



24632 140924

Name : MRS. CHITRA ARYA	Registration ID : 24632	Sample Collection : 14/09/2024 11:06:11
Age/Sex : 44 Yrs. / F	Printed : 16/09/2024 16:42:18	Sample Received : 14/09/2024 11:06:11
Ref. By : BANK OF BARODA	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 16/09/2024 10:52:43

**COMPLETE BLOOD COUNT**

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 12.6	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 4.44	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 38.0	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 85.6	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 28.4	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 33.2	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 14.00	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 7000	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 62	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 30	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 06	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: <b>149000</b>	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 13	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 16/09/2024 10:52:43)



*Signature*  
**Dr. Santosh Khairnar**  
 M.D. (Pathologist)  
 Reg. No.-2000/08/2926





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----- End Of Report -----



NABL M(ELT)-00683

  
**Dr. Santosh Khairnar**  
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### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 79	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl
<i>Method: GOD-POD</i>			
Fasting Urine Glucose	: Absent		Absent
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 71	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl
PP Urine Glucose	: Absent		Absent

Test Done on - Automated Biochemistry Analyzer (EM 200)

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### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: <b>5.20</b>	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10
<i>EDTA Whole Blood, Method: HPLC</i>			
Estimated Average Glucose (eAG)	: 102.54	mg/dl	65.1-136.3 mg/dL mg/dl
<i>EDTA Whole Blood, Method: Calculated</i>			

#### Interpretation:

- The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- To estimate the eAG from the HbA1c value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$ .
- Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 16/09/2024 10:54:17)



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**BLOOD GROUP**


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'O' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 16/09/2024 10:54:38)

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**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 148	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 85	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 59	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 72.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 17.0	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 1.2		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 2.5		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

*Test Done on - Automated Biochemistry Analyzer (EM 200).*

**Interpretation**

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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Report Released : 16/09/2024 10:56:46

Ref. By : BANK OF BARODA

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**LIVER FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.43	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.11	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.32	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 18.7	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 26	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 75	IU/L	42-98 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 7.5	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 3.9	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: <b>3.6</b>	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.08		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 23	U/L	0-38 U/L

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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 15.23	mg/dl	13-40 mg/dl

*Serum, Method: Urease - GLDH*

Blood Urea Nitrogen	: 7.12	mg/dl	5-18 mg/dl
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*Test Done on - Automated Biochemistry Analyzer (EM 200)*
*\*All Samples Processed At Excellas Clinics Mulund Centre*
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**SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.53	mg/dl	0.60-1.1 mg/dl

*Serum, Method: Enzymatic*
*Test Done on - Automated Biochemistry Analyzer (EM 200).*
*\*All Samples Processed At Excellas Clinics Mulund Centre*
*(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 16/09/2024 10:57:05)*
**SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 2.73	mg/dl	2.6-6.0 mg/dl

*Serum, Method: Uricase - POD*
*Test Done on - Automated Biochemistry Analyzer (EM 200).*
*(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 16/09/2024 12:28:28)*


*Signature*  
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**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 13.43		5-20

Serum, Method: Calculated

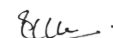
**NOTE:**

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

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Ref. By : BANK OF BARODA      Sent By : Arcofemi Healthcare Pvt Ltd

**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.2	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 10.95	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 1.84	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			


Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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**EXAMINATION OF URINE**

Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity :	20.	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	6.0		4.5 - 8.0
Specific Gravity :	1.010		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells :	1-2	/ hpf	
Pus cells :	1-2	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent


sample type:Urine

Method:Visual and Microscopic

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**X RAY CHEST PA VIEW**

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Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

**IMPRESSION:**

**No significant abnormality detected.**



**Dr. Reshma Gokran**  
MD (Radiologist)  
Reg. No-2009/09/3296





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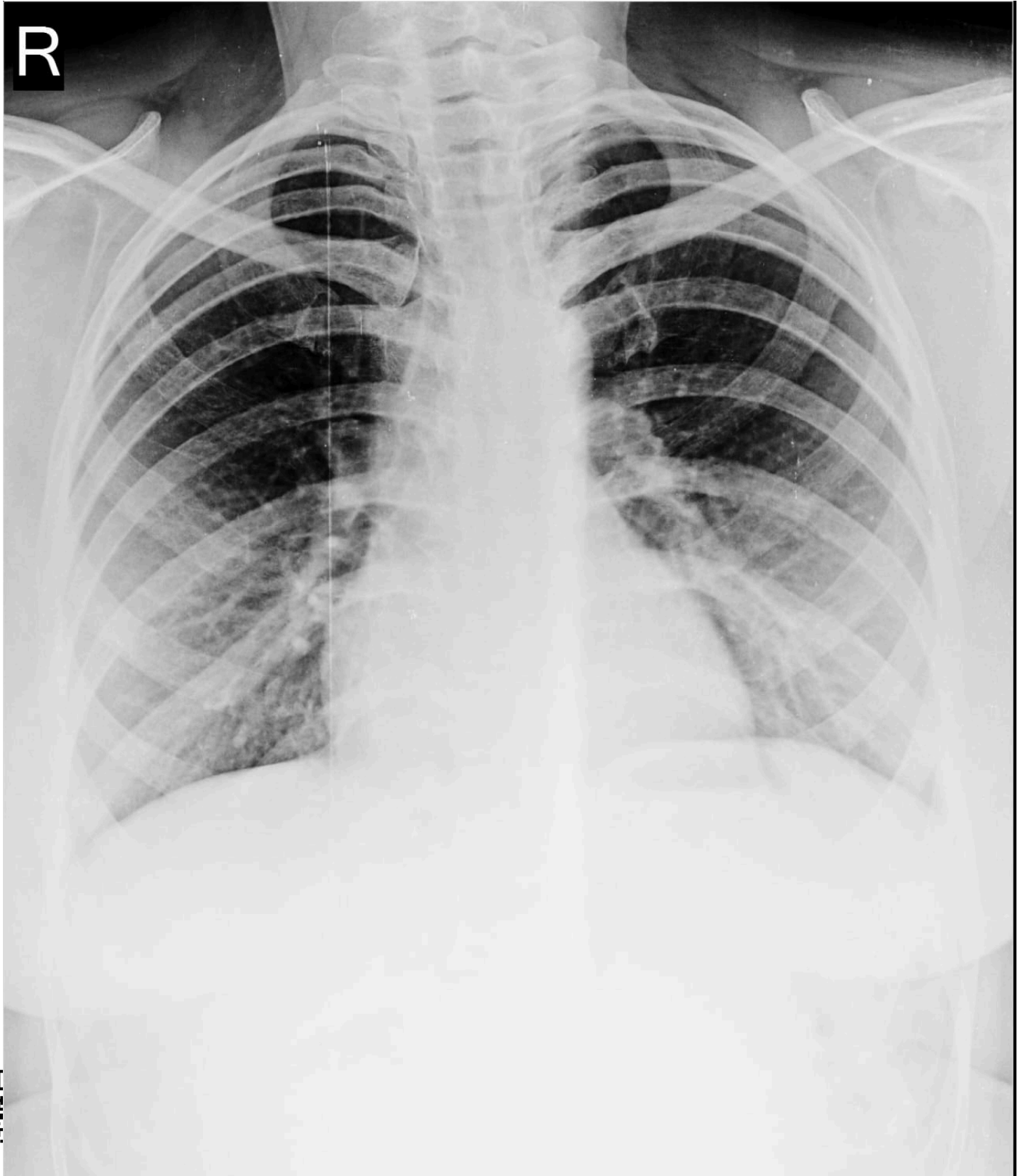
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Sent By : Arcofemi Healthcare Pvt Ltd



