

HEALTH CHECK-UP

NAME - Mrs. Savita Gupta AGE - 51Y/F DATE : 24.08.2024

ADDRESS - APOLLO .

ON EXAMINATION;

Pulse; 88/min BP -110/70mmhg Height 152cm Weight 68kg

SYSTEMS

- | | |
|--------------------|---|
| a) Respiratory | - Normal vesicular breath sounds
- No adventitious sound |
| b) Cardio Vascular | - S1 S2 normal, No murmur |
| c) Central Nervous | - Normal |
| d) Abdomen | - Soft
Liver/Spleen – Not palpable |
| e) Locomotor | - Normal |

ECG – Normal

**CHEST X-RAY – Haziness is noted in b/l lower zone.
Right hilum appear prominent.**

USG- Mild Hepatomegaly with fatty liver Grade2.

BIOCHEMICAL ANALYSIS;

HAEMOGLOBIN	12.4
ESR	18
MCV	76.8
MCH	25.1
CHOLESTEROL	270.0
SERUM TRIGLYCERIDES	179.5
LDL CHOLESTEROL	195.5
TOTAL CHOLESTEROL/HDL	6.9
LDL /HDL RATIO	5.0
BLOOD SUGAR FASTING	266.6
BLOOD SUGAR PP	328.2
SGPT	53.7
HBA1C	13.4

Advice: Regular Exercise
Low fat diet


DR. ANUJ GOYAL
MBBS, MD (Internal Medicine)
Reg. No. DMC/RJ-23794
Umkal Hospital Pvt. Ltd.

Review in OPD for.

2nd Oct/20

Savita Gupta / 51yr / Female

clt :- Chest Pain x 1yr.
(on x off)

Past history :- No surgery for same condition since
in air (no documents available)

EKG Low voltage, Ktlo T20m x 6yr

Personal history :- neg Diet
Ⓜ resp.

Family history :- not significant.

Allergic history :- Allergic to dust.

Obs history :- Post-menopausal x 1yr.

OK :- Pt is concerned & worried.

PLA :- soft & non-tender.

Ref :- BIL equal on exeg.

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CXR :- Ⓜ r. x

CNS :- NAD

DR. ANUJ GOYAL
M.B.B.S, MD (Internal Medicine)
Reg. No-DMC/R/23754
UMKAL Hospital Pvt. Ltd.

Dr. Anuj



Savita Gupta f 51 yr.
24.8.24.

