

Meddi-wheel

Dr. Vimmi Goel
Head - Non Invasive Cardiology
Incharge - Preventive Health Care
MBBS, MD (Internal Medicine)
Reg. No: MMC-2014/01/0113
Date: 25/02/23

Name: Mrs. Pallavi Janbade

Age: 36y Sex: M/F Weight: 71.3 kg Height: 164.7 in BMI: 26.3

BP: 110/70 mmHg Pulse: 90 bpm RBS: _____ mg/dl

SpO₂ - 100%

LMP - 17/01/23
ANC 1 Month

Primigravida
Early pregnancy
NO H/O any medical illnesses
F/H - Father - HT, DM
Mother - DM

NO Compl.

C/E
IUP
Ch
ly
P/A / ~

IMV → wired

Adv.
To follow advice of
Dr. Manika Korpalliwari

Dr. VIMMI GOEL
MBBS, MD
Sr. Consultant-Non Invasive Cardiology
Reg.No.: 2014/01/0113



Mrs Pallavi Gambale 36/F 25/2/23

H/o anaesthesia: 1 1/2 hrs.

O/H: DOM: 2 yrs
 Primigravida

CPT done at home
 + V.
 Spontaneous Conception

PMH: LMP - 17/1/23
 EDD - 24/10/23
 PGL - 5 wks 4 days

PMO - 3-4d/28 - 3-1/2d/28

PHH: Nil

SHH: # Elbow (Supracondylar # LA)

PHH: HTN & DM

PHH: Grand uterine - 5 wks 3 days
 No extra yolk sac/fetal pole

Adv: Repeat USS obst after 10-14 days
 (early scan)

Adv - Hb, hbct, hbcs

- FOL
- Hbcs
- hbct
- hbcs

PHH: S/P

See case - N/A

R

- To All - 3

o - 1x 30 days Monitor

Dr. MONIKA KOTPALIWAR

MBBS, MD, DNB (OBGY), MNAMS, MRCOG (UK)

Fellowship in Reproductive Medicine

Obstetrician & Gynaecologist

Reg. No: MMC 2013/03/0477



0266 8347



MC-4807



KIMS-KINGSWAY
HOSPITALS

DEPARTMENT OF PATHOLOGY

Patient Name : Mrs. PALLAVI JANBADE	Age / Gender : 36 Y(s)/Female
Bill No/ UMR No : BIL2223018544/UMR2223135891	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Feb-23 10:35 am	Report Date : 25-Feb-23 12:22 pm

HAEMOGRAM

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	12.1	12.0 - 15.0 gm%	Photometric
Haematocrit(PCV)		38.9	36.0 - 46.0 Vol%	Calculated
RBC Count		5.59	3.8 - 4.8 Millions/cumm	Photometric
Mean Cell Volume (MCV)		70	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		21.6	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		31.0	31.5 - 35.0 g/l	Calculated
RDW		16.7	11.5 - 14.0 %	Calculated
Platelet count		249	150 - 450 10^3 /cumm	Impedance
WBC Count		5500	4000 - 11000 cells/cumm	Impedance

DIFFERENTIAL COUNT

Neutrophils		51.9	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes		40.9	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils		4.2	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes		3.0	2 - 10 %	Flow Cytometry/Light microscopy
Basophils		0.0	0 - 1 %	Flow Cytometry/Light microscopy
Large Immature cells		0.0		Flow Cytometry/Light microscopy
Absolute Neutrophil Count		2854.5	2000 - 7000 /cumm	Flowcytometry
Absolute Lymphocyte Count		2249.5	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		231	20 - 500 /cumm	Calculated





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Parameter	Specimen	Results	Biological Reference	Method
Absolute Monocyte Count		165	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
PERIPHERAL SMEAR				
Microcytosis		Microcytosis +(Few)		
Hypochromasia		Hypochromia +(Few)		
Anisocytosis		Anisocytosis +(Few)		
WBC		As Above		
Platelets		Adequate		
ESR		03	0 - 20 mm/hr	

*** End Of Report ***

Automated
Westergren's Method

Suggested Clinical Correlation • If necessary, Please
Discuss

Verified By : 11150731

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Dr. VAIDEHEE NAIK, MBBS,MD
CONSULTANT PATHOLOGIST





CLINICAL DIAGNOSTIC LABORATORY

DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. PALLAVI JANBADE	Age / Gender : 36 Y(s)/Female
Bill No/ UMR No : BIL2223018544/UMR2223135891	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Feb-23 10:34 am	Report Date : 25-Feb-23 12:12 pm

