



Where Healing & Care Comes Naturally

APEX HOSPITALS KANDIVALI

A Superspeciality Hospital

CASHLESS
FACILITY

Akurli Road, Next to Lodha Woods, Lokhandwala Township,
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
email: info@apexhospitals.in | www.apexgroupofhospitals.com

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Tele.:

022-62747000 (100 Lines)

PHYSICIAN CONSULTATION

PRESENT COMPLAINT :

PAST MEDICAL / SURGICAL HISTORY:

GENERAL EXAMINATION:

PULSE

BP:

BMI

APETITE:

THIRST:

STOOL:

URINE:

SLEEP:

SKIN:

NAILS:

HABITAT:

SYSTEMIC EXAMINATION:

RESPITATORY EXAMINATION:

CARDIOVASCULAR EXAMINATION:

ABDOMINAL EXAMINATION:

GYNACOLOGY / OBST HISTORY (FOR FEMALE):

OPHTHAL EXAMINATION:

FAR VISION:
NEAR VISION:
COLOUR VISION:

ENT EXAMINATION:

EAR: MASTOID TUNNIG FORK TEST:
NOSE: EXT NOSE/ POST NASAL SPACE:
THROAT: TOUNGE/ PALATE/ TEETH:
NECK: NODES/ THYROID/TEETH:

DENTAL EXAMINATION:

DECAY/ CARIES IF ANY:
PLAQUE IF ANY:
GUMS:

PHYSICIAN NAME

PHYSICIAN SIGNATURE



ओपेक्स हॉस्पिटल्स कांदिवली

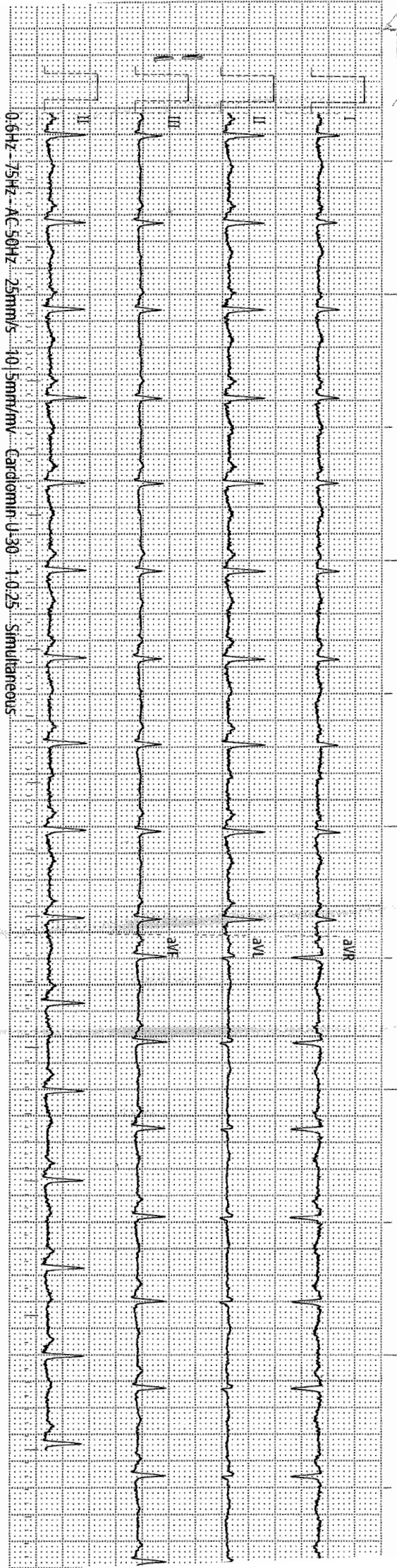
Name

Mrs. Preema Parate

Date

9/03/21

0.6Hz-75Hz AC 50Hz 25mm/s 10.5mm/mV Cardiomin U-30 1:0.25 Simultaneous



Date 9/03/24 Time Age 35y Gender Female

Anna Parate

10.30AM 35yM(F)

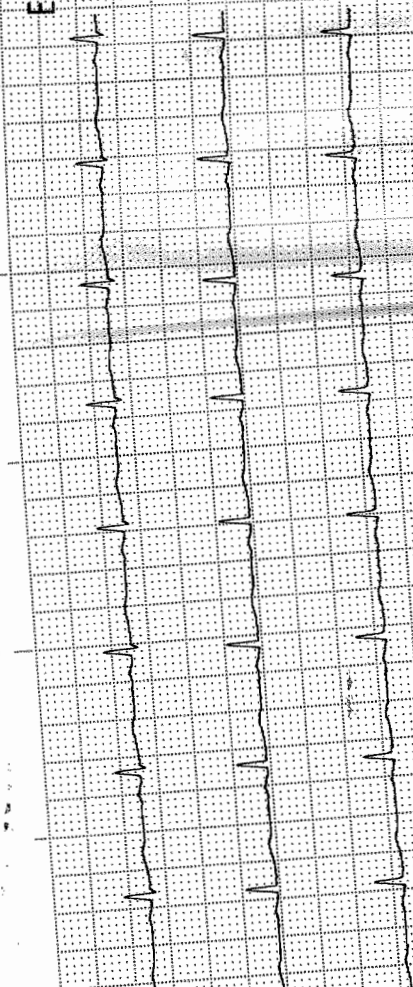
ECG report

ID : 20240309100002
Name : Anna Parate
Gender :
Age :
Dept :
Bed No :

