

HEALTH CHECK UP SUMMARY

Emp ID	Date	Referred By	Location	
PK01000023	11/03/2023	mediwheel	wakad	
Employee Name	Gender	Age	SPO2	
Meenu shrivastava	female	49	97	
Height (in CM)	Weight in Kg	BMI	Pulse (per min)	B P (mm of Hg)
150	84.6	24.3	85	152/91

Past History	H/O - Gall bladder calculus noted.
--------------	------------------------------------

Present Complaints	cold, cough, hoarseness of voice since 12 days Acidity.. frequently.
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ADVICE/SUGGESTION: - surgeon opinion for gall bladder calculus
 - pt. already taking ENT opinion.



Signature of Medical Examiner

Dr. Shrideep Parab
 MBBS, DGO
 Obs & Gynecologist
 Reg. No. . MMC 2013/11/3392





भारत सरकार

GOVERNMENT OF INDIA



मीनू

Meenu

जन्म तारीख/ DOB: 01/06/1973

महिला / FEMALE



9915 6476 7587

आधार-सामान्य माणसाचा अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता:

W/O: कृषणा किशोर
श्रीवास्तव, हाउस 27/2 फेज़
2, आरके पूरम, ताजनगरी,
शहागंज, आग्रा,
उत्तर प्रदेश - 282010

Address:

W/O: Krishna Kishore Shrivastava,
House 27/2 Phase 2, RK Puram,
Tajnagari, Shahaganj, Agra,
Uttar Pradesh - 282010

9915 6476 7587

Aadhaar-Aam Admi ka Adhikar



Ms. Meenu Shrivastava

Somatne Fhata Near Talegaon, Pune Wakad Pune Maharashtra India

Gendr/DOB (Age) : Female/11-Mar-1974(49Y 0M)

Medico ID : 23031101316289

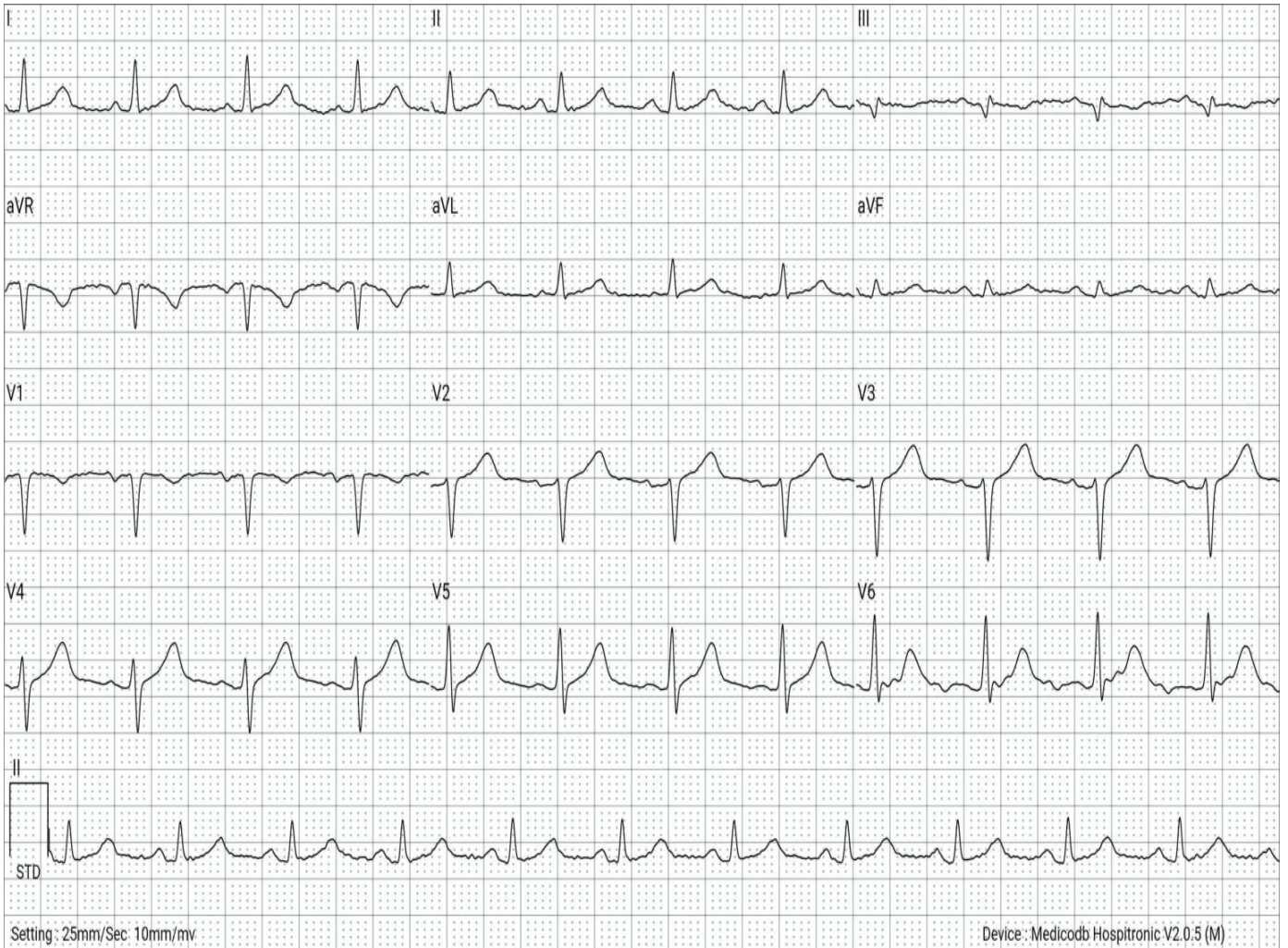
Referred By :

