



Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

18/11/24



Name. Priyanka. age. 37y f

OPHTHA

Health. Checkup.

Vitals :

Chief Complaints :

Vision \leftarrow 6/6
6/6 \bar{c} class. NCT \leftarrow 15
20

H/O Present Illness :

Near. vision \leftarrow N6
N6 \bar{c} class.

Past History :

Colour. vision \rightarrow normal

Investigation :

Drug Allergies : (if any)

Treatment :

findings - normal (BE)

Gurgaon

Q Block South City 11, Sohna Road, Main Sector-47, Gurgaon, Haryana Ph : 0124-4900000 Fax : 0124-2218733
E-mail : parkmedicenters@gmail.com

● West Delhi ● South Delhi ● Faridabad ● Panipat ● Karnal

the health care providers

the health care providers



ENT

Routine ENT check up,

Ear
Nose
Throat

Vitals :

Chief Complaints :

H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

[Signature]
13 | 04 | 24



Routine Health Checkup

Dental

13/4/24

Vitals :

Chief Complaints :

O/E

Spains ++

Calculus ++

H/O Present Illness :

Adv

Past History :

seabig & polynia

Investigation :

Drug Allergies : (if any)

Treatment :

l



13/9/29

DERMATOLOGY

MRX PRIYANKA
Age 37Y/F

Vitals :

Chief Complaints :

H/O Present Illness :

Adv:-

⇒ EXCELA MAX.

Past History :

Nil

LOTION

(4A)

Investigation :

Drug Allergies : (if any)

Nil

PHOTOSTABLE

⇒ Photostable gold sunscreen.

Treatment :

Cetaphil Pro 4%
Lotion
②
x 10 days

OR
fisico
la shield

⇒ R/v after 2 weeks

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13/4/24

Came for Routine check up

Vitals :

B.P: 96/60 mmHg
Weight: 61 kg
HR: 98
Pulse: 80

Chief Complaints :

LMP - 11/4/2024
cycle - 28 ± 2
Durn 5 day
flw - avg

H/O Present Illness :

Past History :

P1 + 1
A1 - missed abortion
flw medical
MX

Investigation :

Drug Allergies : (if any)

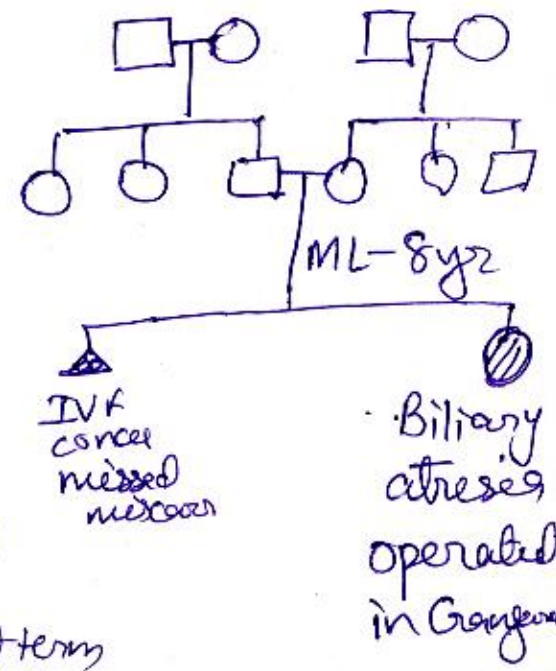
Treatment :

2020 1 - 1 - 0, LSCS at term
IVI conceived +
wt - 2.3 kg Id - healthy

↳ Baby have Biliary atresis
↓
Operated

Past Sx H/o - H/o of Dermoid cystectomy

Past Med H/o - H/o of Cervical TB, ATT intake



Inv Husband Semen Analysis after 3 day of abstinence

S. AMIT



DEPARTMENT OF MICROBIOLOGY

Patient Name : Mrs. PRIYANKA
MR No : 698525
Age/Sex : 37 Years 3 Months 9 Days / Female
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
Reporting Date : 15/04/2024
Sample ID : 271844
Bill/Req. No. : 25281507
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
URINE C/S				

NAME OF SPECIMEN	Urine (Uncentrifuged)			
ORGANISM IDENTIFIED	NO ORGANISM GROWN IN CULTURE AFTER 48 HRS OF INCUBATION AT 37 C DEGREE.			Aerobic cultu

Method : .

