



भारत निर्वाचन आयोग
पहचान पत्र

ELECTION COMMISSION OF INDIA
IDENTITY CARD

AWX2044253



निर्वाचक का नाम :

गीता

Elector's Name :

GEETA

पति का नाम : राजीव कुमार

Husband's Name : RAJIV KUMAR

लिंग / Sex : महिला / Female

जन्मतिथि/ DOB : 10/08/1988

*Health checkup
only SJM Hospital*



ID: 14360

25-06-2022 10:52:39 AM

MRS. GEETA
Female 34Years

Diagnosis Information:

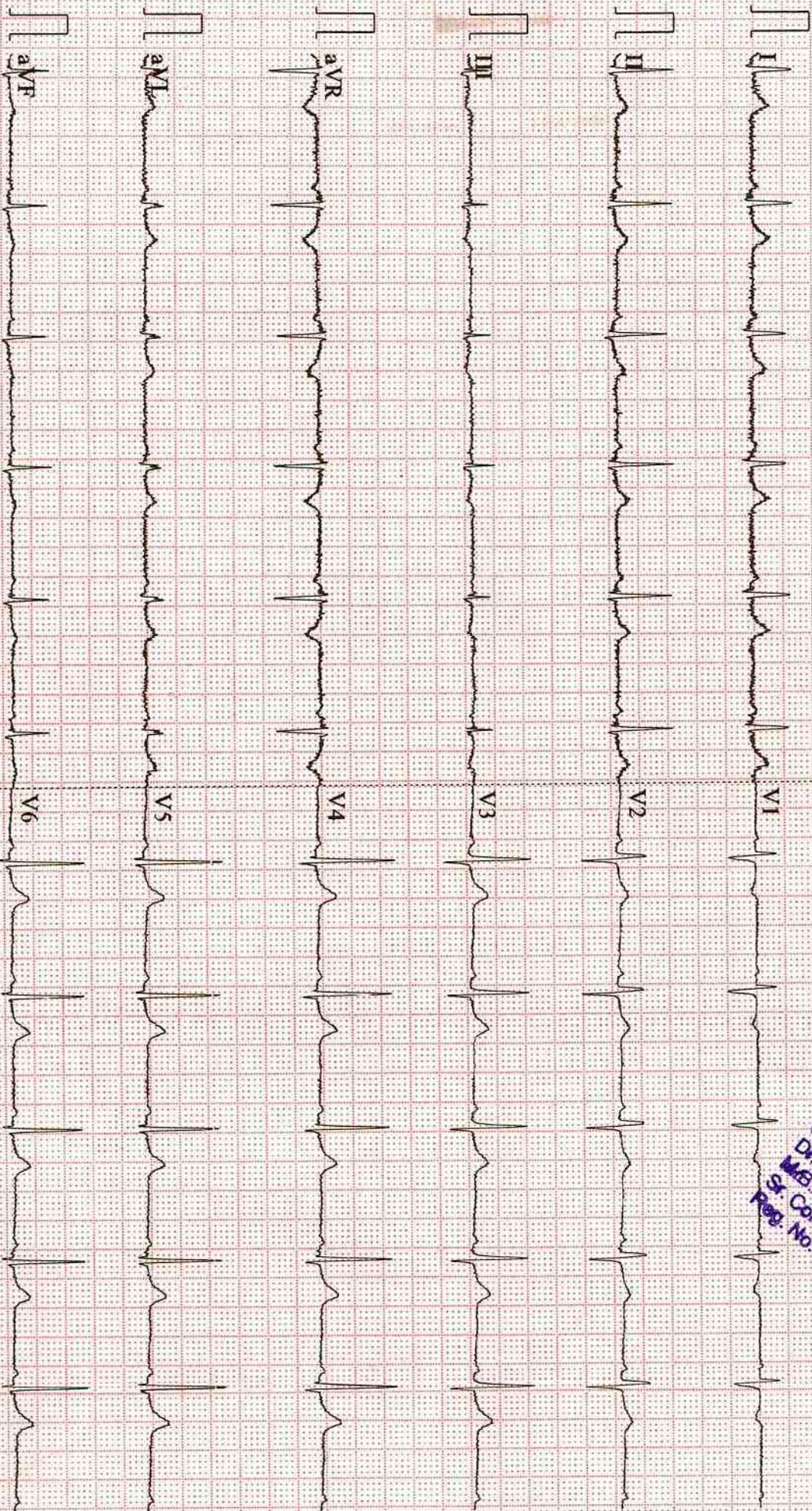
Sinus Rhythm
Normal ECG

HR	: 66	bpm
P	: 74	ms
PR	: 125	ms
QRS	: 77	ms
QT/QTc	: 368/387	ms
P/QRS/T	: -8/48/13	°
RV5/SV1	: 1.294/0.450	mV

21/27

Report Confirmed by:

WML
Dr. Vinod
SJM SUPER SPECIALITY HOSPITAL
Dr. Vinod Kumar Bhat
MB, B.S., M.D. (Medicine)
Sr. Consultant Physician
Reg. No. 30989 (GMC)



0.67-100Hz AC50 25mm/s 10mm/mV 2*5.0s 66 V2.2 SEMIP V1.81 SIM SUPER SPECIALITY HOSPITAL SEC 63



SJM SUPER SPECIALITY HOSPITAL, & IVF CENTRE



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

C/O BOB

25.08.2022.

(IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst. & Gynae)
Dr. Neha Zutshi (Embryologist)

OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst. & Gynae)
Dr. Smritee Virmani (Endoscopy)
MBBS, DGO, DNB, ICOG (Obst. & Gynae)
Dr. Vinod Bhat
M.B.B.S, MD (General Medicine)
Dr. Vineet Gupta, MS (ENT)
Dr. Naveen Gupta, MS (EYE)
Dr. Ashutosh Singh, MS (Urology)
Dr. Rahul Kaul (Spine Surgeon)
MBBS, MS, (Orthopaedic)
Dr. Raj Ganjoo MD (Psychiatric)
Dr. Akash Mishra (Neuro Surgeon)
Dr. Sanjay Sharma (Cardiologist)
Dr. S.K. Pandita, MS (Surgeon)
Dr. B.P. Gupta, MS (Surgeon)
Dr. Jaisika Rajpal
(MDS), (Periodontist & Implantologist)
Dr. Akash Arora
(MDS), Maxillofacial Surgeon
Dr. Deepa Maheshwari
M.B.B.S., MD, FRM, (IVF Specialist)
Dr. Vivek Kumar Gupta
MBBS, MS (General Surgeon)
M.Ch. (Plastic Surgery)
Dr. Anand Kumar
MBBS, MD (Paediatrics)
Dr. Amit kumar Kothari
MBBS, MD (Medicine)
Dr. Amit Aggarwal
M.B.B.S., M.S. Ortho.

