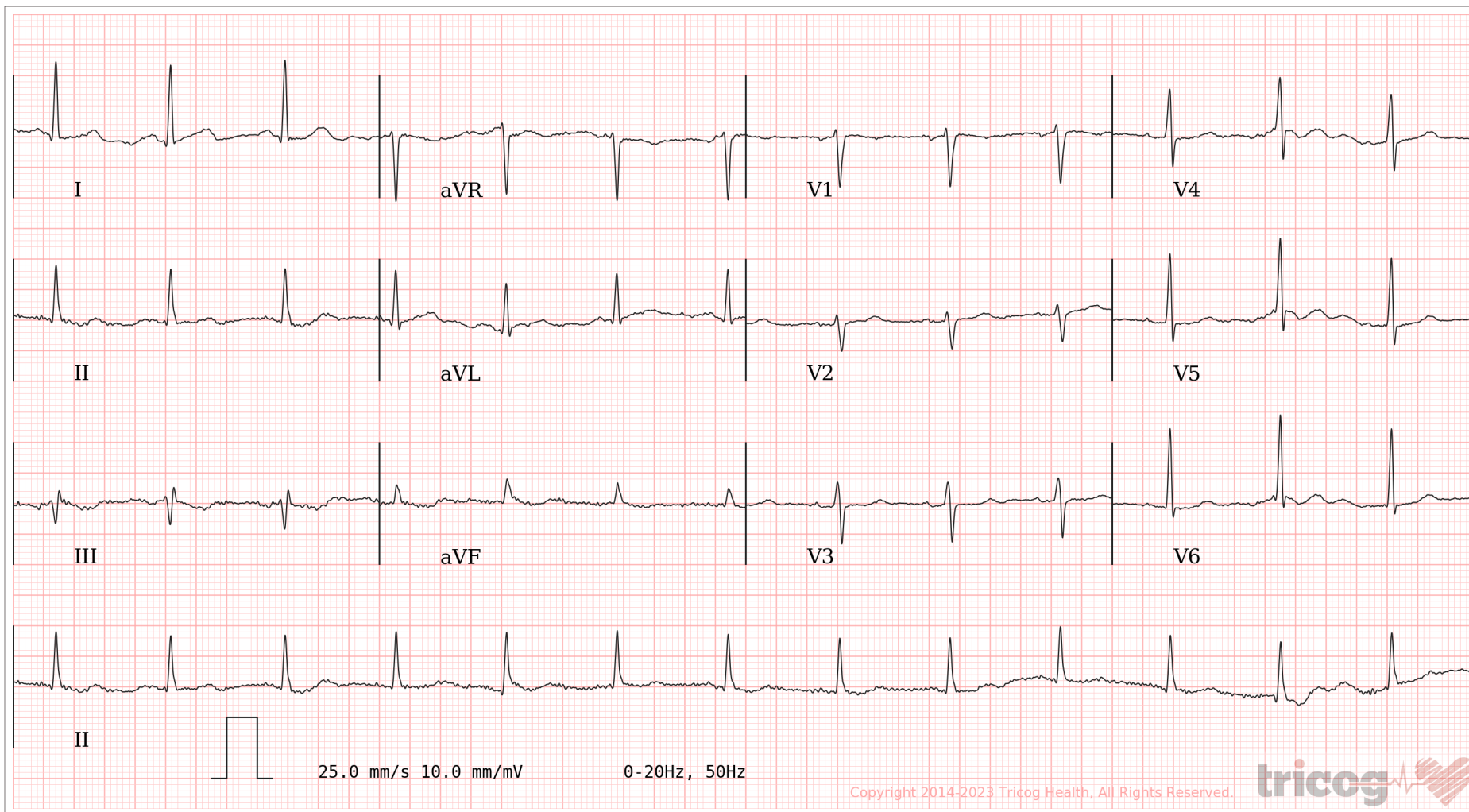


# Chandan Diagnostic



Age / Gender: 43/Female  
Patient ID: CVAR0085872223  
Patient Name: Mrs.RAGANI DEVI - PKG10000237

Date and Time: 19th Feb 23 9:53 AM



AR: 82bpm    VR: 82bpm    QRSD: 76ms    QT: 352ms    QTc: 411ms    PRI: 124ms    P-R-T: -11° 16° -19°

ECG Within Normal Limits: Sinus Rhythm. Check for proper lead placement between arms & legs. Please correlate clinically.

