



Ms. RASHMI RATHOD (38 /F)

UHID : AHIL.0000815586

AHC No : AHILAH174586

Date : 12/11/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

Dear Ms. RASHMI RATHOD

Thank you for choosing Apollo ProHealth, India's first personalized, predictive health screening program with health risk assessments curated just for you to guide targeted intervention, continuum of care and a path to wellness. Our holistic care continuum integrates clinical expertise and artificial intelligence to gauge and avert the risk, onset and progression of non-communicable diseases (NCDs).

In this personalized health report, you will find your

- Medical History and Physical examination results
- Investigations Results
- Artificial Intelligence powered risk scores
- Physician's Impressions on your Health
- Path to Wellness: A personalized management protocol, including follow-up assessments
- Vaccination counselling advice

Apollo ProHealth encompasses the following processes:

Personalized Health Risk Assessment (pHRA): Based on your online risk assessment, medical history, physical examination, and psychological evaluation, we recommended a health screening assessment for you, including diagnostic and imaging tests. Based on the results of these assessments, we have advised additional follow-up tests and consultations - details of which we have included in your report. Your physician will explain their relevance, and we strongly suggest you comply with the recommendations.

Health Mentor: We have assigned a dedicated health mentor to proactively work with you towards your health goals and ensure that you regularly adhere to the guidance and recommendations from clinical and nutrition consultants. Your health mentor will call you periodically to track your progress

For Enquiry/Appointments Contact **+91 76988 15003 / +91 79 66701880**

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ProHealth App: You will get access to the Apollo ProHealth App, which will facilitate easy navigation of personal health records, progress towards your health goals, appointment booking, customized tips and guidance for health and lifestyle management, and regularly connecting with your Health Mentor through the in-app chat. Until you return for your 2nd-year assessment, you will receive periodic updates and reminders to motivate you to keep up the momentum regarding health goal milestones.

Follow- Up Consultation:

For any follow-up consultations, you can visit your ProHealth physician in-person at the center or you can book a virtual consultation through <https://www.apollo247.com/specialties> or through the Apollo 247 app on your phone.

Scan the QR code to download the Apollo 247 App



You can also download the Apollo 247 app on

ANDROID IOS

Disclaimer: The services offered in the program may vary as per the respective agreements made in the program or center or agreed mutual consent.

Note: You are entitled to one complimentary follow-up consultation with your ProHealth physician within a period of 1 year. Please contact your health mentor for the complimentary consult coupon code. This is available for ProHealth Super, Regal and Covid Recovery and Wellness programs

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Name : Ms. RASHMI RATHOD (38 /F)

Date : 12/11/2022



Address :

Examined by : Dr. SHASHIKANT NIGAM

UHID : AHIL.0000815586

MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

AHC No : AHILAH174586



Chief Complaints

For Annual health checkup

Present Known illness

Thyroid disease : Since - 3 YRS; Medication - regular; - TAB THYROXINE 100 MCG



Systemic Review

Cardiovascular system : - Nil Significant

Respiratory system : - Nil Significant

Oral and dental : - Nil Significant

Gastrointestinal system : - Nil Significant

Genitourinary system : - Nil Significant

Gynaec history : - Nil Significant

Central nervous system : - Nil Significant

Eyes : - Nil Significant

ENT : - Nil Significant

Musculoskeletal system : Spine and joints



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- Nil Significant

Skin : - Nil Significant

General symptoms : - Nil Significant



Past medical history

- Do you have any allergies? - No
- Do you have any drug allergies? - No
- Covid 19 - Yes
- Hospitalization for Covid 19 - No



Surgical history

- Surgical history - Nil



Personal history

- Ethnicity - Indian Asian
- Marital status - Married
- No. of children - 2
- Female - 1
- Male - 1
- Diet - Vegetarian
- Alcohol - does not consume alcohol
- Smoking - No
- Chews tobacco - No
- Physical activity - Moderate



