

भारत सरकार
Government of India

प्रियांका सुनील पवार
Priyanka Sunil Pawar
जन्म तारीख / DOB: 15/06/1992
महिला / FEMALE

2223 0866 0506

मेरा आधार, मेरी पहचान

Issue Date: 16/06/2013

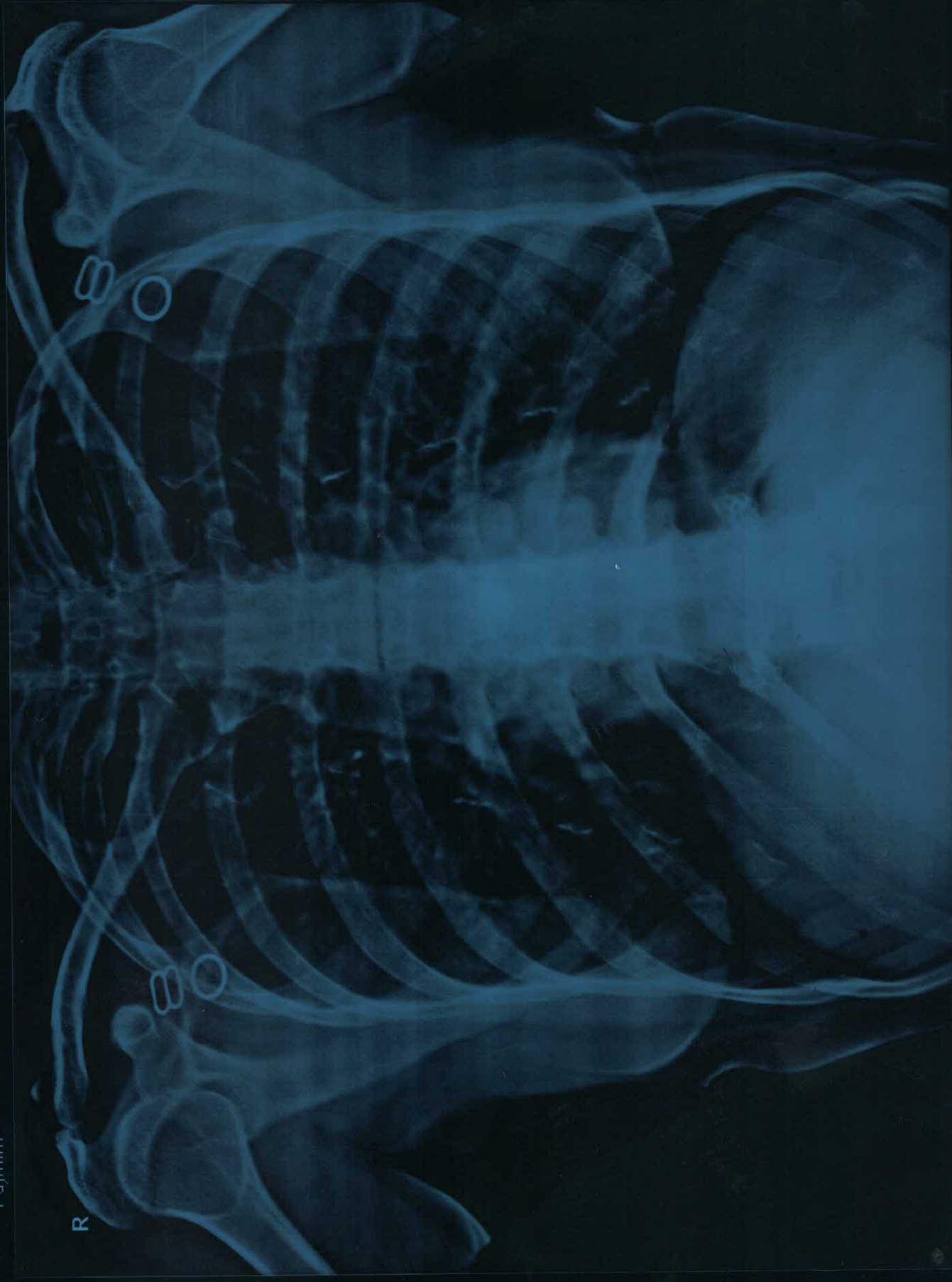


Priyanka

942002865

Fujifilm

R



MRS PRIYANKA PAWAR 30/Y CHEST PA 12-Mar-22

SADGURU HOSPITAL NASHIK

- MULTI SPECIALITY
- CRITICAL CARE
- TRAUMA CARE CENTER

Patient Name : MRS PRIYANKA PAWAR	Patient ID : 0
Age : 30	Sex : Female
Referring Physician : Dr. SADGURU HOSPITAL	Date : March 12, 2022

X-RAY CHEST PA

MRS PRIYANKA PAWAR's plain P.A. Radiograph of chest shows :-
 Both lung fields show normal and equal radiolucency.
 There is no pulmonary parenchymal abnormal density.
 The broncho vascular markings show normal size and distribution.
 The hilar shadows are normal in size, position and density.
 Both Cardiophrenic and Costophrenic angles are clear.
 The Cardiac silhouette is within normal limits.
 Aortic shadow is normal.
 Rest of the visualized mediastinum shadows are normal.
 Both domes of diaphragms are normal.
 The visualised bony thorax is normal.

CONCLUSION : NO SIGNIFICANT ABNORMALITY NOTED IN THE CHEST P.A. VIEW RADIOGRAPH.



DR. Vishal Shah
 MBBS, DMRE Reg -2012051114



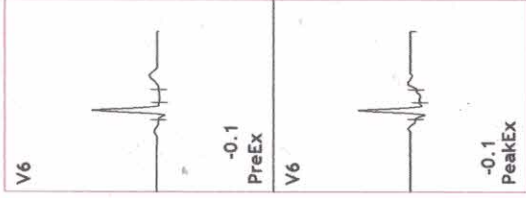
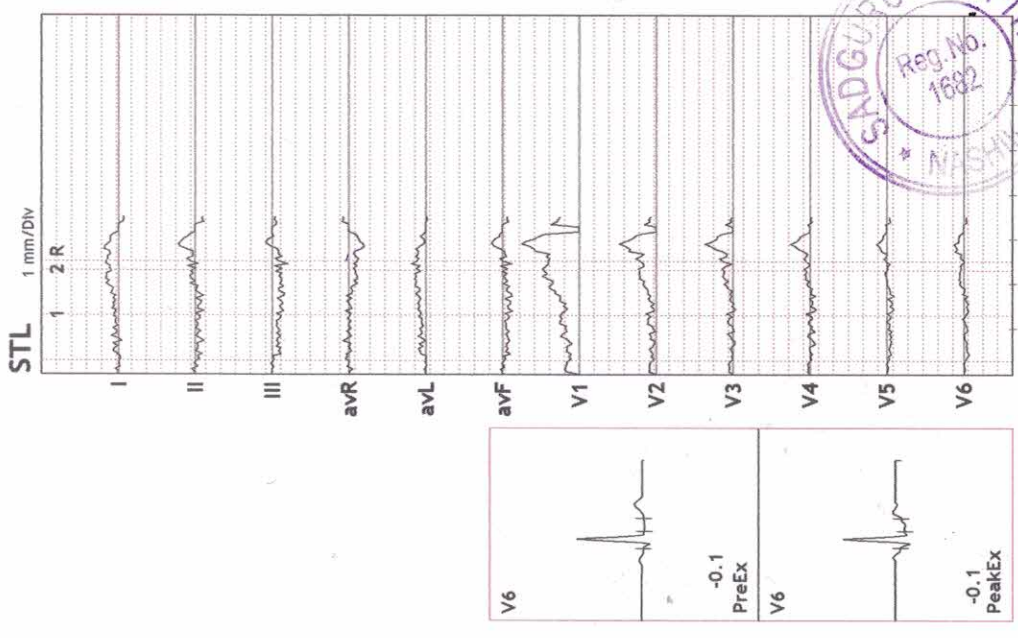
" Under one roof" Quality Healthcare Centre



NASHIK
 45952/MRS PRIYANKA PAWAR 30 Yrs/Female 49 Kg/152 Cms
 Date: 12-Mar-2022 12:00:00 AM

Ref.By : BOB	Protocol : BRUICE1	Medication : NO ANX		History : NO ANX		PVC		Comments	
Subjective : N/A	Phase Time (Min:Sec)	Speed (mph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. (x100)		
Supine				1.0	102	128/84	130	-	
Standing				1.0	107	128/84	136	-	
HV				1.0	111	128/84	142	-	
EXStart				1.0	107	128/84	136	-	
Stage 1	3:00	1.5	10.0	4.2	134	134/94	179	-	
Stage 2	3:00	2.5	12.0	7.1	157	148/102	232	-	
PeakEx	0:38	3.5	14.0	7.8	175	148/102	259	-	
Recovery	1:00	1.1	0.0	1.2	130	148/102	192	-	
Recovery	2:00	1.1	0.0	1.0	117	152/112	177	-	
Recovery	3:00	1.1	0.0	1.0	109	150/110	163	-	
Recovery	3:01	1.1	0.0	1.0	112	150/110	168	-	

