

भारत संरकार GOVERNMENT OF INDIA



सविता कुमारी Savita Kumari जन्म तिथि/ DOB: 28/01/1996 महिला / FEMALE

3912 3670 0897



मेरा आधार, मेरी पहचान

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भारतीय विशिष्ट पहचान प्राधिकरण UNIQUE IDENTIFICATION AUTHORITY OF INDIA

Address:

पता: अर्धांगिनी: निरंजन कुमार, मोहल्ला झिंग नगर, पोस्ट-बिहार शरीफ, दिस्त-नालंदा, बिहार, बिहार, नालंदा, बिहार - 803101

W/O: Niranjan Kumar, Mohalla Jhing Nagar, Post-Bihar Sharif, Distt-Nalanda, Bihar, Bihar, Nalanda, Bihar - 803101

1947 1800 300 1947 help@uidai.gov.in www.uidai.gov.in Bo

P.O. Box No.1947, Bengaluru-560 001





Patient Name	: MS SAVITA KUMARI
Age/Gender	: 27 Yrs/Female
Ref. Dr.	: Dr. APOLLO CLINIC
Center	: INSURANCE

CMSH23/18953

 Registration Date
 : 25/08/2023 11:59 AM

 Collection Date
 : 25/08/2023 12:02 PM

 Report Date
 : 25/08/2023 03:48 PM



HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	5.1	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0
			Diabetic: $>= 7.0$
Estimated Average Glucose :	100	mg/dL	
Reference Range (Average Blood Suga	r):		
Excellent control : 90 - 120 mg/dl			
Good control : 121 - 150 mg/dl			
Average control : 151 - 180 mg/dl			
Action suggested : 181 - 210 mg/dl			
Panic value :> 211 mg/dl			
Interpretation & Remark:			

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).

2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.

3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.

4. Low glycated haemoglobin(below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia(especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.

5. To estimate the eAG from the HbA1C value, the following equation is used: eAG(mg/dl) = 28.7*A1c-46.7

6. Interference of Haemoglobinopathies in HbA1c estimation.

- A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
- B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
- C. Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).

7. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %.

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HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
BLOOD GROUP AND RH	FACTOR		
АВО Туре	В		
Rh Factor	PO <mark>SITIVE(</mark>	+VE)	

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
RENAL FUNCTION TEST (RFT)			
Blood Urea	21.0	mg/dl	15 - 50
Serum Creatinine	0.74	mg/dl	0.6 - 1.5
EGFR	111	ml/min	
Blood Urea Nitrogen-BUN	9.81	mg/dl	<mark>7</mark> - 20
Serum Sodium	139.8	mmol/L	135 - 150
Serum Potassium	4.10	mmol/L	<mark>3.5 -</mark> 5.0
Ionic Calcium	1.20	mmol/L	1.10 - 1.35
Chloride	99.0	mmol/L	<mark>94.0 -</mark> 110.0
Uric Acid	5.1	mg/dl	<mark>2.6 - 6.</mark> 0
NOTE : Please correlate with clinical cor	nditions.		

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BIOCHEMISTRY REPORT			
Test Description	Result	Unit	Biological Reference Ranges
LIVER FUNCTION TEST (LFT)			
TOTAL BILIRUBIN	0.71	mg/dl	0 - 1.2
DIRECT BILIRUBIN	0.11	mg/dL	0 - 0.3
INDIRECT BILIRUBIN	0.60	mg/dl	0.1 - 0.8
SGOT (AST)	25.0	U/L	<mark>0</mark> - 35
SGPT (ALT)	21.0	U/L	0 - 45
ALKALINE PHOSPHATASE	61.0	U/L	<mark>40 - 1</mark> 40
GAMMA GLUTAMYL	23.0	IU/L	12 - 43
TRANSFERASE			
TOTAL PROTEIN	7.11	g/dl	<mark>6.4 - 8.</mark> 3
SERUM ALBUMIN	4.23	g/dl	<mark>3.2 - 5.</mark> 2
SERUM GLOBULIN	2.88	g/dl	<mark>1.8 - 3</mark> .6
A/G RATIO	1.47		1.2 - 2.2
NOTE · Please correlate with clinical	conditions		

NOTE : Please correlate with clinical conditions.

