

Mrs Anjch

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Camdwd Pandey

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application

T. Shri.

10/12/22

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421. Gujarat, India
Phone: 079 29750750, +91-7575006000 / 9000
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CIN: L8E110GJ2012PLC072647



aashka
HOSPITAL



Name: Anjali Ray

Age 31

Date: 16/12/22

C10

~ Ruzm ehm wdr

D.V. ^{G16}
 ^{G16}

M.V. ^{G16}
 ^{G16}

Colm wsh

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LABORATORY REPORT



Name : ANJALI RAI	Sex/Age : Female/ 31 Years	Case ID : 21202200307
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2442220
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type :	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22237270

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Urea Nitrogen (BUN)			
BUN (Blood Urea Nitrogen)	5.6	mg/dL	6.00 - 20.00
Haemogram (CBC)			
MCHC (Calc)	30.9	gm/dL	31.50 - 34.50
Lipid Profile			
LDL Cholesterol	61.09	mg/dL	65 - 100

Abnormal Result(s) Summary End

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



LABORATORY REPORT



Name : ANJALI RAI Sex/Age : Female/ 31 Years Case ID : 21202200307
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2442220
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Dec-2022 11:31 Sample Type : Whole Blood EDTA Mobile No : 7897367607
 Sample Date and Time : 10-Dec-2022 11:31 Sample Coll. By : Ref Id1 : OSP29275
 Report Date and Time : 10-Dec-2022 11:54 Acc. Remarks : Normal Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin (Colorimetric)	12.5	G%	12.00 - 15.00
RBC (Electrical Impedance)	4.52	millions/cumm	3.80 - 4.80
PCV(Calc)	40.41	%	36.00 - 46.00
MCV (RBC histogram)	89.4	fL	83.00 - 101.00
MCH (Calc)	27.7	pg	27.00 - 32.00
MCHC (Calc)	L 30.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.70	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	7330	/μL	4000.00 - 10000.00
	[%]		EXPECTED VALUES [Abs] EXPECTED VALUES
Neutrophil	64.0	%	40.00 - 70.00 4691 /μL 2000.00 - 7000.00
Lymphocyte	28.0	%	20.00 - 40.00 2052 /μL 1000.00 - 3000.00
Eosinophil	3.0	%	1.00 - 6.00 220 /μL 20.00 - 500.00
Monocytes	5.0	%	2.00 - 10.00 367 /μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00 0 /μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	165000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	2.29		0.78 - 3.53

SMEAR STUDY

RBC Morphology Normocytic Normochromic RBCs.
 WBC Morphology Total WBC count within normal limits.
 Platelet Platelets are adequate in number.
 Parasite Malarial Parasite not seen on smear.

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

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 M.D. (Pathologist)

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2442220
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Whole Blood EDTA	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:03	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	05	mm after 1hr	3 - 20	

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

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Whole Blood EDTA	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 11:56	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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HAEMATOLOGY INVESTIGATIONS

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

ABO Type	A
Rh Type	POSITIVE

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

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2442220
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Spot Urine	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 12:33	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:03	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour	Pale yellow
Transparency	Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.005	1.005 - 1.030
pH	6.00	5 - 8
Leucocytes (ESTERASE)	Negative	Negative
Protein	Negative	Negative
Glucose	Negative	Negative
Ketone Bodies Urine	Negative	Negative
Urobilinogen	Negative	Negative
Bilirubin	Negative	Negative
Blood	Negative	Negative
Nitrite	Negative	Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Negative		Negative

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 Sample Date and Time : 10-Dec-2022 12:33 Sample Coll. By : Ref Id1 : OSP29275
 Report Date and Time : 10-Dec-2022 13:03 Acc. Remarks : Normal Ref Id2 : O22237270

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	.1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

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

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2442220
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 16:58	Acc. Remarks : Normal	Ref Id2 : O22237270
TEST	RESULTS	UNIT
		BIOLOGICAL REF RANGE
		REMARKS

BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F	91.56	mg/dL	70.0 - 100
Plasma Glucose - PP	92.86	mg/dL	70.0 - 140.0

Reference 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)

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Name : ANJALI RAI Sex/Age : Female/ 31 Years Case ID : 21202200307
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2442220
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 10-Dec-2022 11:31 Sample Type : Serum Mobile No : 7897367607
 Sample Date and Time : 10-Dec-2022 11:31 Sample Coll. By : Ref Id1 : OSP29275
 Report Date and Time : 10-Dec-2022 13:14 Acc. Remarks : Normal Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol	130.20	mg/dL	110 - 200	
HDL Cholesterol	55.8	mg/dL	48 - 77	
Triglyceride	66.56	mg/dL	40 - 200	
VLDL <i>Calculated</i>	13.31	mg/dL	10 - 40	
Chol/HDL <i>Calculated</i>	2.33		0 - 4.1	
LDL Cholesterol <i>Calculated</i>	L 61.09	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 assesment
- 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)

