



Chetan Dadhanliya <cpdadhanliya@gmail.com>

Health Check up Booking Re Schedule Request(bobE31746),Package Code-PKG10000237, Beneficiary Code-38201

2 messages

Mediwheel <wellness@mediwheel.in>
To: cpdadhanliya@gmail.com
Cc: customercare@mediwheel.in

Fri, Apr 7, 2023 at 5:57 PM



📞 011-41195959

Email:wellness@mediwheel.in

Dear Panchmukhl Hospital,

Diagnostic/Hospital Location :Poonam Society, Mavdi , Chokadi ,150 Ring Road, Oppo. BRT Bus Stand - 360005,City:Rajkot

We regret to state that following request for Health check up appointment has been Re Scheduled by you. Please let us know if request had not been Re Schedule from your end. We will ask the user to make a fresh request for the same.

Booking Code : bobE31746
Appointment Date : 08-04-2023
Appointment Time : 9:30am-12:30pm
Beneficiary Name : MS. MAKWANA JAGRUTI G
Package Name : Medi-Wheel Full Body Health Checkup Female Above 40
Member Age : 41
Member Relation : Employee
Member Gender : Female
Address of Diagnostic/Hospital : Poonam Society, Mavdi , Chokadi ,150 Ring Road, Oppo. BRT Bus Stand - 360005
City : Rajkot
State : Gujarat
Pincode : 360005
Contact Details : 97146 54321
Email : cpdadhanliya@gmail.com

Please login to your account to confirm the same. Also you mail us for confirmation.

© 2021-2022, Arcolomi Healthcare Limited.

Chetan Dadhanliya <cpdadhanliya@gmail.com>
To: chavadadaya1@gmail.com, sindhavaradhika@gmail.com, daxavadecha45@gmail.com

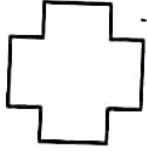
Fri, Apr 7, 2023 at 6:34 PM

[Quoted text hidden] Re: No. G19798
M.B.B.S.. C.I.H
PANCHMUKHLI HOSPITAL
MAVADI CHOKADI.

150' RING ROAD, RAJKOT

<https://mail.google.com/mail/u/0/?ik=b301b92577&view=pt&search=all&permthid=thread-f:1762520452118257949&simpl=msg-f:1762520452118>

1/1



PANCHMUKHI HOSPITAL

Dr CP Dadhaniya

Dr RC Dadhaniya

MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639, 8320711901

policy number :
full name : JAGRUTI C. MARWANA
identity proof : PAN CARD
identity proof no : AMKPM1283A
gender : female
height : 153
weight : 66 kg
BP : 100/70
pulse : 70/min
blood sample : YES
fasting mode : YES
non fasting mode : YES

past history : NO H/O DM, HT, or Thyroid

Remarks : ① L.S.C.S is done on 25/12/2014
② L.S.C.S is done on 26/06/2018

Gynae : Healthy. Regular menses
Dental : Healthy, pre-molar extraction

Dr. C. P. DADHANIYA
M.B.B.S., C.I.H.
Reg. No. G19798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI.
150' RING ROAD, RAJKOT

X

NAME : Jagruti G. Melkwana DIAG. DATE: 8/04/2023
AGE/GENDER: 42 / female

PATIENT'S REFRACTION DETAILS

		SPHE	CYL	AXIS	VN
R	D	-1.25	N	N	6/9
	N	N			6/9
L	D	-1.75	N	N	6/9
	N	N			6/9

REMARKS :

CHECKED BY : Dr. C.P. Dadhaniya

Dr. C. P. DADHANIYA
M.B.B.S., C.I.H
REG. NO. G19798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT

Tread Mill Test

Patient Name	:	Jagruti Makwana	Age	:	43yrs/F
OPD/IPD	:	OPD	ID. No.	:	
Ref. By	:	Dr. C.P Dadhaniya	Resting BP	:	130/80
Report Date	:	08/04/2023	Max. BP	:	160/80

Patient Reaches exercise limit at 7.00 METS.

No signs of ischemia at the exercise level.

Adequate increase of HR & BP.

No significant Arrhythmia.

The stress test was terminated after 6:00 minutes as patient complained of Fatigue.
Patient achieved 89% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.


DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

PANCHMUKHI HOSPITAL
 MAVADI CHOWK, 150 RING ROAD, RAJKOT
 159/JAGRUTI MAKWANA 42 Yrs/Female 0 Kg/0 Cms
 Date: 08-Apr-2023 11:15:40 AM

Ref. By :
 Medication :
 Objective :

Summary

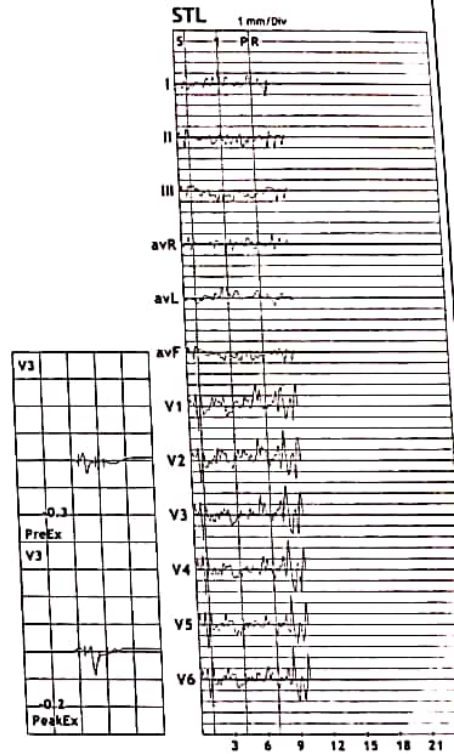
Protocol : BRUCE
 History :



Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine	0:01	0:53	0.0	0.0	1.0	78	130/80	101	-	
Standing	0:01	0:56	0.0	0.0	1.0	126	130/80	163	-	
HV	0:01	0:59	0.0	0.0	1.0	95	130/80	123	-	
ExStart	0:01	1:03	0.0	0.0	1.0	89	130/80	115	-	
Stage 1	3:00	3:01	2.7	10.0	4.6	146	140/80	204	-	
PeakEx	3:00	6:00	4.0	12.0	7.0	159	160/80	254	-	
Recovery	1:00	6:01	0.0	0.0	1.0	124	160/80	198	-	
Recovery	3:00	6:01	0.0	0.0	1.0	86	130/80	111	-	

Findings :

Exercise Time : 6:00 minutes
 Max HR attained : 159 bpm 89% of Max Predictable HR 178
 Max BP : 160/80(mmHg)
 WorkLoad attained : 7 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maxmum Depression: 4:58
 Test Complete



Advice/Comments:

PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

HR: 78 bpm
METS: 1.0
BP: 130/80

MPHR: 43% of 178
Speed: 0.0 kmph
Grade: 0.0%

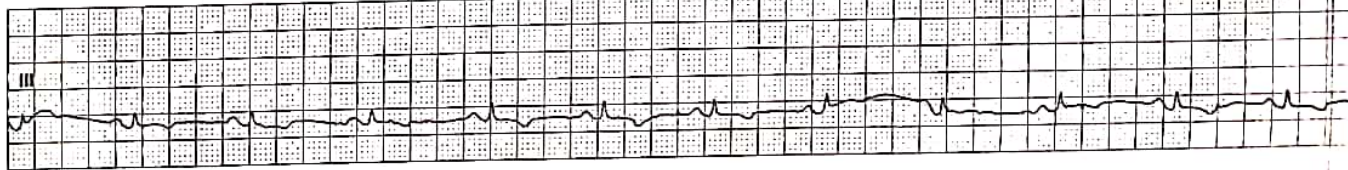
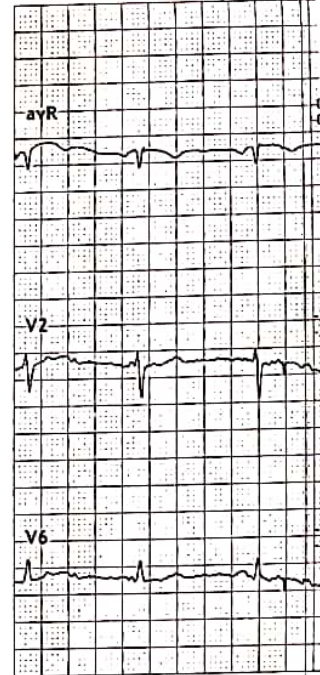
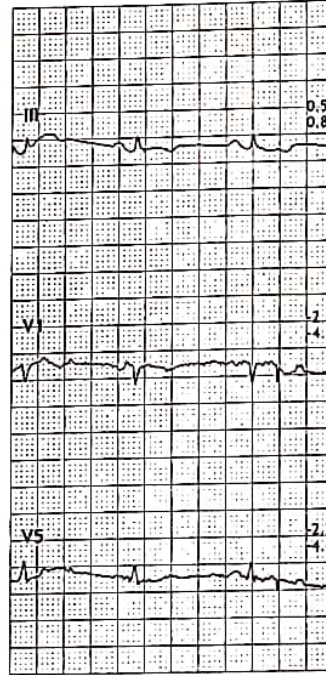
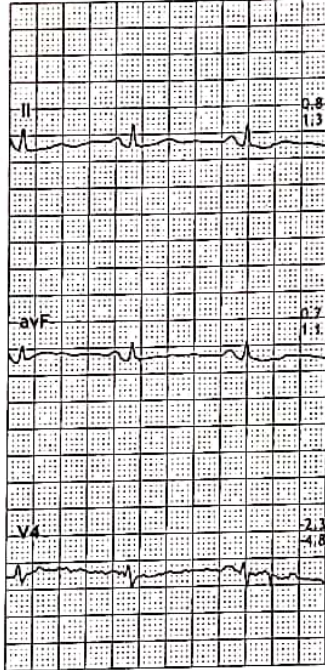
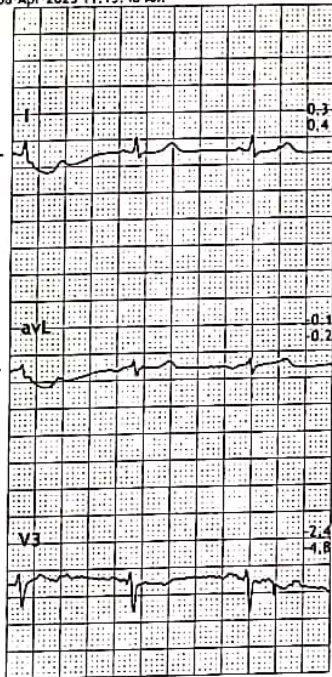
Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 00:52
BLC :On
Notch :On

Supine
10.0 mm/mV
25 mm/Sec.



3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

HR: 126 bpm
METS: 1.0
BP: 130/80

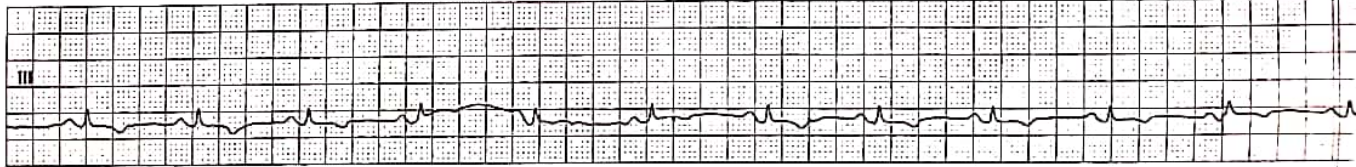
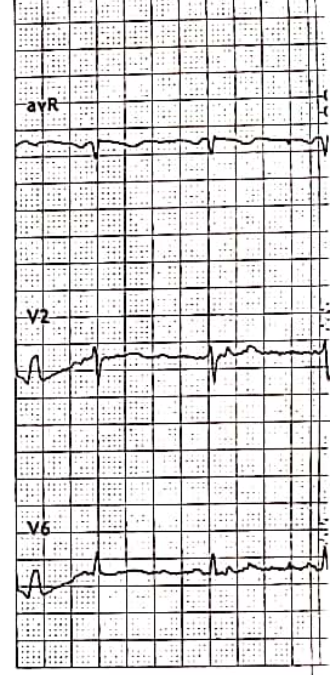
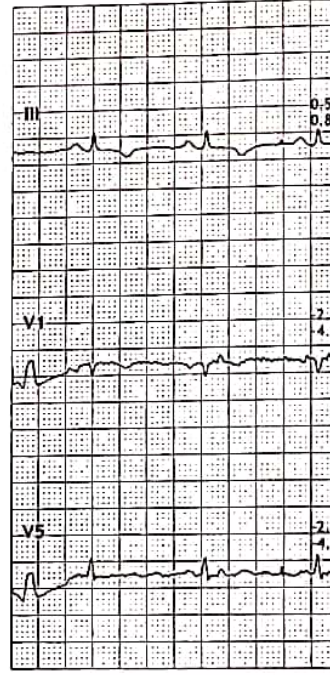
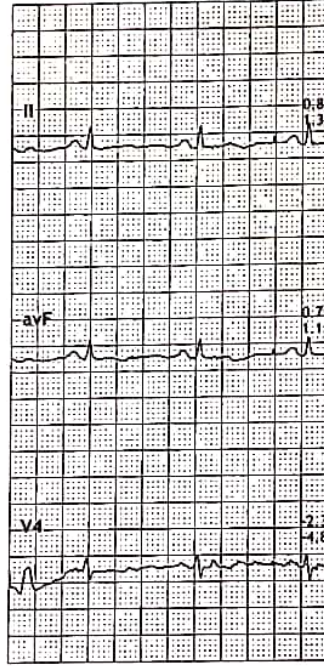
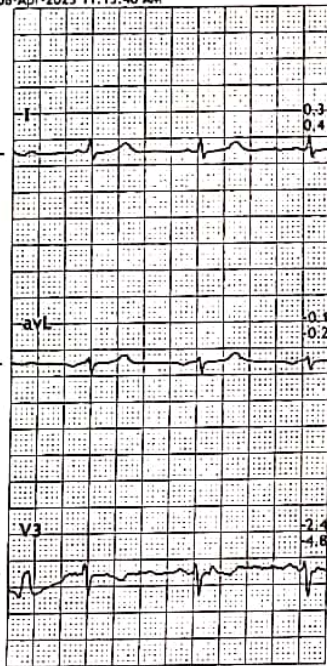
MPHR: 70% of 178
Speed: 0.0 kmph
Grade: 0.0%

