

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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	PRAKASH DEVI DHARAMVEER YADAV
DATE OF BIRTH	10-02-1971
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	11-03-2023
BOOKING REFERENCE NO.	22M161584100045868S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. YADAV DHARAM VEER
EMPLOYEE EC NO.	161584
EMPLOYEE DESIGNATION	BRANCH OPERATIONS
EMPLOYEE PLACE OF WORK	TALOD
EMPLOYEE BIRTHDATE	11-09-1969

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 **02-03-2023** 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's spouse 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))

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Candhinagar - 382421. Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



DR.UNNATI SHAH
B.D.S. (DENTAL SURGEON)
REG. NO. A-7742
MO.NO- 9904596691

UHID:	Date:	Time:
Patient Name: Prakashwari	Udaipur	Age / Sex: 51/F
		Height:
		Weight:
History:		
-		
Examination:		
Carum 6/6		
#6 FCC 6/5		
calves +1		
- Stent		
Diagnosis:		

Treatment:

✓ Scaling

✓ Rem 6/6

✓ FCC (65)

✓ Dem

Aashka Hospitals Ltd.

Between Sargasan and Reliance Cross Roads
Sargasan, Candhinagar - 382421. Gujarat, India
Phone: 079 29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



DR. TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

PHID:		Date:	Time:
Patient Name: <i>Prayash Devi Yachary</i>		Age / Sex: <i>51 / F</i>	Height:
		Weight:	
History:			
<i>As - Routine check up.</i> <i>Went for</i> <i>BE</i>			
Allergy History:			
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Examination:			
<i>11m2619</i> <i>11m2619</i>			
Diagnosis:			



only consultation

Name: Prakash Devi

Age: 51 yrs.

Complaints:

frequency of menstruation? 3yrs
No burning sensation; No pain abdomen
No itching

No of deliveries:

2

Last Delivery:

Both ND

History of abortion:

Last 2 23yrs

H/O medical conditions associated:

Last abortions:

DM

HTN

Thyroid

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

Meno paine 3yrs

MH:

Reg:

Bronchospasm

LMP:

P/A: SOP

P/S: Op healthy cystoleft No
NS
No

P/V: ul-NS, Mobil FP

Sample:-

Vagina
Cervix

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

Advised kegel's
exercise

Review after 3 months

Doctors Sign:-

J. Hallanwar



LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 09:32	Sample Type :	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O22239669

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	107.53	mg/dL	70.0 - 100
Glyco Hemoglobin			
HbA1C	5.72	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Liver Function Test			
Bilirubin Conjugated	0.25	mg/dL	0 - 0.20

Abnormal Result(s) Summary End

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

Page 1 of 14

Printed On : 11-Mar-2023 15:12



Neuberg Supratech Reference Laboratories Private Limited

"KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

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



LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 09:32	Sample Type : Whole Blood EDTA	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 09:55	Acc. Remarks : Normal	Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
------	---------	------	--------------------------	---------

HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin (Colorimetric)	12.7	G%	12.00 - 15.00
RBC (Electrical Impedance)	4.55	millions/cumm	3.80 - 4.80
PCV(Calc)	38.36	%	36.00 - 46.00
MCV (RBC histogram)	84.3	fL	83.00 - 101.00
MCH (Calc)	27.9	pg	27.00 - 32.00
MCHC (Calc)	33.1	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.50	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	5070	/μL	4000.00 - 10000.00
	[%]	%	EXPECTED VALUES [Abs]
Neutrophil	52.0	%	40.00 - 70.00 2636 /μL
Lymphocyte	40.0	%	20.00 - 40.00 2028 /μL
Eosinophil	2.0	%	1.00 - 6.00 101 /μL
Monocytes	5.0	%	2.00 - 10.00 254 /μL
Basophil	1.0	%	0.00 - 2.00 51 /μL

PLATELET COUNT (Optical)

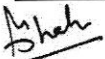
Platelet Count	188000	/μL	150000.00 - 410000.00
Neutrophil to Lymphocyte Ratio (NLR)	1.30		0.78 - 3.53

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)

Page 2 of 14



Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 11-Mar-2023 15:12



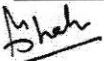


LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 09:32	Sample Type : Whole Blood EDTA	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 09:55	Acc. Remarks : Normal	Ref Id2 : O22239669

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



Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 3 of 14

Printed On : 11-Mar-2023 15:12



Neuberg Supratech Reference Laboratories Private Limited

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

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



LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 11-Mar-2023 09:32	Sample Type : Whole Blood EDTA	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 11:10	Acc. Remarks : Normal	Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	16	mm after 1hr	3 - 20	

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

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 4 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Whole Blood EDTA Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 09:53 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

HAEMATOLOGY INVESTIGATIONS

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

ABO Type	B
Rh Type	POSITIVE

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

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 5 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Spot Urine Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:43 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour : Pale yellow
 Transparency : Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025		1.005 - 1.030
pH	5.5		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	Nil	/HPF	Nil

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

Manoj Shah

Dr. Manoj Shah

M.D. (Path. & Bact.)