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BIOCHEMISTRY REPORT			
Test Description	Result	Unit	Biological Reference Ranges
LIPID PROFILE			
Cholesterol-Total	175.7	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	136.2	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	42.4	mg/dL	< 40 Major Risk for Heart
LDL Cholesterol	106.06	mg/dL	 > 40 Normal < 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high 160-189 High
VLDL Cholesterol CHOL/HDL RATIO LDL/HDL RATIO	27.24 4.14 2.50	mg/dL	> 190 Very High 6 - 38 3.5 - 5.0 2.5 - 3.5
NOTE 8-10 hours fasting sample is re	equired		

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BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Plasma Glucose	78.0	mg/dl	Normal: 70-110
			Impaired Fasting Glucose(IFG):
1			100-125
Note:- An individual may show high	ner fasting glucose level	in comparison to pos	Diabetes mellitus: >= 126 st prandial glucose level due to following

reasons. The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity.

Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

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Post-Prandial Plasma Glucose	99.0	mg/dl	70 - 14 <mark>0</mark>
After Taking	Meal		

Interpretation:-

Normal: 70-140 Impaired Glucose Tolerance:140-200 Diabetes mellitus: >= 200 (on more than one occassion)

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IMMUNOASSAY REPORT

Test Description	Result	Unit	Biological Reference Ranges
TRI-IODOTHYRONIN, (T3)	1.89	ng/mL	0.69 - 2.15
THYROXIN, (T4)	87.3	ng/mL	52 - 127
Thyroid Stimulating Hormone(TSH)-	1.52	μIU/mL	0.3-4.5
Serum			Pregnancy (As per American Thyroid Association)

First Trimester : 0.1-2.5 Second Trimester : 0.2-3.0 Third trimester : 0.3-3.0

Method: CLIA

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern		
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.		
Raised	Within Range	Within Range	 Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism Intermittent T4 therapy for hypothyroidism Recovery phase after Non-Thyroidal illness" 		
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy,Post radioiodine Hypothyroid phase of transient thyroiditis		
Raised or within Range	Raised	Raised or within Range	 Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids,anti-epileptics" 		
Decreased	Raised or within Range	Raised or within Range	solated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & sociated with Non-Thyroidal illness Subclinical Hyperthyroidism Thyroxine ingestion"		
Decreased	Decreased	Decreased	Recent treatment for Hyperthyroidism (TSH remains suppressed)"		
Decreased	Raised	Raised	 Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum" 		
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness		

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URINE EXAMINATION REPORT				
Test Description	Result	Unit	Biological Reference Ranges	
URINE ROUTINE				
General Examination				
Colour	Pale Yellow		Pale Yellow	
Transparency (Apperance)	Clear		Clear	
Deposit	Absent		Absent	
Reaction (pH)	Acidic		5.0-8.5	
Specific Gravity	1.025		-1.005-1.030	
Chemical Examination				
Urine Protein	Absent		Absent	
Urine Ketones (Acetone)	Absent		Absent	
Urine Glucose	Absent		Absent	
Bile pigments	Absent		Absent	
Bile salts	NIL		NIL	
Urobilinogen	Normal		Normal	
Nitrite	Negative		Negative	
Microscopic Examination				
RBC's	NIL	/hpf	NIL	
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf	
Epithelial Cells	1-2	/hpf	0-4/hpf	
Crystals	Absent		Absent	
Casts	Not Seen		Not Seen	
Amorphous deposits	Absent		Absent	
Bacteria	Not seen		Not seen	
Yeast Cells	Not seen		Not seen	