AUTHORIZED BY

Dr. Charit  
MD, DM: Cardiology

REPORTED BY

Dr. Prajna Jinachandra Jain

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 and must be interpreted by a qualified physician.

63382



भारत सरकार

Government of India



रागनी देवी

RAGANI DEVI

जन्म तिथि / DOB : 21/05/1979

महिला / Female



3041 9023 6274

आधार - आम आदमी का अधिकार

## CHANDAN DIAGNOSTIC CENTRE

Name of Company: - Modivheel, (AHC)  
Name of Executive: Rajini Devi  
Date of Birth: 21/05/1979  
Sex: Male / Female  
Height: 156 CMs  
Weight: 83 KGs  
BMI (Body Mass Index): 34.1  
Chest (Expiration / Inspiration) 104 / 108 CMs  
Abdomen: 99 CMs  
Blood Pressure: 128 / 76 mm/Hg  
Pulse: 83 BPM · Regular / Irregular  
RR: 18 / Resp/Min  
Ident Mark: Mde at 1st Thumb  
Any Allergies: No  
Vertigo: No  
Any Medications: Thyroid Tab - Thyroxin - 3 Months  
Any Surgical History: No  
Habits of alcoholism/smoking/tobacco: No  
Chief Complaints if any: No  
Lab Investigation Reports: No  
Eye Check up vision & Color vision: Normal (glasses 2 Yrs. bifocal)  
Left eye: G18  
Right eye: G18  
Near vision: Normal  
Far vision: Not clear (G18)  
Dental check up: No

## CHANDAN DIAGNOSTIC CENTRE

ENT Check up : *met*

Eye Checkup: *met*

### Final impression

Certified that I examined *Rajendra* S/o or D/o .....  
is presently in good health and free from any cardio-respiratory/communicable  
ailment, *he/she is fit/Unfit* to join any organization.

### Client Signature :-

*राजेंद्र देव*

.....  
Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD)

Date *19/12* /2023, Place - VARANASIS

*Dr. R.C. ROY*  
MBBS, MD. (Radio Diagnosis)  
Reg. No. -26918

Chandan Diagnostic Centre  
9, Shivaji Nagar, Mahmoorganj,  
Varanasi-221010 (U.P.)  
Phone No.:0542-2223232

## CHANDAN HEALTH CARE LTD.

99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

Ms. RAGINI DEVI  
Age : 43/F  
Ref. by :  
Indication1 :  
Indication2 :  
Indication3 :

ID : 85972223  
H/W/I : 156/83  
Recorded : 19/02/2023

TREADMILL TEST SUMMARY REPORT  
Protocol: BRUCE  
History: Hyperthyroidis  
Medication1 : TAB THYROXINE  
Medication2 :  
Medication3 :

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE					102	128/76	130	0.2	0.3	0.2	
HYPERTENT	0:03	0:03			103	128/76	131	0.3	0.4	0.3	
VALSALVA					101	128/76	129	0.3	0.4	0.3	
STANDING					102	128/76	130	0.3	0.4	0.3	
STAGE 1	2:59	2:59	2.70	10.00	142	138/76	195	0.1	0.5	0.5	4.80
EVENT	3:49	0:49	4.00	12.00	161	138/76	222	-0.3	0.5	0.3	5.43
PEAK EXER	3:51	0:51			164	138/76	226	-0.4	0.5	0.3	5.46
EVENT	0:30	0:30	0.00	0.00	163	138/76	224	-0.2	0.6	0.2	
EVENT	1:00	1:00	0.00	0.00	136	138/76	187	0.1	0.7	0.6	
EVENT	2:00	2:00	0.00	0.00	107	138/76	147	-0.4	0.4	0.1	

## RESULTS

Exercise Duration : 3:51 Minutes  
Max Heart Rate : 164 bpm 92 % of target heart rate 177 bpm  
Max Blood Pressure : 138/76 mmHg  
Max Work Load : 5.46 METS  
Reason of Termination : TIREDNESS  
VERTIGO

## IMPRESSIONS

→ Target Heart Rate.

