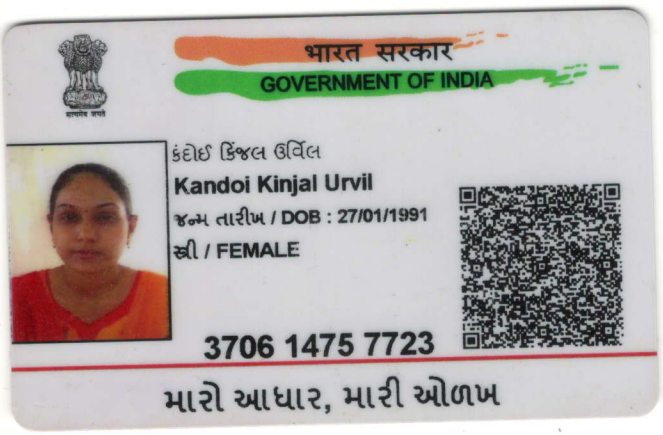
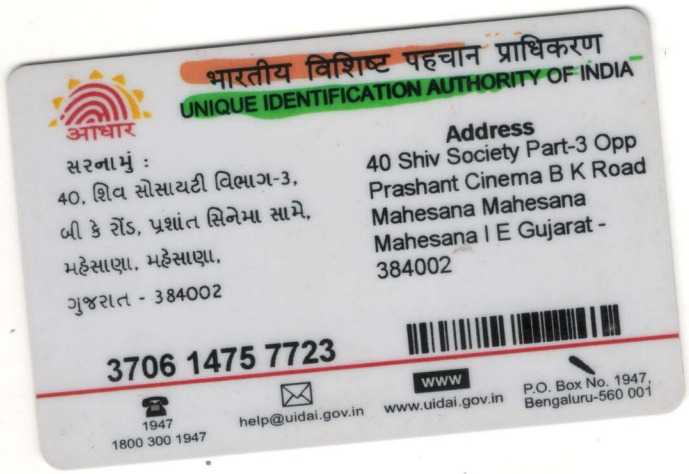
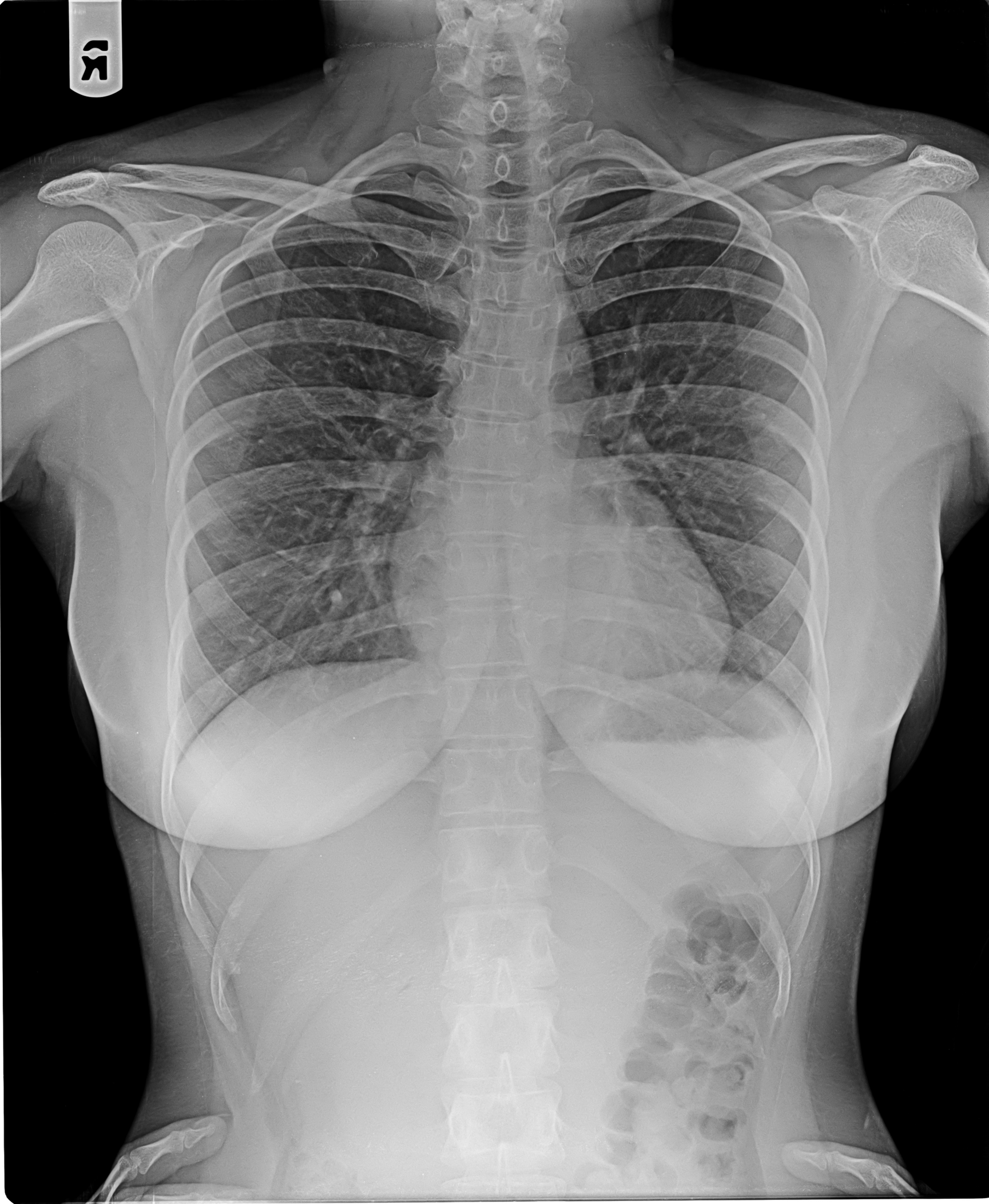

