

PHYSICIAN CONSULTATION

DATE:- NUSaratbanu 29.03.2022

NAME:- NUSaratbanu Pathan

DOB: 08.11.1989

AGE:- 32yr.

SEX:- Female


HEIGHT:- 160 cm.

WEIGHT:- 66 Kg.

BP READING:- 120/84

PULSE :- 94/min

MEDICATION :- NO.


Dr. Narendra Shah
C-4383 M.D



Patient Name : Nusratbanu Pathan
Sample No.. : 419
Referred : Bank Of Baroda

Age/Sex : 32 Years/Female
Registration On:29/03/2022/09:39
Approved On :29/03/2022 10:06

USG WHOLE ABDOMEN :

Liver is normal in size, shows homogenous parenchymal echoes and normal intrahepatic radicles. No focal lesion seen. Portal vein is normal in calibre(11 mm) and shows normal colour flow.

Gallbladder is physiologically distended. No calculus or wall thickening seen. CBD appears normal in calibre.

Pancreas is normal in size and echo texture. No diffuse or focal lesion seen.

Spleen is normal in size (7.6 cm) and homogenous in echo texture.

Kidneys are normally placed, normal in size, show normal thickness cortical tissue and normal sinus echoes. Corticomedullary differentiation is well seen. No calculus, hydronephrosis or renal mass seen.

Rt. Kidney is 10.7 X 3.3 cm. Lt. Kidney is 10.8 X 3.4 cm.

Aorta is normal in calibre. No para-aortic or mesenteric lymph nodes seen.

Urinary bladder is adequately distended. No evident calculus, wall thickening or mass seen.

Uterus is normal in size(7.4 X 4.8 X 4.0 cm). Myometrial echoes are homogenous. Endometrial thickness is 4 mm. No fibroid or adenomyotic changes are seen. Ovaries are normal in size and echotexture. No adnexal mass seen.

Bowel loops are unremarkable.

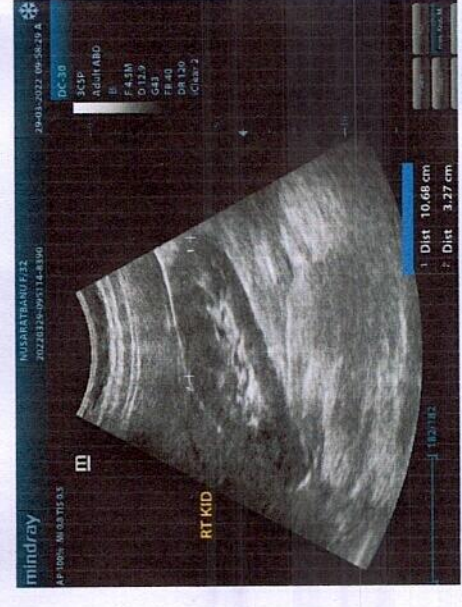
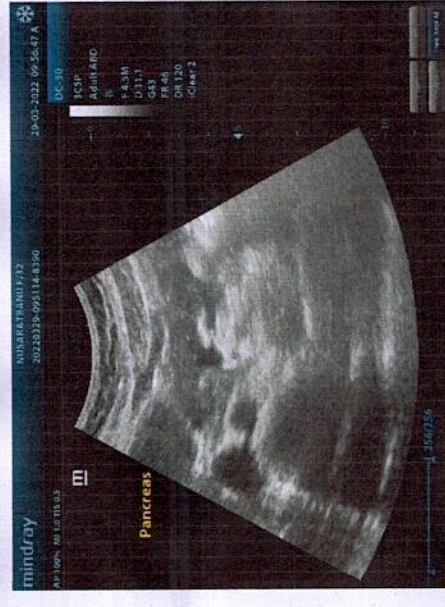
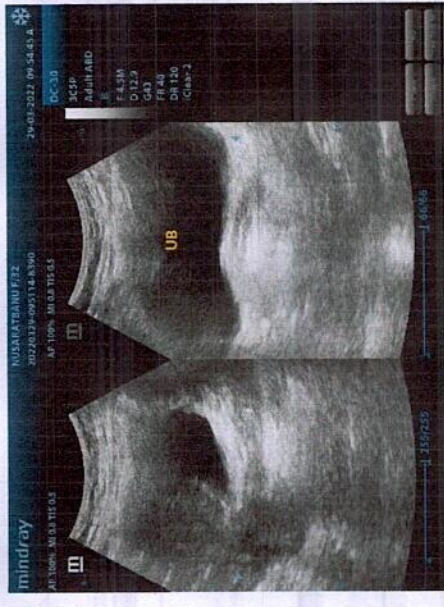
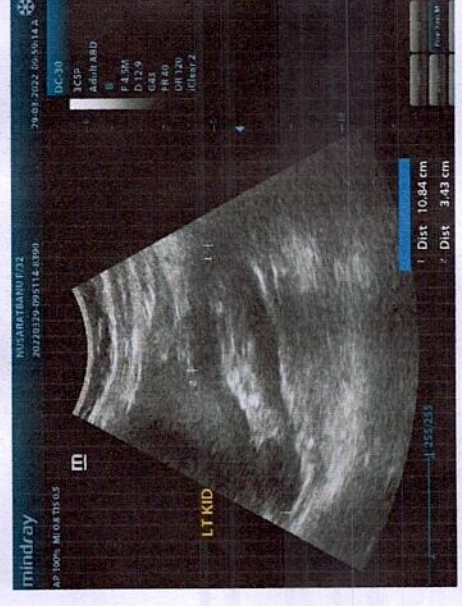
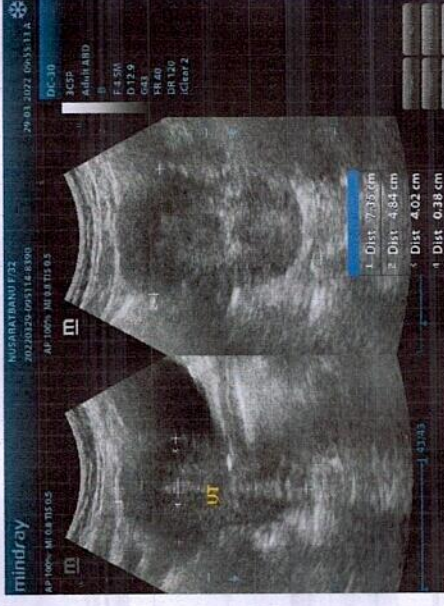
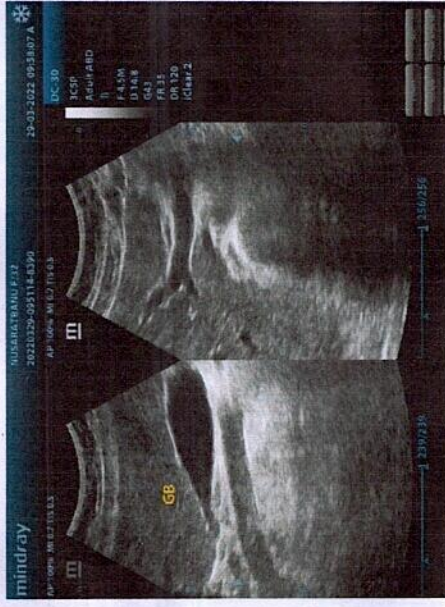
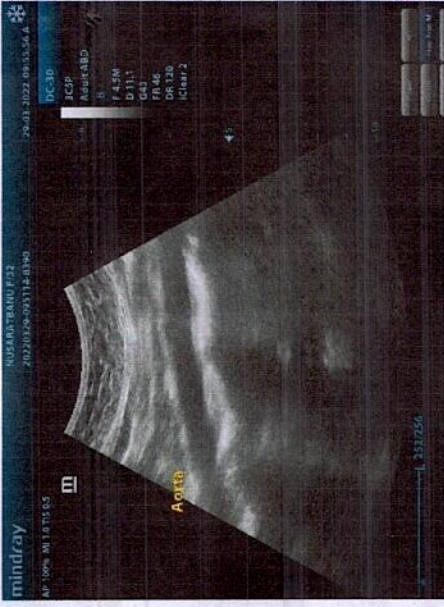
No ascites is seen.