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Serum	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:14	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T.	20.36	U/L	0 - 31	
S.G.O.T.	21.59	U/L	15 - 37	
Alkaline Phosphatase	83.86	U/L	35 - 105	
Gamma Glutamyl Transferase	8.20	U/L	5 - 36	
Proteins (Total)	7.85	gm/dL	6.4 - 8.2	
Albumin	4.76	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.09	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.5		1.0 - 2.1	
Bilirubin Total	0.31	mg/dL	0.2 - 1.0	
Bilirubin Conjugated	0.13	mg/dL		
Bilirubin Unconjugated <i>Calculated</i>	0.18	mg/dL	0 - 0.8	

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Serum	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:15	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	L 5.6	mg/dL	6.00 - 20.00	
Creatinine	0.5	mg/dL	0.50 - 1.50	
Uric Acid	4.02	mg/dL	2.6 - 6.2	

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Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Whole Blood EDTA	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:03	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Glycated Haemoglobin Estimation

HbA1C	5.67	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	116.03	mg/dL	

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)

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Reg Date and Time : 10-Dec-2022 11:31	Sample Type : Serum	Mobile No : 7897367607
Sample Date and Time : 10-Dec-2022 11:31	Sample Coll. By :	Ref Id1 : OSP29275
Report Date and Time : 10-Dec-2022 13:02	Acc. Remarks : Normal	Ref Id2 : O22237270

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	89.88	ng/dL	70 - 204	
Thyroxine (T4) CMA	7.2	ng/dL	5.5 - 11.0	
TSH CMA	2.339	μIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 μIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 μIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTN and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in Pregnancy

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

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Report Date and Time : 10-Dec-2022 13:02	Acc. Remarks : Normal	Ref Id2 : O22237270

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 triiodothyronine (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 hyperthyroid 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 hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microu/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

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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Phone : 079-40408181 / 61618181 | Email : contact@supratechlabs.com | Website : www.neubergsupratech.com

PATIENT NAME: ANJALI RAI
GENDER/AGE: Female / 31 Years
DOCTOR:
OPDNO: OSP29275

DATE: 10/12/22

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 radicles 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 10.1 x 4.6 cms in size.
Left kidney measures about 10.6 x 4.8 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 190 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6 mm. No evidence of uterine mass lesion is seen.

Both ovaries appear normal. No evident solid or cystic lesion is seen.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Aashka Hospitals Ltd.
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: ANJALI RAI
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DOCTOR:
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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. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

PATIENT NAME: ANJALI RAI
GENDER/AGE: Female / 31 Years
DOCTOR: DR. HASIT JOSHI
OPDNO: OSP29275

DATE: 10/12/22

2D-ECHO

MITRAL VALVE : MILD MVP
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
AORTA : 29mm
LEFT ATRIUM : 31mm
LV Dd / Ds : 35/21mm EF 68%
IVS / LVPW / D : 9/8mm
IVS : INTACT
IAS : FLOPPY
RA : NORMAL
RV : NORMAL
PA : NORMAL
PERICARDIUM : NORMAL
VEL : PEAK MEAN
M/S : Gradient mm Hg Gradient mm Hg
MITRAL : 1/0.7m/s
AORTIC : 1.1m/s
PULMONARY : 0.9m/s
COLOUR DOPPLER : TRIVIAL MR/TR
RVSP : 26mmHg
CONCLUSION : MILD MVP / TRIVIAL MR;
NORMAL LV SIZE / SYSTOLIC FUNCTION;
TRIVIAL TR, NO PAH.



CARDIOLOGIST
DR. HASIT JOSHI (9825012235)



Name: Anjali Raw. Age: 31 yrs

Complaints:
Ref. checkup Vaginal pain
4 Hwk

No of deliveries:

Last Delivery: ML 1/2 yr

History of abortion:

H/O medical conditions associated:

Last abortions:

DM	<input type="checkbox"/>
HTN	<input checked="" type="checkbox"/>
Thyroid	<input type="checkbox"/>

MH: ref 3/30 Reg: Mild discomfort ² for days

LMP: 9 Aug.

P/A: Soft

P/S: could not be done

P/V: ul size not made in
Pp.

Sample:-

Vagina
Cervix

<input checked="" type="checkbox"/>
<input type="checkbox"/>

POE tomix.

Doctors Sign:-

[Signature]

