



LABORATORY REPORT

Name : Mrs. Vibha Pandey	Reg. No : 312100424
Sex/Age : Female/38 Years	Reg. Date : 09-Dec-2023 10:07 AM
Ref. By :	Collected On :
Client Name : Mediwheel	Report Date : 09-Dec-2023 03:22 PM

Medical Summary

GENERAL EXAMINATION

Height (cms) :158

Weight (kgs) :67.9

Blood Pressure : 110/70mmHg

Pulse : 61/Min

No Clubbing/Cynosis/Pallor/PedelOedem

Systemic Examination:

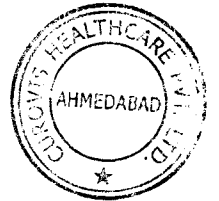
Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

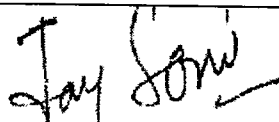
Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार
Unique Identification Authority of India

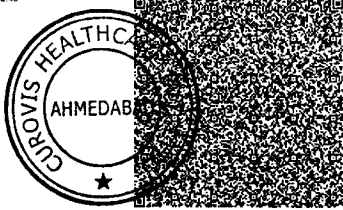
भारतीय विशिष्ट पहचान प्राधिकरण

नामांकन क्रम/ Enrolment No.: 0651/50175/02183

To
विभा पाण्डेय
Vibha Pandey
W/O: Abhishek Pandey
2, sarswati nagar
university road
thatipur gwalior
Gwalior
R.k Puri Gwalior
Gwalior Madhya Pradesh - 474011
9131050041

Download Date: 18/08/2019
Generation Date: 30/06/2013

Signature Not Verified
Digitally signed by AS
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA DA
Date: 2019.08.18 19:03:48
IST



QR Code with Photograph

आपका आधार क्रमांक / Your Aadhaar No. :

3049 2315 1859

VID : 9106 1860 8829 3909

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



विभा पाण्डेय
Vibha Pandey
जन्म तिथि/DOB: 21/05/1985
महिला/ FEMALE

3049 2315 1859

VID : 9106 1860 8829 3909

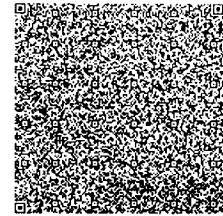
मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
W/O: अभिशेक पाण्डेय, 2, सरस्वती नगर, यूनिवर्सिटी
रोड, ठाटीपुर ग्वालियर, ग्वालियर, ग्वालियर,
मध्य प्रदेश - 474011

Address:
W/O: Abhishek Pandey, 2, sarswati
nagar, university road, thatipur gwalior,
Gwalior, Gwalior,
Madhya Pradesh - 474011



QR Code with Photograph

3049 2315 1859

VID : 9106 1860 8829 3909

www.uidai.gov.in

www.uidai.gov.in

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं |
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें |
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है |

INFORMATION

- **Aadhaar** is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

- आधार देश भर में मान्य है ।
- आधार भविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा ।
- Aadhaar is valid throughout the country .
- Aadhaar will be helpful in availing Government and Non-Government services in future .

Dr. Jay Soni
M.D. (General Medicine)
Reg. No.: G-23899

Handwritten signature and ID numbers:
9131050041
9009666705



MC-3466



TEST REPORT

Reg. No : 312100424	Ref Id :	Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey		Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female	Pass. No. :	Tele No. : 9131050041
Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Results	Unit	Biological Ref. Interval
-----------	---------	------	--------------------------

COMPLETE BLOOD COUNT (CBC)

Hemoglobin (Colorimetric method)	13.6	g/dL	12.5 - 16
Hematocrit (Calculated)	L 39.50	%	40 - 50
RBC Count (Electrical Impedance)	4.76	million/cmm	4.73 - 5.5
MCV (Calculated)	L 82.8	fL	83 - 101
MCH (Calculated)	28.5	Pg	27 - 32
MCHC (Calculated)	34.4	%	31.5 - 34.5
RDW (Calculated)	L 11.0	%	11.5 - 14.5
WBC Count Flowcytometry with manual Microscopy	5390	/cmm	4000 - 10000
MPV (Calculated)	9.9	fL	6.5 - 12.0

