

Patient Name- Mrs. Sarita Sinha.	Date- 30/03/23
Age- 48	Sex- F
B P – Systolic 158 Diastolic 85 mmHg	R.B.S.-
Pulse- 88/min	SPO2- 95%
Temp- 97.5°F	Height-
Weight- 62.7 kgs.	BMI-
Consultant-	Fat-

Valid for 7 Days

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Address : TECHNO HERITAGE, Jehangirabad Palace,
Next to DM Residence, 12, Rani Laxmi Bai Marg,
Hazratganj, Lucknow 226001

Online appointments : www.apolloclinic.com
Email : hazratganj.lko@apolloclinic.com

TO BOOK AN APPOINTMENT



Patient Name- Mrs. Sanjita Sinha	Date- 30/03/23
Age- 48	Sex- F
B P – Systolic	R.B.S.-
Diastolic	SPO2-
Pulse-	Height-
Temp-	BMI-
Weight-	Fat-
Consultant- Dr. Sanjita Sinha	

Routine ENT Check up.

c/o cold at present.
K/c/o HTN.

<u>O/E.</u>	R	L
Ear		N.
EAC.	otton	N.
TM	not seen.	N.
Mastoid	Non tender	Non tender.
TFT.	R	L
Rinne	AC > BC	AC > BC.
Weber.		
ABC	↓	↓
FN	N	N.
Nystagmus	NO	NO.

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 **7897 123 777**

NAME : MRS. SARITA SINHA **RT NO** : 4059
DATE : 30.MAR.2023 **AGE** : 48 Y
REFERRED BY : PAN INDIA **SEX** : F

ULTRASOUND OF WHOLE ABDOMEN

- **LIVER:** is enlarged in size (17.3 cms) with normal shape & increased echogenicity. Biliary radicals are not dilated. No obvious focal lesion. Portal & hepatic veins are normal in caliber.
- **GALL BLADDER:** is partially distended. Wall thickness is normal. No pericholecystic fluid collection noted. CBD is not dilated.
- **PANCREAS:** is normal in size and contour. Parenchyma shows normal echotexture. No pancreatic duct dilatation is seen. No peri-pancreatic fluid collection seen.
- **SPLEEN:** is normal in size (10.7 cms), shape & position. Parenchyma shows normal echotexture. Splenic veins are not dilated.
- **B/L KIDNEYS:**
 - Both kidneys are normal in size, site, shape, position. Cortical echoes are normal. Cortico-medullary differentiation is maintained. Pelvicalyceal system are not dilated. No obvious calculus / mass / cyst seen.
- **URINARY BLADDER:** is well distended with normal contour. Wall appears regular. No evidence of any calculus /mass lesion is seen.
- **UTERUS:** It is anteverted with normal size measuring 75x38x32 mm. Myometrial & endometrial echoes are normal. Endometrial stripe measures 5.4 mm is normal. No obvious fluid collection seen with in endometrial canal. No focal mass lesion seen. Cervix appears normal.
- **RIGHT OVARY:** is normal in size, shape and echotexture.
- **LEFT OVARY:** is normal in size, shape and echotexture.
- No fluid in POD.

IMPRESSION:

- **HEPATOMEGALY WITH GRADE II FATTY LIVER.**

ADV: Please correlate clinically

Note:- discrepancies due to technical or typing errors should be reported for correction for seven days. No compensation liability stands.



Dr. Priyank K.S. Chaudhary
(MBBS, DMRD, DNB)
Reg. No. - 71151

Patient Name- Mrs. Sarita Sinha.	Date- 30/3/23
Age- 48	Sex- F.
B P - Systolic Diastolic	R.B.S.-
Pulse-	SPO2-
Temp-	Height-
Weight-	BMI-
Consultant- Dr. Meena Pandey.	Fat-

C/o No complaints.

OH P2 + 0 + A2

PU - Discharge

John v. wash L_{1/2}

Both 1st NB.

PI S - MTD

• Estrogen gelly 0.1mp-
U.A./Ses

• 2nd 28es.

PI A - MTD

• 2nd 13ydr.

• Tab Deneq - 100mg - m

• Before 1y.

• Tab Zendo. Sp

H/O HT

• m. taken - 7y.

• Ceep Omic - 0.5m

• Tab A102 - 3m

ASP

to 5 days

Valid for 7 Days

Mrs. Savita Simha

Age 48 Y F

Vm $\left\{ \begin{array}{l} 6/9P \\ 6/6P \end{array} \right.$

VncPH $\left\{ \begin{array}{l} 6/6 \\ 6/6P \end{array} \right.$

Nun $\left\{ \begin{array}{l} N24 \\ N24 \end{array} \right.$

Cvn $\left\{ \begin{array}{l} 38/38 \\ 38/38 \end{array} \right\}$ WNL

Subjective Improvement.