Facilities:

100 Beds. Private & Public wards
Inpatient & Outpatient - (OPD)Facilities
24-Hour ambulance and emergency
3 Operation theatres
Laparoscopic & Conventional Surgery
In vitro fertilization centre (IVF)
Intensive Care Unit. (ICU)
Neonatal ICUs (NICU)
Dental Clinic
Computerized pathology lab
Digital X-ray and ultrasound
Physiotherapy facilities
24-Hour Pharmacy
Cafeteria & Kitchen

Ms. Geeta

Physically and mentally fit

Dr. Vinod

SJM SUPER SPECIALITY HOSPITAL
Dr. Vinod Kumar Bhat
M.B.B.S, M.D (Medicine)
Sr. Consultant Physician
Reg. No. 30989 (DMC)

CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

Panels: Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)

Laboratory Report

Lab Serial no.	: LSHHI222732	Mr. No	: 92588
Patient Name	: Mrs. GEETA	Reg. Date & Time	: 25-Jun-2022 05:28 AM
Age / Sex	: 34 Yrs / F	Sample Receive Date	: 25-Jun-2022 05:37 PM
Referred by	: Dr. SELF	Result Entry Date	: 25-Jun-2022 06:52PM
Doctor Name	: Dr. RMO	Reporting Time	: 25-Jun-2022 06:52 PM
OPD	: OPD		

HAEMATOLOGY

	results	unit	reference
CBC / COMPLETE BLOOD COUNT			
HB (Haemoglobin)	12.8	gm/dl	12.0 - 16.0
TLC	7.3	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	73	%	40 - 70
Lymphocyte	22	%	20 - 40
Eosinophil	04	%	02 - 06
Monocyte	01	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.27	Thousand / UI	3.8 - 5.10
P.C.V	38.9	million/UI	0 - 40
M.C.V.	91.1	fL	78 - 100
M.C.H.	30.0	pg	27 - 32
M.C.H.C.	32.9	g/dl	32 - 36
Platelet Count	1.92	Lacs/cumm	1.5 - 4.5

Comments:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer

technician :

Typed By : Mr. BIRJESH



Swati Chandel
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

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HAEMATOTOLOGY

results unit reference

ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate) **50** mm/1hr 00 - 20

NOTE:-

An erythrocyte sedimentation rate test (ESR) detects inflammation that may be caused by infection and some autoimmune diseases.

BIOCHEMISTRY

results unit reference

BLOOD SUGAR (PP), Serum

SUGAR PP **152.6** mg/dl 80 - 140

BLOOD SUGAR F, Sodium Fluoride Pla

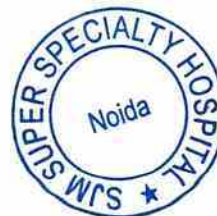
Blood Sugar (F) **116.7** mg/dl 70 - 110

Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



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BIOCHEMISTRY

	results	unit	reference
LIPID PROFILE, Serum			
S. Cholesterol	167.0	mg/dl	< - 200
HDL Cholesterol	45.9	mg/dl	42.0 - 88.0
LDL Cholesterol	102.0	mg/dl	50 - 150
VLDL Cholesterol	19.1	mg/dl	00 - 40
Triglyceride	95.5	mg/dl	00 - 170
Chloestrol/HDL RATIO	3.6	%	

Comment:

Lipid profile or lipid panel is a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

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technician :

Typed By : Mr. BIRJESH

Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Page 1
Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Micrbiologist

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BIOCHEMISTRY

	results	unit	reference
<u>KFT,Serum</u>			
Blood Urea	15.5	mg/dL	13 - 40
Serum Creatinine	0.60	mg/dl	0.6 - 1.1
Uric Acid	6.3	mg/dl	2.6 - 6.0
Calcium	9.2	mg/dL	8.8 - 10.2
Sodium (Na ⁺)	140.2	mEq/L	135 - 150
Potassium (K ⁺)	4.18	mEq/L	3.5 - 5.0
Chloride (Cl)	105.7	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	7.24	mg/dL	7 - 18
PHOSPHORUS-Serum	2.88	mg/dl	2.5 - 4.5

Comment:-

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

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(M.B.B.S., MD)
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OPD/IPD	: OPD		

URINE SUGAR (Fasting)

CHEMICAL EXAMINATION

Glucose : Nil

URINE SUGAR (PP)

CHEMICAL EXAMINATION

Glucose : Nil

Centre for Excellent Patient Care

Mr. BIRJESH




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Doctor Name	: Dr. RMO	ReportingTime	: 25-Jun-2022 06:52 PM
OPD/IPD	: OPD		

TEST NAME

VALUE

ABO

"A"

Rh

POSITIVE

Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell s surface that are responsible for the ABO types. Blood group is further classified as RH positive an RH negative.

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ReportingTime : 25-Jun-2022 06:52 PM

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

Quantity: 20 ml
Color: Straw
Transparency: clear

CHEMICAL EXAMINATION

Albumin: nil
Glucose: nil
PH: Acidic

MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF
RBC's: nil
Crystals: nil
Epithelial cells: 0-1 /HPF
Others: nil

Mr. BIRJESH



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(M.B.B.S., MD)
Pathologist & Microbiologist



Patient Name : Mrs. GEETA	Registration No
Age/Sex : 34 Y/Female	Registered : 25/Jun/2022
Patient ID : 012206250049	Collection : 25/Jun/2022 03:02PM
Barcode : 10096157	Received : 25/Jun/2022 03:37PM
Ref. By : Self	Reported : 25/Jun/2022 05:04PM
SRF No. :	Panel : SJM Hospital
Aadhar No :	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
HbA1C(Glycosylated Hemoglobin);EDTA			
Hb A1C, GLYCOSYLATED Hb ,EDTA <small>Particle enhanced immunoturbidimetric</small>	4.90	%	
Average Glucose <small>Calculated</small>	93.93	mg/dL	<125.0

Interpretation:
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
THERAPEUTIC GOALS FOR GLYCEMIC CONTROL	AGE > 19 YEARS GOAL OF THERAPY: <7.0 ACTION SUGGESTED: > 8.0 AGE <19 YEARS GOAL OF THERAPY: <7.5

Comment :
Glycosylated Hb is a normal adult Hb which is covalently bounded to a glucose molecule. Glycosylated Hb concentration is dependent on the average blood glucose concentration and is stable for the life of the RBC (120 days). Glycohaemoglobin serves as suitable marker of metabolic control of diabetics. Its estimation is unaffected by diet, insulin, exercise on day of testing and thus reflects average blood glucose levels over a period of last several weeks /months. There is a 3 - 4 week time before percent Glycohaemoglobin reflects changes in blood glucose levels.
ADA criteria for correlation between HbA1c & Mean plasma glucose levels.:

- 1.Glycosylated hemoglobin (HbA1c) test is three monthly monitoring done to assess compliance with therapeutic regimen in diabetic patients.
- 2.Since Hb1c reflects long term fluctuations in blood glucose concentration, a diabetic patient who has recently under good control may still have high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- 3.Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In

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Dr. Jatinder Bhatia
MD Pathology
Director

Madhusmita Das
Dr. Madhusmita Das
MD MICROBIOLOGY

Priyanka
Dr. Priyanka Rana
MD Pathology

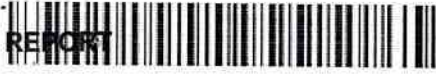


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360 Diagnostics & Health Services Pvt. Ltd.

C-1/2 Sector-31, Noida - 201 301 (U.P) Tel.: 0120-4224797, 7042922881
E-mail: admin@360healthservices.com | Website : www.360healthservice.com



Patient Name : Mrs. GEETA
 Age/Sex : 34 Y/Female
 Patient ID : 012206250049
 Barcode : 10096157
 Ref. By : Self
 SRF No. :
 Aadhar No :

Registration No : 92993
 Registered : 25/Jun/2022
 Collection : 25/Jun/2022 03:02PM
 Received : 25/Jun/2022 03:37PM
 Reported : 25/Jun/2022 05:04PM
 Panel : SJM Hospital
 Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
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patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targetting a goal of < 7.0% may not be appropriate.

4.High HbA1c (>9.0 -9.5 %) is strongly associated with risk of development and rapid progression of microvascular and nerve complications

5.Any condition that shorten RBC life span like acute blood loss, hemolytic anemia falsely lower HbA1c results.

