

Date : 15-07-2023
MR NO : CWAN.0000031354



Department : GENERAL
Doctor :
Apollo Medical Centre
Expert Clinicians

Name : Ms. RACHNA DIXIT

Registration No :

Age/ Gender : 32 Y / Female

Qualification :

Consultation Timing: 08:46

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

RACHNA DIXIT
ID: 000313334

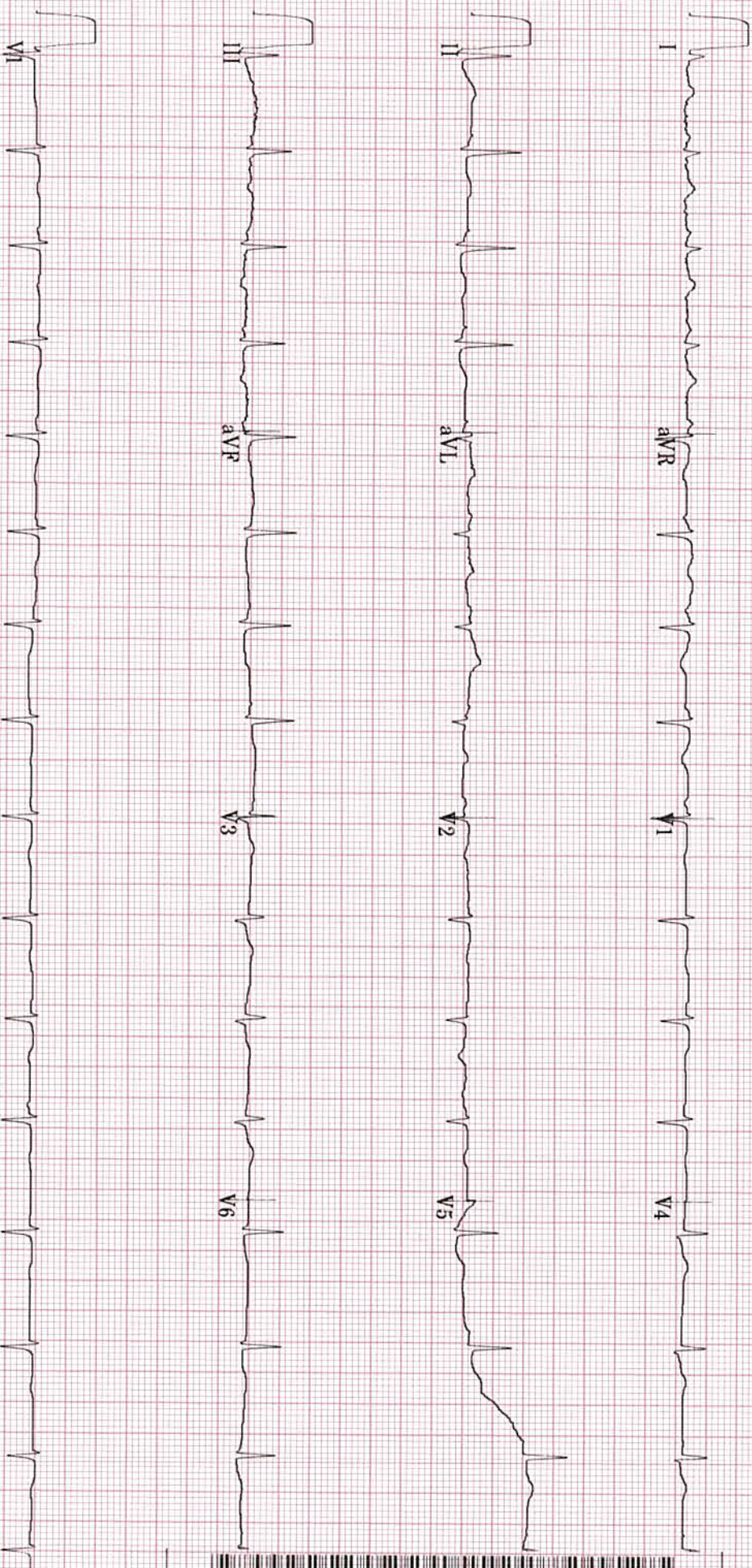
15-Jul-2023
10:54:03

95bpm

12 LEAD ECG

ECG

THE APOLLO CLINIC, WHITEFIELD, BANGALORE



20 Hz

25.0 mm/s

10.0 mm/mV

A-H+ S- 50Hz HR 46

4 by 2.5s + 1 rhythm 1d

MAG35 009C

ARROW



Patient Name : Ms.RACHNA DIXIT	Collected : 15/Jul/2023 09:04AM
Age/Gender : 32 Y 3 M 15 D/F	Received : 15/Jul/2023 11:40AM
UHID/MR No : CWAN.0000031354	Reported : 15/Jul/2023 04:03PM
Visit ID : CMAROPV692545	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8605657339	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	12.2	g/dL	12-15	Spectrophotometer
PCV	37.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.51	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	82	fL	83-101	Calculated
MCH	27	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	15.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,070	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

NEUTROPHILS	48.7	%	40-80	Electrical Impedance
LYMPHOCYTES	37.5	%	20-40	Electrical Impedance
EOSINOPHILS	4.5	%	1-6	Electrical Impedance
MONOCYTES	8.8	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2956.09	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2276.25	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	273.15	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	534.16	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	30.35	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	287000	cells/cu.mm	150000-410000	Electrical impedance

ERYTHROCYTE SEDIMENTATION RATE (ESR)	30	mm at the end of 1 hour	0-20	Modified Westgren method
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PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