R \rightarrow +1.0DS — 6/6

L \rightarrow Plau — 6/6P

Addⁿ + 2.0DS BE $\left\{ \begin{array}{l} N6 \\ N6 \end{array} \right.$

Bifocal / Progressive glass.

ClO — ~~now~~
- watering
- burning
Sensation
- Itching.

Savita Sinha 48/F

o/c - regular dental checkup

o/c - stains +
calculus +

missing +6

RCT treated +7

Adv - oral prophylaxis.
- replacement of missing teeth +6
- IOPAR +7

Sati

Dr. ROHIT MADAN
MDS (Periodontist & Oral Implantologist)
Consultant Dentist
DCI Reg. No. 002259
Apollo Clinic, Hazratganj

Report Doc No.: 4788

Patient No.: 3713-3703

Name : Mrs. Sarita Sinha / 48 Year / Female

Collected On : 30-03-2023

Referred By : ARCOFEMI HEALTHCARE LIMITED

Report On: 30-03-2023 05:29 PM

ARCOFEMI MEDIWHEEL FEMALE HEALTH PACKAGE
CBC (Complete Blood Count)

Hemoglobin Method : (Cyanmethemoglobin)	12.2 gm%	Normal 12-15 gm%
Hematocrit (PCV) Method : (Calculated parameter)	35.8 %	Normal 36-45 %
RBC Count Method : (Electrical Impedance)	4.27 million/cmm	Normal 3.7-5 million/cmm
MCV Method : (Calculated parameter)	83.8 fl	Normal 83-101 fl
MCH Method : (Calculated parameter)	28.6 pg	Normal 27-32 pg
MCHC Method : (Calculated parameter)	34.1 g/dl	Normal 31-37 g/dl
RDW-CV Method : (Electrical Impedance)	13.5 %	Normal 11.6-14 %
TLC (Total Leucocyte Count) Method : (Electrical Impedance)	11900 cells/cu.mm	Normal 4000-10000 cells/cu.mm
DLC (Differential Leucocyte Count) Method : (Electrical Impedance)		
Neutrophil	65 %	40-80
Lymphocyte	28 %	20-40
Eosinophil	04 %	1-6
Monocyte	03 %	2-10
Basophil	00 %	0-1
ABSOLUTE LEUCOCYTE COUNT Method : (Electrical Impedance)		
NEUTROPHILS	7735 cells/cu.mm	2000-7000
LYMPHOCYTES	3332 cells/cu.mm	1000-3000
EOSINOPHILS	476 cells/cu.mm	20-500
MONOCYTES	357 cells/cu.mm	200-1000
Platelet Count Method : (Electrical Impedance)	279 thousand/mm ³	Normal 150-450 thousand/mm ³
GBP (Peripheral Blood smear)		
RBC : Normocytic normochromic		

WBC : Total leucocyte count and differential leucocyte count as given.

Platelets : Platelets are adequate in number.

No hemoparasite or immature cells seen .

Checked By

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Page 1 End

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Referred By : ARCOFEMI HEALTHCARE LIMITED

Patient No.: 3713-3703
Collected On : 30-03-2023
Report On: 30-03-2023 05:29 PM

ESR (Wintrobs) 18 mm/h Normal 0-20 mm/h

Blood Grouping/ABO RH Typing

Blood Group : "O"
Rh Factor : POSITIVE

Blood Sugar (Fasting) 97 mg/dl Normal 70-110 mg/dl
Method :(GOD-POD)

Blood Sugar (PP) 154 mg/dl Normal 80-160 mg/dl
Method :(GOD-POD)

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Page 2 End

Report Doc No.: **4788**
Name : **Mrs. Sarita Sinha / 48 Year / Female**
Referred By : **ARCOFEMI HEALTHCARE LIMITED**

Patient No.: **3713-3703**
Collected On : **30-03-2023**
Report On: **30-03-2023 05:29 PM**

Kidney Function Test (KFT)

Serum Urea Method : <i>(UREASE)</i>	21 mg/dl	Normal 10-50 mg/dl
Serum Creatinine Method : <i>(Creatinine amidohydrolase)</i>	0.6 mg/dl	Normal 0.6-1.4 mg/dl
Serum Sodium Method : <i>(Direct ISE)</i>	139 mmol/L	Normal 135-146 mmol/L
Serum Potassium Method : <i>(Direct ISE)</i>	4.3 mmol/L	Normal 3.5-5.1 mmol/L