Note : URINE CULTURE :

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomatic compromised or diabetic patients & patients with indwelling catheters, even a smaller count of bacteria may signify infection (10000cfu/ml). Kindly correlate clinically.

***** END OF THE REPORT *****



Sample no.



MC - 4830

Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

[Signature]
Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

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DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. PRIYANKA
MR No : 698525
Age/Sex : 37 Years 3 Months 9 Days / Female
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
Reporting Date : 13/04/2024
Sample ID : 271844
Bill/Req. No. : 25281507
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
BLOOD SUGAR FASTING				
PLASMA GLUCOSE FASTING	86	60 - 110	mg/dl	GOD TRINDERS

***** END OF THE REPORT *****



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DEPARTMENT OF BIOCHEMISTRY

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 MR No : 698525
 Age/Sex : 37 Years 3 Months 9 Days / Female
 Type : OPD
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
 Reporting Date : 13/04/2024
 Sample ID : 271844
 Bill/Req. No. : 25281507
 Ref Doctor : Dr.RMO

Test	Result	Blo. Ref. Interval	Units	Method
BLOOD SUGAR 2 HR. PP				
BLOOD SUGAR P.P.	97	80 - 150	mg/dl	

***** END OF THE REPORT *****



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DEPARTMENT OF PATHOLOGY

Patient Name : Mrs. PRIYANKA
 MR No : 698525
 Age/Sex : 37 Years 3 Months 9 Days / Female
 Type : OPD
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
 Reporting Date : 13/04/2024
 Sample ID : 271844
 Bill/Req. No. : 25281507
 Ref Doctor : Dr.RMO

Test	Result	Blo. Ref. Interval	Units	Method
URINE ROUTINE AND MICROSCOPY				
PHYSICAL CHARACTERSTICS				
QUANTITY	40ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		
TURBIDITY	slightly turbid	clear		Manual Method
SPECIFIC GRAVITY	1.020	1.000-1.030		
PH - URINE	7.0	5.0 - 9.0		urinometer PH PAPER
CHEMICAL EXAMINATION-1				
UROBILINOGEN	Negative	NIL		
URINE PROTEIN	Absent	NIL		Ehrlich
BLOOD	+++	NIL	mg/dl	Protein error indicator
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL		
URINE KETONE	NIL	NIL	mg/dL	GOD-POD/Benedicts SOD.
MICRO EXAMINATION				
PUS CELL	4-6	0-5	cells/hpf	
RED BLOOD CELLS	Neumrous	0-2	cells/hpf	Microscopic
EPITHELIAL CELLS	1-3	0-5	cells/hpf	
CASTS	NIL	NIL	/lpf	
CRYSTALS	NIL	NIL	/Lpf	
OTHER	NIL			
AMORPHOUS URINE	Absent			MicroScopy

***** END OF THE REPORT *****



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DEPARTMENT OF HAEMATOLOGY

Patient Name : Mrs. PRIYANKA
 MR No : 698525
 Age/Sex : 37 Years 3 Months 9 Days / Female
 Type : OPD
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
 Reporting Date : 13/04/2024
 Sample ID : 271844
 Bill/Req. No. : 25281507
 Ref Doctor : Dr.RMO

Test	Result		Bio. Ref. Interval	Units	Method
CBC					
HAEMOGLOBIN	16.3	H	12 - 15	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	7260		4000-11000	/ μ L	LASER FLOW
DIFFERENTIAL COUNT					
NEUTROPHILS	65		40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	25		20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	07		3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	03		0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00		0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	5.15		3.5 - 5.5	millions/ μ L	ELECTRICAL
PACKED CELL VOLUME	51.7	H	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	100.4		83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	31.7	H	27 - 31	Picogrammes	CALCULATED
MEAN CORPUSCULAR HB CONC	31.5	L	33 - 37	g/dl	CALCULATED
PLATELET COUNT	128	L	150 - 450	thou/ μ L	ELECTRICAL
RDW	13.2		11.6 - 14.5	%	CALCULATED
SAMPLE TYPE FOR C.B.C	Whole Blood EDTA				