VE 6/36
6/6

VEge 6/6
6/6

NV 6/6
Cantitread N-36

NVge 6/6
6/6

Colour Vg 6/6
6/6

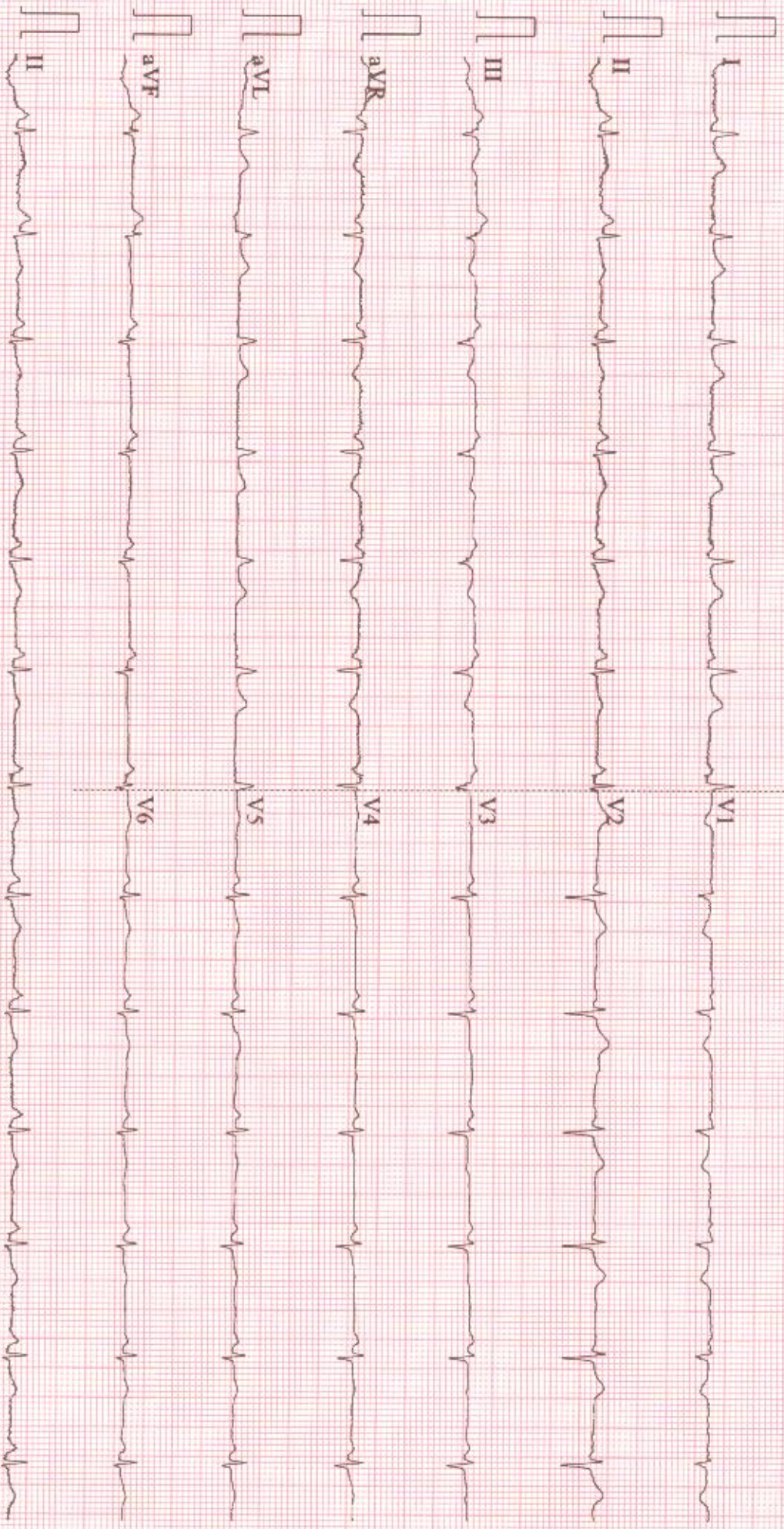
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savita gupta
Female 51 Years
Req. No. :

HR : 79 bpm
P : 95 ms
PR : 129 ms
QRS : 84 ms
QT/QTcBz : 369/424 ms
P/QRS/T : 60/-7/7 °
RV5/SV1 : 0.228/0.263 mV

Diagnosis Information:
Sinus Arrhythmia
Low Voltage

Report Confirmed by:



Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor		Order Date	: 24-08-2024 09:
		Report Date	: 26-08-2024 15:

Radiology Report

X-Ray

CHEST X-RAY PA VIEW

Finding -

Haziness is noted in b/l lower zone.

Trachea appears in the midline.

Right hilum appear prominent.

Cardiac size appears normal.

Both CP angle and cardiophrenic angle appears normal.

Diaphragm appears normal on both sides.

Visualized rib cage appears normal.

Please correlate clinically

DR ARUSHI BHARTIYA
CONSULTANT RADIOLOGIST

Technician

Verified By

UMKAL Hospital Pvt. Ltd

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Ph.: 0124-4 666 555 Mobile : 88600 77501

Emergency Ph No.: 0124 4100000

Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069113	Sample Received on	:
		Report Released on	: 24-08-2024 12:17

Laboratory Report

Hematology

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Whole Blood			
CBC WITH ESR			
HAEMOGLOBIN	12.4 *	gm/dL	13 - 18
TOTAL LEUCOCYTE COUNT	7,500	cell/cum	4000 - 11000
D.L.C = POLYMORPHS	68	%	40 - 75
LYMPHOCYTES	33	%	20 - 45
EOSINOPHILS	04	%	01 - 06
MONOCYTES	03	%	0 - 08
BASOPHILS	00	%	0 - 01
E.S.R (WINTROBE)	18 *	mm/1st	0 - 9
RED BLOOD CELLS	4.9	Millions	3.5 - 5.5
PLATELET COUNT	2.4	lakh/cum	1.5 - 4.5
P.C.V	38.0	%	35 - 50
M.C.V	76.8 *	fL	80 - 96
M.C.H	25.1 *	pg	27 - 32
M.C.H.C	32.6	%	32 - 36

