



भारत सरकार

Government of India

Sunita Kumari

Year of Birth: 1992

Female





8911 9387 4331

25 1065 609 2351065 609

Rajasthani Diagnostic & Medical Research Centre Jhunjhunu



भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

Address:

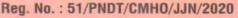
W/O: Dinesh Kumar, Beebasar, Jhunjhunun, Bibasar, Rajasthan, 333041

8911 9387 4331











Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY



Hematology Analysis Report

First Name: SUNITA KUMARI Sample Type:

Last Name: Gender:

Age:

Female 31 Year Department:

Med Rec. No .:

Sample ID: 6

Test Time: 23/03/2024 09:24

Diagnosis:

Parameter	Result	Ref. Range	Unit	
1 WBC	4.95	4.00-10.00	10^3/uL	
2 Neu%	58.3	50.0-70.0	% WBC	
3 Lym%	32.9	20.0-40.0	%	
4 Mon%	6.5	3.0-12.0	1% EDIA	
5 Eos%	1.9	0.5-5.0	%	
6 Bas%	0.4	0.0-1.0	%	
7 Neu#	2.89	2.00-7.00	10^3/uL	500
B Lym#	1.63	0.80-4.00	10^3/uL RBC	
9 Mon#	0.32	0.12-1.20	10^3/uL	
10 Eos#	0.09	0.02-0.50	10^3/uL	
11 Bas#	0.02	0.00-0.10	10^3/uL	
12 RBC	4.75	3.50-5.00	10^6/uL 0 100 200	300
13 HGB	10.4 L	11.0-15.0	g/dL PLT	0,5
14 HCT	37.4	37.0-47.0	%	
15 MCV	78.7 L	80.0-100.0	fL III	
16 MCH	21.8 L	27.0-34.0	pg	
17 MCHC	27.7 L	32.0-36.0	o/dl	
18 RDW-CV	12.9	11.0-16.0	%	
19 RDW-SD	42.0	35.0-56.0	fL /LS	DI
20 PLT	209	100-300	10^3/uL	
21 MPV	10.9	6.5-12.0	fL fL	
22 PDW	15.7	9.0-17.0		
23 PCT	0.228	0.108-0.282	%	- 1
24 P-LCR	45.2 H	11.0-45.0	%	
25 P-LCC	95 H	30-90	10^3/uL	DI
25 P-LCC		AUNJHU	10^3/uL	
		Marite Wheele	i HS	D
		Dr. Mamta Khu M.D. (Path,	iteta)	

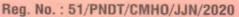
Submitter: Operator: Draw Time: 23/03/2024 09:23 Received Report Time: 24/03/2024 10:48 Remarks: Operator: service Approver: 23/03/2024 09:23 Received Time: 23/03/2024 09:23 Validated Time:

*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours





RMC No : 4720/16260





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Patient Name: SUNITA KUMARI

Sr. No. : 3916 Patient ID No.: 3658

: 32 Gender : FEMALE Age

Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP

Registered on: 23-03-2024 03:48 PM

Collected On : 23-03-2024 03:48 PM

Received On : 23-03-2024 03:48 PM

Reported On : 23-03-2024 04:41 PM

Bar Code LIS Number

LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol (Method CHOD-PAP)	161.30	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	58.00	mg/dL	3588
Triglycerides (Method: GPO)	152.76	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	72.75	mg/dL	0-100
VLDL Cholesterol	30.55	mg/dL	035
TC/HDL Cholestrol Ratio	2.78	Ratio	2.55
LDL/HDL Ratio	L 1.25	Ratio	1.5-3.5

HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	10.0	mm/hr	20
BLOOD GROUPING (ABO & Rh)	A+ Positive	7)-,	

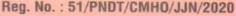




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Age

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: 32 Gender

: FEMALE

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Registered on : 23-03-2024 03:4

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HAEMATOLOGY

HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	6.10	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 8.00 Adeqate Control 8.10 - 9.00 Suboptimal Control 9.10 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	128.37	mg/dL	
eAG (Estimated Average Glucose)	7.12	mmol/L	

Method: Fluorescence Immunoassay Technology

Sample Type: EDTA Blood

Test Performed by:-

Fully Automated (EM 200) ERBA MANNHEIM.