Impression:

No significant abnormality is seen.



**Dr BHARAT GANDHI (M.D.)
CONSULTANT RADIOLOGIST**



DT: March 29, 2022

NAME: NUSRATBANU PATHAN F/32 YRS.

REF. BY: CORPORATE CARE

X-RAY CHEST PA VIEW

Bilateral lung fields are clear. No evidence of consolidation, cavity or mass lesion. Bilateral costophrenic angles are clear. Cardiac shadow appears normal. Domes of diaphragm appear normal. Visualized bony thorax appears normal.




**DR. NITIN PATEL
(M.D.)
CONSULTANT RADIOLOGIST
G-12854**

Government of India

आधार

Download Date: 08/08/2020



पथान नुसरतबानु मोहम्मदअझरखान
Pathan Nusaratbanu
Mohammadazharkhan
जन्म तारीख/DOB: 08/11/1989
श्री/ FEMALE

Issue Date: 20/06/2019

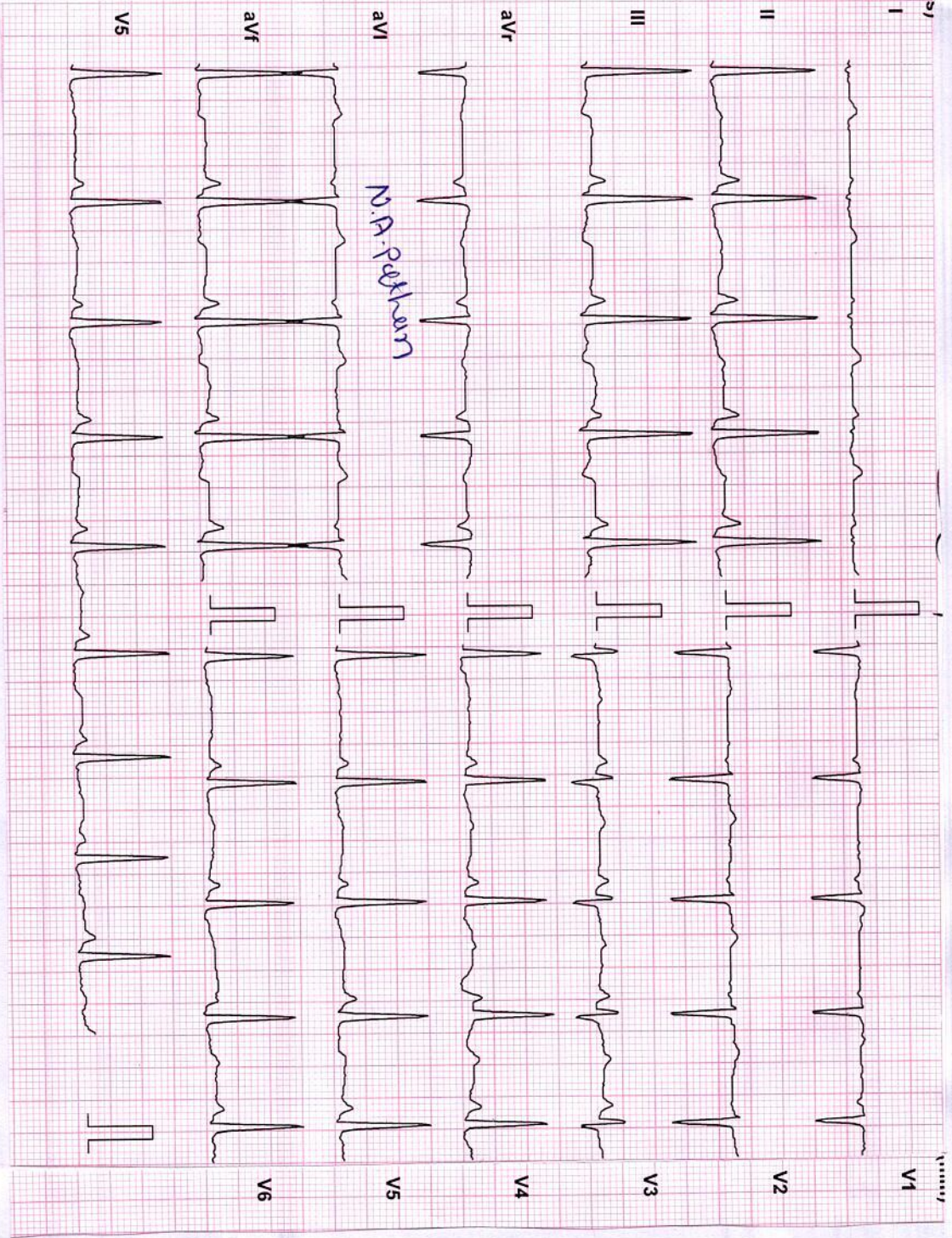
5111 0826 7815
VID : 9185 5588 7526 0505

मारी आधार, मारी ओळख

N.A. Pathan

NUSARAT BANO PATHAN

29.03.2022



R-64
cm
V1-V6



Dr. Nafendra Shah
M.D
C-4383

Patient Details

Date: 3/29/2022

Time: 10:10:01 AM

Name: NUSRATBANU PATHAN

Age: 32 y Sex: F

Height: -- cms

Weight: -- Kgs

Clinical History: NONE

Medications: NONE

Test Details

Protocol: Bruce

Pr.MHR: 188 bpm

THR: 159 (85 % of Pr.MHR) bpm

Total Exec. Time: 7 m 18 s

Max. HR: 162 (86% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 148 / 90 mmHg

Max. BP x HR: 23976 mmHg/min

Min. BP x HR: 6396 mmHg/min

End Point Criteria: Target Heart Rate Achieved.

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mm/s)
Supine	0 : 42	1.0	0	0	89	118 / 78	-0.42 III	0.42 II
Standing	0 : 12	1.0	0	0	83	118 / 78	-0.42 III	0.42 II
Hyperventilation	0 : 12	1.0	0	0	82	118 / 78	-0.42 III	0.42 II
1	3 : 0	4.6	1.7	10	121	138 / 84	-2.76 II	-1.70 II
2	3 : 0	7.0	2.5	12	139	144 / 88	-1.70 III	1.06 II
Peak Ex	1 : 18	10.2	3.4	14	162	148 / 90	-1.91 III	1.49 V3
Recovery(1)	3 : 0	1.0	0	0	96	124 / 82	-1.70 III	1.91 V3
Recovery(2)	0 : 12	1.0	0	0	92	124 / 82	-1.06 III	0.64 II

Interpretation

Normal Haemodynamic Response.
 Normal Chronotropic Response.
 Good Exercise Tolerance.
 Normal HR and BP Response.
 No Angina. No Arrhythmias.
 No ST-T changes. Recovery Uneventful.
 Test Negative For Exercise Inducible Ischemia.



Dr. Narendra Shah
 C-4383 M.D.