3x4+1 Rhythm Lead

Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 00:55
BLC : On
Notch : On

Standing
10.0 mm/mV
25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

HR: 95 bpm
METS: 1.0
BP: 130/80

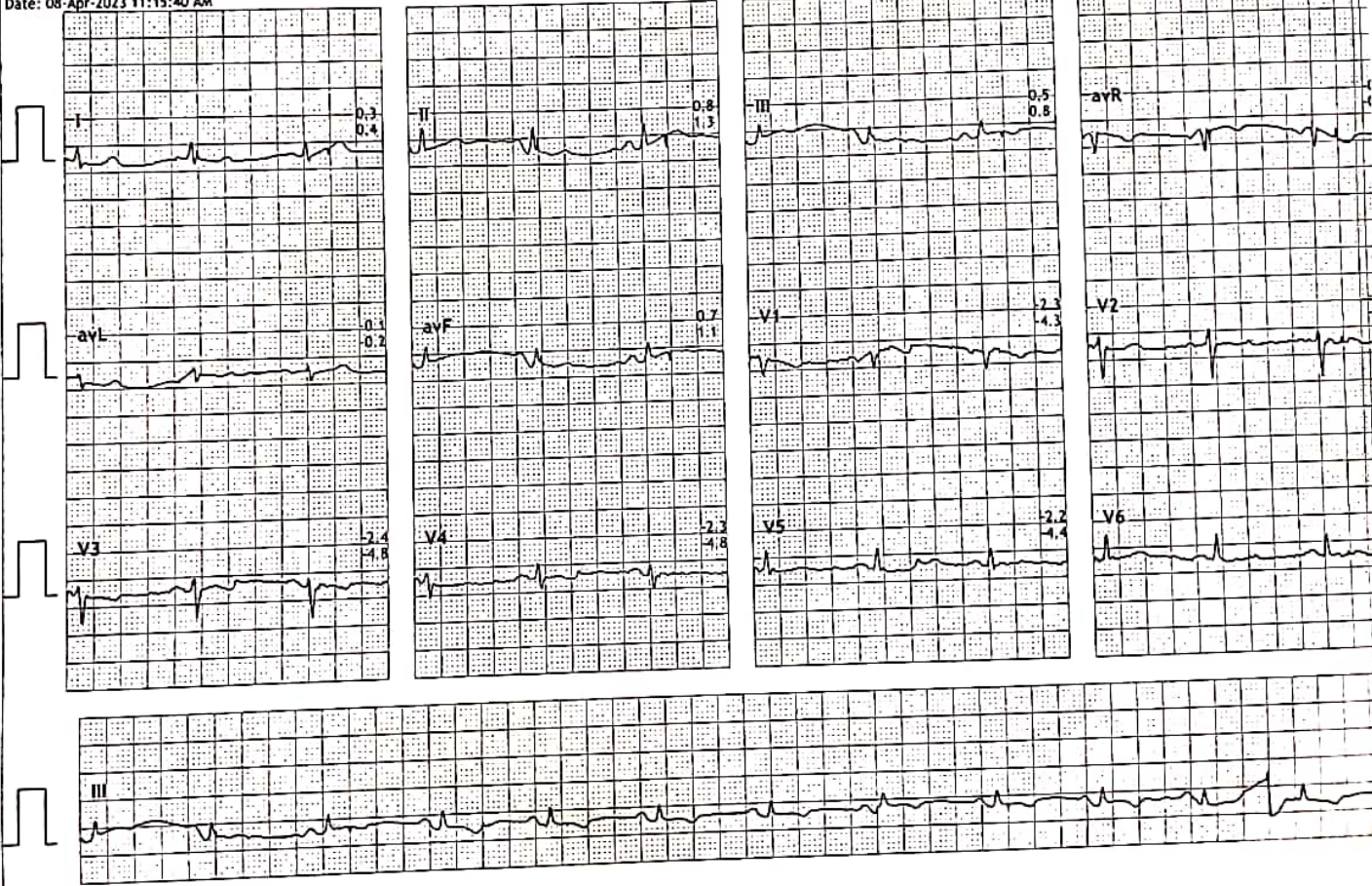
MPHR: 53% of 178
Speed: 0.0 kmph
Grade: 0.0%

3x4+1 Rhythm Lead

Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 00:58
BLC :On
Notch :On

HV
10.0 mm/mV
25 mm/Sec.



