

Patient Name :-	KALPNABEN VASAVA	Date :-	28/03/2023
Age & Sex :-	34Y M		
Referred By :-	HEALTH CHECK UP		

X RAY CHEST PA VIEW

Both lung zones are clear.

Cardiac silhouette is normal

Both costophrenic angles clear.

Both domes of diaphragm are at normal level.

Bony thorax is unremarkable

Impression-No significant abnormality detected in present study.

Please correlate with clinical findings and relevant investigations.



Dr. Vivek Chaudhari
D.M.R.E.
Consultant Radiologist

Patient's Name:-	KALPANA		Date :-	28/03/2023
Age & Sex :-	34 y	F		
Referred By :-	Regular package			

USG ABDOMEN & PELVIS

LIVER : normal in size shape and show normal echotexture.

No focal solid or cystic mass seen.

Portal & biliary radicals normal.

PV & CBD normal.

G.B. : well distended & normal. No stone or inflammation seen.

PANCREAS : reveals normal echotexture. No mass, calcification or pancreatitis.

SPLEEN : Normal in size & reveals normal echotexture. No other focal mass seen.

BOTH KIDNEY : RK: --80 x38 mm , LK : -- 100 x44mm.

Both kidneys are normal size with normal cortical thickness.

No focal solid or cystic mass seen. No calculus. No hydronephrosis seen.

C.M differentiation is preserved. No parenchymal abnormality seen.

U. BLADDER : well distended & normal. No mass or filling defect seen.

UTERUS : , Normal in size , shape and echotexture. (TAS)

Endometrial cavity Empty. ET --6mm. No focal lesion seen.

RIGHT OVARY: measures appears normal size. Multiple small follicle within. No adnexal mass.


Left ovary cannot visualized on transabdominal scan due to body wall fat.

BOWEL LOOPS : Peristaltic bowel loops seen in lower abdomen. Bowel loops are normal calibre (Visualized).

No free fluid seen. No enlarged lymphnodes seen.

IMPRESSION:

- No significant abnormality seen.



Dr. CHAITALI PATEL

MDRD

Thanks for reference. Please co-relate clinically.

Note: This report is not valid for medico-legal purpose. There can be typing error, which can be correctable.



OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Kalpaben B Vasava UHID Number: - 4289

Consultant Name: - Dr. Kulkarni Date: - 28/12/23 Start Time: - 5:53 Age: 34 (Years)
Sex: - F (M/F) Kankadize

Height: - _____ cms, Weight: - _____ kgs. Temp. _____, Pulse: - _____ (Per minute), SPO2 _____

B.P. :- _____ (mm of Hg), RBS:- _____ First Visit / Follow Up

Visit: First visit

Nursing Staff Name & Signature: - Vasava Savita End Time:- _____

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:- _____

Diagnosis:-

Clinical Findings:-

NO Gynecological
complaints.

plm/g = 3-5 RMPL
28-30

emp = 17/3/dec

Investigations and Advice:-

oln = p. Ad L2

Twinning / 6 tears back / GCS

SPH/OPD/03

pln / o



Routine check-up

Name: Kulpreet Kaur

Date: 28/3/23

Age: 34 Sex: F

V_n { 6/6
6/6

BE Normal

RRR

Clear lens

A OK

Adv

nil intervention
needed

Dr Shreya Shah
Consultant Ophthalmologist &
FRCO Surgeon
REG NO:-G 26895

Referral : Dr Mediwheel Full body Health Checkup
Collection Time : 28/03/2023, 07:45 AM
Reporting Time : 28/03/2023, 12:17 PM
Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
CBC			
Complete Blood Count (CBC)			
Hemoglobin (Hb)* Method : Cynmeth Photometric Measurement	12.1	gm/dL	12.0 - 15.0
Erythrocyte (RBC) Count* Method : Electrical Impedance	5.97	mil/cu.mm	3.8 - 4.8
Packed Cell Volume(Hematocrit) Method : Calculated	38.7	%	36 - 46
Red cell Indices			
Method - Calculated/Electrical Impedance			
MCV	64.82	fL	83 - 101
MCH	20.27	pg	27 - 32
MCHC	31.27	gm/dL	31.5 - 34.5
RDW - CV	15.2	%	11.6 - 14.0
Total and Differential count			
Method - Electrical Impedance and VCSN Technology			
Total Leucocytes (WBC) Count*	4680	cell/cu.mm	4000-10000
Neutrophils	59	%	40 - 80
Lymphocytes	30	%	20 - 40
Monocytes	09	%	2 - 10
Eosinophils*	02	%	1 - 6
Basophils	00	%	0 - 2
Platelet Count Method : Electrical Impedance Sample Type : EDTA Whole Blood.	270	10 ³ /ul	150 - 450
E.S.R			
Erythrocyte Sedimentation Rate Method : EDTA Whole blood, modified westergren	10	mm/hr	<20

Interpretation:

It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever,. It is also increased in multiple myeloma, hypothyroidism.