Remarks :

Gycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatement Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

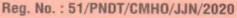




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BIO-CHEMISTRY

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Test Name	Observed Values	Units	Reference Intervals	
Glucose Fasting (Method GOD-POD)	71.10	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born,>1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121	
Blood Sugar PP (Method: GOD-POD)	98.30	mg/dL	Glucose 2 h Postparandial: <120	
BUN (Blood Urea Nitrogen)	12.0	mg/dL	7.0-18.0	



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M.D. (Path.)
RMC No. : 4729/16260

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BIO-CHEMISTRY KIDNEY FUNCTION TEST

Test Name	Observed Values	Units .	Reference Intervals
Blood Urea (Method Urease-GLDH)	31.06	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method Enzymatic Creatininase)	0.86	mg/dL	0.61.30
Calcium	9.60	mg/dL	8.511
Uric Acid (Method : Uricase-POD)	6.10	mg/dL	2.4-7.2

Test Name	Observed Values	Units	Reference Intervals
Gamma glutamyl transferase (GGT)	20.0	IU/L	15.085.0

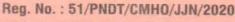




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BIO-CHEMISTRY

Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.:-UV Kinetic)	***	- MA	
A CONTRACTOR OF THE CONTRACTOR	22.30	U/L	540
SGPT/ALT(Tech.:-UV Kinetic)	28.64	U/L	540
Bilirubin(Total) (Method: Diazo)	0.52	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.12	mg/dL	00.3
Bilirubin(Indirect)	0.40	mg/dL	0.11.0
Total Protein (Method : BIURET Method)	6.76	g/dL ,	Adults: 6.4 - 8.3 Premature: 3.6 - 6.0 Newborn: 4.6 - 7.0 1 Week: 4.4 - 7.6 7-12 months: 5.1 - 7.3 1-2 Years: 5.6 - 7.5 > 2 Years: 6.0 - 8.0
Albumin(Tech.:-BCG) (Method: BCG)	3.76	gm/dL	0-4 days:2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y: 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Globulin(CALCULATION)	3.00	gm/dL	2.54.5
A/G Ratio(Tech.:-Calculated)	1.25		1.2 - 2.5
Alkaline Phosphatase(Tech.:-Pnp Amp Kinetic)	261.0	U/L	108-306



Martin Khutet Dr. Mamta Khuteta M.D. (Path.) RMC No.: 4720/16260

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THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.96	ng/ML	0.5 - 1.5 ng/ML
T4 (TotalThyroxine)	8.10	µg/dL	4.60-12.50 μg/dL
TSH.(Thyroid Stimulating Hormone)	2.01	μIU/mL	0.35 5.50 µIU/mL

Sample Type : Serum Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS) Abbott USA

Remarks:

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.





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Bar Code LIS Number

URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
PHYSICAL		TAN	
Quantity	15	ml	
Colour	Pale Yellow	6	
Appearance / Transparency	Clear	1 30	
Specific Gravity	1.015	0	N .
PH	5.0	. 3	4.56.5
CHEMICAL) (
Reaction	Acidic	l in	1
Albumin	+	1 / 2	
Urine Sugar	Nil	/ 2	
MICROSCOPIC	DO	100	/
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	57	/h.p.f.	
Epithelial Cells	68	/h.p.f.	
Crystals	JAIL NII OA	/h.p.f.	
Casts	NI NI KI	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	

Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil -		
URINE SUGAR PP	Nil		

<<< END OF REPORT

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

Note: This report is not valid for medico legal purposes.



Martin Khutch Dr. Mamta Khuteta M.D. (Path.) RMC No.: 4720/162

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MAMOGRAPHY

NAME	SUNITA KUMARI	AGE-	SEX: F	
REF/BY:	BOB HEALTH CHECHUP	DATE	23-Mar-24	

ULTRASONOGRAPHY WHOLE ABDOMEN

<u>Liver</u>: is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

<u>Gall bladder</u>: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

<u>Pancreas</u>: is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

Rt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Lt. Kidney: is h/o surgery.

<u>Spleen</u>: is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

<u>Urinary Bladder</u>: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

<u>Uterus:</u> is normal in size, regular in shape and outline. Uterus is anteverted and ante flexed. Endometrium is normal in thickness. No sonolucent or echogenic mass lesion seen.

Adenexa: Both adenexal regions are seen normal. No focal mass or lesion is seen. Bilateral ovaries are normal in appearance.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

IMPRESSION:

* NO SIGNIFICANT ABNORMALITY

Advised: clinicopathological correlation

DR. ANUSHA WAHALAWAT MD RADIODIAGNOSIS

> Dr. Anusha Mahalawat MD (Radiodiagnosis) (RMC. 38742/25457)







Reg. No.: 51/PNDT/CMHO/JJN/2020

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NAME : SUNITA KUMARI	AGE 32 /SEX F
REF.BY :BOB HEALTH CHECK-UP	DATE: 23.03.2024

