

<b>Patient Name</b>	: Mrs.KOLHE SWATI	<b>Bill Date</b>	: 16-08-2023 08:35 AM
<b>Age / Gender</b>	: 36Y(s) 2M(s) 10D(s)/Female	<b>Collected Date</b>	: 16-08-2023 11:18 AM
<b>Lab Ref No/UHID</b>	: PS005953/P00000473542	<b>Received Date</b>	: 16-08-2023 11:18 AM
<b>Lab No/Result No</b>	: 2300090188/175037	<b>Report Date</b>	: 16-08-2023 11:36 AM
<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: EDTA WHOLE BLC
		<b>Processing Loc</b>	: RHC HInjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>HAEMOGRAM/CBC/CYTO</b>			
<b>W.B.C.Count</b>	: 8650	/ul	4000-11000
<i>Method : Coulter Principle</i>			
Neutrophils	: 58.4	%	40-75
<i>Method : Derived from WBC Histogram</i>			
Lymphocytes	: 26.6	%	20-40
Monocytes	: 7.1	%	2-10
Eosinophils	: <b>7.6</b>	%	1.0-6.0
Basophils	: 0.3	%	0.0-1.0
%Immature Granulocytes	: 0.1	%	0.00-0.10
Absolute Neutrophil Count	: 5.1	x10 <sup>3</sup> cells/ul	2-7
<i>Method : Calculated</i>			
Absolute Lymphocyte Count	: 2.3	x10 <sup>3</sup> cells/ul	1 - 3
<i>Method : Calculated</i>			
Absolute Monocyte Count	: 0.6	x10 <sup>3</sup> cells/ul	0.2-1.0
<i>Method : Calculated</i>			
Absolute Eosinophil Count	: <b>0.7</b>	x10 <sup>3</sup> cells/ul	0.02-0.5
<i>Method : Calculated</i>			
Absolute Basophil Count	: <b>0.0</b>	x10 <sup>3</sup> cells/ul	0.02-0.1
<i>Method : Calculated</i>			
R.B.C Count	: 5.1	million/ul	3.8 - 5.8
<i>Method : Coulter Principle</i>			
<b>Haemoglobin</b>	: 12.0	g/dl	12 - 15.0
<i>Method : Cyanmethemoglobin Photometry</i>			
Haematocrit	: 40.3	%	36-46
<i>Method : Calculated</i>			
MCV	: <b>79.0</b>	fl	83 - 99
<i>Method : Coulter Principle</i>			
MCH	: <b>23.5</b>	pg	27-32
<i>Method : Calculated</i>			
MCHC	: <b>29.8</b>	g/dl	31.5-34.5
<i>Method : Calculated</i>			
RDW	: <b>15.9</b>	%	11.6-14.0
<i>Method : Calculated From RBC Histogram</i>			
<b>Platelet Count</b>	: 215.0	x10 <sup>3</sup> /ul	150 - 450
<i>Method : Coulter Principle</i>			
MPV	: 10.2	fl	7.8-11
<i>Method : Coulter Principle</i>			
RBC Morphology	: Anisocytosis+		

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<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: EDTA WHOLE BLC
		<b>Processing Loc</b>	: RHC Hinjawadi

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WBC Morphology	: Eosinophilia
Platelet	: Adequate
Advise	: Serum IgE

---

\*\*\* End Of The Report \*\*\*

**Verified By**  
Shrikant.A

**Dr.POOJA PATHAK**  
Associate Consultant

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**Patient Name** : Mrs.KOLHE SWATI  
**Age / Gender** : 36Y(s) 2M(s) 10D(s)/Female  
**Lab Ref No/UHID** : PS005953/P00000473542  
**Lab No/Result No** : 2300090337-P/175037  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 05:54 PM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 06:21 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>PPBS</b> Glucose (Post Prandial) <i>Method : GOD-POD</i>	:90	mg/dL	60-140