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DEPARTMENT OF HAEMATOLOGY

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HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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UHID/MR No : CWAN.0000031354	Reported : 15/Jul/2023 03:38PM
Visit ID : CMAROPV692545	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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UHID/MR No : CWAN.0000031354	Reported : 15/Jul/2023 12:04PM
Visit ID : CMAROPV692545	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	83	mg/dL	70-140	HEXOKINASE
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Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	105	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control





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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	172	mg/dL	<200	CHO-POD
TRIGLYCERIDES	52	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	56	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	116	mg/dL	<130	Calculated
LDL CHOLESTEROL	106	mg/dL	<100	Calculated
VLDL CHOLESTEROL	10.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.08		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL	0.48	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.39	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	89.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.83	g/dL	6.6-8.3	Biuret
ALBUMIN	4.25	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.58	g/dL	2.0-3.5	Calculated
A/G RATIO	1.65		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.61	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	16.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.57	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.20	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.28	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.1	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	16.00	U/L	<38	IFCC



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Visit ID : CMAROPV692545	Status : Final Report
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.99	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.66	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	4.914	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



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UHID/MR No : CWAN.0000031354	Reported : 15/Jul/2023 05:18PM
Visit ID : CMAROPV692545	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Ms.RACHNA DIXIT	Collected : 15/Jul/2023 09:04AM
Age/Gender : 32 Y 3 M 15 D/F	Received : 15/Jul/2023 01:09PM
UHID/MR No : CWAN.0000031354	Reported : 15/Jul/2023 05:07PM
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DEPARTMENT OF CLINICAL PATHOLOGY


ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

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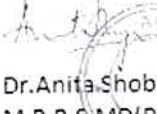
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
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***** End Of Report *****


Result/s to Follow:
PERIPHERAL SMEAR, GLUCOSE (POST PRANDIAL) - URINE, LBC PAP TEST (PAPSURE)



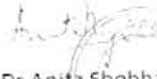
Dr. Prasanna
M.B.B.S, M.D
Consultant Pathologist



Dr. Anita Shobha Flynn
M.B.B.S MD(Pathology)
Consultant Pathologist



DR. SHIVARAJA SHETTY
M.B.B.S, M.D (Biochemistry)
CONSULTANT BIOCHEMIST



Dr. Anita Shobha Flynn
M.B.B.S, MD(Pathology)
Consultant Pathologist



Patient Name	: Ms. RACHNA DIXIT	Age	: 32 Y F
UHID	: CWAN.0000031354	OP Visit No	: CMAROPV692545
Reported on	: 15-07-2023 12:11	Printed on	: 15-07-2023 12:12
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. No definite calculi identified in this state of distension. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 9.8cm and parenchymal thickness measures 1.4cm.

Left kidney measures 10.5cm and parenchymal thickness measures 2.1cm.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 6.7x4.3x3.0cm. Myometrial echoes appear normal. The endometrial lining appears intact. Endometrium measures 8.3mm.

OVARIES: Both ovaries appear normal in size and echopattern.

Right ovary measures 3.0x1.7cm.

Left ovary measures 2.7x2.0cm.

No free fluid is seen.

Visualized bowel loops appears normal.

Patient Name : Ms. RACHNA DIXIT
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Adm/Consult Doctor :

Age : 32 Y F
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Printed on : 15-07-2023 12:12
Ref Doctor : SELF

IMPRESSION:

NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity , bowel gas , patient preparation and organ location .
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose
3. Printing mistakes should immediately be brought to notice for correction.

Printed on: 15-07-2023 12:11

---End of the Report---



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Patient Name : Ms. RACHNA DIXIT
UHID : CWAN.0000031354
Conducted By: :
Referred By : SELF

Age : 32 Y/F
OP Visit No : CMAROPV692545
Conducted Date : 15-07-2023 18:52

ECHO (2D & COLOUR DOPPLER)

DIMENSIONS	VALUES	VALUES(RANGE)	DIMENSIONS	VALUES	VALUES(RANGE)
AO(ed)	24mm	25 - 37 mm	IVS(ed)	09mm	06 - 11 mm
LA(es)	34mm	19 - 40 mm	LVPW(ed)	09mm	06 - 11 mm
RVID(ed)	14mm	07 - 21 mm	EF	60%	(50 - 70 %)
LVID(ed)	40mm	35 - 55 mm	%FD	30%	(25 - 40%)
LVID(es)	23mm	24 - 42 mm			

MORPHOLOGICAL DATA

Situs	Solitus
Cardiac position	Levocardia
Systemic veins	Normal
Pulmonary veins	Normal
Mitral valve	Normal
Aortic Valve	Normal
Tricuspid Valve	Normal
Pulmonary Valve	Normal
Right Ventricle	Normal
Left Ventricle	Normal
Interatrial Septum	Intact
Interventricular Septum	Intact
Pulmonary Artery	Normal
Aorta	Normal
Right Atrium	Normal
Left Atrium	Normal
LV - RWMA	No RWMA at rest.
LV - FUNCTION	Normal systolic function
Pericardium	Normal Study
Doppler Studies	Normal
Doppler Summary	Normal
Rhythm	Sinus
IMPRESSION	Normal cardiac chambers

Normal valves
Normal LV Systolic function
No pulmonary hypertension
No RWMA at rest
Normal pericardium,
No intracardiac masses / thrombi



Dr. Kapil Rangan
Consultant Cardiologist
KMC No. 88625

TABULAR SUMMARY REPORT

RACHNA DIXIT

ID: 000313354

15-Jul-2023
10:54:48

32years
155cm
Asian
59kg

Female

BRUCE

Total Exercise time: 7:34

25.0 mm/s
10.0 mm/mV
100hz

Max HR: 190bpm 101% of max predicted 188bpm
Max BP: 110/70
Maximum workload: 9.3METS