भारत सरकार
GOVERNMENT OF INDIA
કંદોઈ કિંજલ ઉર્વિલ
Kandoi Kinjal Urvil
જન્મ તારીખ / DOB : 27/01/1991
સ્ત્રી / FEMALE
3706 1475 7723
મારો આધાર, મારી ઓળખ


भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA
आधार
સરનામું :
40, શિવ સોસાયટી વિભાગ-3,
બી કે રોડ, પ્રશાંત સિનેમા સામે,
મહેસાણા, મહેસાણા,
ગુજરાત - 384002
Address
40 Shiv Society Part-3 Opp
Prashant Cinema B K Road
Mahesana Mahesana
Mahesana I E Gujarat -
384002
3706 1475 7723
1947
1800 300 1947
help@uidai.gov.in
www
www.uidai.gov.in
P.O. Box No. 1947,
Bengaluru-560 001


R

# NAVJIVAN Multi-Speciality HOSPITAL


**Dr.KAUTUK PATEL**
MBBS, DNB Emergency Medicine
IDCCM

**Dr.ROHIT PATEL**
MBBS, M.D. Anaesthesia

**Dr.ANKIT PATEL**
MBBS, DNB Anaesthesia
IDCCM

**Dr.PRAVESH PATEL**
MBBS, D.A. F.C.C.S.


KINJAL KANDOI

**AGE** –33YEARS.

**SEX** –FEMALE.

## FOR MEDICAL FITNESS

BP – 108/66 MMHG.

HR –88 / MIN.

SPO2 – 98% ON ROOM AIR.

RS – CLEAR, NO ABNORMAL SOUND.

CVS – S1 S2 PRSENT, NORMAL, NO MURMUR.

P/A – SOFT, NON-TENDER.

CNS – FULL COUNSCIOUS, NO FOCAL DEFICIT.

NO H/O SMOKING, SUBSTANCE ABUSE.

P/H : NO ANY DISEASE.

FAMILY H/O –NO ANY DISEASE.

HEIGHT –157CM; WEIGHT –51 KG; BMI –20.7

EYE EXAMINATION – NORMAL VISION

ENT EXAMINATION – NORMAL, NO DISCHARGE, PAIN,

DENTAL EXAMINATION – NO DENTAL CARIES.

GYNECOLOGIC EXAMINATION: REGULAR MENSTRUAL CYCLE

DIET ADVICE GIVEN.

REPORTS REVIEWED.

PERSON IS FIT TO JOIN.

K.A.Patel

Dr. KAUTUK A. PATEL
DNB (Emergency Medicine) G-26827
MBBS, G-49142
Intensivist & Emergency Physician,
Navjivan Multi Speciality Hospital,
2nd Floor, City Centre Complex, Mehsana-2

**SIGNATURE.**

Navjivan Multi Speciality Hospital

NAVJIVAN
Multi-Speciality
HOSPITAL

Dr.KAUTUK PATEL
MBBS, DNB Emergency Medicine
IDCCM

Dr.ROHIT PATEL
MBBS, M.D. Anaesthesia

Dr.ANKIT PATEL
MBBS, DNB Anaesthesia
IDCCM

Dr.PRAVESH PATEL
MBBS, D.A. F.C.C.S.

