


**भारत सरकार**  
**GOVERNMENT OF INDIA**




**तारामणि**  
**Taramani**  
जन्म वर्ष / Year of Birth :1984  
महिला / Female



2652 5302 4001





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आधार — आम आदमी का अधिकार


**भारतीय विशिष्ट पहचान प्राधिकरण**  
**UNIQUE IDENTIFICATION AUTHORITY OF INDIA**

<p>पता:</p> <p>W/O: दाताराम, सड़क/मार्ग/गली:</p> <p>ग्राम पोस्ट - बुडानिया, स्थान:</p> <p>चिडावा, गांव/कस्बा/शहर: बुडानिया,</p> <p>जिला: झुंझुन, पोस्ट ऑफिस:</p> <p>बुडानिया, राज्य: राजस्थान, पिन</p> <p>कोड: 333025</p>	<p>Address:</p> <p>W/O: Dataram,</p> <p>Street/Road/Lane: gram post - budania, Area/Locality/Sector:</p> <p>chirawa, Village/Town/City:</p> <p>Budaniya, District: Jhunjhunu,</p> <p>P.O.: Budania, State: Rajasthan,</p> <p>PinCode: 333025</p>
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 1947 1800 180 1947	 help@uidai.gov.in	 www.uidai.gov.in	 P.O. Box No.1947, Bengaluru-560 001
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तारामणि

9636998556

Rajasthan Diagnostic &  
Medical Research Centre  
Jhunjhunu



# RAJASTHANI DIAGNOSTIC & MRI CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

**MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMMOGRAPHY**

NAME	TARAMANI	AGE-	SEX: F
REF/BY:	MEDI MEDICAL HEALTH CHECK UP	DATE	5-May-23

## ULTRASONOGRAPHY WHOLE ABDOMEN

**Liver:** is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

**Gall bladder:** is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

**Pancreas:** is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated

**Rt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Lt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Spleen:** is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

**Urinary Bladder:** is empty.

**Uterus:** is normal in size, regular in shape and outline. Uterus is anteverted and ante flexed. Endometrium is normal in thickness. No sonolucent or echogenic mass lesion seen.

**Adenexa:** Both adenexal regions are seen normal. No focal mass or lesion is seen. bilateral ovary are normal in appearance.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

## IMPRESSION:

❖ **NORMAL SONOGRAPHY STUDY**

Advised: clinicopathological correlation

**DR. UMMED SINGH RATHORE**  
**MD RADIODIAGNOSIS**

Dr. Ummad Singh  
MD (Radiodiagnosis)  
(RMC. 34498/24812)



आपताकालीन सेवाएं



THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE

B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592 294977







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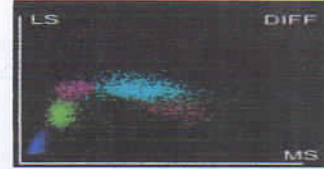
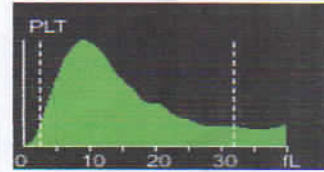
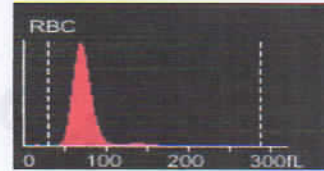
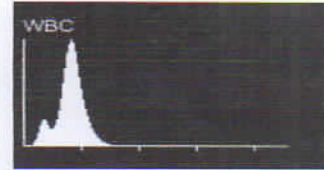
## Hematology Analysis Report

First Name: TARAMANI  
Last Name:  
Gender: Female  
Age: 39 Year

Sample Type:  
Department:  
Med Rec. No.:

Sample ID: 17  
Test Time: 2023/05/05 15:39  
Diagnosis:

Parameter	Result		Ref. Range	Unit
1 WBC	3.87	↓	4.00-10.00	10 <sup>3</sup> /uL
2 Neu%	45.4	↓	50.0-70.0	%
3 Lym%	36.4		20.0-40.0	%
4 Mon%	9.4		3.0-12.0	%
5 Eos%	7.8	↑	0.5-5.0	%
6 Bas%	1.0		0.0-1.0	%
7 Neu#	1.76	↓	2.00-7.00	10 <sup>3</sup> /uL
8 Lym#	1.41		0.80-4.00	10 <sup>3</sup> /uL
9 Mon#	0.36		0.12-1.20	10 <sup>3</sup> /uL
10 Eos#	0.30		0.02-0.50	10 <sup>3</sup> /uL
11 Bas#	0.04		0.00-0.10	10 <sup>3</sup> /uL
12 RBC	3.87		3.50-5.50	10 <sup>6</sup> /uL
13 HGB	11.0		11.0-16.0	g/dL
14 HCT	29.7	↓	37.0-54.0	%
15 MCV	76.8	↓	80.0-100.0	fL
16 MCH	28.5		27.0-34.0	pg
17 MCHC	37.1	↑	32.0-36.0	g/dL
18 RDW-CV	12.4		11.0-16.0	%
19 RDW-SD	38.9		35.0-56.0	fL
20 PLT	197		100-300	10 <sup>3</sup> /uL
21 MPV	9.9		6.5-12.0	fL
22 PDW	14.0		9.0-17.0	
23 PCT	0.194		0.108-0.282	%
24 P-LCR	36.6		11.0-45.0	%
25 P-LCC	72		30-90	10 <sup>3</sup> /uL



*Hemata Khuteta*  
Dr. Mamta Khuteta  
M D. (Path.)  
RMC No. : 4720/16260

Submitter: Operator: admin Approver:  
Draw Time: 2023/05/05 15:38 Received Time: 2023/05/05 15:38 Validated Time:  
Report Time: Remarks:

\*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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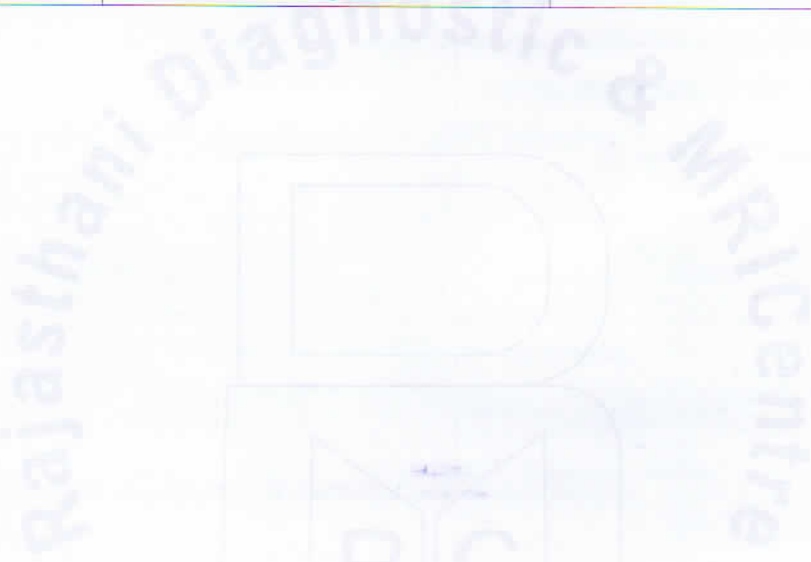


## Laboratory Report

Name : TARAMANI  
Age : 39 Gender : FEMALE  
Ref. By Dr : MEDI WHEELFULLY BODY HEALTH CHEKEP

Sr. Number : 63988  
Invoice Date : 05-05-2023 12:33 PM  
Invoice Number : 1309  
Registration No.: 3536  
Sample On : 05-05-2023 12:33 PM  
Report On : 05-05-2023 03:41 PM