Print Date: 08-Apr-2023

DR MAULIK HANSALIA

PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

HR: 89 bpm
NETS: 1.0
BP: 130/80

MPHR: 50% of 178
Speed: 0.0 kmph
Grade: 0.0%

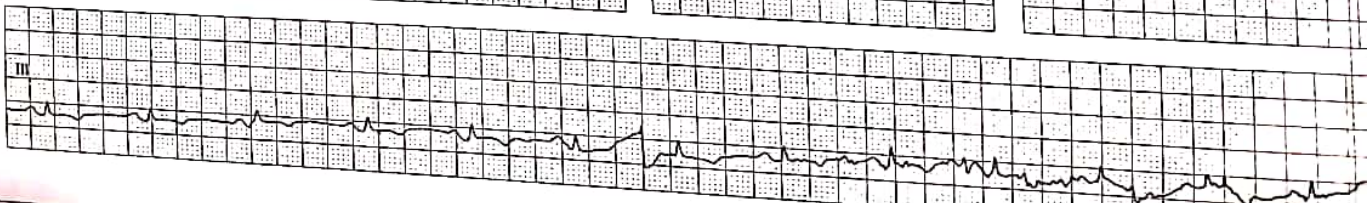
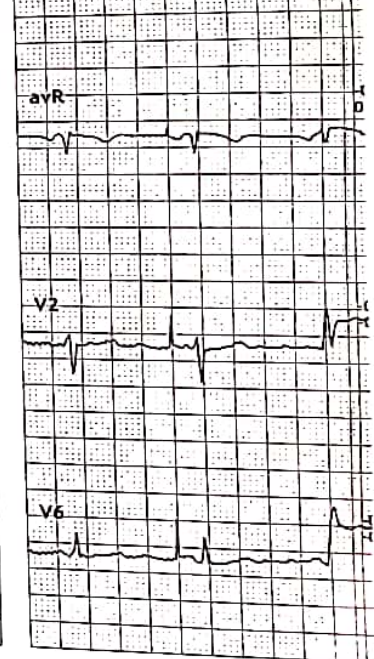
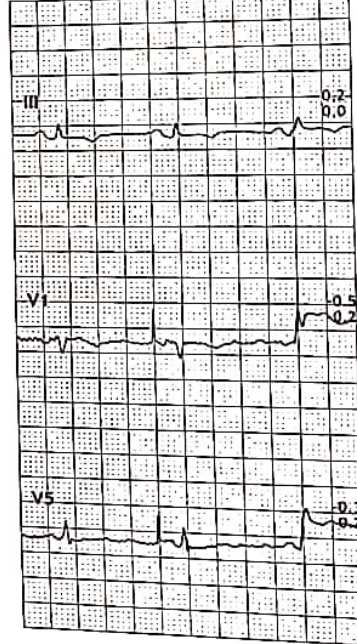
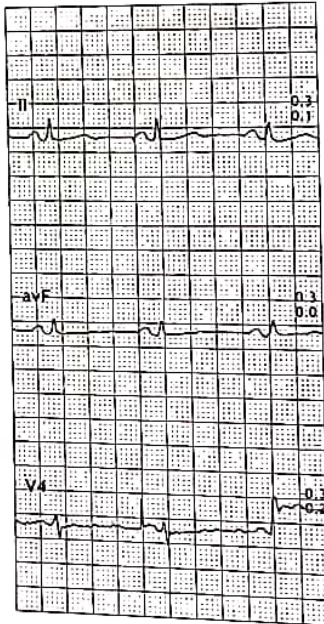
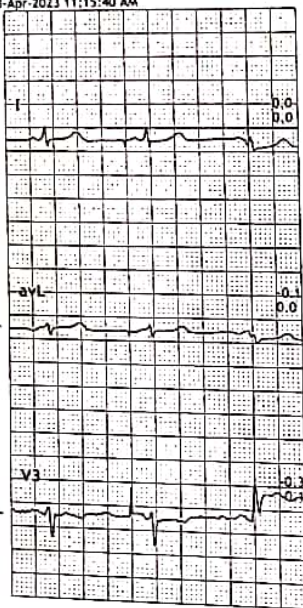
Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 01:02
BLC :On
Notch :On

ExStart
10.0 mm/mV
25 mm/Sec.



3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 159 / JAGRUTI MAKWANA
 42 Yrs / Female
 0 Kg / 0 Cm
 Date: 08-Apr-2023 11:15:40 AM

3x4+1 Rhythm Lead

HR: 146 bpm
 METS: 4.6
 BP: 140/80

MPHR: 82% of 178
 Speed: 2.7 kmph
 Grade: 10.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 03:00
 BLC :On
 Notch :On

BRUCE: Stage 1
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

3x4+1 Rhythm Lead

HR: 159 bpm
METS: 7.0
BP: 160/80

MPHR: 89% of 178
Speed: 4.0 kmph
Grade: 12.0%

Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 05:59
BLC :On
Notch :On

BRUCE: Peak
10.0 mm/mV
25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
159 / JAGRUTI MAKWANA
42 Yrs / Female
0 Kg / 0 Cm
Date: 08-Apr-2023 11:15:40 AM

3x4+1 Rhythm Lead

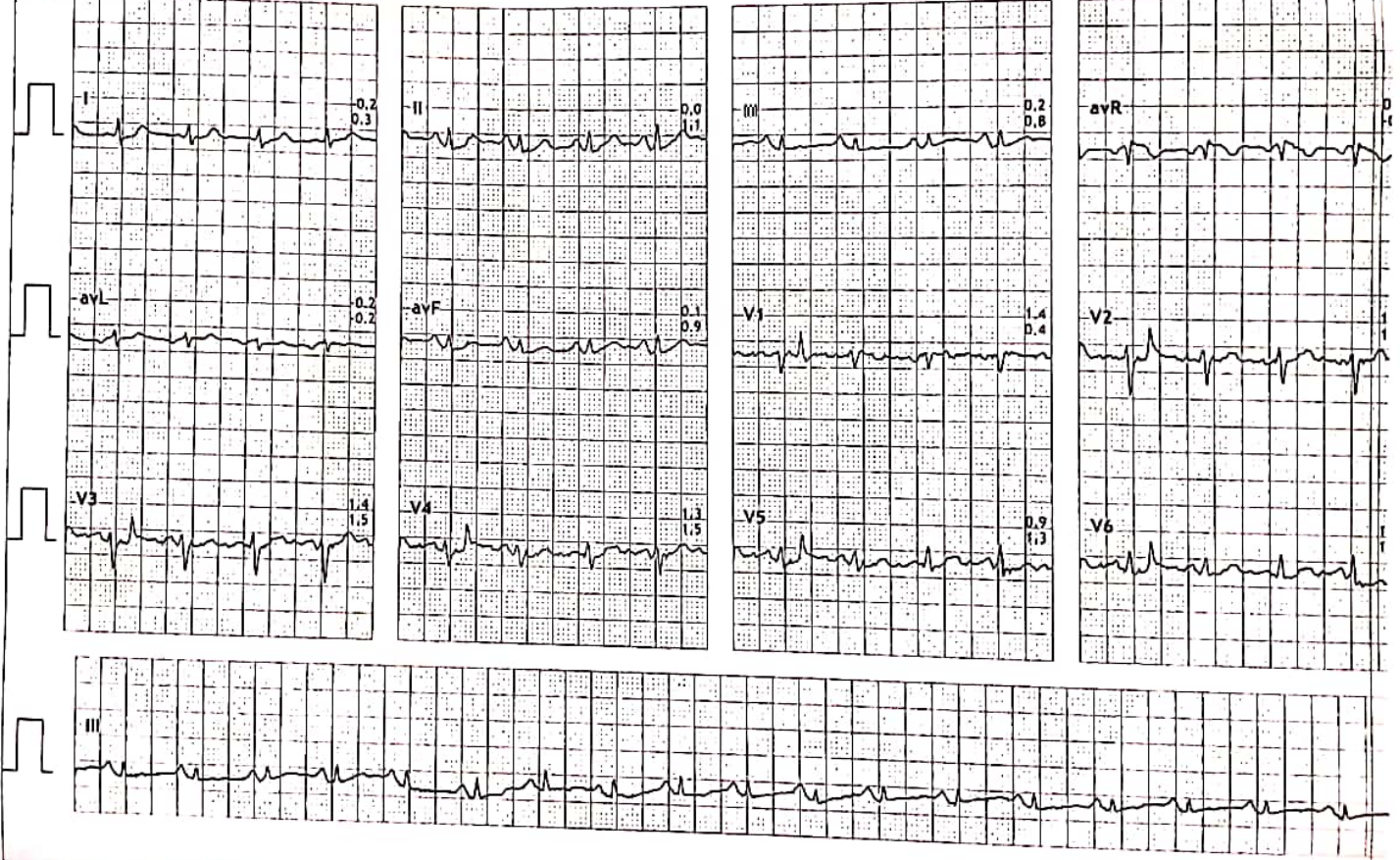
HR: 124 bpm
METS: 1.0
BP: 160/80

MPHR: 69% of 178
Speed: 0.0 kmph
Grade: 0.0%

Raw ECG
BRUCE
(0.05-100)Hz

Ex Time 06:00
BLC :On
Notch :On

Recovery(1:00)
10.0 mm/mV
25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 159 / JAGRUTI MAKWANA
 42 Yrs / Female
 0 Kg / 0 Cm
 Date: 08-Apr-2023 11:15:40 AM