<u>DIFFERENTIAL WBC COUNT</u>	[%]		EXPECTED VALUES	[Abs]	EXPECTED VALUES
Neutrophils (%)	55	%	40 - 80	2965 /cmm	2000 - 7000
Lymphocytes (%)	34	%	20 - 40	1833 /cmm	1000 - 3000
Eosinophils (%)	03	%	0 - 6	431 /cmm	200 - 1000
Monocytes (%)	08	%	2 - 10	162 /cmm	20 - 500
Basophils (%)	0.0	%	0 - 2	0 /cmm	0 - 100

PERIPHERAL SMEAR STUDY


RBC Morphology Normocytic and Normochromic.
WBC Morphology Normal

PLATELET COUNTS

Platelet Count (Electrical Impedance) 390000 /cmm 150000 - 450000
Electrical Impedance
Platelets Platelets are adequate with normal morphology.
Parasites Malarial parasite is not detected.
Comment -

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 11:03 AM
Page 1 of 10



TEST REPORT

Reg. No : 312100424 Ref Id : Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female Pass. No. : Tele No. : 9131050041
Ref. By : Dispatch At :
Sample Type : EDTA Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

HEMATOLOGY

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO	"O"
Rh (D)	Positive
Note	-

ERYTHROCYTE SEDIMENTATION RATE [ESR]

ESR 1 hour 07 mm/hr ESR AT 1 hour : 3-12
Westergreen method

ERYTHRO SEDIMENTATION RATE, BLOOD -
Erythrocyte sedimentation rate (ESR) is a non - specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (o-1mm) in polycythaemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

This is an electronically authenticated report.
* This test has been out sourced.

Approved By : *Deep* **Dr. Deep Patel**
MD (Pathology)
Approved On : 09-Dec-2023 02:37 PM
Page 2 of 10




TEST REPORT

Reg. No : 312100424 Ref Id : Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female Pass. No. : Tele No. : 9131050041
Ref. By : Dispatch At :
Sample Type : Serum,Flouride PP Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
BIO - CHEMISTRY			
Fasting Blood Sugar (FBS) <i>GOD-POD Method</i>	89.90	mg/dL	70 - 110
Post Prandial Blood Sugar (PPBS) <i>GOD-POD Method</i>	121.2	mg/dL	70 - 140

This is an electronically authenticated report.
* This test has been out sourced.


Approved By : Dr. Deep Patel
MD (Pathology)
Approved On : 09-Dec-2023 03:34 PM
Page 3 of 10



TEST REPORT

Reg. No : 312100424	Ref Id :	Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey		Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female	Pass. No. :	Tele No. : 9131050041
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL


Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

Lipid Profile

Cholesterol	138.00	mg/dL	Desirable: <200.0 Borderline High: 200-239 High: >240.0
<i>Enzymatic, colorimetric method</i>			
Triglyceride	59.00	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499 Very High : > 500.0
<i>Enzymatic, colorimetric method</i>			
HDL Cholesterol	35.40	mg/dL	Low: <40 High: >60
<i>Accelerator selective detergent method</i>			
LDL	90.80	mg/dL	Optimal: <100.0 Near Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >190.0
<i>Calculated</i>			
VLDL	11.80	mg/dL	15 - 35
<i>Calculated</i>			
LDL / HDL RATIO	2.56		0 - 3.5
<i>Calculated</i>			
Cholesterol /HDL Ratio	3.90		0 - 5.0
<i>Calculated</i>			

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 01:36 PM
Page 4 of 10



TEST REPORT

Reg. No : 312100424	Ref Id :	Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey		Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female	Pass. No. :	Tele No. : 9131050041
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL


Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

LFT WITH GGT

Total Protein	7.11	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year : 6.0-8.0 Adults : 6.6-8.7
<i>Biuret Reaction</i>			
Albumin	5.00	g/dL	0 - 4 days: 2.8 - 4.4 4 days - 14 yrs: 3.8 - 5.4 14 - 19 yrs: 3.2 - 4.5 20 - 60 yrs : 3.5 - 5.2 60 - 90 yrs : 3.2 - 4.6 > 90 yrs: 2.9 - 4.5
<i>By Bromocresol Green</i>			
Globulin (Calculated)	2.11	g/dL	2.3 - 3.5
A/G Ratio (Calculated)	2.37		0.8 - 2.0
SGOT	14.50	U/L	0 - 40
<i>UV without P5P</i>			
SGPT	9.00	U/L	0 - 40
<i>UV without P5P</i>			
Alakaline Phosphatase	80.3	IU/l	42 - 98
<i>P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate</i>			
Total Bilirubin	0.45	mg/dL	0.3 - 1.2
<i>Vanadate Oxidation</i>			
Direct Bilirubin	0.11	mg/dL	0.0 - 0.4
<i>Vanadate Oxidation</i>			
Indirect Bilirubin	0.34	mg/dL	0.0 - 1.1
<i>Calculated</i>			
GGT	12.00	U/L	< 38
<i>SZASZ Method</i>			

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 01:36 PM
Page 5 of 10



TEST REPORT


Reg. No	: 312100424	Ref Id	:	Collected On	: 09-Dec-2023 10:07 AM
Name	: Mrs. Vibha Pandey			Reg. Date	: 09-Dec-2023 10:07 AM
Age/Sex	: 38 Years / Female	Pass. No.	:	Tele No.	: 9131050041
Ref. By	:			Dispatch At	:
Sample Type	: Serum			Location	: CHPL

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

BIO - CHEMISTRY

Uric Acid <i>Enzymatic, colorimetric method</i>	4.45	mg/dL	2.6 - 6.0
Creatinine <i>Enzymatic Method</i>	0.58	mg/dL	0.6 - 1.1
BUN <i>UV Method</i>	5.60	mg/dL	6.0 - 20.0

This is an electronically authenticated report.
* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 01:36 PM
Page 6 of 10



TEST REPORT

Reg. No : 312100424	Ref Id :	Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey		Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female	Pass. No. :	Tele No. : 9131050041
Ref. By :		Dispatch At :
Sample Type : EDTA		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

HEMOGLOBIN A1 C ESTIMATION
Specimen: Blood EDTA

*Hb A1C	5.4	% of Total Hb	Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : 6.5 % or higher
---------	-----	---------------	--

Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose	108.28	mg/dL
--------------------	--------	-------

Calculated

Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.


*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 07:37 PM
Page 7 of 10



TEST REPORT

Reg. No : 312100424	Ref Id :	Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey		Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female	Pass. No. :	Tele No. : 9131050041
Ref. By :		Dispatch At :
Sample Type : Urine Spot		Location : CHPL

Test	Result	Unit	Biological Ref. Interval
------	--------	------	--------------------------

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity	30 cc	
Colour	Pale Yellow	
Clarity	Clear	Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)


pH	6.0	4.6 - 8.0
Sp. Gravity	1.025	1.001 - 1.035
Protein	Nil	Nil
Glucose	Nil	Nil
Ketone Bodies	Present (++)	Nil
Urobilinogen	Nil	Nil
Bilirubin	Nil	
Nitrite	Nil	Nil
Blood	Nil	Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	Nil	Nil
Erythrocytes (Red Cells)	Nil	Nil
Epithelial Cells	2 - 3/hpf	Nil
Crystals	Absent	Absent
Casts	Absent	Absent
Amorphous Material	Absent	Absent
Bacteria	Absent	Absent
Remarks	-	

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 12:34 PM
Page 8 of 10



TEST REPORT

Reg. No : 312100424 Ref Id : Collected On : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey Reg. Date : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female Pass. No. : Tele No. : 9131050041
Ref. By : Dispatch At :
Sample Type : Serum Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

IMMUNOLOGY

THYROID FUNCTION TEST

T3 (Triiodothyronine) <i>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</i>	1.44	ng/mL	0.86 - 1.92
---	------	-------	-------------

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine) <i>CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY</i>	10.80	µg/dL	3.2 - 12.6
---	-------	-------	------------

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).