**Patient's Name : KINJAL KANDOI** **33 Y/F**

**Date: 13-Apr-24**

**REF. BY : NAVJIVAN ICU**

---

## X-RAY OF CHEST - PA. VIEW

Both lung fields are normal.

No e/o consolidation or focal lesion.

Both c.p angles appear clear.

Cardiac shadow appears within normal limits.

Bony thorax appears normal.

Adv: clinico-pathological correlation

Thanks for reference .

DR. CHIRAG PATEL
CONSULTANT RADIOLOGIST

Navjivan Multi Speciality Hospital

2nd Floor, City Center Complex, Radhanpur Circle, Mehsana-384002
બીજો માળ, સીટી સેન્ટર કોમ્પલેક્ષ, રાધનપુર સર્કલ, મહેસાણા-૩૮૪૦૦૨
navjivan.icu@gmail.com

24/7 Emergency

NAVJIVAN
Multi-Speciality
HOSPITAL

Dr.KAUTUK PATEL
MBBS, DNB Emergency Medicine
IDCCM

Dr.ROHIT PATEL
MBBS, M.D. Anaesthesia

Dr.ANKIT PATEL
MBBS, DNB Anaesthesia
IDCCM

Dr.PRAVESH PATEL
MBBS, D.A. F.C.C.S.

**Patient's Name: KINJAL KANDOI** **33 Y/F**
**Date: 13-Apr-24**
**REF. BY : NAVJIVAN ICU**

---

## USG ABDOMEN:

**LIVER :** Normal in size and echopattern.
No focal lesion seen. PV- 9 mm at porta
Intrahepatic billiary radicals (IHBR) are not dilated.

**GB :** No calculus, cholecystitis or mass seen.
CBD is not dilated.

**SPLEEN :** Normal in size and echopattern.
**VISUALISED PANCREAS :** Normal in size and echopattern.

**RIGHT KIDNEY** : 9.2 x 3.8 cm **LEFT KIDNEY** : 8.7 x 4.0 cm
**BOTH KIDNEYS :** Normal in size, position and echopattern.
C-M differentiation is well preserved in either side.
No calculus, hydronephrosis seen in either side.

**URINARY BLADDER :** distended with normal wall thickness. No calculus or mass seen.
**Uterus:** Normal in size and shape.
**B/L ADNAXAE** : Unremarkable

**VISUALISED BOWEL LOOPS :** unremarkable

No e/o paraaortic lymphadenopathy .
No e/o ascities .

Adv: clinico-pathological correlation.
Thanks for reference

DR. CHIRAG PATEL
CONSULTANT RADIOLOGIST

Navjivan Multi Speciality Hospital

2nd Floor, City Center Complex, Radhanpur Circle, Mehsana-384002
બીજો માળ, સીટી સેન્ટર કોમ્પલેક્ષ, રાધનપુર સર્કલ, મહેસાણા-૩૮૪૦૦૨

24/7 Emergency

NAVJIVAN
Multi-Speciality
HOSPITAL

Dr.KAUTUK PATEL
MBBS, DNB Emergency Medicine
IDCCM

Dr.ROHIT PATEL
MBBS, M.D. Anaesthesia

Dr.ANKIT PATEL
MBBS, DNB Anaesthesia
IDCCM

Dr.PRAVESH PATEL
MBBS, D.A. F.C.C.S.

| | | | |
|---|---|---|---|
| Name | Kinjal kandoi | Date | 13/04/2024 |
| Reg.No | | Age/Sex | 33/FEMALE |
| Ward | HEALTH CHECK UP | Tech | |

## Echocardiography Measurements

| LVMeasurements Method:LV(Teich) | Ptvalue | NormalValueAdults | | Ptvalue | |
|---|---|---|---|---|---|
| LVEDD(End Diastole) | 45 mm | | MitralValve E | 2 | |
| LVESD(EndSystole) | 20 mm | | A | 3 | |
| IVSED | 08 mm | (5.0-10mm) | Thickening/fibrosis Calcification | NO | |
| LVPWED | 10 mm | (6.5-11mm) | MVArea(PHT)(Trace) | 4.2 | Normalvalue: 4-6sq.cm |
| LVEF(EjectionFraction) | 60 | (60%±6.2%) | Aorticvalve: | 4 | |
| EPSS | | | AVArea | NORMAL | |
| LADimension | 28 | (19-40mm) | | | |
| AorticRoot | 38 | (20-40mm) | TRGRADE | NORMAL | |
| AorticOpening | NORMAL | | TricuspidValve | NORMAL | |
| RVsize&Function | NORMAL | | | | |
| Pericardium | Normal | | PulmonaryValve | NORMAL | |

**Conclusion:**

LVEF- 60%
No RWMA at rest
NO LVH
ALL FOUR CHAMBERS NORMAL.
ALL VALVES NORMAL.
No PULMONARY HYPERTENSION,
PAP-11 mmHg.
IVC NORMAL (1.0 CM), COLLAPSING 50% WITH RESPIRATION.