Page 6 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Spot Urine Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:43 Acc. Remarks : Normal Ref Id2 : O22239669

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	-	-	-	-	-

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

Dr. Manoj Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Page 7 of 14

Printed On : 11-Mar-2023 15:12



Neuberg Supratech Reference Laboratories Private Limited

“KEDAR” Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006

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



LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 13:43	Acc. Remarks : Normal	Ref Id2 : O22239669
TEST	RESULTS UNIT	BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Biochemical Investigations by Dimension EXL (Siemens)

Plasma Glucose - F	H	107.53	mg/dL	70.0 - 100
Plasma Glucose - PP		114	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)

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 8 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Serum Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:38 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol	146.34	mg/dL	110 - 200
HDL Cholesterol	49.3	mg/dL	48 - 77
Triglyceride <i>Colorimetric-Arsenazo Method</i>	57.2	mg/dL	40 - 200
VLDL <i>Calculated</i>	11.44	mg/dL	10 - 40
Chol/HDL <i>Calculated</i>	2.97		0 - 4.1
LDL Cholesterol <i>Calculated</i>	85.60	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 assesment 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)

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 9 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Serum Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:38 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T.	24.14	U/L	0 - 31	
S.G.O.T.	24.96	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	88.9	U/L	46 - 116	
Gamma Glutamyl Transferase	11.67	U/L	5 - 36	
Proteins (Total)	7.32	gm/dL	6.4 - 8.2	
Albumin	4.14	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.18	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.3		1.0 - 2.1	
Bilirubin Total	0.87	mg/dL	0.2 - 1.0	
Bilirubin Conjugated <i>Diazotized Sulfanilic Acid Method</i>	H 0.25	mg/dL	0 - 0.20	
Bilirubin Unconjugated <i>Calculated</i>	0.62	mg/dL	0 - 0.8	

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

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 10 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Serum Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 11:07 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	7.7	mg/dL	6.00 - 20.00	
Creatinine	0.56	mg/dL	0.50 - 1.50	
Uric Acid	3.63	mg/dL	2.6 - 6.2	

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

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 11 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV	Sex/Age : Female/ 50 Years	Case ID : 30302200270
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 1936123
Bill. Loc. : Aashka hospital		Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32	Sample Type : Whole Blood EDTA	Mobile No : 9426024908
Sample Date and Time : 11-Mar-2023 09:32	Sample Coll. By : non	Ref Id1 : OSP24595
Report Date and Time : 11-Mar-2023 10:13	Acc. Remarks : Normal	Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

Glycated Haemoglobin Estimation

HbA1C	H	5.72	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
--------------	---	-------------	---------------	---

Estimated Avg Glucose (3 Mths) <i>Calculated</i>	117.46	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)

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 12 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Serum Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:43 Acc. Remarks : Normal Ref Id2 : O22239669

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

Thyroid Function Test

Triiodothyronine (T3)	94.26	ng/dL	70 - 204	
Thyroxine (T4) <small>CMA</small>	9.3	ng/dL	5.5 - 11.0	
TSH <small>CMA</small>	1.535	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis of 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

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

Dr. Manoj Shah

Dr. Manoj Shah
 M.D. (Path. & Bact.)

Dr. Shreya Shah
 M.D. (Pathologist)

Page 13 of 14

Printed On : 11-Mar-2023 15:12





LABORATORY REPORT



Name : PRAKASH DEVI DHARAMVEER YADAV Sex/Age : Female/ 50 Years Case ID : 30302200270
 Ref.By : HOSPITAL Dis. At : Pt. ID : 1936123
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 11-Mar-2023 09:32 Sample Type : Serum Mobile No : 9426024908
 Sample Date and Time : 11-Mar-2023 09:32 Sample Coll. By : non Ref Id1 : OSP24595
 Report Date and Time : 11-Mar-2023 11:43 Acc. Remarks : Normal Ref Id2 : O22239669

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 (microIU/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.

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

Shah

Dr. Manoj Shah
M.D. (Path. & Bact.)

Dr. Shreya Shah
M.D. (Pathologist)

Page 14 of 14

Printed On : 11-Mar-2023 15:12



PATIENT NAME: PRAKASH DEVI DHARAMVEER YADAV

GENDER/AGE: Female / 51 Years

DATE: 11/03/23

DOCTOR: DR. HASIT JOSHI

OPDNO: OSP24595

2D-ECHO

MITRAL VALVE : SCLEROSED; MILD MVP
AORTIC VALVE : SCLEROSED
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
AORTA : 34mm
LEFT ATRIUM : 36mm
LV Dd / Ds : 40/28mm EF 60%
IVS / LVPW / D : 11/10mm
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 : 1.2m/s
PULMONARY : 1.2m/s
COLOUR DOPPLER : MILD MR/TR
RVSP : 32mmHg
CONCLUSION : NORMAL LV SIZE / SYSTOLIC FUNCTION;
MILD MVP / MILD MR;
MILD TR ; BORDERLINE PAH;
IAS FLOPPY.

x


CARDIOLOGIST

DR. HASIT JOSHI (9825012235)

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: PRAKASH DEVI DHARAMVEER YADAV

GENDER/AGE: Female / 51 Years

DATE: 11/03/23

DOCTOR:

OPDNO: OSP24595

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 9.9 x 4.3 cms in size.