Test Name	Observed Values	Reference Intervals	Units
ESR (Erythrocyte Sedimentation Rate)	12	< 20	mm/hr
BLOOD GROUPING (ABO & Rh )	B- Negative		



*Nida*  
Dr. NIDA FAHMI  
M.D.S. Pathology  
Reg. No. A-4048

*Mamta Khuteta*  
Dr. Mamta Khuteta  
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RMC No. : 4720/16260

TECHNOLOGIST

PATHOLOGIST

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Laboratory Report	
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Age : <b>39</b> Gender : <b>FEMALE</b>	Invoice Date : <b>05-05-2023 12:33 PM</b>
Ref. By Dr : <b>MEDI WHEELFULLY BODY HEALTH CHEKEP</b>	Invoice Number : <b>1309</b>
	Registration No. : <b>3536</b>
	Sample On : <b>05-05-2023 12:33 PM</b>
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## HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Reference Intervals	Units
HbA1c(Glycosylated hemoglobin)	5.10	< 5.8 % : Non Diabetic 5.8 - 6.6 % : Near Normal 6.7 - 7.6 % : Excellent 7.7 - 8.6 % : Good 8.7 - 9.6 % : Fair 9.7 - 10.6 % : Poor 10.7 - 11.6 % : Very Poor > 11.7 % : Out of Control	%
eAG (Estimated Average Glucose)	99.67		mg/dL
eAG (Estimated Average Glucose)	5.53		mmol/L

Method : **Fluorescence Immunoassay Technology**

Sample Type : **EDTA Blood**

### Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Anemia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

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Ref. By Dr : **MEDI WHEELFULLY BODY HEALTH CHEKEP**

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Test Name	Observed Values	Reference Intervals	Units
Blood Sugar Fasting	92.00	60--110	mg/dL
Blood Sugar PP	109.00	< 140	mg/dL

## RENAL FUNCTION TEST

Test Name	Observed Values	Reference Intervals	Units
Blood Urea	32.0	13--45	mg/dL
Creatinine	0.89	0.4--1.4	mg/dL
Uric Acid	5.10	3.6--8.2	mg/dL
Calcium	10.62	8.5--11	mg/dL
Gamma glutamyl transferase (GGT)	31.0	< 50	U/L

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	Report On : <b>05-05-2023 03:41 PM</b>

## Liver Function Test

Test Name	Observed Values	Reference Intervals	Units
S.G.O.T.	26.00	0-45	U/L
S.G.P.T.	31.00	0-45	U/L
Bilirubin(Total)	0.84	0.1-1.4	mg/dL
Bilirubin(Direct)	0.20	0-0.3	mg/dL
Bilirubin(Indirect)	0.64	0.1-0.9	mg/dL
Total Protein	6.95	6-8	mg/dL
Albumin	3.74	3.5-5	mg/dL
Globulin	3.21	3-4.5	mg/dL
A/G Ratio	1.17	0.5 - 2.65	g/dL
Alkaline Phosphatase	214.00	108-306	U/L

## LIPID PROFILE COMPLETE

Test Name	Observed Values	Reference Intervals	Units
Cholesterol	164.00	110-200	mg/dL
HDL Cholesterol	46.00	35-88	mg/dL
Triglycerides	89.00	40-165	mg/dL
LDL Cholesterol	100.20	0-150	mg/dL
VLDL Cholesterol	17.80	0-35	mg/dL
TC/HDL Cholesterol Ratio	3.57	2.5-5	Ratio
LDL/HDL Ratio	2.18	1.5-3.5	Ratio

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## T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Reference Intervals	Units
T3 (Total Triiodothyronine)	0.69	0.5--1.5 ng/mL	ng/mL
T4 (Total Thyroxine)	8.54	4.60-12.5 µg/dL	µg/dL
TSH (Thyroid Stimulating Hormone)	1.06	0.38 -- 5.5 µIU/mL	µIU/mL