HR : 92 bpm
PR : 128 ms
QRS : 78 ms
QT/QTc : 336/392 ms
P/QRS/T : 66/59/52°
RV5/SV1 : 0.794/0.593 mV
RV5+SV1 : 1.387 mV

<< Interpretations >>

Confirm and sign:
Examination time: 2024-03-09 10:00:03



APEX HOSPITAL

KANDIVALI

MRS PREARNA PARATE
 ID : 8921
 DATE : 09-03-2024
 AGE/SEX : 35 / M
 HT/WT : 148 / 59
 REF. BY : APEX HOSPITAL

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
SUPINE					80	120 / 80	96
HYPERVENT		0:2			82	120 / 80	98
Stage 1	2:55	2:55	2.7	10	135	120 / 80	162
Stage 2	5:55	2:55	4	12	113	120 / 80	135
PK-EXERCISE	6:53	0:53	5.4	14	181	120 / 80	217
RECOVERY	7:31	0:29			148	120 / 80	177
RECOVERY	7:51	0:49			138	130 / 80	179

RESULTS

EXERCISE DURATION : 6:53
 MAX HEART RATE : 183 bpm 98 % of target heart rate 185 bpm
 MAX BLOOD PRESSURE : 130 / 80 mm Hg
 REASON OF TERMINATION :

BP RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :

IMPRESSIONS

: Test is negative for inducible
 Ischaemia

DR. VIVEK AGARWAL
 DM CARDIOLOGIST
 DNB CARDIOLOGIST
 ICCP
 MD MEDICINE MBBS
 2008/10/3715

Technician : 44

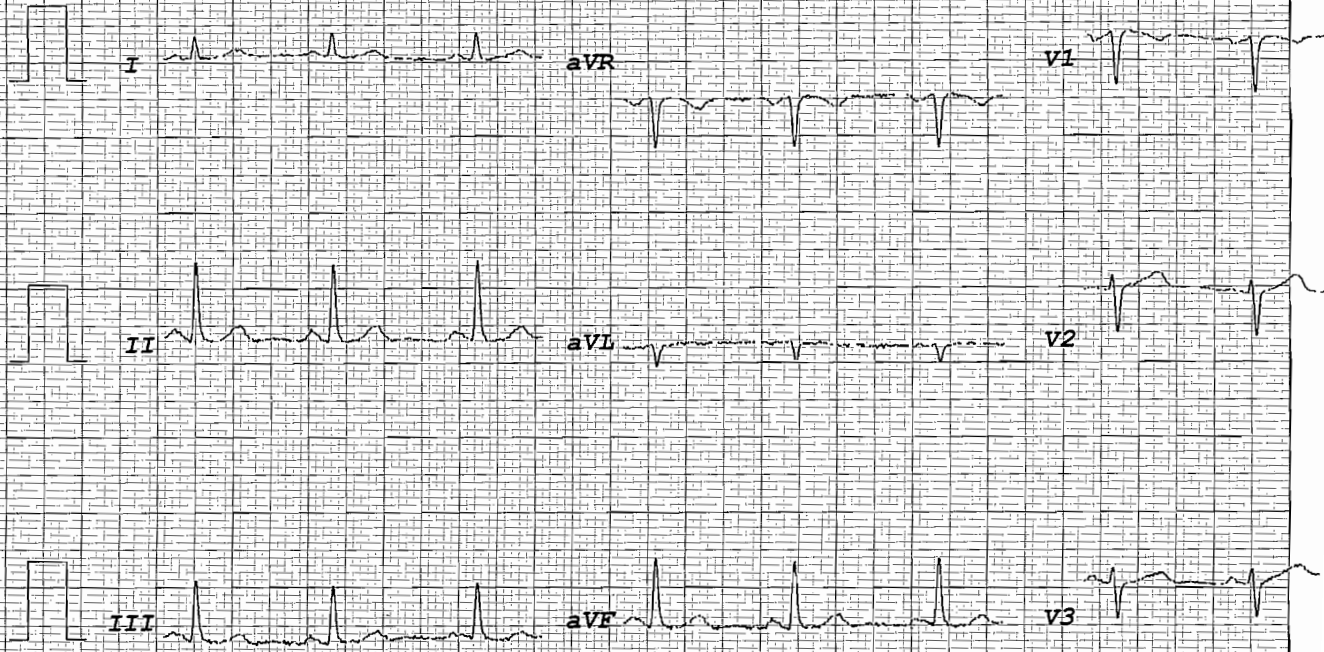
APEX HOSPITAL

MRS PREARNA PARATE
I.D. 8921
Age 35/M
Date 09-03-2024

RATE 80bpm
B.P. 120/80

PRETEST
SUPINE

ST @ 10mm/m
80ms Post



Base corrected

UNI-EM, Indore. Tel.: +91-731-4030035, Fax:

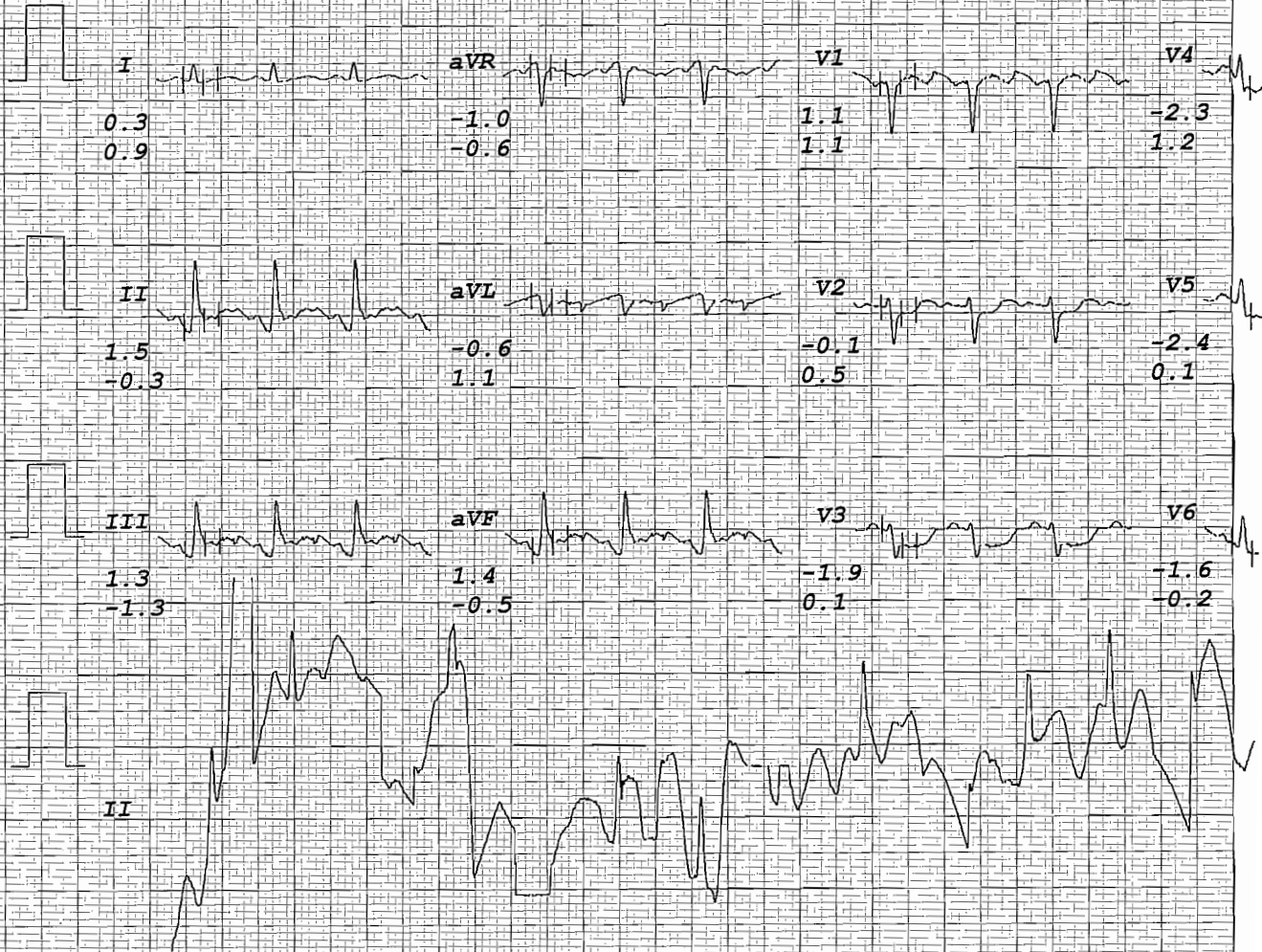
APEX HOSPITAL

MRS PREARNA PARATE
 I.D. 8921
 Age 35/M
 Date 09-03-2024

RATE 135bpm
 B.P. 120/80

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/m
 80ms Post J
 Speed 2.7
 SLOPE 10



Base Corrected

UNI-EM, Indore, Tel.: 91-731-4030035, Fax:

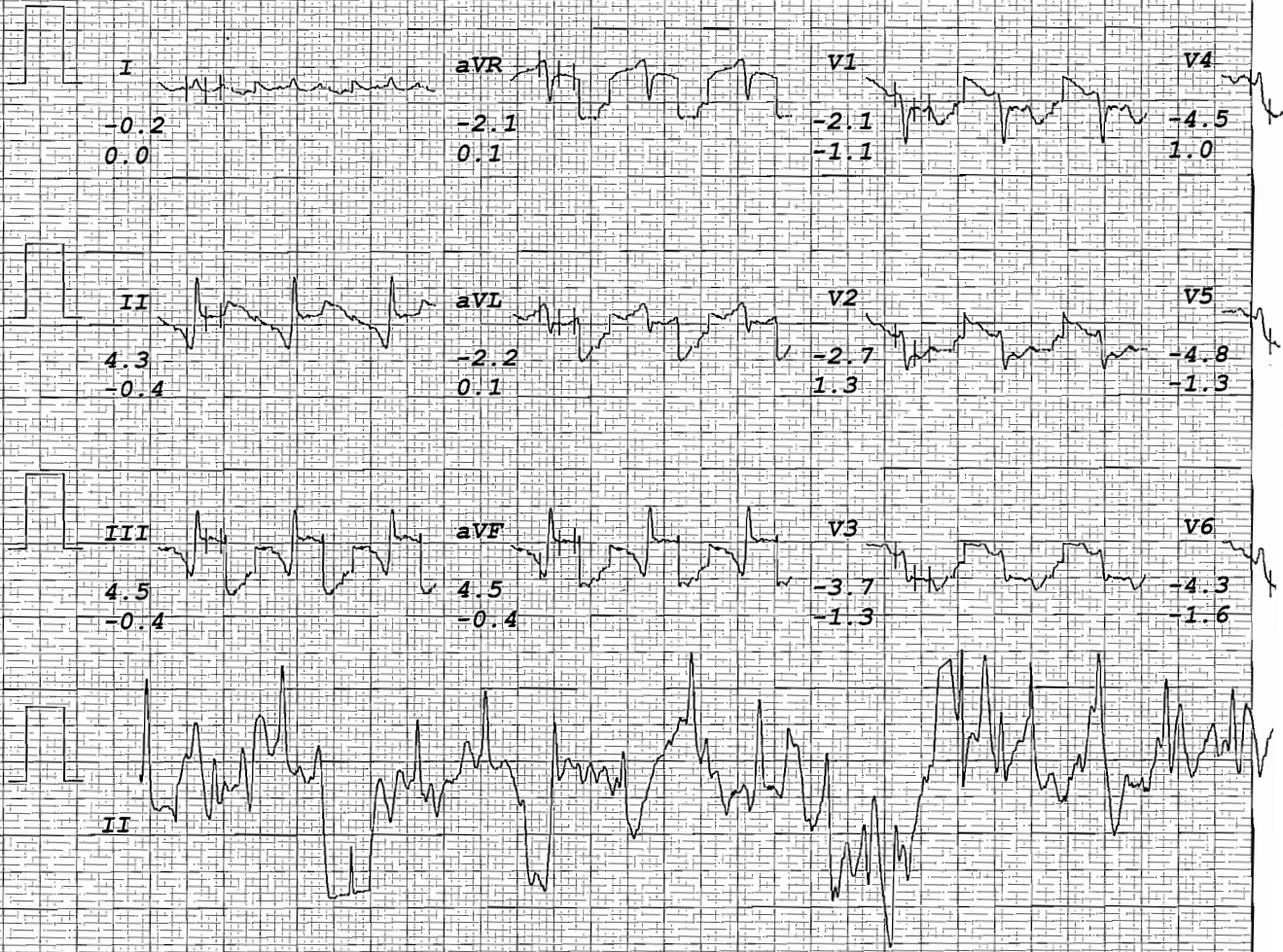
APEX HOSPITAL

MRS PREARNA PARATE
I.D. 8921
Age 35/M
Date 09-03-2024

RATE 113bpm
B.P. 120/80

Bruce
Stage 2
TOTAL TIME 5:55
PHASE TIME 2:55

ST @ 10mm/m
80ms Post E
Speed 4 km
SLOPE 12



Base Corrected

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APEX HOSPITAL

MRS PREARNA PARATE

I.D. 8921

Age 35/M

Date 09-03-2024

RATE 133bpm

B.P. 130/80

Bruce

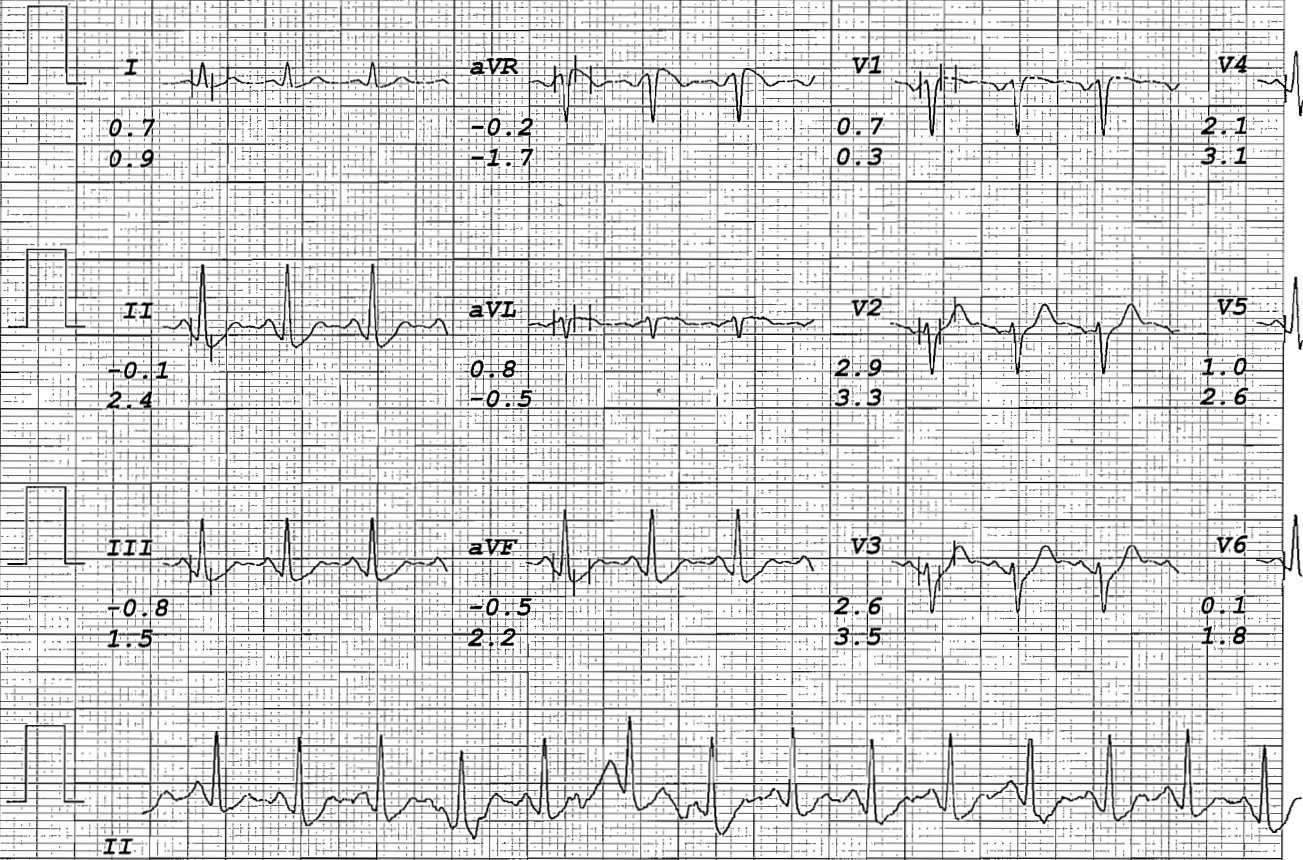
RECOVERY

TOTAL TIME 7:55

PHASE TIME 0:53

ST @ 10mm

80ms Post



Base Corrected

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APEX HOSPITAL

MRS PREARNA PARATE

I.D. 8921

Age 35/M

Date 09-03-2024

RATE 133bpm

B.P. 130/80

Bruce

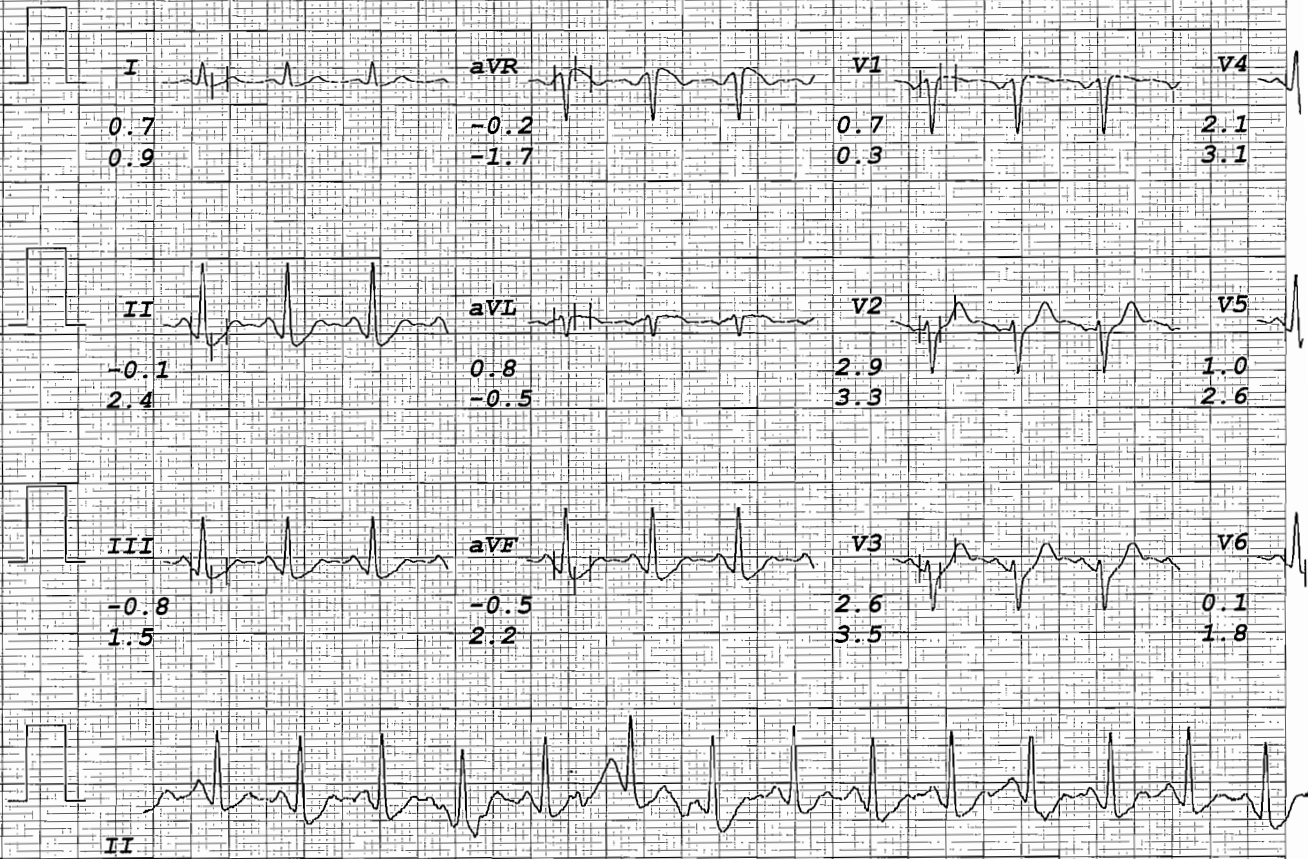
RECOVERY

TOTAL TIME 7:55

PHASE TIME 0:53

ST @ 10mm

80ms Post



Base Corrected

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DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Ms PREARNA PARATE	LabNo	14691	
UHID/IP No	150009604 / 11187	Sample Date	09/03/2024 11:02AM	
Age/Gender	35 Yrs/Female	Receiving Date	09/03/2024 11:32AM	
Bed No/Ward	OPD	Report Date	09/03/2024 7:14PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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GLUCOSE (PP)

Sample: Fl. Plasma

Food Sugar(2 Hours PP)	118.0	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide
------------------------	-------	-------	----------	-----------------------------------

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :

The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

GLUCOSE (FASTING)

Sample: Fl. Plasma