**NORMAL STUDY....**

DR. NIKUNJ KANUBHAI PATEL
MBBS, DNB, DM (Cardiology)
Consultant Cardiologist
Reg. No. G-31811

Navjivan Multi Speciality Hospital

2nd Floor, City Center Complex, Radhanpur Circle, Mehsana-384002
બીજો માળ, સીટી સેન્ટર કોમ્પલેક્ષ, રાધનપુર સર્કલ, મહેસાણા-૩૮૪૦૦૨
navjivan.jcu@gmail.com

24/7 Emergency

ID: 80
KINJAL
32 Years

13-04-2024 10:25:02 AM

| | | | |
|---|---|---|---|
| HR | : 67 | bpm | |
| P | : 86 | ms | |
| PR | : 122 | ms | |
| QRS | : 92 | ms | |
| QT/QTc | : 408/433 | ms | |
| P/QRS/T | : 63/57/15 | ° | |
| RV5/SV1 | : 1.308/0.718 | mV | |

CARDIART

Diagnosis Information:

Dr. KAUTIK A. PATEL
DNB (Emergency Medicine) G-26827
MEM [illegible]142
Intensivist & Emergency Medicine Physician,
Navjivan Multi Speciality Hospital,
2nd Floor, City Centre Complex, Mehsana-2

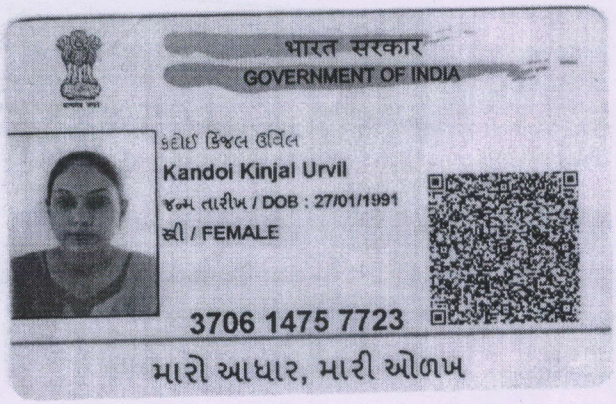
Report Confirmed by: Dr Kautik Patel

Navjivan Multi Speciality Hospital

I
II
III
aVR
aVL
aVF
V1
V2
V3
V4
V5
V6

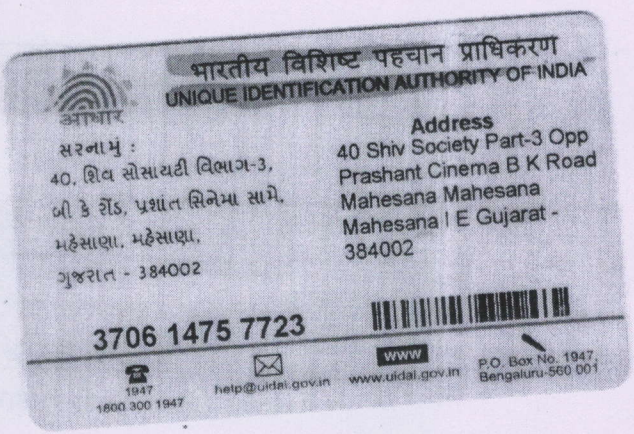
0.15~25Hz AC50 25mm/s 10mm/mV 2*5.0s ♥67 V2.2 SEMIP V1.81 NAVJIVAN ICU

BPL




Kinjal

Navjivan Multi Speciality Hospital



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

आधार

सरनामुं :
40, शिव सोसायटी विभाग-3,
बी के रोड, प्रशांत सिनेमा सामे,
महेसाणा, महेसाणा,
गुजरात - 384002

Address
40 Shiv Society Part-3 Opp
Prashant Cinema B K Road
Mahesana Mahesana
Mahesana I E Gujarat -
384002