Referred by: ARCOFEMI
Test ind: SCREENING FOR IHD

Reason for Termination: Patient fatigue
Comments: GOOD EFFORT TOLERANCE
NORMAL BP AND HR RESPONSE
NO ANGINA/ NO ARRYTHMIAS
NO SIGNIFICANT ST-T CHANGES DURING THE STUDY
STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RRP (x100)
PRETEST	SUPINE	0:47	***	***	1.0	99	110/80	109
	STANDING	0:02	***	***	1.0	93	110/80	102
	HYPERVENT	0:15	0.8	0.0	1.0	95	110/80	105
EXERCISE	STAGE 1	3:00	1.5	10.0	4.4	143	110/80	195
	STAGE 2	3:00	2.5	12.0	7.0	177	110/80	209
	STAGE 3	1:34	3.3	14.0	9.1	190	110/80	209
RECOVERY	Post	3:20	***	***	1.0	105	110/80	116

Technician:

THE APOLLO CLINIC, WHITEFIELD, BANGALORE

Unconfirmed

MAC55 009C

SELECTED MEDIAN'S REPORT

RACHNA DIXIT

ID: 000313354

32years

155cm

10:54:48

Asian

Female

BRUCE

Max HR: 190bpm 101% of max predicted 188bpm

Max BP: 110/70

Reason for Termination:

Comments: GOOD EFFORT TOLERANCE

NORMAL BP AND HR RESPONSE

NO ANGINA/ NO ARRHYTHMIAS

NO SIGNIFICANT ST-T CHANGES DURING THE STUDY

STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Total Exercise time: 7:34

Maximum workload: 9.3METS

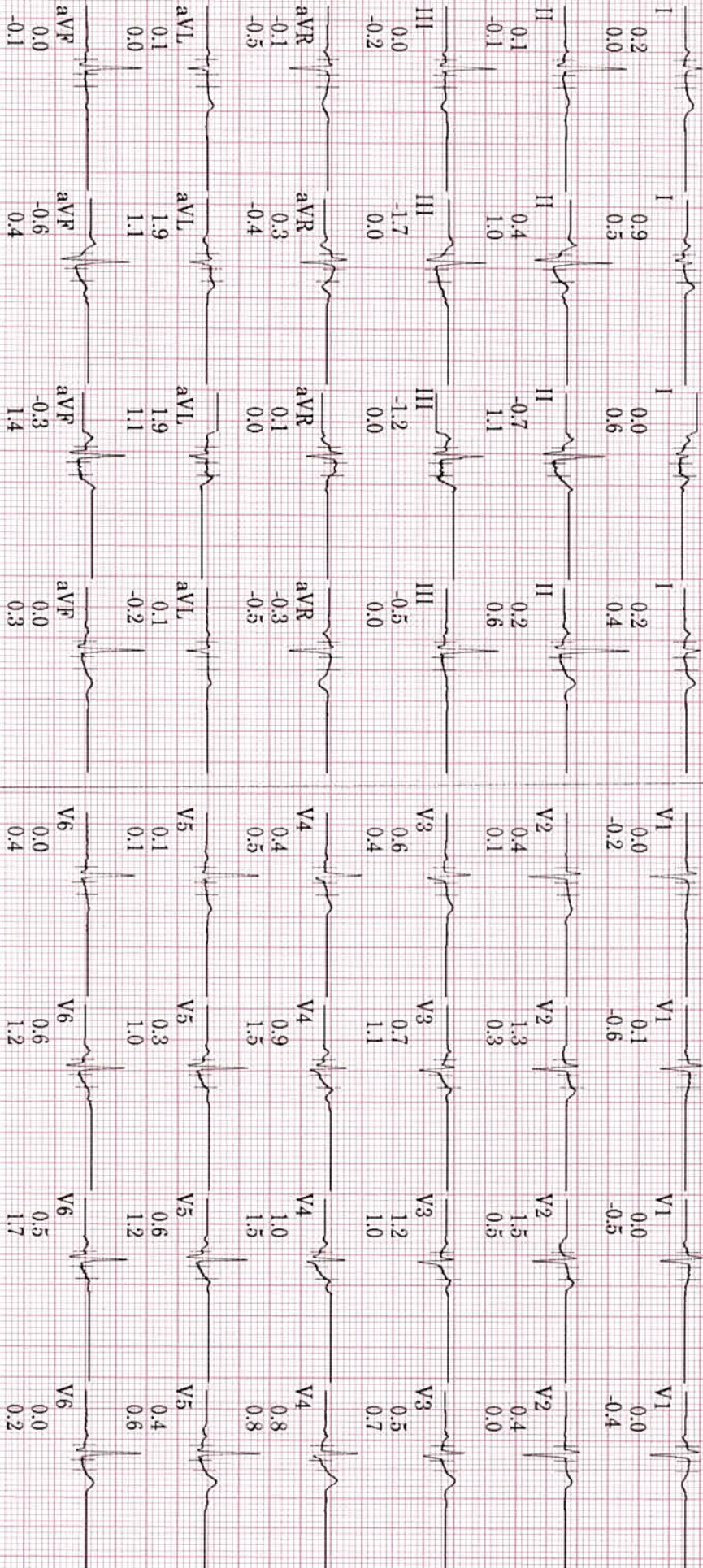
25.0 mm/s

10.0 mm/mV

100hz

Referred by: ARCOFEMI
Test ind: SCREENING FOR IHD

BASELINE EXERCISE	MAX ST RECOVERY	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX ST RECOVERY	PEAK EXERCISE	TEST END RECOVERY
0:00 95bpm BP: 110/80	0:44 153bpm BP: 110/80	7:34 190bpm BP: 110/80	3:20 105bpm BP: 110/80	0:00 95bpm BP: 110/80	0:44 153bpm BP: 110/80	7:34 190bpm BP: 110/80	3:20 105bpm BP: 110/80