End of the report

Pullani

Checked By
Lab Technician

Verified By

Dr. Priyavart Meharwal

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

UMKAL Hospital Pvt. Ltd

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Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069114	Sample Received on	:
		Report Released on	: 24-08-2024 12:18

Laboratory Report

Biochemistry

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Serum			
SERUM LIPID PROFILE 1514			
CHOLESTEROL	270.0 *	mg/dl	150 - 200
SERUM TRIGLYCERIDES	179.5 *	mg/dl	70 - 170
HDL CHOLESTEROL	38.6	mg/dl	30 - 88
LDL CHOLESTEROL	195.5 *	mg/dl	upto - 150
VLDL CHOLESTEROL	35.9	mg/dl	20 - 45
TOTAL CHOLESTEROL/HDL	6.9 *	ref.cut	upto - 4.96
LDL/HDL RATIO	5.0 *	ref.cut	upto - 4.96

Sample Type: Serum

KFT

BLOOD UREA	24.8	mg/dl	10 - 50
SERUM CREATININE	0.98	mg/dl	0.6 - 1.2
SERUM URIC ACID	5.3	mg/dl	3.5 - 7.0
SERUM SODIUM	140.0	mEq/l	135 - 155
SERUM POTASSIUM	4.0	mEq/l	3.5 - 5.5
SERUM CALCIUM	9.0	mg/dl	8.6 - 10.6

Sample Type: Serum

BLOOD SUGAR - FASTING

BLOOD SUGAR FASTING	266.6 *	mg/dl	70 - 110
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Sample Type: Serum

[Signature]

Checked By
Lab Technician

Verified By

[Signature]

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DR. PRIYAVART MEHARWA
MBBS, MD
Pathologist



Name : Mrs. SAVITA GUPTA	MR No : UH039064
Age/Gender : 51 Y/F	Visit ID : OP051667
Admitting Doctor :	Sample Collected on : 24-08-2024 09.17
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BLOOD SUGAR - PP 1465

BLOOD SUGAR PP 1465 **328.2 *** mg/dl 70 - 140

Sample Type: Serum

LFT 1513

S.G.O.T	31.6	U/L	upto - 40
S.G.P.T	53.7 *	U/L	upto - 45
S. BILIRUBIN (TOTAL)	0.63	mg/dl	0.1 - 1.2
S. BILIRUBIN (DIRECT)	0.24	mg/dl	upto - 0.30
ALKALINE PHOSPHATASE	170.0	U/L	60 - 170
TOTAL PROTEINS	7.0	g/dl	6.5 - 8.0
ALBUMIN	4.0	g/dl	3.5 - 5.5
GLOBULIN	3.0	g/dl	2.3 - 3.5
A:G RATIO	1.3:1		1.5 - 2.5

Sample Type: Serum

G.G.T.P. 1533

G.G.T.P. 18.4 U/ML upto - 47

Hematology

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
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Sample Type: Whole Blood

BLOOD GROUP (ABO & RH TYPING)

"O" POSITIVE

End of the report



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Lab Technician

Verified By



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Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069113	Sample Received on	:
		Report Released on	: 24-08-2024 12:19

Laboratory Report

Biochemistry

HBA1C 1510

Test Name	Value	Unit	Bio Ref.Interval
HbA1c (Glycated Haemoglobin)	13.4	%	4.0 - 6.2

REMARKS-

In vitro quantitative determination of HbA1c in whole blood is utilized in long term monitoring of glycemia. The HbA1c level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose. It is recommended that the determination of HbA1c be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy. Results of HbA1c should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

The American Diabetes Association(ADA) recommendations are summarized as below:

<u>Ref Range for HBA1c (In %):</u>	<u>HbA1c goals in treatment of diabetes:</u>
Non diabetic Adults (Age ≥ 18 years) < 5.7	Ages 0-6 years: 7.6% - 8.4%
At risk (Pre-Diabetic) : 5.7- 6.4	Ages 6-12 years: <8%
Diagnosing Diabetes: ≥ 6.5	Ages 13-19 years: <7.5%
	Adults: <7%

End of the report

Palla

Checked By
Lab Technician

Verified By

Dr. Priyavart Meharwa

DR. PRIYAVART MEHARWA
MBBS, MD
Pathologist

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Emergency Ph No.: 0124 4100000

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Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069113	Sample Received on	:
		Report Released on	: 24-08-2024 12:20

Laboratory Report

Biochemistry

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Urine			
URINE SUGAR PP			
Urine Sugar PP	(+)		
Sample Type: Urine			
URINE SUGAR FASTING	(++)		

CLINICAL PATHOLOGY

<u>Test Description</u>	<u>Result</u>	<u>Units</u>	<u>Ref Range</u>
Sample Type: Urine			
URINE ROUTINE & MICROSCOPIC 1383			
COLOUR	P.YELLOW		
APPEARANCE	CLEAR		
SPEC.GRAVITY	1.015		
REACTION	6.0		
ALBUMINE	NIL		
SUGAR	(++)		
KETONE BODIES	NIL		
BLOOD	NIL		
LEUKOCYTES	NIL		
NITRITE	NIL		
UROBILINOGEN	NIL		
MICROSCOPIC EXAM	.		

Fulla

Checked By
Lab Technician

Verified By

DR. PRIYAVART MEHARWAL

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

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Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069113	Sample Received on	:
		Report Released on	: 24-08-2024 12:20

PUS CELLS	2-3	/HPF	0 - 05
RBC CELLS	NIL	/HPF	0 - 02
EP CELLS	1-2	/HPF	0 - 05
CASTS	NIL		
CRYSTALS	NIL		
BACTERIA	NIL		
OTHER	NIL		

End of the report



Checked By
Lab Technician

Verified By



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DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist



Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069116	Sample Received on	:
		Report Released on	: 24-08-2024 12:43

Laboratory Report

Hematology

PERIPHERAL BLOOD SMEAR

SMEAR SHOWS NORMOCYTIC NORMOCHROMIC PICTURE OF RBC'S WITH MILD ANISOPOIKILOCYTOSIS.
WBC'S SERIES SHOWS NORMAL IN COUNT AND MORPHOLOGY.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.

End of the report

Falguni

Checked By
Lab Technician

Verified By

Priyavart

DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

UMKAL Hospital Pvt. Ltd

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Ph.: 0124-4 666 555 Mobile : 88600 77501
Emergency Ph No.: 0124 4100000

Mrs. SAVITA GUPTA



1107559

51 Years/Female

Panel : Umkal Hospital
 Quality Care Affordable For All
 122022

Referred By : :-

Analysed:
 Reported:
 Status:

24 Aug 2024 06:03 PM
 24 Aug 2024 06:03 PM
 Final

DEPARTMENT OF IMMUNOASSAY

Test Name	Value	Unit	Bio Ref.Interval
TFT (Thyroid Function Test) Total			
Triiodothyronine, Total (T3) <small>(Serum, CMA)</small>	133	ng/dL	40-181
Thyroxine, Total (T4) <small>(Serum, CMA)</small>	8.53	ug/dL	5.5-11.0
TSH Ultra Sensitive <small>(Serum CMA)</small>	3.53	µU/ml	0.35-5.5

Comment

T₃ or 3,5,3-triiodothyronine is a hormone synthesized and secreted from the thyroid gland, and formed by periphenyl iodination of thyroxine (T₄). The determination of it in serum is essential in assessing thyroid functions. T₃ is secreted by thyroid glands and circulates in the blood stream, mostly bound to the plasma protein, thyroxin binding globulin (TBG) and prealbumin and albumin.

T₄ or Thyroxine or 3,5,3,5-tetraiodothyronine is a hormone synthesized and secreted by the thyroid gland and plays an important role in regulating metabolism. In the peripheral tissues it act as a prohormone which is further metabolized to another most active thyroid hormone, triiodothyronine (T₃) and other inactive metabolites such as reverse T₃.