123

Parameter	Specimen	Results	Biological Reference	Method
Fasting Plasma Glucose	Plasma	87	< 100 mg/dl	GOD/POD,Colorimetric

__mg/dl

Interpretation:

Clinical Decision Value as per ADA Guidelines 2021

- Diabetes Mellites If,
- Fasting \geq 126 mg/dl
- Random/2Hrs.OGTT \geq 200 mg/dl
- Impaired Fasting = 100-125 mg/dl
- Impaired Glucose Tolerance = 140-199 mg/dl

GLYCOSYLATED HAEMOGLOBIN (HbA1c)

HbA1c	5.1	Non-Diabetic : \leq 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : \geq 6.5 %	HPLC
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RFT

Blood Urea	15	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine	0.6	0.52 - 1.04 mg/dl	Enzymatic (creatinine amidohydrolase)
GFR	119.2		Calculation by CKD-EPI 2021
Sodium	141	136 - 145 mmol/L	Direct ion selective electrode
Potassium	4.48	3.5 - 5.1 mmol/L	Direct ion selective electrode

LIVER FUNCTION TEST(LFT)

Total Bilirubin	1.00	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin	0.20	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin	0.80	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatase	55	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT	24	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST	22	13 - 35 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein	6.61	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum	4.11	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin	2.51	2.0 - 4.0 gm/dl	Calculated
A/G Ratio	1.6		

URINE SUGAR

Urine Glucose

THYROID PROFILE

Negative



CLINICAL DIAGNOSTIC LABORATORY
DEPARTMENT OF BIOCHEMISTRY

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Table with 5 columns: Parameter, Specimen, Results, Biological Reference, Method. Rows include T3, Free T4, and TSH.

3
mg/dl

SPANV Medisearch Lifesciences Private Limited

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss
Verified By : : 11100026
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Handwritten signature of Dr. Vaidehee Naik

Dr. VAIDEHEE NAIK, MBBS,MD
CONSULTANT PATHOLOGIST





MC-4807



DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. PALLAVI JANBADE Age / Gender : 36 Y(s)/Female
 Ill No/ UMR No : BIL2223018544/UMR2223135891 Referred By : Dr. Vimmi Goel MBBS,MD
 Received Dt : 25-Feb-23 10:35 am Report Date : 25-Feb-23 12:12 pm

13
—
—
mg/dl

LIPID PROFILE

Parameter	Specimen	Results	Method
Total Cholesterol	Serum	134 < 200 mg/dl	Enzymatic(CHE/CHO/POD)
Tnglycendes		73 < 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		37 > 50 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		81.09 < 100 mg/dl	Enzymatic
VLDL Cholesterol		15 < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		4 3 - 5	Calculation

Initiate therapeutic	Consider Drug therapy	LDC-C
CHD OR CHD risk equivalent	>100 >130, optional at 100-129	<100
Multiple major risk factors conferring 10 yrs CHD risk >20%	>130 10 yrs risk 10-20 % >130	<130
Two or more additional major risk factors, 10 yrs CHD risk <20%	>160 10 yrs risk <10% >160	<160
No additional major risk or one additional major risk factor	>190, optional at 160-189	<160

*** End Of Report ***

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MC-4807



KIMS-KINGSWAY
HOSPITALS

DEPARTMENT OF PATHOLOGY

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Bill No/ UMR No : BIL2223018544/UMR2223135891	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Feb-23 12:36 pm	Report Date : 25-Feb-23 01:34 pm

URINE MICROSCOPY

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<u>PHYSICAL EXAMINATION</u>			
Volume	Urine	20 ml	
Colour.		Pale yellow	
Appearance		Clear	
<u>CHEMICAL EXAMINATION</u>			
Reaction (pH)		7.0	4.6 - 8.0
Specific gravity		1.005	1.005 - 1.025
Urine Protein		Negative	Indicators ion concentration
Sugar		Negative	protein error of pH indicator
Bilirubin		Negative	GOD/POD
Ketone Bodies		Negative	Diazonium
Nitrate		Negative	Legal's est Principle
Urobilinogen		Normal	Ehrlich's Reaction
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells		0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	Manual
Crystals		Absent	Manual
Others		.	Manual

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. VAIDEHEE NAIK, MBBS,MD
CONSULTANT PATHOLOGIST





MC-4807



DEPARTMENT OF IMMUNO HAEMATOLOGY

Patient Name : Mrs. PALLAVI JANBADE	Age / Gender : 36 Y(s)/Female
Bill No/ UMR No : BIL2223018544/UMR2223135891	Referred By : Dr. Vimmi Goel MBBS,MD
Received Dt : 25-Feb-23 10:35 am	Report Date : 25-Feb-23 01:08 pm

BLOOD GROUPING AND RH

Parameter
BLOOD GROUP.