Technician:

THE APOLLO CLINIC, WHITEFIELD, BANGALORE

Unconfirmed

MAC55 009C

Lead
ST(mV)
Slope(mV/s)

RACHNA DIXIT
ID: 000313354

15-Jul-2023
11:06:26

109bpm

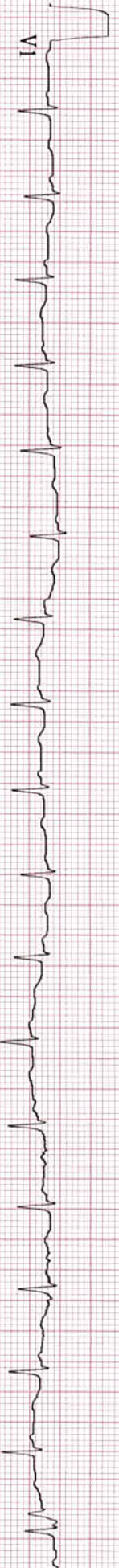
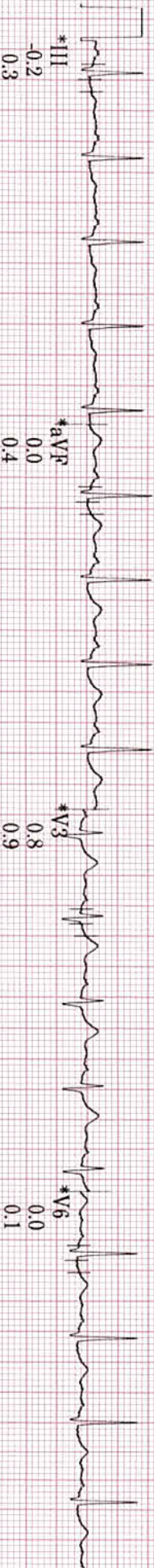
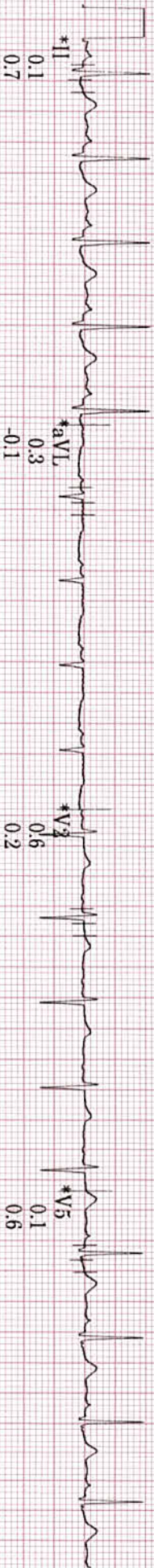
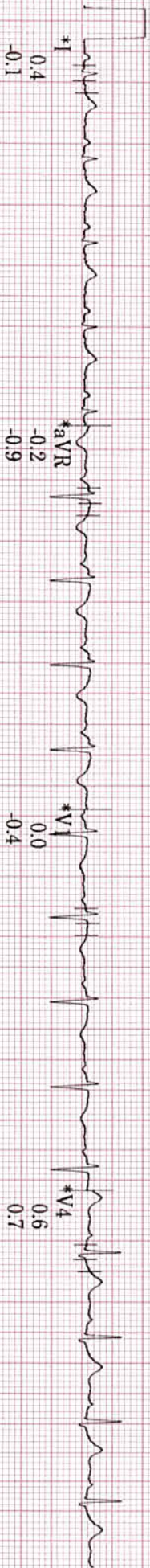
BP: 110/80

RECOVERY
Post
3:00

BRUCE
***mph
***%

ST @ 10mm/mV
80ms postL

Lead
ST(mm)
Slope(mV/s)



20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

RACHNA DIXIT
ID: 000313334

15-Jul-2023
11:04:26

143bpm

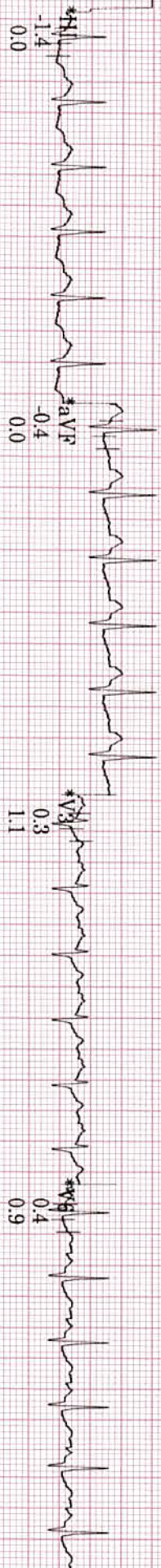
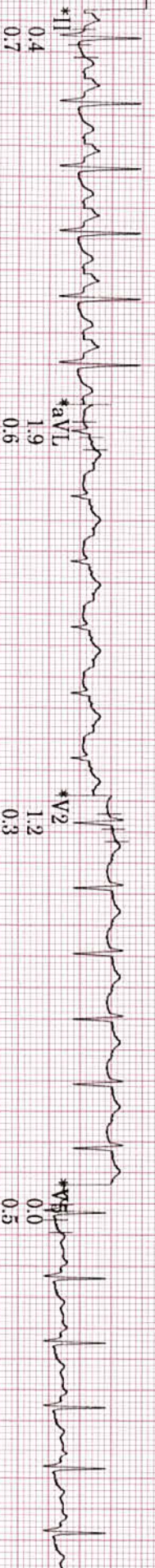
BP: 110/80