Glucose (Fasting Blood Sugar / FBS)	108.0	mg/dl	70 - 110	Glucose Oxidase,Hydrogen Peroxide
Urine Fasting Sugar	Absent		Absent	
Urine Fasting Ketone	Absent		Absent	

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai



ISO 9001-2015 Certified

Patient Id : PVD18323-24/71462 Sample ID : 24032667
 Patient : MRS PREARNA PARATE Reg. Date : 09/03/2024
 Age/sex : 35 Yrs/ Female Report Date : 09/03/2024
 Center : APEX HOSPITALS KANDIVALI Case No. :
 Ref. By : Self



HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.0	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	96.80	mg/dL	
Method : HPLC-Biorad D10-USA			

INTERPRETATION

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
6. Interference of Haemoglobinopathies in HbA1c estimation.
 - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - C. Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
7. In known diabetic patients, following values can be considered as a tool for monitoring the glycaemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %.

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy



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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIPID PROFILE SERUM				
Sample: Serum				
Cholesterol-Total	150.0	mg/dl	< 200.00	Cholesterol Oxidase,Esterase,Pero xidase
Triglycerides	80.0	mg/dl	< 150	Enzymatic End point
HDL Cholesterol	48.0	mg/dl	40.00 - 60.00	Phosphotungstat
VLDL Cholesterol	16.00	mg/dl	6.00 - 38.00	Calculated Value
LDL Cholesterol	86.00	mg/dl	< 100.00	Calculated Value
Cholesterol Total : HDL Cholesterol Ratio	3.12 L		3.50 - 5.00	Calculated Value