Ref. Doctor: BOB

(Summary Report edited by user)

ICICI PRU N.A. Pathem

(c) Schiller Healthcare India Pvt. Ltd. V 4.0

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 0 m 0 s

Stage Time : 0 m 36 s **HR: 89 bpm**

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 159 bpm)

B.P: 118 / 78

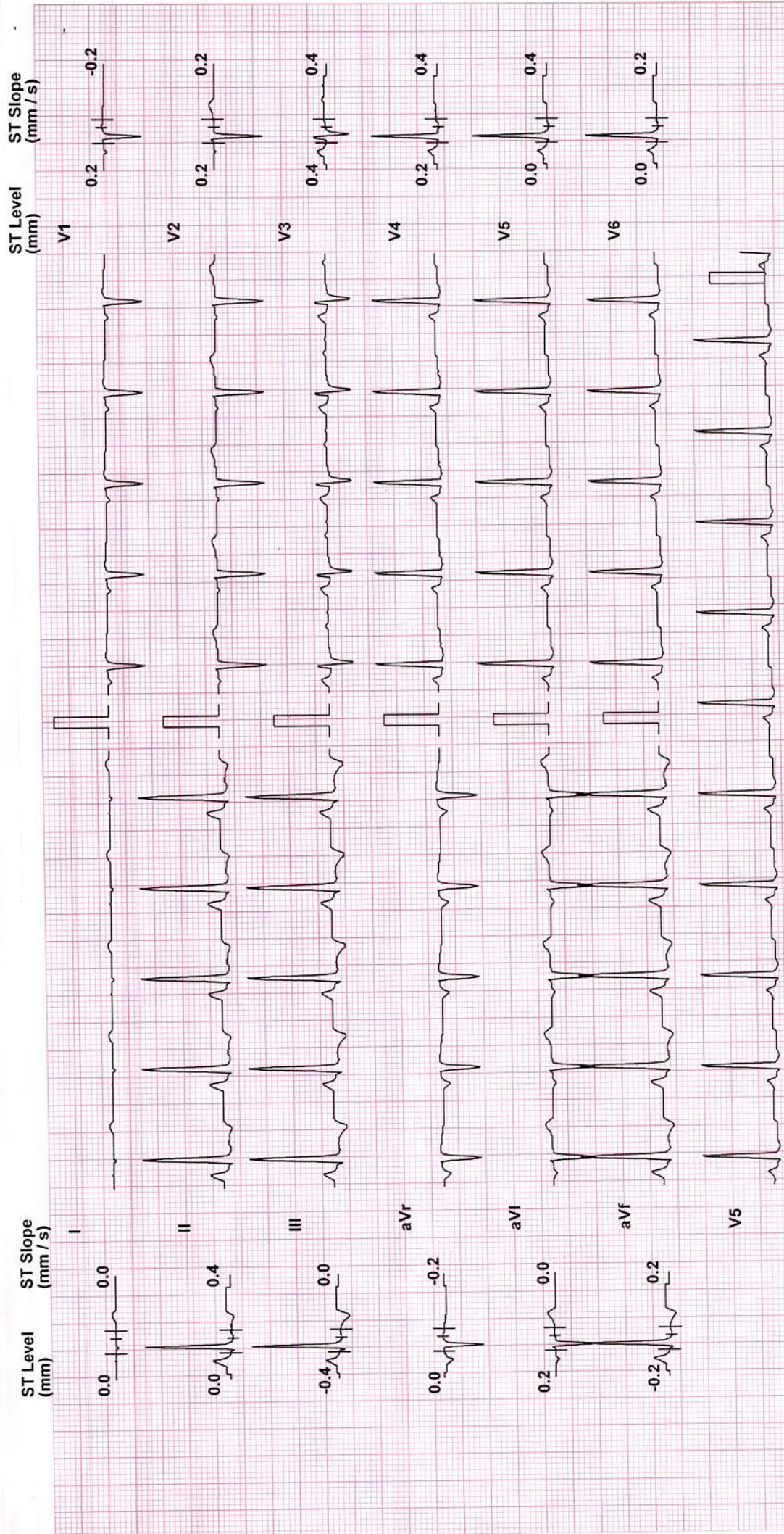


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N. R. Pathan

Test Report

HR: 83 bpm
B.P: 118 / 78

Exec Time : 0 m 0 s
Stage Time : 0 m 6 s

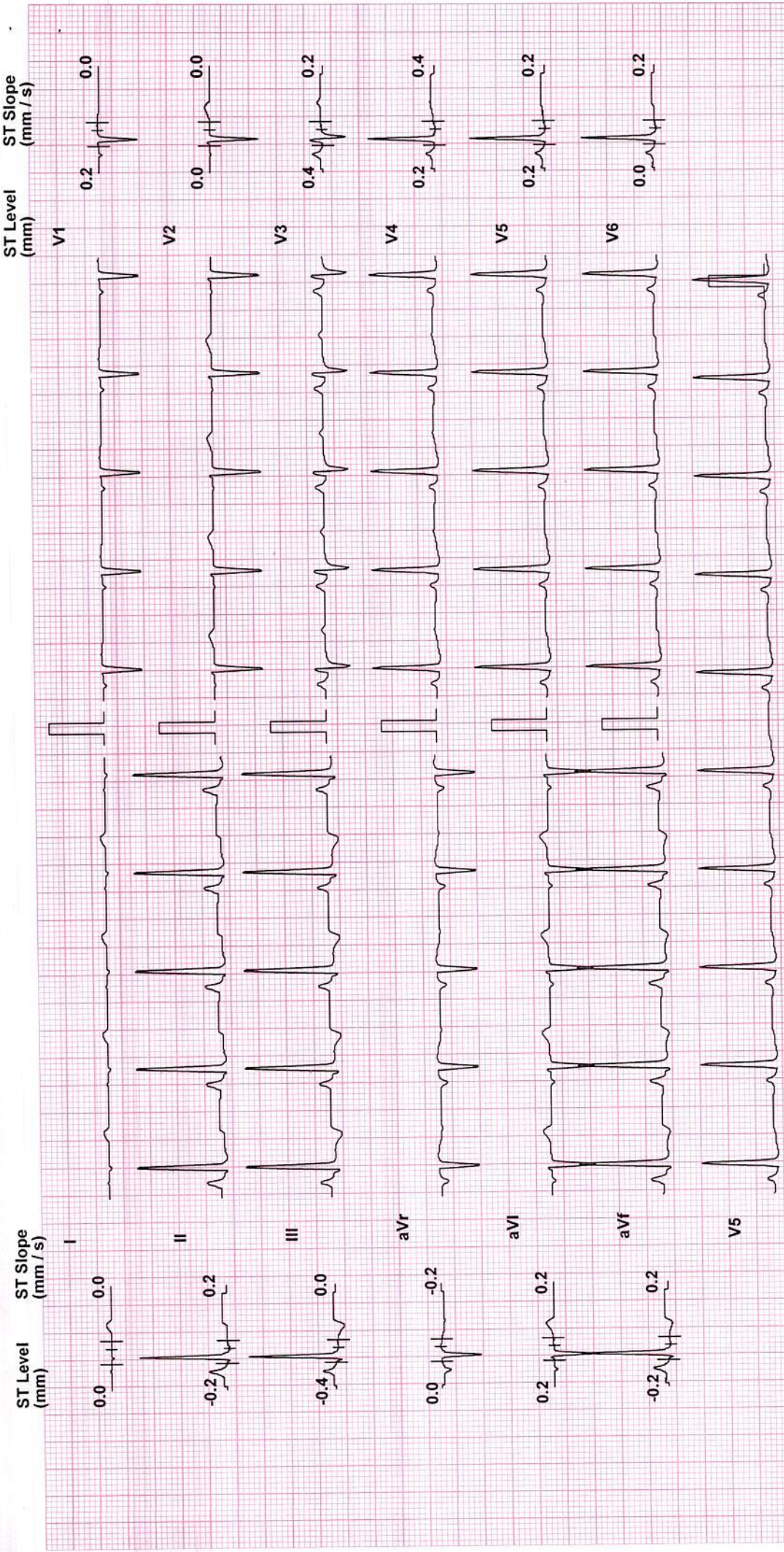
Date: 3/29/2022
Grade: 0 %

Speed: 0 mph
(THR: 159 bpm)