3x4+1 Rhythm Lead

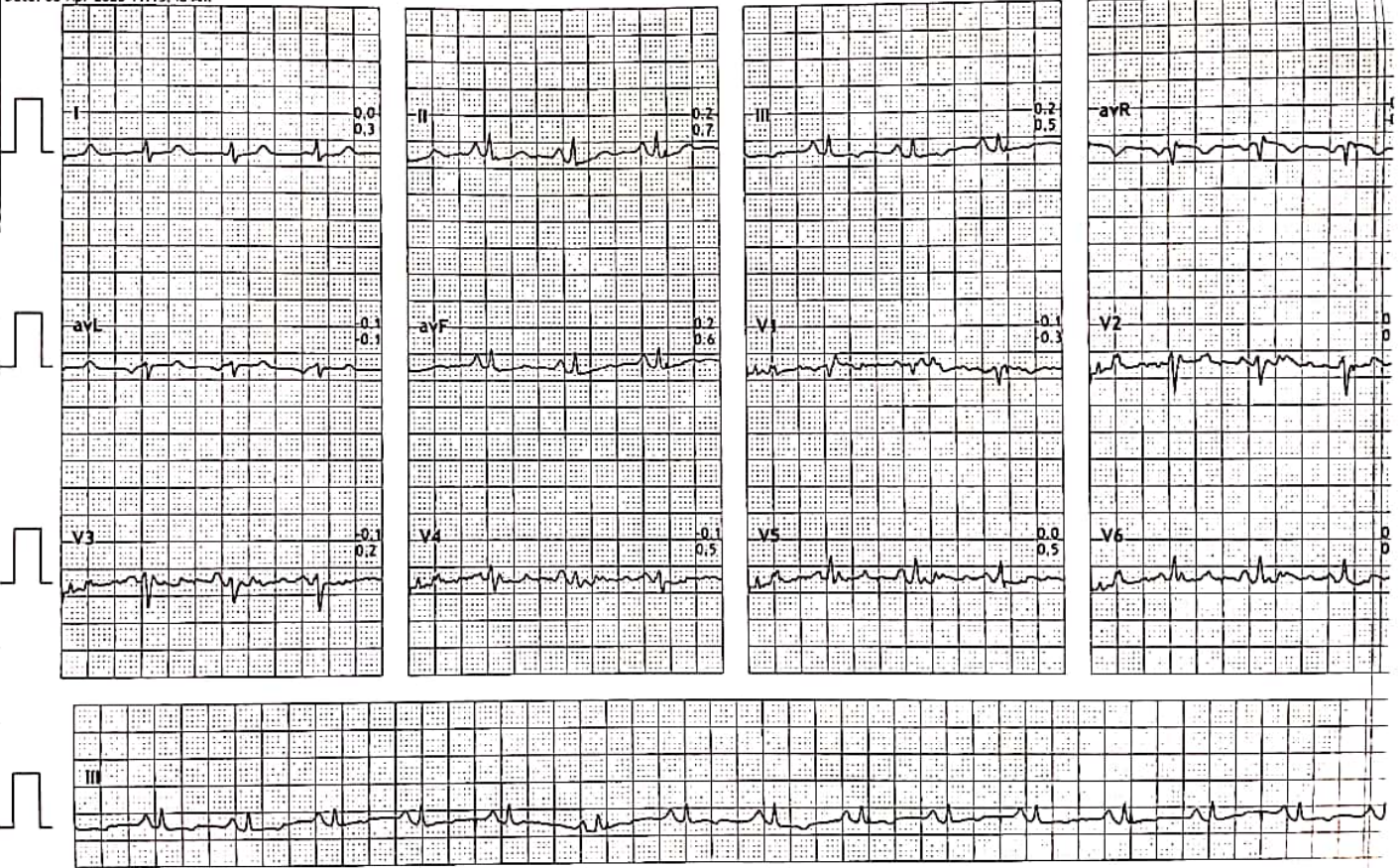
HR: 86 bpm
 METS: 1.0
 BP: 130/80

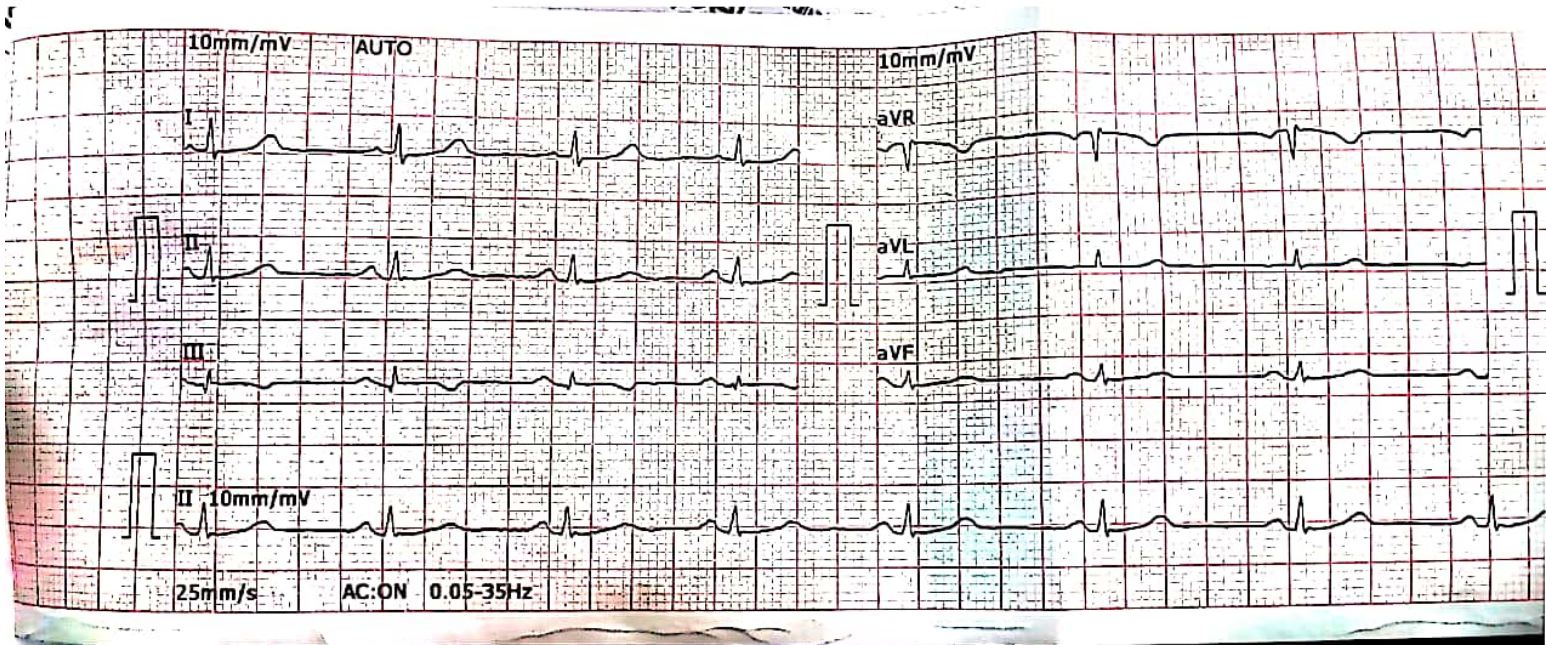
MPHR: 48% of 178
 Speed: 0.0 kmph
 Grade: 0.0%