3706 1475 7723

1947
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

P.O. Box No. 1947,
Bengaluru-560 001

Dinsal

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 12:12 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## HAEMATOLOGY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| HAEMOGLOBIN | **8.9** | gms% | 13.5 - 17.5 gm% |
| RED BLOOD CELL COUNT | **4.06** | /cumm | 4.2 - 5.6 mill/cmm |
| **RBC INDICES** | | | |
| HEMATOCRIT | **29** | % | 40-50 |
| MCV | **71.4** | fl | 80 - 98 fL |
| MCH | **21.9** | pg | 26 - 34 pg |
| MCHC | **30.6** | g/dl | 32 - 37 % |
| RDW_CV | **15.1** | / cumm | 12 - 14 % |
| TOTAL WBC COUNT | 6300 | / cumm | 4000 - 11000 /cmm |
| **WBC DIFFERENTIAL COUNT** | | | |
| NEUTROPHILS | 55.1 | % | 50 - 74 % |
| LYMPHOCYTES | 37.2 | % | 20 - 45% |
| EOSINOPHILS | 1.2 | % | 01 - 06 % |
| MONOCYTES | 07 | % | 02 - 10 % |
| BASOPHILS | 0.0 | % | 00 - 01 % |
| PLATELET COUNT | 278000 | / cumm | 1,50,000 - 4,50,000 /cmm. |
| MEAN PLATELET VOLUME | 9.3 | fl | 7.4-10.4 |
| PDW | **15.4** | fl | 10-14 |
| PCT | 0.26 | % | 0.10-0.28 |
| **ESR (ERYTHROCYTE SEDIMENTATION RATE)** | | | |
| ERYTHROCYTE SEDIMENTATION RATE | **19** | mm/1hr. | <50 years: < 15 mm/hr<br>>50 years: < 20 mm/hr |

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:19 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

* 0 4 2 4 1 3 0 0 8 *

## BLOOD EXAMINATION

| Investigation | Result |
|---|---|
| **BLOOD GROUP** | |
| ABO GROUPING | O |
| RH GROUPING | POSITIVE |

Interpretation :
Blood typing is used to determine an individual's blood group, to establish whether a person is blood group A, B, AB, or O and whether he or she is Rh positive or Rh negative. Blood typing has the following significance,

- Ensure compatibility between the blood type of a person who requires a transfusion of blood or blood components and the ABO and Rh type of the unit of blood that will be transfused.
- Determine compatibility between a pregnant woman and her developing baby (fetus). Rh typing is especially important during pregnancy because a mother and her fetus could be incompatible.

Technology : Agglutination

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:18 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| RA FACTOR | 17.1 | IU/ml | Up to 20.000 IU/mL |

Interpretation :
The rheumatoid factor (RF) test is primarily used to help diagnose rheumatoid arthritis (RA) and to help distinguish RA from other forms of arthritis or other conditions that cause similar symptoms.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

**GLUCOSE - POST PRANDIAL(PP)**

| | | | |
|---|---|---|---|
| GLUCOSE - POST PRANDIAL | 140.2 | mg/dL | Normal: 80-140<br>Impaired Tolerance :140-199<br>Diabetes mellitus: ≥200 |

Interpretation :
A postprandial (PP) glucose test is a blood glucose test that determines the amount of a type of sugar, called glucose, in the blood after a meal. A 2-hour postprandial blood glucose test measures blood glucose exactly 2 hours after eating a meal, timed from the start of the meal. By this point blood sugar has usually gone back down in healthy people, but it may still be elevated in people with diabetes.

Method: Spectrophotometry. Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:01 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*0424130008*

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| **GLUCOSE FASTING, PLASMA** | | | |
| BLOOD SUGAR FASTING | 80.9 | mg/dL | 65-110 |

Interpretation :
The fasting (F) blood glucose test is the test most commonly used to diagnose diabetes. It measures blood glucose levels after a period of fasting, usually at least eight hours without food or liquid (except water). This test is more definitive than a random test, because there is no chance that it has been influenced by recent food intake.

| | |
|---|---|
| TECHNOLOGY | Spectrophotometry |
| NOTES | Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data. |

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

Scan QR Code to check the Authencity of the report

GhPatel

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:15 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## LIPID PROFILE REPORT

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| **LIPID PROFILE REPORT** | | | |
| TOTAL CHOLESTEROL | **129.1** | mg/dL | 130-200 |
| HDL CHOLESTEROL - DIRECT | 55.1 | mg/dL | 30 - 60 |
| TRIGLYCERIDES | 70.0 | mg/dL | 60 - 170 |
| LDL CHOLESTEROL | 60.0 | mg/dL | Up To 150 |
| VLDL CHOLESTEROL | 14.0 | mg/dL | 5-40 |
| TC/HDL CHOLESTEROL RATIO | **2.3** | Ratio | 3.0-5.0 |
| LDL / HDL RATIO | 1.1 | Ratio | Less Than 5 |