ID: 4140
Stage: Standing

NUSRATBANU PATHAN (32 F)

Protocol: Bruce

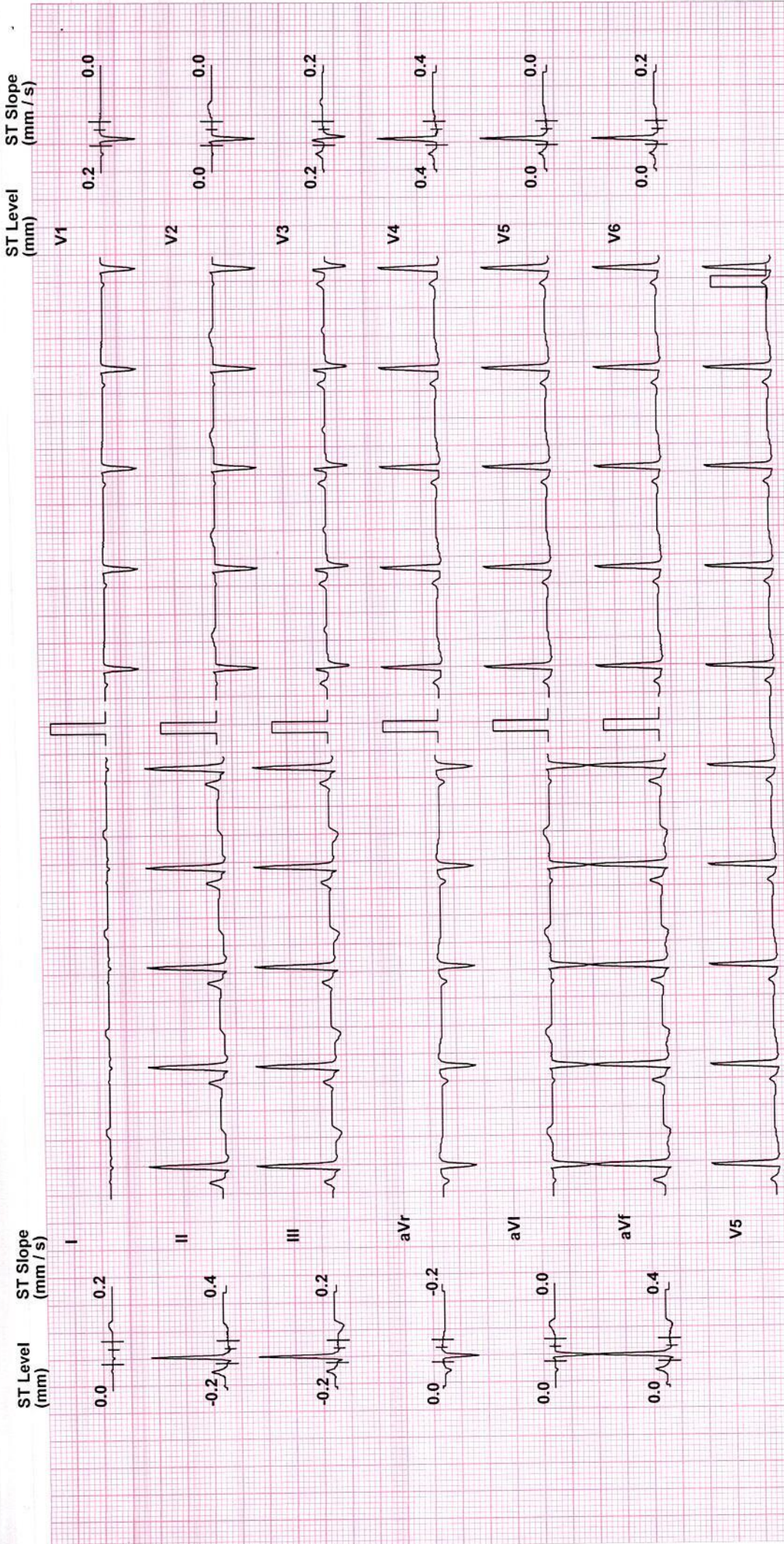


M.R. Pathan

Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fil: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F) ID: 4140 Date: 3/29/2022 Exec Time : 0 m 0 s Stage Time : 0 m 6 s HR: 82 bpm
Protocol: Bruce Stage: Hyperventilation Speed: 0 mph Grade: 0 % (THR: 159 bpm) B.P: 118 / 78



N. B. Pathan

Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filtr: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 121 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph Grade: 10 %

B.P: 138 / 84

(THR: 159 bpm)