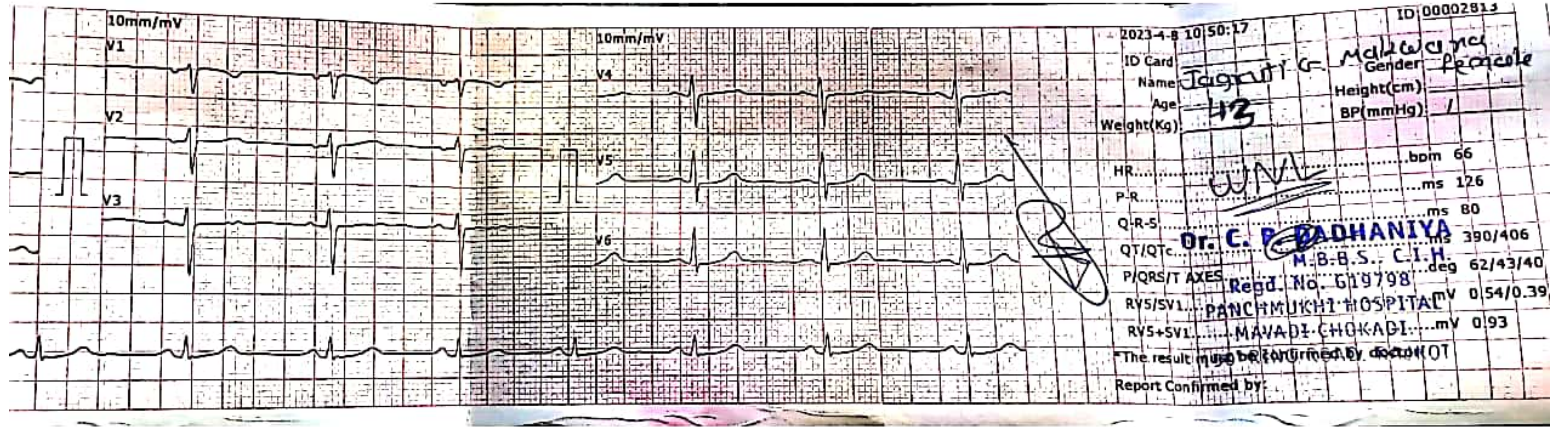
Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 06:00
 BLC :On
 Notch :On

Recovery(3:00)
 10.0 mm/mV
 25 mm/Sec.









Pt.'s Name: JAGRUTI G MAKWANA

Date: 8 April, 2023

Radiograph of chest (PA view)

- Both the lung fields are clear
- *No e/o consolidation, cavitations or collapse.*
- Both the hila appears normal
- *Both costophrenic angles appear clear.*
- Both domes of diaphragm appear normal.
- Cardiac size is within normal limit.
- Bones under view reveals no evident abnormality.

Thanks for reference.


DR PRATIK KAGATHARA
MD

Pt.'s. Name: JAGRUTI G MAKWANA

Date: 08 April 2023

SONO-MAMMOGRAPHY

Done by using 6-15 MHz High frequency transducer.

- Bilateral breast parenchyma appear normal.
- No evidence of focal solid/ cystic lesion seen.
- No evidence of abnormal calcification.
- No evidence of enlarged axillary lymph node on either side.

CONCLUSION :

- No significant abnormality seen in present study

Thanks for reference.


DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS


USG ABDOMEN AND PELVIS

- **LIVER:** is normal in size and shows bright parenchymal echotexture. No focal or diffuse lesions are seen. The intra hepatic biliary and portal radicles are normal. The portal vein and CBD are normal.
- **GALL BLADDER:** Well distended and appears unremarkable. No evidence of calculus or cholecystitis is seen. Gall bladder wall thickness appears normal.
- **PANCREAS:** appears normal in size and echotexture. No focal lesion seen. No evidence of peripancreatic inflammatory changes.
- **SPLEEN:** is normal in size and echotexture. No evidence of focal or diffuse lesion seen.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No evidence of calculus or hydronephrosis on either side.
- **URINARY BLADDER:** well distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **UTERUS:** is mildly bulky in size and coarsened myometrial echotexture. Normal in shape and position. Endometrial thickness measures 7.5 mm. Endometrial echotexture is normal. Nabothian cyst in cervix.
- **BOTH OVARIES** are normal in size & echotexture. No focal solid or cystic lesions are seen. No adnexal mass is seen
- No free fluid is seen in the POD. Visualized bowel loops appears unremarkable, No evidence of necrotic lymphadenopathy is seen. RIF/ LIF clear. Bilateral C-P angel is clear.

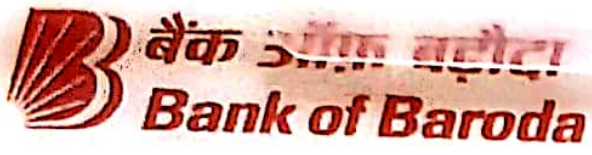
CONCLUSION:

- Bulky uterus with coarsened myometrial echotexture --- changes of adenomyosis.
- Nabothian cyst in cervix.
- Grade I fatty changes in liver.

Thanks for reference.