X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

The

DR. ANUSHA MAHALAWAT

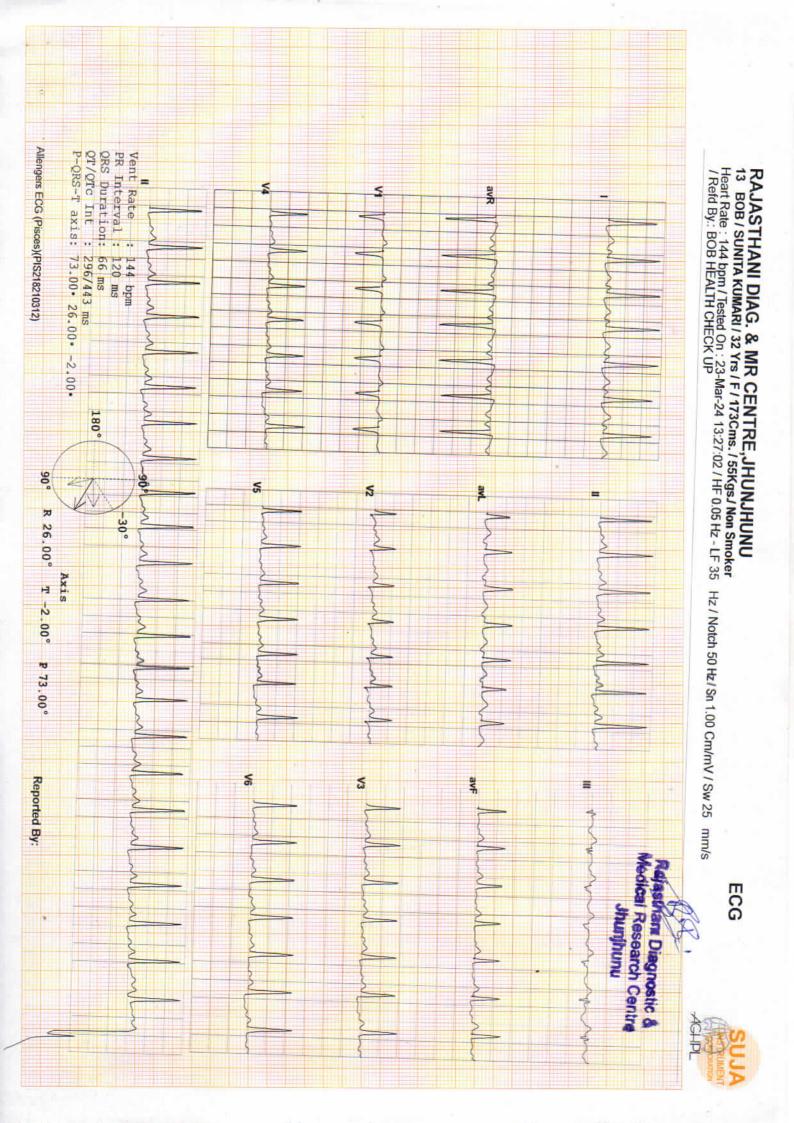
MD (RADIODIAGNOSIS)

RMC -38742/25457

Dr. Anusha Mahalawat MD (Radiodiagnosis) (RMC. 38742/25457)







B-110,INDIRA NAGAR,SUBHASH MARG,MANDAWA MOD,JHUNJHUNU EMail: RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

SUNITA KUMARI / 32 Yrs / F / 173 Cms / 55 Kg

Date: 23 - 03 - 2024 Technician : NIKITA Examined By:

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Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:42	0:42	00.0	0.00	01.0	118	63 %	122/78	143	00	
Standing	01:45	1:03	0.00	00.0	01.0	119	63 %	122/78	145	00	
AH	02:46	1:01	0.00	00.0	01.0	121	64 %	122/78	147	00	
Warm Up	03:49	1:03	0.00	00.0	01.0	126	67 %	122/78	153	00	
ExStart	04:51	1:02	01.0	0.00	01.0	120	64 %	124/80	148	00	
BRUCE Stage 1	07:51	3:00	01.7	10.0	04.7	147	78 %	128/82	188	00	
BRUCE Stage 2	10:51	3:00	02.5	12.0	07.1	169	90 %	138/88	233	00	
PeakEx	10:54	0:03	02.5	12.0	07.2	169	90 %	138/88	233	00	
Recovery	11:24	0:30	01.1	0.00	04.2	161	86 %	138/88	222	00	
Recovery	11:54	1:00	01.1	0.00	01.2	148	79 %	140/90	207	00	
Recovery	12:54	2:00	0.00	0.00	01.0	137	73 %	136/86	186	00	
Recovery	13:54	3:00	0.00	0.00	01.0	130	69 %	132/82	171	00	
Recovery	14:31	2.07	000	000	010	-	in the second	10070	161	00	

REPORT:

Heart Rate 119.0 bpm Systolic BP 138.0 mmHg Diastolic BP 88.0 mmHg Maximum Depression 0.1 Exercise Time 06:03 Mins. METS 7.2