→ No significant ST-T changes seen at peak Exercise and recovery

→ Good Effort Tolerant

TMT is negative for RMI

TMT is negative for RMI

Dr. Anil Krishna Agarwal  
M.B.B.S., MD DM  
Cardiologist  
Reg. No.-39794

Cardiologist

1/10/23

2/10/23

Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 102 BPM

B.P. : 128/76 mmHg

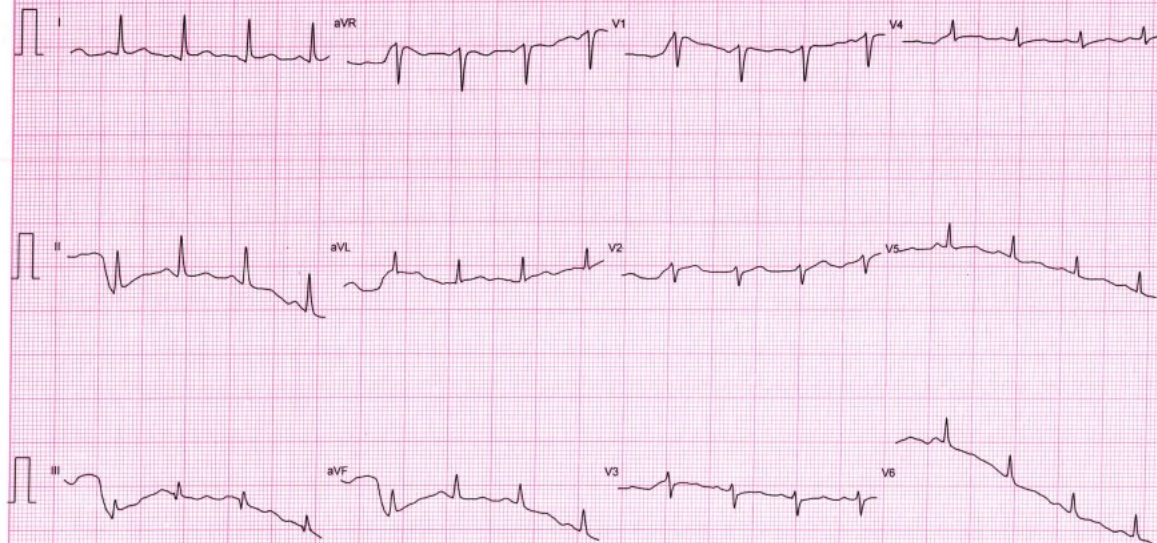
SUPINE

PRETEST

ST @ 10mm/mV

80ms PostJ

RAW E.C.G.



Ms. RAGINI DEVI  
I.D. : 85672223  
AGE/SEX : 43/F  
RECORDED : 19/02/2023

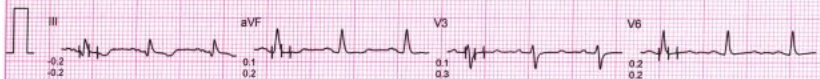
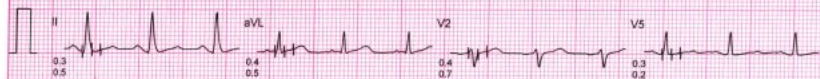
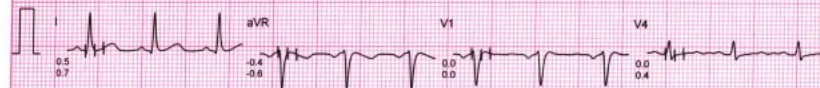
RATE : 103 BPM  
B.P. : 128/76 mmHg