***** END OF THE REPORT *****



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DEPARTMENT OF HAEMATOLOGY

Patient Name : Mrs. PRIYANKA
MR No : 698525
Age/Sex : 37 Years 3 Months 9 Days / Female
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
Reporting Date : 16/04/2024
Sample ID : 271844
Bill/Req. No. : 25281507
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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ESR (WESTERGREN)

E.S.R. 1ST HRS.	16	0 - 20	mm/Hr.	Westergren
SPECIMEN TYPE	WHOLE BLOOD-EDTA			

Method : (Capillary photometry)

- Note** :
1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
 2. Test conducted on EDTA whole blood at 37C.
 3. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.

***** END OF THE REPORT *****



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the **health** care providers

the **health** care providers



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GROUP SUPER SPECIALITY HOSPITAL

DEPARTMENT OF IMMUNOLOGY

Patient Name : Mrs. PRIYANKA

MR No : 698525

Age/Sex : 37 Years 3 Months 9 Days / Female

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024

Reporting Date : 13/04/2024

Sample ID : 271844

Bill/Req. No. : 25281507

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
THYROID PROFILE				
TRI-IODOTHYRONINE (T3)	0.92	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	6.9	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	1.13	0.5-5.50 ,	µIU/ml	Chemiluminescence
SPECIMEN TYPE	SERUM			

Method : chemiluminescent immunoassay

Note : Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

***** END OF THE REPORT *****



Sample no.

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DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mrs. PRIYANKA
MR No : 698525
Age/Sex : 37 Years 3 Months 9 Days / Female
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
Reporting Date : 13/04/2024
Sample ID : 271844
Bill/Req. No. : 25281507
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
LFT (LIVER FUNCTION TEST)				
LFT				
TOTAL BILIRUBIN	0.8	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.4	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.4	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	19	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	10	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	63	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	6.5	6.4 - 8.0	g/dL	BIURET
ALBUMIN	3.6	3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	2.9	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.24	1.1 - 2.2		CALCULATED

SAMPLE TYPE: SERUM

***** END OF THE REPORT *****



Sample no.

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 Type : OPD
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 13/04/2024
 Reporting Date : 13/04/2024
 Sample ID : 271844
 Bill/Req. No. : 25281507
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
KFT (RENAL PROFILE)				
KFT				
SERUM UREA	30	10 - 45	mg/dL	
SERUM CREATININE	0.7	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	5.0	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	137	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.2	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	10	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	3.2	2.5 - 4.5	mg/dL	AMMONIUM
SAMPLE TYPE:	SERUM			

***** END OF THE REPORT *****



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Test	Result	Bio. Ref. Interval	Units	Method
LIPID PROFILE				
TOTAL CHOLESTEROL	154	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	83	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	40	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	16.6	6 - 32	mg/dL	calculated
LDL	97.4	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	2.44	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	3.85	2.0 - 5.0	mg/dl	calculated

SAMPLE TYPE: SERUM

Note : ATP III Guidelines At-A-Glance Quick Desk Reference

Step 1 - Determine lipoprotein levels obtain complete lipoprotein profile after 9- to 12-hour fast.

ATP III Classification of LDL, Total, and HDL Cholesterol (mg/dL):-

LDL Cholesterol Primary Target of Therapy
 <100 Optimal
 130-159 Borderline high
 >190 Very high.

Total Cholesterol
 <200 Desirable
 200-239 Borderline high
 >240 High

HDL Cholesterol
 <40 Low
 >60 High

***** END OF THE REPORT *****



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NAME	: MRS. PRIYANKA	DATE	: 13 / 4 / 2024
Age Sex	: 37 Years / Female	Inpatient No	: 698525
PERFORMED BY	: Dr. SACHIN BANSAL	UHID	: 25281507

TRANS THORACIC ECHO CARDIOGRAPHY REPORT

MITRAL VALVE

Morphology AML: Normal / Thickening / Calcification / Flutter / Vegetation / Non significant Prolapse / SAM

PML: Normal / Thickening / Calcification / Prolapse / Paradoxical Motion / Fixed.
Subvalvular deformity: Present / Absent

Doppler Normal / Abnormal

Mitral Stenosis Present / Absent

Mitral Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe / Trivial

TRICUSPID VALVE

Morphology Normal / Atresia / Thickening / Calcification / Prolapse / Vegetation / Doming.