MRS. ARYA CHITRA. AGE:-44YRS/FEMALE. R09 CHEST PA 14-Sep-24 10:57 AM

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71



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**USG ABDOMEN & PELVIS - FEMALE**

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**Liver:-** is normal in size, shape and echotexture. No focal or diffuse lesion is seen.  
The portal and hepatic veins are normal. There is no IHBR dilatation seen.

**Gall Bladder:-** is normally distended. No calculus or mass lesion is seen.  
No GB wall thickening or pericholecystic fluid is seen.  
CBD is normal.

**Pancreas:-** is normal in size, shape and echotexture. There is no focal lesion seen.

**Spleen:-** is normal in size (7.5 cms) and echotexture. No focal lesion is seen.

**Kidneys:-** Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 9.2 x 4.1 cms.

Left kidney – 9.0 x 4.6 cms.

**Urinary Bladder:-** is well distended and shows normal wall thickness.  
There is no intraluminal lesion within.

**Uterus:-** is retroverted, normal in size and measures 6.1 x 6.1 x 5.5 cms **and shows heterogeneous echotexture and shows a fibroid measuring 14 x 16 mm in anterior myometrium.**

ET : 8 mm

**Ovaries:-** appear normal in size, shape & show normal follicular pattern.

Right ovary measures – 2.0 x 1.9 cms.

Left ovary measures – 2.2 x 1.9 cms.

Both adnexae appear normal. No e/o of free fluid noted in POD.

No ascites is seen. No significant lymphadenopathy is seen.

**IMPRESSION:**

- **Heterogeneous echotexture of uterus.**
- **Uterine fibroid.**

*Thanks for the Referral*



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**USG BOTH BREAST**

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- Both breasts show normal fibroglandular & fibro fatty parenchyma.
- There is no solid, cystic lesion or abnormal dilatation of ducts noted on either.
- No significant axillary lymphadenopathy is seen.

**IMPRESSION :**

- **No significant abnormality is seen**

*Thanks for referral*

BIRADS CATEGORY : (0 = requires additional evaluation , 1 = Negative , 2 = benign findings , 3 = probably benign findings, 4 = suspicious abnormality , 5 = highly suggestive of malignancy).

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**OPHTHALMIC EVALUATION**

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<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

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**CERVICAL CYTOLOGY REPORT**

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**PAPANICOLAOU SMEAR (CONVENTIONAL)**

Specimen :- 2 unstained air dried smear received

Stained with papanicolaou method and examined.

Smear shows :

Many superficial, intermediate squamous epithelial cells and few endocervical cells.

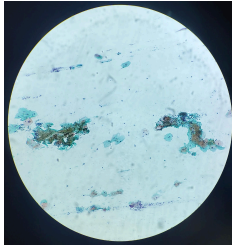
Plenty of polymorphonuclear cells inflammatory infiltrate seen in the background.

No cellular atypia or malignancy noted.

- IMP: Inflammatory pap smear.

The smears are reported using bethesda system for cervical cytology(2014)

Interpretation(s)



(Collected At: 14/09/2024 11:06:11, Received At: 14/09/2024 11:06:11, Reported At: 14/09/2024 15:17:24)

----- End Of Report -----



## MEDICAL EXAMINATION REPORT

Name	Mr./Mrs./ Miss	Aryy	
Sex		Male/ Female <input checked="" type="checkbox"/>	
Age (yrs.)	44	UHID :	
Date		14 / 09 / 2024	Bill No. :
<b>Marital Status</b>	Married/ No. of Children / Unmarried/ Widow : ①		
<b>Present Complaints</b>	- no complaints		
<b>Past Medical History</b>	Surgical : - no		
<b>Personal History</b>	Diet : Veg <input checked="" type="checkbox"/> / Mixed <input type="checkbox"/> Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> / no Any Other		
<b>Family History</b>	Father =	HT / DM / IHD / Stroke / Any Other → Passed away	
	Mother =	Mother = HT / DM / IHD / Stroke / Any Other → on Rx	
	Siblings =	Siblings = HT / DM / IHD / Stroke / Any Other → no	
<b>History of Allergies</b>	Drug Allergy } no Any Other		
<b>History of Medication</b>	For HT / DM / IHD / Hypothyroidism } no Any Other		
<b>On Examination (O/E)</b>	G. E. : NAD R. S. : clear C. V. S. : normal ⊕ C. N. S. : conscious, alert P/A : soft NT Any Other Positive Findings : NAD		

Height	161	cms	Weight	67.8	Kgs
BMI	26.2				
Pulse (per min.)	82/min		Blood Pressure (mm of Hg)		110/70 mm of Hg
S P 02 - 98 - 1. ON RA			Gynaecology		
Examined by	Dr.				
Complaint & Duration					
Other symptoms (Mict, bowels etc)					
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____				
Obstetric History					
Examination :					
Breast					
Abdomen					
P.S.					
P.V.					
Gynaecology Impression & Recommendation					
Recommendation	EXCELLAS CLINICS PVT. LTD. B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080				
Physician Impression					
Examined by :	- Overweight = To Reduce Weight - Underweight = To Increase Weight				