6.HbA1c results from patients with HbSS,HbSC and HbD must be interpreted with caution , given the pathological processes including anemia,increased

red cell turnover, and transfusion requirement that adversely impact HbA1c as a marker of long-term glycemc control.

7.Specimens from patients with polycythemia or post-splenectomy may exhibit increase in HbA1c values due to a somewhat longer life span of the red cells.

*** End Of Report ***

Jhatia

Dr. Jatinder Bhatia
 MD Pathology
 Director

Madhusmita Das

Dr. Madhusmita Das
 MD MICROBIOLOGY

Priyanka

Dr. Priyanka Rana
 MD Pathology



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E-mail: admin@360healthservices.com | Website : www.360healthservice.com





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 Aadhar No :

Registration No : 92993
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 Collection : 25/Jun/2022 03:02PM
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Test Name	Value	Unit	Bio Ref.Interval
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THYROID PROFILE.(TFT)SERUM

T3 ,Serum	146.00	ng/dl	69-215
T4 ,Serum ECLIA	9.00	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	2.02	uIU/mL	0.3-4.5

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated non-thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within range	Within Range	Isolated high TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & biological TSH variability.
			Subclinical Autoimmune Hypothyroidism
			Intermittent T4 therapy for hypothyroidism
			Recovery phase after non-thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis
			Post thyroidectomy, post radioiodine
			Hypothyroid phase of transient thyroiditis"
			Interfering antibodies to thyroid hormones (anti-TPO antibodies)
Raised or within range	Raised	Raised / Normal	Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics

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 MD Pathology



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Test Name	Value	Unit	Bio Ref.Interval
Decreased	Raised / Normal	Raised / Normal	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness
			Subclinical Hyperthyroidism
			Thyroxine ingestion"
Decreased	Decreased	Decreased	Central Hypothyroidism
			Non-Thyroidal illness
			Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule
			Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or	Raised	Within range	T3 toxicosis
Within range			Non-Thyroidal illness

TSH(μ IU/ml) for pregnant females (As per American Thyroid Association)

First Trimester	0.10-2.5
Second Trimester	0.20-3.00
Third Trimester	0.30-3.00

*** End Of Report ***

Jhatia
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 Director

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 Dr. Madhusmita Das
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Priyanka
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(100 Bedded Fully Equipped With Modern Facilities)

Sector-63, Noida, NH-09, Near Hindon Bridge
Tel.: 0120-6530900 / 10, Mob.: 9599259072

Ultrasound Report

NAME: Mrs. Geeta

AGE: 34yrs

DATE: 25/06/2022

Real time USG of abdomen and pelvis reveals –

LIVER--Liver appears normal in size and shape, contour and echopattern. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER-Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

PANCREAS-Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN-Spleen is mildly enlarged in size meas. 13.40cm. No focal mass lesion is seen in parenchyma.

KIDNEY -Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi on left side. **Right kidney shows renal concretions.**

RETROPERITONIUM- -There is no evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

URINARY BLADDER- Adequately distended. Walls were regular and thin. Contents are normal. No stone formation seen.

UTERUS- Retroverted Uterus. Both ovaries are normal in size, shape and echopattern. No focal lesion is seen. Endometrium normal. There is no evidence of free fluid seen in the pouch of Douglas. There is no evidence of adnexal mass is seen.

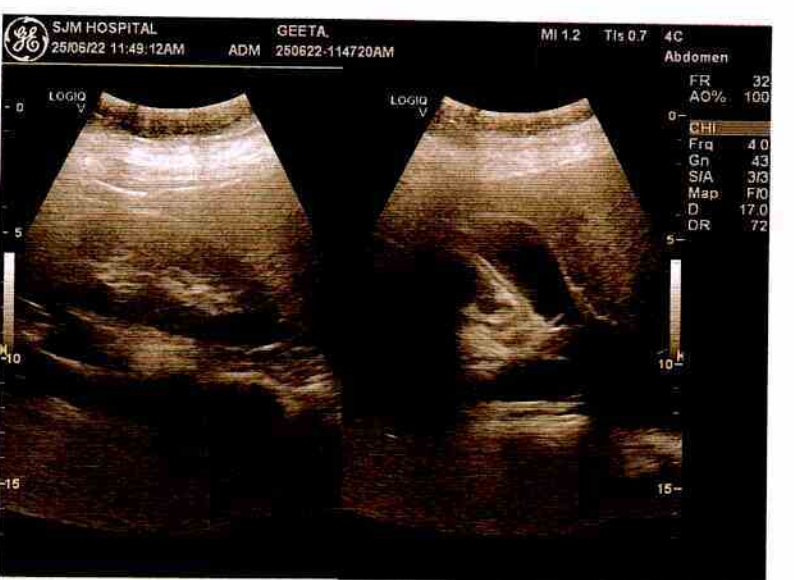
IMPRESSION: Mild Splenomegaly.
Right renal concretions.

For SJM Super Speciality Hospital

DR. PUSHPA KAUL

DR. P.K GUPTA





X-Ray Report

Patient ID.	19253(OPD)	Name	GEETA	Sex/Age	F/34 YR.Y
Date	25-06-2022 01:41 PM	Ref. Physician	DR. VINOD BHAT	Chest, CHEST	

X-RAY CHEST PA VIEW

OBSERVATION:

The lung fields are clear.
Both hila are normal.
Cardiophrenic and costophrenic angles are normal.
The trachea is central.
The mediastinal and cardiac silhouette are normal.
Cardiothoracic ratio is normal.
Bones of the thoracic cage are normal.
Soft tissues of the chest wall are normal.

IMPRESSION:

- No significant abnormality seen.


Dr. SANTOSH BHARAT RATHOD
MBBS, DNB
CONSULTANT RADIOLOGIST



ID : 118
NAME : MRS GEETA
AGE / SEX : 34 / FEMALE

HEIGHT (cm) : 0
WEIGHT (kg) : 0
PROTOCOL : BRUCE

REF BY : DR VIOND BHAT
DONE BY :
TECHNICIAN : C S SINGH

CASE HISTORY : NA

MEDICATION : NA

OBJECT OF TEST : Routine Check Up.

RISK FACTOR : Obese.

ACTIVITY : Inactive.

OTHER INVESTIGATION : X - Ray.

REASON FOR TERMINATION : Max HR.

EXERCISE TOLERANCE : Good (> 10 METS).

EXERCISE INDUCED ARRHYTHMIAS : No.

HAEMO RESPONSE : Normal.

CHRONO RESPONSE : Normal.

FINAL IMPRESSION : Stress Test is Negative for Inducible Ischemia.

EXTRA COMMENTS : GOOD EFFORT TOLERANCE. NO REPRODUCTION OF SYMPTOMS.

TEST IS NEGATIVE FOR FRESH REVERSIBLE MYOCARDIAL ISCHEMIA.

CAD PROBABILITY LOW.