Family history

- Father - alive
- Aged - 62
- Mother - alive
- Aged - 60
- Brothers - 1



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Sisters - 3
Diabetes - mother
Coronary artery disease - none
Cancer - None

Physical Examination



General

General appearance - normal
Build - normal
Height - 146
Weight - 55.4
BMI - 25.99
Pallor - No
Oedema - no



Cardiovascular system

Heart rate (Per minute) - 77
Rhythm - Regular
- B.P. Supine
Systolic(mm of Hg) - 138
Diastolic(mm of Hg) - 86
Heart sounds - S1S2+

Respiratory system

Breath sounds - Normal vesicular breath sounds



Abdomen

Organomegaly - No
Tenderness - No

Printed By : MUKTA S ADALTI



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URINE FOR ROUTINE EXAMINATION

Urinalysis, is the physical, chemical and microscopic examination of the urine and is one of the most common methods of medical diagnosis. It is used to detect markers of diabetes, kidney disease, infection etc.

| Test Name | Result | Unit | Level | Range |
|------------------|-------------|---------|-------|---------|
| Volume | 20 | mL | | |
| Specific Gravity | 1.010 | | | |
| Colour: | Pale-Yellow | | | |
| Transparency: | Clear | | | |
| pH | 5.5 | | | |
| Protein : | Nil | | | |
| Sugar: | Nil | | | |
| Blood: | Negative | | | |
| Ketone | Absent | | | |
| Bile Pigments: | Negative | | | |
| Urobilinogen | Nil | E.U./dL | | |
| Nitrite | Negative | | | |
| Pus Cells | 1-2 /h.p.f | | | 0-5 |
| RBC | Occasional | /hpf | | 0-5/hpf |
| Epithelial Cells | Occasional | | | |
| Casts: | Absent | | | |
| Crystals: | Absent | | | |

COMPLETE BLOOD COUNT WITH ESR

| Test Name | Result | Unit | Level | Range |
|--------------------------------------|---------|------------|-------|------------|
| Hemoglobin (Photometric Measurement) | 9.4 * | gm% | ● | 12-16 |
| Packed cell volume(Calculated) | 30.6 * | % | ● | 36-46 |
| RBC COUNT (Impedance) | 4.53 | Million/ul | ● | 3.8-5.2 |
| MCV (From RBC Histogram) | 67.5 * | fl | ● | 80-100 |
| MCH(Calculated) | 20.71 * | pg | ● | 27-32 |
| MCHC(Calculated) | 30.7 * | % | ● | 31-36 |
| RDW(Calculated) | 14.7 * | % | ● | 11.5-14.5 |
| WBC Count (Impedance) | 6558 | /cu mm | ● | 4000-11000 |

● Within Normal Range ● Borderline High/Low ● Out of Range





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| | | | | |
|--|---|-----------|---|---------------|
| Neutrophils | 52 | % | ● | 40-75 |
| Lymphocytes | 37 | % | ● | 20-40 |
| Monocytes | 7 | % | ● | 2-10 |
| Eosinophils | 4 | % | ● | 01-06 |
| Basophils | 0 | % | ● | 0-1 |
| Platelet Count (Impedance) | 276900 | /cu mm | ● | 150000-450000 |
| MPV (Calculated) | 8.3 | fl | ● | 7-11 |
| RBC: | Hypochromic Microcytic RBCs~Anemia | | | |
| RBC:: | Anisocytosis (+) | | | |
| WBC: | Few hypersegmented neutrophils are seen. | | | |
| Platelets: | Adequate on the smear | | | |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic) | 11 | mm/1st hr | ● | 0-20 |
| SUGGEST : | S. Iron Profile is indicated.-S. Vitamin B12 assay is indicated | | | |

URINE GLUCOSE(FASTING)

| Test Name | Result | Unit | Level | Range |
|-------------------------------|--------|------|-------|-------|
| Urine Glucose (Post Prandial) | Nil | | | |

