

Consultant Radiologist & Sonologist

**Dr. Roopa Goyal**

MD (Radio-Diagnosis)

**GOYAL**  
**DIAGNOSTICS**  
4-D ULTRASOUND \* COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

**Patient Name :** MRS. AARTI RATHORE

**Age / Gender :** 30 years / Female

**Endo ID :** 160905

**Organization :** Goyal Diagnostics Profile

**Referral :** MEDIWHEEL

**Collected Date & Time :** Dec 09, 2023, 11:28 a.m.

**Reported Date & Time :** Dec 09, 2023, 12:25 p.m.

**Sample ID :**



233430046



Test Description	Value(s)	Unit(s)	Reference Range
<b>HAEMATOLOGY</b>			
Hemoglobin (HB)	10.9	gm/dl	12.0 - 16.0
Erythrocyte (RBC) Count	3.78	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	33.0	%	42 - 52
Mean Cell Volume (MCV)	87.4	FL	78 - 100
Mean Cell Haemoglobin (MCH)	28.8	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	33.0	g/dl	32 - 36
Red Cell Distribution Width (RDW)	14.4	%	11.5 - 14.0
Total Leucocytes Count (WBC)	5600	Cell/cu.mm	4000 - 10000
Neutrophils	55	%	40 - 80
Lymphocytes	40	%	20 - 40
Monocytes	03	%	2 - 10
Eosinophils	02	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	7.0	fL	7.2 - 11.7
PCT	0.15	%	0.2 - 0.5
Platelet Count	218	10 <sup>3</sup> /ul	150 - 450

\*\*END OF REPORT\*\*

Dr. Kusum Heda  
M.D.(Patho.)

Dr. Nishi Prasad  
M.D.(Patho.)

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233430046

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**HAEMATOLOGY**

ESR	30	mm	0 - 20
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\*\*END OF REPORT\*\*

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**CLINICAL PATHOLOGY**

**General Examination**

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.015		1.005-1.030

**Chemical Examination**

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

**Microscopic Examination**

Pus cells (WBCs)	2-3	/hpf	0-4
Epithelial cells	4-5	/hpf	0-5
Red blood cells	NIL	/hpf	NIL
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Present		Absent
Other	Absent		Absent

**\*\*END OF REPORT\*\***

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**HAEMATOLOGY**

BLOOD GROUP ABO AND RHTYPE

Method : Gel Technique & Tube Agglutination

Medical Remark :

'B' POSITIVE

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

**\*\*END OF REPORT\*\***

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**Collected Date & Time :** Dec 09, 2023, 11:28 a.m.

**Reported Date & Time :** Dec 09, 2023, 12:26 p.m.

**Sample ID :**



Test Description	Value(s)	Unit(s)	Reference Range
<b>BIOCHEMISTRY</b>			
<b>LIPID PROFILE</b>			
Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	173.0	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	81.5	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	47.3	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	16.30	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	109.40	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	3.66		2.6-4.9
LDL/HDL Ratio Method : Calculated	2.31		0.5-3.4

**\*\*END OF REPORT\*\***

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<b>BIOCHEMISTRY</b>			
<b>LIVER FUNCTION TEST</b>			
Bilirubin - Total	0.73	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.22	mg/dL	0.0 - 0.30
Bilirubin - Indirect	0.51	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	15.5	U/L	5.0 - 40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	18.2	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	65.0	U/L	<b>MALE &amp; FEMALE</b> 4-19 YEAR: 54-369 U/L 20-59 YEAR: 42-98 U/L >60 YEAR: 53-141 U/L
Method : IFCC with Serum			
Total Protein	6.21	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	3.77	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.44	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.55		1.5 - 2.5
Method : Calculated			

**\*\*END OF REPORT\*\***

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**HAEMATOLOGY**

**HbA1c (GLYCOSYLATED HEMOGLOBIN)**

5.3

%

> 8% Action Suggested

7 - 8 % Good Control

6 - 7 % Near Normal Glycemia

< 6% Normal level

**BLOOD**

Method : Nephelometry Methodology

**Instrument: Mispa i2**

**Clinical Information:**

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

**AVERAGE BLOOD GLUCOSE**

105.41

90 - 120 Very Good Control

121 - 150 Adequate Control

151 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

**\*\*END OF REPORT\*\***

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Test Description	Value(s)	Unit(s)	Reference Range
<b>IMMUNOLOGY</b>			
T3-Triiodothyronine Method : CHEMILUMINOSCECE	0.84	ng/dL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINOSCECE	6.3	ug/dL	4.5 -10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINOSCECE	2.52	uIU/mL	0.35-5.50

**Interpretation:**

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves 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.

