

Referred by

: Self

Date

: 14/08/2021

Patient's Id

: AM132

Age/Sex Reg. No

: 60 Years/Female

3603

: 9099938341 Mobile Ref ID.

# Fitness Certificate

### **GENERAL EXAMINATION**

Height (cms): 149

Weight (kgs): 71.0

Blood Pressure: 108/68 mmHg

Pulse: 85/Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

This is an electronically authenticated report. Note: ((LL-Very Low, L-Low, HH-Very High)

Approved On . 16/08/2021 12:00:00

Generated On : 16/08/2021 12:28

Dr Jinen M Shah GNB (Medicine)FCGS (USA)





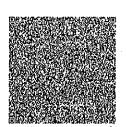
# ભારત સરકાર Government of India

# ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ Unique Identification Authority of India

ਗਮਾਂਡਰ ਡਮ સੰખ્या/ Enrolment No.: 0000/00746/43840

મેહ્સ અમીતા સંદીપ Mehra Ameeta Sandeep W/O Sandeep Mehra B - 605 Elvsium Adani Shantigram S.G. Highway Near Valshnodevi Temple Khodiyar Khodiyar Ahmedabad Gujarat - 382421 9913657017





તમારી આધાર નંબર / Your Aadhaar No. :

5928 8126 1946 VID: 9180 8723 7743 9273

મારો આધાર, મારી ઓળખ



Issue Date: 09/06/202:







મેહરા અમીતા સંદીપ Mehra Ameeta Sandeep **ਵਰਮ ਰਾਹੀਆ/DOB: 09/09/1960** स्त्री/ FEMALE

5928 8126 1946 VID: 9180 8723 7743 9273

મારો આધાર, મારી ઓળખ







#### નિર્દેશ

- 🏿 આધાર ઓળખાણનું પ્રમાણ છે. નાગરીકતાનું નહિં
- 🔳 ઓળખ ચકાસવા માટે સુરક્ષિત QR કોડ / ઓફલાઈન XML / ઓનલાઇન પ્રમાણીકરણનો ઉપયોગ કરવો.
- 🗷 આ ઈલેક્ટ્રોનિક પ્રક્રિયા દ્રારા બનાવેલા દસ્તાવેજ છે.

#### INFORMATION

- Adhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.
  - આધાર સમગ્ર દેશમાં માન્ય છે.
  - આધાર તમને વિવિધ સરકારી અને બિન-સરકારી સેવાઓને સરળતાથી મેળવવામાં મદદ કરે છે.
  - તમારા મોબાઈલ નંબર અને ઈમેઇલ આઈડીને આધારમાં અપડેટ કરો.
  - તમારા સ્માર્ટ ફોનમાં આધાર રાખો –એમઆધાર એપ્લિકેશનનો ઉપયોગ કરો.
  - Aadhaar is valid throughout the country.
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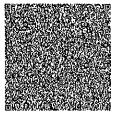


ભારતીય વિશિષ્ટ ઓળખાણ પાયિકરણ Unique Identification Authority of India



સરનામું : કબ્લ્યૂઓ સંદીપ મેહરા, બી - 605 એલેસીઉમ એસ.જી. હાઇવે, વૈષ્ણોદેવી મંદિર પાસે, વૈષ્ણોદેવી મંદિર પાસે, ખોડીયાર, અમદાવાદ, ગુજરાત - 382421

Address: W/O Sandeep Mehra, B - 605 Elysium, Adani Shantigram, Near Valshnodevi Temple, S.G. Highway, Khodiyar, Ahmedabad, Gujarat - 382421



5928 8126 1946

VID: 9180 8723 7743 9273

1947

halp@uldal.gov.in | www.uldal.gov.in

Dr. Jinen IV. Shah DNB (Mediciye) FCCS (USA) Reg. No. 16-20693





To.