Left kidney measures about 10.2 x 4.4 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 empty. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 20 cc.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

PATIENT NAME: PRAKASH DEVI DHARAMVEER YADAV

GENDER/AGE: Female / 51 Years

DATE: 11/03/23

DOCTOR:

OPDNO: OSP24595

BILATERAL MAMMOGRAM

Dedicated digital mammography with Craniocaudal and medio lateral oblique view was performed.

Fibrofatty and glandular parenchyma is noted on either side. No definite evidence of mass, abnormal microcalcification or architectural distortion is seen. No evidence of skin thickening or nipple retraction is seen.

COMMENT: Normal mammography of breast on either side (BIRADS - Category - I).

BIRADS Categories:

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

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

Screening mammogram:

Women with no symptoms

AGE: 35-39: Baseline study.

AGE: 40-49: Every 1-2 years

AGE: 50 and above: Every year


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: PRAKASH DEVI DHARAMVEER YADAV

GENDER/AGE: Female / 51 Years

DATE: 11/03/23

DOCTOR:

OPDNO: OSP24595

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.

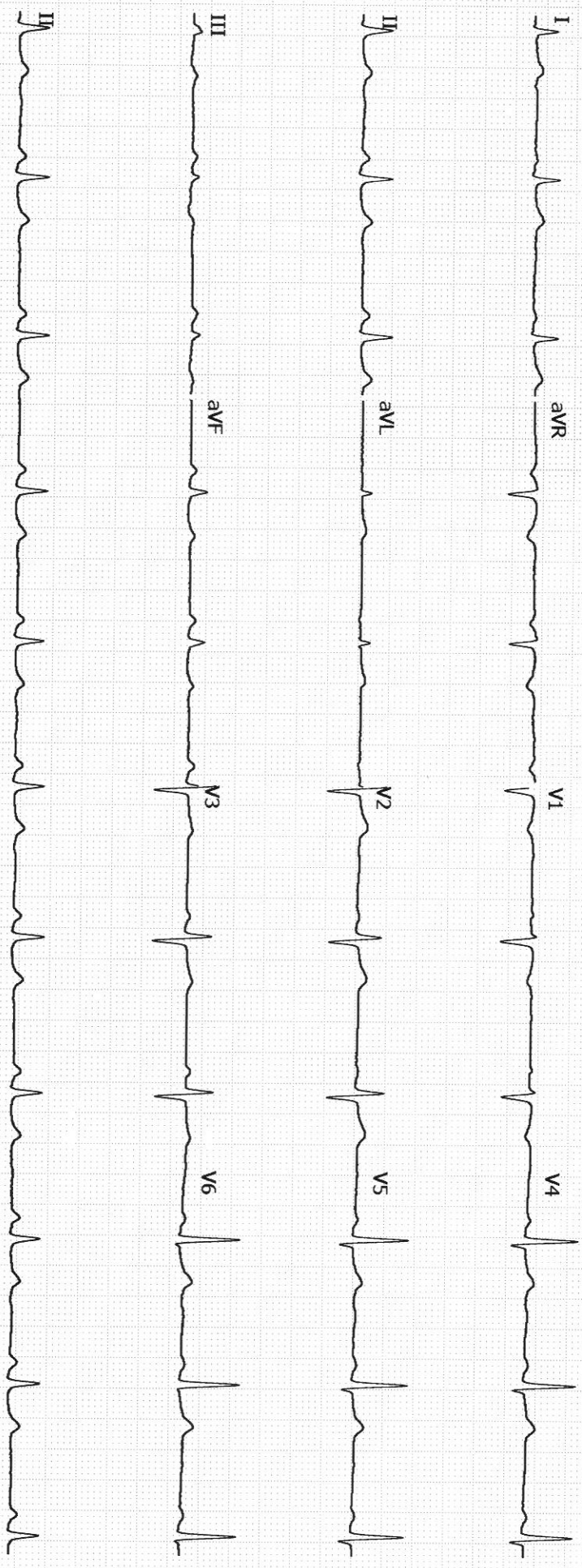
No evidence of cervical rib is seen on either side.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 84 ms
QT / QTcBaz : 402 / 404 ms
PR : 146 ms
P : 98 ms
RR / PP : 978 / 983 ms
P / QRS / T : 68 / 41 / 27 degrees

Normal sinus rhythm
Normal ECG



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-2.0 Hz 50 Hz

Unconfirmed
4x2.5x3_25_R1 1/1