



प्रति,

समन्वयक,

MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	SUPRIYA SANJAY DORAGE
जन्म की तारीख	04-07-1994
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	03-08-2024
बुकिंग संदर्भ सं.	24S95133100109418S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. NAGAWADE KIRAN RAMESH
कर्मचारी की क.कू.संख्या	95133
कर्मचारी का पद	RAPC SANCTION AUTHORITY
कर्मचारी के कार्य का स्थान	AHMEDABAD,ZO AHMEDABAD
कर्मचारी के जन्म की तारीख	01-06-1987

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **29-07-2024** से **31-03-2025** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मा.सं.प्र. एवं विपणन

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)से संपर्क करें।)

To,

The Coordinator,
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

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	SUPRIYA SANJAY DORAGE
DATE OF BIRTH	04-07-1994
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	03-08-2024
BOOKING REFERENCE NO.	24S95133100109418S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. NAGAWADE KIRAN RAMESH
EMPLOYEE EC NO.	95133
EMPLOYEE DESIGNATION	RAPC SANCTION AUTHORITY
EMPLOYEE PLACE OF WORK	AHMEDABAD,ZO AHMEDABAD
EMPLOYEE BIRTHDATE	01-06-1987

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 **29-07-2024** till **31-03-2025**. 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 & Marketing Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))



LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref.By :	Dis. At :	Pt. ID : 4255683
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type :	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 :

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
MCV (RBC histogram)	80.7	fL	83.00 - 101.00
MCH (Calc)	26.7	pg	27.00 - 32.00
Lymphocyte	46	%	20.00 - 40.00
Plasma Glucose - F	104.59	mg/dl	70 - 100

Abnormal Result(s) Summary End

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

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LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref.By :	Dis. At :	Pt. ID : 4255683
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 11:10	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF	INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	12.3	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.62	millions/cumm	3.80 - 4.80
PCV (Calc)	37.28	%	36.00 - 46.00
MCV (RBC histogram)	L 80.7	fL	83.00 - 101.00
MCH (Calc)	L 26.7	pg	27.00 - 32.00
MCHC (Calc)	33.1	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.5	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

		UNIT	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Total WBC Count	4800	/μL	4000.00 - 10000.00		
Neutrophil	[%] 45	%	40.00 - 70.00	2160	/μL 2000.00 - 7000.00
Lymphocyte	H 46	%	20.00 - 40.00	2208	/μL 1000.00 - 3000.00
Eosinophil	3.0	%	1.00 - 6.00	144	/μL 20.00 - 500.00
Monocytes	6.0	%	2.00 - 10.00	288	/μL 200.00 - 1000.00
Basophil	00	%	0.00 - 2.00	0	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	234000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	0.98		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 (L-Low, V-Low, H-High, VH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref By :	Dis At :	Pt. ID : 4255683
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 11:22	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR <i>Westergren Method</i>	06	mm after 1hr	3 - 20	

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

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M.D. (Pathologist)

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LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref.By :	Dis At :	Pt. ID : 4255683
Bill. Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 11:11	Acc. Remarks : Normal	Ref Id2 :

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	B
Rh Type	POSITIVE

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

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LABORATORY REPORT



Name : SUPRIYA S DORAGE Sex/Age : Female/ 30 Years Case ID : 40802200215
 Ref. By : Dis. At : Pt. ID : 4255683
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 06-Aug-2024 09:27 Sample Type : Plasma Fluoride F Plasma Fluoride PP, Serum Mobile No :
 Sample Date and Time : 06-Aug-2024 09:27 Sample Coll. By : Ref Id1 : OSP34479
 Report Date and Time : 06-Aug-2024 12:46 Acc. Remarks : Normal Ref Id2 :
 TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H 104.59	mg/dL	70 - 100	
Plasma Glucose - PP <i>Photometric, Hexokinase</i>	98.6	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitrogen) <i>GLDH</i>	9.9	mg/dL	7.00 - 18.70	
Uric Acid <i>URICASE</i>	2.83	mg/dL	2.6 - 6.2	
Creatinine	0.73	mg/dL	0.50 - 1.50	