Doppler Normal / Abnormal

Tricuspid Stenosis : Present / Absent.

Tricuspid Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe.

PULMONARY VALVE

Morphology Normal / Atresia / Thickening / Calcified / Doming / Vegetation.

Doppler Normal / Abnormal.

Pulmonary stenosis : Present / Absent

Pulmonary regurgitation : Present / Absent

AORTIC VALVE

Morphology Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening

No. of Cusps 1 / 2 / 3 / 4

Doppler Normal / Abnormal

Aortic Stenosis : Present / Absent

Aortic regurgitation : Present / Absent / Mild / Trace



Cert. No. H-2016-0369

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<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 1.0cm	(0.6-1.1cm)	LA : 2.4cm	(1.9-4.0cm)
LVID : 4.2cm	(3.7-5.6cm)	LVOT : 1.3cm	
LVPW : 0.9cm	(0.6-1.1cm)	AORTA : 2.0cm	(2.0-3.7cm)
EF : 55-60%	(55% - 80%)	IVSmotion :	Normal / Flat / Paradoxical
Any Other			

CHAMBERS:-

- LV **Normal** / Enlarged / **Clear** / Thrombus /
Contraction Normal LV shows concentric LVH, no gradient across LVOT /Inetic / Intra capillary
Regional wall motion abnormality: **Absent**/ Present
- LA **Normal** /Enlarged / Clear /Thrombus / Myxoma; **LAA: Clear** / Thrombus
- RA **Normal** / **Clear** / Thrombus, Dilated.
- RV **Normal** / Enlarged / **Clear** / Thrombus / Hypertrophied/ Dilated.
- PERICARDIUM **Normal** / Thickening / Calcification / Effusion.

COMMENTS & SUMMARY:-

- All cardiac chambers dimensions are with in normal limits.
- Global LVEF – 55-60%
- No RWMA
- NORMAL LV FUNCTION
- NO MR / NO AR / NO TR
- GOOD RV FUNCTION
- No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.

Please correlate clinically


Dr. SACHIN BANSAL
M.D.(Medicine)
D.M (Cardiology)



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PARK GROUP OF HOSPITALS : West Delhi - Gurugram - Faridabad - Sonipat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur



DEPARTMENT OF RADIOLOGY

Patient Name	Mrs. PRIYANKA	Billed Date	: 13/04/2024
Reg No	698525	Reported Date	: 13/04/2024
Age/Sex	37 Years 3 Months 9Days / Female	Req. No.	: 25281507
Type	OPD	Consultant Doctor	: Dr. RMO

X-RAY CHEST AP/PA

Bilateral lungs appears normal.

No focal lung lesion seen.

No evidence of free fluid is seen.

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

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal for patient age and view.

The domes of the diaphragms are normal in position, and show smooth outline.

To be correlated clinically

Dr. ANSHU K. SHARMA
MBBS, MD
CONSULTANT RADIOLOGIST

Dr. MANJEET SEHRAWAT
MBBS, MD, PDCC
CONSULTANT RADIOLOGIST

ALISHA KHAN
MEDICAL TRANSCRIPTIONIST

Dr. NEENA SIKKA
MBBS, DNB
CONSULTANT RADIOLOGIST

RAJNISH SHARMA
MEDICAL
TRANSCRIPTIONIST



(This is only professional opinion and not the diagnosis, please correlate clinically)
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USG WHOLE ABDOMEN

The real time, B mode, gray scale sonography of the abdominal organs was performed.

LIVER : The liver is normal in size (14.5cm), shape and echotexture. No evidence of any focal lesion. IHBR is not dilated.

GALL BLADDER : The gall bladder is well distended. No evidence any calculus or mass seen. GB wall thickness with in normal limits. No evidence of pericholecystic fluid is seen.

BILE DUCT :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

SPLEEN :The spleen is normal in size (8.9cm) and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

PANCREAS :The pancreas is normal in size, shape, contours and echotexture.No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

KIDNEYS : Right kidney measures 9.8 x 3.5 cm. Left kidney measures 10.06 x 4.0 cm. The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

URINARY BLADDER :The urinary bladder is minimally distended.