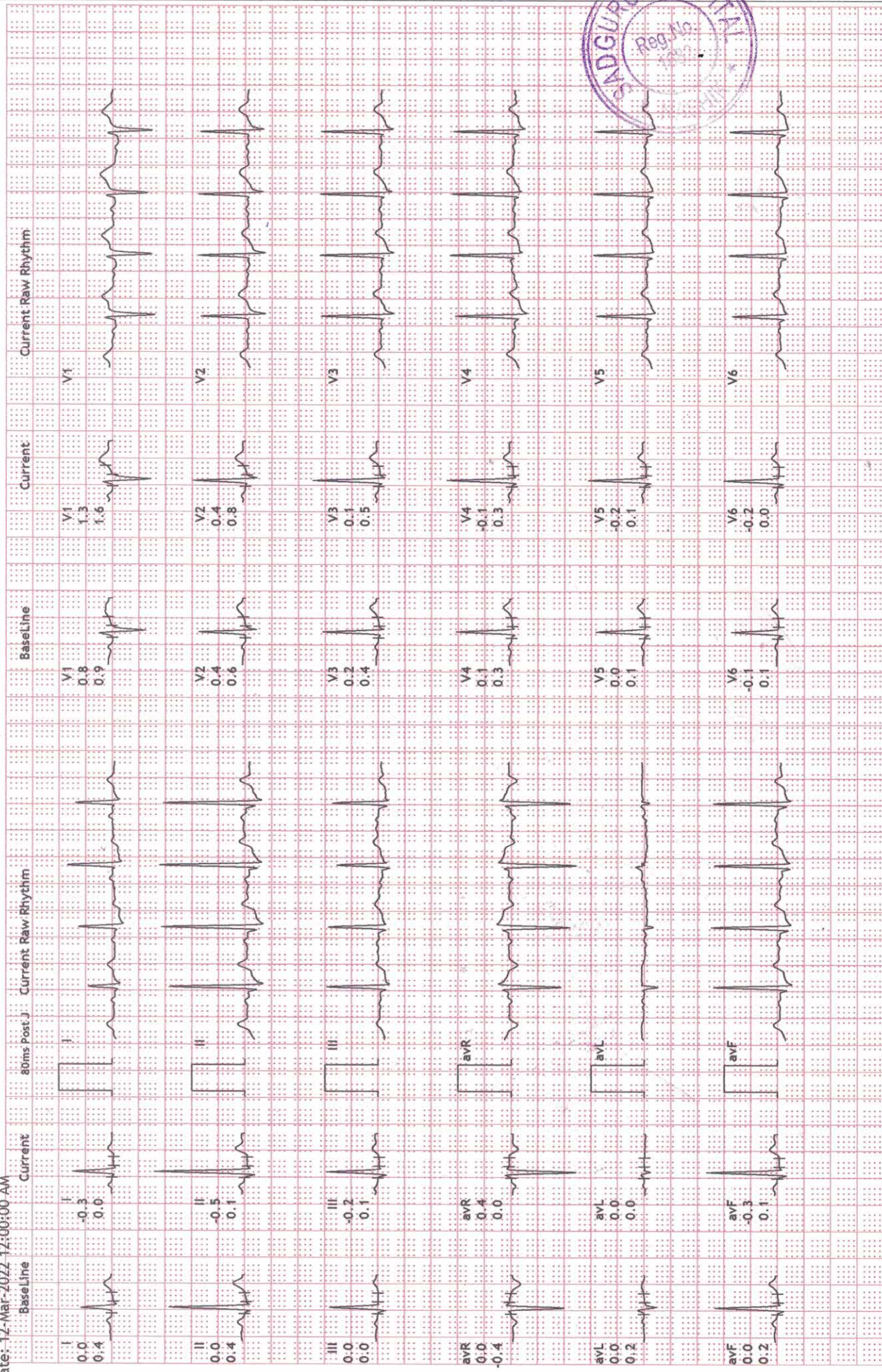
Findings :
 Exercise Time : 6:39 minutes
 Max HR attained : 175 bpm 92% of Max Predictable HR 190
 Max BP : 148/102(mmHg)
 WorkLoad attained : 7.8 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina /Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Max:mum Depression: ---



DR. KRISHNA YADAV
 MBBS, MD (General Medicine) 1995
 Reg. No. 19555
SADGURU HOSPITAL
 OLD ADGAON NAKA, NASHIK-422 003

Advice /Comments:

12 Lead + Comparison





NASHIK
45952/MRS PRIYANKA PAWAR
30 Yrs/Female
49 Kg/152 Cms

HR: 110 bpm
METS: 1.0
BP: 152/112

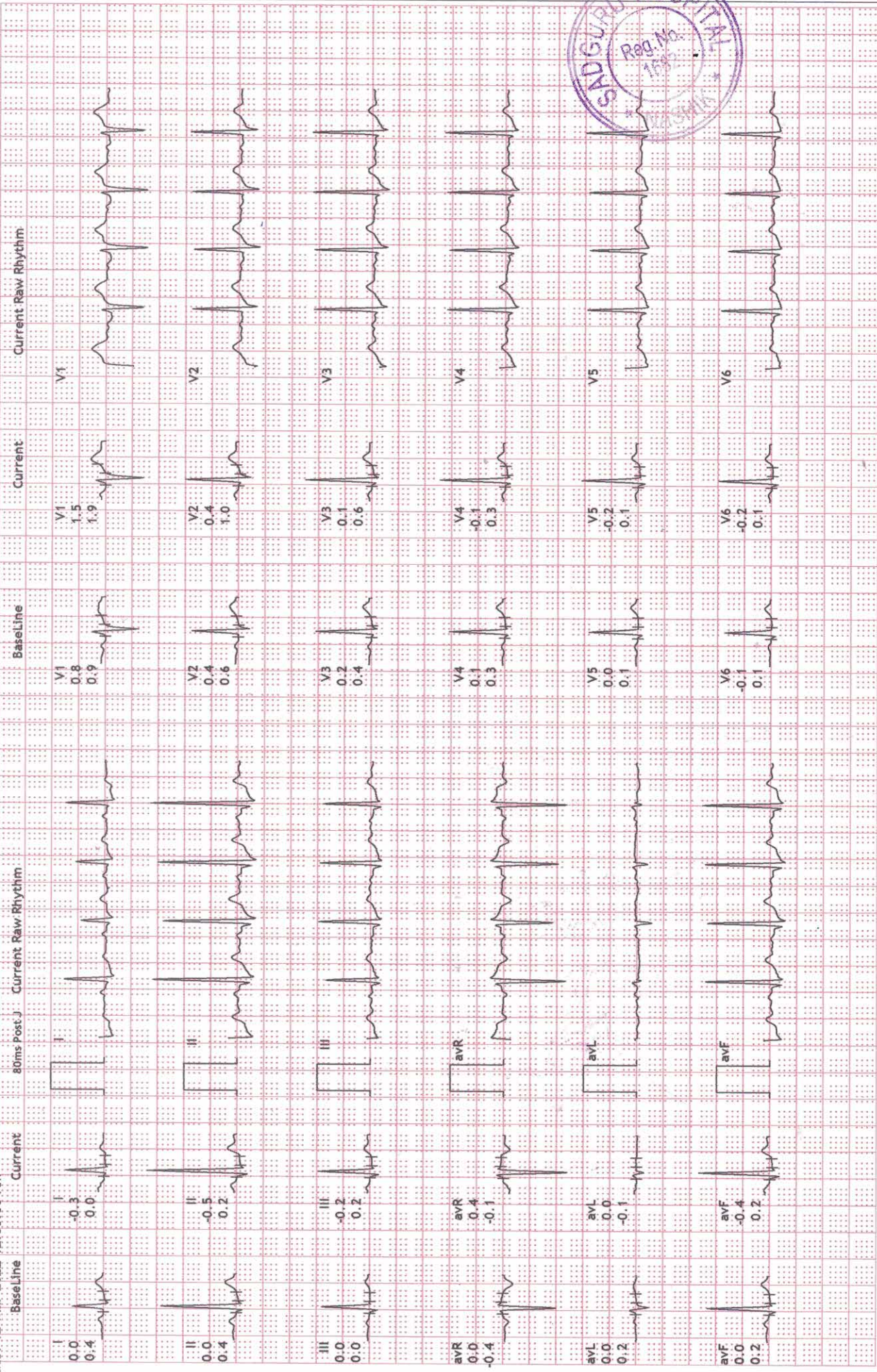
MPHR: 57% of 190
Speed: 1.1 mph
Grade: 0.0%

Raw ECG
BRUICE1
(1.0-100)Hz

Ex Time 06:38
BLC :On
Notch :On

Recovery : (02:38)
10.0 mm/mV
25 mm/Sec.