Specimen Results

EDTA Whole " B "
Blood &
Plasma/
Serum

Gel Card Method

" Positive "(+Ve)

*** End Of Report ***

Rh (D) Typing.

Suggested Clinical Correlation * If necessary, Please discuss

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Dr. VAIDEHEE NAIK, MBBS,MD
CONSULTANT PATHOLOGIST

NAME OF PATIENT:	MRS. PALLAVI JANBADE	AGE & SEX:	36 Y / FEMALE
REG NO	UMR2223135891	BILL NO	2223018544
REF BY:	DR. VIMMI GOEL	DATE:	25/02/2023

USG ABDOMEN AND PELVIS

LIVER is normal in size and shows normal echotexture.
No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated.
PORTAL VEIN and CBD are normal in course and caliber.
GALL BLADDER is physiologically distended. No stones or sludge seen within Sit.
Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size, shape and echotexture. No focal lesion seen.

Both KIDNEYS are normal in size, shape and echotexture.
No evidence of calculus or hydronephrosis seen.
URETERS are not dilated.

URINARY BLADDER is well distended. No calculus or mass lesion seen.

Uterus is anteverted and normal. An intramural hypoechoic lesion abutting the endometrium is seen in right lateral wall Uterus measuring 2.9 x 2.5 x 2.4 cm. – suggestive of fibroid
Endometrial echo-complex appear normal. ET –18mm.

Small gestation sac like structure is seen in the fundic region measuring 6.4 mm corresponding to 5 weeks 3 days. No obvious evidence of yolk sac / fetal pole.
Both ovaries are normal. No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

IMPRESSION: USG reveals,
Gravid uterus as described – further evaluation with transvaginal scan and follow up is suggested.
Clinical correlation is suggested.

DR. ASAWARI LAUTRE
MBBS,MD(Radio-Diag), (2016083313)
CONSULTANT RADIOLOGIST

Declaration of doctor/person conducting ultrasonography/image scanning.

I Dr. ASAWARI LAUTRE declare that while undergoing ultrasonography/image scanning on patient neither detected nor disclose the sex of fetus to anybody in any manner.
All measurements including estimated fetal weight are subject to statistical variations.
Not all anomalies can be detected on sonography. Detection of anomalies is dependent on fetal position, gestational age, Maternal abdominal obesity and other technical parameters. Follow up scanning and second opinion are always advisable. For detection of cardiac anomaly foetal echography is necessary.
Chromosomal anomalies need chorionic villus sampling for diagnosis.

बेटी बचाओ

SAVE GIRL CHILD

Dr. Asawari Lautre
Parwana Bhawan, Kingway, Nagpur - 440 001, Maharashtra, India
Phone: +91 0712 6789100
CIN: U71999MH2019PTC000310



2D ECHOCARDIOGRAPHY REPORT

Patient Name : Mrs. Pallavi Janbade
 Age : 36 years / Female
 UHID : UMR2223135891
 Date : 25/02/2023
 Done by : Dr. Vimmi Goel
 ECG : NSR, Minor ST-T changes

Impression: Normal 2D Echocardiography Study

Normal chambers dimensions
No RWMA of LV at rest
Good LV systolic function, LVEF 70%
Normal LV diastolic function
E/A is 1.8
E/E' is 6.5 (Normal filling pressure)
Valves are normal
No pulmonary hypertension
IVC is normal in size and collapsing well with respiration
No clots or pericardial effusion

Comments:

Sector echocardiography was performed in various conventional views (PLAX, SSAX, AP4 CH and 5 CH views). LV size normal. There is no RWMA of LV seen at rest. Good LV systolic function. LVEF 70%. Normal LV diastolic function. E Velocity is 92 cm/s, A Velocity is 49 cm/s. E/A is 1.8. Valves are normal. No Pulmonary Hypertension. IVC normal in size and collapsing well with respiration. Pericardium is normal. No clots or pericardial effusion seen.

E' at medial mitral annulus is 11.5 cm/sec & at lateral mitral annulus is 17.4 cm/sec. E/E' is 6.5 (Average).

