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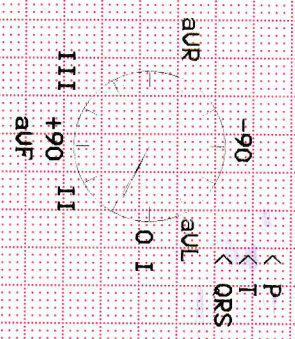
SEETHALAKSHMI B MED122270896 TEN90976252473 F RT 11/9/2023

MEDALL DIAGNOSTICS

AGE:

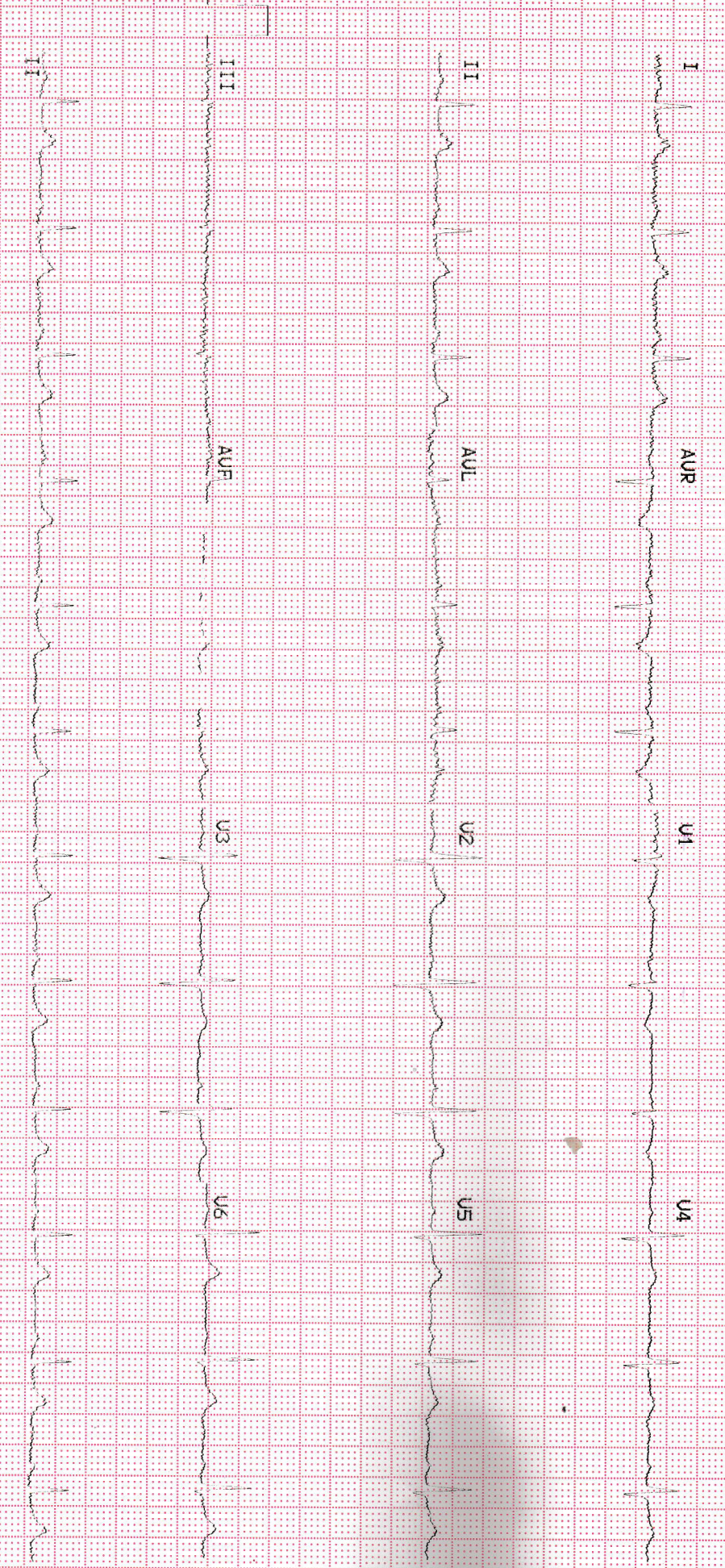
Measurement Results:

QRS	76 ms
QT/QTcB	388 / 421 ms
PR	166 ms
P	120 ms
RR/PP	832 / 845 ms
P/QRS/T	29 / 27 / 29 degrees



Interpretation:
 12SL - Interpretation
 Normal sinus rhythm
 Normal ECG

Unconfirmed report.