TSH or Thyroid-stimulating hormone is a hormone synthesized and secreted by Pituitary gland. TSH is glycoprotein with two non-covalently bound alpha and beta subunits. The beta subunit of TSH is unique, which results in the specific biochemical and immunological properties of this hormone. The ability to quantitate circulating levels of TSH is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.

Reference Ranges for T₃, T₄ and TSH (Age Wise and During Pregnancy):

Age	Total T ₄ (ug/dl)
0 - 6 days	11.8 - 22.6
1w - 2w	9.9 - 16.6
1 - 4 months	7.2 - 14.4
4 months - 1 years	7.8 - 16.5
1 - 5 years	7.3 - 15.0
5 - 10 years	6.4 - 13.3
10 - 15 years	5.6 - 11.7
15 - 60 years (Male)	4.6 - 10.5
15 - 60 years (Female)	5.5 - 11.0
>60 years	5.0 - 10.7

Age	Total T ₃ (ng/dl)
0 - 3 days	106 - 170
4 days - 11 months	105 - 235
4 - 5 years	105 - 269
6 - 10 years	94 - 241
11 - 15 years	82 - 215
16 - 20 years	80 - 210
20 - 50 years	70 - 204
50 - 90 years	40 - 181

Age	TSH (µU/ml)
0 - 4 days	1 - 39.0
5 days - 90 days	1.5 - 9.1
91 days - 20 years	0.7 - 6.4
21 - 54 years	0.35 - 5.5
>54 years	0.5 - 5.4

Pregnancy Trimester	TSH (µU/ml)
First Trimester	0.10 - 2.5
Second Trimester	0.20 - 3.0
Third Trimester	0.30 - 3.5

*** End Of Report ***

UMKAL Hospital Pvt. Ltd

A-520, Sushant Lok-I, Gurugram- 122 002

Ph.: 0124-4 666 555

Emergency Ph No.: 0124 410000



Dr. Shweta, MD Pathology
 Consultant Pathologist



Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor		Order Date	: 24-08-2024 09:49
		Report Date	: 24-08-2024 11:15

Radiology Report

Ultrasound

ULTRASOUND WHOLE ABDOMEN

- Liver :** Liver is enlarged in size measuring 169 mm with fatty liver Grade II.
No focal lesion seen. No intrahepatic biliary radicle dilatation seen.
- Gall Bladder:** The Gall Bladder is well distended, No echoreflexive calculi seen.
Gall Bladder wall thickness normal. CBD and Portal vein are normal.
- Pancreas :-** The pancreas is normal in size , shape and echotexture.
No Peripancreatic collection seen.
- Kidneys :** **Right kidney:-** is normal in size ,shape & position.
Echotexture of sinus & cortex normal. No calyceal dilatation seen.
No calculus/mass lesion seen.Corticomedullary differentiation maintained.
Left kidney:- is normal in size ,shape & position.
Echotexture of sinus & cortex normal. No calyceal dilatation seen.
No calculus/mass lesion seen.Corticomedullary differentiation maintained
- Spleen :** The Spleen is normal in size ,shape and echotexture.
- U Bladder :** Urinary bladder is partially filled.
No free fluid seen. No collection seen.

IMPRESSION : Mild Hepatomegaly with fatty liver Grade II.
Please correlate clinically.

DR ARUSH BHARTIYA
CONSULTANT RADIOLOGIST

Technician

Verified By

24/Aug/2024

11:00:19

SAVITA 51/F OPD MED

B Res-L G 47 %
TEI D 225 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/Aug/2024