The Coordinator,

Mediwheel (Arcofemi Healthcare Limited)

Helpline number: 011-41195959

Dear Sir / Madam,

# Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY				
NAME	SMT MEHRA AMEETA			
DATE OF BIRTH	09-09-1960			
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-08-2021			
BOOKING REFERENCE NO.	21S155411100001928S			
SPOUSE DETAILS				
EMPLOYEE NAME	MR. MEHRA SANDEEP			
EMPLOYEE EC NO.	155411			
EMPLOYEE DESIGNATION	LEGAL			
EMPLOYEE PLACE OF WORK	GANDHINAGAR,GIFT CITY,NATIONAL			
EMPLOYEE BIRTHDATE	19-08-1961			

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 10-08-2021 till 31-03-2022. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Referred by

: Self

Date

: 14/08/2021

Patient's Id

: AM132

Age/Sex

: 60 Years/Female

Reg. No

: 3603

Mobile Ref ID. : 9099938341

#### **HEMOGRAM REPORT**

Performed on 5-Part Fully Auto Hematology Analyzer SIEMENS ADVIA 2120i)

Test	Result	Unit	Biological Reference Interval
Sample Type:	EDTA		
Haemoglobin: Total WBC Count: Platelets Count: Differential Count:	12.7 7700 244000	gm/dL /microlitre /microlitre	12.5 - 16.0 4000 - 10500 1,50,000 - 4,50,000
Neutrophils: Lymphocytes: Eosinophils: Monocytes: Basophils:	66 29 02 03 00	% % % %	40-80 20-40 Upto 6 2-10 <1-2
RBC indicies:  RBC Count: HCT: MCV: MCH: MCHC: RDW:	4.50 39.8 88.4 28.2 31.9 13.6	*10^6 /microl % fL pg % %	3.8 - 4.8 36 - 46 83 - 101 27-32 31.5-34.5 11.6 - 14.0
Erythrocytes Sedimentation Rate(ESR): (By AUTO ESR-10, USA) ESR 1st Hr: ESR 2nd Hr:	05 13	mm mm	2 - 20 mm in 1Hr. 12 - 30 mm in 2 Hr.
Thick Smear Preparation: Haemoparasite: Peripheral Smear Examination:	Malarial parasites		12 VV (()) 11 & ( ))
RBCs:	Normocytic & Nori	mochromic.	

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Platelet:



Platelet adequate & normal on smear.



Referred by

: Self

Date

: 14/08/2021

Patient's Id

: AM132

Age/Sex

Ref ID.

Reg. No Mobile

: 60 Years/Female

: 3603

: 9099938341

Approved On : 15/08/2021 14:20:00 Generated On : 16/08/2021 12:58





Referred by Date

Patient's Id

: Self

: 14/08/2021 : AM132

Age/Sex

: 60 Years/Female

Reg. No

3603

Mobile : 9099938341

Ref ID.

# GLYCOSYLATED HAEMOGLOBIN (HbA1C) ESTIMATION

Test	Result	Unit	Biological Reference Interval
Sample Type: EDTA			
Glycosylated Haemoglobin (HbA1C)	6.40	%	Pre-Diabetic (Adult): 5.7 - 6.4 Diabetic (Adult): >6.5 Therapeutic goal for glycemic control: <7.0
Mean Blood Glucose Level (An average of 2 -3 Months)	137		

Method: HPLC on D-10, Bio-Rad, USA

#### INTERPRETATION:

\* Blood sample can be drawn at any time. Fasting is not required.

\* Reflects average blood sugar levels for the 2 to 3 months period before the test.

\* Provides information for evaluating diabetic treatment modalities and tracks control of blood glucose of particular value in diabetic children, diabetics in whom the renal threshold for glucose is abnormal, unstable insulin dependent diabetics where blood sugars vary markedly from day to day.

\* High value in poorly controlled DM and moves towards normal in patients with optimal control.

Dr. KEYUR Patel ----- End of Report -----

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 15/08/2021 12:57:00 Generated On : 16/08/2021 12:58





Referred by : Self
Date : 14/08/2021

Patient's Id : AM132

Age/Sex

: 60 Years/Female

Reg. No Mobile

: 3603 : 9099938341

Ref ID.