Note : 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pretest conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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Patient Name : MS SAVITA KUMA	RI	CMSH	23/18953 意志 新生子公
Age/Gender : 27 Yrs/Female	Re	egistration Date : 25/08/2	2023 11:59 AM
Ref. Dr. : Dr. APOLLO CLINIC	Co	ollection Date : 25/08/2	2023 12:02 PM
Center : INSURANCE	Re	eport Date : 25/08/2	2023 03:48 PM
Test Description	Result	Unit	Biological Reference Ranges
COMPLETE BLOOD COUNT			
Haemoglobin	12.6	gm/dL	11.0 - 15.0
RBC Count	4.40	mil/cu.mm	3.50 - 5.50
Hematocrit HCT	36.0	%	37.0 - 47.0
Mean Corp Volume MCV	81.8	fL	80.0 - 100.0
Mean Corp Hb MCH	28.6	pg	<mark>27</mark> .0 - 34.0
Mean Corp Hb Conc MCHC	35.0	gm/dL	<mark>32.0</mark> - 36.0
Platelet Count	1.63	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	8.72	10^3/cu.mm	<mark>4.0 - 1</mark> 1.0
DIFFERENTIAL LEUCOCYTE COL	INT		
Neutrophils	60	%	40 - 70
Lymphocytes	35	%	20 - 40
Monocytes	03	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01
Absolute Differential Count			
Absolute Neutrophils Count	5.2	thou/mm3	2.00 - 7.00
Absolute Lymphocyte Count	3.1	thou/mm3	1.00 - 3.00
Absolute Monocytes Count	0.3	thou/mm3	0.20 - 1.00
Absolute Eosinophils Count	0.2	thou/mm3	0.02 - 0.50

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Test Descrip	otion	Result	Unit	Biological Ref	erence Ranges
Center	: INSURANCE		Report Date	: 25/08/2023 03:48 PM	
Ref. Dr.	: Dr. APOLLO CLINIC		Collection Date	: 25/08/2023 12:02 PM	
Age/Gender	: 27 Yrs/Female		Registration Date	: 25/08/2023 11:59 AM	
Patient Name	e :MS SAVITA KUMAR	l		CMSH23/18953	

Test Description Result Unit Biological Reference Ranges ESR - ERYTHROCYTE 36 mm/hr 0 - 20 SEDIMENTATION RATE 0 - 20

Method: Wintrobes

INTERPRETATION:

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.

2. 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, polymyalgia rheumatica.

3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

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**** End of the report****

This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.

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MER- MEDICAL EXAMINATION REPORT

Date of Examination	25-08-2023
NAME	Hug. Savita Kymatic
AGE	28 Gender FeMale
HEIGHT(cm)	149 WEIGHT (kg) 53 Kg
B.P.	110/70
ECG	WML
X Ray	Noursel
Vision Checkup	Color Vision: Mon wear A Far Vision Ratio : Mon wear Near Vision Ratio : Mon wear
Present Ailments	No any active (amploints
Details of Past ailments (If Any)	No any Part Hirtowy
Comments / Advice : She / He is Physically Fit	She is physically Fail
	*~_
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Dr. Sabyasachi Gupta MBBS (Gold Medal WND (Med.) RPGP (UK) Reg Mart 11671

Signature with Stamp of Medical Examiner

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Plass	Javida ((umain)	on 25-8-2023
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After reviewing the medical history and on clinical examination it has been found that he/she is

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Fit with restrictions/recommenda	tions
in with restrictions recommenda	uions
Though following restrictions has not impediments to the job.	ve been revealed, in my opinion, these are
1	
2	
3	
However the employee should fo	llow the advice/medication that has
However the employee should fo been communicated to him/her. Review after Currently Unfit.	
However the employee should fo been communicated to him/her. Review after Currently Unfit.	
However the employee should fo been communicated to him/her. Review after Currently Unfit.	llow the advice/medication that has
However the employee should fo been communicated to him/her. Review after Currently Unfit. Review after	Dr. S.H. & S. CultA
However the employee should fo been communicated to him/her. Review after Currently Unfit. Review after	allow the advice/medication that has