\*\*\* End Of The Report \*\*\*

**Verified By**  
Anand

**Dr.POOJA PATHAK**  
Associate Consultant

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<b>Patient Name</b> :	Mrs.KOLHE SWATI	<b>Bill Date</b> :	16-08-2023 08:35 AM
<b>Age / Gender</b> :	36Y(s) 2M(s) 10D(s)/Female	<b>Collected Date</b> :	16-08-2023 12:24 PM
<b>Lab Ref No/UHID</b> :	PS005953/P00000473542	<b>Received Date</b> :	16-08-2023 11:18 AM
<b>Lab No/Result No</b> :	2300090337/175037	<b>Report Date</b> :	16-08-2023 01:30 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>CREATININE</b>			
Creatinine	:0.8	mg/dL	0.5 - 1.2
<i>Method : Enzymatic</i>			
<b>BUN</b>			
Urea Nitrogen(BUN)	:10.28	mg/dL	6.0 - 20.0
<i>Method : Calculated</i>			
Urea	:22	mg/dL	17.1-49.2
<i>Method : Urease</i>			
<b>CALCIUM</b>			
Calcium	:8.9	mg/dL	8.6 - 10.2
<i>Method : Arsenazo</i>			
<b>PHOSPHOROUS</b>			
Phosphorus	:3.9	mg/dL	2.7-4.5
<i>Method : Phospho Molybdate</i>			
<b>URIC ACID</b>			
Uric Acid	:4.7	mg/dL	2.6 - 6.0
<i>Method : Uricase</i>			
<b>LFT</b>			
Total Bilirubin	:0.4	mg/dL	0.3 - 1.2
<i>Method : Diazo</i>			
Direct Bilirubin	:0.1	mg/dL	0-0.4
<i>Method : Diazo</i>			
Indirect Bilirubin	:0.3	mg/dL	0.0 - 0.8
<i>Method : Diazo</i>			
Alanine Transaminase (ALT)	:24.0	U/L	<35
<i>Method : Kinetic</i>			
Aspartate Transaminase (AST)	:23.0	U/L	10.0 - 40.0
<i>Method : Kinetic</i>			
Alkaline Phosphatase	:107.0	U/L	30.0 - 115.0
<i>Method : 4NPP/AMP BUFFER</i>			
Total Protein	:7.7	g/dl	6.0 - 8.0
<i>Method : Biuret</i>			
Albumin	:4.2	g/dl	3.5-4.8
<i>Method : BCG</i>			
Globulin	:3.5	gm/dL	2.3-3.5
<i>Method : Calculated</i>			

**Patient Name** : Mrs.KOLHE SWATI  
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**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
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**Report Date** : 16-08-2023 01:51 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



A/G Ratio : 1.2

Method : Calculated

### T3-T4-TSH -

Tri-Iodothyronine, (Total T3) : 1.61 ng/ml 0.97-1.69

Method : Enhanced Chemiluminescence

Thyroxine (T4), Total : 10.0 ug/dl 5.53-11.01

Method : Enhanced Chemiluminescence

Thyroid Stimulating Hormone (Ultra). : 1.861 uIU/mL 0.58-6.88

Method : Enhanced Chemiluminescence

1.The TSH levels are subject to diurnal/circadian variation. reaching to peak level between 2 to 4 am. and at a minimum between 6 to 10 pm. The variation is to the order of 50%, hence the time when sample is collected has influence on the levels of TSH. 2.Many substances produced in central nervous system, even in healthy euthyroid individuals, may enhance or suppress TSH production in addition to the feedback effect of thyroid hormone. 3.Furthermore, although TSH levels rise and fall in response to changes in the concentration of Free T4, individuals appear to have their own setpoints and factors such as race and age also contribute to variability in TSH levels. Alterations of normal pituitary response are also common in patients with a variety of illnesses which can affect the levels of TSH. 4.Interassay variations are possible on different Immunoassay platforms.

TSH - For pregnancy the reference range is as follows -

1st trimester : 0.6 - 3.4 uIU/mL

2nd trimester : 0.37 - 3.6 uIU/mL

3rd trimester : 0.38 - 4.04 uIU/mL

\*\*\* End Of The Report \*\*\*

**Verified By**  
SOPAN

**Dr.POOJA PATHAK**  
Associate Consultant

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**Age / Gender** : 36Y(s) 2M(s) 10D(s)/Female  
**Lab Ref No/UHID** : PS005953/P00000473542  
**Lab No/Result No** : 2300090188/175037  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 11:18 AM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 05:14 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**ESR**

ESR At 1 Hour : 20 mm/hr 0 - 20

Method : Modified Westergren Method

**INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

**Verified By**  
AMOL

**Dr.POOJA PATHAK**  
**Associate Consultant**

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**Lab No/Result No** : 2300090337/175037  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 12:24 PM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 03:06 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>ELECTROLYTES (Na &amp; K)</b>			
Sodium <i>Method : Potentiometric</i>	: 143.0	mmol/L	136.0 - 145.0
Potassium <i>Method : Potentiometric</i>	: 3.8	mmol/L	3.5 - 5.1
Chloride <i>Method : Potentiometric</i>	: 102	mmol/L	98.0 - 107.0