Date: 12-Mar-2022 12:00:00 AM





NASHIK
45952/MRS PRIYANKA PAWAR
30 Yrs/Female
49 Kg/152 Cms

HR: 130 bpm
METS: 1.1
BP: 148/102

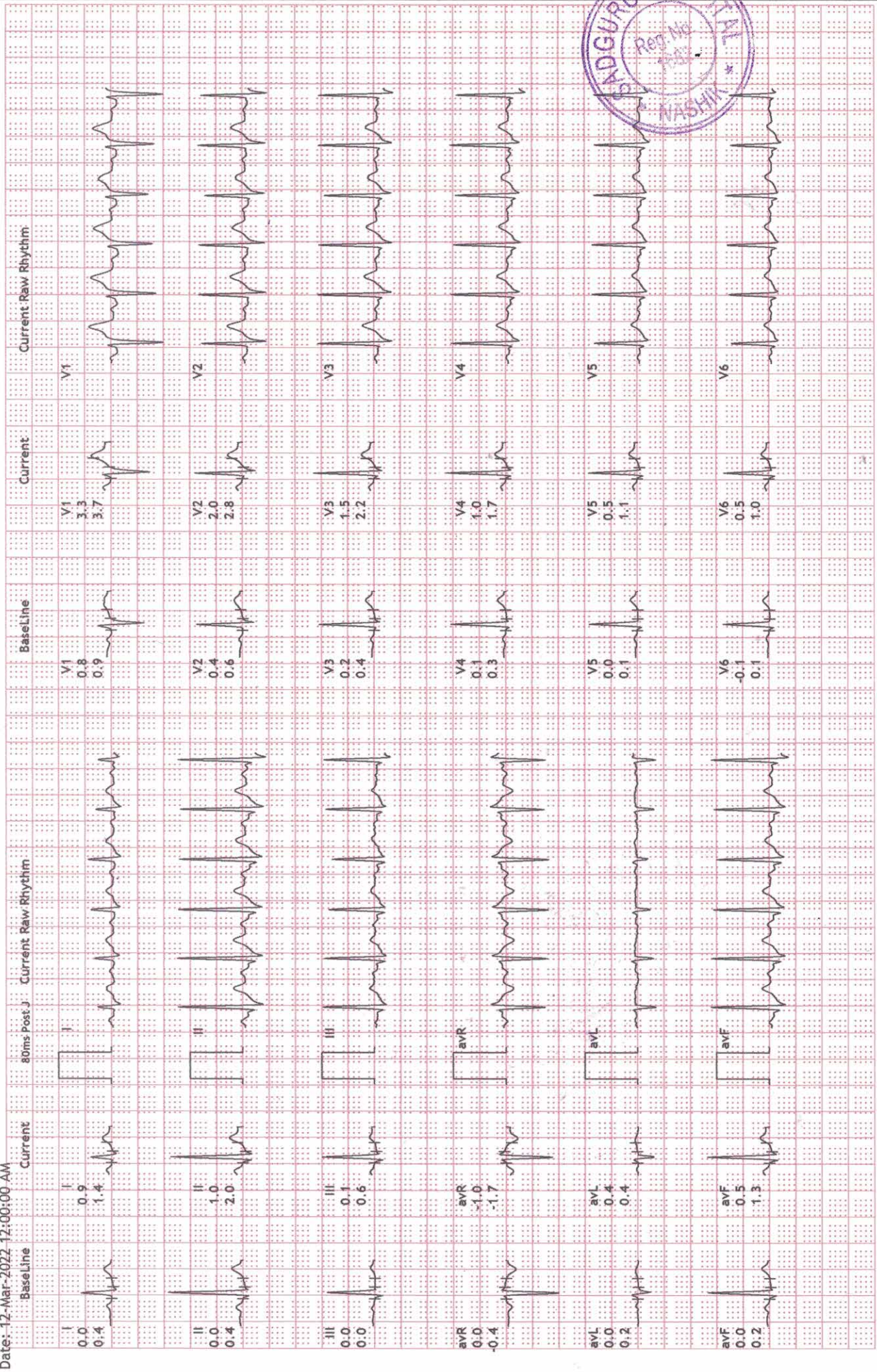
MPHR: 68% of 190
Speed: 1.1 mph
Grade: 0.0%