LDL Cholesterol : HDL Cholesterol Ratio	1.79 L		2.50 - 3.50	Calculated Value

--End Of Report--

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Bed No/Ward	OPD	Report Date	09/03/2024 7:14PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIVER FUNCTION TEST (LFT) SERUM				
Sample: Serum				
Bilirubin Total (TBil)	0.70	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.35	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.35	mg/dl	0 - 1	
SGPT (ALT)	20.20	U/L	5 - 40	IFCC modified
SGOT (AST)	22.69	U/L	5 - 40	IFCC modified
Protein Total	6.8	gm/dl	6.00 - 8.00	Biuret
Albumin	3.8	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	3.00	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.27		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	58.22	IU/L	42 - 140	
GGTP (GAMMA GT)	32.0	IU/L	15.0 - 72.0	UV Kinetic IFCC

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
RFT (RENAL FUNCTION TEST)				
Sample: Serum				
Creatinine	0.80	mg/dl	0.60 - 1.30	Jaffes
UREA	19.50	mg/dl	15 - 50	CDC Urease,Colorimetric
BUN - Blood Urea Nitrogen	9.11	mg/dl	7 - 20	
Calcium	8.8	mg/dl	8.6 - 10.5	Arsenazo III
Uric Acid	4.5	mm/hr	2.5 - 6.2	URICASE-PEROXIDASE
Phosphorus	3.5	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
Sodium	141.0	mEq/L	135 - 146	ISE Direct
Potassium	4.4	mEq/L	3.5 - 5.5	ISE Direct
Chloride	107.0	mEq/L	98 - 108	ISE Direct
Protein Total	6.8	gm/dl	6.00 - 8.00	Biuret
Albumin	3.8	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	3.00	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.27		1.00 - 2.50	Calculated Value