In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding sites.
2. F T4 values may be decreased in patients taking carbamazepine.
3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 04:18 PM
Page 9 of 10



TEST REPORT

Reg. No : 312100424 **Ref Id** : **Collected On** : 09-Dec-2023 10:07 AM
Name : Mrs. Vibha Pandey **Reg. Date** : 09-Dec-2023 10:07 AM
Age/Sex : 38 Years / Female **Pass. No.** : **Tele No.** : 9131050041
Ref. By : **Dispatch At** :
Sample Type : Serum **Location** : CHPL

TSH 0.700 $\mu\text{IU/ml}$ 0.35 - 5.50
CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

First Trimester : 0.1 to 2.5 $\mu\text{IU/mL}$

Second Trimester : 0.2 to 3.0 $\mu\text{IU/mL}$


Third trimester : 0.3 to 3.0 $\mu\text{IU/mL}$

Referance : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Saunders,2012:2170

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

This is an electronically authenticated report.

* This test has been out sourced.


Approved By : Dr. Deep Patel
MD (Pathology)

Approved On : 09-Dec-2023 04:18 PM
Page 10 of 1



LABORATORY REPORT

Name : Mrs. Vibha Pandey	Reg. No : 312100424
Sex/Age : Female/38 Years	Reg. Date : 09-Dec-2023 10:07 AM
Ref. By :	Collected On :
Client Name : Mediwheel	Report Date : 09-Dec-2023 02:41 PM

Electrocardiogram

Findings

Normal Sinus Rhythm.

Within Normal Limit.