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

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LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref.By :	Dis. At :	Pt ID : 4255683
Bill Loc : Aashka hospital		Pt Loc :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 11:58	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	5.31	% of total Hb	4.80 - 6.00	
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	105.70	mg/dL	Not available	

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 Hemozygous 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-Very Low, L-Low, H-High, HH-Very High) A-Abnormal

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LABORATORY REPORT



Name : SUPRIYA S DORAGE	Sex/Age : Female/ 30 Years	Case ID : 40802200215
Ref.By :	Dis. At :	Pt. ID : 4255683
Bill. Loc : Aashka hospital		Pt. Loc :
Reg Date and Time : 06-Aug-2024 09:27	Sample Type : Serum	Mobile No :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 12:46	Acc. Remarks : Normal	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-PAP</i>	131.37	mg/dL	110 - 200	
HDL Cholesterol	54.7	mg/dL	48 - 77	
Triglyceride <i>Glycerol Phosphate Oxidase</i>	51.00	mg/dL	<150	
VLDL <i>Calculated</i>	10.20	mg/dL	10 - 40	
Chol/HDL <i>Calculated</i>	2.40		0 - 4.1	
LDL Cholesterol <i>Calculated</i>	66.47	mg/dL	0.00 - 100.00	

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	-	-	-

- LDL cholesterol level is primary goal for treatment and varies with risk category and assessment
- 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 interpretation 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 assessment

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

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LABORATORY REPORT



Name **SUPRIYA S DORAGE** Sex/Age **Female/ 30 Years** Case ID : **40802200215**
 Ref By Dis. At Pt. ID : **4255683**
 Bill. Loc : **Aashka hospital** Pt. Loc :

Reg Date and Time : **06-Aug-2024 09:27** Sample Type : **Serum** Mobile No :
 Sample Date and Time : **06-Aug-2024 09:27** Sample Coll. By : Ref Id1 : **OSP34479**
 Report Date and Time : **06-Aug-2024 12:47** Acc. Remarks : **Normal** Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T <i>UV with P5P</i>	16.94	U/L	14 - 59	
S.G.O.T <i>UV with P5P</i>	24.23	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	96.12	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	3.93	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Biuret</i>	8.21	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.91	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.30	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.49		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.35	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.22	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.13	mg/dL	0 - 0.8	

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LABORATORY REPORT



Name : **SUPRIYA S DORAGE** Sex/Age : **Female/ 30 Years** Case ID : **40802200215**
 Ref By : Dis At : Pt. ID : **4255683**
 Bill. Loc : **Aashka hospital** Pt. Loc :

Reg Date and Time : **06-Aug-2024 09:27** Sample Type : **Serum** Mobile No :
 Sample Date and Time : **06-Aug-2024 09:27** Sample Coll. By : Ref Id1 : **OSP34479**
 Report Date and Time : **06-Aug-2024 11:58** Acc. Remarks : **Normal** Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	93.55	ng/dL	70 - 204	
Thyroxine (T4) <small>CMIA</small>	6.82	ng/dL	4.87 - 11.72	
TSH <small>CMIA</small>	2.05	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), PRTH 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

	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

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 : 06-Aug-2024 09:27	Sample Type : Serum	Mobile No. :
Sample Date and Time : 06-Aug-2024 09:27	Sample Coll. By :	Ref Id1 : OSP34479
Report Date and Time : 06-Aug-2024 11:58	Acc. Remarks : Normal	Ref Id2. :

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 physiological 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 a daily basis 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/↑	↓

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

Dr. Shreya Shah

M.D. (Pathologist)

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Neuberg Diagnostics Private Limited

Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 | 079-40408181 / 61618181 | contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi, Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099 | www.neubergsupratech.com



LABORATORY REPORT



Name : SUPRIYA S DORAGE Sex/Age : Female/ 30 Years Case ID : 40802200215
 Ref.By : Dis. At : Pt. ID : 4255683
 Bill. Loc. : Aashka hospital Pt. Loc. :