Date

: 11-Mar-2023 / 02:10 PM

History :

REPORT ON ECG



VITALS	:	TEMP	: - (F)	PULSE RATE	: - /MIN	RBS	: - mg/dL
	:	HR	: 100 /MIN	BP	: 0 / 0 mmHg	SPO2	: 0.0 %

MEASUREMENTS*	:	PR	: 135.42 ms	QT	: 352.08 ms	P	: 41.68 deg
(ECG Parameters)	:	ST	: 0.54 ms	QTc	: 452.97 ms	QRs	: 14.82 deg
	:	R-R	: 604.17 ms	QRS	: 79.17 ms	T	: 9.7 deg

FINDINGS	:	NORMAL SINUS RHYTHM. NO SIGNIFICANT ST CHANGES NOTED
IMPRESSION	:	THIS ECG IS FOUND TO BE WITHIN NORMAL LIMITS.
RECOMMENDATION	:	CLINICAL CORRELATION

This is electronically authenticated report; hence doesn't require signature.

* Software calculated values; to be verified manually.

Printed By : Madyoasis Medical SPL ECG Technician On 11-Mar-2023 / 02:12 PM

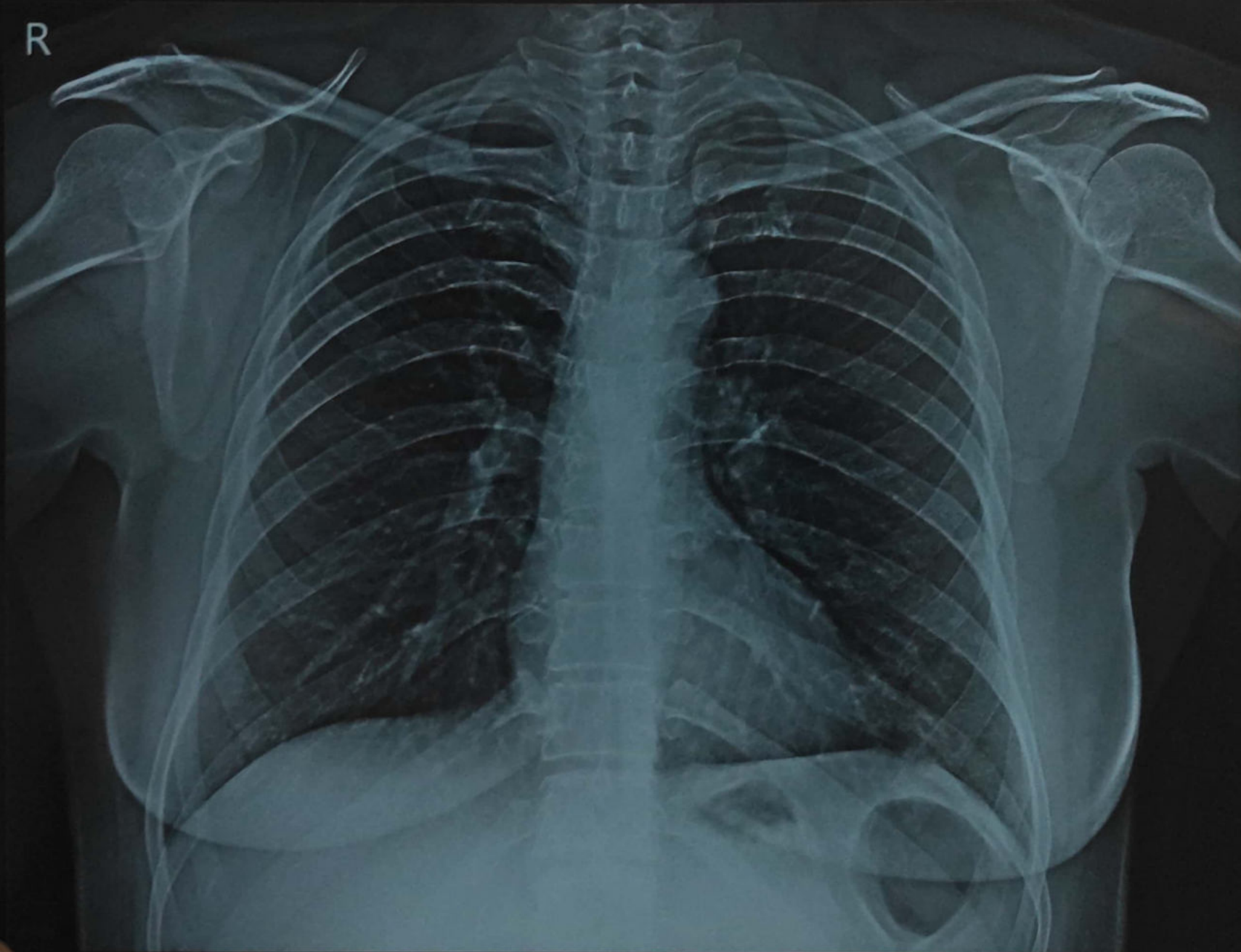
Reported By

Express Diagnostics HQ

(Rs. 0.00/- Received for this ECG)

(Dr. Darshan C Shah (M.D. Medicine)) Reg. No : G-87427

R



MEENU SHRIVASTAV 49 YRS/F CHEST PA 3/11/2023 10:57 AM
MEDIMAP DIAGNOSTICS , WAKAD.



Patient ID No. : 132301109 Card ID : 20238990
Reg.Date/Time : 11/03/2023 10:36:29
Patient's Name : Meenu Shrivastav - 49 Year / Female
Ref. By : Dr.Self
Client Name : MADYOSIS I



RADIOGRAPH OF CHEST PA VIEW

FINDINGS:

Visualised lungs bilaterally reveal normal aeration pattern.
Both the costophrenic angles are clear.
The mediastinal silhouette is maintained.
Cardiac and aortic silhouettes appear normal.
Both the domes of diaphragm are normal in position and contour.
Thoracic wall soft tissues and bony cage are normal.

IMPRESSION:

-No significant abnormality detected.

--End Of Report--

DR ABHIJIT PAWAR