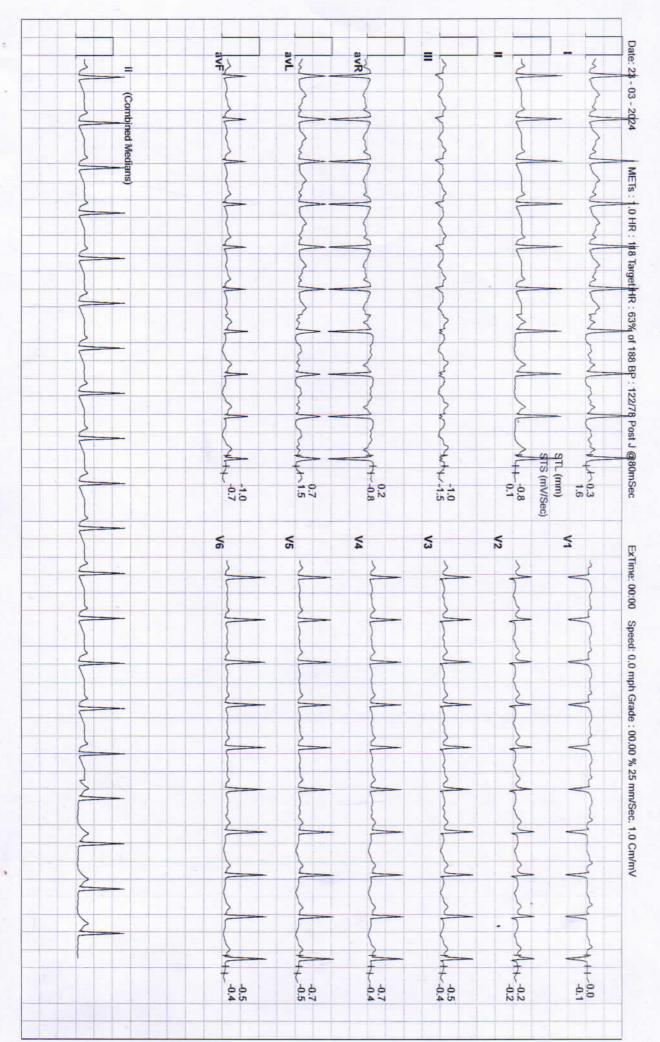
Target Heart Rate 188.0
Test End Reason Test Complete, Heart Rate Achieved

Medical Research Centre Rajasthani Diagnostic & Jhunjhunu

Doctor: RDMRC

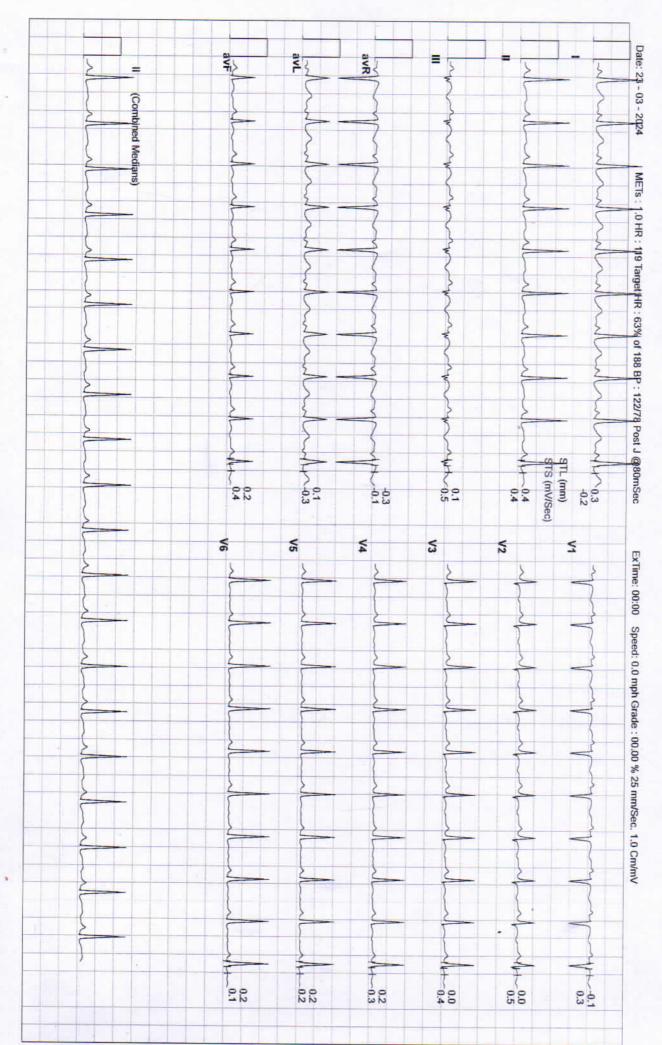
6X2 Combine Medians + 1 Rhythm BRUCE:Supine(0:42)





