

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : GEETANJALI YADAV

Age / Gender : 34 years / Female

Endo ID : 180292

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Apr 02, 2024, 11:25 a.m.

Reported Date & Time : Apr 02, 2024, 12:15 p.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	10.8	gm/dl	12.0 - 16.0
Erythrocyte (RBC) Count	4.42	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	36.0	%	42 - 52
Mean Cell Volume (MCV)	81.3	FL	78 - 100
Mean Cell Haemoglobin (MCH)	24.4	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	30.0	g/dl	32 - 36
Red Cell Distribution Width (RDW)	14.1	%	11.5 - 14.0
Total Leucocytes Count (WBC)	6670	Cell/cu.mm	4000 - 10000
Neutrophils	65	%	40 - 80
Lymphocytes	30	%	20 - 40
Monocytes	03	%	2 - 10
Eosinophils	02	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	10.6	fL	7.2 - 11.7
PCT	0.24	%	0.2 - 0.5
Platelet Count	231	10 ³ /ul	150 - 450

END OF REPORT

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

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Collected Date & Time : Apr 02, 2024, 11:25 a.m.

Reported Date & Time : Apr 02, 2024, 02:59 p.m.

Sample ID :



240930051

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

ESR	25	mm	0 - 20
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END OF REPORT

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Scanned with OKEN Scanner

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Collected Date & Time : Apr 02, 2024, 11:25 a.m.

Reported Date & Time : Apr 02, 2024, 01:27 p.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
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CLINICAL PATHOLOGY

URINE ROUTINE

General Examination

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.025		1.005-1.030

Chemical Examination

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

Microscopic Examination

Pus cells (WBCs)	1-2	/hpf	0-4
Epithelial cells	2-3	/hpf	0-5
Red blood cells	NIL	/hpf	NIL
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Absent		Absent
Other	Absent		Absent

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Reported Date & Time : Apr 02, 2024, 03:09 p.m.

Sample ID :



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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

'B' POSITIVE

Method : Gel Technique & Tube Agglutination

Medical Remark :

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

END OF REPORT

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Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
<u>BIOCHEMISTRY</u>			
<u>LIPID PROFILE</u>			
Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	146.0	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	103.8	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	41.2	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	20.76	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	84.04	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	3.54		2.6-4.9
LDL/HDL Ratio Method : Calculated	2.04		0.5-3.4

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BIOCHEMISTRY

LIVER FUNCTION TEST

Bilirubin - Total	0.67	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.20	mg/dL	0.0 - 0.30
Bilirubin - Indirect	0.47	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	28.9	U/L	5.0 - 40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	24.0	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	56.0	U/L	MALE & FEMALE
Method : IFCC with Serum			4-19 YEAR: 54-369 U/L
			20-59 YEAR: 42-98 U/L
			>60 YEAR: 53-141 U/L
Total Protein	6.98	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.10	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.88	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.42		1.5 - 2.5
Method : Calculated			

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HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)

5.2

%

> 8% Action Suggested

BLOOD

7 - 8 % Good Control

Method : Nephelometry Methodology

6 - 7 % Near Normal Glycemia

< 6% Normal level

Instrument: Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE

102.54

90 - 120 Very Good Control

121 - 150 Adequate Control

151 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

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Test Description	Value(s)	Unit(s)	Reference Range
IMMUNOLOGY			
T3-Triiodothyronine Method : CHEMILUMINOSCECE	1.63	ng/mL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINOSCECE	10.6	ug/dL	4.5 -10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINOSCECE	2.21	uIU/mL	0.35-5.50

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

****END OF REPORT****

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BIOCHEMISTRY			
Urea	35.9	mg/dL	10.0 - 40.0
Method : Uricase			
CREATININE	0.63	mg/dL	0.60 - 1.40
Method : Serum, Jaffe			

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BIOCHEMISTRY

Uric Acid	4.1	mg/dL	3.5-7.0
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Method : Uricase, Colorimetric

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BIOCHEMISTRY

Calcium Method : Arsenazo III	9.8	mg/dL	8.50 - 10.20
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BIOCHEMISTRY

Glucose fasting	94.5	mg/dL	70.0-110.0
Method : Fluoride Plasma-F, Hexokinase			

END OF REPORT

Dr. Kusum Heda
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Dr. Nishi Prasad
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Patient Name Mrs. GEETANJALI YADAV 34/F