MBBS, DNB, DMRE
RADIOLOGIST

Print Date : 11/03/2023 11:58:40

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Shop no. 1,2,3 Wakad Centre,
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For Home Visit & Appointments:
07969 00 7969

Email
info.medimap@gmail.com



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Patient's Name : Meenu Shrivastav - 49 Year / Female
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USG ABDOMEN AND PELVIS

FINDINGS:-

Liver is normal in size, shape and echopattern. No evidence of focal lesion.
Portal and hepatic venous confluence are normal. No IHBR dilatation seen.

Gall bladder is well distended. A 22 x 5 mm calculus is seen in it. Wall thickness is normal. CBD is normal in caliber.

Pancreas is normal in size and echopattern. No focal lesion.

Spleen is normal in size with homogenous echopattern. No focal lesion.

Both kidneys are normal in size, shape, location and appear homogenous in echopattern. No evidence of calculus or hydronephrosis. Both ureters are not dilated.

Urinary bladder is well distended and shows normal wall thickness.
No mass or calculus seen.

Uterus is normal in size, shape and echopattern. No focal lesion
The endometrial echo is central with empty cavity.

Both ovaries are normal. No obvious adnexal mass noted

Aorta, IVC and retroperitoneum are normal.

No free fluid or lymphadenopathy.

There is no obvious bowel dilatation. No abnormal bowel wall thickening is seen.

IMPRESSION :-

- Gall bladder calculus. No evidence of cholecystitis.
- No other significant abnormality detected.