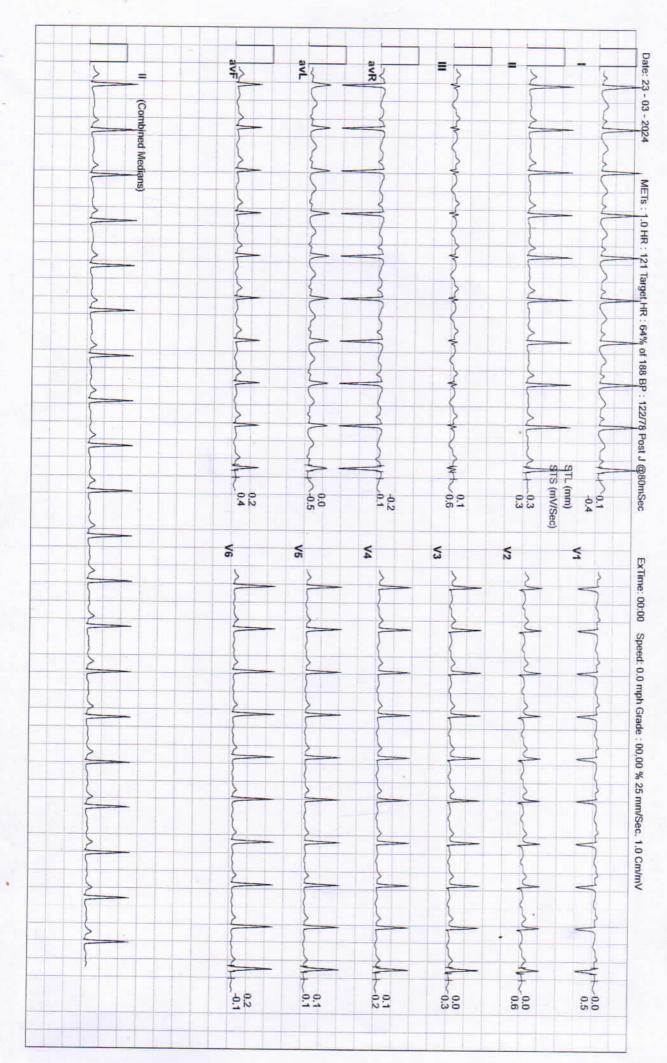
6X2 Combine Medians + 1 Rhythm BRUCE:Standing(1:03)





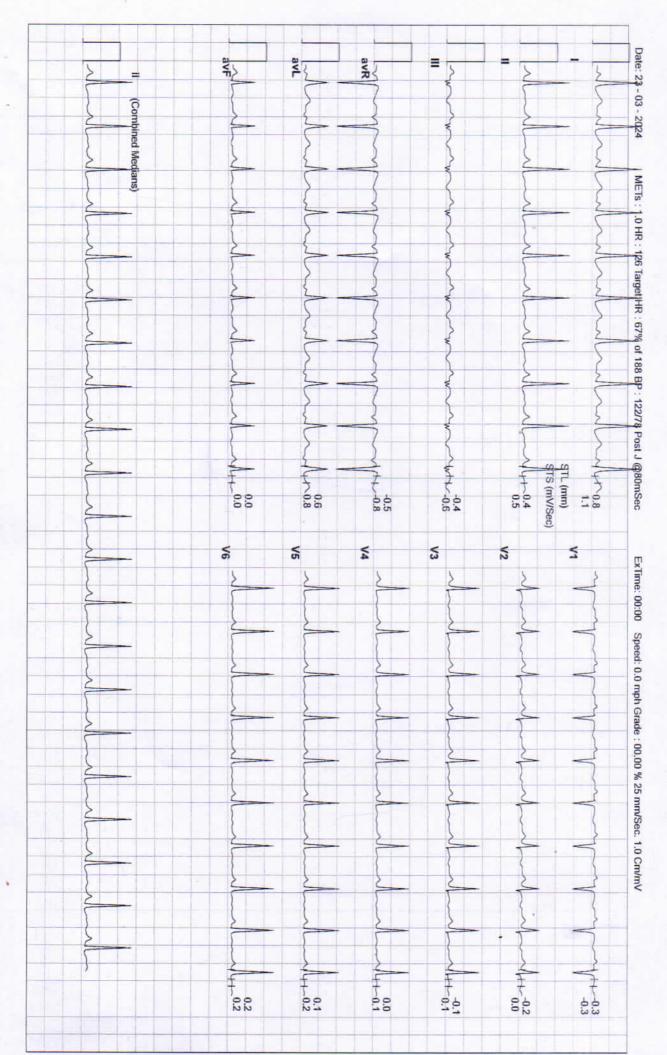
6X2 Combine Medians + 1 Rhythm BRUCE:HV(1:01)