RECOVERY
Post
1:00

BRUCE
***mph
***%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



20 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

2

RACHNA DIXIT
ID: 000313354

15-Jul-2023
11:03:26

190bpm

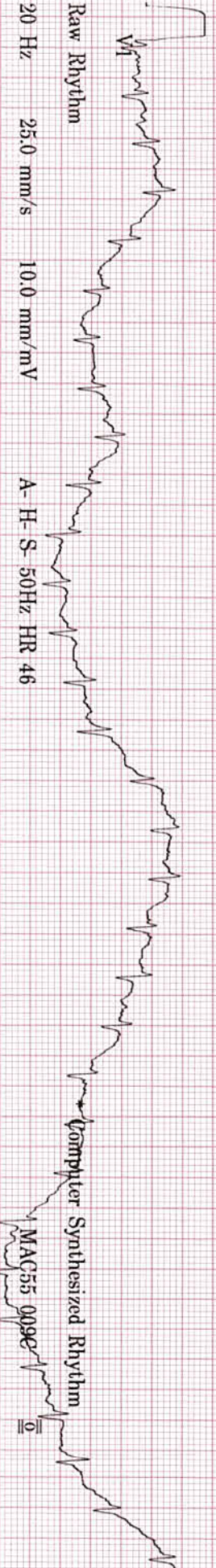
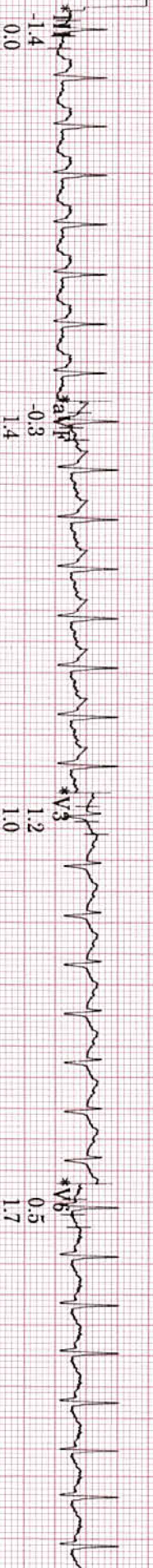
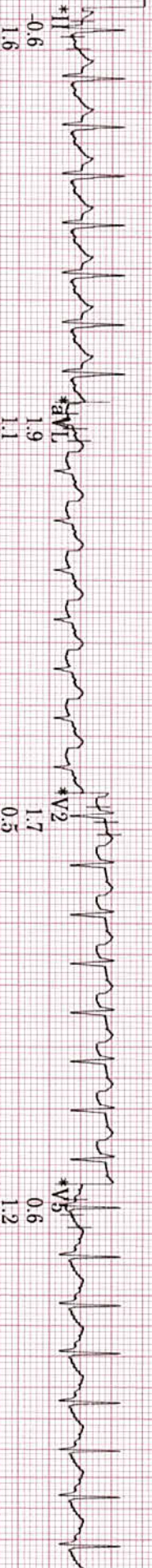
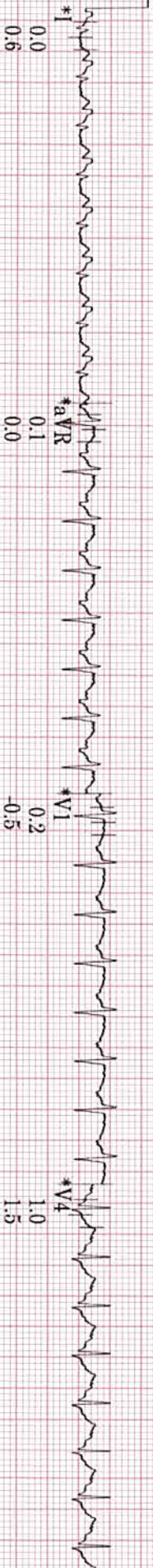
BP: 110/80