# LIPID PROFILE

	(Performed on Semi Auto Cl	neSphera)	
Test Sample Type: Fasting Serum	Result	Unit	Biological Reference Interval
S.Cholesterol (Oxidase Peroxidase)	301	mg/dL	< 200 Desirable 200-239 Boderline High > 240 High
S.HDLC (Direct) (Phosphotungsstic Acid)	64.0	mg/dL	< 40 Low > 60 High
S.Triglyceride (GPO-POD)	186.4	mg/dL	< 150 mg/dl Normal 150-199 Boderline High 200-499 High > 500 Very High
S.VLDL (Calculated)	37.28	mg/dL	10-40 Normal
S.LDLC	199.72	mg/dL	< 100 Optimal
(Calculated)			100-129 Near to above optimal 130-159 Boderline high 160-189 High >190 Very High
S.Cholesterol / HDLC Ratio	4.7		< 4 Normal
(Calculated)			4-6 Borderline 6-8 Risklevel > 8 High Risk
S.LDLC / HDLC Ratio	3.12		< 3 Normal
(Calculated)			3-4 Borderline 4-6 Risk Level
			> 6 High Risk
Cholesterol / HDLC Ratio (Calculated)	4.7		< 3.5 Normal
Triglyceride / HDLC Ratio (Calculated)	2.91		< 2 Normal > 4 Risk Level > 6 High Risk
Non HDLC (Calculated)	237		< 130 Normal 130 - 159 Near Normal 160 - 189 Borderline 190 - 219 Risklevel > 220 High Risk

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Approved On : 15/08/2021 12:55:00 Generated On : 16/08/2021 12:59





Referred by : Self

Date : 14/08/2021 Patient's Id : AM132

Age/Sex Reg. No

: 60 Years/Female

: 3603

Mobile : 9099938341 Ref ID.

#### LIVER FUNCTION TEST

(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum S.Billirubin			
Total Bilirubin (Azobillirubin)	0.46	mg/dl	0 - 1.2
Conjugated Bilirubin (Dual Wavelength spectrophotometric)	0.14	mg/dl	0 - 0.4
Unconjugated Bilirubin (Dual Wavelength spectrophotometric)	0.32	mg/dl	0.0 - 1.1
S.G.P.T. (ALT) (Kinetic with Pyridoxal 5-Phosphate)	31.0	IU/L	0 - 49
S.G.O.T. (AST) (Kinetic with Pyridoxal 5-Phosphate)	46.3	IU/L	Up to 46
S.ALP (Alkaline Phosphatase) (4-Nitrophenyl phosphate)	145.7	U/L.	64 - 306
S.Protein			
Total Protein (Biuret)	6.4	gm/dl	6.3 - 8.2
Albumin (BCG)	5.22	gm/dl	3.5 - 5.2
Globulin (Calculated)	1.18	gm/dl	1.9 - 3.5
Albumin Globulin Ratio	4.42		
S.GammaGT (L-Gamma Glutamyl-4-Nitroanalide)	80.6	IU/L	12-43

----- End of Report -

Dr. KEYUR Patel M.B.DCP

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Generated On : 16/08/2021 12:59

Approved On : 15/08/2021 12:56:00



Patient's name : AMEETA MEHRA Age/Sex : 60 Years/Female

Referred by : Self Reg. No : 3603

Date : 14/08/2021 Mobile : 9099938341

Patient's Id : AM132 Ref ID.

### **BLOOD GROUP**

Sample Type: EDTA

ABO Group: "A"

Rh Type: Positive

#### **RENAL FUNCTION TEST**

(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
S.Urea (Urease with indicator dye)	31.3	mg/dl	Male: 19.6-43.6 Female: 15.2-37.0
S.Creatinine (Enzymatic)	0.80	mg/dL	0.55 - 1.30
S.Uric Acid (Uricase)	5.79	mg/dL	Male: 3.5-8.5 Female: 2.5-6.2

### **BLOOD GLUCOSE LEVEL**

<b>Test</b> Sample Type:	Result Flouride	Unit	Biological Reference Interval
Fasting Blood Glucose (Hexokinase) Collection Time:	77.3	mg/dl	70-110
Collection Time: Post Prandial Blood Glucose (2 Hrs) (Hexokinase)	153.1	mg/dl	80-140

Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 15/08/2021 12:57:00 Generated On : 16/08/2021 12:59





Referred by

: Self

Date Patient's Id : 14/08/2021

: AM132

Age/Sex

: 60 Years/Female

Reg. No

3603

**Biological Reference Interval** 

: 9099938341

Mobile

Ref ID.