MULTI SPECIALITY HOSPITAL

Bhopal-462023 (M.P.) 2909795, 7222909796, 9303135719



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5.8.2023

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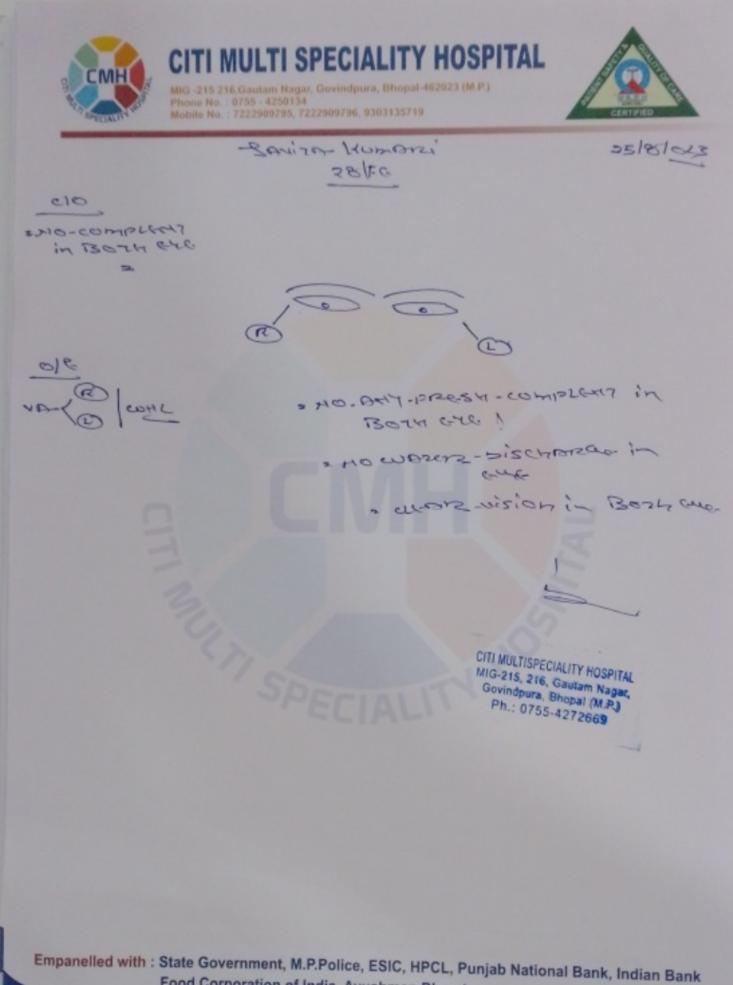
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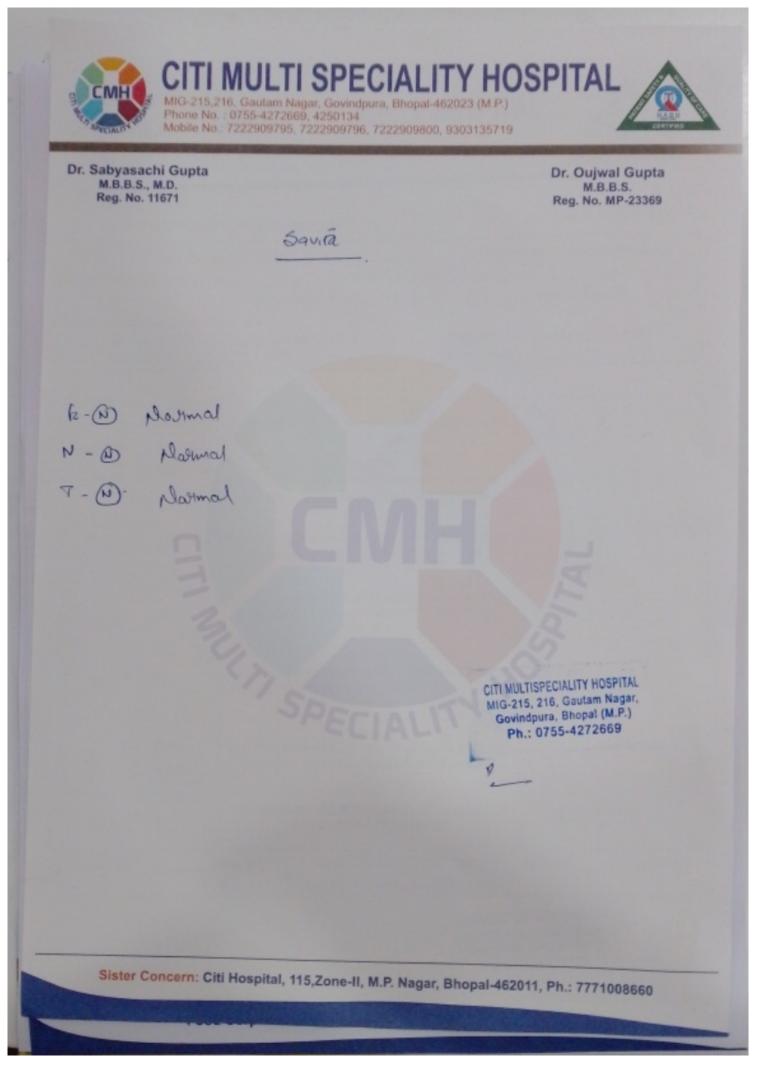
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Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat

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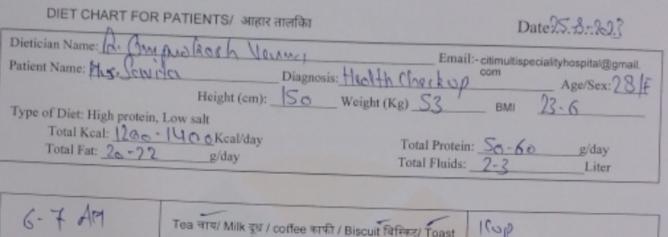
Food Corporation of India, Ayushman Bharat





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	CITI MULTISPE	ECIALITY HOSPITAL
Only Oil :g	m/day Salt नमक: 2-3 gm/day 5 gm = 1 चम्मच (छोटा)	Ghee : gm/day
Bettling	Milk दूध/ Butter Milk खांख / Dry fruit / Milk Shake मिल्क शेक / Fruit फल / वादाम + अखरोट	Icop
Dinnal	Roti रोटी / Rice चर्बिल / Khichri खिनड़ी / Sabji सब्जी / Dal बाल / Curd बही (ताजा) / Salad सलाव/ Daliya दलिया	Some as Lours
6-709	नेहत जाय/ Milk दूध / coffee काफी / Ghana +Puffed Rice अज्ञा + मुरमुरा / Dhokla डोकला / Uttapam उत्तपम / Cheela चीला/ Green Chutney हरी चटनी/ सखाने	loop
	Fruit फल / अंकुरित अनाज (सूंग/चना/मोड) / Sattu सत्तू / Frui Chaat क्रूट चाट / Coconut Water नारियल पानी / Butter Milk खोछ	Coled (Bowl
2-2:30 PA	Roti रोटी / Rice चायल (माट रहित) / Khichri खिनही / Sab सब्जी / Dal दाल / Curd वही (ताजा) / Salad सलाद	12547-3-4
7-8 AM	Milk दूध/ Soup सूप/ Poha पोहा/ Daliya दत्तिया/ bread ब्रेड Egg अंडा / Idli इड़ली / Upma उपमा / आलू पराठा/ पनीर	+ JENass / IBen)
0 1	rea चाय/ Milk दूध / coffee काफी / Biscuit बिस्किट/ Toa टोस्ट / Bread ब्रेड (येहूं चाली)	st 2 Sile /

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Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat

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संतुलित आहार व नियम

- आहार 2 बार के स्थान पर 4 से 6 भाग में विभाजित करके खायें, पेट भर न खायें तथा बहुत भूख लगाने की राह माँ देखें |
- भोजन हमेशा सीधे बैठकर धीरे धीरे अच्छे से चबाकर खायें तथा भोजन के समय टी.वी. न देखें |
- रात का भोजन सोने से लगभग 1 से 2 घंटे पहले कर लें तथा भोजन के बाद न तो आराम करें और न ही सीधे झुकें |
- यथा संभव सुबह एवं शाम दोनों समय कम से कम आधा घंटा पैदल चलें या हल्का व्यायाम करें।
- अपना वजन नियंत्रित रखें एवं मोटापे से बचें, फास्ट फ़ूड के स्थान पर संतुलित आहार लें |

लिवर के स्वास्थ्य हेतु भोजन का चयन :

- गेहूं के आटे में 1.3 के अनुपात में सोयाबीन आटा व चना आटा मिलाकर उपयोग करें।
- खाने के ऊपर से नमक का उपयोग न करें, चिप्स, प्रोसेस्ड चीज, कड़क चाय, काफी, आचार, पापड़,
 टमेटो केचप, कोक, कार्बोनेटेड ड्रिंक्स का सेवन कम करें एवं अल्कोहल, तम्बाकू का सेवन न करें |
- आहार में अंकुरित अनाज का उपयोग करें, सोया मिल्क तथा नारियल तेल को भोजन में शामिल करें |