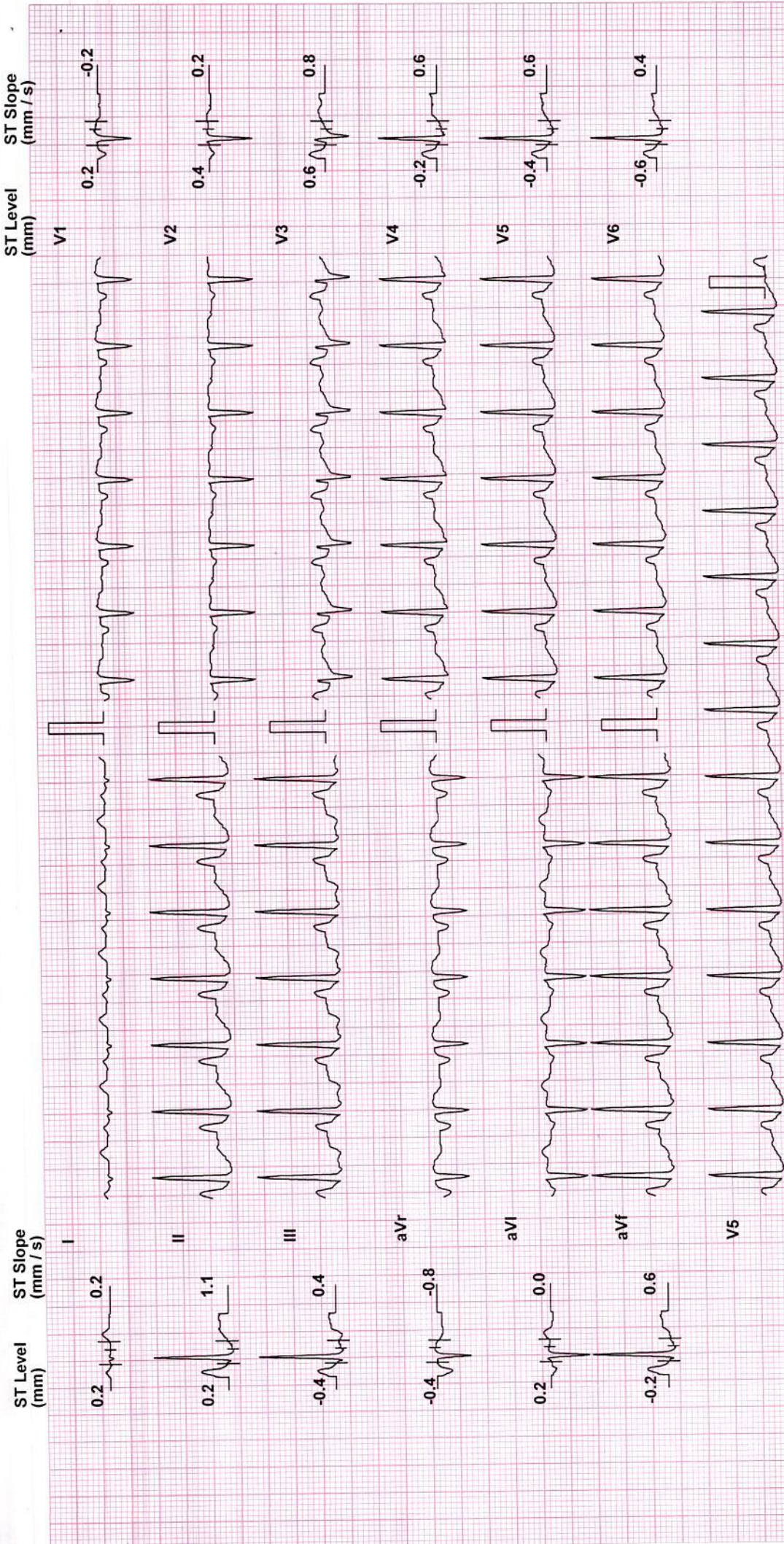


Chart Speed: 25 mm/sec
(c)Schiller Healthcare India Pvt. Ltd. V 4.0

Filter: 35 Hz Mains Filt: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 5 m 54 s Stage Time : 2 m 54 s **HR: 139 bpm**

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12 %

B.P: 144 / 88

(THR: 159 bpm)

ST Level (mm) ST Slope (mm / s)

ST Level (mm) ST Slope (mm / s)

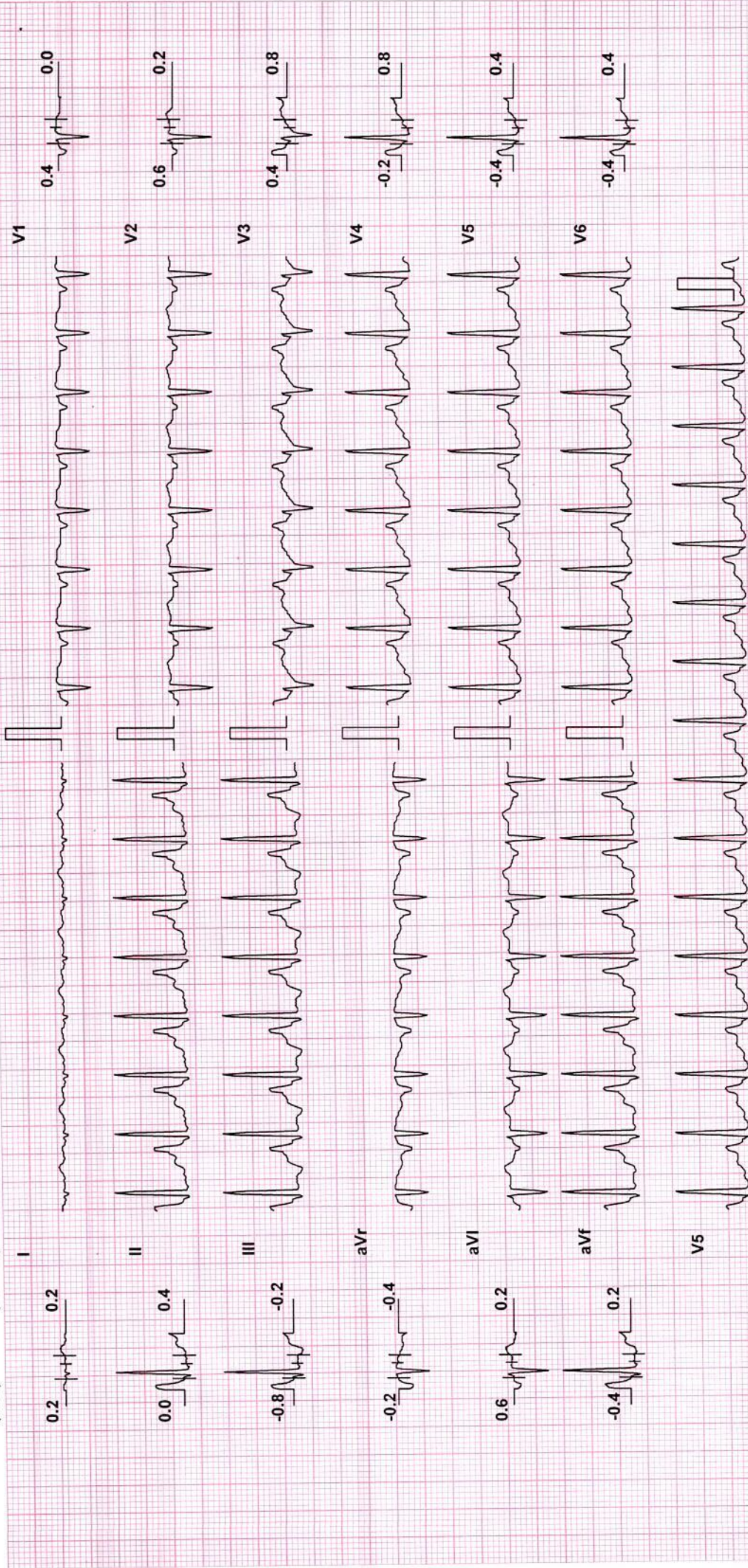


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 7 m 12 s Stage Time : 1 m 12 s HR: 162 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph Grade: 14 %

B.P: 148 / 90

(THR: 159 bpm)