**\*\*END OF REPORT\*\***

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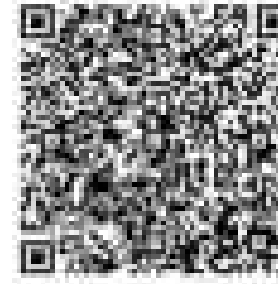
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**BIOCHEMISTRY**

**Urea** 24.6 mg/dL 10.0 - 40.0

Method : Uricase

**CREATININE** 0.76 mg/dL 0.60 - 1.40

Method : Serum, Jaffe

\*\*END OF REPORT\*\*

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**BIOCHEMISTRY**

<b>Uric Acid</b>	4.6	mg/dL	3.5-7.0
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Method : Uricase, Colorimetric

**\*\*END OF REPORT\*\***

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4-D ULTRASOUND \* COLOUR DOPPLER

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**BIOCHEMISTRY**

Gamma GT	19.3	U/L	5-36
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Method : G-Glutamyl-Carboxy-Nitroanilide

**Interpretation**

A high GGT level can help rule out bone disease as the cause of an increased ALP level, but if GGT is low or normal, then an increased ALP is more likely due to bone disease. Even small amounts of alcohol within 24 hours of a GGT test may cause a temporary increase in the GGT.

**\*\*END OF REPORT\*\***

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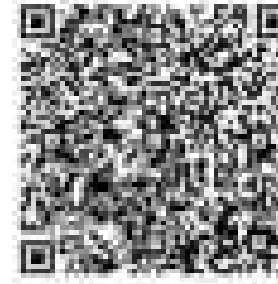
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**BIOCHEMISTRY**

Glucose fasting	108.2	mg/dL	70.0-110.0
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Method : Fluoride Plasma-F, Hexokinase

**\*\*END OF REPORT\*\***

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**Dr. Nishi Prasad**  
M.D.(Patho.)



Patient Name Mrs. AARTI RATHORIA 30/F

December 09, 2023

Time: 09:48:34

PR Interval: 0.16 sec

QRS Duration: 0.104 Sec

HR : 72 bpm

RR Interval: 0.82 sec

BP : 0 / 0 mmHg

P-QRS-T Axis (58)-(66)-(28) deg



INTERPRETATION

Sinus Rhythm, PR is normal, Normal QT interval, QRS Axis is normal.  
 Wide QRS, T wave inversion in Lead V1,  
 ECG not normal

DR MD

DR. ROOP KUMAR GOYAL (M.B.B.S., M.D.)  
 Cardiologist  
 07115600

\*Uncor.irmed Reporting, Refer to Clinician

10mm/mv, 25mm/sec NASAN-Simul-G-BL U 4.6/1.13



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4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

NAME - Mrs Aarti Rathoria

AGE- 30 Yrs

DATE - 09-12-2023

REF BY- Mediwheel

### SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS .

Dr. ROOPA GOYAL (B.B.S., M.D.)  
Consultant Radiologist & Sonologist  
RMC No. - 024/07/15600

धूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC



NAME – Aarti Rathoria

AGE – 30 Yrs

Date—09-12-2023

REF BY -- Mediwheel

**USG ABDOMEN-PELVIS**

**LIVER :** is normal in size 12.0 cm and shows homogeneous echotexture.  
No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion.  
The portal vein and common bile duct show normal caliber.

**GALL BLADDER :** distended and shows smooth walls. No evidence of sludge/ calculus .  
No evidence of pericholecystic collection.

**SPLEEN:** Normal in size and shows normal echopattern.

**PANCREAS:** Normal in size , shape and position. Parenchyma is homogeneous.

**RT.KIDNEY-** Normal in size, shape and position . Measures :-- 9.8 x 3.9 cm  
Cortex is homogeneous. Corticomedullary differentiation is maintained.  
pelvicalyceal system is not dilated.  
No evidence of any calculus is Seen .

**LT. KIDNEY-** Normal in size, shape and position. Measures :-- 9.2 x 4.3 cm  
Cortex is homogeneous. Corticomedullary differentiation is maintained.  
pelvicalyceal system is not dilated.  
**A Calculus of 4.4 mm is Seen in Upper calyx .**

**URINARY BLADDER :** is distended with Smooth walls.  
No evidence of diverticulum or calculus .

**UTERUS:** normal In Size Shape And Position .  
Myometrium is homogeneous and normal in thickness.  
Endometrium Is Normal .

**OVARY:** both ovaries are normal in size and appear normal.

**IMPRESSION :--**

- **Left Renal Calculus of 4.4 mm is Seen in upper calyx .**
- **Rest of the abdominal organs are within normal limits.**

(Adv- clinical correlation , further evaluation)

Please note :-- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no usg finding is pathogenomic . All findings are only S/O , hence advice These findings are observations at the time of study. Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .

Dr. ROOPA GOYAL (M.B.B.S., M.D.)  
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RMC No. -00457/15600



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NAME : MRS AARTI RATHORIA  
 AGE : 30 YEARS  
 SEX : FEMALE

DATE : 09-12-2023

REF BY :

### INTERPRETATION SUMMARY

- . NORMAL CHAMBER DIMENSIONS
- . INTACT IAS/ IVS
- . ALL VALVES ARE NORMAL.
- . TRACE TR
- . RVSP 25 MM HG
- . NO RWMA : LVEF 65 %
- . NO CLOT, VEGITATION.
- . NO PERICARDIAL EFFUSION
- . NORMAL PERICARDIUM .
- . SIZE OF MAIN PULMONARY ARTERY 21 MM .

### M.MODE/2D MEASUREMENTS (MM) & CALCULATIONS (ML)

LVID d	43.7	LVEDV	
LVID s	28.2	LVESV	
RVID(d)	---	SV	
IVS d	9.6	F.S	-
IVS S	14.0	EF	35%
LVPW d	10.5	C.O	65%
LVPWS	14.6	MITRAL VALVE	-
AORTIC ROOT	23.4	EF SLOPE	-
LEFT ATRIUM	31.7	OPENING AMPLITUDE	-
AORTIC CUSP OPENING	-	E.P.S.S	-

### DOPPLER MEASUREMENTS & CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY(cm/sec.)	GRADIENT P/M	REGURGITATION
MITRAL VALVE	NORMAL	E- 121 A- 74	-	NIL
TRICUSPID VALVE	NORMAL	198	-	TRACE
PUL VALVE	NORMAL	101	-	NIL
AORTIC VALVE	NORMAL	163	-	NIL

PULMONARY ARTERY	MITRAL VALVE AREA (BY P 1/2 T)
PEAK ACCELERATION TIME	PRESSURE HALF TIME
SYSTOLIC PRESSURE 25 MM HG	MVA

Dr. ROOPA GOYAL (M.B.B.S., M)  
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 RMC No.-00450715600

**भ्रूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा स**




 भारत सरकार  
 Government of India

Issue Date : 17/01/2013




आरती कुर्डीया  
 Aarti Kurdia  
 जन्म तिथि / DOB : 14/06/1993  
 महिला / Female


7047 1005 9817

मेरा आधार, मेरी पहचान

Dr. ROOPA GOYAL (M.B.B.S., M.D.)  
 Consultant Gynaecologist & Sonologist  
 RM 507/15600




 भारत सरकार  
 Unique Identification Authority of India

Prnti Date : 10/11/2022



पता: D/O: प्यारे लाल कुर्डीया, मजदूरीक गाँव  
 भाई का गिरि, बडी बस्ती, पुष्कर, अजमेर,  
 पुष्कर गाँव, अजमेर, राजस्थान, 305022  
 Address: D/O: Pyare Lal Kurdia, near  
 goanga bai ka mandir, badi basti, puskar,  
 ajmer, Pushkar Rural, Ajmer, Rajasthan,  
 305022

7047 1005 9817

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 1947



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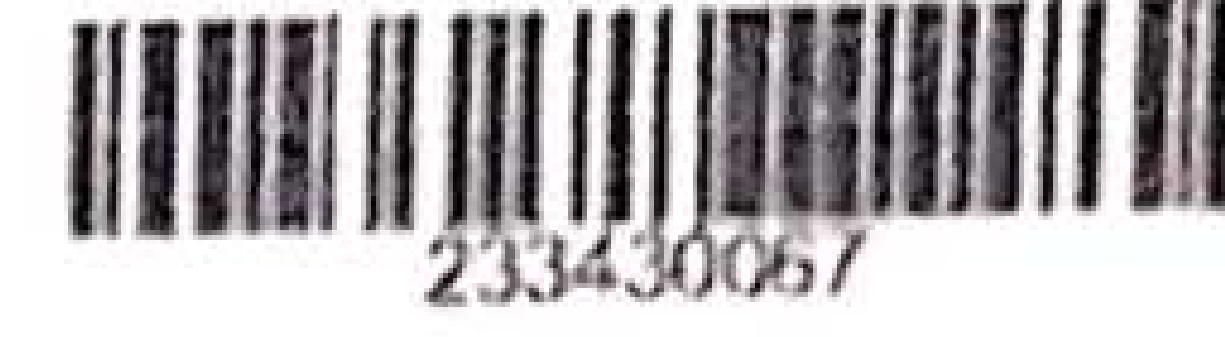
Organization : Goyal Diagnostics Profile

Referral : SELF

Collected Date & Time : Dec 09, 2023, 12:36 p.m.

Reported Date & Time : Dec 09, 2023, 01:07 p.m.

Sample ID :



233430067



Test Description	Value(s)	Unit(s)	Reference Range
<b>BIOCHEMISTRY</b>			
Blood Glucose-Post Prandial Method : Hexokinase	115.7	mg/dL	70 - 140

\*\*END OF REPORT\*\*

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M.D.(Patho.)

Dr. Nishi Prasad  
M.D.(Patho.)