URINE GLUCOSE(POST PRANDIAL)

| Test Name | Result | Unit | Level | Range |
|-------------------------------|--------|------|-------|-------|
| Urine Glucose (Post Prandial) | Nil | | | |

BLOOD GROUPING AND TYPING (ABO and Rh)

| Test Name | Result | Unit | Level | Range |
|--------------|------------|------|-------|-------|
| BLOOD GROUP: | A Positive | | | |

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

| Test Name | Result | Unit | Level | Range |
|----------------------------|--------|------|-------|-------|
| ALT(SGPT) - SERUM / PLASMA | 13 | U/L | ● | 0-35 |

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| Test Name | Result | Unit | Level | Range |
|-------------------------------------|--------|-------|-------|--|
| ALKALINE PHOSPHATASE - SERUM/PLASMA | 56 | U/L | ● | Adult(Female): 35 - 104 |
| AST (SGOT) - SERUM | 18 | U/L | ● | >1 year Female : <32 |
| Total Bilirubin | 0.28 * | mg/dL | ● | 0.300-1.200 |
| Direct Bilirubin | 0.115 | mg/dL | ● | Upto 0.3 mg/dl |
| Indirect Bilirubin | 0.165 | mg/dL | ● | 1 Day ≤5.1 mg/dL 2 Days ≤7.2 mg/dL 3-5 Days ≤10.3 mg/dL 6-7 Days ≤8.4 mg/dL 8-9 Days ≤6.5 mg/dL 10-11 Days ≤4.6 mg/dL 12-13 Days ≤2.7 mg/dL 14 Days - 9 Years 0.2-0.8 mg/dL 10-19 Years 0.2-1.1 mg/dL ≥20 Years 0.2-1.2 mg/dL |

CREATININE - SERUM / PLASMA

| Test Name | Result | Unit | Level | Range |
|-----------------------------|--------|-------|-------|-------------------------|
| CREATININE - SERUM / PLASMA | 0.56 | mg/dL | ● | Adult Female: 0.5 - 1.2 |

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| Test Name | Result | Unit | Level | Range |
|---|--------|------|-------|-----------------------------------|
| GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM | 18 | U/L | ● | Male : 10 - 71 Female : 6 - 42 |

GLUCOSE - SERUM / PLASMA (FASTING)

| Test Name | Result | Unit | Level | Range |
|----------------------------|--------|-------|-------|---|
| Glucose - Plasma (Fasting) | 89 | mg/dL | ● | 70 - 100 : Normal 100 - 125 : Impaired Glucose Tolerance >= 126 : Diabetes Mellitus |

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

| Test Name | Result | Unit | Level | Range |
|----------------------------------|--------|-------|-------|--------|
| Glucose - Plasma (Post Prandial) | 101 | mg/dL | ● | 70-140 |

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

| Test Name | Result | Unit | Level | Range |
|-----------|--------|------|-------|-------|
|-----------|--------|------|-------|-------|

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Glycosylated Hemoglobin (HbA1c) 5.9 * % ● Normal < 5.7
 %Increased risk for Diabetes 5.7 - 6.4%
 Diabetes >= 6.5%
 Monitoring criteria for Diabetes Mellitus
 <7.0 : Well Controlled Diabetes
 7.1 – 8.0 : Unsatisfactory Control
 > 8.0 : Poor Control & Needs Immediate Treatment

Estimated Average Glucose. 122.63

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Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

| Test Name | Result | Unit | Level | Range |
|--------------------------------|--------|------|-------|------------------------------|
| PROTEIN TOTAL - SERUM / PLASMA | 7.09 | g/dL | ● | 6.00-8.00 |
| PROTEIN TOTAL - SERUM / PLASMA | 7.09 | g/dL | ● | 6.00-8.00 |
| ALBUMIN - SERUM | 4.36 | g/dL | ● | Adult(18 - 60 Yr): 3.5 - 5.2 |
| ALBUMIN - SERUM | 4.36 | g/dL | ● | Adult(18 - 60 Yr): 3.5 - 5.2 |
| Globulin-Serum/Plasma | 2.73 | | ● | 2.20-4.20 |
| Globulin-Serum/Plasma | 2.73 | | ● | 2.20-4.20 |
| A/G ratio | 1.6 | | ● | 1.00-2.00 |
| A/G ratio | 1.6 | | ● | 1.00-2.00 |