****END OF REPORT****

B. Dholiya

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-325/1

Scan to Validate





**SARDAR
PATEL HOSPITAL
& HEART INSTITUTE**

Patient Name : MRS. KALPANABEN B VASAVA

Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)



Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 12:35 PM

Sample ID :



002008723

Test Description	Value(s)	Unit(s)	Reference Range
CREATININE			
Creatinine Method : Enzymatic	0.65	mg/dL	0.6 - 1.2 mg/dl
URIC ACID			
Uric Acid* Method : Uricase, POD	5.5	mg/dL	2.5 - 6.8 mg/dL
BUN CREATININE RATIO			
Urea	21.2	mg/dL	17 - 43
Blood urea nitrogen	9.91	mg/dL	7 - 25
Creatinine	0.65	mg/dL	0.6 - 1.2
BUN/Creatinine ratio	15.25	Ratio	6 - 22
BLOOD UREA NITROGEN			
Urea * Method : Serum, Urease	21.2	mg/dL	17 - 43
Blood Urea Nitrogen-BUN* Method : Calculated	9.90	mg/dL	7 - 25 mg/dL

END OF REPORT

B. Dholiya

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Scan to Validate



Fidelity Diagnostics Pvt. Ltd., Chikuwadi, Opp. Railway Yard, Ankleshwar - 393001

Ph. No.: +91 6353565992 , 7227038845 | www.fidelitydiagnostics.com

Page 1 of 1



Patient Name : MRS. KALPANABEN B VASAVA

Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)

Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 01:49 PM

Sample ID :



002008723

Test Description	Value(s)	Unit(s)	Reference Range
LIVER FUNCTION TEST-1			
Bilirubin - Total Method : Diazotization	0.40	mg/dL	0.3 - 1.2
Bilirubin - Direct Method : Serum, Diazotization	0.22	mg/dL	Adults and Children: 0.0 - 0.4
Bilirubin - Indirect Method : Calculated	0.18		
SGOT Method : Serum, UV without P5P	26.9	U/L	< 50
SGPT Method : Serum, UV without P5P	34.0	U/L	< 50
Alkaline Phosphatase-ALP Method : Serum, PNPP, AMP Buffer, IFCC 37 degree	83.0	U/L	30-120
Total Protein Method : Serum, Biuret, reagent blank end point	6.63	g/dL	6.6 - 8.3
Albumin Method : Serum, Bromocresol green	3.76	g/dL	Adults: 3.5 - 5.2
Globulin Method : Calculated	2.87	g/dL	1.8 - 3.6
A/G Ratio Method : Calculated	1.31	ratio	1.2 - 2.2

BLOOD GROUP & RH (D) FACTOR, EDTA WHOLE BLOOD

Blood Group

Method : Forward and Reverse By Tube Method

"AB"

RH Factor

Positive

Methodology

This is done by forward and reverse grouping by tube Agglutination method.

Interpretation

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

****END OF REPORT****

Bholiya

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G 32571

Scan to Validate



Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)

Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 01:25 PM

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
------------------	----------	---------	-----------------

GLYCOSYLATED HB (HBA1C)

Glyco Hb (HbA1C)	4.7	%	Non-Diabetic: <=5.6 Pre Diabetic: 5.7-6.4 Diabetic: >=6.5
Estimated Average Glucose :	88.19		mg/dL

Interpretations

- HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%
- Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- In known diabetic patients, following values can be considered as a tool for monitoring the glycaemic control.
Excellent control-6-7 %
Fair to Good control - 7-8 %
Unsatisfactory control - 8 to 10 %
Poor Control - More than 10 %

BLOOD GLUCOSE FASTING (FBS)

Glucose fasting Method : GOD-POD	106.3	mg/dL	Normal: 70 - 99 Impaired Tolerance: 100-125 Diabetes mellitus: >= 126 (on more than one occasion) (American diabetes association guidelines 2018)
Urine Fasting	Absent		

BLOOD GLUCOSE POST PRANDIAL (PP2BS)

Blood Glucose-Post Prandial Method : GOD-POD	118.5	mg/dL	70 - 140
Urine Post Prandial	Absent		

END OF REPORT

Bholya

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G-32571

Scan to Validate



Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)

Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 10:27 AM

Sample ID :