10. Function History

- a. Do you have pain or discomfort when lifting or handling heavy objects? Yes No
 - b. Do you have knee pain when squatting or kneeling? Yes No
 - c. Do you have back pain when forwarding or twisting? Yes No
 - d. Do you have pain or difficulty when lifting objects above your shoulder height? Yes No
 - e. Do you have pain when doing any of the following for prolonged periods (Please circle appropriate response)
- | | | |
|---|---|--|
| •Walking : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | •Kneeling : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | •Squatting : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| •Climbing : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | •Sitting : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| •Standing : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | •Bending : Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
- f. Do you have pain when working with hand tools? Yes No
 - g. Do you experience any difficulty operating machinery? Yes No
 - h. Do you have difficulty operating computer instrument? Yes No

B. CLINICAL EXAMINATION :

pube 71

a. Height <input style="width: 50px;" type="text" value="158"/>	b. Weight <input style="width: 50px;" type="text" value="67.5"/>	Blood Pressure <input style="width: 100px;" type="text" value="115/80"/> mmhg
Chest measurements: a. Normal <input type="checkbox"/>	b. Expanded <input type="checkbox"/>	
Waist Circumference <input style="width: 100px;" type="text" value="-"/>	Ear, Nose & Throat <input type="checkbox"/>	<input style="width: 100px;" type="text" value="Normal"/>
Skin <input style="width: 100px;" type="text" value="Normal"/>	Respiratory System <input type="checkbox"/>	<input style="width: 100px;" type="text" value="Normal"/>
Vision <input style="width: 100px;" type="text" value="Normal"/>	Nervous System <input type="checkbox"/>	<input style="width: 100px;" type="text" value="Normal"/>
Circulatory System <input style="width: 100px;" type="text" value="Normal"/>	Genito-urinary System <input type="checkbox"/>	<input style="width: 100px;" type="text" value="Normal"/>
Gastro-intestinal System <input style="width: 100px;" type="text" value="Normal"/>	Colour Vision <input type="checkbox"/>	<input style="width: 100px;" type="text" value="Normal"/>

Discuss Particulars of Section B :-

C. REMARKS OF PATHOLOGICAL TESTS:

Chest X-ray	<input style="width: 100px;" type="text" value="Normal"/>	ECG	<input style="width: 100px;" type="text" value="Normal"/>
Complete Blood Count	<input style="width: 100px;" type="text" value="13.20"/>	Urine routine	<input style="width: 100px;" type="text" value="Normal"/>
Serum cholesterol	<input style="width: 100px;" type="text" value="146"/>	Blood sugar	<input style="width: 100px;" type="text" value="F81 P.P-102"/>
Blood Group	<input style="width: 100px;" type="text" value="B positive"/>	S.Creatinine	<input style="width: 100px;" type="text" value="0.73"/>

D. CONCLUSION :


Any further investigations required	<input style="width: 150px;" type="text" value="NO"/>	Any precautions suggested	<input style="width: 150px;" type="text" value="NO"/>
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E. FITNESS CERTIFICATION

Certified that the above named recruit does not appear to be suffering from any disease communicable or otherwise, constitutional weakness or bodily infirmity except _____
 _____ . I do not consider this as disqualification for employment in the Company. S

Candidate is free from Contagious/Communicable disease

Date : 9.11.23



 Signature of Medical Adviser

SHIKANDAN, M.D. (M. Cario)
 No: 61785, Consultant Cardiologist



Name : Mrs. SEETHALAKSHMI B
PID No. : MED122270896
SID No. : 623026868
Age / Sex : 42 Year(s) / Female
Ref. Dr : MediWheel

Register On : 09/11/2023 9:43 AM
Collection On : 09/11/2023 10:23 AM
Report On : 10/11/2023 3:38 PM
Printed On : 10/11/2023 5:06 PM
Type : OP

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.02	10 ³ / μ l	< 0.2
Platelet Count (Blood/Impedance Variation)	292	10 ³ / μ l	150 - 450
MPV (Blood/Derived from Impedance)	07.17	fL	8.0 - 13.3
PCT (Automated Blood cell Counter)	0.21	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated ESR analyser)	18	mm/hr	< 20

BIOCHEMISTRY

BUN / Creatinine Ratio	12.0		
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	81.2	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F)	Negative	Negative
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Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	102.5	mg/dL	70 - 140
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INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative	Negative
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Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	8.8	mg/dL	7.0 - 21
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Creatinine (Serum/Modified Jaffe)	0.73	mg/dL	0.6 - 1.1
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Uric Acid (Serum/Enzymatic)	3.4	mg/dL	2.6 - 6.0
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Liver Function Test

Bilirubin(Total) (Serum)	0.39	mg/dL	0.1 - 1.2
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Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.13	mg/dL	0.0 - 0.3
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Bilirubin(Indirect) (Serum/Derived)	0.26	mg/dL	0.1 - 1.0
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SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	15.6	U/L	5 - 40
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SGPT/ALT (Alanine Aminotransferase) (Serum)	17.5	U/L	5 - 41
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GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	11.6	U/L	< 38
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R. Lavanya
Dr.R.Lavanya MD
 Consultant - Pathologist
 Reg No: 90632

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Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	107.9	U/L	42 - 98
Total Protein (Serum/Biuret)	6.80	gm/dL	6.0 - 8.0
Albumin (Serum/Bromocresol green)	3.50	gm/dL	3.5 - 5.2
Globulin (Serum/Derived)	3.30	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.06		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	146.6	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	117.5	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the usual circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	49.2	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	73.9	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	23.5	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	97.4	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.