SJM SUPER SPECIALITY HOSPITAL
Dr. Vinod Kumar Bhat
MB.B.S. M.D (Medicine)
Sr. Consultant Physician
Reg. No. 30989 (BMC)

Handwritten signature

Confirmed By : _____

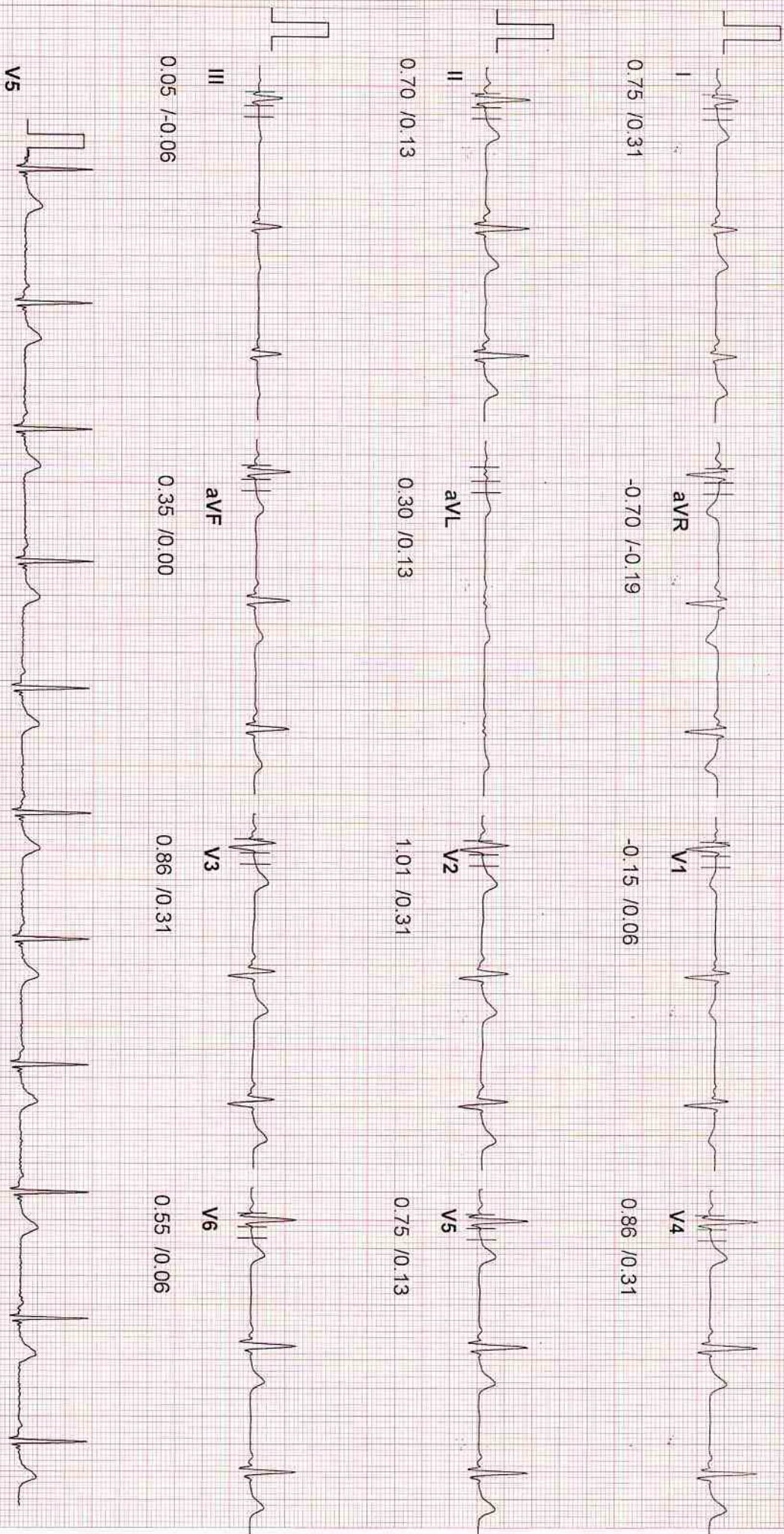
Signature

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 0/0 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Pre-Test
 RECORDED TIME : 06:41 (min:sec)
 STAGE DURATION : 06:41 (min:sec)
 HR : 67 bpm (36%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJND BHAT
 Tested On : 25-06-2022, 12
 BPL DYNATRAC



118

20 Hz Filter

10mm/mV, 25mm/Sec

ID : 118
NAME : MRS GEETA
AGE : 34
BP : 0/0 mmHg

STAGE : Supine
RECORDED TIME : 08:04 (min:sec)
STAGE DURATION : 01:23 (min:sec)
HR : 68 bpm (36%)

PROTOCOL : BRUCE
SPEED : 0.0 kmph
GRADE : 0.00 %
METS : 0.00

DR. VIJND BHAT
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BPL DYNATRAC

ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

0.40 /0.19

-0.30 /-0.13

0.35 /0.06

0.50 /0.19

0.15 /0.06

0.35 /0.13

1.16 /0.31

0.25 /0.13

-0.20 /-0.13

-0.10 /-0.13

1.26 /0.31

0.00 /0.06



118

20 Hz Filter

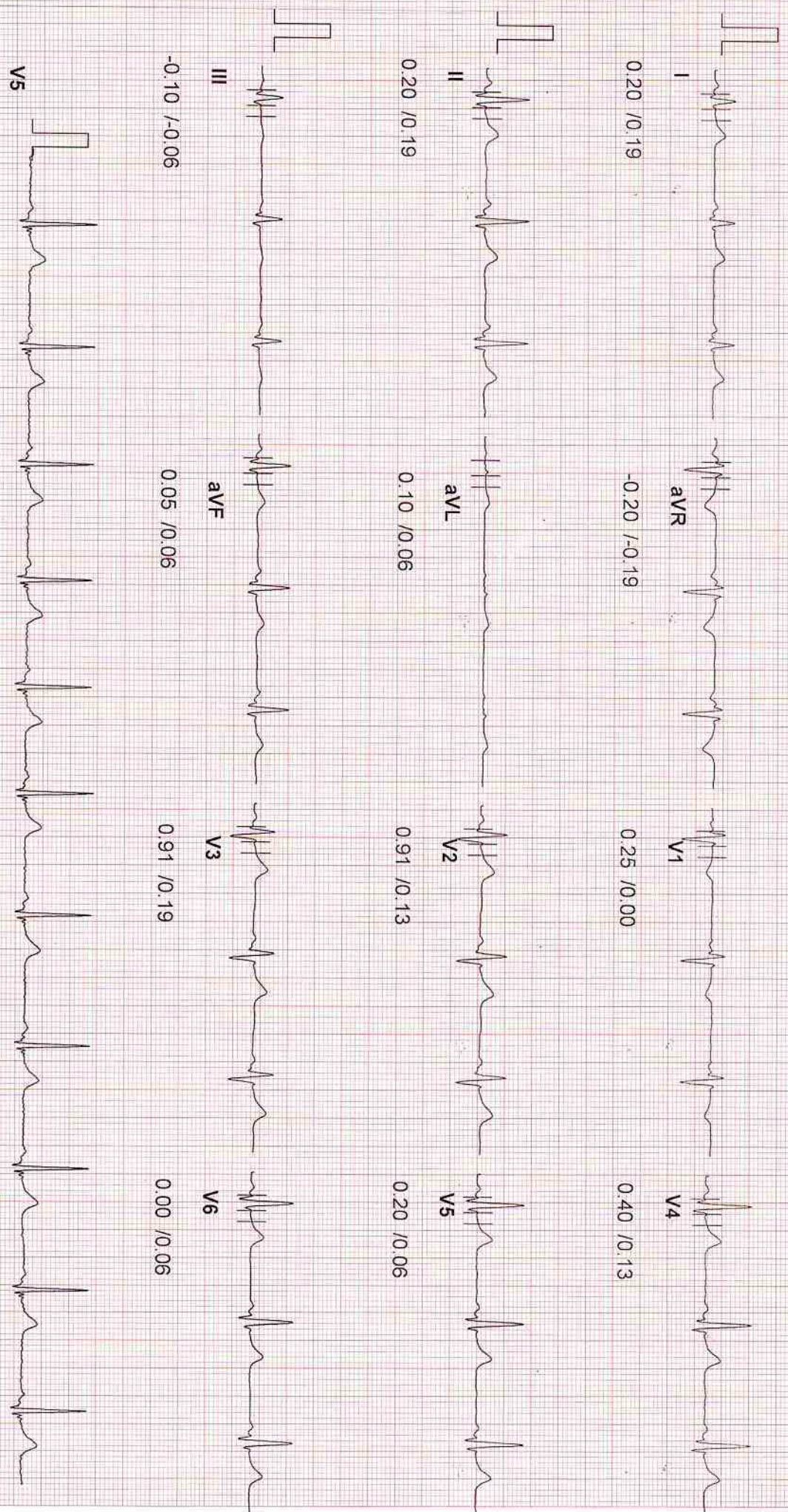
10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 0/0 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Hyper Ventilation
 RECORDED TIME : 08:43 (min:sec)
 STAGE DURATION : 00:39 (min:sec)
 HR : 69 bpm (37%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