\*\*\* End Of The Report \*\*\*

**Verified By**  
SOPAN

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Associate Consultant

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<b>Patient Name</b> :	Mrs.KOLHE SWATI	<b>Bill Date</b> :	16-08-2023 08:35 AM
<b>Age / Gender</b> :	36Y(s) 2M(s) 10D(s)/Female	<b>Collected Date</b> :	16-08-2023 02:03 PM
<b>Lab Ref No/UHID</b> :	PS005953/P00000473542	<b>Received Date</b> :	16-08-2023 11:18 AM
<b>Lab No/Result No</b> :	2300090533/175037	<b>Report Date</b> :	16-08-2023 02:21 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	URINE
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>URINE ROUTINE</b>			
<b><u>PHYSICAL EXAMINATION</u></b>			
Colour	: Yellow		
Appearance	: Slightly Turbid		
<b><u>CHEMICAL TEST</u></b>			
Ph	: 6.0		5.0-7.0
Specific Gravity	: 1.025		1.015-1.030
Albumin	: Absent		Abset
Urine Sugar	: Absent	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments/ Bilirubin	: Absent		Absent
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent
Leucocytes Esterase	: Absent		Absent
<b><u>MICROSCOPIC TEST</u></b>			
Pus Cells.	: 4-5	/hpf	0 - 5
Red Blood Cells.	: Absent	/hpf	0 - 2
Epithelial Cells.	: 2-3	/hpf	0-5
Bacteria	: Absent	/hpf	Absent
Cast	: Absent		Absent
Yeast Cells	: Absent		Absent
Crystals	: Absent		Absent
Others	: Absent		Absent

\*\*\* End Of The Report \*\*\*

**Verified By**  
Anand

**Dr.POOJA PATHAK**  
Associate Consultant

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**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 12:24 PM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 01:33 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LIPID PROFILE</b>			
Cholesterol <i>Method : Enzymatic</i>	: 196.0	mg/dL	130.0 - 220.0
Triglycerides <i>Method : Enzymatic</i>	: 176	mg/dL	35.0 - 180.0
HDL Cholesterol <i>Method : Enzymatic</i>	: 38	mg/dL	35-65
LDL Cholesterol <i>Method : Calculated</i>	: 122.8	mg/dL	10.0 - 130.0
VLDL Cholesterol <i>Method : Calculated</i>	: 35.2	mg/dL	5.0-36.0
Cholestrol/HDL Ratio <i>Method : Calculated</i>	: 5.16	--	2.0-6.2

\*\*\* End Of The Report \*\*\*

**Verified By**  
SANDEEP

**Dr.POOJA PATHAK**  
**Associate Consultant**

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**Patient Name** : Mrs.KOLHE SWATI  
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**Lab Ref No/UHID** : PS005953/P00000473542  
**Lab No/Result No** : 2300090188/175037  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 11:18 AM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 02:19 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK**

Investigation	Result	Units	Biological Reference Interval
Blood Group	: O RH POSITIVE		

\*\*\* End Of The Report \*\*\*

**Verified By**  
SOPAN

**Dr.POOJA PATHAK**  
Associate Consultant

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**Patient Name** : Mrs.KOLHE SWATI  
**Age / Gender** : 36Y(s) 2M(s) 10D(s)/Female  
**Lab Ref No/UHID** : PS005953/P00000473542  
**Lab No/Result No** : 2300090189-G/175037  
**Referred By Dr.** : HOSPITAL CASE  
**Bill Date** : 16-08-2023 08:35 AM  
**Collected Date** : 16-08-2023 11:18 AM  
**Received Date** : 16-08-2023 11:18 AM  
**Report Date** : 16-08-2023 11:51 AM  
**Specimen** : WHOLE BLOOD  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**GLYCOCYLATED HB% (HbA1C)**