M Mode echocardiography and dimension:

	Normal range (mm)		Observed (mm)
	(adults)	(children)	
Left atrium	19-40	7-37	32
Aortic root	20-37	7-28	26
LVIDd	35-55	8-47	46
LVIDs	23-39	6-28	27
IVS (d)	6-11	4-8	09
LVPW (d)	6-11	4-8	09
LVEF %	~ 60%	~60%	70%
Fractional Shortening			34%


Dr. Vimmi Goel
MD, Sr. Consultant
Non-invasive Cardiology

P.T.O



800 266 8346

Rate 89 Sinus rhythm. normal P axis, V-rate 50-99
Borderline T abnormalities, anterior leads. T flat or neg, V2-V4

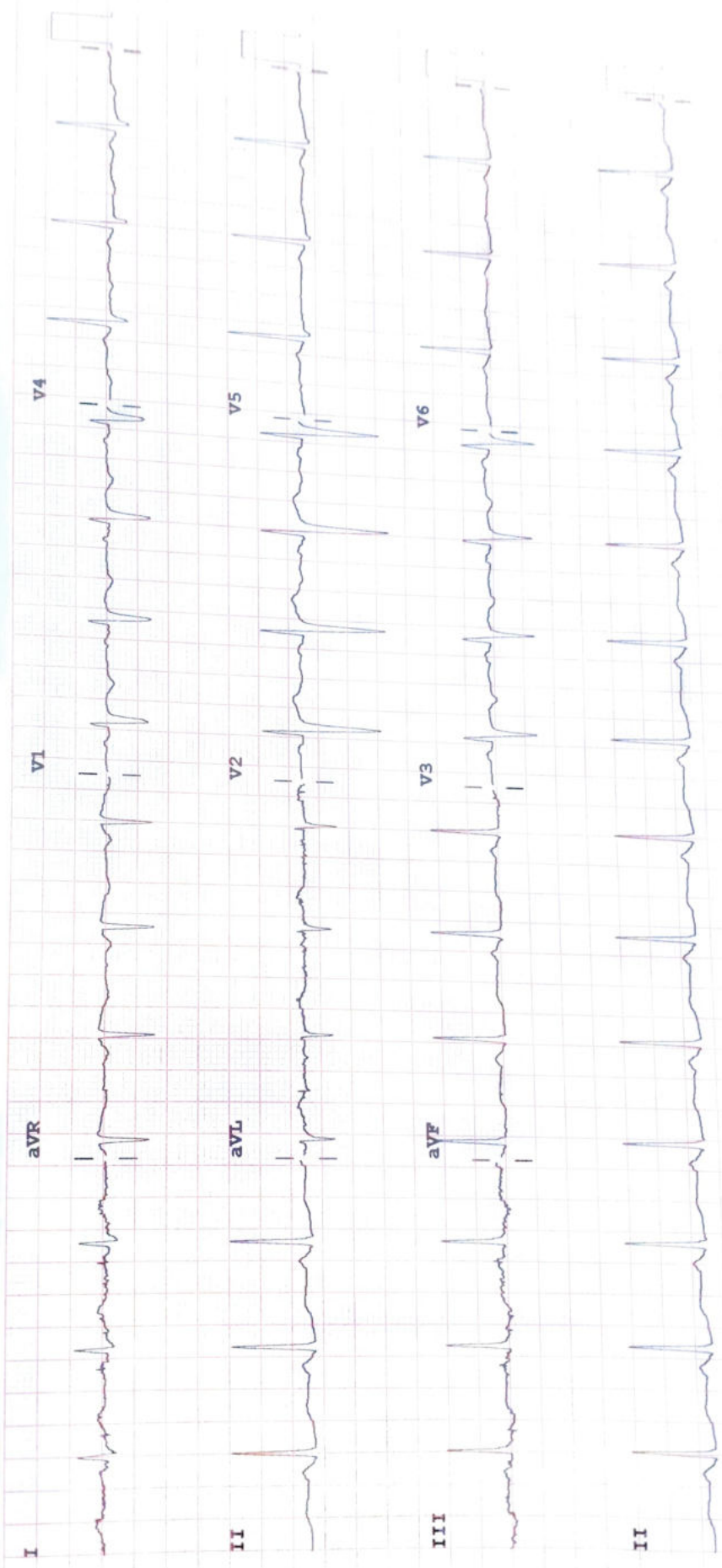
PR 138
QRSD 101
QT 376
QTc 458

--AXIS--
P 52
QRS 75
T 13

-- BORDERLINE ECG --

12 Lead; Standard Placement

Unconfirmed Diagnosis



F 50- 0.50-150 Hz W 100S CL P?

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

Device:

REORDER # 111-1111

PHIL

mg/dl

123