**SERUM LDH LEVEL** 

Test Sample Type:

LDH Activity( Lactate Dehydrogenase ):

Pyruvate to lactate Kinetic Method

Result Unit

Serum 154.83

U/L

120 - 246

#Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250

THYROID FUNCTION TEST

(by CLIA on SIEMENS ADVIA Centaur XP)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
S.T3 (Total Triidothyronine by CLIA)	0.83	ng/mL	1 - 23 Months: 1.17 - 2.39 2 - 12 Years: 1.05 - 2.07 13 - 20 Years: 0.86 - 1.92 Adult: 0.6 - 1.81
S.T4 (Total Thyroxine by CLIA)	12.30	mcg/dL	3.2 - 12.6
S.TSH (Thyroid Stimulating Hormone by CLIA)	5.559	microU/mL	0 -12 Yrs: 0.77 - 5.64 12-19 Yrs: 0.75-3.69 19-100 Yrs: 0.35 -5.50

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 15/08/2021 12:57:00 Generated On : 16/08/2021 12:59

-- End of Report



: 60 Years/Female Patient's name : AMEETA MEHRA Age/Sex

Reg. No : 3603 Referred by : Self

Date : 14/08/2021 Mobile : 9099938341

Patient's Id : AM132 Ref ID.

#### LIDINE DOLLTINE AMALVOIS

	URINE ROUTINE ANAL	.4818
Sample Type: Fresh Urine Physical Examination (Naked Eye Observation)	Result	Biological Ref. Value
Amount	30 ml	>10 ml
Colour	Pale Yellow	Pale Yellow
Appearance	Clear	Clear
Chemical Examination		
рH	7	4.5-8.0
(Dip stick)		
Specific Gravity	1.020	1.002-1.030
(Bromothymol Blue)		
Albumin	Absent	Absent
(Tetrabromophenol)		
Glucose	Absent	Absent
(Specific Glucose Oxidase/Peroxidase)		
Bilirubin	Absent	Absent
(Azo-coupling reaction)		
Acetone	Absent	Absent
(Sodium Nitroprusside Reaction)		
Urobilinogen	Absent	Absent
(Modified Ehrlich Reaction)		
Nitrites	Absent	Absent
(Diazotization Reaction)		
Microscopic Examination		
(After centrifugation at 1500 RPM for 10min./hpf)		

Pus Cells(WBCs) Absent Red Blood Cells(RBCs) Absent Epithelial cells Absent T.Vaginals Absent Spermatozoa Absent Casts Absent Crystals Absent Amorphous Material Absent

Absent

Absent

Absent

Absent

Absent

Absent

Absent

Dr. KEYUR Patel

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 15/08/2021 12:57:00 Generated On : 16/08/2021 12:59





Patient's name

: AMEETA MEHRA

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: Self

Date

: 14/08/2021

Patient's Id : AM132 Age/Sex

: 60 Years/Female

Reg. No

: 3603

Mobile Ref ID. : 9099938341

# Electrocardiogram

# **Findings**

Normal Sinus Rhythm.

Within Normal Limit.