THYROID PROFILE (T3,T4 AND TSH)

| Test Name | Result | Unit | Level | Range |
|--|--------|--------|-------|--|
| TOTAL T3: TRI IODOTHYRONINE - SERUM | 1.9 | nmol/L | ● | Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female : First Trimester : 1.61 - 3.53 Second Trimester : 1.98 - 4.02 Third Trimester : 2.07 - 4.02 |
| TOTAL T4: THYROXINE - SERUM | 94 | nmol/L | ● | Adults(20-100 Yrs):66 - 181 Pregnant Female : First Trimester : 94.3 - 190 Second Trimester : 102 - 207 Third Trimester : 89 - 202 |
| TSH: THYROID STIMULATING HORMONE - SERUM | 3.27 | µIU/mL | ● | 14-120 years : 0.27 - 4.20 |

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URIC ACID - SERUM

Uric acid is a product of the metabolic breakdown of purine. High blood concentrations of uric acid can lead to gout. It is also associated with other medical conditions including diabetes and the formation of kidney stones.

| Test Name | Result | Unit | Level | Range |
|-------------------|--------|-------|-------|------------------------------------|
| URIC ACID - SERUM | 4.2 | mg/dL | ● | Male : 3.4-7.0 Female : 2.4-5.7 |

BUN (BLOOD UREA NITROGEN)

| Test Name | Result | Unit | Level | Range |
|---------------------------|--------|-------|-------|---------|
| BUN (BLOOD UREA NITROGEN) | 9 | mg/dL | ● | 6-20 |
| UREA - SERUM / PLASMA | 19 | mg/dL | ● | 15 - 50 |

LIPID PROFILE - SERUM

| Test Name | Result | Unit | Level | Range |
|--|--------|-------|-------|---|
| Total Cholesterol | 132 | mg/dl | ● | 0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High |
| Triglycerides - Serum | 117 | mg/dL | ● | 0-150 |
| HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric) | 35 * | mg/dL | ● | < 40 : Major risk factor for heart disease 40 - 59 : The higher The better. ≥60 : Considered protective against heart disease |
| LDL Cholesterol (Direct LDL) | 88 | mg/dL | ● | 100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High ≥190 : Very High |
| VLDL CHOLESTEROL | 23 | | ● | < 40 mg/dl |
| C/H RATIO | 4 | | ● | 0-4.5 |

X-RAY CHEST PA

X-ray imaging creates pictures of the inside of your body. Chest X-ray can reveal abnormalities in the lungs, the heart, and bones that sometimes cannot be detected by examination.

NORMAL STUDY.

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MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

AHC No : AHILAH174586

ECHO/TMT

Investigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

Histopathology

CONVENTIONAL PAP SMEAR /CERVICAL SMEAR

CARDIOLOGY

ECG



Within Normal Range



Borderline High/Low



Out of Range



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MEDIWHEEL-FULL BODY CHK-BELOW40-FEMALE

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Executive Summary



- .BODY WEIGHT 55.4 KG,DEAL BODY WEIGHT 40-49 KG
- .ANEMIA
- .PRE -DIABETIC
- .H/O THYROID
- .ECG - NORMAL SINUS RHYTHM
- .ECHO - Normal LV systolic function, LVEF: 60%
- MILD MR , NO PAH
- .USG ABDOMEN - NORMAL STUDY
- .CHEST X-RAY - NORMAL
- .EYE - NORMAL