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20 Hz Filter

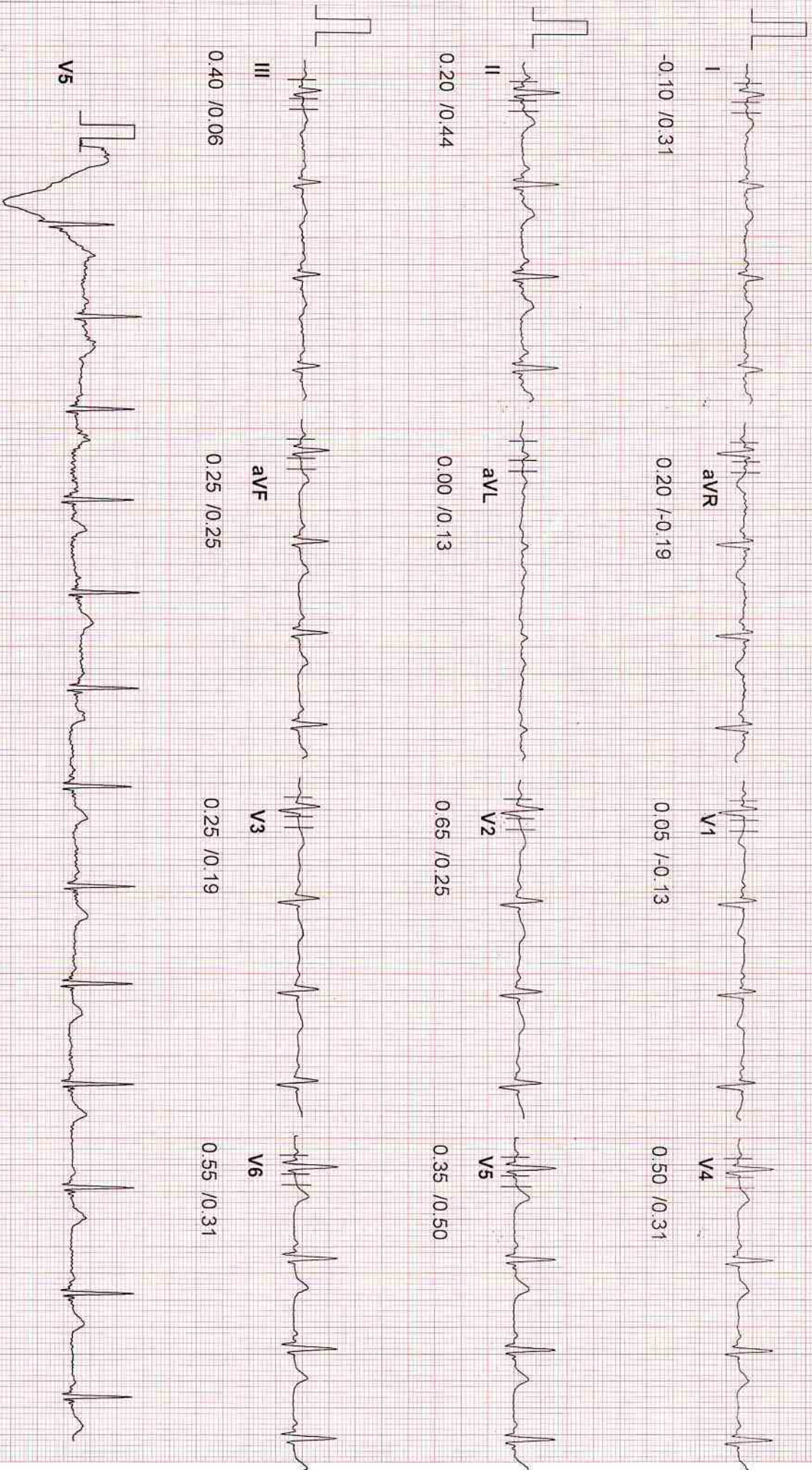
10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 0/0 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Wait For Exercise
 RECORDED TIME : 10:50 (min:sec)
 STAGE DURATION : 02:07 (min:sec)
 HR : 80 bpm (43%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

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20 Hz Filter

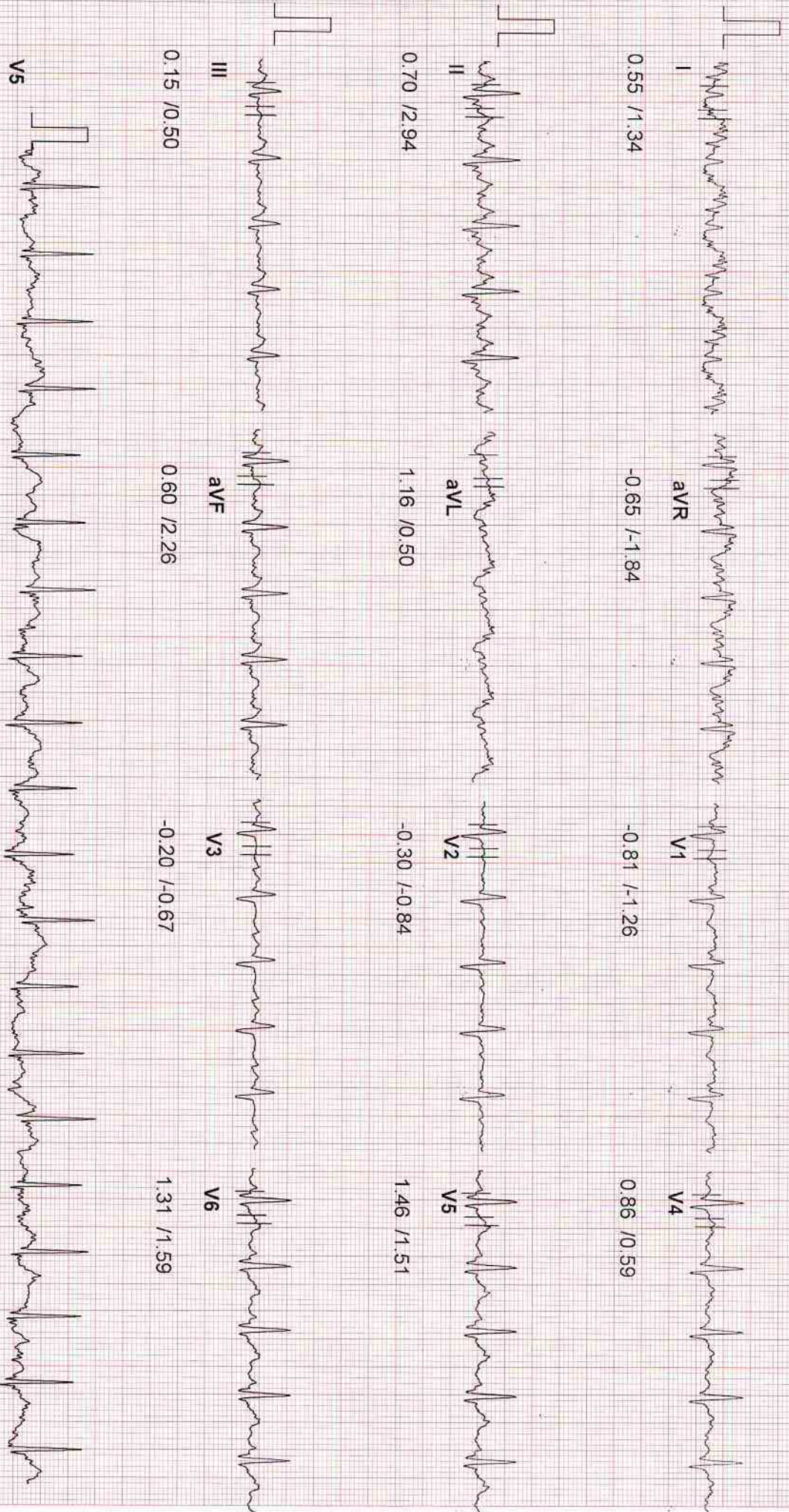
10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 110/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise1
 RECORDED TIME : 03:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 127 bpm (68 %)