Interpretation :
The lipid profile is used as part of a cardiac risk assessment to help determine an individual's risk of heart disease and to help make decisions about what treatment may be best if there is borderline or high risk. Lipids are a group of fats and fat-like substances that are important constituents of cells and sources of energy. Monitoring and maintaining healthy levels of these lipids is important in staying healthy. A lipid profile typically includes: 1. Total cholesterol — this test measures all of the cholesterol in all the lipoprotein particles. 2. High-density lipoprotein cholesterol (HDL-C) — measures the cholesterol in HDL particles; often called "good cholesterol" because it removes excess cholesterol and carries it to the liver for removal. 3. Low-density lipoprotein cholesterol (LDL-C) — calculates the cholesterol in LDL particles; often called "bad cholesterol" because it d

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:19 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| **GGT ( GAMMA GLUTAMYL TRANFERASE ), SERUM** | | | |
| GGT (GAMMA GLUTAMYL TRANFERASE) | 15.6 | IU/L | 0-30 |

Reference Range

| Males | | Females |
|---|---|---|
| | | >1 year: 6-29 U/L |
| 1-6 years: 7-19 U/L | 7-9 years: 9-22 U/L | |
| 10-13 years: 9-24 U/L | 14-15 years: 9-26 U/L | |
| 16-17 years: 9-27 U/L | 18-35 years: 9-31 U/L | |
| 36-40 years: 8-35 U/L | 41-45 years: 9-37 U/L | |
| 46-50 years: 10-39 U/L | 51-54 years: 10-42 U/L | |
| 55 years: 11-45 U/L | > or =56 years: 12-48 U/L | |

Interpretation :
The gamma-glutamyl transferase (GGT) test may be used to determine the cause of elevated alkaline phosphatase (ALP). Both ALP and GGT are elevated in disease of the bile ducts and in some liver diseases, but only ALP will be elevated in bone disease. Therefore, if the GGT level is normal in a person with a high ALP, the cause of the elevated ALP is most likely bone disease. An elevated GGT level suggests that something is damaging the liver. A low or normal GGT test result indicates that it is unlikely that a person has liver disease or has consumed any alcohol. A high GGT level can help rule out bone disease as the cause of an increased ALP level, but if GGT is low or normal, then an increased ALP is more likely due to bone disease.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

| | | | |
|---|---|---|---|
| **LIVER FUNCTION TEST** | | | |
| S. BILIRUBIN TOTAL | 0.81 | mg/dL | 0.0-1.2 |

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 3:44 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*0424130084*

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| S. BILIRUBIN DIRECT | 0.11 | mg/dL | 0.0-0.3 |
| S. BILIRUBIN INDIRECT | 0.70 | mg/dL | 0.0-1.0 |
| SGPT (ALT) | 28.1 | IU/L | 5-45 |
| SGOT (AST) | 22.5 | IU/L | 5-45 |
| ALKALINE PHOSPHATASE | 128.8 | IU/L | Women : 64 - 306<br>Men : 80 - 306<br>Children : 180 - 1200 |
| **PROTIEN, ALBUMIN & A/G RATIO** | | | |
| TOTAL PROTEIN | 7.90 | gm% | 6.0-8.0 |
| SERUM ALBUMIN | 4.20 | gm% | 3.5-5.5 |
| GLOBULIN | **3.70** | gm% | 1.8-3.6 |
| SERUM ALBUMIN/GLOBULIN RATIO | 1.14 | Ratio | 0.9-2.0 |

Interpretation :
A liver function test (LFT) may be used to screen for liver damage, especially if someone has a condition or is taking a drug that may affect the liver. The test includes detection of, 1. Bilirubin - Bilirubin is increased in the blood when too much is being produced, less is being removed, due to bile duct obstructions, or to problems with bilirubin processing. 2. AST - A very high level of AST is frequently seen with acute hepatitis. AST may be normal to moderately increased with chronic hepatitis. 3. ALT - A very high level of ALT is frequently seen with acute hepatitis. Moderate increases may be seen with chronic hepatitis. 4. Alkaline phosphatase - ALP may be significantly increased with obstructed bile ducts, cirrhosis, liver cancer, and also with bone disease. 5. Protein - Total protein is typically normal with liver disease.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

**SERUM CREATININE**

| | | | |
|---|---|---|---|
| SR. CREATININE | 0.71 | mg/dL | 0.3-1.5 |

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:01 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