DR PRATIK KAGATHARA
MD



नाम
Name **JAGRUTI G. MAKWANA**

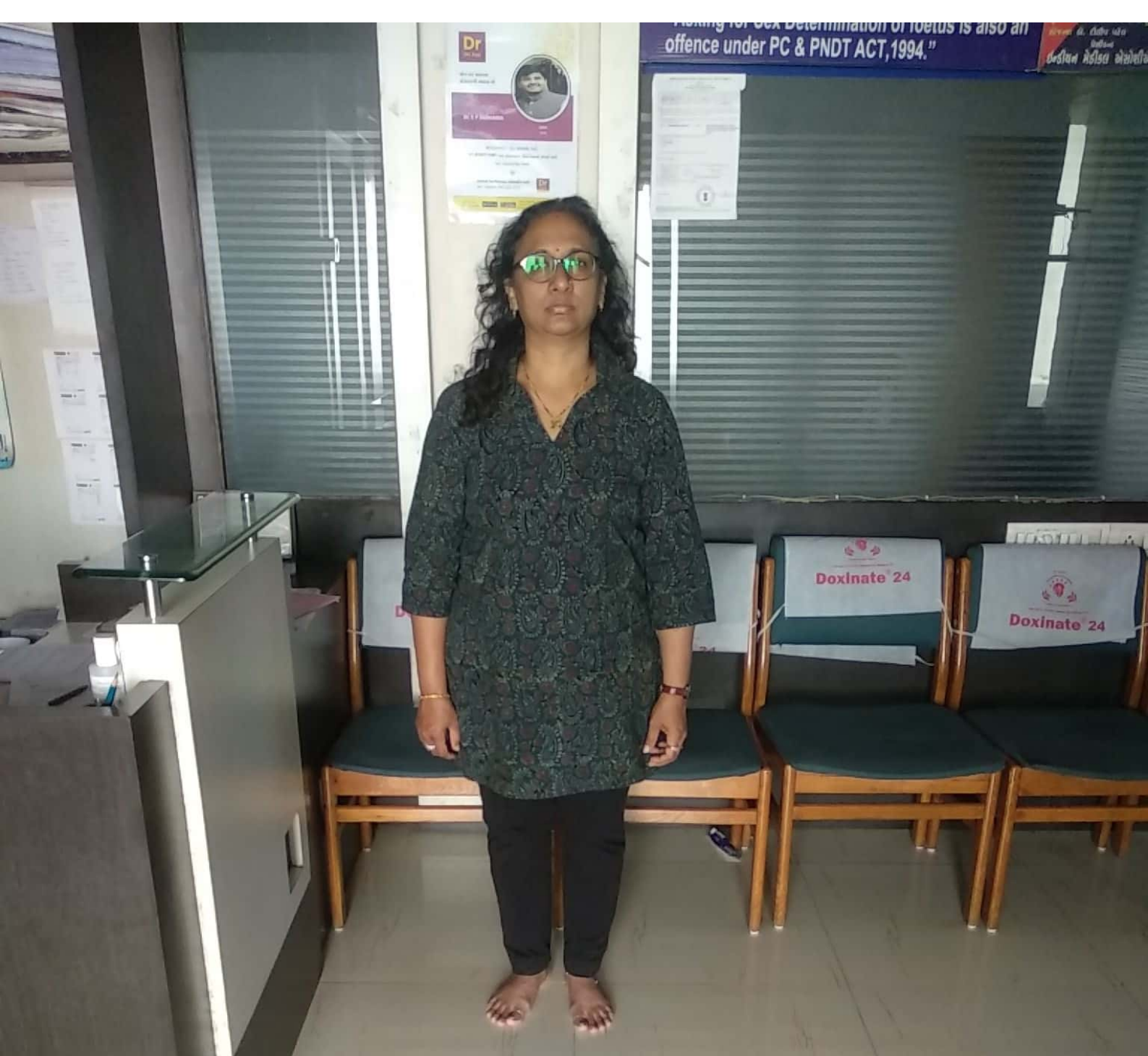
कर्मचारी कूट कं.
E.C. No. **161386**



JAGJEET KUMAR
DY.REGIONAL MANAGER(AGM)
REGIONAL OFFICE, RAJKOT

जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder



Medi wheel jagruti g makwana

 **GPS Map
Camera Lite**

7Q8M+5PP, Poonam Society, Mavdi, Rajkot, Gujarat 360004, India

Latitude
22.2653508°

Longitude
70.7843076°

Local 11:03:03 AM
GMT 05:33:03 AM

Altitude 145 meters
Saturday, 08.04.2023



2023/4/8 13:28

आयकर विभाग
INCOME TAX DEPARTMENT



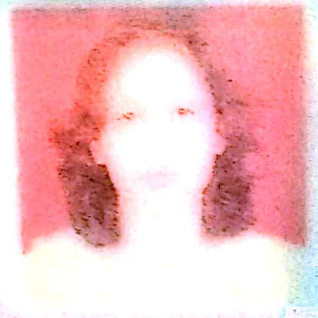
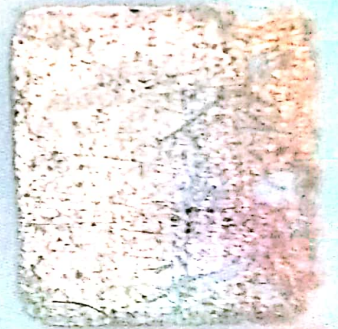
भारत सरकार
GOVT. OF INDIA

JAGRUTI G MAKWANA
G J MAKWANA

18/01/1980

Permanent Account Number

ANKPM1283A



A handwritten signature in black ink, appearing to read 'Jagruiti G Makwana', written over a horizontal line.

Signature



TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

COMPLETE BLOOD COUNT (CBC)
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval	
RBC Parameters				
Hemoglobin (SLS method)	11.5	g/dL	12.5 - 16.0	
Hematocrit (Electrical Impedance)	31.90	%	37 - 47	
RBC Count (Electrical Impedance)	4.43	million/cmm	4.2 - 5.4	
MCV (Calculated)	72.0	fL	78 - 100	
MCH (Calculated)	25.9	Pg	27 - 31	
MCHC (Calculated)	36.0	%	30 - 35	
RDW (Calculated)	12.5	%	11.5 - 14.0	
WBC Parameters				
WBC Count (Flowcytometry)	6630	/cmm	4000 - 10500	
DIFFERENTIAL WBC COUNT				
Neutrophils (%)	65 %	% Range 42.02 - 75.2	Abs. Value 4310 /cmm	Abs. Range 1800 - 7700
Lymphocytes (%)	25 %	% Range 20 - 45	Abs. Value 1658 /cmm	Abs. Range 1000 - 3900
Eosinophils (%)	03 %	% Range 1 - 4	Abs. Value 199 /cmm	Abs. Range 0 - 450
Monocytes (%)	07 %	% Range 2 - 8	Abs. Value 464 /cmm	Abs. Range 200 - 1000
Basophils (%)	00 %	% Range 0 - 1	Abs. Value 0 /cmm	Abs. Range 20 - 100
Platelete Parameter				
Platelet Count	218000	/cmm	150000 - 450000	
MPV	8.7	fL	7.4 - 10.4	
PDW	65.9	%	8.3 - 56.6	
PCT (Platelet Haematocrit)	0.19	%	0.2 - 0.5	

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 1 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name	: Jagruti G. Makwana	Reg. No	: 304100728
Age/Sex	: 43 Years / Female	Reg. Date	: 08-Apr-2023 04:04 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 08-Apr-2023 12:00 AM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 08-Apr-2023 06:06 PM

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	"O"		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 2 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

Test	Result	Unit	Biological Ref. Interval
Erythrocyte sedimentation rate			
Sample, EDTA whole blood			
ESR (After 1 hour)	9	mm/hr	3 - 12

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 3 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 07:05 PM

FASTING PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <i>HEXOKINASE</i>	84.0	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic
Urine Glucose -F <i>Glucose Oxidase-Peroxidase</i>	Nil		
Urine Acetone -F	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose \geq 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 4 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 07:05 PM

POST PRANDIAL PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) <i>HEXOKINASE</i>	113.0	mg/dL	70 - 140
Urine Glucose- PP <i>Glucose Oxidase-Peroxidase</i>	Nil		
Urine Acetone- PP	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34; S11.