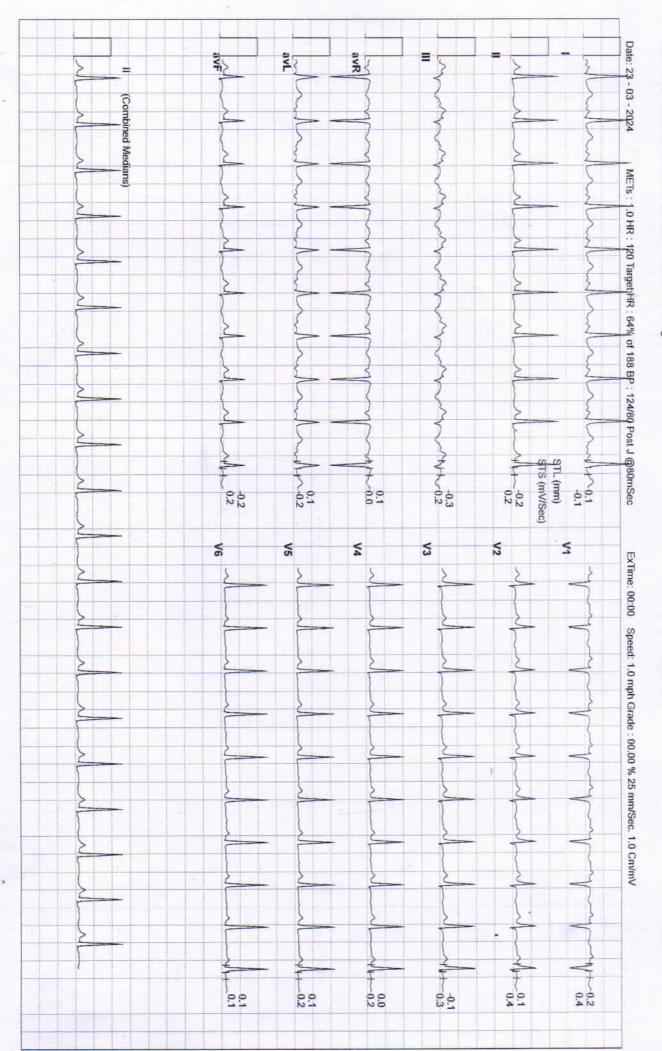
6X2 Combine Medians + 1 Rhythm BRUCE:Warm Up(1:03)