Glycosylated Haemoglobin : 5.7 % 4-6.5

Method : Turbidometric Inhibition  
Immunoassay

Prediabetic : 5.7 - 6.4 %  
Diabetic : >= 6.5 %  
Therapeutic Target : <7.0 %

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Verified By**  
SOPAN

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**Associate Consultant**

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**2DECHO&DOPPLER REPORT**

**NAME: MRS. KOLHE SWATI AGE: 36 Yrs/F DATE: 16 /08 /2023**

MITRAL VALVE: has thin leaflets with normal subvalvar motion.  
No mitral regurgitation .  
AORTIC VALVE : has three thin leaflets with normal opening  
No aortic regurgitation.  
PULMONARY VALVE; NORMAL,  
LEFT VENTRICLE : is normal , has normal wall thickness, No RWMA at rest .  
Normal LV systolic function. EF - 60%.  
LEFT ATRIUM: is normal.  
RIGHT ATRIUM & RIGHT VENTRICLE: normal in size.  
TRICUSPID VALVE & PULMONARY VALVES : normal.  
Trivial TR, No PH.  
No pericardial effusion.  
M- MODE :

AORTA	LA	LVI DD	LVIDS	IVS	PW	LVEF
23mm	21mm	45mm	22mm	09mm	09mm	60%

**IMP :**

- Normal LV Systolic function. EF-60%.**
- No diastolic dysfunction**
- No RWMA at rest**
- Normal Valves and Chambers**
- IAS & IVS Intact**
- No clot / vegetation / thrombus / pericardial effusion.**



**DR. YATIN VISAVE**  
**MBBS,DMRD(RADIOLOGY)**



Grant Medical Foundation  
**Ruby Hall Clinic**  
*Pimple Saudagar*

**Name:** KOLHE SWATI .  
**Age :** 036 Years  
**Gender:** F  
**PID:** P00000473542  
**OPD :**

**Exam Date :** 16-Aug-2023 08:34  
**Accession:** 106442091943  
**Exam:** CHEST X RAY  
**Physician:** HOSPITAL CASE^^^^

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
MBBS, DMRD  
Regd. No. 090812

Date: 16-Aug-2023 11:00:01



Grant Medical Foundation

**Ruby Hall Clinic**

*Pimple Saudagar*

---

<b>Name:</b>	KOLHE SWATI.	<b>Exam Date :</b>	16-Aug-2023 09:12
<b>Age :</b>	036Y	<b>Accession:</b>	106443091943
<b>Gender:</b>	F	<b>Exam:</b>	ABDOMEN AND PELVIS
<b>PID:</b>	P00000473542	<b>Physician:</b>	HOSPITAL CASE <sup>****</sup>
<b>OPD :</b>			

---

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.

Pancreas appears normal in size and echotexture. No focal lesion is seen.

Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 11 x 4.9 cms. Left kidney measures 11.8 x 4.3 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Uterus is normal in size and echotexture. Endometrium is central. No focal lesion is seen.

Both ovaries are normal. No adnexal pathology is seen.

Visualised bowel loops are non-dilated and show normal peristalsis.

There is no ascites or significant lymphadenopathy seen.

**IMPRESSION : No significant abnormality noted.**

**Suggest : Clinical Correlation.**

**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
**MBBS, DMRD**  
**Regd. No. 090812**

---

Date: 16-Aug-2023 11:02:16

16-Aug-2023 10:02

ID:

Name: swati

Sex: F

cm

kg

Birth date:

/

mmHg

35 years

1100 Sinus rhythm

9110 \*\* normal ECG \*\*

\*\*

Medication:

Symptoms:

History:

Vent. rate 71 bpm

PR int 146 ms

QRS dur 68 ms

QT/QTc(E) int 358/380 ms

P/ORS/T axis 44/ 18/ 15 °

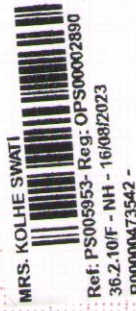
RV5/SV1 amp 1.02/ 0.60 mV

RV5+SV1 amp 1.62 mV

10 mm/mV 25 mm/s Filter: H50 D 35 Hz 10 mm/mV

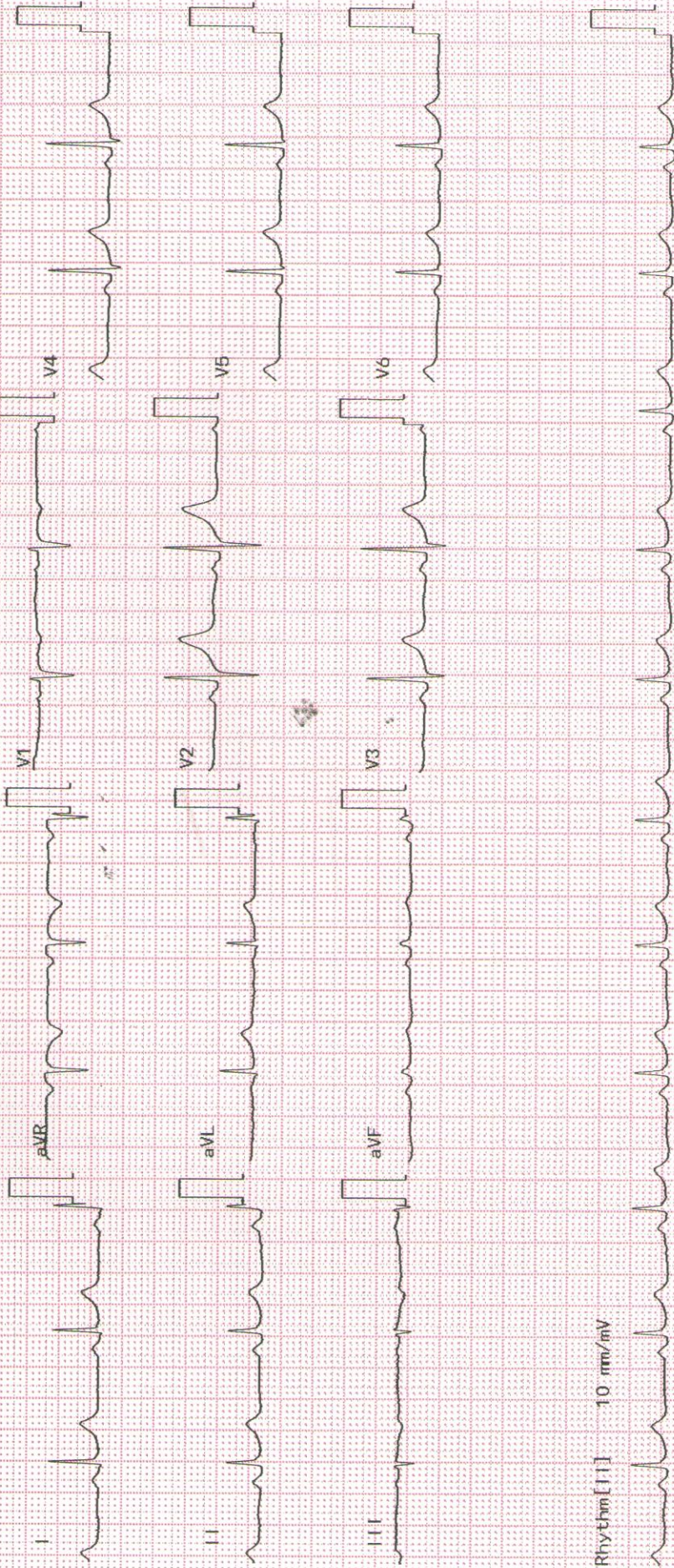
10 mm/mV

10 mm/mV



Unconfirmed Report

Reviewed by:





Grant Medical Foundation  
**Ruby Hall Clinic**  
 Hinjawadi

Rajeev Gandhi Infotech Park, MIDC, Phase No. 1, Plot No P-33, Hinjawadi, Pune - 411057.

• Ph: 020 66999999 • Email : hinjawadi@rubyhall.com • 24 hrs Helpline - 8554802253 • Website : www.rubyhall.com

**OPHTHALMOLOGY**

MRS. KOLHE SWATI



Ref: PS005953- Reg: OPS00002890  
 36.2.10/F - NH - 16/08/2023  
 P00000473542 -

NAME :

AGE :

R

L

- 1) Vision 
 unaided \_\_\_\_\_  
 c glasses 6/6.
 
6/9.  
N6.
- 2) Near Vision 
 unaided N6  
 c glasses N6
- 3) Binocular Vision (N)
- 4) Colour Vision Normal Normal.
- 5) Tension Trace.
- 6) Anterior Segment cut cut
- 7) Pupils wnll wnll
- 8) Lens clear clear
- 9) Media & Fundus \_\_\_\_\_
- 10) Remarks \_\_\_\_\_

wnll

Arday;  
 (Signature)

Date :





Grant Medical Foundation

**Ruby Hall Clinic**

Pimple Saudagar

Mrs Swati Kelhe

16/8/2018

OU

Lawine 7/

Adv:-

Resonance 7/

Dr. Anshul