Raw ECG
BRUICE1
(1.0-100)HZ

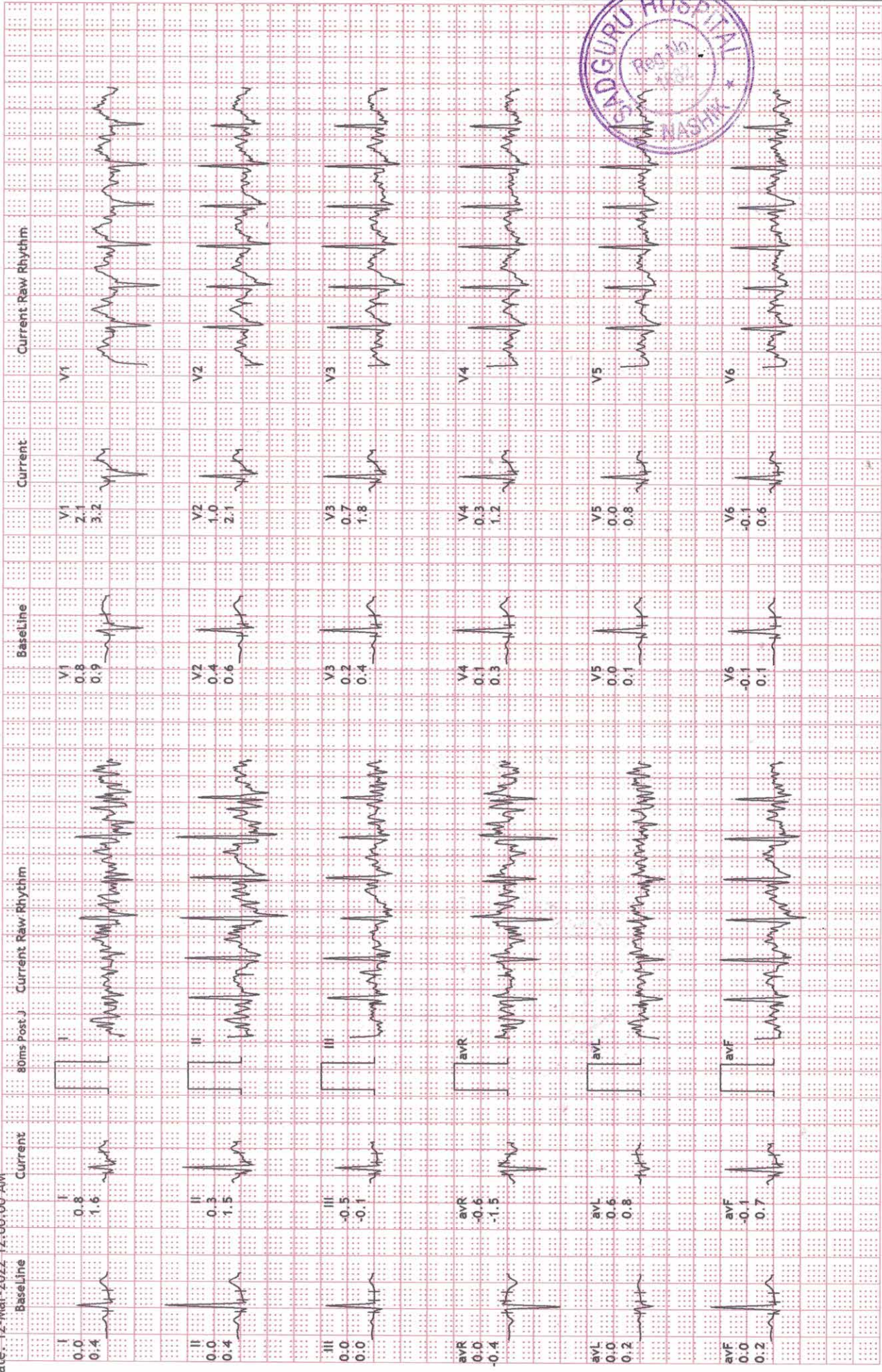
Ex Time 06:38
BLC :On
Notch :On

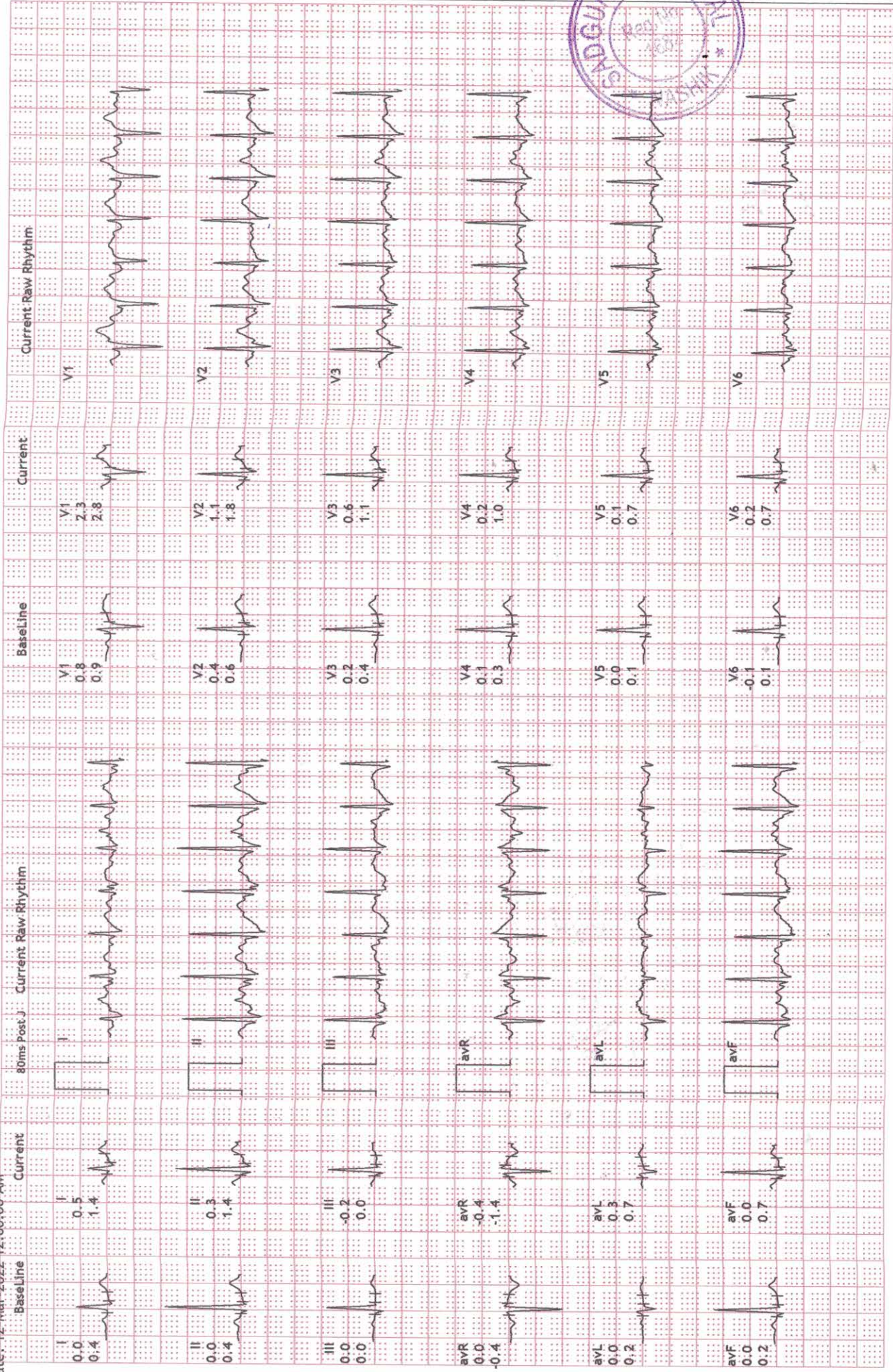
Recovery : (01:00)
10.0 mm/mV
25 mm/Sec.

Date: 12-Mar-2022 12:00:00 AM



12 Lead + Comparison







NASHIK
 45952/MRS PRIYANKA PAWAR
 30 Yrs/Female
 49 Kg/152 Cms

HR: 134 bpm
 METS: 4.2
 BP: 134/94

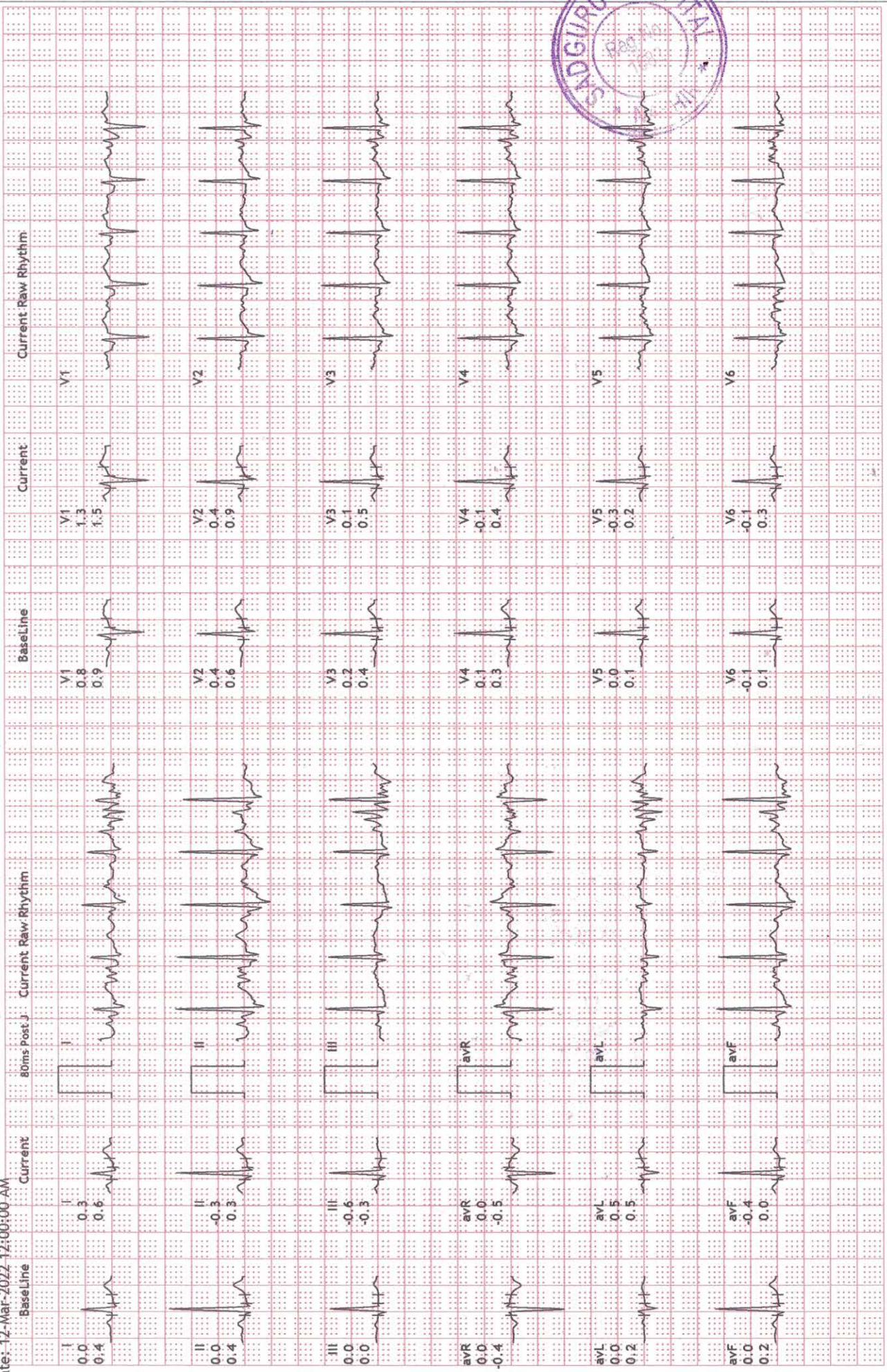
MPHR: 70% of 190
 Speed: 1.5 mph
 Grade: 10.0%

Raw ECG
 BRUICE1
 (1.0-100)Hz

Ex Time 03:00
 BLC :On
 Notch :On

Stage 1 (03:00)
 10.0 mm/mV
 25 mm/Sec.