UTERUS: The uterus is anteverted. It measures 5.5 x 4.5 x 4.2 cms. in the longitudinal, anteroposterior and transverse dimensions respectively.The uterine margins are smooth and does not reveal any contour abnormalities.



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The uterine myometrium shows homogeneous echotexture.
No evidence of leiomyoma is noted. No solid or cystic mass lesion is noted.
The endometrial echo is in the midline and measures 5.3 mm.
The ovaries on the either side show normal echotexture.
No adnexal mass is seen.No cyst is seen in ovaries.
No evidence of ascites or interbowel free fluid is seen.
No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.
IMPRESSION- No obvious abnormalities noted.

To be correlated clinically.

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10mm/mV

V1

V2

aVR 10mm/mV

aVL

aVF

25mm/s 0.5-25Hz

I 10mm/mV

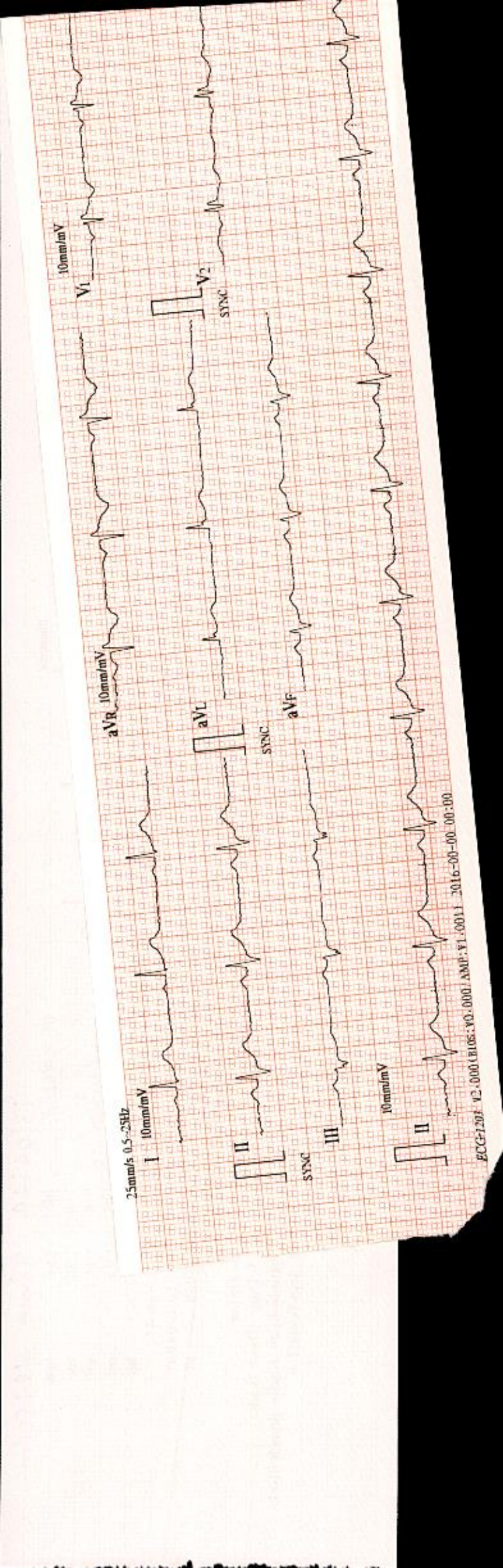
II

III

10mm/mV

II

ECG-1201 VC.000(BIOS:V0.000/AMP:V1.000) 2016-00-00 00:00



13/10/12 Time: 12:50pm

ID : 0002

Name: *Priganka*

Sex : *Female*

Age : *37y*

HR : 66 bpm

R-R : 907 ms

P-R : 163 ms

QRS : 95 ms

QT/QTc : 362/379 ms

P/QRS/T : 63/-28/47 °

RV5/SVL : 0.710/0.340 mV

RV5/SVL : 1.050 mV

Unconfirmed report verified by: _____

- _____ Sinus Rhythm
- _____ Low Voltage (Chest Leads)
- _____ Incomplete Right Bundle Branch Block
- _____ Left Axis Deviation