नोट:

- 1. किसी भी चीज में ऊपर से नमक न डालें |
- 2. अत्यधिक तेज मसालों का उपयोग न करें।
- अत्यधिक तली हुई चीजें जैसे समोसा,कचोरी,सेव,पपड़,भजिया, आदि का उपयोग न करें |
- खाने में अंकुरित अनाज, सोयाबिन, पनीर, दालें, दूध व दूध से बने पदार्थ, सत्तू पाउडर, सिके चने आदि का उपयोग करें |

CITI MULTISPECIALITY HOSPITAL MIG-215, 216, Gautam Nagar, Govindpura, Bhopal (M.P.) Ph.: 0755-4272669



TI MULTI SPECIALITY HOSPITAL

MIG -215 216,Gautam Nagar, Govindpura, Bhopal-462023 (M.P.) Phone No. : 0755 - 4250134 Mobile No. : 7222909795, 7222909796, 9303135719



Age/Sex Date

Name of Patient ; MRS. SAVITA KUMARI : 28 years/F : 25/08/2023

USG ABDOMEN AND PELVIS

Liver : The liver is normal in size, shape, and increase in echogenecity. Intra and extra hepatic billiary and vascular channels are normal. No gross or diffuse mass lesions seen.

Gall Bladder : Normal in size, shape and echotexture .

Spleen . Normal in size, shape and echotexture

Pancreas : Normal in size, shape and echotexture.

Both the kidneys are normal in size, shape, axis and position. Cortico Kidneys medullary differentiation are normal.

Urinary bladder : : Urinary bladder is normal and contents are echofree

Uterus & Ovaries : Normal size, shape and echotexture

IVC & ABDOMINAL AORTA:-I'.C and abdominal aorta are normal.

Retroperitoneum: No lymphacienopathy seen. No free fluid or ascites seen.

IMPRESSION ;- NORMAL STUDY

CONSULTANT SONOLOGIST

For Emergency Contact: 7771008660 Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487772-73

Empanelled with : State Government, M.P.Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporation of India, Ayushman Bharat





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NAME;- MRS. SAVITA KUMARI

AGE 28Y/F

REF BY;- HEALTH INSURANCE

DATE;-25/08/2023

2D- ECHO COLOUR DOPPLER EVALUATION:-

- All cardiac valves are normal
- Normal great vessel relationship
- Normal LV Four chambered heart.
- * Normal LV size with normal LV function LVEF-75%
- No intracardiac shunt.
- No LV thrombus or clot seen
- No Pericardium effusion
- * FINAL IMPRESSION
- NORMAL LV SIZE WITH NORMAL LV FUNCTION LVEF-75%

Dr. S S Gupta, MD

Consultant Echocardiologis

For Emergency Contact: 7771008660

Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487772-73

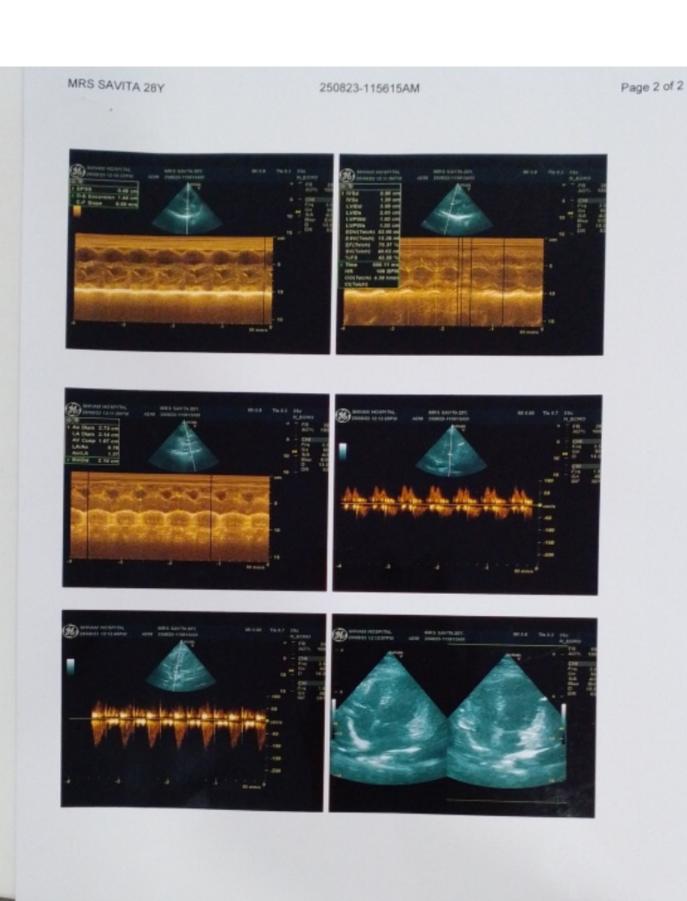
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SHIVAM HOSPITAL, MIG-215 GAUTAM NAGAR, BHOPAL