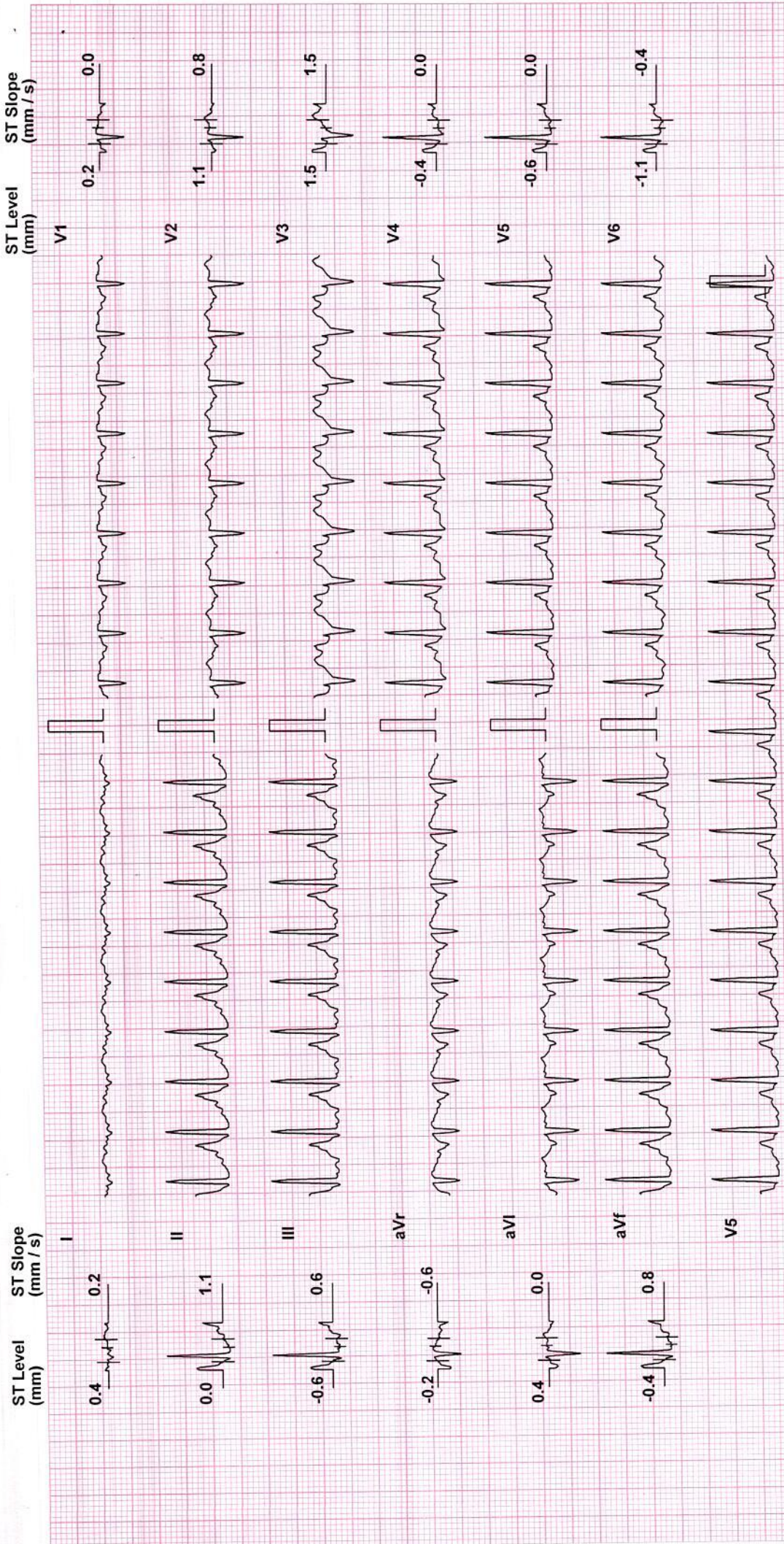


Chart Speed: 25 mm/sec
(c) Schiller-Healthcare India Pvt. Ltd. V 4.0

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 7 m 18 s Stage Time : 2 m 54 s

HR: 96 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 159 bpm)

B.P: 124 / 82

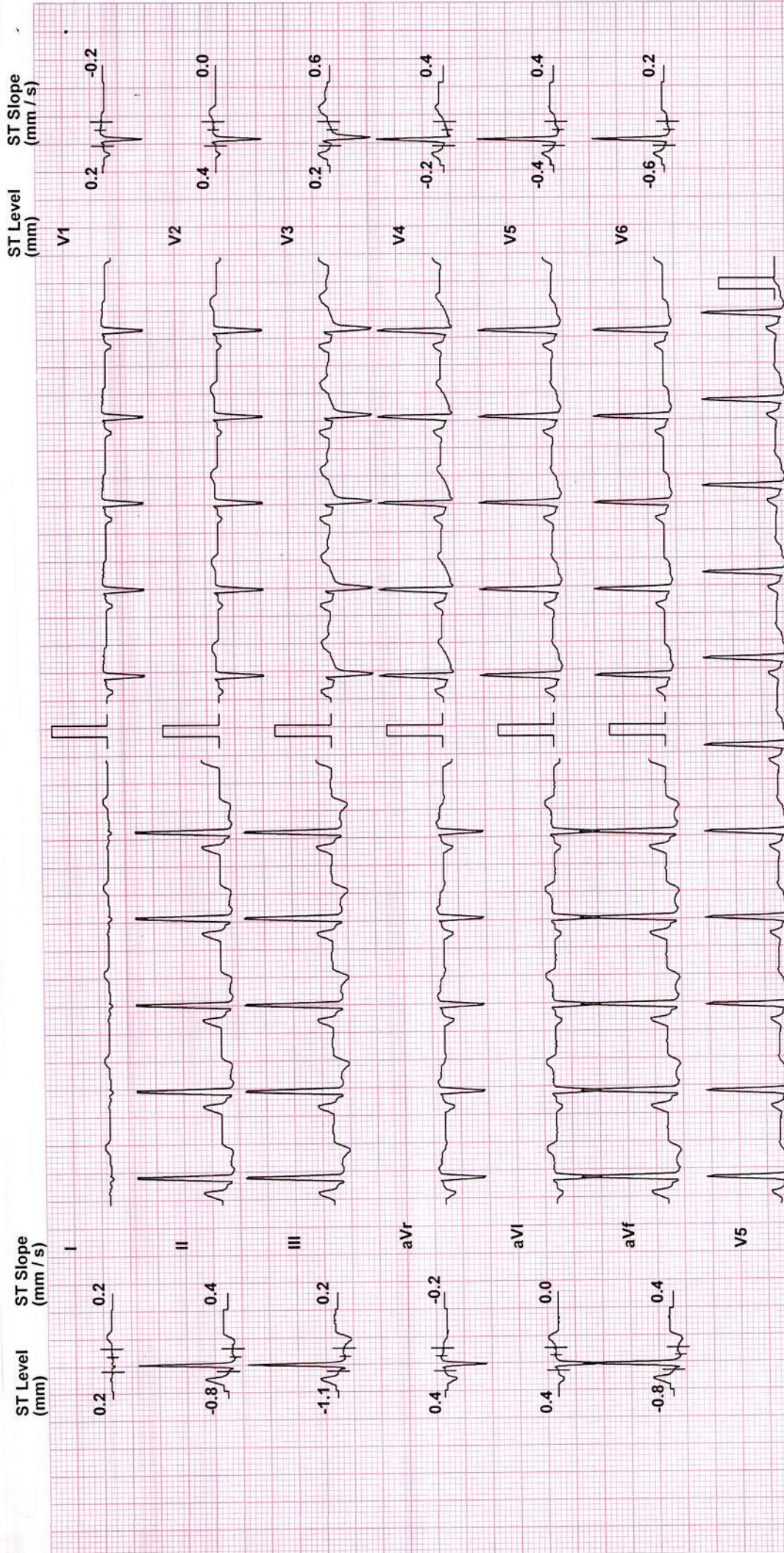


Chart Speed: 25 mm/sec
(c)Schiller Healthcare India Pvt. Ltd. V 4.0

Filter: 35 Hz Mains Filt: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms

Test Report

NUSRATBANU PATHAN (32 F)

ID: 4140

Date: 3/29/2022

Exec Time : 7 m 18 s Stage Time : 0 m 6 s

HR: 92 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 % (THR: 159 bpm)