--End Of Report--

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APEX HOSPITALS KANDIVALI DIAGNOSTIC

Laboratory Management System: New Laboratories

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Center : APEX HOSPITALS KANDIVALI Case No. :
Ref. By : Self



IMMUNOASSAY

Test Description	Result	Unit	Biological Reference Range
TOTAL T3 T4 TSH (TFT)			
T3 (Triiodothyronine)	124.51	ng/dl	83-200 For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	7.35	ug/dL	5.13 - 14.10 For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	3.86	uIU/ml	0.27 - 4.20

Method : ECLIA

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	•Chronic Autoimmune Thyroiditis •Post thyroidectomy,Post radioiodine •Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,steroids,anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	•Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness •Subclinical Hyperthyroidism •Thyroxine ingestion"
Decreased	Decreased	Decreased	•Central Hypothyroidism •Non-Thyroidal illness •Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	•Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

-----End Of Report-----

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone.Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.

DR. SANDEEP B. PORWAL
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MMC Reg no 2001031640



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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE				
Sample: Urine				
PHYSICAL EXAMINATION				
Quantity	30	ml		
Color	Pale Yellow			
Appearance	Slightly Hazy			Clear
Specific Gravity	1.015		1.010 - 1.025	
CHEMICAL EXAMINATION				
pH	6.0		4.5 - 8.5	
Protein	Absent			
Glucose	Absent			
Ketone	Absent			
Occult Blood	Absent			
Bile Salt	Absent			Absent
Bile Pigment	Absent			Absent
MICROSCOPIC EXAMINATION				
Pus Cells	2-3/hpf			
RBCs	Absent			
Epithelial Cells	3-4/hpf			
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			Absent
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	Absent			

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HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	12.3 L	gm/dl	12.5 - 16.0	SLS- Hb Method
RBC Count (Red Blood Cell)	4.64	10 ⁶ /uL	4.20 - 5.40	
PCV (Haematocrit)	36.4	%	36.0 - 46.0	
MCV	78.45	fl	78 - 100	Calculated
MCH	26.51	pg	26 - 34	Calculated
MCHC	33.79	gm/dl	30 - 36	Calculated
RDW	15.3	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	9400	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	65	%	40 - 80	
Lymphocyte %	30	%	20 - 40	
Eosinophil %	03	%	0 - 6	
Monocytes %	02	%	1 - 12	
Basophil %	00	%	0 - 2	
Absolute Neutrophil Count (ANC)	6110	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	2820	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	282	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	188 L	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	288	10 ³ /uL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
MPV	15.3 H	fl	7 - 12	

--End Of Report--

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HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
ERYTHROCYTE SEDIMENTATION RATE (ESR)				
Sample: W. B. EDTA				
ESR (Erythrocyte Sed.Rate)	25 H	mm/hr	< 20	Westergren

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Tele.:
022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Ms PREARNA PARATE	LabNo	14691	
UHID/IP No	150009604 / 11187	Sample Date	09/03/2024 11:02AM	
Age/Gender	35 Yrs/Female	Receiving Date	09/03/2024 11:32AM	
Bed No/Ward	OPD	Report Date	09/03/2024 7:14PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD GROUPING				
Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"O" RH Positive			SLIDE METHOD

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai



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913124.

Mrs. prerama parathe.

Age. 35yrs / female

Opthal

Near-

(R) eye - clear

(L) eye - clear.

Distance.

(R) eye - 0.18

(L) eye - 0.00



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MRS. Preama Pagate 35yrs/F

BP - 100/60mmHg

Pulse - 74/min

SpO2 - 98.1.

Height - 148cm

Weight - 59.1kg

ORTHOPEDIC | SPINE | CARDIOLOGY | GENERAL SURGERY | LAPAROSCOPY | CRITICAL CARE | GASTROENTEROLOGY | CANCER | DIABETOLOGY
NEUROLOGY | NEPHROLOGY | VASCULAR SURGERY | ENT | OPHTHALMOLOGY | PLASTIC SURGERY | UROSURGERY | PEDIATRIC SURGERY



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Tele.:
022-62747000 (100 Lines)

Patient Name: Mrs . PREARNA PARATE

F / 35Yrs

Ref. by: MEDIWHEEL HEALTHCARE

Date: 09-03-2024

SONOGRAPHY OF ABDOMEN AND PELVIS

TECHNIQUE: Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

LIVER: The liver is normal in size (15 cm), shape and has smooth margins. The hepatic parenchyma shows **bright** echotexture without solid or cystic mass lesion or calcification. No evidence of intrahepatic biliary radical dilatation.

PORTAL VEIN: It measures 8.7 mm in transverse diameter.

GALL BLADDER: The gall bladder is well distended. There is no evidence of calculus, wall thickening or pericholecystic collection.

COMMON BILE DUCT: The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct. Terminal common bile duct is obscured due to bowel gas artifacts.

PANCREAS: The head and body of pancreas is normal in size, shape, contours and echo texture. Rest of the pancreas is obscured due to bowel gas artifacts.

SPLEEN: The spleen measures 8.2 cm and is normal in size and shape. Its echotexture is homogeneous.