Date: 12-Mar-2022 12:00:00 AM





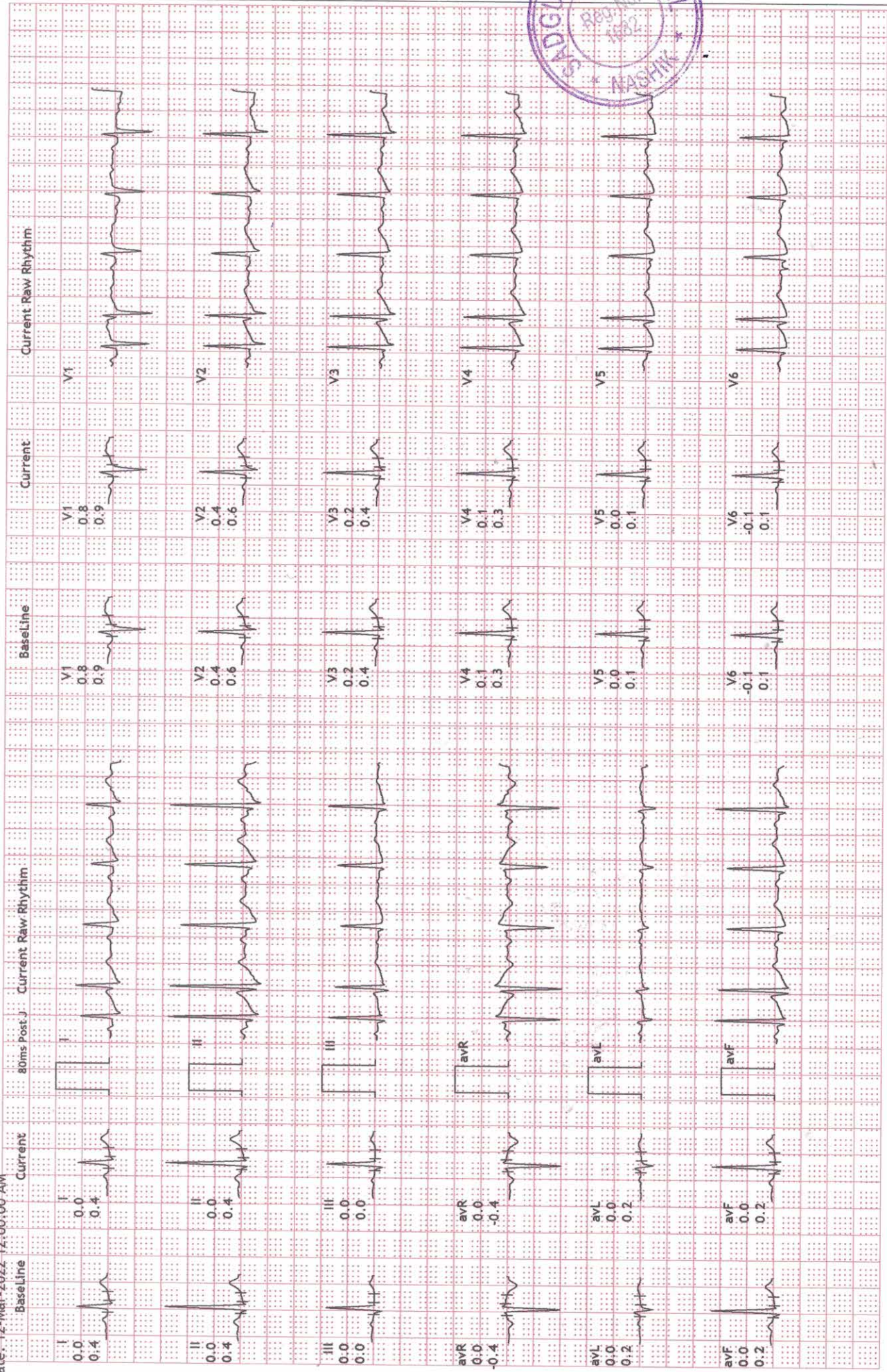
NASHIK
45952/MRS PRIYANKA PAWAR
30 Yrs/Female
49 Kg/152 Cms
Date: 12-Mar-2022 12:00:00 AM

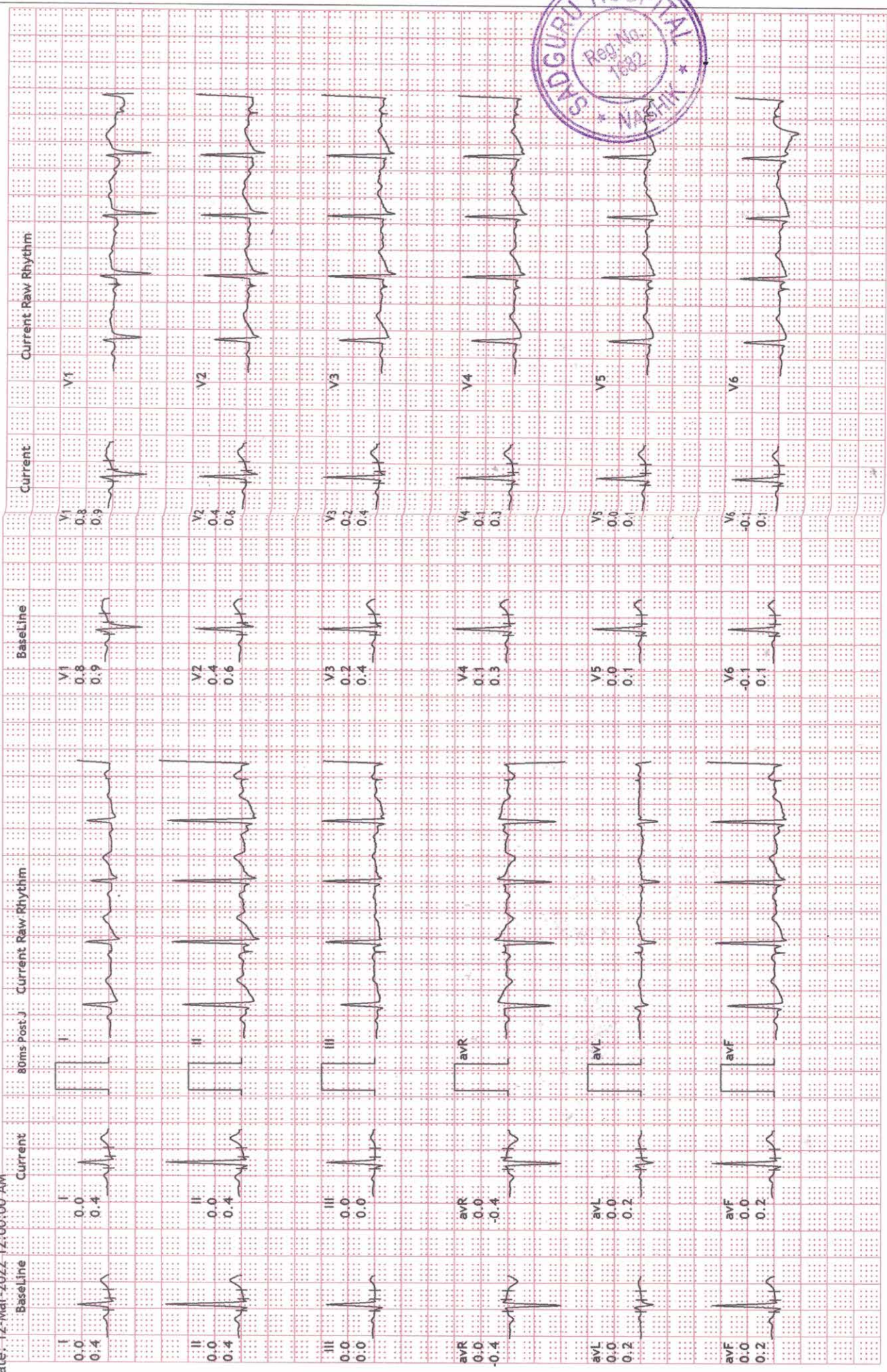
HR: 90 bpm
METS: 1.0
BP: 128/84

MPHR: 47% of 190
Speed: 0.0 mph
Grade: 0.0%

Raw ECG
BRUCE1
(1.0-100)Hz

ExStrt
10.0 mm/mV
25 mm/Sec.







NASHIK
45952/MRS PRIYANKA PAWAR
30 Yrs/Female
49 Kg/152 Cms
Date: 12-Mar-2022 12:00:00 AM