B.P: 124 / 82

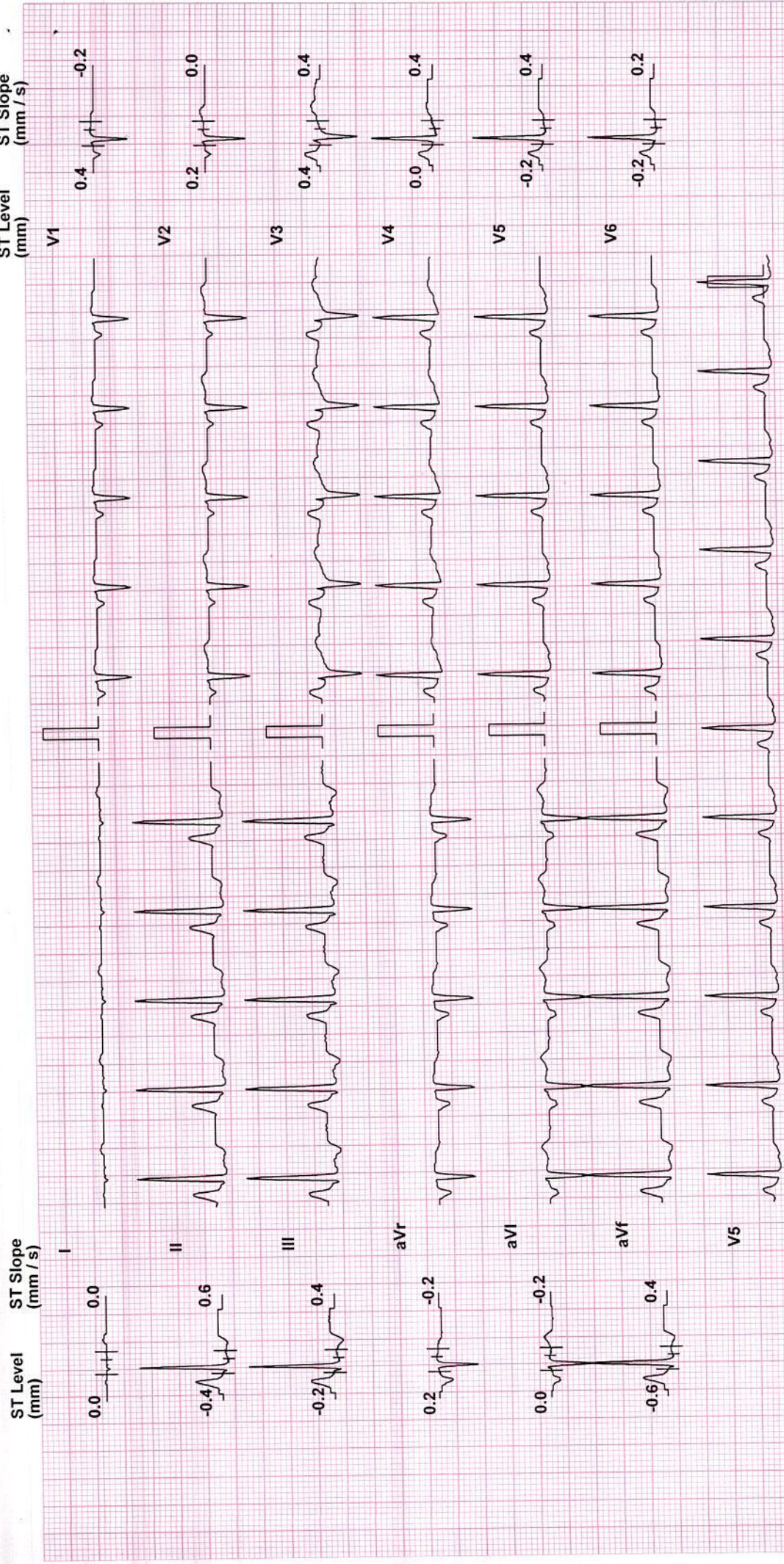


Chart Speed: 25 mm/sec
(c) Schiller Healthcare India Pvt. Ltd. V 4.0

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

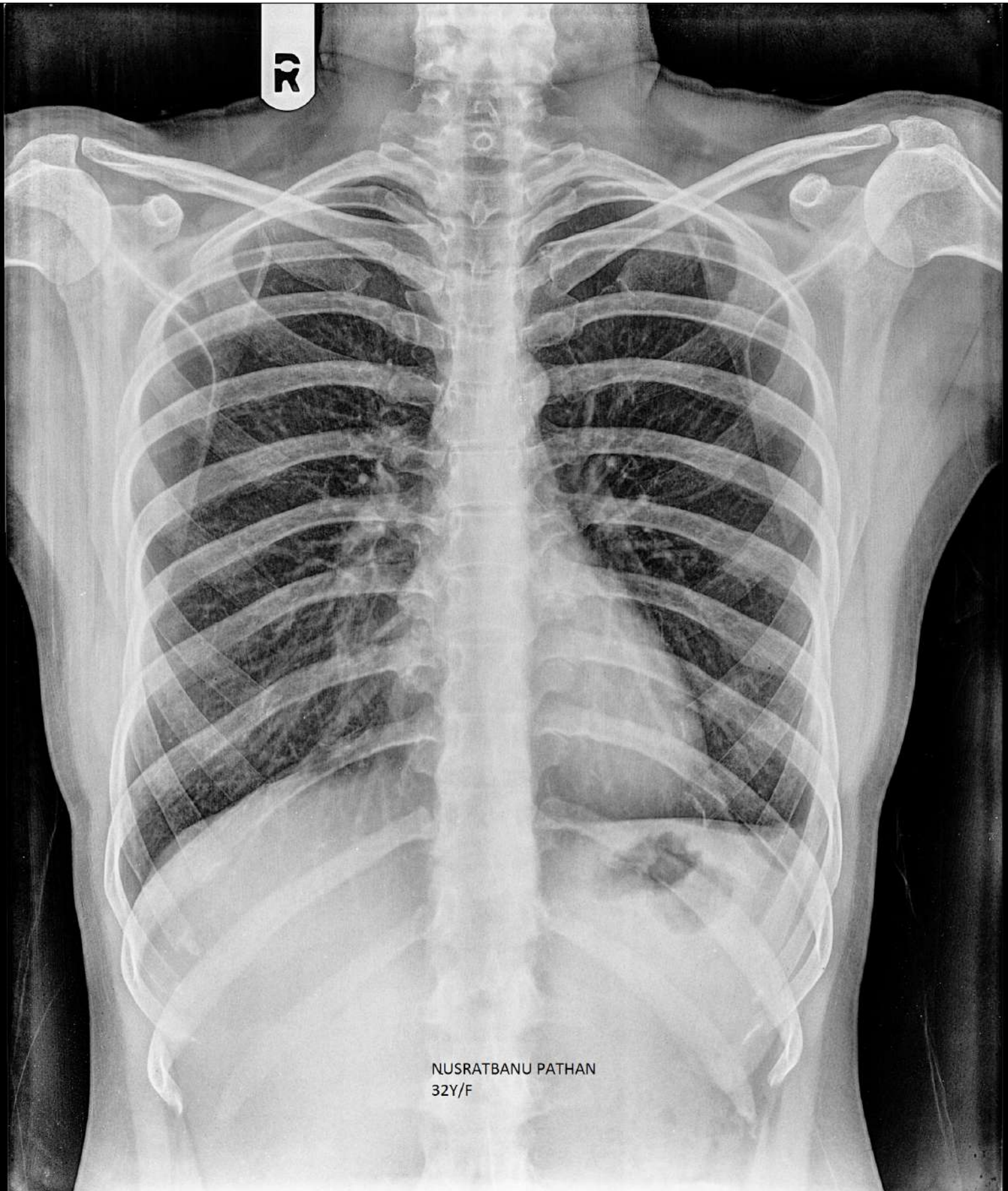
ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

R

NUSRATBANU PATHAN
32Y/F





Patient Name : Nusratbanu Pathan
Sample No.. : 419
Referred : Bank Of Baroda

Age/Sex : 32 Years/Female
Registration On:29/03/2022/09:39
Approved On : 29/03/2022 16:44

BLOOD SUGAR LEVEL

Specimen : FLOURIDE

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Interval</u>
Fasting Blood Sugar: (GOD-POD)	85.52	mg/dl	70-110



Pathologist
Dr.Pravin Shah
(M.D.Path) G-15478



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Lipid Profile

Specimen :SERUM

Test	Result	Unit	Biological Ref. Interval
S. Cholesterol: (CHOD-POD)	150.26	mg/dl	Normal :< 200 Borderline : 200 - 240 High : > 240
Serum Triglycerides: (GPO-POD)	87.66	mg/dl	Normal :Normal < 150 Borderline : 150 - 199 High : > 200
HDL Cholesterol: (Direct-Cholesterol Esterase HSDA)	61.47	mg/dl	40 - 60 mg/dl
Serum LDL Cholesterol: (Calculated)	71.25	mg/dl	Up to 150
Serum VLDL Cholesterol: (Calculated)	17.53	mg/dl	Up to 35
LDLC/HDLC Ratio: (Calculated)	1.16	mg/dl	Up to 3.4
Cholesterol/HDLC Ratio: (Calculated)	2.44	mg/dl	Up to 5.0
Total Lipid: (Calculated)	520.64	mg/dl	400 - 1000 mg/dl