---- End of Report ----

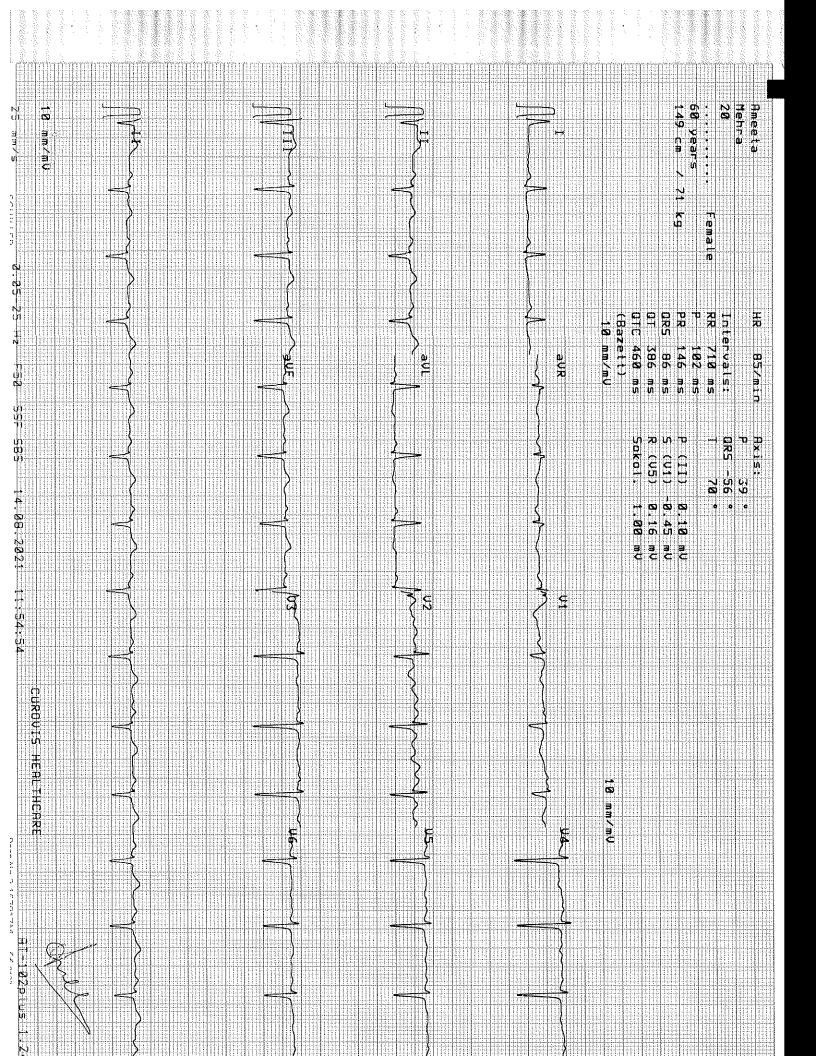
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Generated On : 16/08/2021 12:18

Dr Jinen M Shah DNB (Medicine)FCCS (USA)







Referred by

Patient's name : AMEETA MEHRA

: Self

Date

: 14/08/2021

Patient's Id

: AM132

Age/Sex

: 60 Years/Female

Reg. No

: 3603

Mobile Ref ID. : 9099938341

# 2D Echo Colour Doppler

#### **OBSERVATION:**

- 2 D Echo and color flow studies were done in long and short axis, apical and Sub coastal views.
- 1. Normal LV size. No RWMA at rest.
- Normal RV and RA, Concentric LVH.
- 3. All Four valves are structurally normal.
- 4. Good LV systolic function. LVEF = 55-60%.
- 5. Stage I diastolic dysfunction.
- 6. Trivial TR. Mild MR. No AR.
- 7. Mild PAH. RVSP = 42 mmHG.
- 8. Intact IAS and IVS.
- 9. No Clot, No Vegetation.
- 10. No pericardial effusion.

### CONCLUSION

- 1. Normal LV size with Good LV systolic function.
- 2. Concentric LVH . Stage I diastolic dysfunction
- 3. Trivial TR with Mild PAH. Mild MR, No AR
- 4. No RWMA at rest.

This echo doesn't rule out any kind of congenital cardiac anomalies.

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 16/08/2021 12:00:00 Generated On : 16/08/2021 12:28

----- End of Report

Dr Jinen M Shah DNB (Medicine)PCCS (USA)



Referred by

: Self

Date

: 14/08/2021

Patient's Id

: AM132

Age/Sex

: 60 Years/Female

Reg. No

: 3603

Mobile Ref ID. : 9099938341

### X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

Bony thorax appears normal.

COMMENT: No significant abnormality is detected.

----- End of Report -----

Dr. Jaimin Shah

Cunsaltant Radiologist

This is an electronically authenticated report. Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 14/08/2021 3:24:00 PM

Generated On : 14/08/2021 15:24

'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad-380054, Gujarat.



Referred by Date

: Self

Patient's Id

: 14/08/2021

: AM132

Age/Sex Reg. No : 60 Years/Female

: 3603

9099938341

Mobile Ref ID.

