


ज्योति सिंह
JYOTISHT
जनम तिथि/DOB: 08/08/1983
लिंग / GENDER: महिला / FEMALE




4312 8087 8888
मेरा आधार, मेरी पहचान

Jyotish


ज्योति सिंह
JYOTISHT

पता:
W/O कमल सिंह सिंह, 00,
00, बचलीपुर, पीपी
बचलीपुर,
उत्तरांचल - 246149

Address:
W/O Kamal Singh Singh, 00, 00,
Bachaliapur, Pauri Garhwal,
Uttarakhand - 246149

4312 8087 8888
MERA AADHAAR, MERI PEHACHAN

Navneet
Dr. NAVNEET KUMAR
M.B.B.S.
Reg.- UMC-7523
Chandan Diagnostic Centre, Haldwani



Since 1991

GENERAL PHYSICAL EXAMINATION



NAME OF COMPANY Bank of Baroda DATE 01-01-2021
 CLIENT NAME Jyoti Bisht s/o, d/o Kamal Singh Bisht
 DATE OF BIRTH 08-09-1983 AGE 38 YEARS
 ADDRESS Shewari Pur Parigamud 246149
 PHONE NO. 8954014482 OCCUPATION Housewife
 PHOTO ID AADHAR CARD NO. 4312 8067 8866

MARITAL STATUS Married
 MARK OF IDENTIFICATION male on chin
 HEIGHT 151 cm WEIGHT 69 kg BMI 30.3
 CHEST EXP 96 cm CHEST INS 99 cm ABDOMEN 99 cm
 WAIST 97 cm HIP 102 cm
 BLOOD PRESSURE 112/72 PULSE RATE 86 regular
 RESPIRATION RATE 18/m

FAMILY HISTORY	AGE OF LIVING	AGE AT DEATH	STATUS	YEAR
FATHER	60		Healthy	
MOTHER	50		Healthy	
BROTHER	35		Healthy	
SISTER			Healthy	
WIFE/HUSBAND	43		Healthy	
DEFORMITIES	No			
POLIO	YES/NO <input checked="" type="checkbox"/> IF YES GIVE DETAILS			
PARALYSIS	YES/NO <input checked="" type="checkbox"/> IF YES GIVE DETAILS			





Since 1991

HISTORY OF CLIENT

IF YES , GIVE DETAILS



TAKING MEDICINE
EYE VISION
DENTAL CHECKUP
BLOOD PRESSURE
DIABETES
THYROID

YES/NO ✓

YES/NO ✓
YES/NO ✓
YES/NO ✓

SURGERY

GALL BLADDER
APPENDIX
HARNIA
HYDROCLE
CATRACT
OPEN HEART SURGERY
BY PASS SURGERY
ANGIOGRAPHY
PILES
FISTULA
ACCIDENT
UTERUS

YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓
YES/NO ✓

HABITS

IF YES, GIVE DETAILS

SMOKING
ALCOHOL
PAN MASALA

YES/NO ✓
YES/NO ✓
YES/NO ✓

NUMBER OF CHILD DATE OF BIRTH OF LAST BABY

I am giving my blood sample empty stomach YES/NO ✓

URINE sample YES/NO ✓

ECG YES/NO ✓

FINAL IMPRESSION:

Certified that I examined that Jyoty Bishw w/o. KAMAC SINGH BISHW is presently in good health and free from any cardio-respiratory/ communicable ailment and in my opinion, he is **fit / unfit** to join any organization.

Jyoty
Client Signature

Navneet
Dr. NAVNEET KUMAR
M.B.B.S.
Reg.- UMC-7523

Chandan Diagnostic Centre, Haldwani
Signature of Medical Examiner
Name & Qualification of the medical examiner





Since 1991

CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: 9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTI BISHT BOBS2897	Registered On	: 01/Sep/2021 08:10:26
Age/Gender	: 37 Y 11 M 23 D /F	Collected	: 01/Sep/2021 08:46:42
UHID/MR NO	: CHLD.0000070119	Received	: 01/Sep/2021 09:48:04
Visit ID	: CHLD0053432122	Reported	: 01/Sep/2021 12:28:19
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	A
Rh (Anti-D)	POSITIVE

COMPLETE BLOOD COUNT (CBC) * , Blood

Haemoglobin	11.90	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	4,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE

DLC

Polymorphs (Neutrophils)	54.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	37.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	1.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	8.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE

ESR

Observed	24.00	Mm for 1st hr.
Corrected	16.00	Mm for 1st hr. < 20
PCV (HCT)	38.00	cc % 40-54

Platelet count

Platelet Count	1.42	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
PDW (Platelet Distribution width)	16.50	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	43.00	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.17	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE

RBC Count

RBC Count	3.34	Mill./cu.mm	3.7-5.0	ELECTRONIC IMPEDANCE
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Customer Care No.: 0522-6666600 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Chandan Diagnostic Centre

Plot No.-1051, Near Chaudhary Kothi

Nainital Road, HALDHWANI, Uttarakhand - 261002

Cont. No. - 9235400975

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Page 1 of 9

June 2021



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MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	107.40	fl	80-100	CALCULATED PARAMETER
MCH	35.60	pg	28-35	CALCULATED PARAMETER
MCHC	33.10	%	30-38	CALCULATED PARAMETER
RDW-CV	14.60	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	57.20	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,484.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	368.00	/cu mm	40-440	



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Dr. Vinod Ojha
MD Pathologist





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose Fasting <i>Sample: Plasma</i>	94.05	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.22	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	34.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	103	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%) NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiovascular, etc.

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MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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**Some danger of hypoglycemic reaction in Type I diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.



Clinical Implications:

- *Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- *With optimal control, the HbA 1c moves toward normal levels.
- *A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated
- *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity
- *Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- *Pregnancy d. chronic renal failure. Interfering Factors:
- *Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) * Sample:Serum	8.71	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.92	mg/dl	0.5-1.2	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	73.00	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	3.28	mg/dl	2.5-6.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum SGOT / Aspartate Aminotransferase (AST)	28.27	U/L	< 35	

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MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SGPT / Alanine Aminotransferase (ALT)	28.76	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	13.18	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.26	gm/dl	6.2-8.0	BIRUET
Albumin	4.22	gm/dl	3.8-5.4	B.C.G.
Globulin	3.04	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.39		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	68.06	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.49	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.27	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.22	mg/dl	< 0.8	JENDRASSIK & GROF

LIPID PROFILE (MINI) * , Serum

Cholesterol (Total)	227.59	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	41.50	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	156	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	29.71	mg/dl	10-33	CALCULATED
Triglycerides	148.57	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



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Dr. Vinod Ojha
MD Pathologist





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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	PALE YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic (5.0)			
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	OCCASIONAL			MICROSCOPIC EXAMINATION
Pus cells	OCCASIONAL			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			MICROSCOPIC EXAMINATION
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			MICROSCOPIC EXAMINATION

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2
(++++)	> 2

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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Blo. Ref. Interval	Method
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 Dr Vinod Ojha
 MD Pathologist



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Age/Gender	: 37 Y 11 M 23 D /F	Collected	: 01/Sep/2021 08:46:41
UHID/MR NO	: CHLD.0000070119	Received	: 02/Sep/2021 12:22:26
Visit ID	: CHLD0053432122	Reported	: 02/Sep/2021 13:45:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Blo. Ref. Interval	Method
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THYROID PROFILE - TOTAL **, Serum

T3, Total (tri-iodothyronine)	98.26	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	6.14	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	8.06	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.4-4.2	μIU/mL	Adults 21-54 Years
0.5-4.6	μIU/mL	Second Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
0.7-27	μIU/mL	Premature 28-36 Week
0.8-5.2	μIU/mL	Third Trimester
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



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Dr. Anupam Singh
M.B.B.S., M.D. (Pathology)





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Patient Name	: Mrs.JYOTI BISHT BOBS2897	Registered On	: 01/Sep/2021 08:10:27
Age/Gender	: 37 Y 11 M 23 D /F	Collected	: N/A
UHID/MR NO	: CHLD.0000070119	Received	: N/A
Visit ID	: CHLD0053432122	Reported	: 03/Sep/2021 13:41:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA **

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW:-

- Bilateral lung fields appear grossly unremarkable.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Bilateral hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

IMPRESSION:-

NORMAL SKIAGRAM IN PRESENT SCAN.

(Adv:- Clinico-pathological correlation and further evaluation).