Wellness Prescription

Advice On Diet :-



- BALANCED DIET---
- LOW FAT DIET
- LOW CARBOHYDRATE DIET

Advice On Physical Activity :-



- REGULAR WALK FOR 30 MINS FOR HEALTH,
- 60 MINS WALK FOR WEIGHT REDUCTION
- PRACTICE YOGA AND MEDITATION
- MAINTAIN WEIGHT BETWEEN 40-49 KG

Follow-up and Review Plan



- FBS and PPBS ONCE IN 30 DAYS
- HBA1C (GLYCOSYLATED HAEMOGLOBIN) NOW AND ONCE IN 3 MONTHS
- S. IRON, TIBC, S. FERRITIN, RETICULOCYTE COUNT, STOOL OCCULT BLOOD,
- S. FOLATE, S. VITAMIN B12, HB ELECTROPHORESIS and REVIEW.
- REPEAT COMPLETE E HAEMOGRAM AFTER 1 MONTH and REVIEW
- CHECK T3,T4,TSH REGULARLY EVERY 6 MONTHS



Scan the QR code
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to book your
follow-up
appointments and
investigations

Printed By : MUKTA S ADALTI

Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

Dr. Shashikant Nigam

MBBS, MD (Gen. Med.)

Consultant Internal Medicine

Apollo Hospitals International Ltd. Gandhinagar,
Gujarat-382426, INDIA. Regd. No. : G-21961



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Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.



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CARDIOLOGY

Patient Details : Ms. RASHMI RATHOD | Female | 38Yr 11Mth 10Days
UHID : AHIL.0000815586 **Patient Location:** AHC
Patient Identifier: AHILAH174586 
DRN : 5622083534 **Completed on :** 12-NOV-2022 13:55
Ref Doctor : DR. SHASHIKANT NIGAM

ECHO/TMT

FINDINGS :

Normal cardiac chamber dimensions.
 Normal LV systolic function, LVEF: 60%
 No Regional wall motion abnormalities at rest.
 Normal LV compliance.
 All cardiac valves are structurally normal.
 IAS/ IVS intact.
 Mild MR; No AR, Trivial TR.
 No PAH.
 No clots/ vegetation/ effusion.

MEASUREMENTS (mm) ::

| | |
|-------------------|---------------|
| | LVID diastole |
| Measurements (mm) | |

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ECHO/TMT

IMPRESSION

— END OF THE REPORT —

DR SUBIR GHOSH MD.DM

Interventional Cardiologist

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Radiology

Patient Details : Ms. RASHMI RATHOD | Female | 38Yr 11Mth 10Days
UHID : AHIL.0000815586 **Patient Location:** AHC
Patient Identifier: AHILAH174586 
DRN : 222058416 **Completed on :** 12-NOV-2022 11:54
Ref Doctor : DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

FINDINGS :

Liver appears normal in size and shows uniform normal echotexture. No evidence of focal or diffuse pathology seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein is normal in calibre. Intrahepatic portal radicles appear normal.

Gall bladder appears normal with no evidence of calculus. Wall thickness appears normal. No evidence of pericholecystic collection.

Head, body and tail of pancreas appear normal in size and echotexture. No focal lesions identified Pancreatic duct appears normal in caliber.

Spleen measures 11 cms and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. No evidence of calculi. Pelvicalyceal system on both sides appear normal.

No evidence of ascites or lymphadenopathy.

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Uterus measures 6.5 x 3.4 x 4.8 cm. Endometrial thickness is 10 mm. Uterus is anteverted and appears normal in size and echotexture. No focal lesion is seen. Myometrial and endometrial echopattern appear normal.

No free fluid is seen in Pouch Of Douglas.

No definite evidence of adnexal/pelvic mass is seen.