HYPERVENTILATION  
PRETEST

STAGE TIME : 0:03

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 101 BPM

B.P. : 128/76 mmHg

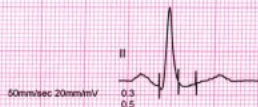
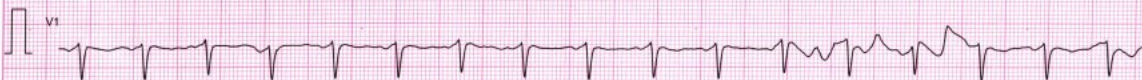
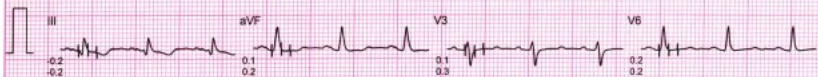
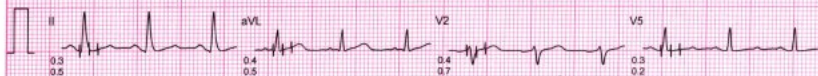
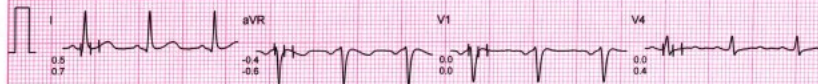
VALSALVA

PRETEST

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN





Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 102 BPM

B.P. : 128/76 mmHg

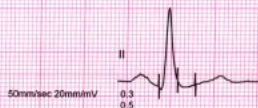
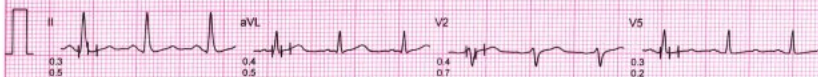
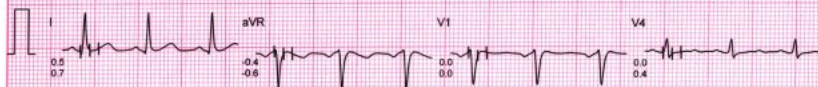
STANDING

PRETEST

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 142 BPM

B.P. : 138/76 mmHg

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

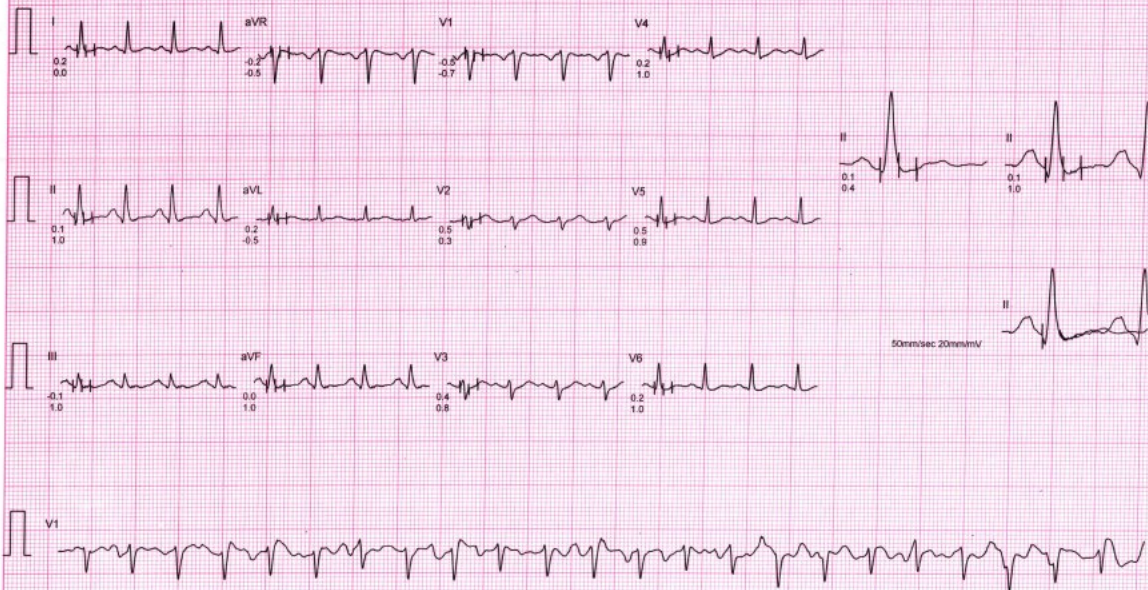
ST @ 10mm/mV

80ms PostJ

SPEED : 2.7 Km./Hr.