***** End Of Report *****

(*) Test not done under NABL accredited Scope, () Test Performed at Chandan Speciality Lab.**

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



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Dr. Azim Ilyas (MBBS, MD Radiologist)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

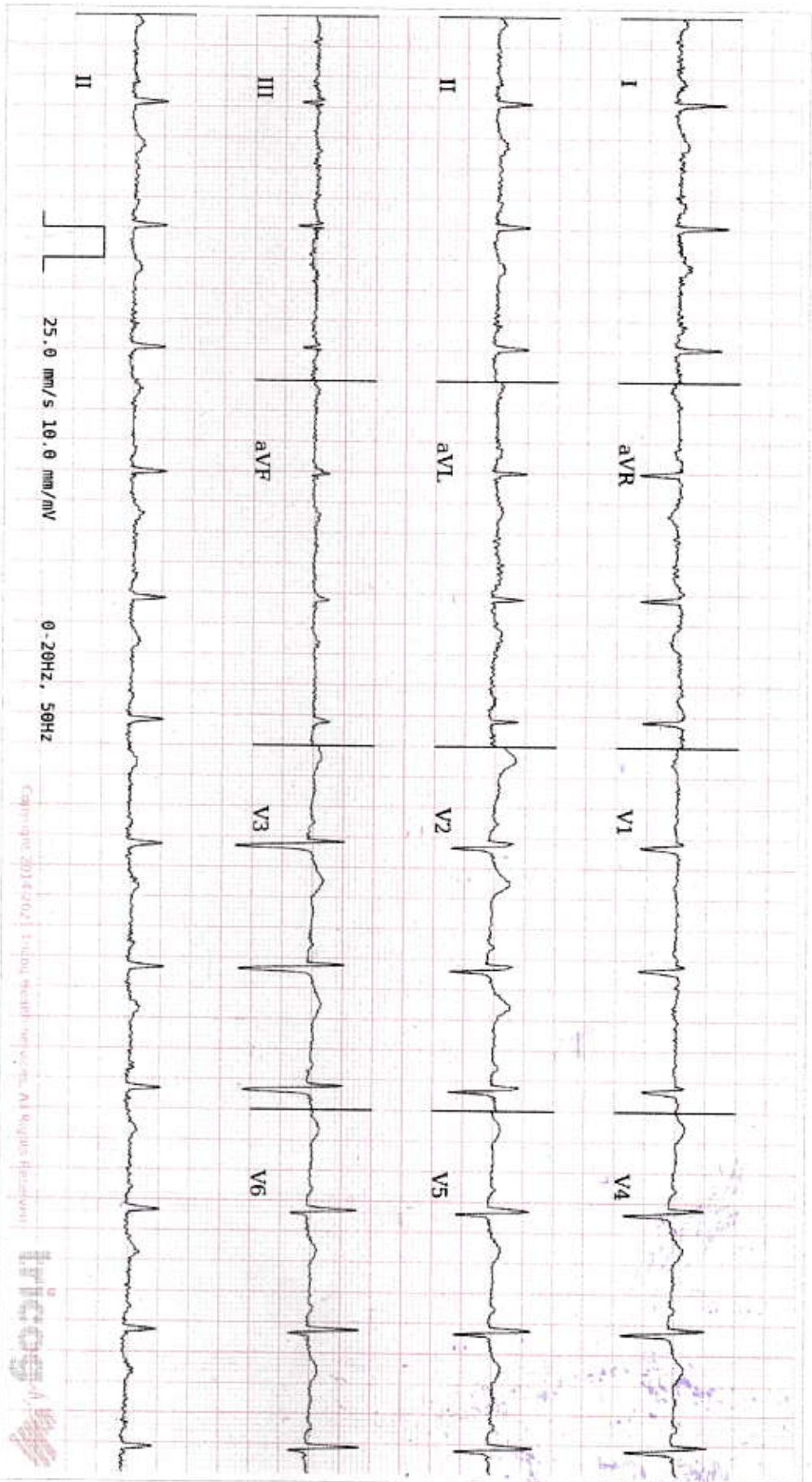
Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, QPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Conduction Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *



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Age / Gender: 37/Female
 Patient ID: CHLD0053432122
 Patient Name: Mrs. JYOTI BISHT BOBS2897
 Date and Time: 1st Sep 21 9:22 AM



AR: 75 bpm VR: 75 bpm QRSD: 72 ms QT: 408 ms QTc: 455 ms PRI: 134 ms P-R-T: 8° 20° 6°

25.0 mm/s 10.0 mm/mV 0.20Hz, 50Hz

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ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

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 Nainital Road, HALDWANI

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests. Contact: 0514-23640975

AUTHORIZED BY



Dr. Chait
 MD, DM: Cardiology
 63382

REPORTED BY

Prabhina S.K
 Dr. Prabhina S.K