PROTOCOL : BRUCE
 SPEED : 2.7 kmph
 GRADE : 10.00 %
 METS : 5.10

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20 Hz Filter

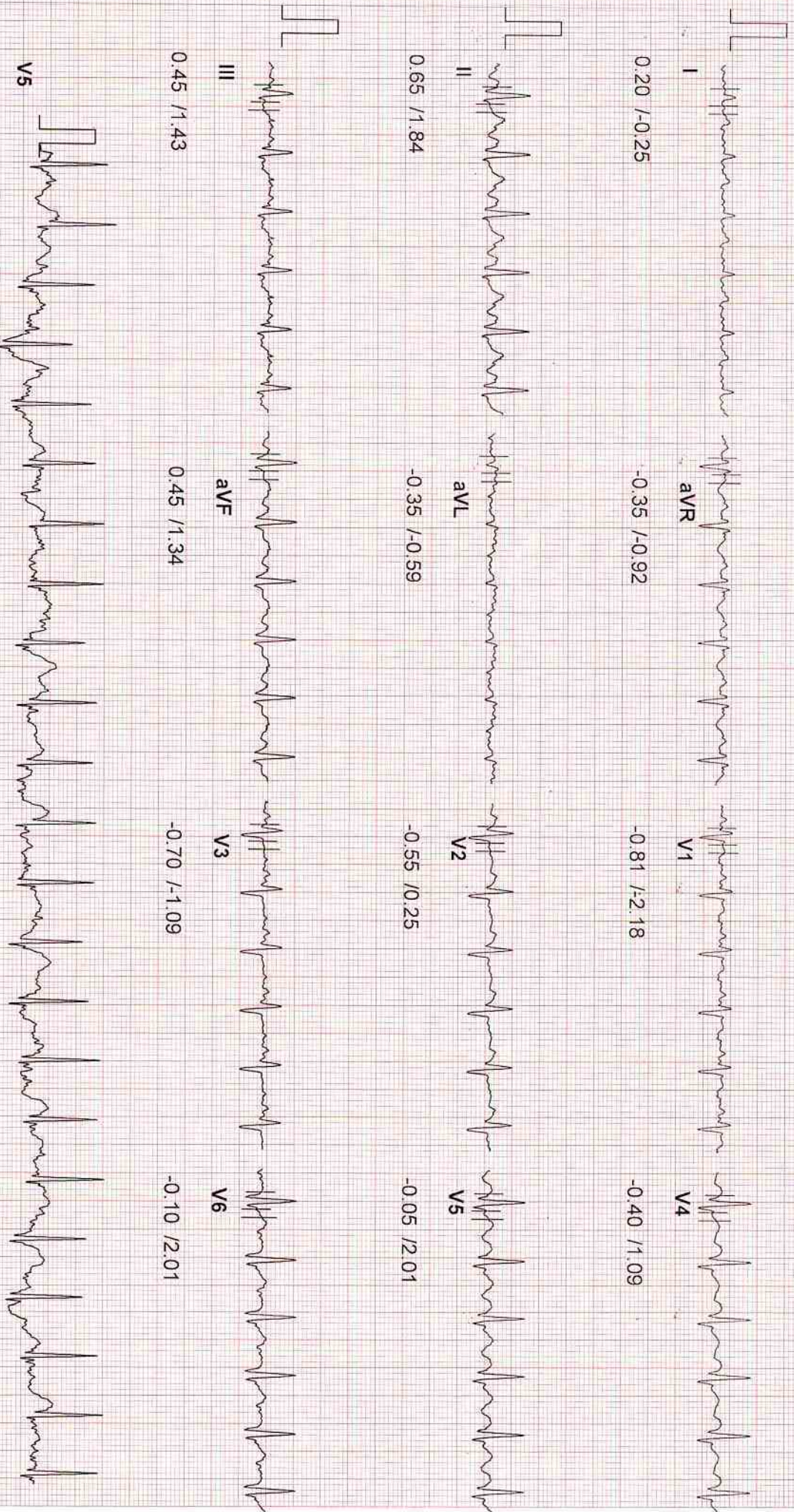
10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 120/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise2
 RECORDED TIME : 06:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 142 bpm (76%)