Reg Date and Time : 06-Aug-2024 09:27 Sample Type : Spot Urine Mobile No :
 Sample Date and Time : 06-Aug-2024 09:27 Sample Coll. By : Ref Id1 : OSP34479
 Report Date and Time : 06-Aug-2024 11:08 Acc. Remarks : Normal Ref Id2 :

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	1.020		1.003 - 1.035
pH	6.5		4.6 - 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	/µL	Nil
Yeast	Nil	/µL	Nil
Cast	Nil	/HPF	Nil
Crystals	Nil	/HPF	Nil

Note (LL-Very Low L-Low H-High HH-VeryHigh A-Abnormal)


Dr. Shreya Shah
 M.D. (Pathologist)

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LABORATORY REPORT



Name : **SUPRIYA S DORAGE** Sex/Age : **Female/ 30 Years** Case ID : **40802200215**
 Ref.By : Dis. At : Pt. ID : **4255683**
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 Sample Date and Time : **06-Aug-2024 09:27** Sample Coll. By : Ref Id1 : **OSP34479**
 Report Date and Time : **06-Aug-2024 11:08** Acc. Remarks : **Normal** Ref Id2 :

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/Notations				
			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	-	-	-	-	-

----- 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-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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 🌐 www.neubergsupratech.com

PATIENT NAME:SUPRIYA S DORAGE

GENDER/AGE:Female / 30 Years

DATE:06/08/24

DOCTOR:

OPDNO:OSP34479

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 86 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 5.2 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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CIN: L85110GJ2012PLC072647



aashka
HOSPITAL



PATIENT NAME: SUPRIYA S DORAGE

GENDER/AGE: Female / 30 Years

DATE: 06/08/24

DOCTOR:

OPDNO: OSP34479

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



ADDRESSOGRAPH

COLOUR DOPPLER ECHOCARDIOGRAPH REPORT

Patient's Name : Supriya Age : _____ Sex : _____
 Ref. by Doctor : _____ IP/OP No. : _____ Date : _____

MITRAL VALVE : *Ann long redundant*
AORTIC VALVE :
TRICUSPID VALVE : *12*
PULMONARY VALVE :
AORTA : *28*
LEFT ATRIUM : *30*
LV Dd/ Ds : *37/27 EF 55%*
IVS / LVPW / D : *10/9*
IVS : *Intact*
IAS : *Floppy*
RA :
RV : *14*
PERICARDIUM : *~*

VEL	PEAK	MEAN
M/S	Gradient mm Hg	Gradient mm Hg
MITRAL	: <i>0.9/0.6</i>	
AORTIC	: <i>1.0</i>	
PULMONARY	: <i>0.7</i>	
COLOUR DOPPLER	: <i>Trivial MR/TR</i>	
RSVP	: <i>26 cm</i>	
CONCLUSION	: <i>MV size / systolic fn</i>	