Ref.By : MEDIWHEEL

Protocol : BRUCE

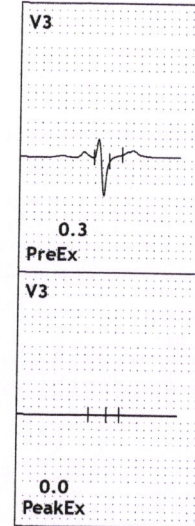
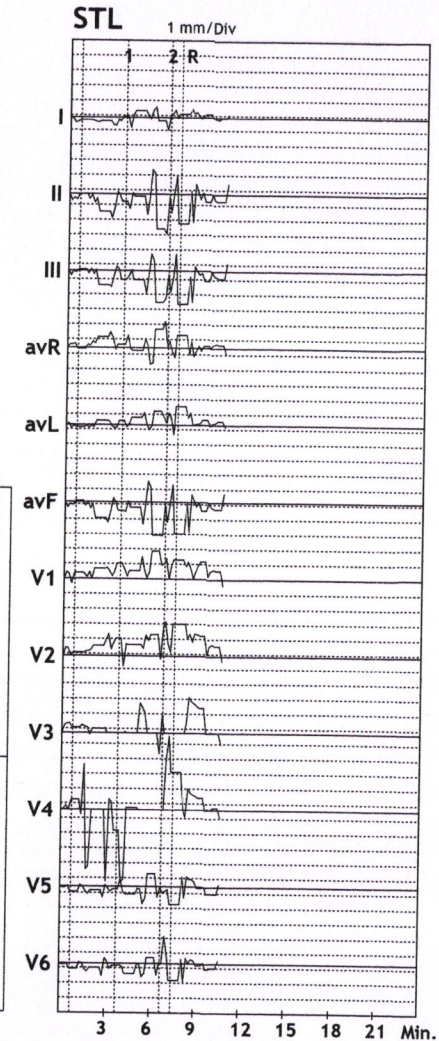
Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
ExStart					1.0	89	110/70	97	-	
Stage 1	3:00	3:01	2.7	10.0	4.6	117	110/70	128	-	
Stage 2	3:00	6:01	4.0	12.0	7.0	145	122/70	176	-	
PeakEx	0:45	6:46	5.5	14.0	7.8	162	122/70	197	-	
Recovery	1:00		0.0	0.0	1.1	108	122/70	131	-	
Recovery	2:00		0.0	0.0	1.0	95	130/70	123	-	
Recovery	3:00		0.0	0.0	1.0	112	130/70	145	-	
Recovery	3:06		0.0	0.0	1.0	78	130/70	101	-	
Recovery					0.0	0	---/---	0	-	

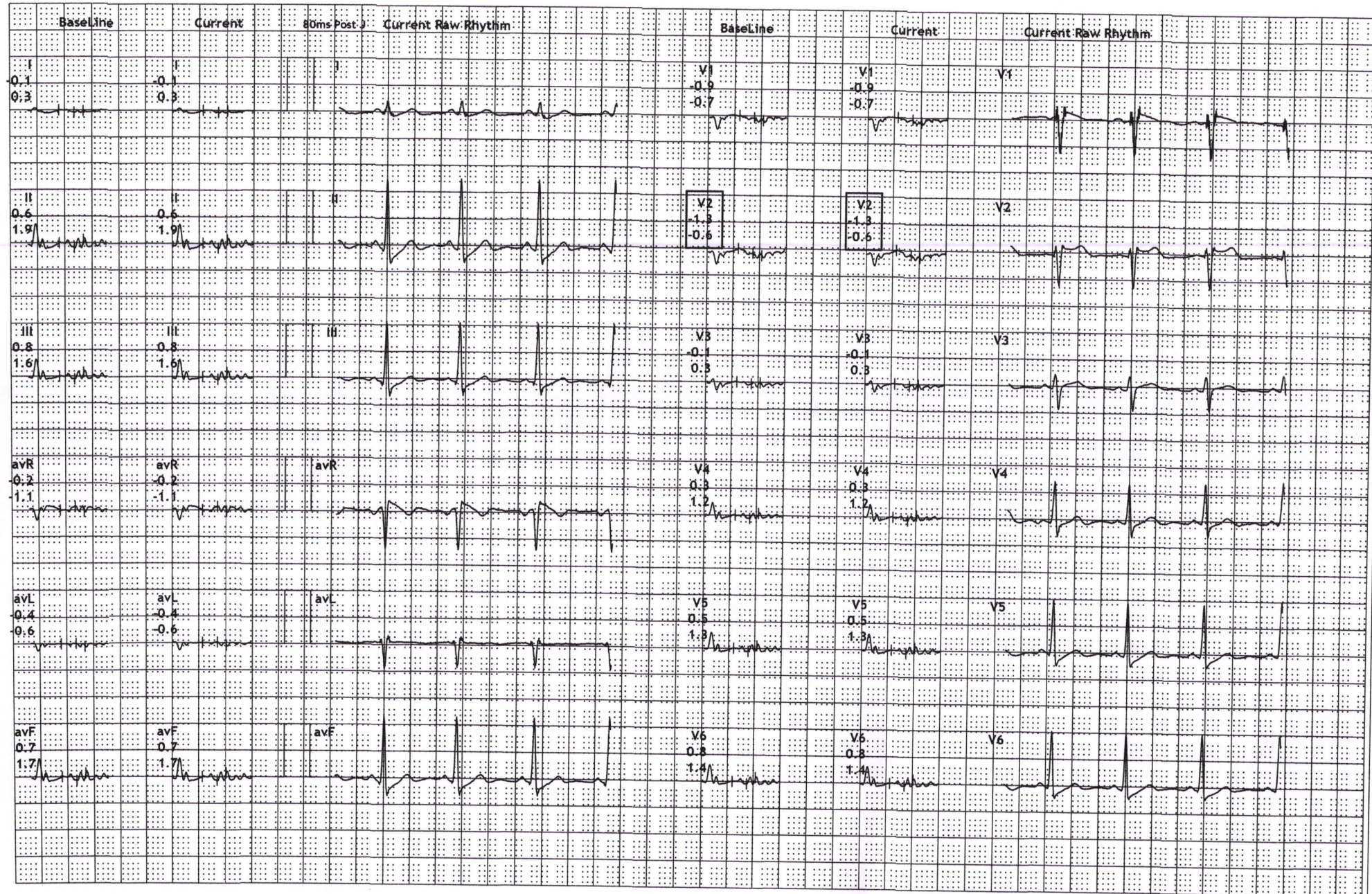
**Findings :**

Exercise Time : 6:46 minutes  
 Max HR attained : 162 bpm 92% of Max Predictable HR 176  
 Max BP : 122/70(mmHg)  
 WorkLoad attained : 7.8 (Fair Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maximum Depression: 3:19

*Mansi*  
**DR. MANSI SOLANKI**  
 MBBS MD GENERAL MEDICINE  
 REG. NO. MMC 2024042065

Advice/Comments:





B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

139/CHITRA ARYA

44 Yrs/Female

67 Kg/161 Cms

Date: 14-Sep-2024 11:39:29 AM

HR: 89 bpm

METS: 1.0

BP: 110/70

MPHR:50% of 176

Speed: 0.0 kmph

Grade: 0.0%

12 Lead Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:40

BLC :On

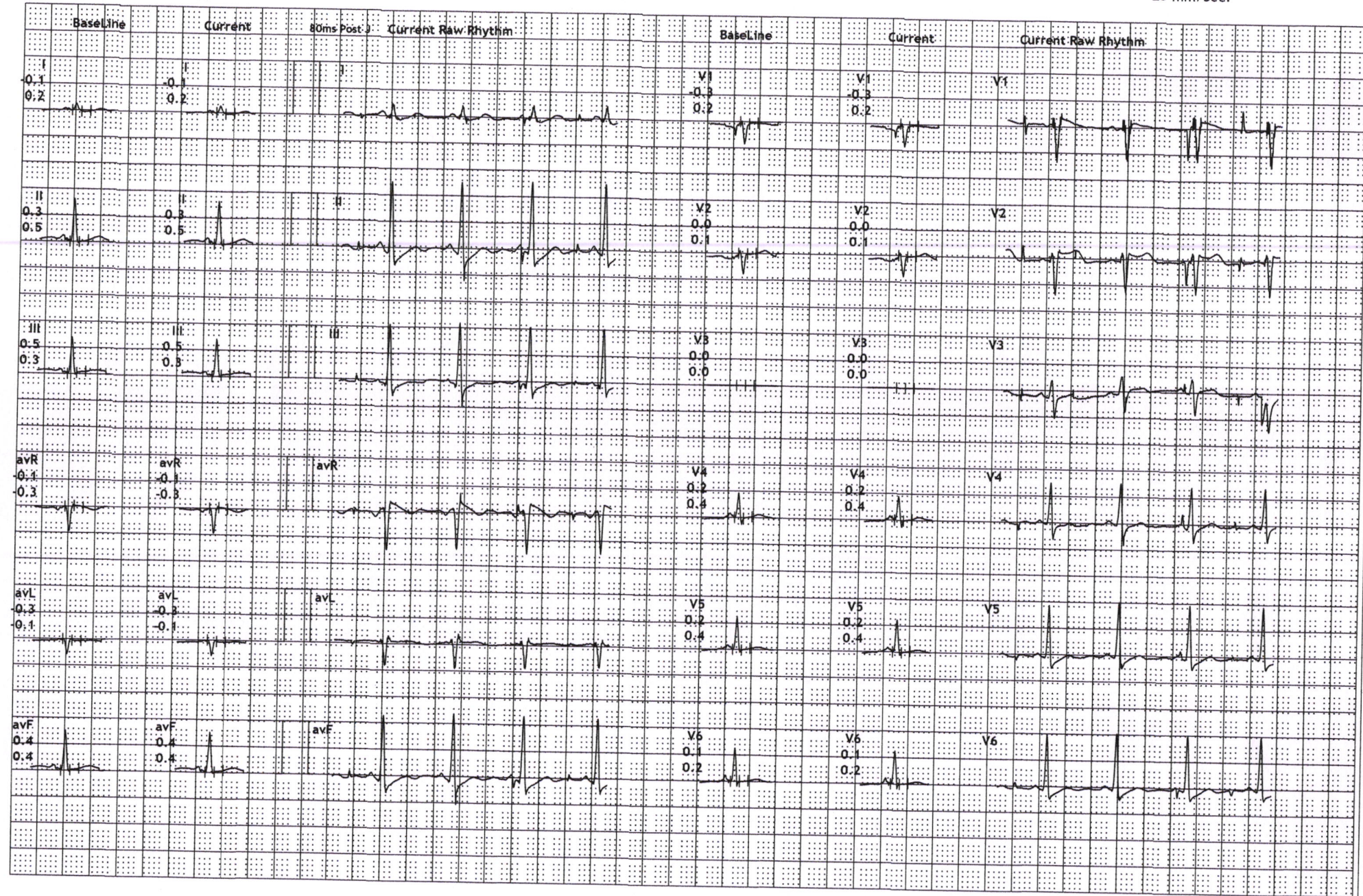
Notch :On