PROTOCOL : BRUCE
 SPEED : 4.0 kmph
 GRADE : 12.00 %
 METS : 7.10

DR. VIJOND BHAT
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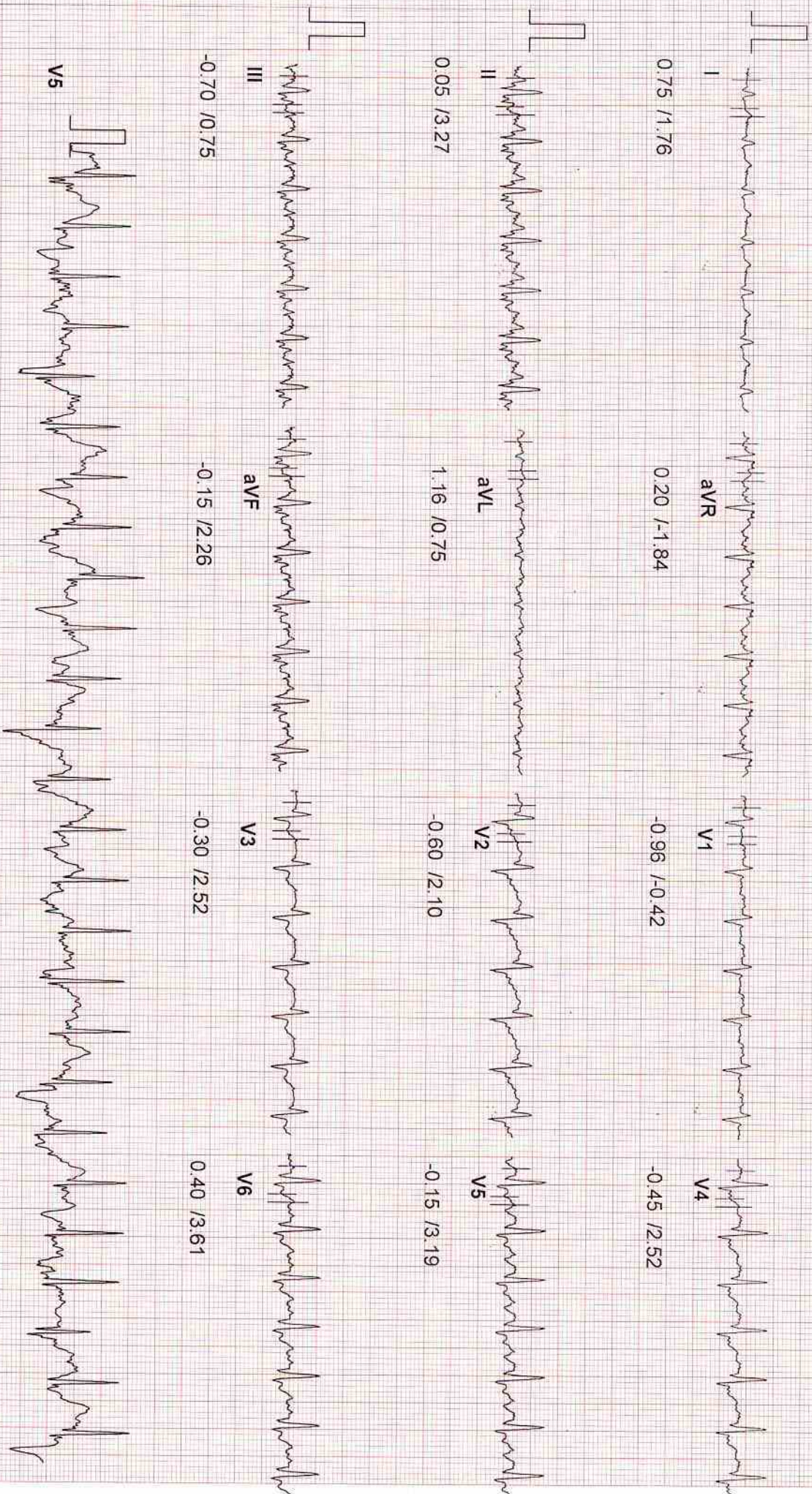
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 130/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise3(Peak Ex) PROTOCOL : BRUCE
 RECORDED TIME : 02:36 (min:sec) SPEED : 5.5 kmph
 STAGE DURATION : 02:36 (min:sec) GRADE : 14.00 %
 HR : 166 bpm (89 %) METS : 10.00

DR. VIJND BHAT
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118

20 Hz Filter

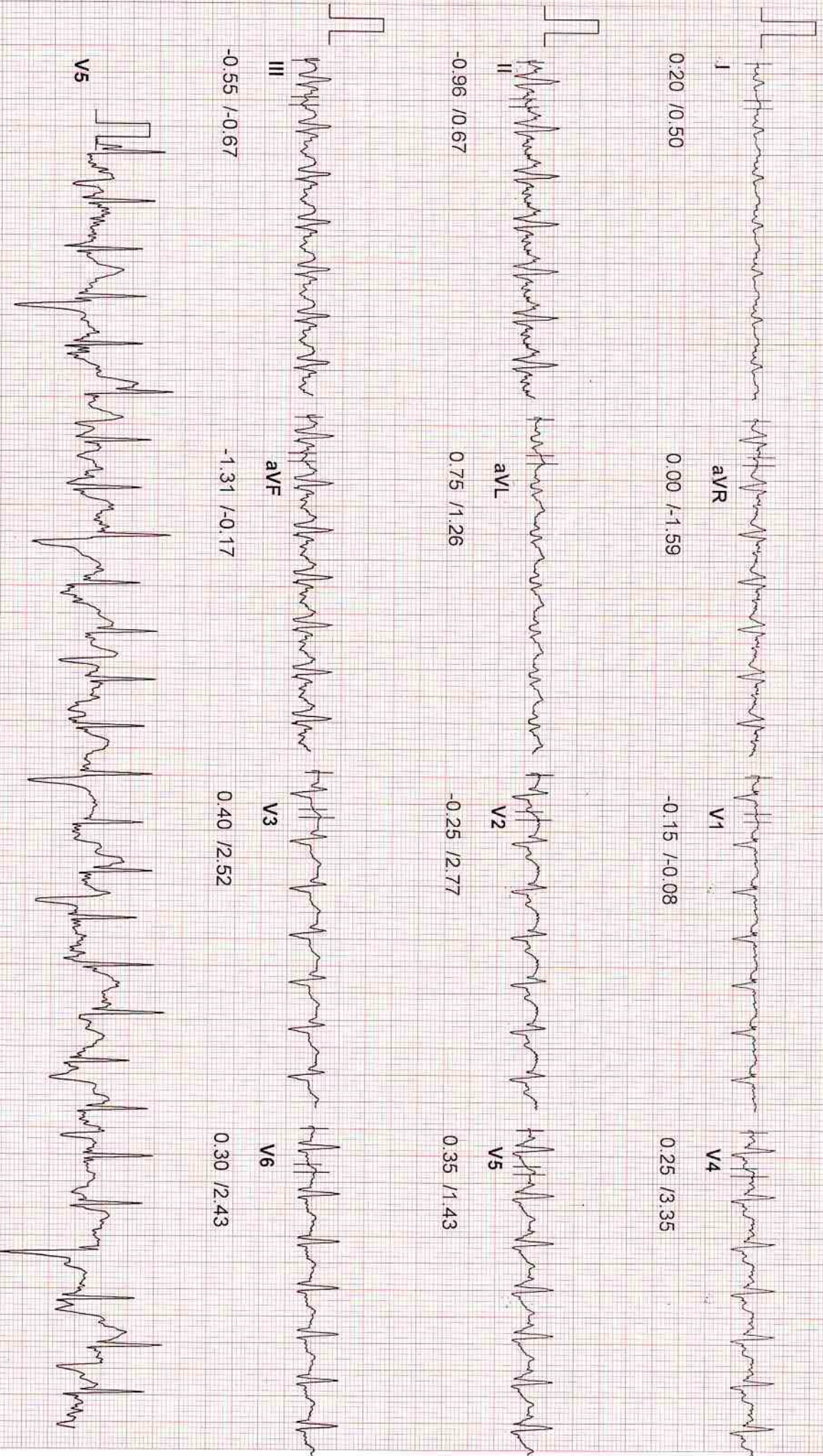
10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 120/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 1
 RECORDED TIME : 00:59 (min:sec)
 STAGE DURATION : 00:59 (min:sec)
 HR : 171 bpm (91%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

DR. VIJND BHAT
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 BPL DYNATRAC