GRADE : 10.0 %

LINKED MEDIAN



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 161 BPM

B.P. : 138/76 mmHg

BRUCE

EXERCISE 2 (EVENT)

PHASE TIME : 3.49

STAGE TIME : 0.49

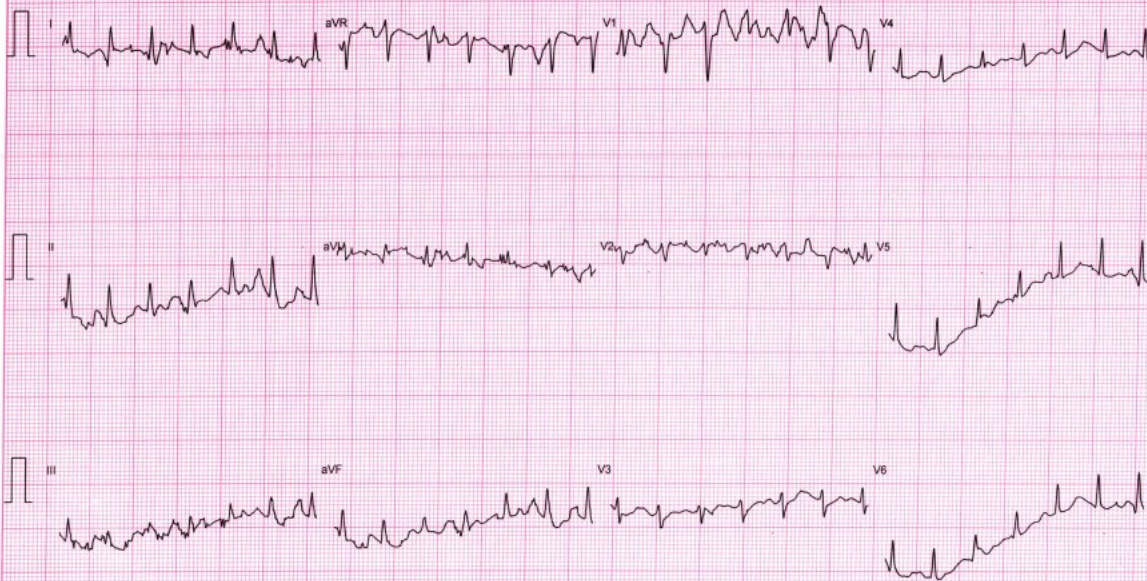
ST @ 10mm/mV

80ms Post.J

SPEED : 4.0 Km./Hr

GRADE : 12.0 %

RAW E.C.G.