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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	2.4		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/ Calculated)	1.5		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/Ion exchange HPLC by D10)	6.9	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood) 151.33 mg/dL

INTERPRETATION: 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. Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values. Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	0.98	ng/mL	0.7 - 2.04
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INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/ Chemiluminescent Immunometric Assay (CLIA))	10.98	µg/dl	4.2 - 12.0
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INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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TSH (Thyroid Stimulating Hormone) (Serum /Chemiluminescent Immunometric Assay (CLIA))	1.81	μIU/mL	0.35 - 5.50
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INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values<0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.


CLINICAL PATHOLOGY

Urine Analysis - Routine

Colour (Urine)	Pale Yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Protein (Urine)	Negative		Negative
Glucose (Urine)	Negative		Negative
Pus Cells (Urine)	2-3	/hpf	NIL
Epithelial Cells (Urine)	3-4	/hpf	NIL
RBCs (Urine)	Nil	/hpf	NIL

-- End of Report --




Dr.R.Lavanya MD
Consultant - Pathologist
Reg No: 90632

Name	MRS.SEETHALAKSHMI B	ID	MED122270896
Age & Gender	42Y/FEMALE	Visit Date	09 Nov 2023
Ref Doctor Name	MediWheel		

Thanks for your reference

SONOGRAM REPORT

WHOLE ABDOMEN

Poor penetration of USG due to thick abdominal wall

Liver: The liver is normal in size and shows uniform echotexture with no focal abnormality. There is no intra or extra hepatic biliary ductal dilatation.

Gallbladder The gall bladder is partially distended with no demonstrable calculus. Wall thickness appears normal.(Post prandial Status).

Pancreas The pancreas shows a normal configuration and echotexture.

The pancreatic duct is normal.

Spleen The spleen is normal.

Kidneys The right kidney measures 9.0 x 4.5 cm. Normal architecture.

The collecting system is not dilated.

The left kidney measures 10.3 x 5.0 cm. Normal architecture.

The collecting system is not dilated.

Urinary bladder: The urinary bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

Uterus: The uterus appears bulky, and measures 11.2 x 7.2 cm.

The endometrium measures 6.3mm in thickness.

A hypoechoic lesion measuring 6.2 x 6.2cm noted in the anterior

Name	MRS.SEETHALAKSHMI B	ID	MED122270896
Age & Gender	42Y/FEMALE	Visit Date	09 Nov 2023
Ref Doctor Name	MediWheel		

myometrium.

Ovaries The right ovary measure 2.6 x 2.8 cm.
The left ovary not well imaged .
Parametria are free.

RIF: No mass or fluid collection is seen in the right iliac fossa.
The appendix is not visualized.
There is no free or loculated peritoneal fluid.
No para aortic lymphadenopathy is seen.

IMPRESSION

➤ Bulky uterus with fibroid - for follow up.

DR.T.ANNIE STALIN MBBS.,F.USG.,
SONOLOGIST.

Name	MRS.SEETHALAKSHMI B	ID	MED122270896
Age & Gender	42Y/FEMALE	Visit Date	09 Nov 2023
Ref Doctor Name	MediWheel		

Name	MRS.SEETHALAKSHMI B	ID	MED122270896
Age & Gender	42Y/FEMALE	Visit Date	09 Nov 2023
Ref Doctor Name	MediWheel		

Name	Mrs. SEETHALAKSHMI B	Customer ID	MED122270896
Age & Gender	42Y/F	Visit Date	Nov 9 2023 9:42AM
Ref Doctor	MediWheel		

Thanks for your reference

DIGITAL X- RAY CHEST PA VIEW

Trachea appears normal.

Cardiothoracic ratio is within normal limits.

Bilateral lung fields appear normal.

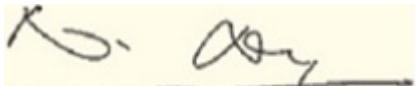
Both costophrenic angles appear normal.

Visualised bony structures appear normal.

Extra thoracic soft tissues shadow grossly appears normal.

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY DEMONSTRATED.**



DR. DANIEL STANLEY PETER, M.D.R.D.,
Consultant Radiologist
Reg. No: 82342