EXERCISE
STAGE 3
7:34

BRUCE
3.3mph
14.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



RACHNA DIXIT
ID: 000313354

15-Jul-2023
11:01:42

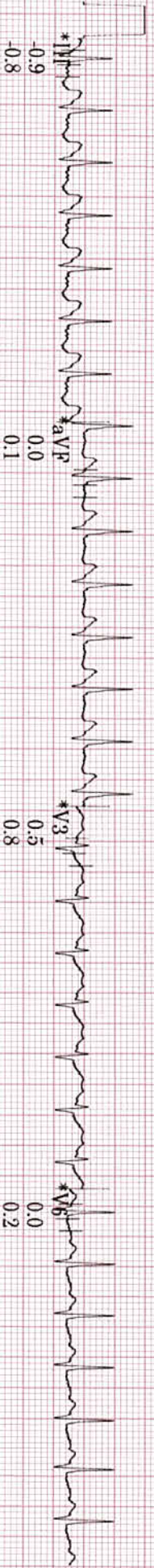
175bpm

EXERCISE
STAGE 2
5:51

BRUCE
2.5mph
12.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



RACHNA DIXIT

ID: 000313354

15-Jul-2023

11:00:26

170bpm

BP: 110/80

EXERCISE
STAGE 2

4:35

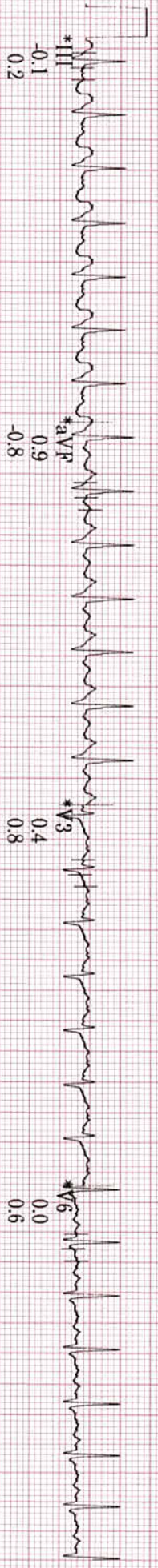
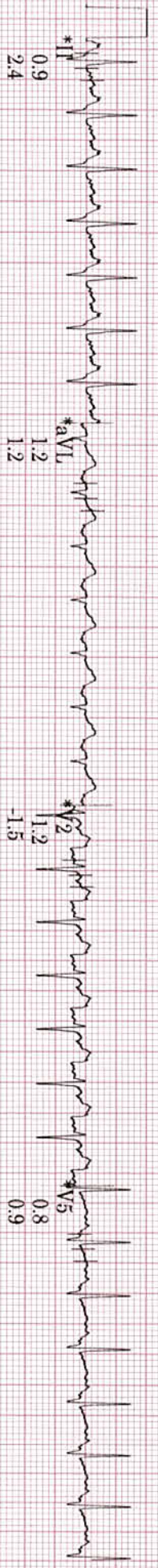
BRUCE

2.5mph

12.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



20 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz-HR-46

* Computer Synthesized Rhythm

MAC55 009C

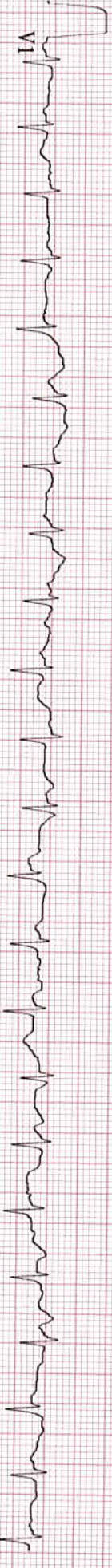
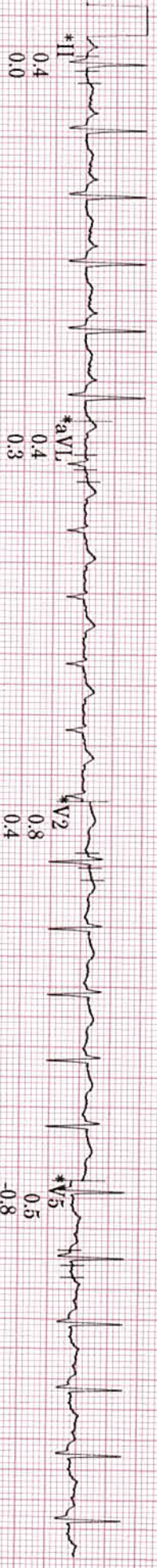
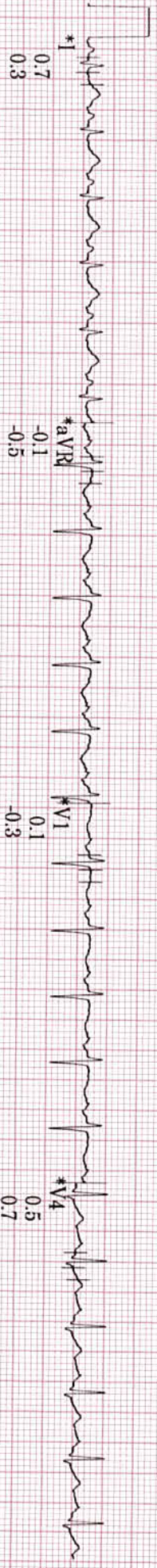
RACHNA DIXIT
ID: 000313354
15-Jul-2023
10:58:42

137bpm
EXERCISE
STAGE 1
2:50

BRUCE
1.6mph
10.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm
20 Hz 25.0 mm/s 10.0 mm/mV
A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC35 009C



RACHNA DIXIT
ID: 000313354

15-Jul-2023
10:55:34

99bpm

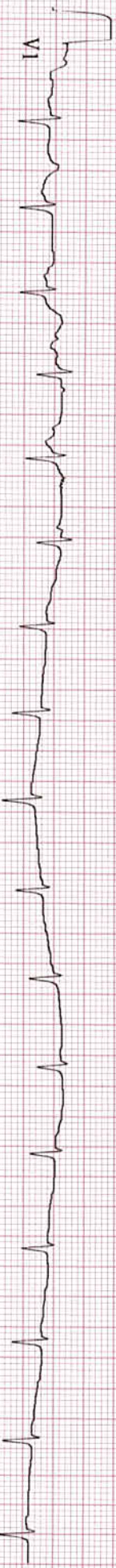
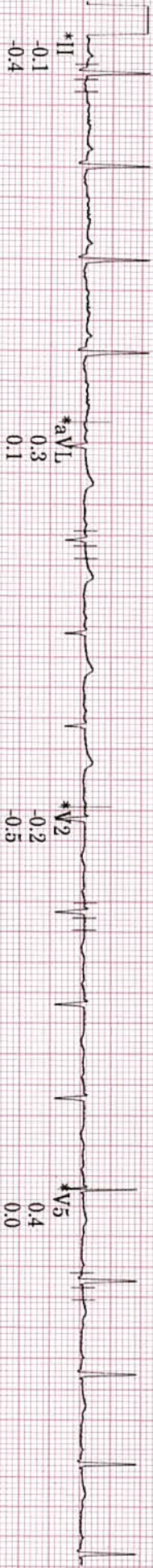
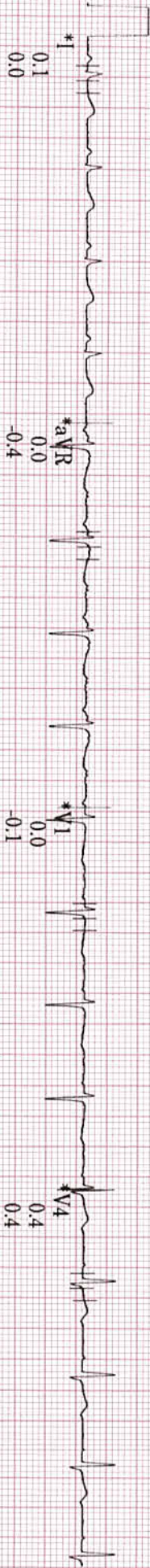
BP: 110/80