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 164 BPM

B.P. : 138/76 mmHg

BRUCE

PEAK EXER

PHASE TIME : 3.51

STAGE TIME : 0.51

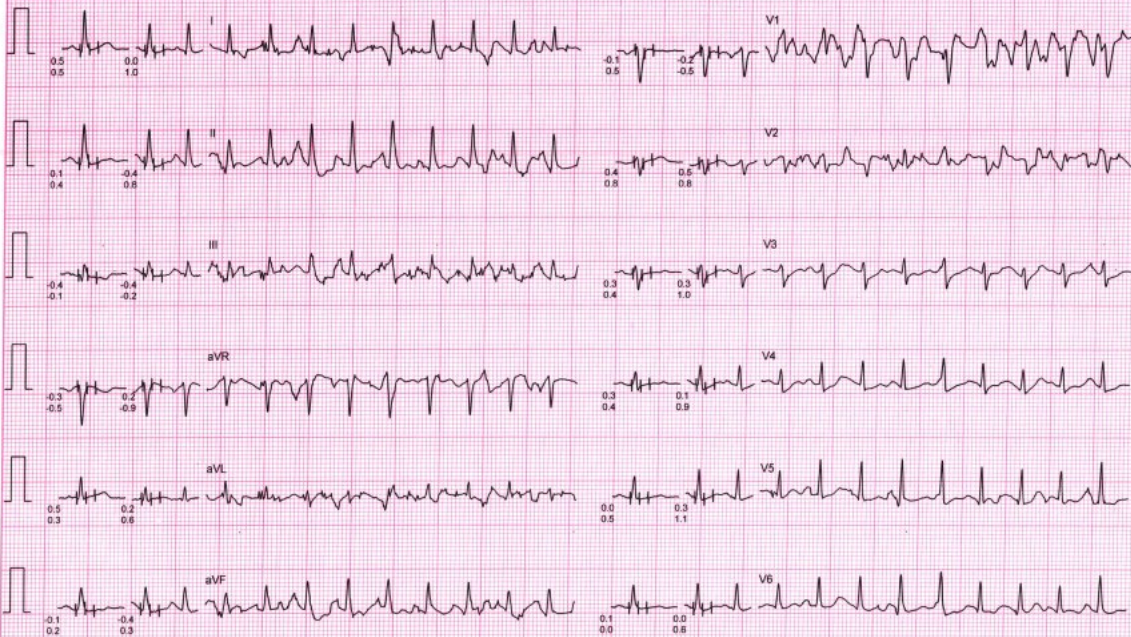
ST @ 10mm/mV

80ms PostJ

SPEED : 4.0 Km./Hr.

GRADE : 12.0 %

MIXED E C G.



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 163 BPM

B.P. : 138/76 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 0:30

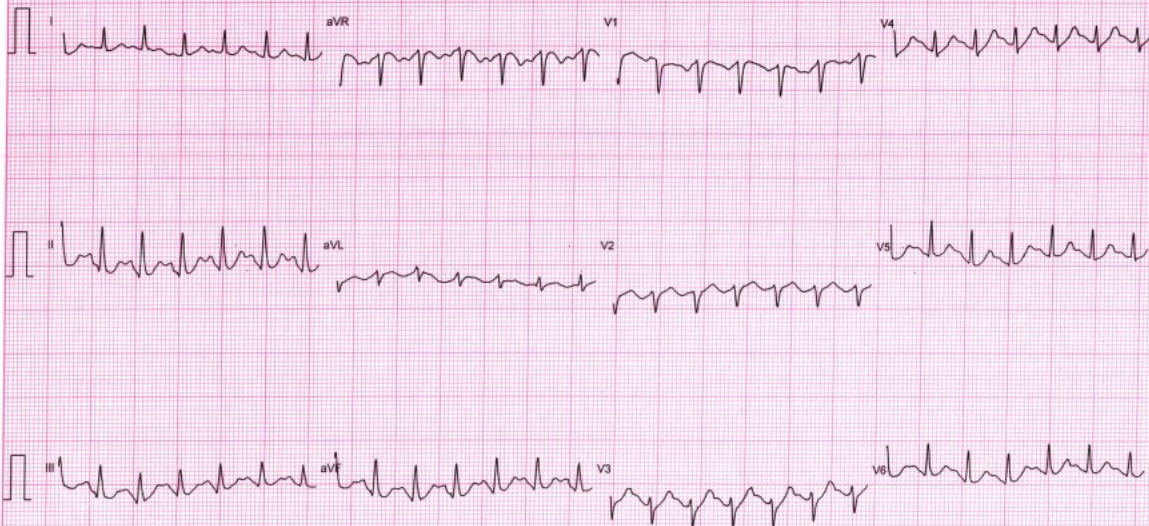
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./Hr.