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Plot No.-1A, Bhat, GIDC, Gandhinagar, Gujarat - 382425, India.
Phone : +91 79 66701800 | Fax No. : +91 79 66701643
E-mail : info@apolloahd.com | www.ahmedabad.apollohospitals.com

Apollo Hospitals - City Centre (NON NABH-IC)
1, Tulsibaug Society, Nr. Parimal Garden, Ahmedabad.
Phone : +91 79 66305800 / 01 or +91 76988 15148
E-mail : infoahcc@apolloahd.com

Regd. Office
19, Bishop Gardens, R.A. Puram, Chennai - 600 028
CIN No. : U051101N1997PL00330016 | GSTIN : 24AAHCA4150H225
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Ms. RASHMI RATHOD

AHIL.0000815586

AHILAH174586

USG WHOLE ABDOMEN

--- END OF THE REPORT ---

Dr. HARSH S VYAS

DNB Resident

Printed on : 12-Nov-2022 15:23

Printed By : 153182

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Page 2 of 2

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880

Apollo Hospitals International Limited
Plot No.-1A, Bhat, GIDC, Gandhinagar, Gujarat - 382428, India.
Phone : +91 79 66701800 | Fax No. : +91 79 66701843
E-mail : info@apolloahd.com | www.ahmedabad.apollohospitals.com

Apollo Hospitals - City Centre (NON NABH-JCI)
1, TulsiBaag Society, Nr. Parimal Garden, Ahmedabad.
Phone : +91 79 66305800 / 01 or +91 76388 15148
E-mail : infoahcc@apolloahd.com

Regd. Office
19, Bishop Gardens, R.A. Puram, Chennai - 600 028
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DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Patient Details : Ms. RASHMI RATHOD | Female | 38Yr 11Mth 10Days
UHID : AHIL.0000815586 **Patient Location:** AHC
Patient Identifier: AHILAH174586 
DRN : 122127986 **Completed on :** 12-NOV-2022 11:35
Ref Doctor : DR. SHASHIKANT NIGAM

X-RAY CHEST PA

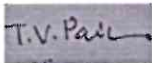
FINDINGS :

Lung fields are clear.
 Cardio thoracic ratio is normal.
 Both costophrenic angles are clear.
 Domes of diaphragm are well delineated.
 Bony thorax shows no significant abnormality.

IMPRESSION

NORMAL STUDY.