DR ABHIJIT PAWAR
MBBS, DNB, DMRE
RADIOLOGIST

Print Date 11/03/2023 13:08:48

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For Home Visit & Appointments:
07969 00 7969

Email
info.medimap@gmail.com





Dental Case Paper

Patient Name Mr/Mrs: Meena Shrivastava Date: _____
Gender: F Age: 49 Mobile No: 9380825359
Address: 1102, Paffodil society, Somatane phata, Talegaon

CLINICAL NOTES:

- 1) Routine Dental Checkup:-
- 2) C/O Pain: - Routine check up.
- 3) C/O Sensitivity :-
- 4) Mobility:-
- 5) C/O Missing Teeth: -

Past Medical History:

- 1) Smoking 2) Alcohol 3) Hepatitis B & C 4) Diabetics 5) Allergy 6) Tobacco 7) Asthma 8) Hypertension
- 9) Drug History 10 Any other: N/A -

- PDH:-** H/O -
- 1) Restoration:-
 - 2) RCT
 - 3) RPD/FPD/CD:- N/A -
 - 4) Prophylaxis:-
 - 5) Other:-

- O/E :-**
- 1) Caries:-
 - 2) Stains/Calculus:- Stain⁺⁺, cal⁺⁺

Investigations:-

Treatment & Advised:-

- 1) Restoration with :-
- 2) RCT :-
- 3) Scaling + Polishing :- Advice scaling & polishing
- 4) FPD/RPD/CD :-
- 5) Extraction :-

[Signature]
Sign of Dental Surgeon

Reg. No.: A-17596/2008
Dental Surgeon (BDS)
DR. SOBHANA RAUT
www.madyoasis.in



MADYOASIS
DIAGNOSTICS

First Floor, Deendayal Hospital Complex,
926, FC Road, Shivajinagar Pune,
Maharashtra 411004

+91 74100 01781 | Time: 9 am to 9 pm
md.fcroad@madyoasis.in
www.madyoasis.in

Eye Checkup

Name: Meenu Shrivastava Gender: Female
Age: 49 Date: 11/03/2023

HISTORY:- NA

EXAMINATIONS:-

VISION:-

	Near	Distance
Right Eye	6/6 Normal without glasses	6/6 Normal
Left Eye	6/6 Normal	6/6 Normal without glasses

COLOUR VISION (Tick Only):-

Normal	<input checked="" type="checkbox"/>
Partial: Red / Green Deficiency	<input type="checkbox"/>
Complete: Red / Green Deficiency	<input type="checkbox"/>

Doctor Signature
DR. RAJESH MAILAGIRE
General Physician (MBBS)
Reg No. 2018/04/1055



+91 77966 95666

Address: First Floor, Deendayal Memorial Hospital, FC Road Survey No. 926, Shivajinagar



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Patient Name : MRS. MEENA SHRIVASTAVA

Age / Gender : 49 Yrs 9 M / Female

Mobile No. : 8380825359

Patient ID : 639

Source : MEDIWHEEL

Referral : Mediwheel Full Body Check up

Receiving Time : Mar 12, 2023

Sample ID :



Test Description	Value(s)	Reference Range	
Complete Blood Count			
WBC	14200	4000-10000	cell/cu.mm
Neu%	75	50 - 70	%
Lym%	20	20.0 - 40.0	%
Mon%	03	3.0 - 12.0	%
Eos%	02	0.5 - 5.0	%
Bas%	00	0.0 - 1.0	%
RBC	4.47	4.0 - 5.50	10 ⁶ /uL
HGB	13.9	12.0 - 16.0	g/dL
HCT	39.3	40.0 - 54.0	%
MCV	88.7	83 - 101	fL
MCH	31.1	27 - 32	pg
MCHC	35.1	31.5 - 34.5	g/dL
RDW-CV	13.6	11.0 - 16.0	%
PLT	259	150-450	10 ³ /ul
MPV	13.7	6.5 - 12.0	fL
RBC	Normocytic normochromic		
WBC	Neutrophilic leucocytosis		
Platelet	Adequate		

END OF REPORT

DR. SAGAR RAJENDRA SHETE
REG. NO. 083463

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Test Description	Value(s)	Reference Range
ESR		
ESR - Erythrocyte Sedimentation Rate	12	0 - 29 mm/hr
Method : EDTA Whole Blood, Manual Westergren		
Interpretation:		
<ul style="list-style-type: none">It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.		