GRADE : 0.0 %

RAW ECG



Ms. RAGINI DEVI  
I.D. : 85872223

AGE/SEX : 43/F

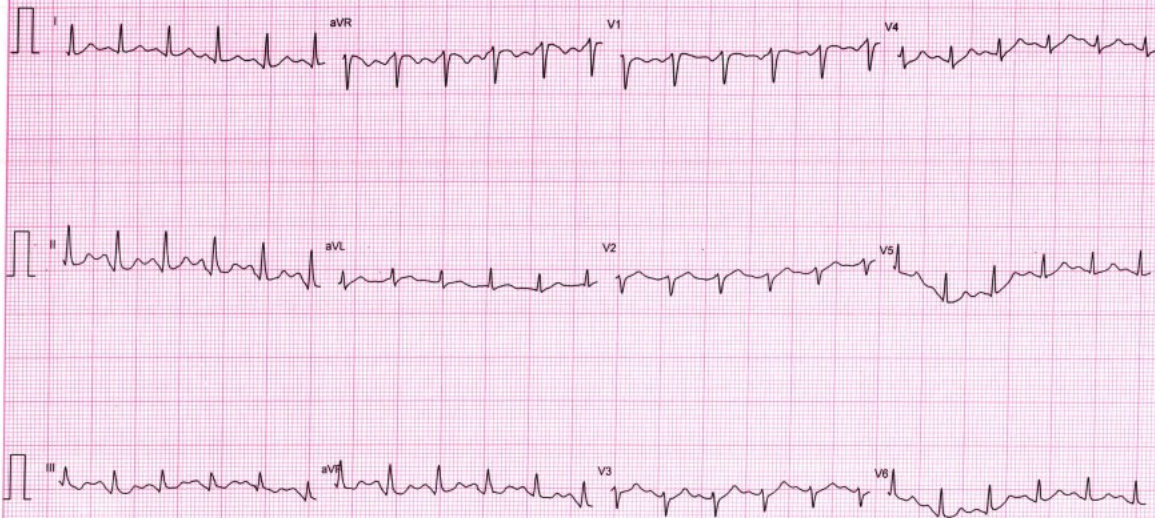
RECORDED : 19/02/2023

RATE : 136 BPM

B.P. : 138/76 mmHg

BRUCE  
RECOVERY (EVENT)  
PHASE TIME : 1:00ST @ 10mm/mV  
90ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

RAW E.C.G.



Ms. RAGINI DEVI

I.D. : 85872223

AGE/SEX : 43/F

RECORDED : 19/02/2023

RATE : 107 BPM

B.P. : 138/76 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 2:00

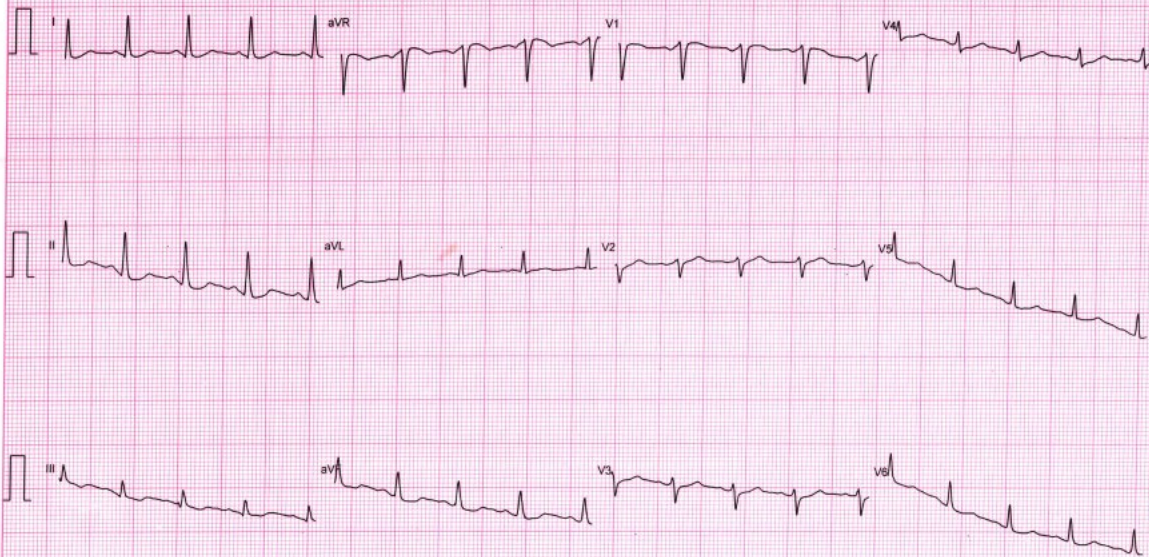
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./Hr.

GRADE : 0.0 %

RAW E.C.G.