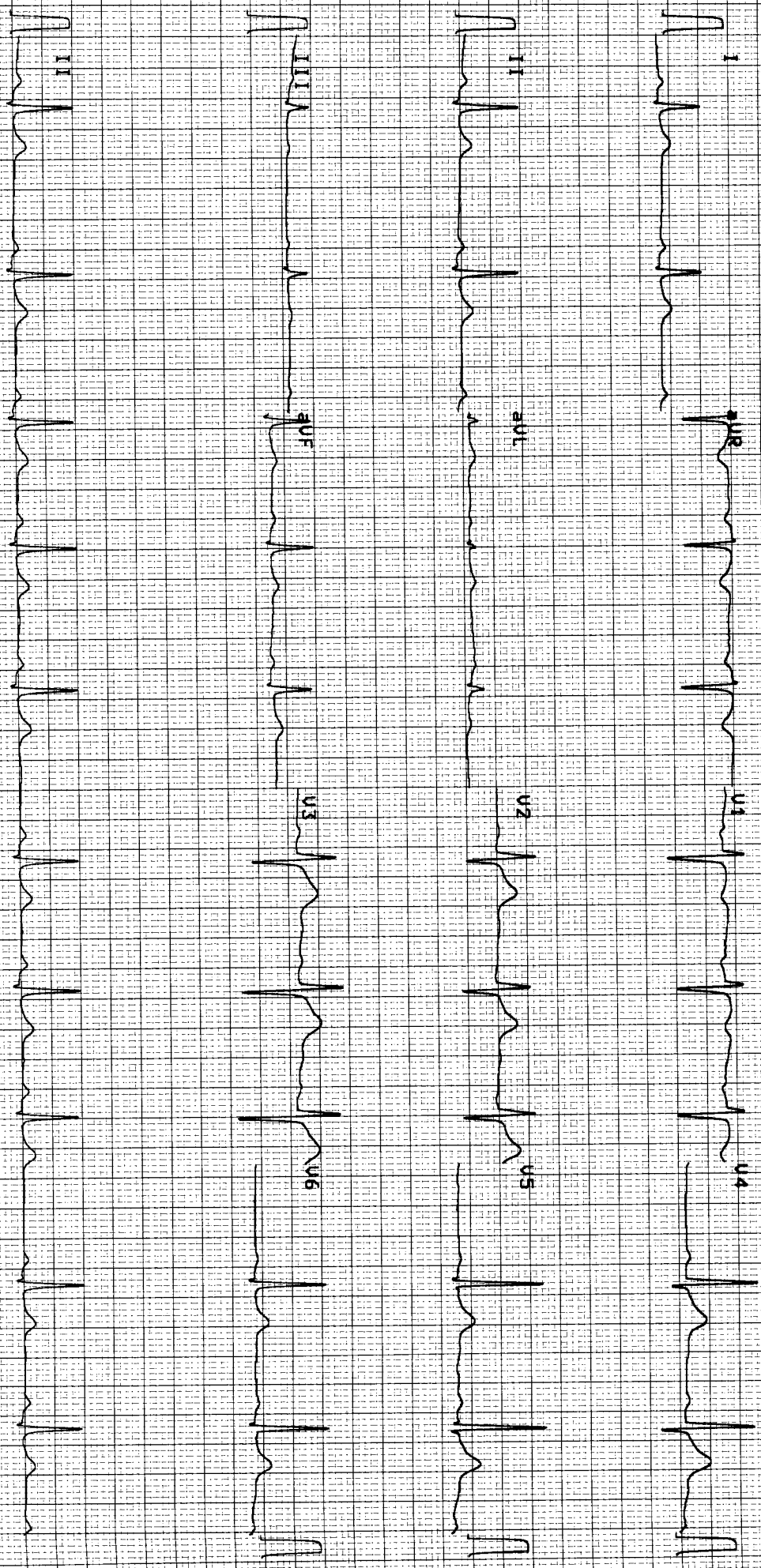


This is an electronically authenticated report

Dr. Jay Soni
M.D, GENERAL MEDICINE

VIBHR
 PRINDEV
 32
 38 years
 158 cm / 68 kg
 Female

HR 61/min
 Axis: P 37 °
 QRS 50 °
 T 34 °
 Intervals:
 RR 979 ms
 P 110 ms
 PR 186 ms
 QRS 80 ms
 QT 380 ms
 QTc 388 ms
 (Bazett's)
 P (II) 0.11 mV
 S (VI) -1.12 mV
 R (V5) 1.78 mV
 Sokol. 2.90 mV



10 mm/mV
 25 mm/s

SCHILLER
 0.05-25 Hz F50 55F 585 09.12.2023 12:25:10

CURIOUS HEALTHCARE
 Prindev

10 mm/mV



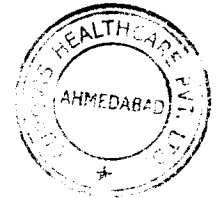
LABORATORY REPORT

Name : Mrs. Vibha Pandey	Reg. No : 312100424
Sex/Age : Female/38 Years	Reg. Date : 09-Dec-2023 10:07 AM
Ref. By :	Collected On :
Client Name : Mediwheel	Report Date : 09-Dec-2023 02:05 PM

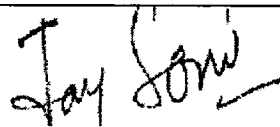
2D Echo Colour Doppler

1. No concentric LVH.
2. Normal sized LA, LV, RA, RV.
3. Normal LV systolic function, LVEF: 60%.
4. No RWMA.
5. Normal LV compliance.
6. All cardiac valves are structurally normal.
7. Trivial MR, Trivial TR, Trivial PR, No AR.
8. No PAH, RVSP: 34 mm Hg.
9. IAS/IVS: Intact.
10. No clot/vegetation/pericardial effusion.
11. No coarctation of aorta.

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



This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

Name: Vibha Pandey

M MODE FINDINGS:

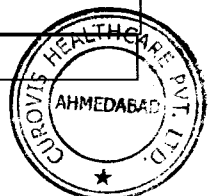
MITRAL VALVE	OBSERVED	NORMAL VALUES	LV FUNCTION
Anterior leaflet	Normal		LVA(d) :
EF Slope		70-150mm/sec	LVL (d) :
Opening Amplitude			LVA(s) :
Posterior leaflet	Normal		LVL(s) :
E.P.S.S.		mm	LVV(d) :
Mitral Valve Prolapse	No		LVV(s) :
Vegetation	No		LVEF : 60%
TRICUSPID VALVE		LV COMPLIANCE	
Normal		Normal	

PULMONARY VALVE	OBSERVED	NORMAL VALUES	MVO AREA
EF Slope		6-115 mm	By Planimetry :
A' Wave -			
Midsystolic notch -			By PHT :
Flutter -			
Other Findings			