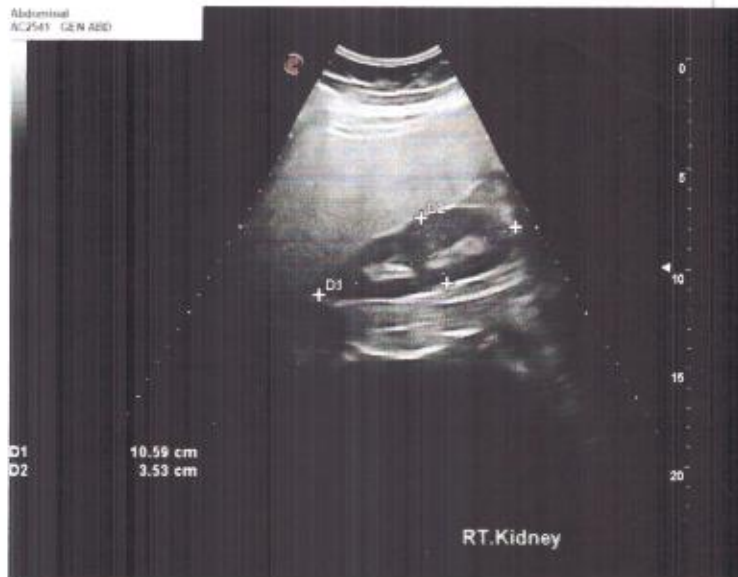
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SAVITA 51/F OPD MED

B Res-L G 47 %
TEI D 225 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/Aug/2024

11:01:05

SAVITA 51/F OPD MED

B Res-L G 47 %
TEI D 225 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/Aug/2024

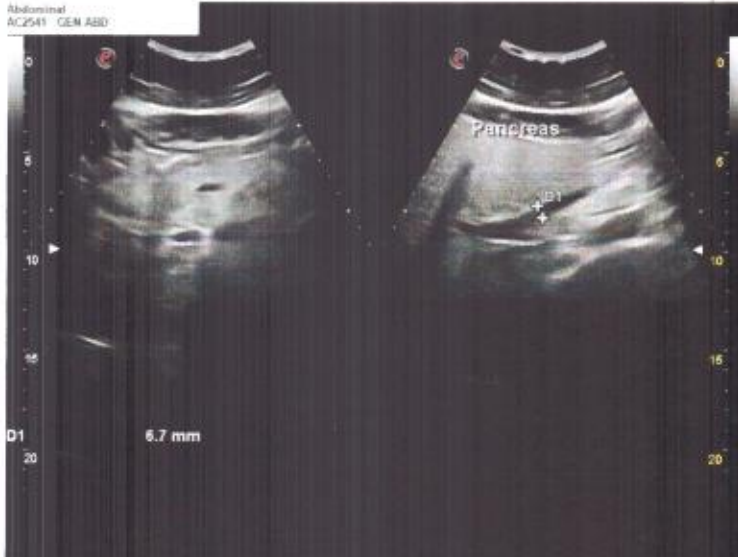
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SAVITA 51/F OPD MED

B Res-L G 47 %
TEI D 225 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/Aug/2024

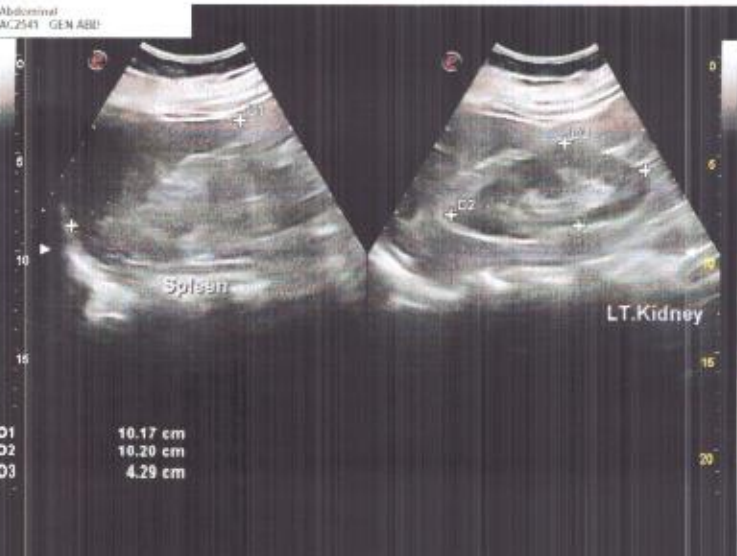
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SAVITA 51/F OPD MED

B Res-L G 47 %
TEI D 225 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/Aug/2024

11:08:41

SAVITA 51/F OPD MED

B Res-L G 30 %
TEI D 197 mm X/M C1/1
PRC 11/2/20 PRS 3

P 100% MI 1.1
TIS 0.1

Abdominal
AC2541 GEN ABD



24/8/24
1:30pm

Savitri Gupta.

