DOB: 24.03.1999  
Age: 24yrs  
Gender: Female  
Race: Indian  
Referring Physician: Mediwheel HCU  
Attending Physician: Dr. Vimmi Goel  
Technician: --

### Medications:

--

### Medical History:

NIL

### Reason for Exercise Test:

Screening for CAD

### Exercise Test Summary:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:36	0.00	0.00	92	110/70	
	WARM-UP	00:19	0.70	0.00	118		
EXERCISE	STAGE 1	03:00	1.70	10.00	141	110/70	
	STAGE 2	03:00	2.50	12.00	181	120/70	
	STAGE 3	00:39	3.40	14.00	203		
RECOVERY		01:00	0.00	0.00	155	130/70	
		02:00	0.00	0.00	130	120/70	
		00:36	0.00	0.00	136	110/70	

The patient exercised according to the BRUCE for 6:39 min:s, achieving a work level of Max. METS: 8.90. The resting heart rate of 111 bpm rose to a maximal heart rate of 203 bpm. This value represents 103 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 130/70 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation:

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

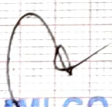
Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

### Conclusions:

TMT is negative for inducible ischemia.

  
Dr. VIMMI GOEL  
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Reg.No.: 2014/01/0113



MRS ANJALIN LANDGE  
Female

28-Oct-23 8:56:59 AM  
KIMS-KINGSWAY HOSPITALS  
PHC DEPT.

24 Years

Rate 84 . Sinus rhythm.....*Normal* P axis, V-rate 50- 99  
 PR 132 . Low voltage, extremity leads.....all extremity leads <0.5mV  
 QRS 82 . Baseline wander in lead(s) V1

QT 380  
 QTc 450

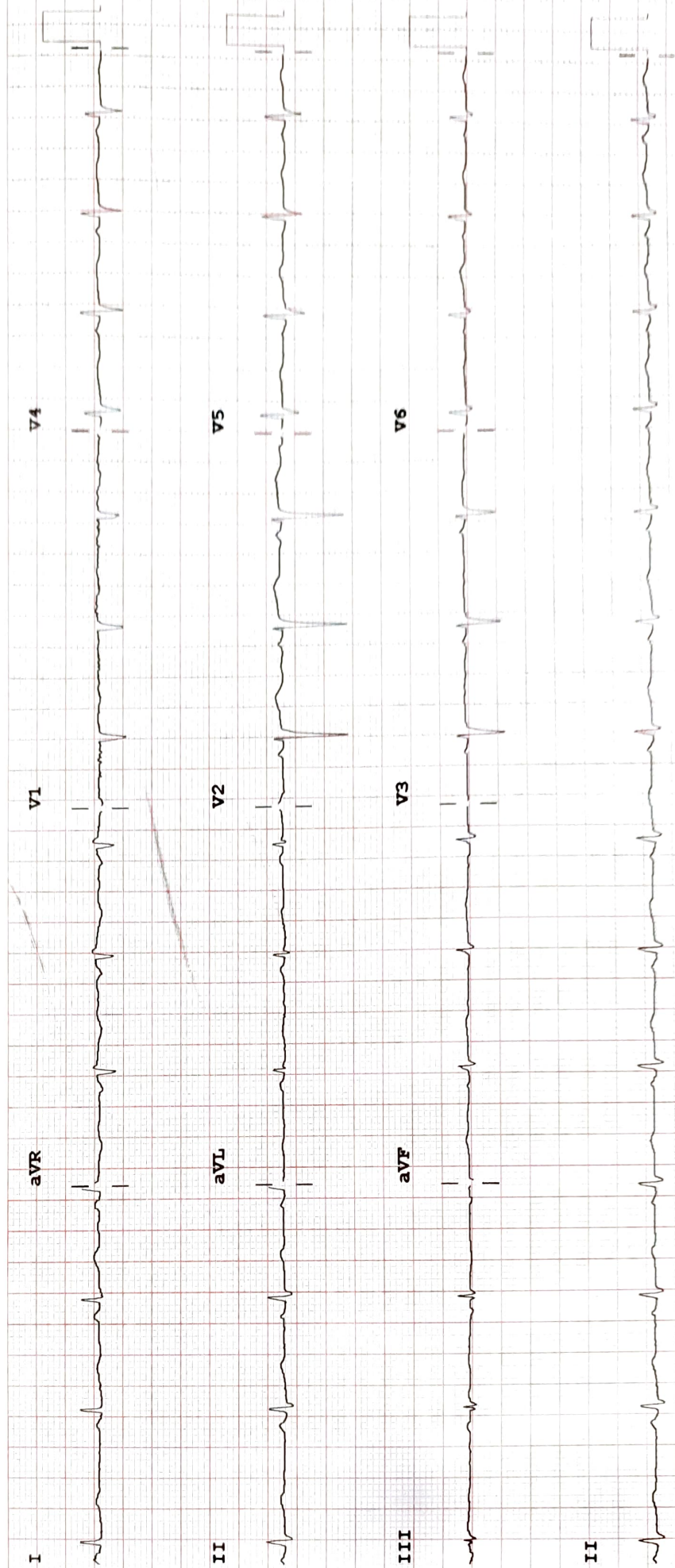
--AXIS--

P 7  
 QRS 19  
 T 28

12 Lead; Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50- 0.50-150 Hz W 100B CL

PHILIPS

REORDER # NL433A