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Report On: 30-03-2023 05:29 PM

Liver Function Test (LFT)

Serum Bilirubin - Total Method : (Diazo sulfanilic)	0.5 mg/dl	Normal 0.2-1.2 mg/dl
Serum Bilirubin - Direct Method : (Diazo sulfanilic)	0.2 mg/dl	Normal 0-0.3 mg/dl
Serum Bilirubin-Indirect Method : (Calculated parameter)	0.3 mg/dl	Normal 0.3-1 mg/dl
Serum SGOT/AST Method : (UV with P-5-P)	24 U/L	Normal 10-46 U/L
Serum SGPT/ALT Method : (UV with P-5-P)	45 U/L	Normal 10-49 U/L
Serum Alkaline Phosphatase (SALP) Method : (p-nitrophenyl phosphate)	161 U/L	Normal 35-104 U/L
Serum Gamma-Glutamyltransferase (GGT) Method : (IFCC)	27 U/L	Normal 0-38 U/L

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Referred By : **ARCOFEMI HEALTHCARE LIMITED**

Patient No.: 3713-3703
Collected On : 30-03-2023
Report On: 30-03-2023 05:29 PM

Lipid Profile

Serum Cholesterol -Total Method : <i>(CHE/CHO/POD)</i>	204 mg/dl	Normal < 200
Serum Triglyceride Method : <i>(Enzymatic)</i>	191 mg/dl	Normal < 150
Serum Cholesterol VLDL Method : <i>(Calculated parameter)</i>	38.2 mg/dl	Normal < 30
Serum Cholesterol HDL Method : <i>(Polymer-Detergent)</i>	41 mg/dl	Normal > 40
Serum Cholesterol LDL Method : <i>(Calculated parameter)</i>	125 mg/dl	Normal < 100
Total Cholesterol/HDL Ratio Method : <i>(Calculated parameter)</i>	4.98	Normal 0-4.5
LDL/HDL Ratio Method : <i>(Calculated parameter)</i>	3.95	Normal 0-3

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Patient No.: 3713-3703
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HbA1c

TEST NAME	RESULT	UNIT	BIO. REF. RANGE	METHOD
HBA1C, GLYCATED HEAMOGLOBIN, <i>WHOLE BLOOD EDTA</i>	7.0	%		TURBIDIMETRIC

Comment:

Reference range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS > 18 YEARS	<5.7
AT RISK (PREDIABETES) DIAGNOSING DIABETES	5.7-6.4
DIABETICS	≥6.5
EXCELENT CONTROL	6-7
FAIR TO GOOD CONTROL	7-8
UNSATISFACTORY CONTROL	8-10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control.

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Report On: 30-03-2023 05:29 PM

T3 T4 TSH

Serum T3 Method : (Chemiluminescence Immunoassay)	1.03 ng/ml	Normal 0.7-2 ng/ml
Serum T4 Method : (Chemiluminescence Immunoassay)	7.63 µg/dl	Normal 6.1-12.2 µg/dl
Serum Thyroid Stimulating Hormone (TSH) Method : (Chemiluminescence Immunoassay)	3.57 uIU/ml	Normal 0.3-5.6 uIU/ml

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 Patient No.: 3713-3703
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 Report On: 30-03-2023 05:29 PM

Urine R/M

DEPARTMENT OF CLINICAL PATHOLOGY			
URINE EXAMINATION REPORT			
TEST NAME	VALUE	UNIT	NORMAL VALUE
PSYISICAL EXAMINATION:-			
Urine Color	Pale Yellow		Pale yellow
Reaction	Acidic		Acidic/Alkaline
Appearance	Turbid		Clear
Specific Gravity	1.010		1.010-1.025
CHEMICAL EXAMINATION:-			
Albumin	Absent		Trace/Nil
Glucose	Absent		Absent
Ketone	Absent		Absent
Blood	Absent		Absent
Bilirubin	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite	Absent		Absent
MICROSCOPIC EXMINATION:-			
Pus Cells(WBC)	3-4	Cells/hpf	
Red Blood Cells (RBC)	Nil	Cells/hpf	
Epithelial Cell	12-15	Cells/hpf	
Casts	Nil	Nil	
Bacteria	Nil		
Crystals	Nil	Nil	

End of Report


 Checked By


 Dr. Divya Mehdiratta
 MBBS, MD (Pathologist)

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PATIENT NAME :MRS SARITA SINHA

AGE / SEX: 48 YRS/F

UHID :4059

DATE : 30 , MAR, 2023

2-D ECHO& M-MODE EXAMINATION VALVES

1.MITRAL VALVES STUDY:

a)**Motion:** Normal b) **Thickness:** Normal c)**Calcium-** none

2. AORTIC VALVE STUDY

a) **Aortic root** 2.3cm. b)**Aortic Opening** 1.6cm. c)**Closure:**Central
d)**Calcium-**none e)**Eccentricity Index** 1 f) **Vegetation-** none
g) **Valve Structure :** Trileaflet

3.PULMONARY VALVE STUDY Normal

a)**EF Slope** Normal b)**A Wave +**
c)**Thickness** Normal d)**Others -**

4.TRICUSPID VALVE Normal.