002008723

Test Description	Value(s)	Unit(s)	Reference Range
LIPID PROFILE (D)			
Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	143.0	mg/dL	Desirable: <= 200 Borderline High: 201-239 High: > 239
Triglycerides Method : Serum, Enzymatic, endpoint	78.7	mg/dL	Normal: < 150 Borderline High: 150-199 High: 200-499
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	46.1	mg/dL	Very High: >= 500 Normal: > 40
LDL Cholesterol Method : Calculated	81.16	mg/dL	Major Heart Risk: < 40 Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189
Non - HDL Cholesterol, Serum Method : calculated	96.90	mg/dL	Very High: >= 190 Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL
VLDL Cholesterol Method : calculated	15.74	mg/dL	Very High: > or = 190 mg/dL 6 - 38
CHOL/HDL RATIO Method : calculated	3.10	ratio	3.5 - 5.0
LDL/HDL RATIO Method : calculated	1.76	ratio	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0
HDL/LDL RATIO Method : calculated	0.57	ratio	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0

Note: 8-10 hours fasting sample is required. Test results may show interferences due to pregnancy, certain drugs such as estrogens and other drugs (such as androgenic and related steroids), and insulin therapy etc. 12 hours test is recommended prior to the test as non fasting status may result in falsely elevated test values. Alcohol should not be consumed for atleast 24 hours before the test. Values may be increased in acute illness, colds or flu. Obesity, stress, physical inactivity, cigarette smoking may lead to increase test values. If possible all medications should be withheld for atleast 24 hours before testing (On Doctors Advice). Intraindividual variations, seasonal as well as positional variations (levels lower when sitting compared to standing etc) have been observed. Cholesterol and HDL-C should not be measured immediately after MI, and 3 months wait is suggested.

****END OF REPORT****

B. Dholya

Dr. Bhavika Dholya
M. D. Pathology
Registration No: G-32571

Scan to Validate





**SARDAR
PATEL HOSPITAL
& HEART INSTITUTE**

Patient Name : MRS. KALPANABEN B VASAVA

Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)



Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 12:37 PM

Sample ID :



002008723

Test Description	Value(s)	Unit(s)	Reference Range
THYROID FUNCTION TEST 1			
T3-Total Method : Serum, CLIA	1.93	ng/mL	0.69 - 2.15 ng/mL
T4-Total Method : Serum, CLIA	7.52	ug/dL	5.2 - 12.7 ug/dL
TSH Method : Serum, CLIA	3.67	uIU/mL	0.3 - 4.5 uIU/mL

Interpretation

END OF REPORT

Dr. Bhavika Dholiya
M. D. Pathology
Registration No: G 32571

Scan to Validate



Fidelity Diagnostics Pvt. Ltd., Chikwadi, Opp. Railway Yard, Ankleshwar - 393001

Ph. No.: +91 6353565992 , 7227038845 | www.fidelitydiagnostics.com

Page 1 of 1



Patient Name : MRS. KALPANABEN B VASAVA

Age / Gender : 34 years / Female

Patient ID : 21394

Source : Sardar Patel Hospital (OPD)

Maharashtra | Goa | Gujarat

Referral : Dr Mediwheel Full body Health Checkup

Collection Time : 28/03/2023, 07:45 AM

Reporting Time : 28/03/2023, 12:14 PM

Sample ID :



002008723

Test Description	Value(s)	Unit(s)	Reference Range
URINE ROUTINE			
Volume*	10	ml	ml -
Colour*	Pale Yellow		Pale Yellow
Transparency (Appearance)*	Clear		Clear
Deposit*	Absent		Absent
Reaction (pH)*	6.0		4.5 - 8
Specific Gravity*	1.020		1.010 - 1.030
Chemical Examination (Automated Dipstick Method) Urine			
Urine Glucose (sugar)*	Absent		Absent
Urine Protein (Albumin)*	Absent		Absent
Urine Ketones (Acetone)*	Absent		Absent
Blood*	Absent		Absent
Bile pigments*	Absent		Absent
Nitrite*	Absent		Absent
Microscopic Examination Urine			
Pus Cells (WBCs)*	1-3	/hpf	0 - 5
Epithelial Cells*	2-4	/hpf	0 - 4
Red blood Cells*	Occasional	/hpf	Absent
Crystals*	Absent		Absent
Cast*	Absent		Absent
Trichomonas Vaginalis*	Absent		Absent
Yeast Cells*	Absent		Absent
Amorphous deposits*	Absent		Absent
Bacteria*	Absent		Absent

END OF REPORT

B. Dholya

Dr. Bhavika Dholya
M. D. Pathology
Registration No: G-32571

Scan to Validate





Patient Name : Mrs. Kalpnaben B Vasava
Registration No : 101-023-4289-000
Sex : Female
Patient Arrived At : 27-Mar-2023 09:00:00 AM
Test Name : ECHO STUDY