DIMENSIONS:			AORTIC VALVE		
1. Lvd. (Diastole)	42 mm		Cuspal Opening	16mm	
2. Lvd. (Systole)	25 mm	24-42 mm	Closure line	Central	
3. RVID (Diastole)	13mm	7-23 mm	Eccentricity index	1	
4. IVS (Diastole)	10mm		Other findings	Absent	
5. IVS (Systole)	12mm				
6. LVPWT (Diastole)	10mm	6-11 mm			
7. LVPM (Systole)	11mm				
8. Aortic root	30 mm	22-37 mm			
9. Left Atrium:	36 mm	19-40 mm			
10. LVEF	60%				

COLOUR DOPPLER FINDINGS:

STRUCTURE	REGURG GRADING	VELOCITY1 m/sec Max/Mean	GRADIENT 5 Mm Hg Peak/Mean
MITRAL VALVE	Trivial	0.80	3.30
TRICUSPID VALVE	Trivial	0.60	1.40
PULMONARY VALVE	Trivial	0.85	2.25
AORTIC	No	1.20	6.0





LABORATORY REPORT

Name :	Mrs. Vibha Pandey	Reg. No :	312100424
Sex/Age :	Female/38 Years	Reg. Date :	09-Dec-2023 10:07 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	09-Dec-2023 02:46 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -1.25

CY: -0.50

AX: 45

LEFT EYE

SP : -1.25

CY : -0.75

AX :31

	Without Glasses	With Glasses
Right Eye	6/5	N.A
Left Eye	6/5	N.A

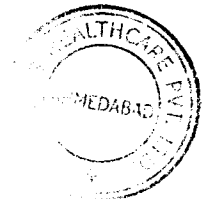
Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

ColorVision : Normal

Comments: Normal

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



This is an electronically authenticated report

Dr. Jay Soni
M.D, GENERAL MEDICINE

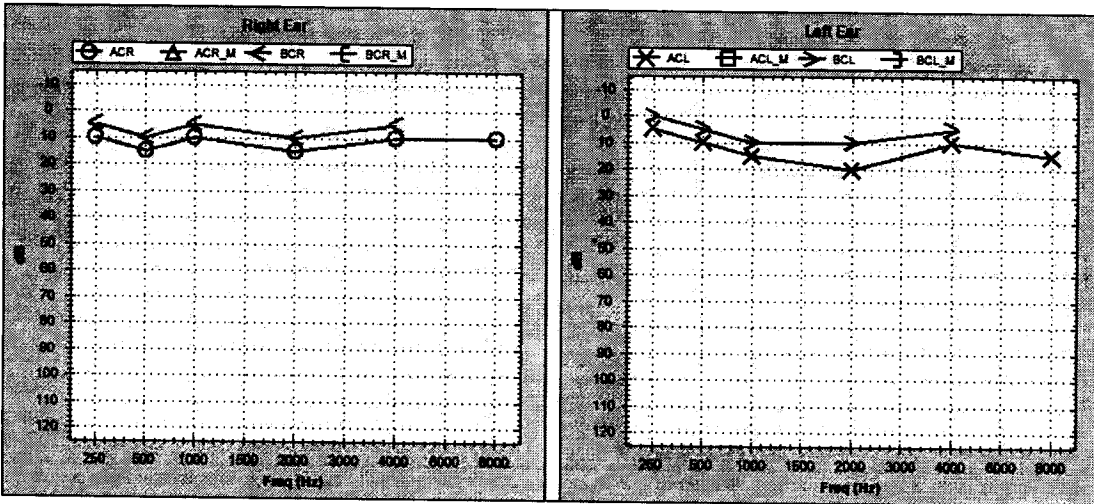


LABORATORY REPORT

Name : Mrs. Vibha Pandey
 Sex/Age : Female/38 Years
 Ref. By :
 Client Name : Mediwheel

Reg. No : 312100424
 Reg. Date : 09-Dec-2023 10:07 AM
 Collected On :
 Report Date : 09-Dec-2023 02:46 PM

AUDIOGRAM



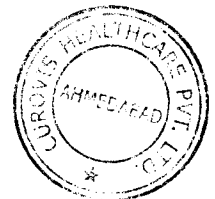
EAR	MODE	Air Conduction		Bone Conduction		Colour Code
		Masked	UnMasked	Masked	UnMasked	
LEFT		□	X	⌋	>	Blue
RIGHT		Δ	O	⌈	<	Red

