



BHAILAL AMIN
GENERAL HOSPITAL



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 5929	MR Number	: 23215235	Patient Name:	DIVYA PARMAR
Age	: 30	Sex	: Female	Height	: 154
Weight	: 53.7	Ideal Weight	: 54	BMI	: 22.64
Date	: 23/09/2023				

Dr.

null

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

For Appointment & Inquiry : 080 69 70 70 70



**BHAILAL AMIN
GENERAL HOSPITAL**

ESTD. 1964



ECU Number : 5929 MR Number : 23215235 Patient Name: DIVYA PARMAR
Age : 30 Sex : Female Height : 154
Weight : 53.7 Ideal Weight : 54 BMI : 22.64
Date : 23/09/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : MOTHER IS DIABETIC. MOTHER IS HEALTHY

Habits : NIL
Gen.Exam. : NONE
B.P : 100/70 mm Hg
Pulse : 78/MIN REG
Others : SPO2 98 %
C.V.S : NAD
R.S: : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
S : NAD
Advice :

For Appointment & Inquiry : 080 69 70 70 70



ECU Number : 5929 MR Number : 23215235 Patient Name: DIVYA PARMAR
 Age : 30 Sex : Female Height : 154
 Weight : 53.7 Ideal Weight : 54 BMI : 22.64
 Date : 23/09/2023

Ophthalmic Check Up :	Right	Left
Ext Exam		NIL
Vision Without Glasses	6/6	6/6
Vision With Glasses	N.6	N.6
Final Correction	14.6	14.6
Fundus	NORMAL	
Colour Vision	NORMAL	
Advice	NIL	

Orthopedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



Patient Name : Mrs. DIVYA PARMAR
 Gender / Age : Female / 30 Years 2 Months 10 Days
 MR No / Bill No. : 23215235 / 242023538
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 161016
 Request Date : 23/09/2023 09:31 AM
 Collection Date : 23/09/2023 10:11 AM
 Approval Date : 23/09/2023 07:52 PM

Pap Smear

Test	Result	Units	Biological Ref. Range
Pap Smear	Pap Smear Screening Report / Cervico-Vaginal Cytology...		
	Cyto No : P/1757/23 Received at 2:50 pm.		
	Clinical Details : No complain P/V findings : Cx. / Vg. -NAD. LMP : 1 week back		
	TBS Report / Impression :		
	* Satisfactory for evaluation; transformation zone components identified.		
	* No significant inflammatory cellularity.		
	* No epithelial cell abnormality favouring squamous intraepithelial lesion or frank malignancy (NILM).		

Note / Method :

The material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bethesda system (Modified 2014)

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.



Patient Name : Mrs. DIVYA PARMAR
Gender / Age : Female / 30 Years 2 Months 10 Days
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Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 161016
Request Date : 23/09/2023 09:31 AM
Collection Date : 23/09/2023 10:11 AM
Approval Date : 23/09/2023 04:10 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	10.9	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	5.49	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	37.9	%	36 - 46
Mean Corpuscular Volume (MCV)	69.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	19.9	pg	27 - 32
MCH Concentration (MCHC)	28.8	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	16.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	41.9	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	7.03	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	55	%	40 - 80
Lymphocytes	40	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	03	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	3.90	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.81	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.09	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.21	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.1	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	309	thou/cmm	150 - 410
Smear evaluation	Adequate		
Remarks	Hypochromia (+), Microcytosis (+), Anisocytosis (+).		
ESR	28	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mrs. DIVYA PARMAR
Gender / Age : Female / 30 Years 2 Months 10 Days
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathologic; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Ameer Soni
MD (Path)

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Patient Name	: Mrs. DIVYA PARMAR	Type	: OPD
Gender / Age	: Female / 30 Years 2 Months 10 Days	Request No.	: 161016
MR No / Bill No.	: 23215235 / 242023538	Request Date	: 23/09/2023 09:31 AM
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Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	AB		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check`s group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose			
Fasting Plasma Glucose	82	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	96	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Heamoglobin (HbA1c)	5.5	%	
estimated Average Glucose (e AG) *	111.15	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.27	mg/dL	0 - 1
Bilirubin - Direct	0.08	mg/dL	0 - 0.3
Bilirubin - Indirect	0.19	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	16	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	16	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	93	U/L	42 - 98
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	21	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	8.18	gm/dL	6.4 - 8.2
Albumin	3.93	gm/dL	3.4 - 5
Globulin	4.25	gm/dL	3 - 3.2
A : G Ratio	0.92		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	91	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	181	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	52	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	129	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	117	mg/dL	1 - 100
VLDL Cholesterol (calculated)	18.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.25		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	3.48		3.5 - 5

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	17	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.39	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	4.3	mg/dL	2.2 - 5.8