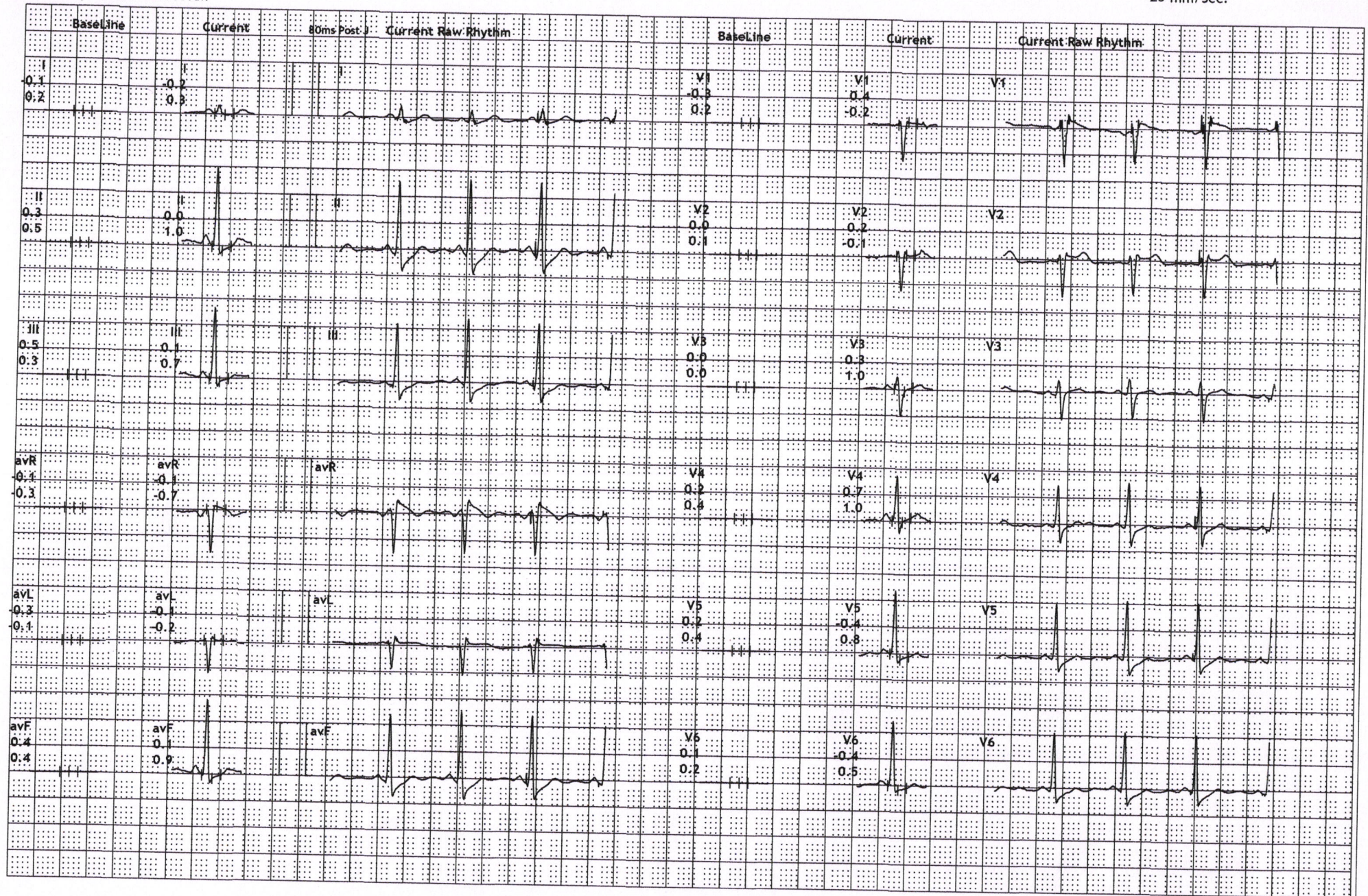
STANDING

10.0 mm/mV

25 mm/Sec.









B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
140/CHITRA ARYA  
44 Yrs/Female  
67 Kg/161 Cms  
Date: 14-Sep-2024 11:45:44 AM

HR: 117 bpm  
METS: 4.6  
BP: 110/70

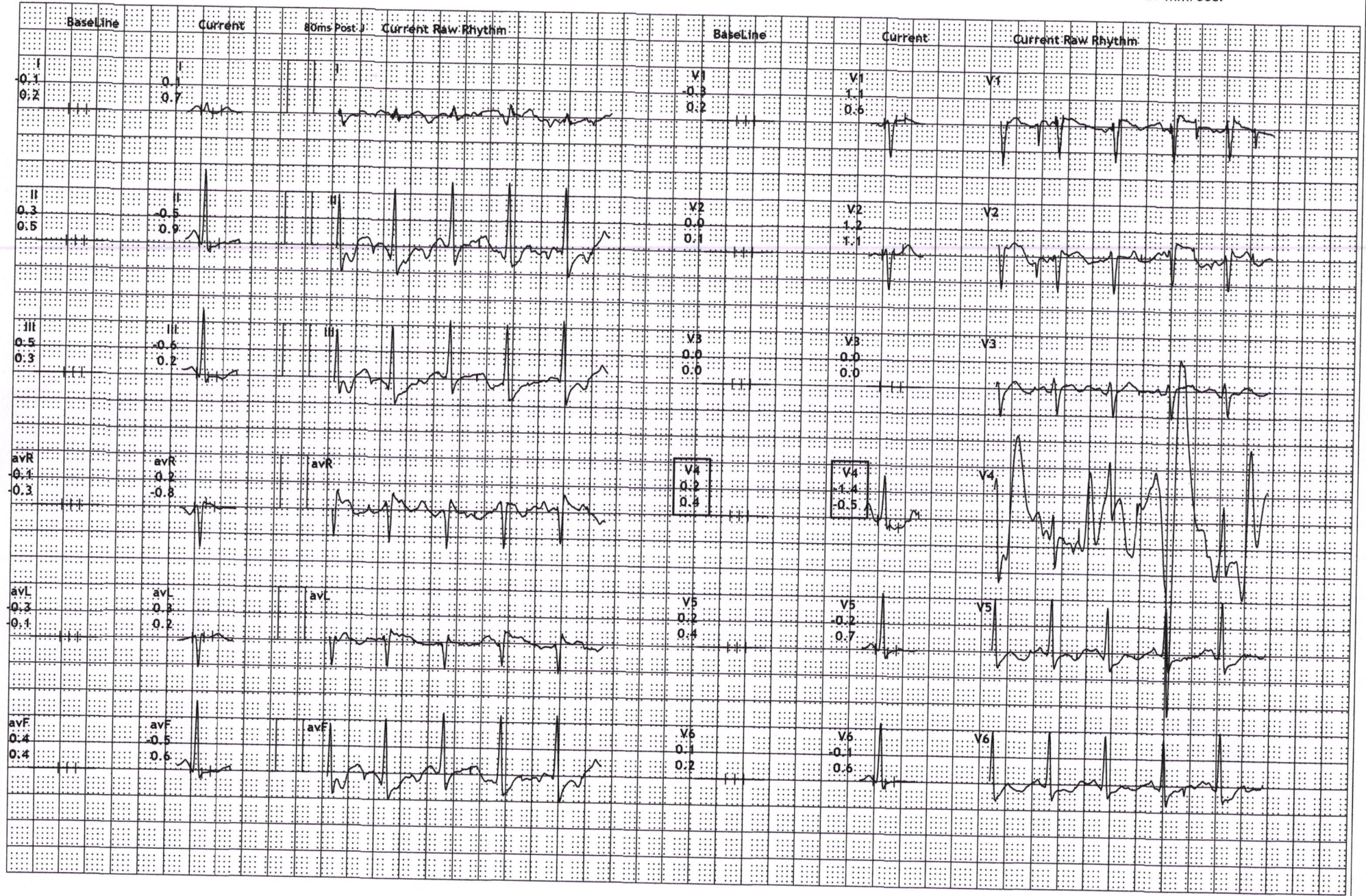
MPHR: 66% of 176  
Speed: 2.7 kmph  
Grade: 10.0%