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 5 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

LIPID PROFILE
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <i>Cholesterol Oxidase</i>	129.3	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>Enzymatic Reaction With Glycerol Kinase</i>	101.2	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <i>Siemens AHDL</i>	45.3	mg/dL	High Risk : < 40 Low Risk : >= 60
LDL Cholesterol <i>Siemens ALDL</i>	86.1	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol <i>Calculated</i>	20.24	mg/dL	15 - 35
LDL / HDL RATIO <i>Calculated</i>	1.90		0 - 3.5
Cholesterol /HDL Ratio <i>Calculated</i>	2.85		0 - 5.0

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 6 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

UREA & BLOOD UREA NITROGEN

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Urea <i>Calculated</i>	31.5	mg/dL	17 - 43
Blood Urea Nitrogen (BUN) <i>UREASE/GLDH</i>	14.71	mg/dL	7.0 - 18.0
Uric Acid <i>Uricase</i>	5.3	mg/dL	2.6 - 6.2
GGT <i>Siemens/37C</i>	46.2	U/L	5 - 55

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 7 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name	: Jagruti G. Makwana	Reg. No	: 304100728
Age/Sex	: 43 Years / Female	Reg. Date	: 08-Apr-2023 04:04 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 08-Apr-2023 12:00 AM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 08-Apr-2023 06:06 PM

Creatinine With eGFR

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Creatinine <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small>	0.62	mg/dL	0.55 - 1.02
eGFR	124.59	ml/min/1.73 sq m	Normal or High: >=90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 8 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

HEMOGLOBIN A1 C (HBA1C)
Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HbA1C <i>Siemens Dimension</i>	5.03	%	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
Mean Blood Glucose <i>Calculated</i>	97.66	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

Explanation :

- Total hemoglobin A1c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

HbA1c assay Interferences :

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

DRI.

This is an Electronically Authenticated Report.

Page 9 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)



towards the healthiness...



TEST REPORT

Name	: Jagruti G. Makwana	Reg. No	: 304100728
Age/Sex	: 43 Years / Female	Reg. Date	: 08-Apr-2023 04:04 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 08-Apr-2023 12:00 AM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 08-Apr-2023 06:06 PM

THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
Thyroid Stimulating Hormone (TSH) <small>CLIA</small>	2.10	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester :0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

Triiodothyronine (T3) <small>CLIA</small>	1.03	ng/mL	0.6 - 1.81
---	------	-------	------------

Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

DRI.

This is an Electronically Authenticated Report.

Page 10 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

Thyroxine (T4) 7.25 µg/dL 4.5 - 12.6
CLIA

Clinical Significance :

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 11 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name	: Jagruti G. Makwana	Reg. No	: 304100728
Age/Sex	: 43 Years / Female	Reg. Date	: 08-Apr-2023 04:04 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 08-Apr-2023 07:14 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 08-Apr-2023 07:19 PM

STOOL EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
<u>PHYSICAL EXAMINATION</u>			
Quantity	30a gms		
Colour	Brown		
Consistency	Semi Solid		
<u>CHEMICAL EXAMINATION</u>			
Occult Blood <i>Peroxidase Reaction with o-Dianisidine</i>	Negative		
Reaction <i>pH Strip Method</i>	Neutral		
Reducing Substance	Absent		
<u>MICROSCOPIC EXAMINATION</u>			
Mucus	Absent		
Pus Cells	Absent		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.
False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.
False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

D.R.I.

This is an Electronically Authenticated Report.

Page 12 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)



towards the healthiness...



TEST REPORT

Name	: Jagruti G. Makwana	Reg. No	: 304100728
Age/Sex	: 43 Years / Female	Reg. Date	: 08-Apr-2023 04:04 PM
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On	: 08-Apr-2023 07:14 PM
Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 08-Apr-2023 07:19 PM

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 13 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

URINE ROUTINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

PHYSICAL EXAMINATION

Quantity	30 cc		
Colour	Pale Yellow		
Clarity	Clear		

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	6.0		4.6 - 8.0
Sp. Gravity	1.010		1.001 - 1.035
Protein	Nil		
Glucose	Nil		
Ketone Bodies	Nil		
Urobilinogen	Normal Present		
Bile salts:	Absent		Absent
Bile Pigments:	Absent		Absent
Nitrite	Nil		

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	Absent
Erythrocytes (Red Cells)	Absent
Epithelial Cells	Absent
Amorphous Material	Absent
Casts	Absent
Crystals	Absent
Bacteria	Absent

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 14 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





TEST REPORT

Name : Jagruti G. Makwana	Reg. No : 304100728
Age/Sex : 43 Years / Female	Reg. Date : 08-Apr-2023 04:04 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 08-Apr-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 08-Apr-2023 06:06 PM

LIVER FUNCTION TEST

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <i>BIURET</i>	7.3	g/dL	6.4 - 8.2
Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i>	4.26	g/dL	3.40 - 5.00
Globulin <i>Calculated</i>	3.04	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.40		0.8 - 3.1
SGOT (AST) <i>Siemens/37C</i>	25.9	U/L	15 - 37
SGPT (ALT) <i>Siemens/37C</i>	41.9	U/L	14 - 59
Alakaline Phosphatase <i>Siemens/37C</i>	84.2	U/L	46 - 116
Total Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.26	mg/dL	0.2 - 1
Conjugated Bilirubin <i>Diazo-Caffeine/Benzoate Coupling (Jendrassik-Grof) w/blank</i>	0.14	mg/dL	0 - 0.20
Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.12	mg/dL	0.0 - 1.1

----- End Of Report -----

towards the healthiness...

DRI.

This is an Electronically Authenticated Report.

Page 15 of 15

Dr. Viral Jethava
M.D. (Path, PDCC)

Dr. Viral R. Jethava
M.D. (Path, PDCC)





JAGRUTI G MAKWANA 42 Y/F CHEST PA 08-Apr-23
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)