Interpretation of TSH :-

### Children

3.20 - 34.6 µIU/mL

0.70 - 15.4 µIU/mL

0.70 - 9.10 µIU/mL

0.70 - 6.40 µIU/mL

### Pregnancy

1- 2 Days 0.30 - 4.50 µIU/mL 1st Trimester

3 - 4 Days 0.50 - 4.60 µIU/mL 2nd Trimester

15 Days - 5 Months 0.80 - 5.20 µIU/mL 3rd Trimester

5 Months - 20 Years **Interpretation of TSH :- Sample Type : Serum**

### Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (**ARCHITECT- i1000 PLUS**) Abbott USA

### Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

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## URINE COMPLETE

Test Name	Observed Values	Reference Intervals	Units
<b>PHYSICAL</b>			
Quantity	20		ml
Colour	Pale Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.025		
PH	6.0	4.5-6.5	
<b>CHEMICAL</b>			
Reaction	Acidic		
Albumin	Trace		
Urine Sugar	Nil		
<b>MICROSCOPIC</b>			
Red Blood Cells	Nil		/h.p.f.
Pus Cells	4-6		/h.p.f.
Epithelial Cells	1-3		/h.p.f.
Crystals	Nil		/h.p.f.
Casts	Nil		/h.p.f.
Bactria	Nil		/h.p.f.
Others			/h.p.f.
Test Name	Observed Values	Reference Intervals	Units
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

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NAME : TARAMANI	AGE 39 /SEX F
REF.BY : BOB HEALTH CHECK UP	DATE: 05.05.2023

## X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

## IMPRESSION :- NORMAL X-RAY CHEST (PA)

DR. UMED SINGH RATHORE  
MD RADIODIAGNOSIS  
RMC NO. - 34498/24812



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## Transthoracic Echo-Doppler Report

**Name** : Mrs. Taramani Ji

**Age/Sex** : 39 YRS./ F

**Study Performed By** : Dr. Khan ikalakh

**Date** : 05/05/2023

LAB. 7060

### M- MODE/2D ECHO Features:

- No Chamber Enlargement / Hypertrophy.
- No Regional wall motion abnormality
- LVEF is 60%
- Normal LV Diastolic Function.
- No MR.
- No AR / No AS.
- No TR.
- No thrombus detected.
- No Pericardial effusion seen.

### Measurements (mm):

	<b>ABSOLUTE VALUE</b>	<b>NORMAL VALUE</b>
<b>Interventricular Septum</b>	10	06 - 10 mm
<b>Posterior Wall Thickness</b>	10	06 - 10 mm
<b>LV ED dimension</b>	43	35 - 55 mm
<b>LVES dimension</b>	23	22 - 40mm
<b>Left Atrium size</b>	30	27- 38 mm
<b>Aortic root diameter</b>	22	22 - 34 mm
<b>LV Ejection Fraction (%)</b>	60%	55%-80%





**BATUL HEART CARE**  
& GENERAL HOSPITAL

B-34, Subhash Marg, Indira Nagar,  
Jhunjhunu (333001), Rajasthan

Ph. : 01592-233786

Mob. : +91-7297097172, +91-7023507411

ikalakh786@gmail.com, ikalakh786@yahoo.com

**Mitral Valve:**

- **Morphology** :- Normal.  
No MR

**Aortic Valve:**

- **Morphology:** Normal  
No AR / No AS

**Tricuspid Valve:**

- **Morphology:** Normal.  
No TR  
TR V max = m/sec

RVSP = (25+RAP)mmHg

**Pulmonary Valve:**

- **Morphology:** Normal.  
V max = 0.74m/sec  
No PR

Max PG = 2.17mmHg



**Final Interpretation:**

No Chamber Enlargement / Hypertrophy.  
No regional wall motion abnormality.  
Normal LV Systolic function.

  
Dr. Khan Ikalakh  
MD(phy), PGDCC(Dip. Cardio), FNIC  
RMC-35204  
DR. KHAN IKALAKH AHMED HAMID  
M.D. (PHY.), PGDCC (Dip. Cardio), FNIC  
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