118

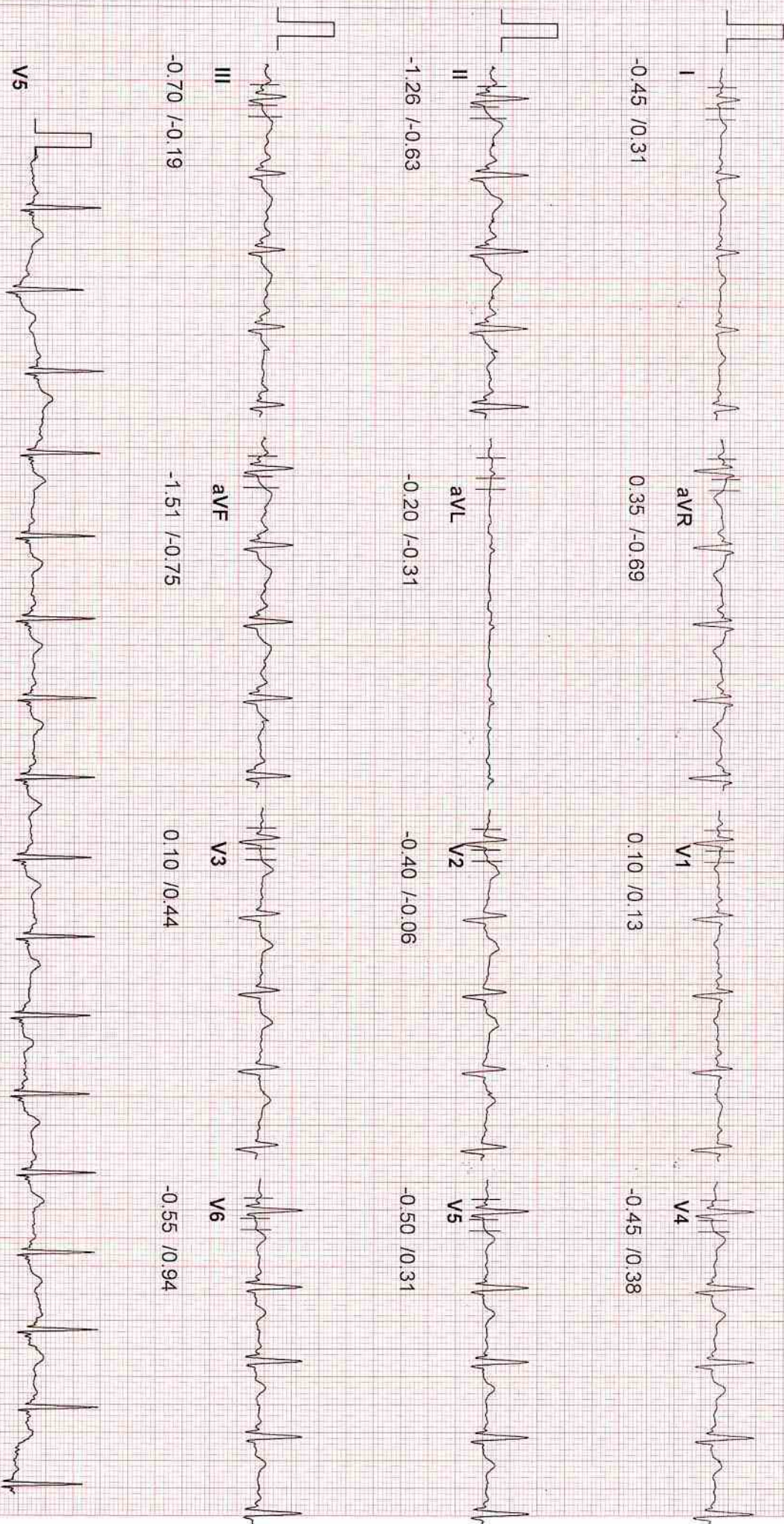
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 118
 NAME : MRS GEETA
 AGE : 34
 BP : 120/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Recovery 3
 RECORDED TIME : 02:59 (min:sec)
 STAGE DURATION : 02:59 (min:sec)
 HR : 109 bpm (58 %)

DR. VIOND BHAT
 Tested On 25-06-2022 12
 BPL DYNATRAC



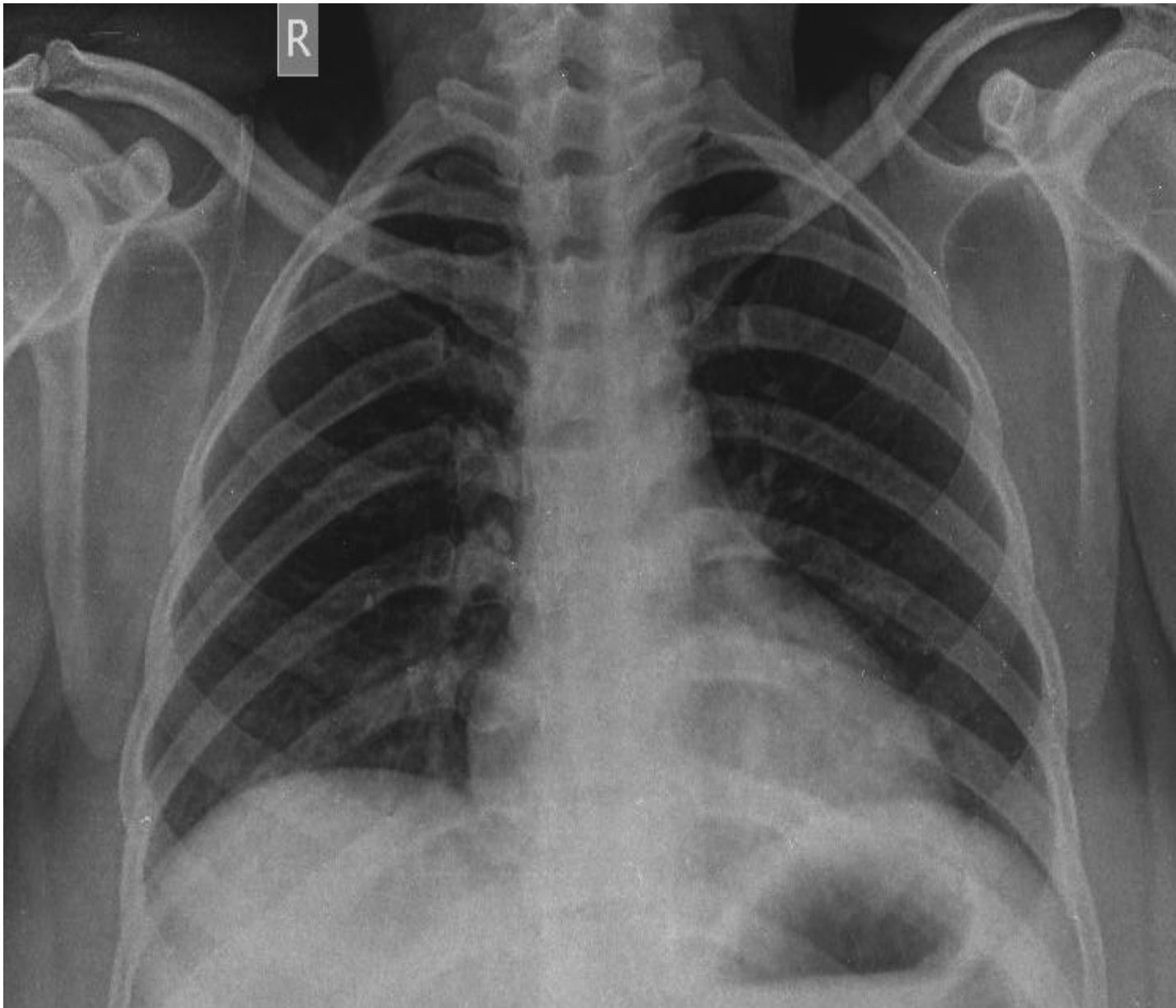
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20 Hz Filter

10mm/mV, 25mm/Sec

**S.J.M SUPER SPECIALITY HOSPITAL,
IVF AND TRAUMA CENTRE**

X-RAY REPORT



Patient ID.	19253(OPD)	Name	GEETA	Sex/Age	F/34 YR.Y
Date	25-06-2022 01:41 PM	Ref. Physician	DR. VINOD BHAT	Chest, CHEST	

X-RAY CHEST PA VIEW

OBSERVATION:

The lung fields are clear.
Both hila are normal.
Cardiophrenic and costophrenic angles are normal.
The trachea is central.
The mediastinal and cardiac silhouette are normal.
Cardiothoracic ratio is normal.
Bones of the thoracic cage are normal.
Soft tissues of the chest wall are normal.

IMPRESSION:

- **No significant abnormality seen.**



Dr. SANTOSH BHARAT RATHOD
MBBS, DNB
CONSULTANT RADIOLOGIST