PRETEST
SUPINE
0.47

BRUCE
***mph
***%

ST @ 10mm/mV
80ms postJ

Lead
ST'(mm)
Slope(mV/s)



Raw Rhythm

20 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

⏪

32years
Female
155cm

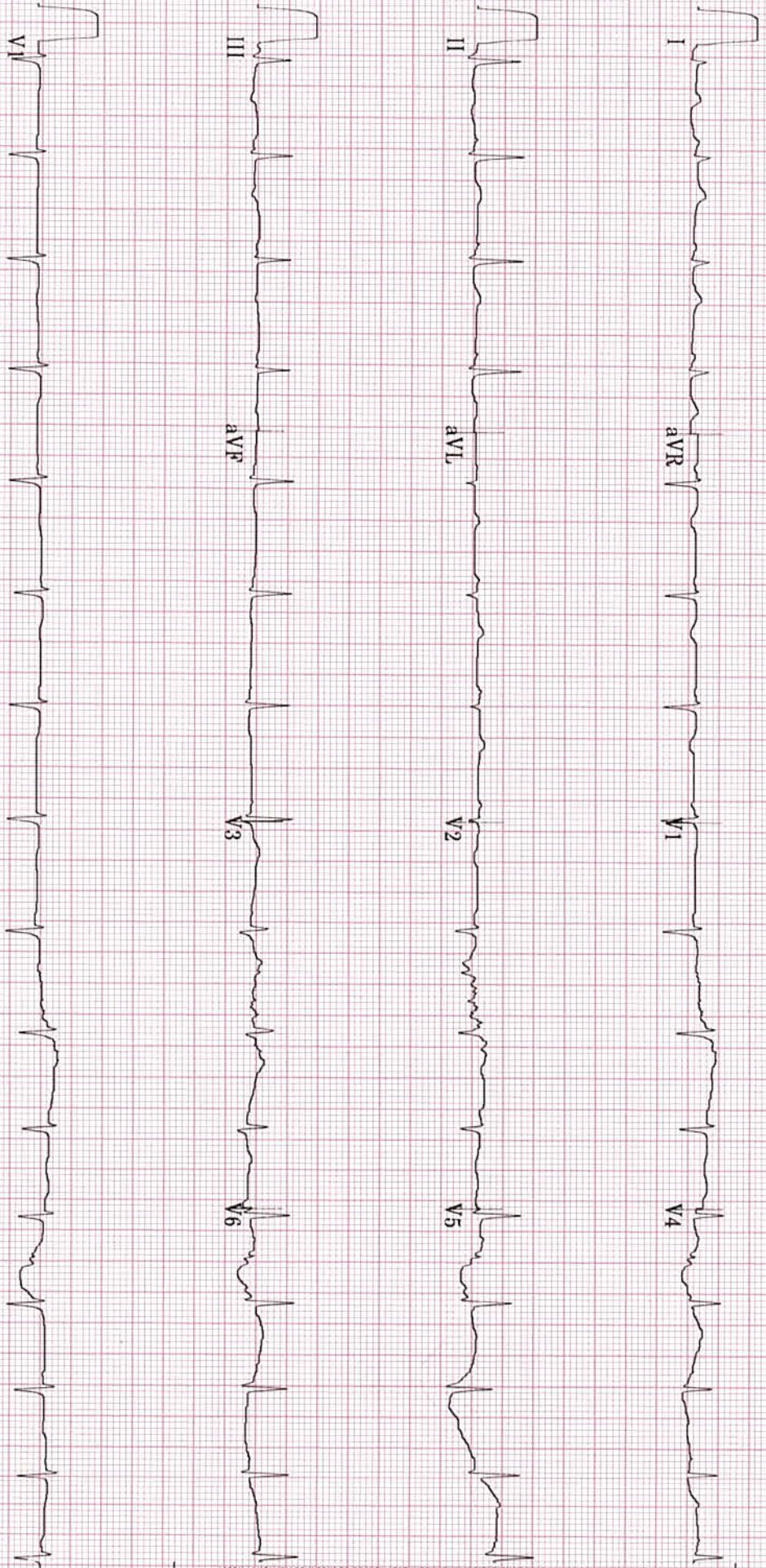
Asian
59kg
Vent. rate 93 bpm
PR interval 112 ms
QRS duration 64 ms
QT/QTc 356/442 ms
P-R-T axes 12 74 31

Normal sinus rhythm with sinus arrhythmia
Septal infarct, age undetermined
Abnormal ECG

Technician:
Test ind: SCREENING FOR IHD

Referred by: ARCOFEMI

Unconfirmed



20 Hz 25.0 mm/s 10.0 mm/mV

4 by 2.5s + 1 rhythm 1d

MAC55 009C

12SL™ V239



Patient Name : Ms. RACHNA DIXIT

Age/Gender : 32 Y/F

UHID/MR No. : CWAN.0000031354

OP Visit No : CMAROPV692545

Sample Collected on :

Reported on : 15-07-2023 16:43

LRN# : RAD2048606

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 8605657339

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

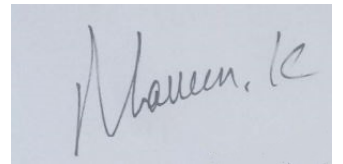
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
Radiology

Patient Name	: Ms. RACHNA DIXIT	Age/Gender	: 32 Y/F
UHID/MR No.	: CWAN.0000031354	OP Visit No	: CMAROPV692545
Sample Collected on	:	Reported on	: 15-07-2023 12:12
LRN#	: RAD2048606	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 8605657339		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended. No definite calculi identified in this state of distension. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 9.8cm and parenchymal thickness measures 1.4cm.