April 02, 2024

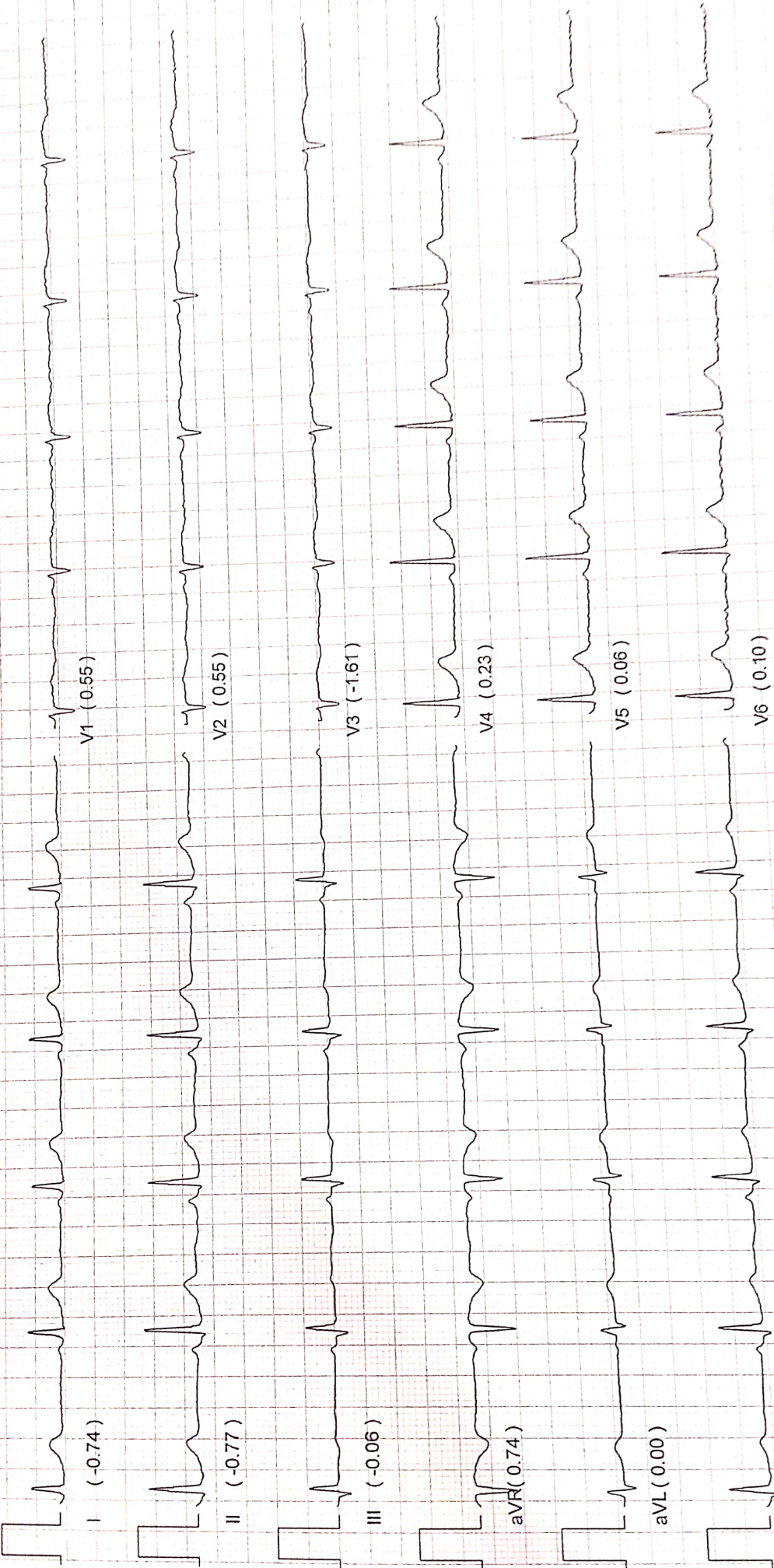
5 Seconds ECG Report

HR : 63 bpm BP : 0/0 mmHg

PR Interval: 0.09 sec RR Interval: 0.95 sec

Time: 10:10:10 P-QRS-T Axis (169)-(51)-(58) deg

QRS Duration : 0.096 Sec



INTERPRETATION

aVF (0.00)
 Normal QRS Width, Normal QT interval, QRS Axis is normal,
 Junctional/Non Sinus Rhythm suspected, PR is short, T wave inversion in Lead V3,
 ECG not normal

DR MD

NAME :-- Mrs Geetanjali Yadav AGE :-- 34 Yrs Date:-- 02-Apr-24
REF BY :- BOB

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS

Dr. ROOPA Goyal (M.D.)
Consultant Radiologist
RMC No. 200400110000

ग लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

ER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
DIAGNOSIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO-LEGAL PURPOSE.

USG ABDOMEN-PELVIS

NAME -- Mrs Geetanjali yadav AGE-- 34 Yrs Date -- 02-Apr-24

REF BY --BOB

LIVER : is normal in size 13.7 cm and shows homogeneous echotexture.
No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion.
The portal vein and common bile duct show normal caliber.

GALL BLADDER : distended and shows smooth walls. Wall thickness appears normal.
No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: normal in size and shows normal echopattern.

PANCREAS: Normal in size , shape and position. Parenchyma is homogenous.

RT.KIDNEY- Normal in size, shape and position . Measures :-- 9.0 x 4.1cm
Cortex is homogeneous. Corticomedullary differentiation is maintained
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

LT. KIDNEY- Normal in size, shape and position. Measures :-- 9.3 x 5.2cm
Cortex is homogeneous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.
A Calculus Of Size 3.2 mm is Seen.