* 0 4 2 4 1 3 0 0 8 *

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|

Interpretation :
The creatinine blood test measures the level of creatinine in the blood. This test is done to see how well your kidneys are working. A higher than normal level may be due to: blocked urinary tract, kidney problems, such as kidney damage or failure, infection, or reduced blood flow, loss of body fluid (dehydration), muscle problems, such as breakdown of muscle fibers (rhabdomyolysis), problems during pregnancy, such as seizures caused by eclampsia or high blood pressure caused by preeclampsia. A lower than normal level may be due to: conditions involving the muscles and nerves that lead to decreased muscle mass, malnutrition. There are many other conditions for which the test may be ordered, such as high blood pressure, diabetes, or medicine overdose.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

| | | | |
|---|---|---|---|
| **BLOOD UREA NITROGEN (BUN)** | | | |
| BLOOD UREA NITROGEN | 12.6 | mg/dL | 10-50 |

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:19 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

* 0 4 2 4 1 3 0 0 8 *

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|

Interpretation :
The blood urea nitrogen or BUN test is primarily used, along with the creatinine test, to evaluate kidney function in a wide range of circumstances, to help diagnose kidney disease, and to monitor people with acute or chronic kidney dysfunction or failure. It also may be used to evaluate a person's general health status when ordered as part of a renal panel, basic metabolic panel (BMP) or comprehensive metabolic panel (CMP). Increased BUN levels suggest impaired kidney function. This may be due to acute or chronic kidney disease, damage, or failure. BUN concentrations may be elevated when there is excessive protein breakdown (catabolism), significantly increased protein in the diet, or gastrointestinal bleeding (because of the proteins present in the blood). Low BUN levels are not common and are not
usually a cause for concern. They may be seen in severe liver disease, malnutrition, and sometimes when a person is over hydrated (too much fluid volume), but the BUN test is not usually used to diagnose or monitor these conditions.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Note : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical
and laboratory data.

**SERUM URIC ACID**

| | | | |
|---|---|---|---|
| SR. URIC ACID | 5.9 | mg/dL | 2.0 - 7.0 mg/dL |

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:16 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## BIOCHEMISTRY

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|

Interpretation:
Uric acid is a chemical created when the body breaks down substances called purines. Purines are found in some foods and drinks. Higher than normal uric acid levels in the blood is called hyperuricemia and can be caused by the over-production of uric acid in the body or the inability of the kidneys to adequately remove enough uric acid from the body. Increased concentrations of uric acid can cause crystals to form in the joints, which can lead to the joint inflammation and pain characteristic of gout. Uric acid can also form crystals or kidney stones that can damage the kidneys. Low levels of uric acid in the blood are seen much less commonly than high levels and are seldom considered cause for concern. Although low values can be associated with some kinds of liver or kidney diseases, Fanconi syndrome, exposure to toxic compounds, and rarely as the result of an inherited metabolic defect (Wilson disease), these conditions are typically identified by other tests and symptoms and not by an isolated low uric acid result.

Comment : Please correlate with clinical condition
Technology : Spectrophotometry
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:17 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## DIABETES CARE

| Investigation | Value | Unit | |
|---|---|---|---|
| **HBA1C** | | | |
| HBA1C (GLYCOSYLATED HEMOGLOBIN), BLOOD | 5.2 | % | Below 6.0 : Normal Value<br>6.0-7.0 : Good Control<br>7.0-8.0 : Fair Control<br>8.0-10.0 : Unsatisfactory Control<br>Above 10 : Poor Control |
| MEAN BLOOD GLUCOSE | 102.54 | mg/dL | Below 136 : Normal Value<br>137 - 172 : Good Control<br>173 - 208 : Fair Control<br>208 - 279 : Unsatisfactory Control<br>Above 279 : Poor Control |

Interpretation
HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Comment Please correlate with with Clinical condition
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 1:17 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

## THYROID FUNCTION TEST

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| **TFT ( T3 T4 TSH)** | | | |
| TOTAL TRIIODOTHYRONINE (T3) | **0.8** | pmol/L | Adult :0.9- 2.15 ng/ml |
| TOTAL THYROXINE (T4) | **55.0** | nmol/L | Adult: 60-135 nmol/l |
| ULTRA TSH | **12.07** | uIU/mL | Adult: 0.25 - 5.00<br>1-4 week : 1.7-9.1<br>1-12 month: 0.8-8.2<br>1-15 yr: 0.7-5.7 |

**INTERPRETATION :**

| TSH | T3 | T4 | Interpretation |
|---|---|---|---|
| High | Normal | Normal | Mild (Sub clinical) Hypothyroidism |
| High | Low or Normal | Low | Hypothyroidism |
| Low | Normal | Normal | Mild (Sub clinical) Hyperthyroidism |
| Low | High or Normal | High or Normal | Hyperthyroidism |
| Low | Low or Normal | Low or Normal | Non thyroidal illness; rare pituitary (secondary) hypothyroidism |