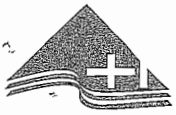
KIDNEYS:

Right kidney	Left kidney
9.2 x 3.7 cm	10.2 x 4.2 cm

The kidneys are normal in size shape, position, axis and contour and have smooth renal margins. Cortical echotexture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter or calculi, bilaterally.

URINARY BLADDER: The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

.....Continue On Page 2



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PELVIS:

The uterus is retroverted. It measures 8.2 x 3.8 x 4.6 cm in the longitudinal, antero-posterior and transverse dimensions, respectively. The uterine margins are smooth and do not reveal any contour abnormalities.

The endometrial echo is in the midline and measures 7.8 mm.

Bilateral ovaries are normal in size and echo pattern.

Right ovary measures 2.5 x 1.9 cm

Left ovary measures 1.2 x 2.5 cm

No adnexal mass is seen.

There is no free fluid in the cul-de-sac. There is no obvious evidence of significant lymphadenopathy.

IMPRESSION:

- Grade 1 fatty liver with mild hepatomegaly. Advice lipid profile and LFT correlation.
- No other significant abnormality is seen.

Thanks for the reference.

With regards,

Dr. Ravi Kumar, MD
Consultant Radiologist



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DEPARTMENT OF RADIOLOGY

Patient Name	Ms PREARNA PARATE	LabNo	14691	
UHID/IP No	150009604 / 11187	Order Date	09/03/2024 11:02AM	
Age/Gender	35 Yrs/Female	Receiving Date	09/03/2024 11:52AM	
Bed No/Ward	OPD	Report Date	09/03/2024 5:29PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

DIGITAL X-RAY CHEST PA VIEW

Both lung on either side shows equal translucency and exhibit normal vasculature

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

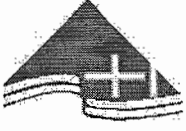
The cardiac size is normal.

Trachea is central in position and no mediastinal abnormality is visible.

Bony thorax is normal.

--End Of Report--

Dr. SAUMIL PANDYA
MD, D.N.B, RADIOLOGIST



Apex Hospitals Kandivali

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Contact No.:-022-62747000

Website:-www.apexgroupofhospitals.com

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GST No.:-27AACFN8496M1ZG



Credit Bill OP

Reg No : 150009604 Bill No : OPCRB2324/272 Payer : MEDIWHEEL(ARCOFEMI HEALTHCARE)
Patient Name : Ms PREARNA PARATE Bill Date Time : 09/03/2024 11:02AM Presc. Doctor : Dr. Raimangal Maurva/
Gender/Age : Female/35 Yr 9 Mth 26 Days Lab No : 14691 Referred By : Self
Contact No : 9424603443 Address : C 8/62 NABARD NAGAR THAKUR COMPLEX KANDIVALI EAST , MUMBAI, MAHARASHTR,
INDIA, - 400101

No.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	MEDIWHEEL FULL BODY ANNUAL PLUS (Dr. Apex Hospitals)	2520.00	1.00	2520.00	0.00	2520.00	0.00	2520.00
	Details Of Package							
2	ECG (Dr. Apex Hospitals)							
3	STRESS TEST (TMT) (Dr. Vivek Kamalkumar Agarwal)							
4	DIETICIAN CHARGES (Dr. Mrinali Dwivedi)							
5	OPD CONSULTATION (Dr. Rajmangal Maurya)							
5	GLUCOSE (PP) (Dr. SANDEEP B PORWAL)							
7	GLUCOSE (FASTING) (Dr. SANDEEP B PORWAL)							
3	GLYCOCYLATED HEMOGLOBIN (HBA1C) (Dr. SANDEEP B PORWAL)							
9	LIPID PROFILE SERUM (Dr. SANDEEP B PORWAL)							
10	LIVER FUNCTION TEST (LFT) SERUM (Dr. SANDEEP B PORWAL)							
11	RFT (RENAL FUNCTION TEST) (Dr. SANDEEP B PORWAL)							
12	T3 + T4 + TSH (Dr. SANDEEP B PORWAL)							
13	URINE ROUTINE (Dr. SANDEEP B PORWAL)							
14	COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD (Dr. SANDEEP B PORWAL)							
15	ERYTHROCYTE SEDIMENTATION RATE (ESR) (Dr. SANDEEP B PORWAL)							
16	BLOOD GROUPING (Dr. SANDEEP B PORWAL)							
17	VISION TEST (EYE CHECK UP) (Dr. Rajmangal Maurya)							
18	BMI (BOODY MASS INDEX) (Dr. Apex Hospitals)							
19	USG ABD & PELVIS (Dr. RAVI RAMESH CHANDRA KUMAR)							
20	X RAY CHEST PA (Dr. SAUMIL PANDYA)							

Gross Amount	2520.00
Round Off Amount	
Net Amount	2520.00
Payer Amount	2520.00
Patient Amount	0.00
Amt Received (Rs.)	0.00
Balance Amount	2520.00

Varration :

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Prepared By:Sonal Das

Sonal Das

Authorised Signatory

Printed Date:09/03/2024