# **USG ABDOMEN**

Liver appears normal in size, show homogenous parenchymal echoy. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic billiary or portal radicals, PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

**Spleen** appears normal in size & echopattern. No evidence of focal lesions.

Both kidney are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass seen. Right kidne y show wavy outline.

Urinary bladder is partially distended. No evidence of calculus or mass.

Uterus appears normal. No adnexal mass is seen.

No evidence of free fluid in peritoneal cavity. No evidence of para-aortic lymph adenopathy. No evidence of dilated small bowel loops.

#### **COMMENTS:**

Right kidne y show wavy outline, may be due to chronic infection.

----- End of Report -----

Dr. Jaimin Shah

Cunsaltant Radiologist

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Generated On : 14/08/2021 15:24



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: 60 Years/Female

3603

Mobile

9099938341

# **BILATERAL MAMMOGRAM:**

Dedicated lowdose digital mammography with Craniocaudal and media lateral oblique view was performed.

Fibroglandular tissues replaced by fatty tissue.

No evidence of clustered microcalcification.

No evidence of mass or architectural distortion is seen.

No evidence of skin thickening or nipple retraction is seen.

No evidence of axillary lymphadenopathy.

### **COMMENT:**

- Fibroglandular tissues replaced by fatty tissue.( post menopausal changes)
- No significant abnormality detected. (BIRADS I).
- No direct or indirect sign of malignancy seen.

# **BIRADS Categories:**

- Need imaging evaluation.
- Negative
- 11 Benign finding
- probably benign finding.
- IV Suspicious abnormality.
- V Highly suggestive of malignancy.

The false negative mammography is approximately 10%. Management of a palpable abnormality must be based upon clinical grounds.

----- End of Report -----This is an electronically authenticated report. Cunsaltant Radiologist Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 14/08/2021 3:25:00 PM Generated On : 14/08/2021 15:25

'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad 380054: Sujarat.



Referred by

: Self

Date Patient's Id : 14/08/2021

: AM132

Age/Sex

Ref ID.

Reg. No Mobile

: 60 Years/Female

: 3603

: 9099938341

Eye Check - Up

RIGHT EYE

SP:

+2.50 -1.00

CY: AX:

92

LEFT EYE

SP:

+2.50

CY: AX: -0.75 98

Without Glasses

With Glasses

Right Eye Left Eye

6/9

6/9

6/6 6/6

Near Vision:

Right Eye - N/6, Left Eye - N/6

Fundus Examination: Within Normal Limits.

**Colour Vision:** 

Normal

Comments:

Normal

Dr.Kejal Patel MB,DO(Ophth)

Approved On : 16/08/2021 12:03:00 PM

Generated On : 16/08/2021 12:07



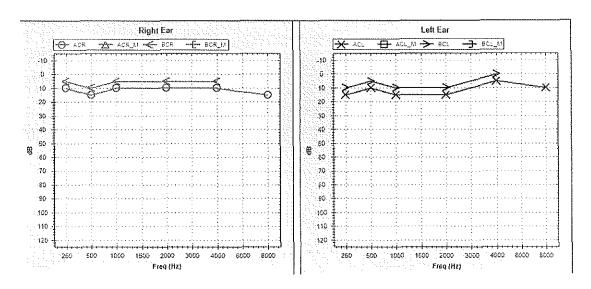


**CLIENT NAME:-AMEETA S MEHRA.** 

AGE:- 60Y/F

DATE: 14/08/2021

# **AUDIOGRAM**



MODE	,	duction	Bone Co	nduction	Colour	Threshold in dB	RIGHT	LEFT
	Maskad	UnWashed	Masked	UnWasken	Cone	Tilleshold iii db	NGIII	LLFI
IFAT		Х		>	Bkie	AIR CONDUCTION	10.5	11
RIGHT	Δ	0	С	<	Red	BONE CONDUCTION		,
NO RESPONS	E: Add	1 pelow t	he respe	ctive symb	ols	SPEECH		

#### Comments:-

Bilateral Hearing Sensitivity Within Normal Limits.