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:47
Age/Gender	: 43 Y 0 M 0 D /F	Collected	: 19/Feb/2023 10:13:28
UHID/MR NO	: CVAR.0000035647	Received	: 19/Feb/2023 10:17:53
Visit ID	: CVAR0085872223	Reported	: 19/Feb/2023 13:10:08
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

Blood Group	O
Rh ( Anti-D)	NEGATIVE

#### Complete Blood Count (CBC) \* , Whole Blood

Haemoglobin	13.30	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl
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TLC (WBC)	6,500.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
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<u>DLC</u>				
Polymorphs (Neutrophils)	50.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	45.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

<u>ESR</u>				
Observed	10.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 20	
PCV (HCT)	38.90	%	40-54	
Platelet count				
Platelet Count	1.65	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBCCount				
RBC Count	4.10	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE







# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:47
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## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	94.80	fl	80-100	CALCULATED PARAMETER
MCH	32.50	pg	28-35	CALCULATED PARAMETER
MCHC	34.20	%	30-38	CALCULATED PARAMETER
RDW-CV	14.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	51.40	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,250.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	130.00	/cu mm	40-440	



S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:49
Age/Gender	: 43 Y 0 M 0 D /F	Collected	: 19/Feb/2023 10:13:28
UHID/MR NO	: CVAR.0000035647	Received	: 19/Feb/2023 10:17:53
Visit ID	: CVAR0085872223	Reported	: 19/Feb/2023 12:49:14
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLUCOSE FASTING, Plasma

Glucose Fasting	105.70	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 diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

#### Glucose PP Sample: Plasma After Meal

Glucose PP	138.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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#### 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 diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \* , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.20	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	33.00	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 mnagement.





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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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, Cardiopathy, etc.

\*\*Some danger of hypoglycemic reaction in Type 1diabetics. 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	14.00	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.70	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	5.80	mg/dl	2.5-6.0	URICASE





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### LFT (WITH GAMMA GT) \* , Serum

SGOT / Aspartate Aminotransferase (AST)	32.40	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	33.00	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	13.10	IU/L	11-50	OPTIMIZED SZAIZING
Protein	6.40	gm/dl	6.2-8.0	BIRUET
Albumin	4.60	gm/dl	3.8-5.4	B.C.G.
Globulin	1.80	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.56		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	62.10	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.40	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.10	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF

#### LIPID PROFILE ( MINI ) , Serum

Cholesterol (Total)	283.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	64.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	195	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	23.36	mg/dl	10-33	CALCULATED
Triglycerides	116.80	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP

S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:48
Age/Gender	: 43 Y 0 M 0 D /F	Collected	: 19/Feb/2023 12:44:16
UHID/MR NO	: CVAR.0000035647	Received	: 19/Feb/2023 12:45:04
Visit ID	: CVAR0085872223	Reported	: 19/Feb/2023 13:01:03
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 6.5 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

#### SUGAR, FASTING STAGE\* , Urine

Sugar, Fasting stage	ABSENT	gms%
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#### Interpretation:

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





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### SUGAR, PP STAGE\* , Urine

Sugar, PP Stage	ABSENT
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#### Interpretation:

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



S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:49
Age/Gender	: 43 Y 0 M 0 D /F	Collected	: 19/Feb/2023 10:13:28
UHID/MR NO	: CVAR.0000035647	Received	: 19/Feb/2023 14:28:33
Visit ID	: CVAR0085872223	Reported	: 19/Feb/2023 14:36:15
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### THYROID PROFILE - TOTAL \* , Serum

T3, Total (tri-iodothyronine)	104.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	6.42	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	8.81	μIU/mL	0.27 - 5.5	CLIA

#### Interpretation:

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

- 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.

S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.RAGANI DEVI - PKG10000237	Registered On	: 19/Feb/2023 08:18:50
Age/Gender	: 43 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000035647	Received	: N/A
Visit ID	: CVAR0085872223	Reported	: 20/Feb/2023 11:01:58
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA \*

### X-Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

### IMPRESSION

**\* NO OBVIOUS DETECTABLE ABNORMALITY SEEN**

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

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER), Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOGICAL EXAMINATION



*Roy*

Dr Raveesh Chandra Roy (MD-Radio)

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, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*  
365 Days Open \*Facilities Available at Select Location

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Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection  
1800-419-0002

Mar. 2018





D63/6B-99, Shivaji Nagar Colony,  
Mahmoorganj, Varanasi, Uttar Pradesh  
221010, India

Latitude

25.305411°

Longitude

82.979085°

LOCAL 09:36:06

GMT 04:06:06

SUNDAY 02.19.2023

ALTITUDE 22 METER