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Glycosylated HB - (HBA1C)

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref Interval</u>
HBA1C: (Immunoturbidimetric)	4.8	%	Normal : ≤ 5.6 Prediabetes : 5.7 - 6.4 Diabetes : > 6.5 <u>DIABETES CONTROL CRITERIA</u> 6 - 7 : Near Normal Glycemia < 7 : Goal 7 - 8 : Good Control > 8 : Action Suggested
Mean Blood Glucose:	91.06	mg/dl	

Criteria for the diagnosis of diabetes

1. HbA1c ≥ 6.5 *
Or
2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.
Or
3. Two hour plasma glucose ≥ 200 mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
Or.
4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose ≥ 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by retesting. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

Limitation of HbA1c

- 1) In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population. 2) Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values. 3) Glycated HbF is not detected by this assay and hence specimens containing high HbF ($>10\%$) may result in lower HbA1c values than expected.

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RENAL FUNCTION

Specimen :SERUM

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Ref. Interval</u>
Sr. Creatinine: <small>(Modified Jaffe's)</small>	1.02	mg/dl	0.5 - 1.1 mg/dl
Urea: <small>(GLDH)</small>	17.43	mg/dl	10 - 50 mg/dl
S. Uric Acid: <small>(Uricase-POD)</small>	4.33	mg/dl	2.4 - 6.2 mg/dl
Blood Urea Nitrogen: <small>(Calculated)</small>	8.14	mg/dl	08 - 23 mg/dl
Bun/Creat Ratio: <small>(Calculated)</small>	7.98		



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LIVER FUNCTION TESTS

Specimen: SERUM

Test	Result	Unit	Biological Ref Interval
S. Bilirubin (Total): (Photometric DC Diazo)	0.63	mg/dl	up to 1.2
S. Bilirubin (Direct): (Photometric DC Diazo)	0.35	mg/dl	up to 0.2
S. Bilirubin (Indirect): (Calculated)	0.28	mg/dl	up to 1.0
SGPT(ALT) (UV Kinetic)	58.41	U/L	up to 42
SGOT (AST) (UV Kinetic)	50.61	U/L	up to 40
GGT (Optimized kinetic color test IFCC)	25.90	U/L	09 - 36
Total Proteins: (Biuret)	6.71	g/dl	6.0 - 8.3
Albumin (BCG)	4.49	g/dl	3.5 - 5.2
Globulins: (Calculated)	<u>2.22</u>	g/dl	2.4 - 3.7
AGRATIO: (Calculated)	2.023		
S.Alkaline Phosphatase: (Colorimetric Optimized Kinetic IFCC)	75.49	U/L	40 - 129

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COMPLETE BLOOD COUNT

Sample :EDTA

Test		Result	Unit	Biological Ref. Interval
BLOOD COUNT				
Hemoglobin	colorimetric	<u>11.4</u>	g/dL	12 - 15
R.B.C Count	Electrical impedance	<u>6.14</u>	mill/cmm	3.8 - 4.8
W.B.C Count	Electrical impedance	<u>5.7</u>	10 ³ /uL	4.0 - 10.0
Platelet Count	Electrical impedance	<u>459</u>	10 ³ /uL	150 - 450
DIFFERENTIAL COUNT				
Polymorphs	Microscopic	<u>66</u>	%	60 - 70
Lymphocytes	Microscopic	<u>30</u>	%	20 - 40
Eosinophils	Microscopic	<u>02</u>	%	1 - 6
Monocytes	Microscopic	<u>02</u>	%	2 - 10
Basophils	Microscopic	<u>00</u>	%	0 - 2
BLOOD INDISES				
HCT	Rbc Histogram	<u>38.5</u>	%	36 - 46
MCV	Calculated	<u>62.7</u>	fl	80 - 100
MCH	Calculated	<u>18.6</u>	pg	27 - 32
MCHC	Calculated	<u>29.6</u>	g/dl	32 - 36
RDW-CV	Calculated	<u>13.5</u>	%	10 - 16.5

PERIPHERAL SMEAR EXAMINATION

SMEAR RBC Line 1: Mildly hypochromic , microcytic.

SMEAR Platelets: Adequate

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Erythrocyte sedimentation rate

ESR AT 1 hour westergren 07 mm/Hour 00 - 20



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Thyroid Functions

<u>Test</u>	<u>Result</u>	<u>Normal Range</u>
T3-Triiodothyronine	: 1.25 ng/ml	0.6 - 1.80 ng/ml
T4-Thyroxine	: 8.7 mcg/dl	4.5 - 10.9 mcg/dl
TSH Thyroid Stimulating Hormone	: 1.16 microIU/ml	0.35 - 5.55 microIU/ml

Comments :

COMMENTS :

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids.
Low or undetectable TSH is suggestive of Grave~s disease
TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.
TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 ,FT4 is important.
FreeT3 is first hormone to increase in early Hyperthyroidism.
Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.
During pregnancy clinically T3 T4 can be high and TSH can be slightly low



Pathologist of 3
Dr.Pravin Shah
(M.D.Path) G-15478



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BLOOD GROUP

<u>Test</u>	<u>Result</u>
BLOOD GROUP	: "A"
RH GROUP	: POSITIVE.



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URINE EXAMINATION

PHYSICAL :

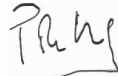
Colour - **Pale Yellow**
Deposits - **Absent**
Transparency - **Clear**
Reaction - **Acidic**
Sp. Gravity - **1.010**

CHEMICAL :

Albumin - **Absent**
Sugar - **Absent**
Bile Salts - **Absent**
Bile Pigments - **Absent**

MICROSCOPIC: (After centrifugation at 2000 r.p.m. for 5 minutes)

Pus Cells - **0-1** /h.p.f.
Red Cells - **Not seen** /h.p.f.
Epithelial Cells - **2 - 3** /h.p.f.
Casts - **Not seen**/l.p.f.
Crystals - **Not seen**
Amorphous - **Not seen**



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ભારત સરકાર
Government of India



પરિચય પુસ્તકધારીના નામ: મુસરતબાનુ
Pathan Nusaratbanu
Mohammadzarkhan
જન્મ તારીખ/DOB: 08/11/1989
સ્ત્રી/ FEMALE

Download Date: 06/09/2020

Issue Date: 20/06/2019

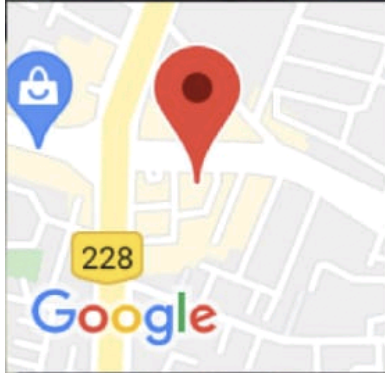
5111 0826 7815

VID : 9185 5588 7526 0505

મીની અધિકારી, મીની ચીલ્ડ્રન



GPS Map Camera



Ahmedabad, Gujarat, India

1, Surendra Mangaldas Rd, Shivranjani, Bimanagar, Ambawadi, Ahmedabad, Gujarat 380015, India

Lat 23.023949°

Long 72.531272°

29/03/22 09:23 AM