Left kidney measures 10.5cm and parenchymal thickness measures 2.1cm.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

UTERUS: appears normal in size, measuring 6.7x4.3x3.0cm. Myometrial echoes appear normal. The endometrial lining appears intact. Endometrium measures 8.3mm.

OVARIES: Both ovaries appear normal in size and echopattern.

Right ovary measures 3.0x1.7cm.

Left ovary measures 2.7x2.0cm.

No free fluid is seen.

Visualized bowel loops appears normal.

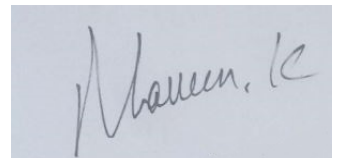
IMPRESSION:

NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation, obesity, bowel gas, patient preparation and organ location.
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose.
3. Printing mistakes should immediately be brought to notice for correction.



Dr. NAVEEN KUMAR K



Patient Name : Ms. RACHNA DIXIT

Age/Gender : 32 Y/F

MBBS, DMRD Radiology, (DNB)
Radiology



भारत सरकार
Government of India



Rachna Dixit
Rachna Dixit
फ़ोन नं./DOB: 31/03/1991
रिज़र्व/EMAIL



8540 3390 6670

VID : 9178 3857 3238 1031

भारत सरकार, मोबाइल पुरस्कार

----- Forwarded message -----

From: Saurabh Ojha <SAURABH.OJHA2@bankofbaroda.com>

Date: Thu, 13 Jul 2023 at 5:37 PM

Subject: Fwd: Health Check up Booking Confirmed Request(bobS42052),Package Code-G10000317, Beneficiary Code-29509

To: dixit.rachna31@gmail.com <dixit.rachna31@gmail.com>

cc: saurabh ojha91@gmail.com <saurabh ojha91@gmail.com>

Regards

Saurabh Ojha
Officer
Bank of Baroda
Branch Alipura
District Chhotaudepur
Mobile: 9532990377

From: Mediwheel <wellness@mediwheel.in>

Date: Thursday, July 13, 2023 4:47 PM

To: Saurabh Ojha <SAURABH.OJHA2@bankofbaroda.com>

cc: customercare@mediwheel.in <customercare@mediwheel.in>

Subject: Health Check up Booking Confirmed Request(bobS42052),Package Code-PKG10000317, Beneficiary Code-29509

You don't often get email from wellness@mediwheel.in. Learn why this is important

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

****CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.



011-41195959

Email:wellness@mediwheel.in

Dear Rachna ,

Please find the confirmation for following request.

Booking Date : 12-07-2023

Package Name : Arcofemi MediWheel Full Body Health Annual Plus Check Female 2D ECHO (Metro)

Name of Diagnostic/Hospital : Apollo Clinic - MARATHAHALLI

Address of : 673/A, Shriram Samruddhi Apartments, Varthur Road, Near
Brookfield - 560066

Patient Name : Ms. RACHNA DIXIT
UHID : CWAN.0000031354
Conducted By: :
Referred By : SELF

Age : 32 Y/F
OP Visit No : CMAROPV692545
Conducted Date : 15-07-2023 18:52

ECHO (2D & COLOUR DOPPLER)

DIMENSIONS	VALUES	VALUES(RANGE)	DIMENSIONS	VALUES	VALUES(RANGE)
AO(ed)	24mm	25 - 37 mm	IVS(ed)	09mm	06 - 11 mm
LA(es)	34mm	19 - 40 mm	LVPW(ed)	09mm	06 - 11 mm
RVID(ed)	14mm	07 - 21 mm	EF	60%	(50 – 70 %)
LVID(ed)	40mm	35 - 55 mm	%FD	30%	(25 – 40%)
LVID(es)	23mm	24 - 42 mm			

MORPHOLOGICAL DATA

Situs	Solitus
Cardiac position	Levocardia
Systemic veins	Normal
Pulmonary veins	Normal
Mitral valve	Normal
Aortic Valve	Normal
Tricuspid Valve	Normal
Pulmonary Valve	Normal
Right Ventricle	Normal
Left Ventricle	Normal
Interatrial Septum	Intact
Interventricular Septum	Intact
Pulmonary Artery	Normal
Aorta	Normal
Right Atrium	Normal
Left Atrium	Normal

Patient Name : Ms. RACHNA DIXIT
UHID : CWAN.0000031354
Conducted By: :
Referred By : SELF

Age : 32 Y/F
OP Visit No : CMAROPV692545
Conducted Date : 15-07-2023 18:52

LV – RWMA	No RWMA at rest.
LV – FUNCTION	Normal systolic function
Pericardium	Normal Study
Doppler Studies	Normal
Doppler Summary	Normal
Rhythm	Sinus
IMPRESSION	Normal cardiac chambers Normal valves Normal LV Systolic function No pulmonary hypertension No RWMA at rest Normal pericardium, No intracardiac masses / thrombi

Dr. Kapil Rangan
Consultant Cardiologist
KMC No. 88625