DOB : 27-Mar-1989
Age : 34 Yrs/
Result Verified At : 28-Mar-2023 14:16

2D ECHO CARDIOGRAPHY REPORT

- All cardiac chambers are normal in dimension
- Normal LV Systolic function at Rest, LVEF = 60 %
- No RWMA at Rest.
- Grade I diastolic dysfunction
- MV – Normal, No MS/MR AV –Normal, No AS/ AR
- TV – Normal , No TS/ Trivial TR PV – No PS / PR
- No significant Pulmonary Hypertension, RVSP = 30 mmHg
- IAS / IVS appears Intact
- No e/o obvious Clot / Vegetation / effusion
- IVC not dilated collapsing > 50% on inspiration

IMPRESSION: NORMAL LVEF, NO RWMA, GRADE I LVDD

Dr. Milan Mehta
D.Card (Mumbai)
Non-Invasive cardiology

28.03.2023 12:57:17
SARDAR BAJI HOSPITAL
CHIKUWAD,
ANKLESHWAR

Location:
Order No:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

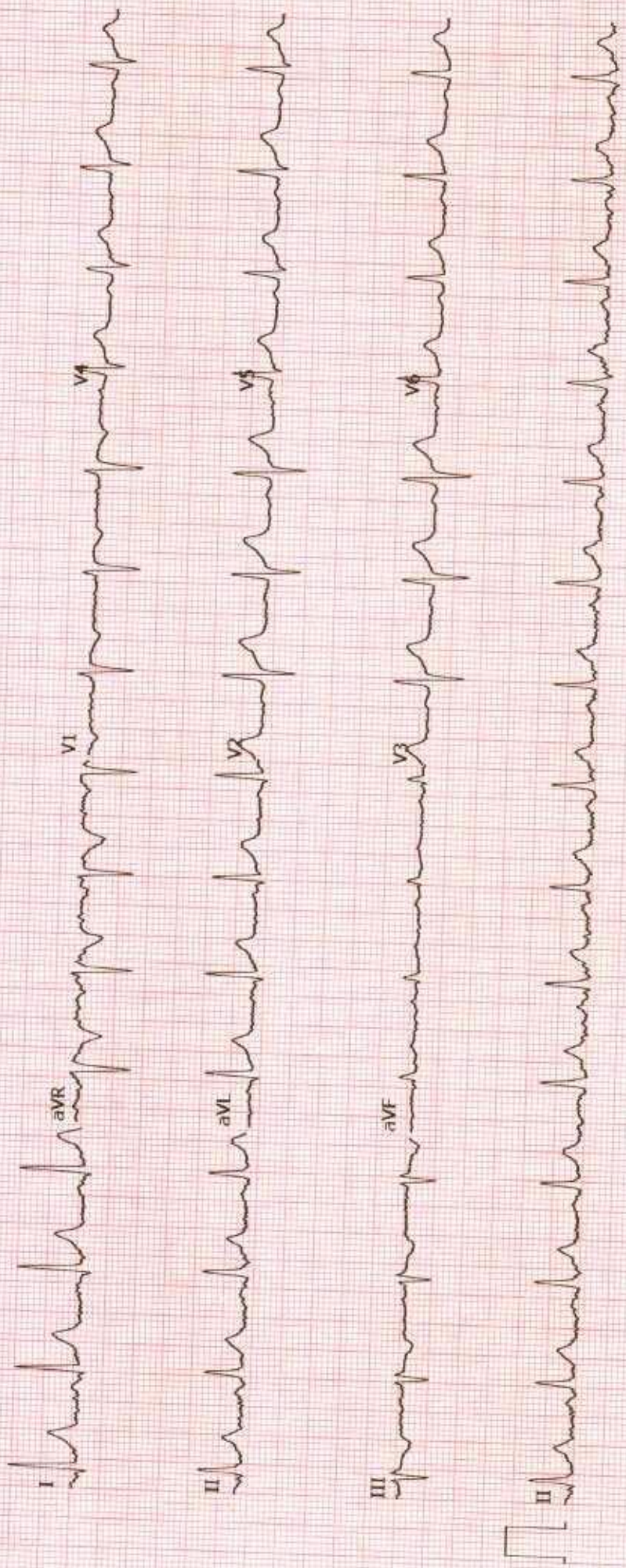
89 bpm
--/-- mmHg

Kalp Prabhakar
WASSENKEL

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 82 ms
QT / QTcBaz : 350 / 425 ms
PR : 134 ms
P : 78 ms
RR / PP : 676 / 674 ms
P / QRS / T : 36 / 14 / 5 degrees

Normal sinus rhythm
Normal ECG



GE MAC2000 1.1 12SL™ v241

25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz

Unconfirmed
4x2.5x3.25_R1 1/1