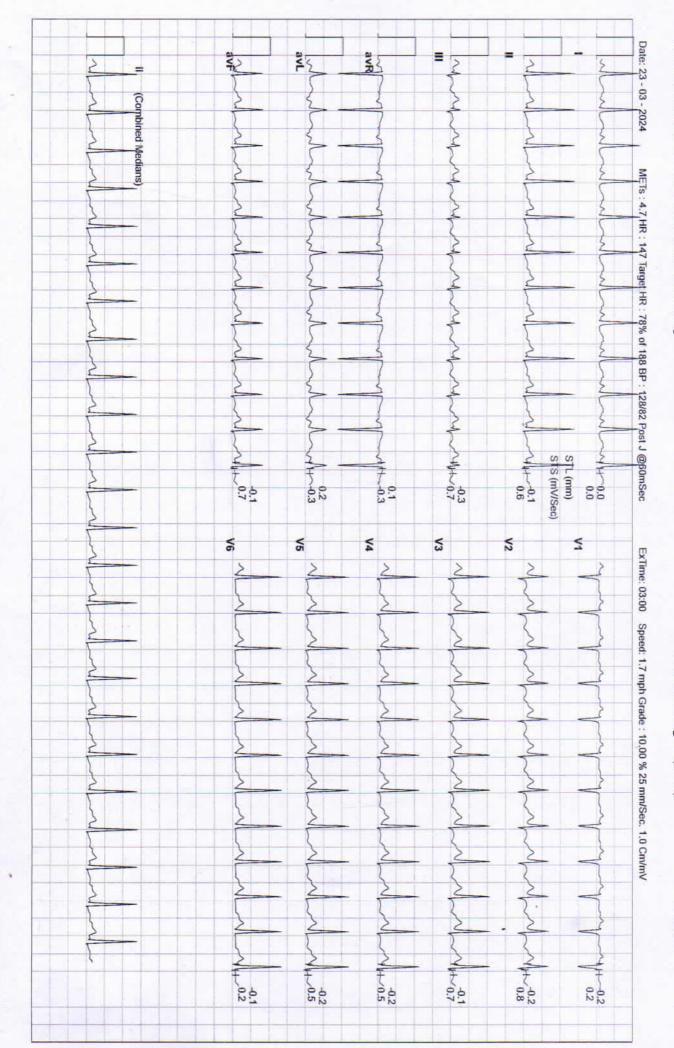
6X2 Combine Medians + 1 Rhythm ExStart





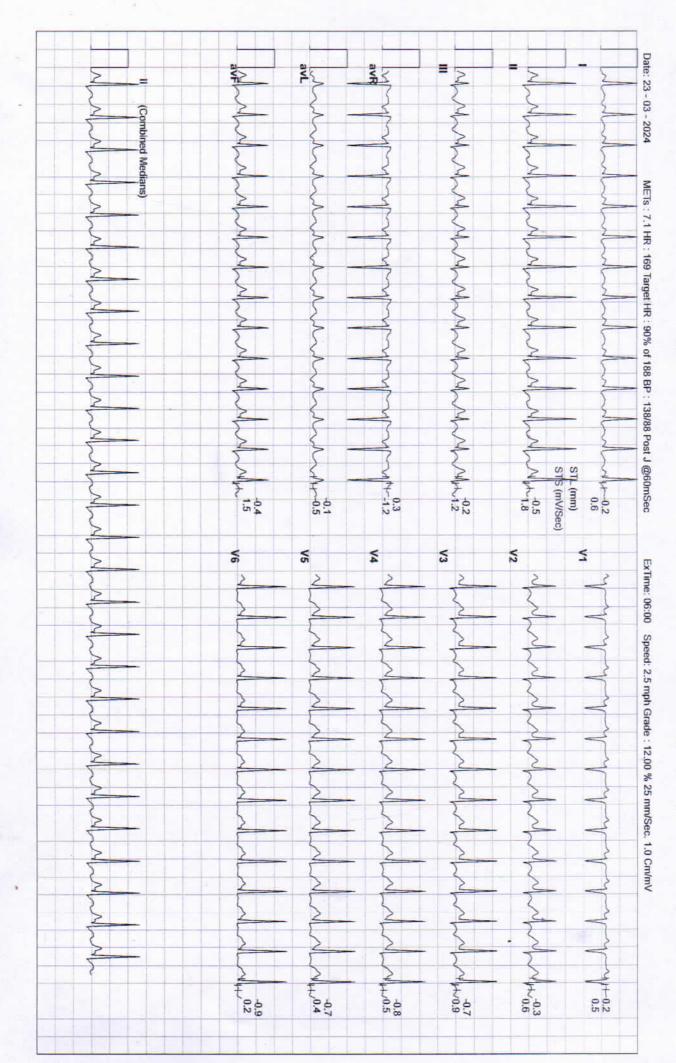
6X2 Combine Medians + 1 Rhythm BRUCE:Stage 1(3:00)





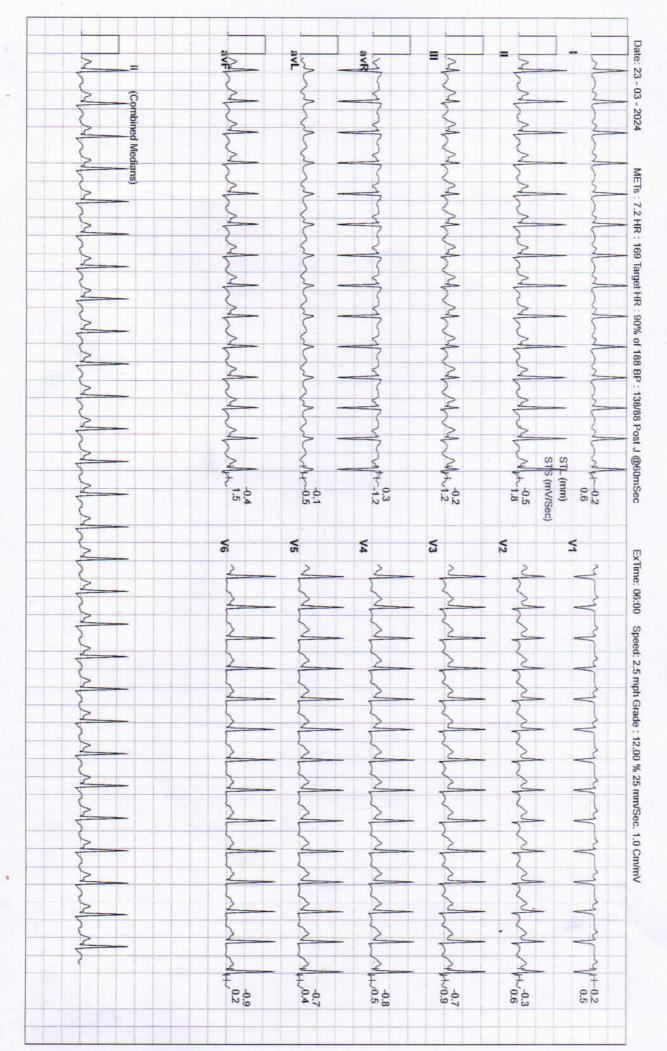
6X2 Combine Medians + 1 Rhythm BRUCE:Stage 2(3:00)