10/12/22 1.15 PM

10.12.2022 12:58:53 PM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

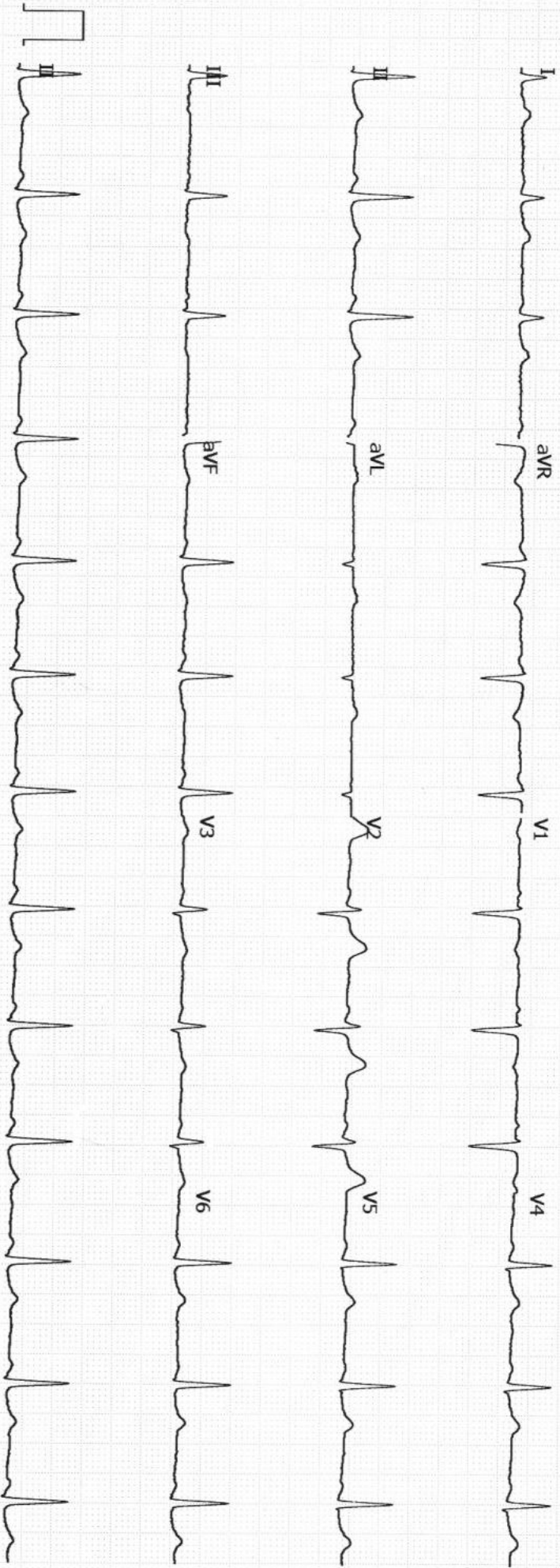
Room:

76 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 76 ms
QT / QTcbaz : 384 / 432 ms
PR : 118 ms
P : 100 ms
RR / PP : 792 / 789 ms
P / QRS / T : 47 / 68 / 37 degrees

Normal sinus rhythm
Normal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 36-20 Hz 50 Hz

Unconfirmed
4x2.5x3_25_R1 1/1



भारत सरकार
Government of India

Issue Date: 04/05/2014



अंजलि राय
Anjali Rai
जन्म तिथि/DOB: 27/06/1991
महिला/ FEMALE

Download Date: 28/09/2021

2563 1778 1792

VID : 9185 6274 1881 7443

मेरा आधार, मेरी पहचान



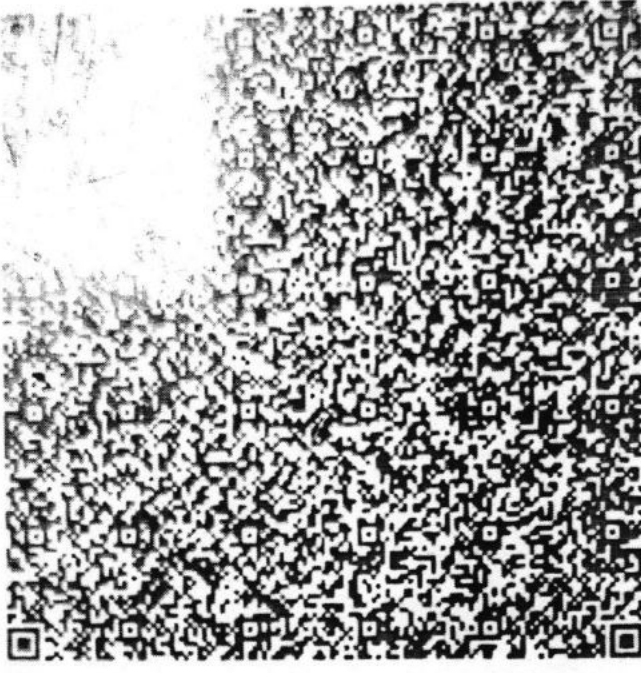
भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:
संबोधित: राम मोहन, प्लॉट न-42, खरगापुर रोड,
गोमतीनगर विस्तार, वरदान विद्यालय के पास, गीतापुरी
चौराहा, खरगापुर, लखनऊ,
उत्तर प्रदेश - 226010

Address:

D/O: Ram Mohan, plot no-42, kharagapur
road, GOMTINAGAR vistar, near varadan
school, geetapuri chauraha, Khargapur,
Lucknow,
Uttar Pradesh - 226010



2563 1778 1792

VID : 9185 6274 1881 7443



1947



help@uidai.gov.in



www.uidai.gov.in



બંક ઓફ બરોડા

Bank of Baroda



પાત્ર

Name ANJALI RAI

107526

ISSUED BY
[Signature]
Authority

[Signature]

Signature of Holder

Signature of Holder

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	MS. RAI ANJALI
EC NO.	107528
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	GANDHINAGAR
BIRTHDATE	27-06-1991
PROPOSED DATE OF HEALTH CHECKUP	05-12-2022
BOOKING REFERENCE NO.	22D107528100032512E

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 **03-12-2022** 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))