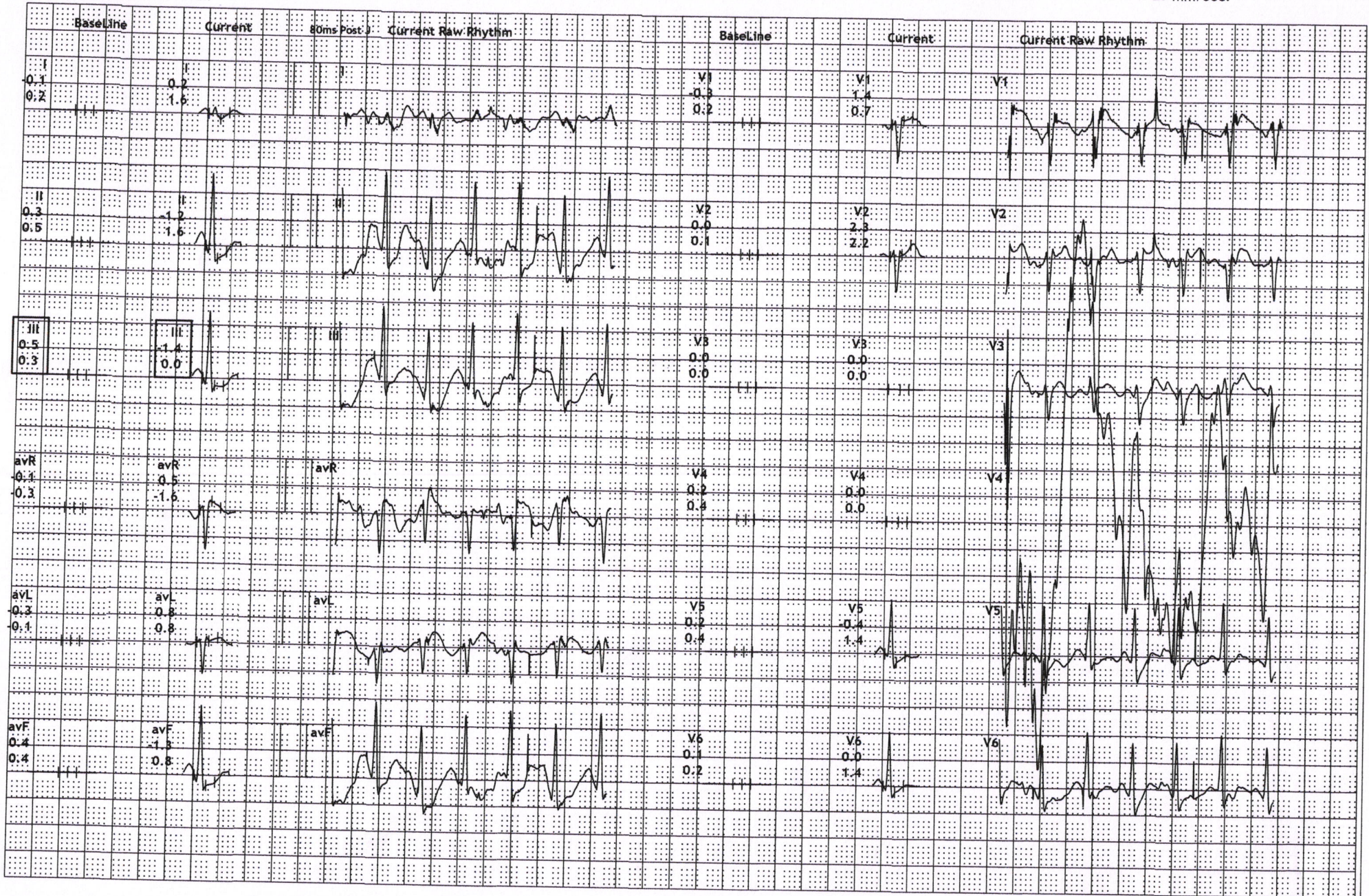
12 Lead Comparison

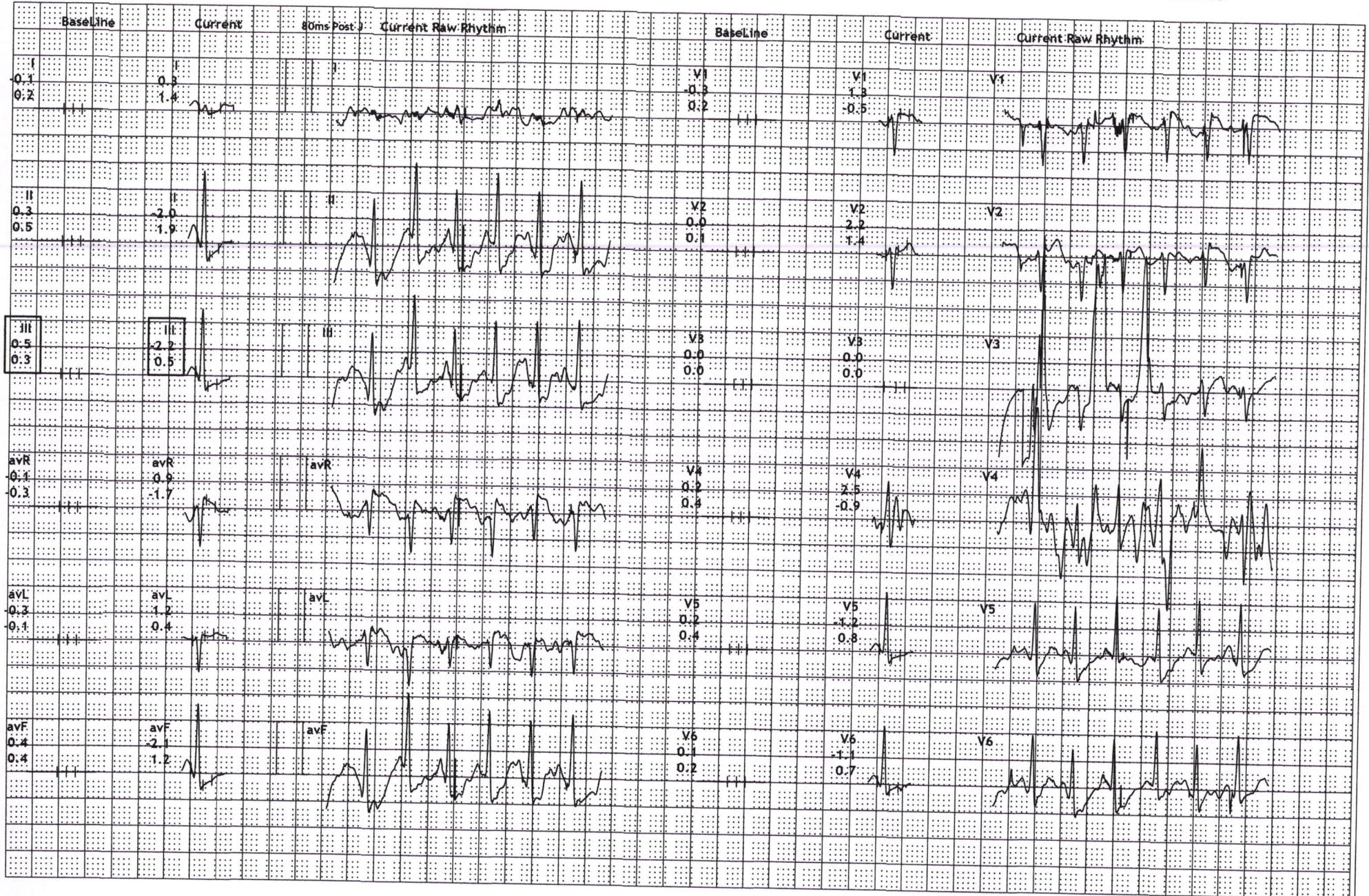
Raw ECG  
BRUCE  
(1.0-100)Hz

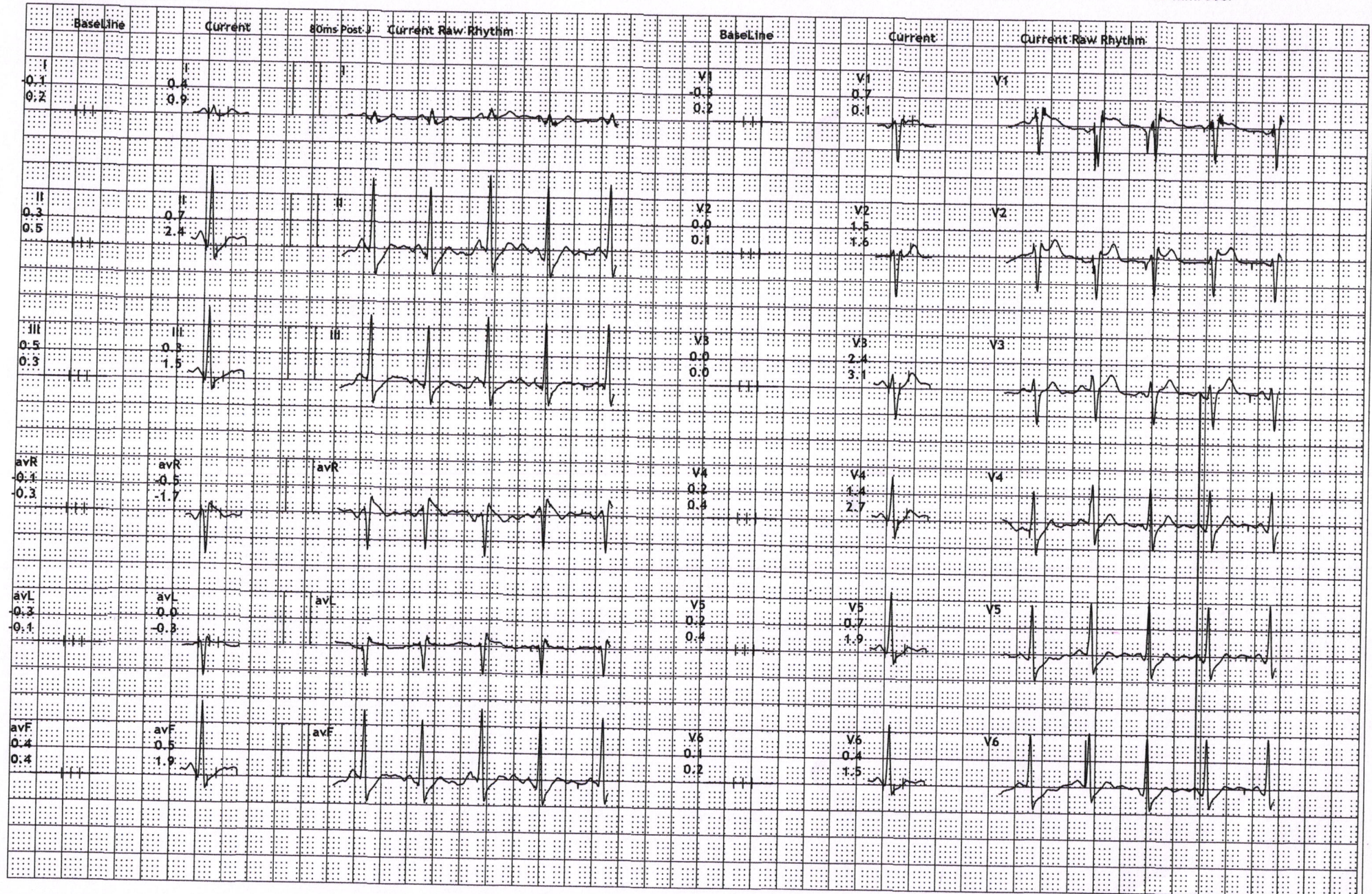
Ex Time 03:00  
BLC :On  
Notch :On

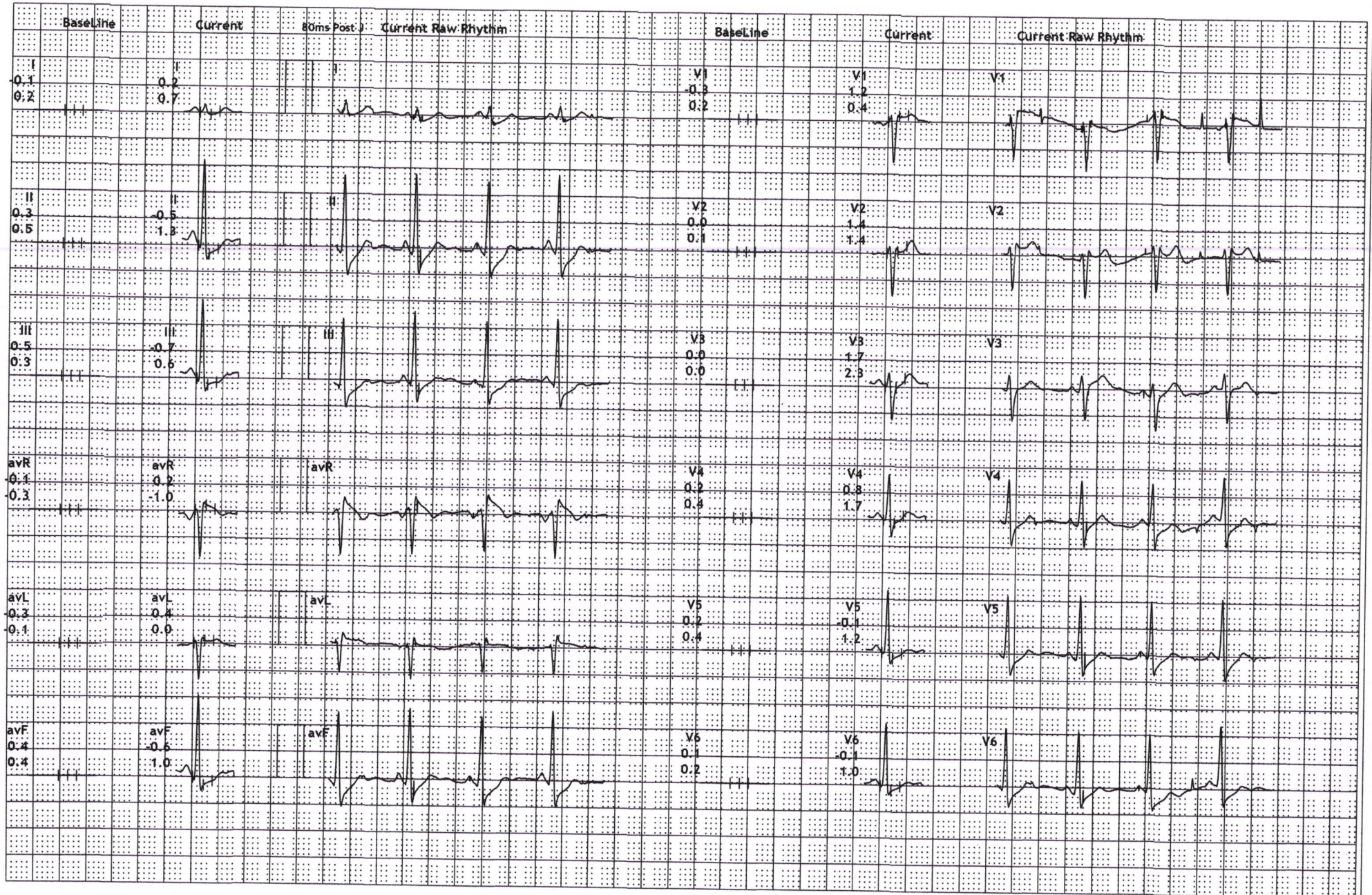
Stage 1 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.