NO RESPONSE: Add ↓ below the respective symbols

Threshold in dB	RIGHT	LEFT
AIR CONDUCTION	10.5	10.5
BONE CONDUCTION		
SPEECH		

Comments: -Bilateral Hearing Sensitivity Within Normal Limits

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



This is an electronically authenticated report

Dr. Jay Soni
 M.D., GENERAL MEDICINE



LABORATORY REPORT

Name : Mrs. Vibha Pandey
Sex/Age : Female/38 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 312100424
Reg. Date : 09-Dec-2023 10:07 AM
Collected On :
Report Date : 09-Dec-2023 06:00 PM

USG ABDOMEN

LIVER: Liver is normal in size and echotexture.

Intra-hepatic biliary radicals are not dilated.

No focal lesion is seen.

PORTAL VEIN is normal in course and caliber. **CBD** appears normal.

GALL BLADDER: Distended and normal. No e/o calculus or mass lesion.

PANCREAS: Pancreas is normal in size and echopattern.

SPLEEN: Spleen is normal in size & echopattern.

KIDNEYS:

Both kidneys are normal in size and echotexture.

Cortico-medullary differentiation of both kidneys is maintained.

No e/o calculus or hydronephrosis seen on either side.

URINARY BLADDER: appears minimally filled.

Uterus Appears grossly normal.

Bowel loops appear normal. No any inflammatory wall thickening or mass lesion is seen.

No lymphadenopathy seen.

No evidence of free fluid seen in abdomen.

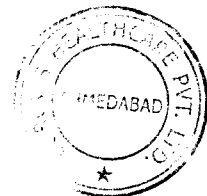
No evidence of collection or mass lesion seen in RIF.

IMPRESSION:

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





LABORATORY REPORT

Name : Mrs. Vibha Pandey

Sex/Age : Female/38 Years

Ref. By :

Client Name : Mediwheel

Reg. No : 312100424

Reg. Date : 09-Dec-2023 10:07 AM

Collected On :

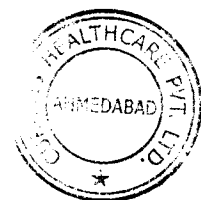
Report Date : 09-Dec-2023 06:00 PM

➤ **Normal USG abdomen Study.**
No abnormal bowel wall thickening or bowel loop dilatation.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494



Page 2 of 3



LABORATORY REPORT

Name : Mrs. Vibha Pandey	Reg. No : 312100424
Sex/Age : Female/38 Years	Reg. Date : 09-Dec-2023 10:07 AM
Ref. By :	Collected On :
Client Name : Mediwheel	Report Date : 09-Dec-2023 06:04 PM

X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

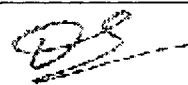
Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

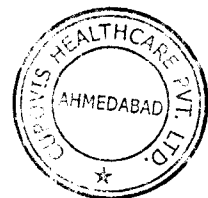
COMMENT: No significant abnormality is detected.

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

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





LABORATORY REPORT

Name :	Mrs. Vibha Pandey	Reg. No :	312100424
Sex/Age :	Female/38 Years	Reg. Date :	09-Dec-2023 10:07 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	11-Dec-2023 12:40 PM

BILATERAL MAMMOGRAM :-

(Dedicated digital mammography with Craniocaudal and media lateral oblique view was performed.)

- Normal fibroglandular breast parenchyma is noted in breast on either side.
- No evidence of clustered micro calcification.
- No evidence of mass or architectural distortion is seen.
- No evidence of skin thickening or nipple retraction is seen.
- No evidence of axillary lymphadenopathy.

COMMENT :

- **No significant abnormality detected. (BIRADS - I).**
- **No direct or indirect sign of malignancy seen.**

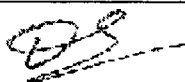
BIRADS Categories:

- 0 Need imaging evaluation.
- I Negative
- II Benign finding
- III probably benign finding.
- IV Suspicious abnormality.
- V Highly suggestive of malignancy.

The false negative mammography is approximately 10%. Management of a palpable abnormality must be based upon clinical grounds.

Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494