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.32	ng/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (ng/ml)</i>			
1 - 3 days	: 0.1 - 7.4		
1-11 months	: 0.1 - 2.45		
1-5 years	: 0.1 - 2.7		
6-10 years	: 0.9 - 2.4		
11-15 years	: 0.8 - 2.1		
16-20 years	: 0.8 - 2.1		
Adults (20 - 50 years)	: 0.7 - 2.0		
Adults (> 50 years)	: 0.4 - 1.8		
Pregnancy (in last 5 months)	: 1.2 - 2.5		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroxine (T4)	9.17	mcg/dL	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (mcg/dL)</i>			
1 - 3 days	: 11.8 - 22.6		
1- 2 weeks	: 9.8 - 16.6		
1 - 4 months	: 7.2 - 14.4		
4 - 12 months	: 7.8 - 16.5		
1-5 years	: 7.3 - 15.0		
5 - 10 years	: 6.4 - 13.3		
10 - 20 years	: 5.6 - 11.7		
Adults / male	: 4.6 - 10.5		
Adults / female	: 5.5 - 11.0		
Adults (> 60 years)	: 5.0 - 10.7		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroid Stimulating Hormone (US-TSH)	3.77	microIU/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference interval (microIU/ml)</i>			
Infants (1-4 days)	: 1.0 - 39		
2-20 weeks	: 1.7 - 9.1		
5 months - 20 years	: 0.7 - 6.4		
Adults (21 - 54 years)	: 0.4 - 4.2		
Adults (> 55 years)	: 0.5 - 8.9		
<i>Pregnancy :</i>			
1st trimester	: 0.3 - 4.5		
2nd trimester	: 0.5 - 4.6		
3rd trimester	: 0.8 - 5.2		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

--- End of Report ---

Dr. Ameet Soni
MD (Path)



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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	20	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	1.010		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

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MD (Path)



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Pap Smear

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Pap Smear

Pap Smear Screening Report / Cervico-Vaginal Cytology...

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Received at 2:50 pm.

Clinical Details : No complain
P/V findings : Cx. / Vg. -NAD.
LMP : 1 week back

TBS Report / Impression :

- * Satisfactory for evaluation; transformation zone components identified.
- * No significant inflammatory cellularity.
- * No epithelial cell abnormality favouring squamous intraepithelial lesion or frank malignancy (NILM).

Note / Method :

The material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bethesda system (Modified 2014)

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.



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Computer Radiography

Ultra Sensitive Colour Doppler

Ultra High Resolution Sonography

Multi-Detector CT Scan

Mammography

Interventional Radiology

Digital Subtraction Angiography

Foetal Echocardiography

Echocardiography

Patient No. : 23215235 Report Date : 23/09/2023

Request No. : 190081909 23/09/2023 9.31 AM

Patient Name : Mrs. DIVYA PARMAR

Gender / Age : Female / 30 Years 2 Months 10 Days

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Priyanka

Dr. Priyanka Patel, MD.
Consultant Radiologist



H-2015-0207

MC-3004

F-2021-0037

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STATE OF GUJARAT



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- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23215235 Report Date : 23/09/2023
 Request No. : 190081822 23/09/2023 9.31 AM
 Patient Name : **Mrs. DIVYA PARMAR**
 Gender / Age : Female / 30 Years 2 Months 10 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.
 Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

No ascites.

COMMENT:

• **No obvious abnormality.**

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Dr. Ravij Patel, M.D
 Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23215235 Report Date : 23/09/2023
 Request No. : 190081822 23/09/2023 9.31 AM
 Patient Name : Mrs. DIVYA PARMAR
 Gender / Age : Female / 30 Years 2 Months 10 Days

Mammography (Both Breast)

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show scattered fibro glandular parenchyma.
 No obvious focal mass seen on either side.
 No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.
 No obvious skin thickening or nipple retraction seen.
 Bilateral benign axillary lymph nodes seen.

IMPRESSION:

No obvious focal mass in breasts.
BI-RADS category 2.

Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, 1- negative, 2- benign, 3- probably benign (require short term follow up), 4- suspicious (require further evaluation with biopsy), 5- highly suspicious for malignancy, 6- biopsy proven malignancy.

INFORMATION REGARDING MAMMOGRAMS:

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
NOT VALID FOR MEDICO-LEGAL PURPOSES
CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD.
Consultant Radiologist





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GENERAL HOSPITAL



Patient No. : 23215235 Report Date : 23/09/2023
Request No. : 190081801 23/09/2023 9.31 AM
Patient Name : **Mrs. DIVYA PARMAR**
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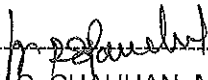
Echo Color Doppler

MITRAL VALVE : NORMAL, NO MR, NO MS
AORTIC VALVE : TRILEAFLET, NO AR, NO AS
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LV SIZE AND SYSTOLIC FUNCTION LVEF -- 65%, NO
RESTING REGIONAL WALL MOTION ABNORMALITY
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER FLOW MAPPING : NO MR // AR, TRIVIAL TR, NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION, LVEF --65%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL ALL CARDIAC VALVES, NO MITRAL // AORTIC STENOSIS
5. NORMAL DIASTOLIC FUNCTION
6. NORMAL RIGHT HEART SIZE AND RV PRESSURES
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.