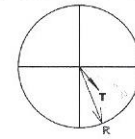
Excellas Clinics Private Ltd

B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W),

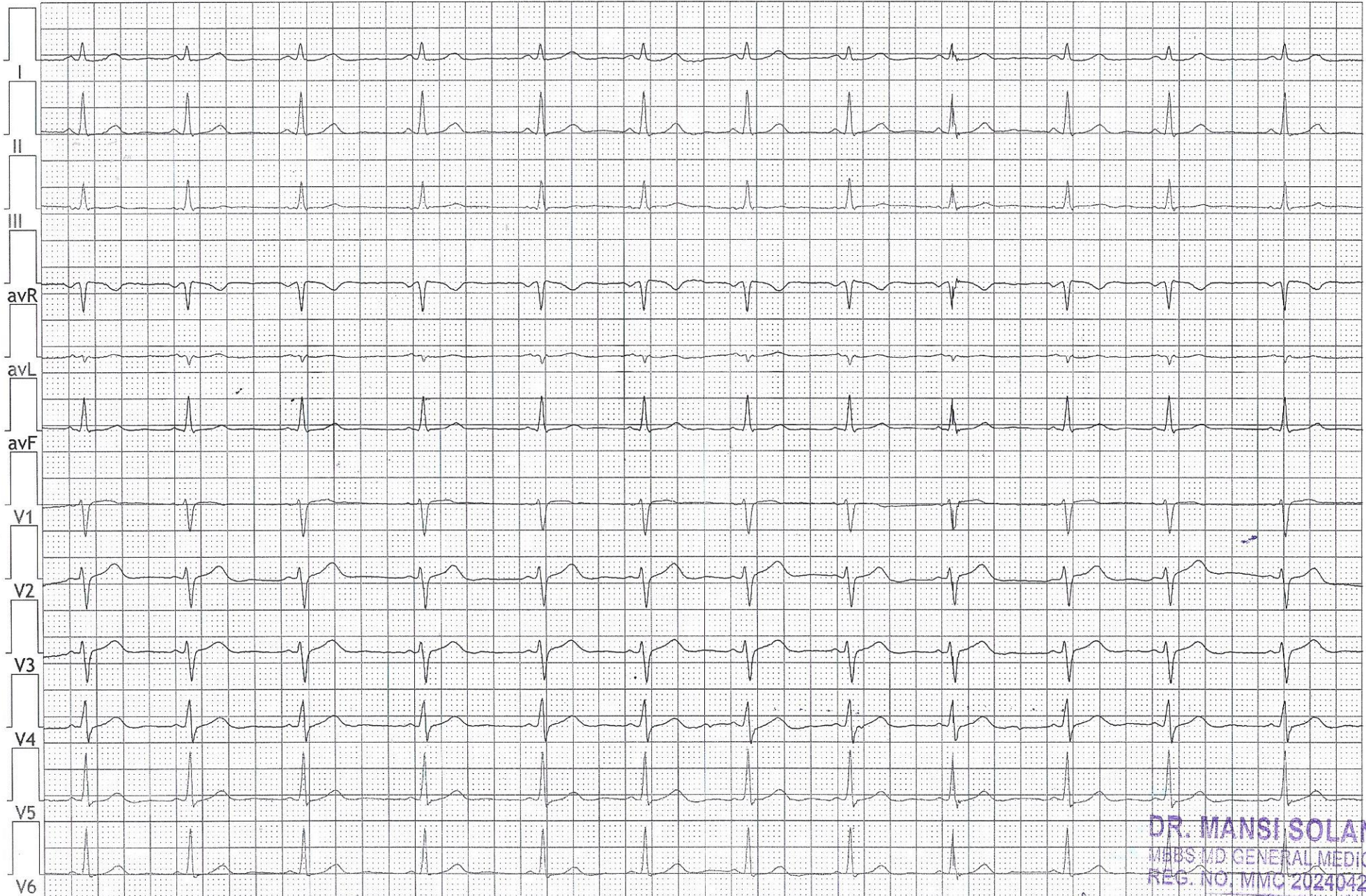
9435/Arya Chitra 44Yrs/Female Kgs/ Cms BP: \_\_\_/\_\_\_ mmHg

Ref.: Test Date: 14-Sep-2024(09:21:30) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 72 bpm



PR Interval: 106 ms  
QRS Duration: 154 ms  
QT/QTc: 376/414ms  
P-QRS-T Axis: 28 - 68 - 50 (Deg)



DR. MANSI SOLANKI  
MBBS MD GENERAL MEDICINE  
REG. NO. MMC 2024042065

*sinus arrhythmic Me  
correlate clinical*