URINARY BLADDER : is distended with smooth walls .
No evidence of diverticulum or calculus is Seen

UTERUS: Normal In Size Shape And Position. 3.6 x 3.5 x 2.4cm
Myometrium is homogenous and normal in thickness .
Endometrium Is Normal .

OVARY: both ovaries are normal in size and appear normal.

IMPRESSION :--

- Left renal calculus.
- Rest of the abdominal organs are within normal limits.

(Adv- clinical correlation , further evaluation)

Please note :-- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no usg finding is pathogenomic . All findings are only S/O , hence advice These findings are observations at the time of study. Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .

Dr. DEVENDRA GOYAL (M.D.)
F.M.J. No.: 200/250/15000
Consultant Radiologist
And Sonologist

भ्रूण लिंग परिक्षण करवाना जघन्य अपराध है । इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है ।

HOLTER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
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Consultant Radiologist & Sonologist

Roopa Goyal

(Radio-Diagnosis)

GOYAL
DIAGNOSTICS

4-D ULTRASOUND • COLOUR DOPPLER

NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948, 7976525010

NAME : GEEETANJALI
AGE : 34 YRS
SEX : FEMALE
DATE : 02-Apr-24
REF BY : BOB

INTERPRETATION SUMMARY

- . NORMAL CHAMBER DIMENSIONS
- . INTACT IAS/ IVS
- . ALL VALVES ARE NORMAL.
- . MILD TR
- . RVSP 30 MM HG
- . NO RWMA : LVEF 65 %
- . NO CLOT, VEGITATION.
- . NO PERICARDIAL EFFUSION
- . NORMAL PERICARDIUM .
- . SIZE OF MAIN PULMONARY ARTERY 19 MM

M.MODE/2D MEASUREMENTS (MM) & CALCULATIONS (ML)

LVID d	44.3	LVEDV	
LVID s	28.5	LVESV	
RVID(d)	---	SV	
IVS d	10.5	F.S	-
IVS S	14.3	EF	35%
LVPW d	9.3	C.O	65%
LVPWS	13.6	MITRAL VALVE	-
AORTIC ROOT	27.7	EF SLOPE	-
LEFT ATRIUM	29.6	OPENING AMPLITUDE	-
AORTIC CUSP OPENING	-	E.P.S.S	-

DOPPLER MEASUREMENTS & CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY(cm/sec.)	GRADIENT P/M	REGURGITATION
MITRAL VALVE	NORMAL	E- 129 A- 78	-	NIL
TRICUSPID VALVE	NORMAL	229	-	MILD
PUL VALVE	NORMAL	97	-	NIL
AORTIC VALVE	NORMAL	128	-	NIL

PULMONARY ARTERY	MITRAL VALVE AREA (BY P 1/2 T)
PEAK ACCELERATION TIME	PRESSURE HALF TIME
SYSTOLIC PRESSURE 30 MM HG	MVA

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant/Radiologist & Sonologist
RMC No. - 004507115600

भ्रूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

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Download Date: 17/07/2021

Income Tax PAN Services Unit, NSDL



गीतांजलि यादव
Geetanjali Yadav
जन्म तिथि/DOB: 05/12/1989
लिंग/ FEMALE

7252 6302 7598
VID : 9102 0927 1863 1821
मेरा आधार, मेरी पहचान

इस कार्ड को खोले / अपने घर कृपया सुरक्षित करें / लौटाएं
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e-mail: timinfo@nsdl.co.in

Dr. ROOPA GOYAL (M.B.B.S.)
Consultant Radiologist & Sonologist
RMC No-00450711560

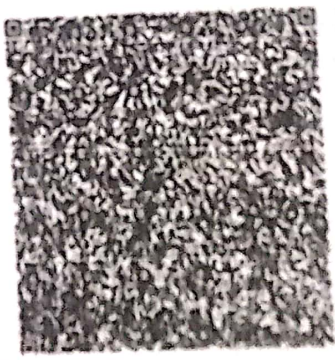


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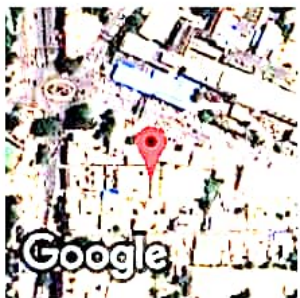


पता:
शुभर सिंह यादव, एच.नं. 63, किशंगढ़ (११०),
रुवाड़ी,
हरियाणा - 123401

Address:
O/O: Sumar Singh Yadav, H.No. 63,
Kishangarh(110), Rewari,
Haryana - 123401



7252 6302 7598
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Referral : MEDIWHEEL



Collected Date & Time : Apr 02, 2024, 03:44 p.m.

Reported Date & Time : Apr 02, 2024, 04:11 p.m.

Sample ID :



240930155

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

Blood Glucose-Post Prandial Method : Hexokinase	110.6	mg/dL	70 - 140
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****END OF REPORT****

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)