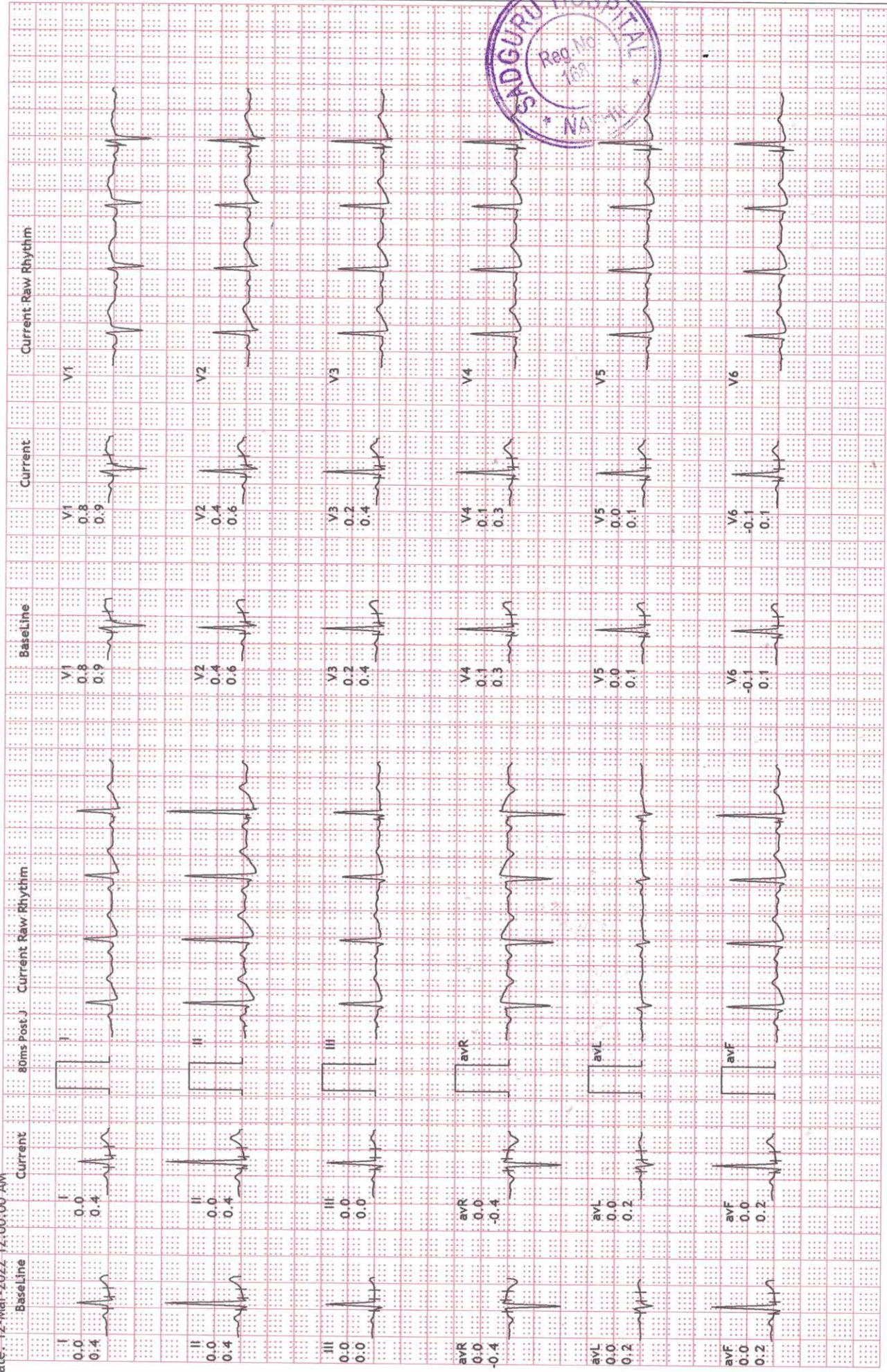
HR: 111 bpm
METS: 1.0
BP: 128/84

MPHR: 58% of 190
Speed: 0.0 mph
Grade: 0.0%

Raw ECG
BRUICE1
(1.0-100)Hz

STANDING
10.0 mm/mV
25 mm/Sec.

Ex Time 00:48
BLC :On
Notch :On



45952/MRS PRIYANKA PAWAR
30 Yrs/Female
49 Kg/152 Cms

Date: 12-Mar-2022 12:00:00 AM

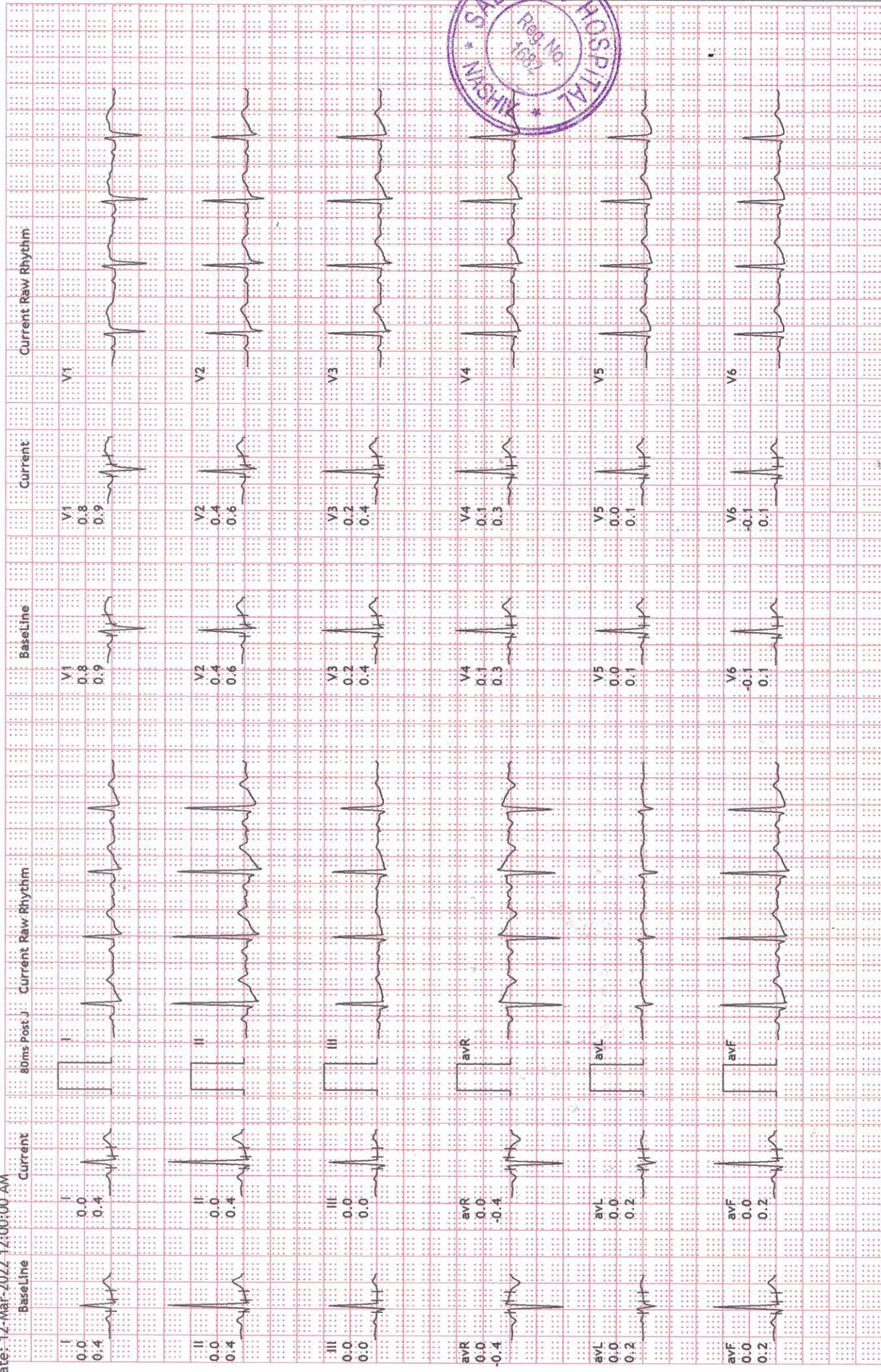
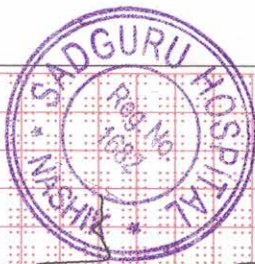
HR: 107 bpm
METS: 1.0
BP: 128/84

MPHR: 56% of 190
Speed: 0.0 mph
Grade: 0.0%

Raw ECG
BRUCE1
(1.0-100)Hz

Ex Time 00:46
BLC :On
Notch :On

SUPINE
10.0 mm/mV
25 mm/Sec.





Maple Diagnostics

Patient Name : MRS. PRIYANKA SUNIL PAWAR

Date : 12 Mar 2022

Referred By : SADGURU HOSPITAL

Age : 30 YEARS Sex : F

ULTRASONOGRAPHY ABDOMEN & PELVIS

- * LIVER : Normal in contour and parenchymal texture.
No focal parenchymal lesion seen.
CBD and Intrahepatic biliary channels are normal.
- * G B : Partially distended. No gall stones seen.
- * PANCREAS : Normal in size and parenchymal echo pattern with normal peripancreatic planes.
- * SPLEEN : Normal in size, contour with homogenous echo pattern.
- * AORTA & I V C: Normal. No evidence of paraaorta/ paracaval lymphadenopathy
- * KIDNEYS : Normal in size, contour and echotexture.
No calculus or hydronephrosis is seen on both sides.
Renal sinus and cortical echoes are normal.
Peri renal planes are normal.
Cortico-Medullary differentiation is maintained.
RK -9.5 x 3.6 cms LK -10.2 x 3.7 cms.
- * URINARY BLADDER : Partially distended. Walls are normal.
- * UTERUS: Normal in size, shape and myometrial echotexture.
- * OVARIES: Both ovaries are normal.