Name: MRS SAVITA 28Y Birthdate: Perf.Physician: Patient Id: 250823-115615AM Sex: Female Ref.Physician: Date: 25/08/2023 Accession #: Operator: ADM

M-Mode & PW		
D-E Excursion	1.44 cm	
E-F Slope	0.08 m/s	
EPSS	0.48 cm	
Ao Diam	2.73 cm	
LA Diam	2.14 cm	
AV Cusp	1.07 cm	
LA/Ao	0.78	
Ao/LA	1.27	
RVIDd	2.14 cm	
IVSd	0.96 cm	
LVIDd	3.59 cm	
LVPWd	1.02 cm	
IVSs	1.39 cm	
LVIDs	2.03 cm	
LVPWs	1.02 cm	51.522.0058
EDV(Teich)	53.90 ml	
ESV(Teich)	13.28 ml	
EF(Teich)	75.37%	
%FS	43.28 %	
SV(Teich)	40.62 ml	
lime	556.11 ms	
IR		
CO(Teich)	108 BPM 0.00 l/min	

Print Date: 8/25/2023



8/25/2023

Print Date: 8/25/2023

DENTAL DEN AN INTERNATIONAL DENTAL SPA Dr. Prashant Tripathi Professor, MDS (Endedontist) College of Dental Sciences Implantologist, Digital & LASER Smile Design Expert, Motivational Speaker, Social Influencer, Celebrity Dentist. + +81 8120202052	Empaneled with CGHS, CAPF, ESIS, ECHS, BSNL & CPRI CBCT / OPG Diagnostic Centre
Dr. Pooja Tripathi MDS (Pedodontist) Child Dental Specialist Director (Admin.) Denasia i Reader - R.K.D.F. Dental College # +91 8120202014	For Appointment : #+91 9111111023 www.denasia.org I www.denasia.in Time : 9.00 am to 10.00 pm
BEST MEDICAL STUDENT AWARD BY MAHARASHTRA GOVERNMENT	BEST DENTIST AWARD BY SHRI PRAMOD SAWANT HON. CHIEF MINISTER, GOA arth - Biaora - Rajgart - Indore
Name: Shavita Kumari Age/ CIC pt opent to Cloan her teath	/Sex: 28/F Date: 25/8/23 O.P.D. NO.: 0169
CIE Stain ++, calcullus ++.	Rx mw - Chlouchexdri mouthwarth.
INVESTIGATION ADVISE X-Ray / OPG / CBCT DENTAL TREATMENT PLANNING Dral Prophylaxis Filling Extraction	
R.P.D. or F.P.D. RCT Scaling or Flap Surgery Ortho Treatment Denture	1
Implant LASER Teeth Whitening AESTHETIC TREATMENT PRP	Der Juget.
Peeling Botax Filler LASER	

💽 GPS Map Camera



Bhopal, Madhya Pradesh, India

M-160, M-160, Gautam Nagar, Housing Board Colony, Gautam Nagar, Housing Board Colony, Bhopal, Madhya Pradesh 462023, India Lat 23.235108° Long 77.44116° 25/08/23 01:43 PM GMT +05:30

🔋 GPS Map Camera



Bhopal, Madhya Pradesh, India

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