--- END OF THE REPORT ---



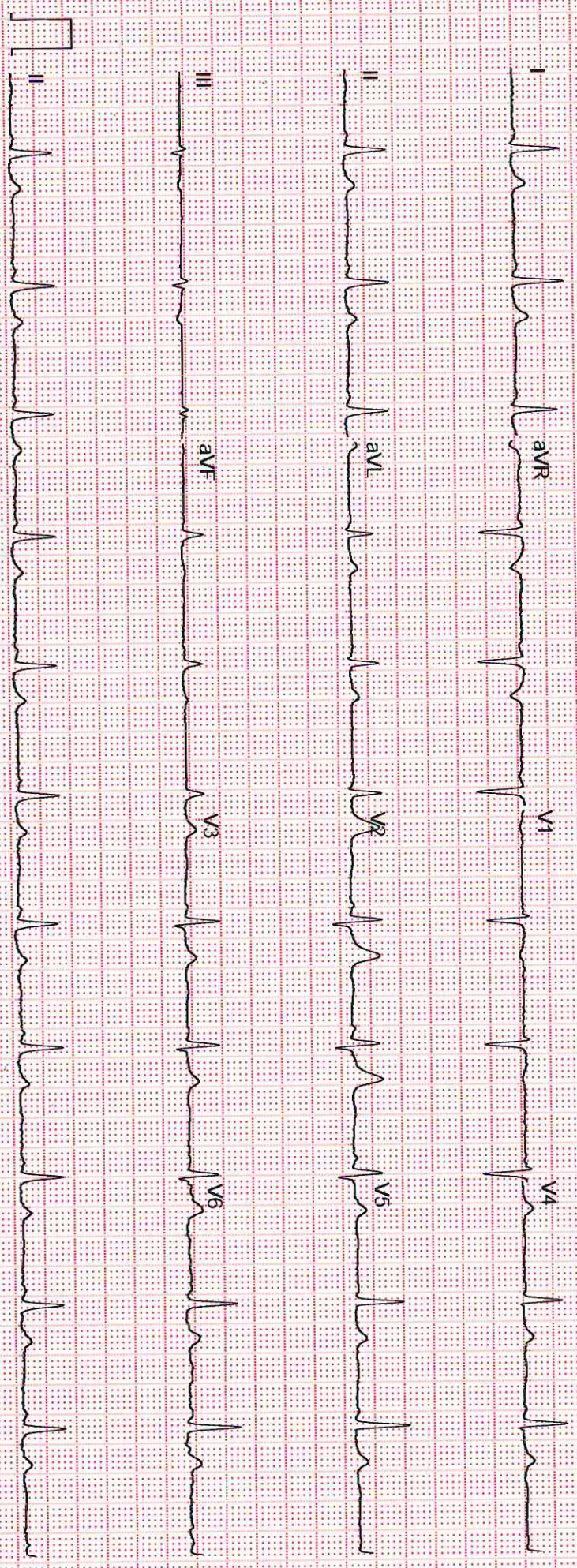
TIRTH VINAYKUMAR PARIKH

38 Years Female Gardinegar

Order Number: Indication: Medication 1 Medication 2 Medication 3

Technician: Ordering Ph: Referring Ph: Attending Ph:

QRS 76 ms
QT/QTcBaz 348 / 375 ms
PR 100 ms
P 78 ms
RR/PP 860 / 857 ms
P/ORS/T 26 / 23 / 3 degrees
Sinus rhythm with short PR
Otherwise normal ECG



GE MAC2000 1:1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50-Hz

4x2.5x3 25_R1

Unconfirmed



Place Label Here

If label not available, write Pt, Name, IP No/UHID, Age, Sex, Date, Name of Treating Physician

OBSTETRICS & GYNAECOLOGY - AHC

| | | | |
|--------------------|---------------------|----------------------------------|------------------|
| Name : | AHIL.0000815586 | Date : 12/11/2022 | Unit No. : |
| Occupation : | Ms. RASHMI RATHOD | Ref. Physician : Dr. Jyoti Nahar | |
| Age : | 38 Year(s) / Female | Copies to : | |



GYNAEC CHECK UP

Chief Complaint:

NO G2P2A0L2

Children:

2 - 1 ♂ 1 ♀

Weight:

Deliveries: FTND

BP:

Last Child:

Mch / 6 years / FTND

Abortions:

None

Breasts:

Normal

Periods:

Regular $\frac{5}{28-30}$ days

PAP Smear:

Taken

LMP:

5/11/2022

Previous Medical H/O:

Hypothyroid - 100mcg thyroxin taken.

Menopause: -

G. Condition: Fit

Previous Surgical H/O:

None.

P/A:

Soft

S/E: ✓

P/V: -

P/R: -

Impression:

Jyoti

Doctor Signature
Date & Time



AHIL.0000815586

Ms. RASHMI RATHOD

38 Year(s) / Female

OPHTH

VISION RECORDS



Date :

12/11/22

Name :

UHID :

Distance Vision :

Right Eye -

Left Eye -

6/6
6/6

Near Vision :

Right Eye :

Left Eye :

N6
N6

APLN.TN - Right Eye

12

Left Eye -

14 mmHg

Both Eye - Colour Vision

Normal

Both Eye - Anterior Segment Examinations -

WNL

Both Eye Posterior Segment Examinations -

WNL

Dr. Jagriti Sinha
M.D. (Ophthalmology)
Jr. Consultant
Apollo Hospitals International Ltd., Gandhinagar,
Gujarat-382428, INDIA, Regd. No.: G-66792

Doctor's Signature

Ophthalmologist Name