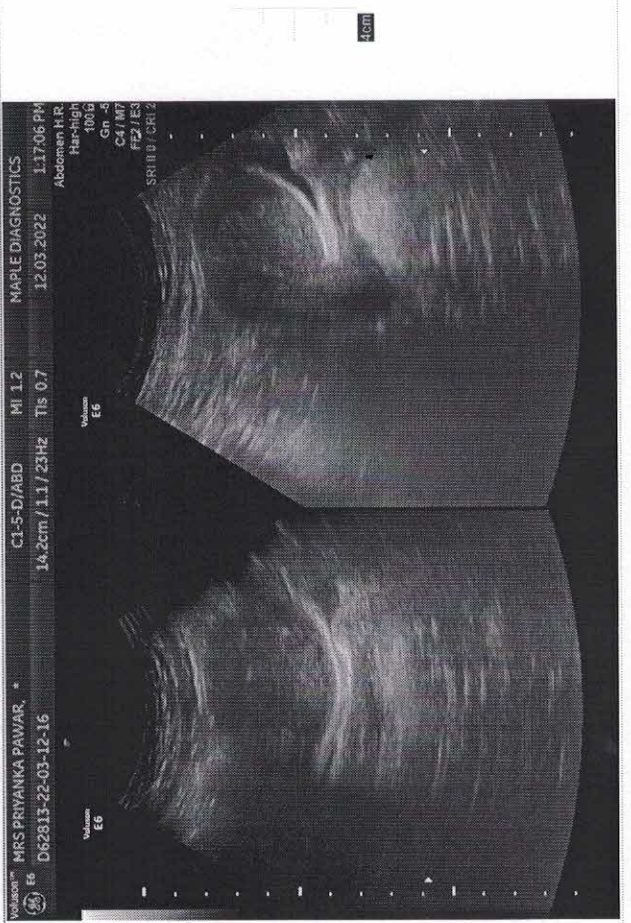
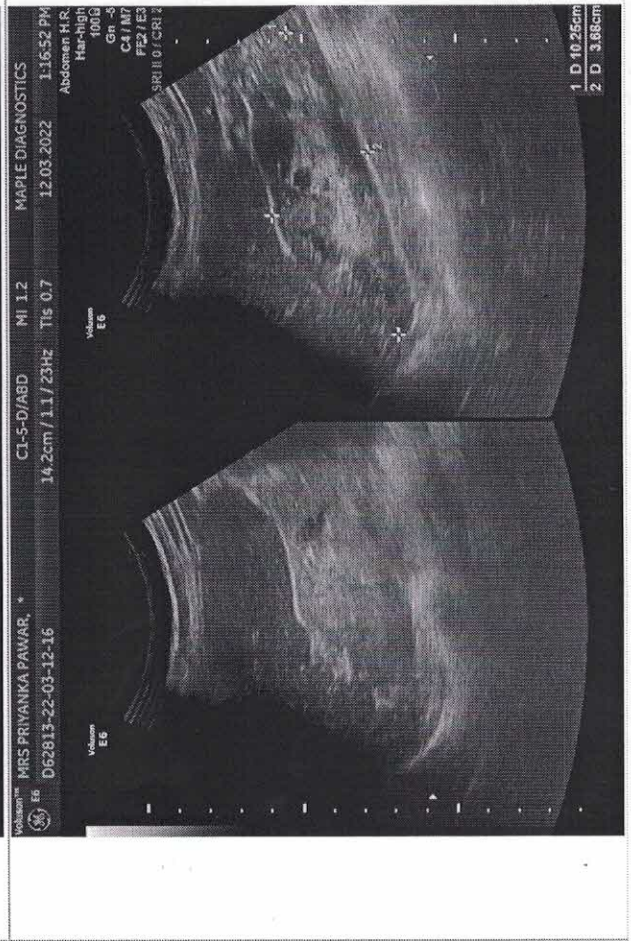
IMPRESSION :

→ No significant abnormality seen



DR. HARDIK PATEL
DNB Radiodiagnosis

MRS PRIYANKA PAWAR, : US From 3/12/2022



SADGURU HOSPITAL & DAIGNOSTIC CENTRE

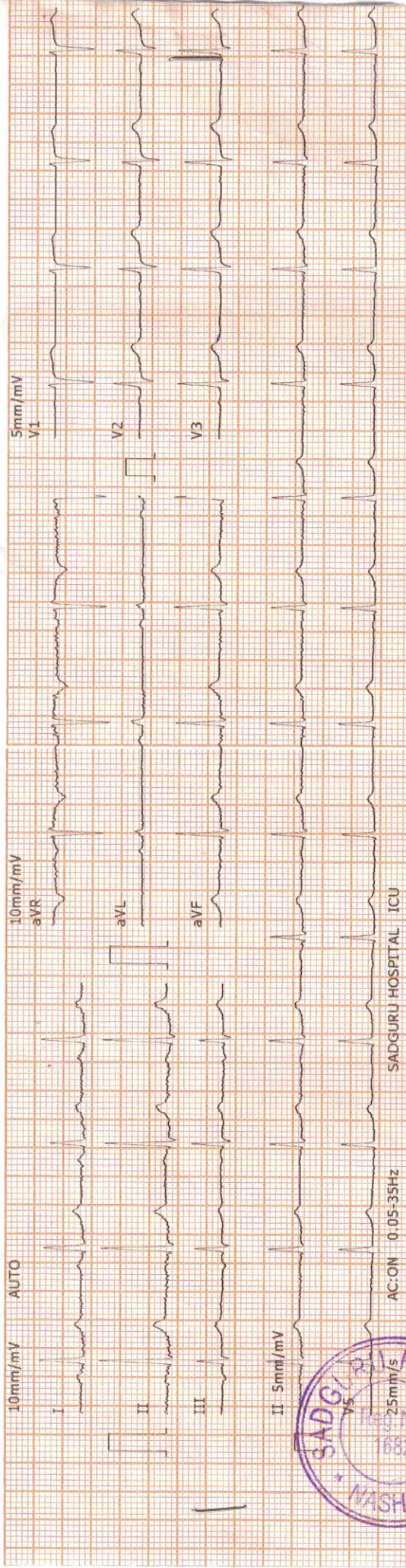
PT NAME:-

SEX:-

AGE:-

INS:-

DATE:-



12/5/23 10:45 Am

2022-3-12 13:26:45 ID Card: 801 Sinus Rhythm
 Name: Mrs Priyanka Pawar Gender: Female
 Height(cm): / BP(mmHg): /
 Weight(Kg): / HR: 79 bpm
 P-R: 160 ms
 Q-R-S: 1.2 mV
 QT/QTc: 360/410 ms
 P/QRS/T AXES: 45/30/135 deg
 RV5/SV1: 1.12/1.33 mV
 RV5+SV1: 2.35 mV

<< Conclusion >>
 801 Sinus Rhythm
 ** NORMAL ECG **



DR. KRISHNA YADAV
 MBBS, MD (Medicine) PGDGM, FD, FCCM
 Reg. No. 2007/05/1595
SADGURU HOSPITAL
 OLD ADGAON NAKA, PANCHAVATI,
 NASHIK-422 003


*The result must be confirmed by doctor!
 Report Confirmed by: DR KRISHNA YADAV

Pawar



IMPRESSION :-

DR STAMP :-

Patient ID	: 027	UHID No.	: MEDIWHEEL
Patient Name	: MRS. PRIYANKA S PAWAR	Regn/Sample Date	: 12-Mar-2022 04.42 PM
Age / Sex	: 29 Years / Female	Report Date	: 12-Mar-2022 04.51 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 2 7 *

COMPLETE BLOOD COUNT

Investigation	Result	Unit	Bio. Ref. Range
Haemoglobin (HB)	10.2	gm/dl	12-16
RBC	4.79	10 ⁶ /uL	4.2-5.4
PCV	33.9	%	37-47
MCV	70.8	fl	70-100
1CH	21.3	pg	27-31
MCHC	30.1	g/dl	32-36
RDW-CV	16.3	%	11.5-14.5
Platelet count	319000	/cumm	150000-450000
Total Leucocytes Count	6800	/cumm	4000-11000
DIFFERENTIAL LEUCOCYTES COUNT			
Neutrophils	60	%	44-76
Lymphocytes	33	%	20-40
Monocytes	02	%	2-10
Eosinophils	05	%	1-6
Basophils	00	%	0-2

END OF REPORT




D. Deshpande
sadguru_Admin

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Page 1 of 7

Dr. Pravin Bagul

Dr. Pravin Bagul
(MD Path
Consulting Pathologist)

Patient ID	: 027	UHID No.	: MEDIWHEEL
Patient Name	: MRS. PRIYANKA S PAWAR	Regn/Sample Date	: 12-Mar-2022 04.42 PM
Age / Sex	: 29 Years / Female	Report Date	: 12-Mar-2022 04.51 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 2 7 *

HAEMATOLOGY.

Investigation

Result

BLOOD GROUP ABO & RH TYPING

(EDTA Whole Blood)

Blood group (ABO Typing)

A

RhD Factor (Rh typing)

POSITIVE

Method

Manual Slide Hemagglutination

Note

Kindly recheck Blood Group before blood transfusion

ESR (Wintrobe)

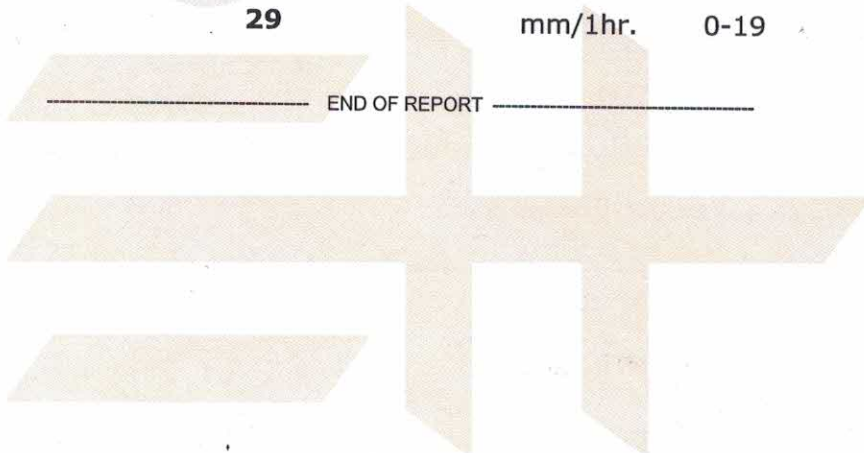
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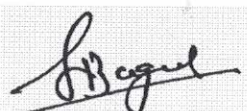
mm/1hr.