****END OF REPORT****

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Test Description	Value(s)	Reference Range
<u>Blood Group Abo & Rh Typing, Blood</u>		
Blood Group (ABO typing) Method : Manual-Hemagglutination	"O"	
RhD Factor (Rh Typing) Method : Manual hemagglutination	Positive	

END OF REPORT

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Test Description	Value(s)	Reference Range
LIPID PROFILE		
Cholesterol-Total Method : Spectrophotometry	192	Desirable level < 200 Borderline High 200-239 High >or = 240 mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	95	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500 mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	46	Normal: > 40 Major Risk for Heart: < 40 mg/dL
LDL Cholesterol Method : Enzymatic selective protection	127	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190 mg/dL
VLDL Cholesterol Method : Serum, Enzymatic (Calculated)	19	6 - 38 mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	4.17	UP TO 5.0
LDL/HDL Ratio Method : Serum, Enzymatic	2.76	UP TO 3.5

Note:

8-10 hours fasting sample is required.

****END OF REPORT****

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Test Description	Value(s)	Reference Range	
<u>LIVER FUNCTION TEST (LFT)</u>			
Total Protein Method : Serum, Biuret, reagent blank end point	7.6	6.6 - 8.3	g/dL
Albumin Method : Serum, Bromocresol green	3.8	3.2 - 4.6	g/dL
Globulin Method : Serum, EIA	3.80	1.8 - 3.6	g/dL
A/G Ratio Method : Serum, EIA	1	1.2 - 2.2	
Bilirubin - Total Method : Serum, Jendrassik Grof	0.89	0.3 - 1.2	mg/dL
Bilirubin - Direct Method : Serum, Diazotization	0.23	< 0.2	mg/dL
Bilirubin - Indirect Method : Serum, Calculated	0.66	0.1 - 1.0	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	24	Upto 40	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	32	Upto 42	U/L
Alkaline Phosphatase Method : PNPP-AMP Buffer/Kinetic	109	30 - 120	U/L
GGT-Gamma Glutamyl Transpeptidase Method : Serum, G-glutamyl-carboxy-nitroanilide	28	< 38	U/L

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Test Description	Value(s)	Reference Range	
RENAL FUNCTION TEST			
Uric Acid Method : Serum, Uricase	5.1	3.2 - 7.2	mg/dL
Creatinine Method : Serum, Jaffe	1.0	0.4 - 1.4	mg/dL
Urea Method : Uricase	34	10 - 50	mg/dL
Blood Urea Nitrogen-BUN Method : Serum, Urease	15.89	8 - 23	mg/dL
Bun/ Creat Ratio	15.89	7 - 18	

Remark:

In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

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Test Description	Value(s)	Reference Range
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HbA1c

HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD 5.0 %

Method : (HPLC, NGSP certified)

Estimated Average Glucose : 96.80 - mg/dL

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183

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Sample ID :



000607123

Test Description	Value(s)	Reference Range
9	212	
10	240	
11	269	
12	298	

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Test Description	Value(s)	Reference Range	
THYROID FUNCTION TEST (TFT)			
T3-Total	1.54	0.6 - 1.80	ng/mL
T4-Total	7.24	4.5 to 10.9	microgm/dl
TSH-Ultrasensitive	2.13	0.35 to 5.55	microU/mL

Method : CLIA

Interpretation

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids .

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 & FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

During pregnancy, T3 T4 can be high and TSH can be slightly low

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Test Description	Value(s)	Reference Range
<u>FASTING BLOOD SUGAR</u>		
Glucose fasting Method : Fluoride Plasma-F, Hexokinase	102	Normal: 70 - 99 mg/dL Impaired Tolerance: 100-125 Diabetes mellitus: \geq 126 (on more than one occassion) (American diabetes association guidelines 2018)
Urine Fasting	Absent	

END OF REPORT

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Test Description	Value(s)	Reference Range
PPBS		
Blood Glucose-Post Prandial Method : Hexokinase	130	70 - 140 mg/dL
Urine Post Prandial	Absent	

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Test Description	Value(s)	Reference Range
<u>URINE ROUTINE EXAMINATION</u>		
Volume*	20	- ml
Colour*	Pale Yellow	
Transparency (Appearance)*	Clear	
Deposit*	Absent	
Reaction (pH)*	6.0	4.5 - 8
Specific Gravity*	1.025	1.010 - 1.030
<u>Chemical Examination (Automated Dipstick Method) Urine</u>		
Urine Glucose (sugar)*	Absent	
Urine Protein (Albumin)*	Absent	
<u>Microscopic Examination Urine</u>		
Pus Cells (WBCs)*	1-2	0 - 5 /hpf
Epithelial Cells*	2-3	0 - 4 /hpf
Red blood Cells*	Absent	/hpf
Crystals*	Absent	
Cast*	Absent	
Bacteria*	Absent	
Mucus Thread	Absent	

****END OF REPORT****

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