6. AORTIC MITRAL CONTINUITY: maintained

Left Atrium	3.6 x3.5cm.	Clot	: none	Others:
Right Atrium	Normal	Clot	:none	I.A.S.: intact
IVC	11mm with normal respiratory variation			

(Cont2)

(...2)

VENTRICLES

RIGHT VENTRICLE:	Normal	Ejection fraction: 70%
LEFT VENTRICLE :		Fractional Shortening 39%
IVS (D) 1.1cm.(S)	1.4 cm.	LV mass:170g
LVID(D) 4.26cm.(S)	2.57 cm.	
PW (D) 1.1cm (S)	1.5 cm	
RWMA: None		
IVS: Intact		

TOMOGRAPHIC VIEWS

PARASTERNAL LONG AXIS VIEW:

Normal

Good LV contractility

SHORT AXIS VIEWS:

Aortic Valve Level	AOV- Normal MV-Normal PV-Normal TV-Normal
--------------------	--

Mitral Valve Level

Papillary Muscle Level:

APICAL 4 CHAMBER VIEW

No clot / vegetation

OTHER SPECIAL VIEWS:

(Cont.....3)

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(.....3)

PERICARDIUM
Normal
DOPPLER STUDIES

	Velocity (m/ sec)	Flow Pattern	Regurgitation	Gradient mmHg
MITRAL	E=0.74;A=0.61 E/A 1.2;E/e'=8.2	Normal	Nil	-
AORTIC	1.3	Normal	Nil	4.5
TRICUSPID	Normal	Normal	Nil	-
PULMONARY	1	Normal	Nil	4.5

CONCLUSIONS:

- No RWMA
- LVEF = 70%
- IAS/IVS intact
- No MR/AR/TR
- No clot / vegetation.
- No pericardial effusion.
- No Diastolic Dysfunction


DR. A.KSINGH
MD,DM(Cardiology)

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 **7897 123 777**

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs Sarita Sinha. on 30/3/23.

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>Dyslipidemia</u></p> <p>2. <u>Type II DM</u></p> <p>3. <u>Hepatomegaly c grade II fatty liver</u></p> <p>However, the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after <u>3 months</u></p>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended 	<input type="checkbox"/>
<ul style="list-style-type: none"> • Unfit 	<input type="checkbox"/>

Dr. Saurabh Agarwal
Medical Officer
Apollo Clinic,
Saurabh

This certificate is not meant for medico-legal purposes

Dr. Saurabh Agarwal
MBBS, MD, FIDM (UK), FAGE
Reg. No. 1395
Apollo Clinic Hazratganj

Patient Name- Mrs. Sarita Sinha.	Date- 30/03/23
Age- 48	Sex- F
B P - Systolic 158 Diastolic 85 mmHg	R.B.S.-
Pulse- 88/min	SPO2- 95%
Temp- 97.5°F	Height-
Weight- 62.7 kgs.	BMI-
Consultant- Dr. Sawabh Aggarwal	Fat-

- Dyslipidemia
 - Type II DM
 - Hepatomegaly c grade II fatty liver
- H/O HTN
H/O Type II DM
HbA1c - 7
on medication

- Rx
- ① Tab Heptagon 1-0-1 X 1 month
 - ② Tab Evion 600 IO 1-0-0 X 1 month
 - ③ Tab Aterwa 20mg 0-0-1 X 1 month (HTN)

Adjust dose for Type II DM & HTN medicine

Advice: Avoid oily spicy food
Avoid sugary things
Eat green leafy vegetables
Diet modification
Exercise 30 min/day
Reduce salt in diet

Valid for 7 Days

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7897 123 777

Inw: sugar - F } after 1 month
 - PP }

HbA_{1c} - after 3 months

Lipid profile after 1 month

USG Abdomen after 3 months

Saurabh

Dr. Saurabh Agarwal
MBBS, MD, FIDM (UK), FAGE
Reg. No. 68395
Apollo Clinic Hazratganj