0-19

(EDTA Whole Blood)

----- END OF REPORT -----






Dr. Pravin Bagul
(MD Path
Consulting Pathologist)


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Page 2 of 7


Patient ID	: 027	UHID No.	: MEDIWHEEL
Patient Name	: MRS. PRIYANKA S PAWAR	Regn/Sample Date	: 12-Mar-2022 04.42 PM
Age / Sex	: 29 Years / Female	Report Date	: 12-Mar-2022 04.51 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	

LIVER FUNCTION TEST


Investigation	Result	Unit	Bio. Ref. Range
LIVER FUNCTION TEST			
SGOT (AST) (Serum,IFCC)	16.5	U/L	Upto 40
SGPT (ALT) (Serum,IFCC)	20.3	U/L	Upto 40
Bilirubin-Total (Serum,Diazo)	0.90	mg/dL	0.1-1.2
Bilirubin-Direct (Serum,Diazo)	0.50	mg/dL	0.0-0.5
Bilirubin- Indirect	0.40	mg/dL	0.1-1.0
Alkaline Phosphatase (Serum, ALP-AMP)	122.6	U/L	54-306
Total Protein (Serum, Modified Biuret)	6.80	g/dl	6.0-8.5
Albumin (Serum,Bromocresol green)	4.20	g/dl	3.0-5.4
Globulin	2.60	g/dl	1.8-3.6
A/G Ratio (Calculated)	1.62		1.1-2.2

END OF REPORT





Dr. Pravin Bagul
(MD Path
Consulting Pathologist)


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Page 3 of 7

Patient ID : 027	UHID No. : MEDIWHEEL
Patient Name : MRS. PRIYANKA S PAWAR	Regn/Sample Date : 12-Mar-2022 04.42 PM
Age / Sex : 29 Years / Female	Report Date : 12-Mar-2022 04.51 PM
Referred By : SADGURU HOSPITAL	Sample Type : SERUM
	Barcode 

BIOCHEMISTRY

Investigation	Result	Unit	Bio. Ref. Range
Fasting Blood Glucose (Plasma-F,GOD-POD)	70.2	mg/dL	60-110
Parallel Urine Glucose	NIL		
Postmeal Blood Glucose (Plasma-PM,GOD-POD)	96.8	mg/dL	Upto 140
Parallel Urine Glucose	SNR		
Gamma GT (GGTP) (Serum, Enzymatic)	10.3	U/L	9-36
Sr. Creatinine (Serum,Picrate Alcalin)	0.80	mg/dL	0.5-1.2
BLOOD UREA NITROGEN (BUN)			
Sr. Blood Urea (Serum,Urease)	15.2	mg/dL	10-50
BUN-Blood Urea Nitrogen	7	mg/dL	8-23
Remark : In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.			
Sr. Blood Urea (Serum,Urease)	15.2	mg/dL	10-50
Remark : In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.			
Sr. Uric Acid (Serum, Uricase Peroxidase)	4.6	mg/dL	2.5-6.0

END OF REPORT


Dalshree
sadguru_Admin

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Page 4 of 7





Dr. Pravin Bagul
(MD Path
Consulting Pathologist)

Patient ID	: 027	UHID No.	: MEDIWHEEL
Patient Name	: MRS. PRIYANKA S PAWAR	Regn/Sample Date	: 12-Mar-2022 04.42 PM
Age / Sex	: 29 Years / Female	Report Date	: 12-Mar-2022 04.51 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	

LIPID PROFILE


Investigation	Result	Unit	Bio. Ref. Range
Nature Of Sample (Serum, Enzymatic)	Fasting		
Serum Cholesterol -Total	152.6	mg/dL	Desirable - Upto 200 Borderline High - 200-239 High - Above 240
Serum Triglycerides	120.3	mg/dL	Normal: Below 150 Borderline High :150-199 High : 200-499 Very High : >= 500
HDL Cholesterol	40.0	mg/dL	Major risk factor for heart disease: < 40 Negative risk factor for heart disease: >=60
LDL Cholesterol	89	mg/dL	Optimal: < 100 Near Optimal/Above Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >= 190
VLDL Cholesterol	24	mg/dL	Upto 40
CHOL/HDL Ratio	3.81	Ratio	0-4.5
LDL / HDL Ratio	2.2	Ratio	1.5-3.5

Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

VLDL, CHOL/HDL Ratio, LDL/HDL Ratio, LDL Cholesterol, serum, are calculated parameter

END OF REPORT






Dr. Pravin Bagul
(MD Path
Consulting Pathologist)


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Page 5 of 7

Patient ID	: 027	UHID No.	: MEDIWHEEL
Patient Name	: MRS. PRIYANKA S PAWAR	Regn/Sample Date	: 12-Mar-2022 04.42 PM
Age / Sex	: 29 Years / Female	Report Date	: 12-Mar-2022 04.51 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 2 7 *

BIOCHEMISTRY.

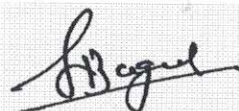
Investigation	Result	Unit	Bio. Ref. Range
HbA1C	5.0	%	Non-diabetic: <= 5.8 Pre-diabetic: 5.9-6.4 Diabetic: = >6.4
Mean Blood Glucose level	97	mg/dL	
Method	Nephelometry		

INTERPRETATION :


- 1] HbA1c is used for monitoring diabetic control . If reflects the estimated average glucose (eAG) .
- 2] HbA1c has been endorsed by clinical groups & ADA(American Diabetes Association) guidelines 2012 , for diagnosis of diabetes using a cut- off point of 6.5%. ADA defined biological reference range for HbA1c is 4% - 6%. Patient with HbA1c value between 6.0% to 6.5% are considered at risk for developing diabetes in the future .
- 3] Trends in HbA1c are a better indicator of diabetes control than a solitary test .
- 4] In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 % , Fair to Good Control - 7 to 8 % , Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .


----- END OF REPORT -----





Dr. Pravin Bagul
(MD Path
Consulting Pathologist)


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Page 6 of 7

Patient ID : 027	UHID No. : MEDIWHEEL
Patient Name : MRS. PRIYANKA S PAWAR	Regn/Sample Date : 12-Mar-2022 04.42 PM
Age / Sex : 29 Years / Female	Report Date : 12-Mar-2022 04.51 PM
Referred By : SADGURU HOSPITAL	Sample Type : URINE
	Barcode 

REPORT ON URINE ROUTINE

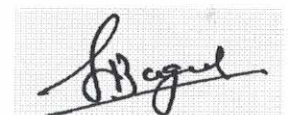
Investigation	Result
Specimen Name	Urine
PHYSICAL EXAMINATION	
Nature of specimen	Random
Colour	Pale Yellow
Transparency (Appearance)	Clear
Reaction (pH)	Acidic
Quantity	15 ml
Deposits	Absent
Specific Gravity	1.015
CHEMICAL EXAMINATION	
Urine Protein (Albumin)	Absent
Urine Glucose (Sugar)	Absent
Urine Ketones (Acetone)	Absent
Bile pigments	Absent
Bile Salt	Absent
MICROSCOPIC EXAMINATION	
Red blood cells	Not Seen
WBCs (WBCs)	4-5/hpf
Epithelial cells	2-4/hpf
Crystals	Not seen
Cast	Not seen
Bacteria	Absent

END OF REPORT




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Page 7 of 7



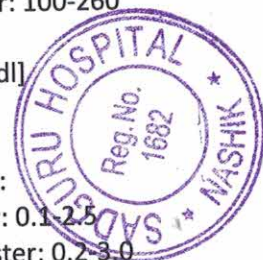
Dr. Pravin Bagul
(MD Path
Consulting Pathologist)



Patient Name : Mrs. Priyanka Pawar
Age/Sex : 29 Years / Female | **Regn. No.** : 220822
Reference By : Self | **Regn. Date** : 12/03/2022 18:30
Collection Center : Sadguru Hos./Lab (Panchavati) | **Report Date** : 12/03/2022 20:15

IMMUNO ASSAY

Test Name	Result	Units	Biological Reference Interval
Total Triiodothyronine (T3)	: 126.4	ng/dl	[80 - 200 ng/dl] For Pregnancy: First Trimester: 81-190 Second Trimester: 100-260 Third Trimester: 100-260
Total Thyroxine (T4)	: 7.12	µg/dl	[4.5 - 14.1 ug/dl]
Thyroid Stimulating Hormone (ultra TSH)	: 1.87	µIU/ml	[0.270 - 4.2] For Pregnancy: First Trimester: 0.1-2.5 Second Trimester: 0.2-3.0



Method: Fully Automated ElectroChemiluminescence System

Test Done On Fully Automated Cobas e411_Japan

*Result relates only to the sample as received. Kindly correlate with clinical conditions.

NOTE:

1. Decreased T3 (normal T4 & TSH) have minimal clinical significance and are not recommended for diagnosis of hypothyroidism
2. Total T3 may be decreased by < 25% in healthy older individuals.
3. Total T3 & T4 values may also be altered under other conditions like pregnancy, drugs (androgens,estrogens, O C phenytoin) nephrosis etc. In such cases free T3 and Free T4 are preferred tests.
4. Clinically correlate the result or repeat the tests with fresh sample if TSH values are between 5 - 15 mIU/L as physiological factors may give falsely high TSH.

----- END OF REPORT -----

Dr. Mrs. Reshma Mankar
 MD, DPB (Pathology)
 Consulting Pathologist