COLOUR DOPPLER ECHOCARDIOGRAPH REPORT

06.08.2024 11:45:53 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

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

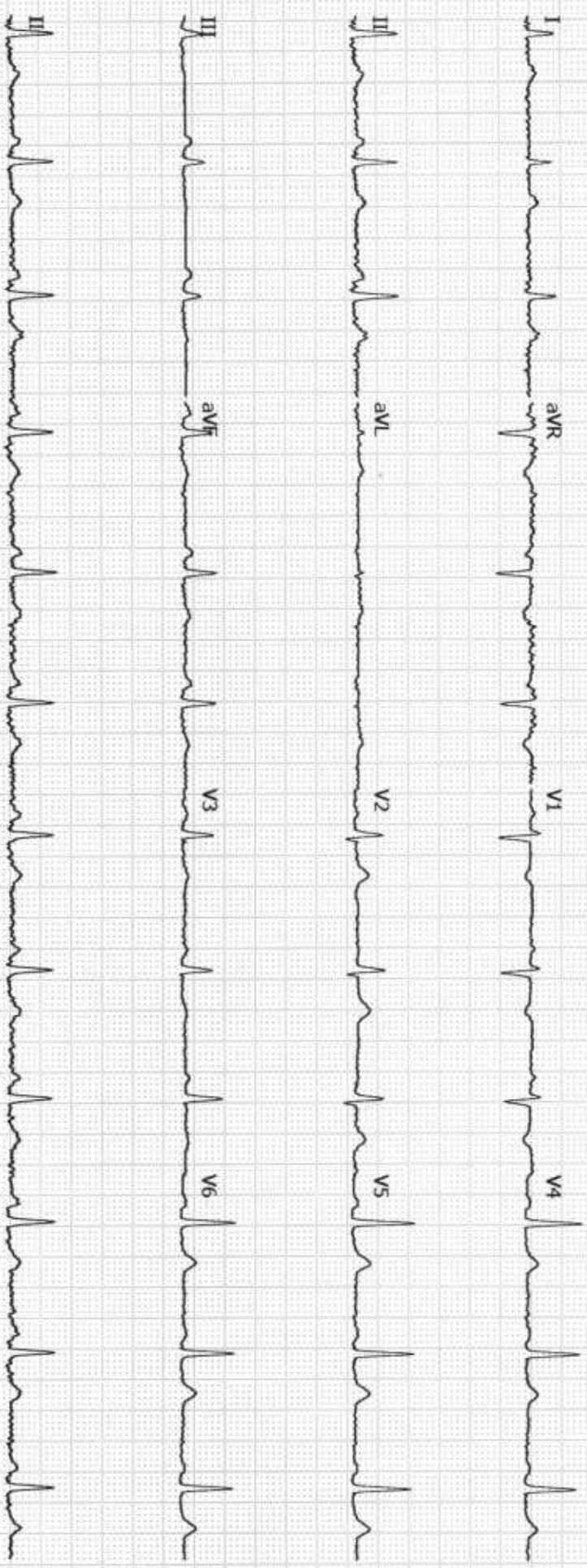
Room:

70 bpm
- / - mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 70 ms
QT / QTc Baz : 384 / 414 ms
PR : 150 ms
P : 92 ms
RR / PP : 856 / 857 ms
P / QRS / T : 75 / 51 / 35 degrees

Normal sinus rhythm
Normal ECG





बैंक ऑफ़ बड़ोदा
Bank of Baroda



कूट क्र. | E.C.No. 951333



नाम | Name **Kiran Ramesh Nagawade**

पदनाम | Desi. **Chief Manager**

धारक के हस्ताक्षर | Signature of Holder

13/05/2023

जारी करने की तारीख

जारीकर्ता प्राधिकारी

Date of Issue

Issuing Authority

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647



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

UHID:	Date: 6/8/20	Time:
Patient Name:	Age /Sex:	
Sprigya S. Dorage	Height: 160.00 cm.	
	Weight: 59.3 kg	
History:	found eye chetk - P	
Allergy History:	no	
Nutritional Screening:	Well-Nourished / Malnourished / Obese	
Examination:	Ac - nrl R-PI - PL L-PI - CLR VW < 6/6 6/6	
Diagnosis:		

DR. KHUSHBOO PATEL
MS (OBS & GYN)
REG. NO. G-31287

UHID:	Date: 7/8/24	Time:
Patient Name: Supriya Dasgupta	Age: 30yr	Mobile No:
Complaint and duration: C/O - Nil	Health checkup	Wt: 59.3 Ht: 160.00
History:	Menstrual history: RUF 2-3 dys	
Cycles	Flow	Duration of Bleeding
LMP: 5th day		Presence of pain
H/O Associated illnesses:		
HTN:		DM:
Thyroid disorder:		Others:
Family History: NAD		
Medication history:		
Obstetric History: P2G	2 FTND/A 2H	Last child: 5yr
No of deliveries:		
Allergy History: NAD		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
General Examination:		
CVS	BP:	Oedema of ft NO
RS: NAD	Wt: 59kg	Tongue Normal
Breast examination:		

P/

P/A - soft .

A

P/S :- ex :-

L/E

Vagina :- } Menstrual bleed (A)

P/S- cervix

P/V :- not done.

P/V

Provisional Diagnosis:

Investigation:

Pap's smear after menses .

Plan of care:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Follow-up:

Review & Pap's test Report .

Consultant's Sign:

DR. Khushboo