Dr. V. C. CHAUHAN, M.D., CARD.

For Appointment & Inquiry : 080 69 70 70 70

Name: Divya patmar
Patient ID: Ecu 23215235

23.09.2023 11:56:01
Standard 12-Lead

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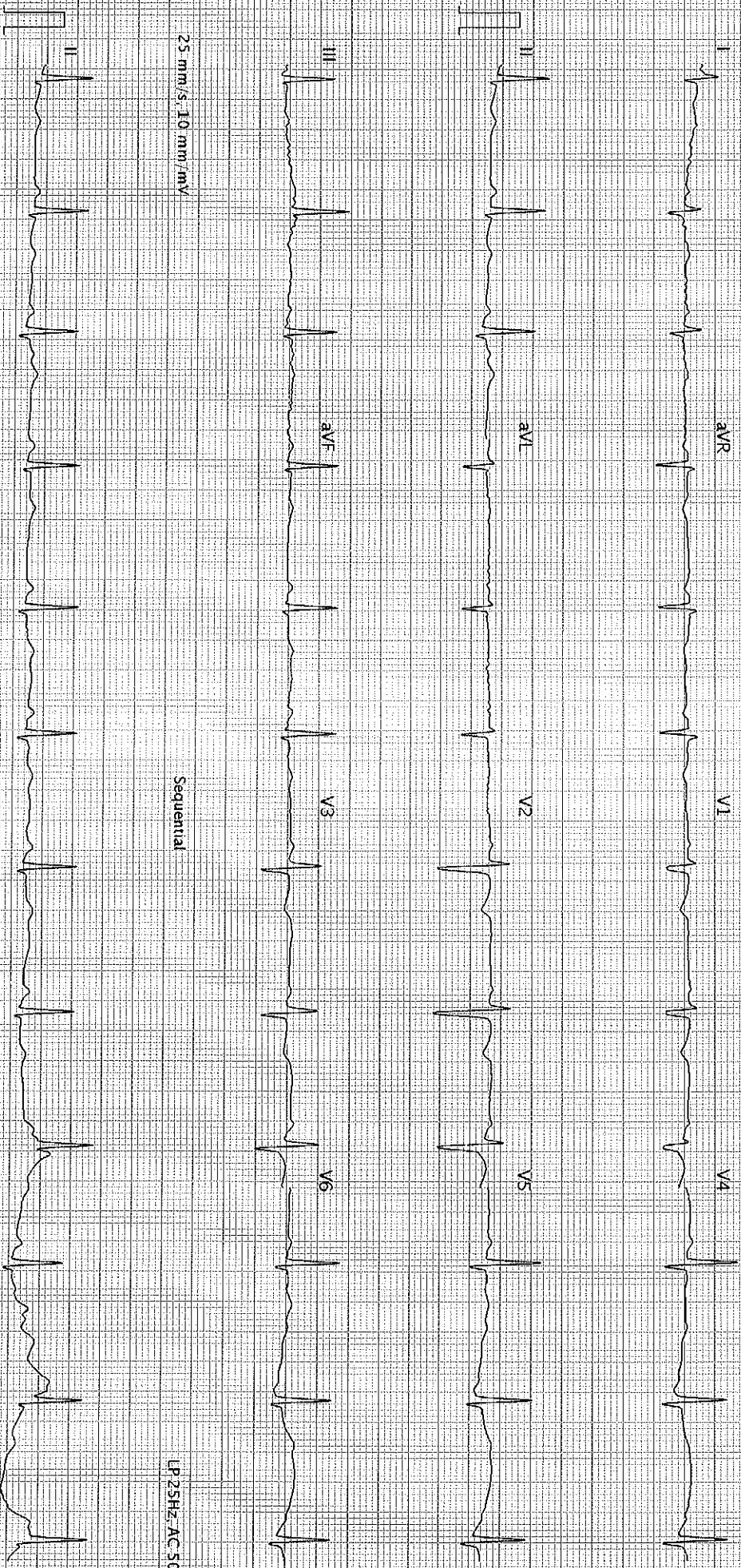
Age: 030Y
Gender: Female
Ref. phys:

Pacemaker: Unknown

Remark:

HR: 68 bpm
P axis: 47°
QRS axis: 90°
T axis: 29°
RR: 885 ms
P: 93 ms
PR: 132 ms
QR: 84 ms
QT: 390 ms
QTcB: 415 ms

Unconfirmed report



25 mm/s, 10 mm/mV

Sequential

LP25HZ AC 50HZ

25 mm/s, 10 mm/mV

LP25HZ AC 50HZ

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