Age:- 58 yrs/F

- L2 P2 (normal)
- Menopause from last 6 yrs back.
- No any h/o vaginal discharge or heavy bleeding
- Explained procedure to the patient. Informed consent done & all aseptic techniques.

Name	: Mrs. SAVITA GUPTA	MR No	: UH039064
Age/Gender	: 51 Y/F	Visit ID	: OP051667
Admitting Doctor	:	Sample Collected on	: 24-08-2024 09:17
Lab ID No	: LAB069115	Sample Received on	:
		Report Released on	: 26-08-2024 12:46

Laboratory Report

CYTOLOGY

PAP SMEAR

Smear are of low cellularity showing intermediate and parabasal squamous epithelial cells in the background of mild inflammatory cells infiltrate. Few metaplastic cells seen. No Endocervical cells seen. Negative for Intraepithelial lesion or malignancy.

End of the report



Checked By
Lab Technician

Verified By



DR. PRIYAVART MEHARWAL
MBBS, MD
Pathologist

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TRANSTHORACIC ECHOCARDIOGRAPHY

Name: Mrs. Savita Gupta

Age / Sex: 51Y/F

Referred by: MED

Reason: To evaluate cardiac status

MR No: UH039064

LAB No. : OP051667

Date: 24/08/2024, Time: 01:10pm

Echocardiography done on Digital Mylab X7 with AI Technology.

	VALUES	NORMAL RANGE		VALUES	NORMAL RANGE
AORTA	23	17-40mm	IVS (ed)	8.7	06-11mm
			(es)	10.6	
LT. ATRIUM	37	17-40mm	PW (ed)	8.6	06-11mm
			(es)	10.5	
RT. VENTRICLE	29	15-30mm	EF	53%	50-80%
LT. VENTRICLE (ed)	44	35-55mm	FS		28-42%
(es)	32				

MORPHOLOGICAL DATA:-

MITRAL VALVE:- Normal

AORTIC VALVE:- Normal

TRICUSPID VALVE:- Normal

PUL. VALVE:- Normal

RT. VENTRICLE:- Normal

LT. VENTRICLE:- Normal

VENT. SEPTUM:- Normal

PUL. ARTERY. Normal

AORTA:- Normal

RT. ATRIUM:- Normal

LT. ATRIUM:- Normal

MR.SAVITA GUPTA 51YRS/F/MED/OP051667

2D ECHOCARDIOGRAPHY AND COLOR DOPPLER FINDINGS:-

Normal LV size and function with estimated LVEF of 53%. No Regional Wall Motion Abnormality. Right Atrium & Left Atrium is normal. Right Ventricle is normal. Grade I left ventricular diastolic dysfunction present. Mild Tricuspid Regurgitation with calculated RVSP of 27mmHg+RAP. No Mitral Regurgitation, No Aortic Regurgitation. No LA/LV clot or pericardial effusion.

COLOR FLOW MAPPING: -

No Mitral Regurgitation.
No Aortic Regurgitation.
Mild Tricuspid Regurgitation with calculated RVSP of 27mmHg+RAP.

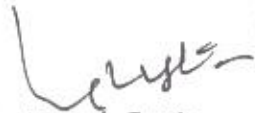
DOPPLER STUDIES: -

MV E: 0.71m/sec, A: 0.83m/sec.
AV: 1.19m/sec.
TV: Normal
PV: Normal.

IMPRESSION: -

Heart Rate 72 bpm.

1. Normal LV size and function with estimated LVEF of 53%.
2. No Regional Wall Motion Abnormality.
3. RA, LA, RV are normal.
4. Grade I left ventricular diastolic dysfunction present.
5. Mild Tricuspid Regurgitation with calculated RVSP of 27mmHg+RAP.
6. No Mitral Regurgitation.
7. No Aortic regurgitation.
8. No LA/LV clot or pericardial effusion.


Dr. Umesh Gupta
MD, DM (Cardiology)
MACCP, FICA (USA)
Chief Cardiologist