Interpretation :
Only TSH levels can prove to be misleading in patients on treatment. Therefore Free T3, Free T4 should be checked as it ismetabolically active. Physiological rise in Total T3 or T4 levels is seen in patients on steroid therapy and during pregnancy. Collection time for Thyroid function test is very important as per circardian variation / rhythm, the levels are at its peak between 2-4 a.m and are minimum between 6-10 pm. Thyroid abnormality should not get interpret based on single test report. It should be checked for establishment of the abnormality based on repeated investigations at intervals.

Comment : Please correlate with Clinical Condition
Technology : minividas
Notes : Clinical diagnosis should not be made on the findings of a single test result, but should integrate both clinical and laboratory data.

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 12:12 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*042413008*

## URINE ROUTINE MICROSCOPIC

| Investigation | Result | Unit | Bio. Ref. Range |
|---|---|---|---|
| **PHYSICAL EXAMINATION** | | | |
| COLOUR | Pale Yellow | | |
| APPEARANCE | Clear | | |
| SPECIFIC GRAVITY | 1.020 | | |
| PH | 6.0 | | |
| **CHEMICAL EXAMINATION** | | | |
| ALBUMIN | Absent | | |
| GLUCOSE | Absent | | |
| BILE PIGMENT | Absent | | |
| BILE SALT | Absent | | |
| KETONE | Absent | | |
| UROBILINOGEN | Normal | | |
| NITRITE | Negative | | |
| **MICROSCOPIC EXAMINATION** | | | |
| PUS CELLS | 0-2 | / HPF | |
| RBCS | nil | / HPF | |
| EPITHELLIAL CELLS | 0-2 | / HPF | |
| HYALINE CAST | Absent | | |
| GRANULAR CAST | Absent | | |
| CALCIUM OXALATE CRYSTALS | Absent | | |
| AMORPHOUS DEPOSIT | Absent | | |

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

Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY

JAINIS PATHOHUB
Fully Automated Pathology Laboratory
Excellent in Healthcare

24/7 HOURS SERVICE

Dr. Jaimini N. Patel
MBBS DCP, DNB Pathology
Consulting Pathologist
M.9909904219
E-mail : jaimini1988bd@gmail.com

21, 22, Ground Floor, City Center Complex,
Opp. Janpath Hotel, Radhanpur Circle,
Mehsana-384 002. Mo. 93277 28049

| | | | |
|---|---|---|---|
| **Patient ID** | : 042413008 | **Sample Collected on** | : 13-Apr-2024 10:35 AM |
| **Patient Name** | : MR. KINJAL KANDOI | **Report Released on** | : 13-Apr-2024 3:50 PM |
| **Age / Gender** | : 33 Years / Male | **Center Name** | : JAINIS PATHOHUB PATHOLOGY LABORATORY |
| **Ref. By** | : HEALTH CHECK UP | | |
| **Affiliation** | : HEALTH CHECK UP | | |

*0424130008*

## PAP Smear Cytology

| Investigation | Result | Unit | Bio. Ref. Interval |
|---|---|---|---|
| CYTO NO : | 00010 | | |
| SPECIMEN: | Cervical PAP smear | | |
| MICROSCOPY: | Smear studied show pedominantly superficial squamous epithelial cells with few intermediate cells.the cells have pyknotic nuclei and abundant cytoplasm.Few clusters of columnar cells noted.background shows dense accuteon in chronic inflammatory infiltrate.there is no evidence of clue cells,candida,trichomonas,dyplasia or malignancy in the present smears studied. | | |
| IMPRESSION : | Non specific Inflammatory pathology.(chronic cervicitis) | | |
| SUGGESTED: | Regular follow up | | |

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



Scan QR Code to check the Authencity of the report

DR.JAIMINI PATEL
MBBS, DCP,DNB PATHOLOGY


J93J+RMW, Manglaytan Society, Mehsana, Gujarat 384001, India

Latitude
23.6046237°

Longitude
72.3817178°

Local 09:51:37 AM
GMT 04:21:37 AM

Altitude 92 meters
Saturday, 13.04.2024


GPS Map
Camera Lite
J93J+RMW, Manglaytan Society, Mehsana, Gujarat 384001, India
Latitude
23.6046162°
Longitude
72.3816987°
Local 09:51:16 AM
GMT 04:21:16 AM
Altitude 92 meters
Saturday, 13.04.2024