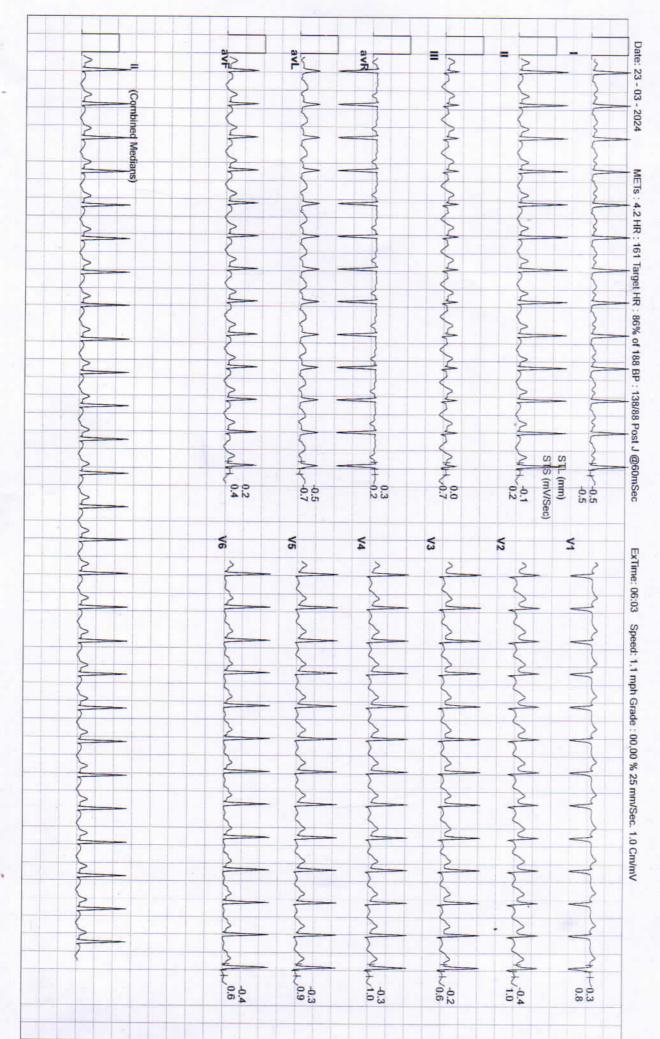
6X2 Combine Medians + 1 Rhythm PeakEx





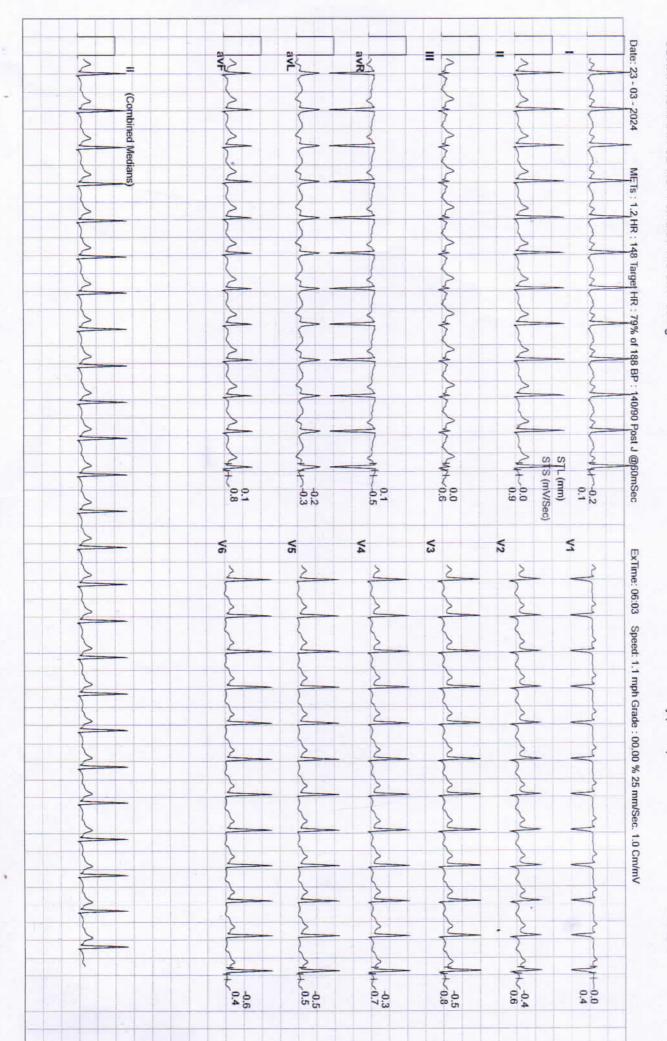
6X2 Combine Medians + 1 Rhythm Recovery(0:30)





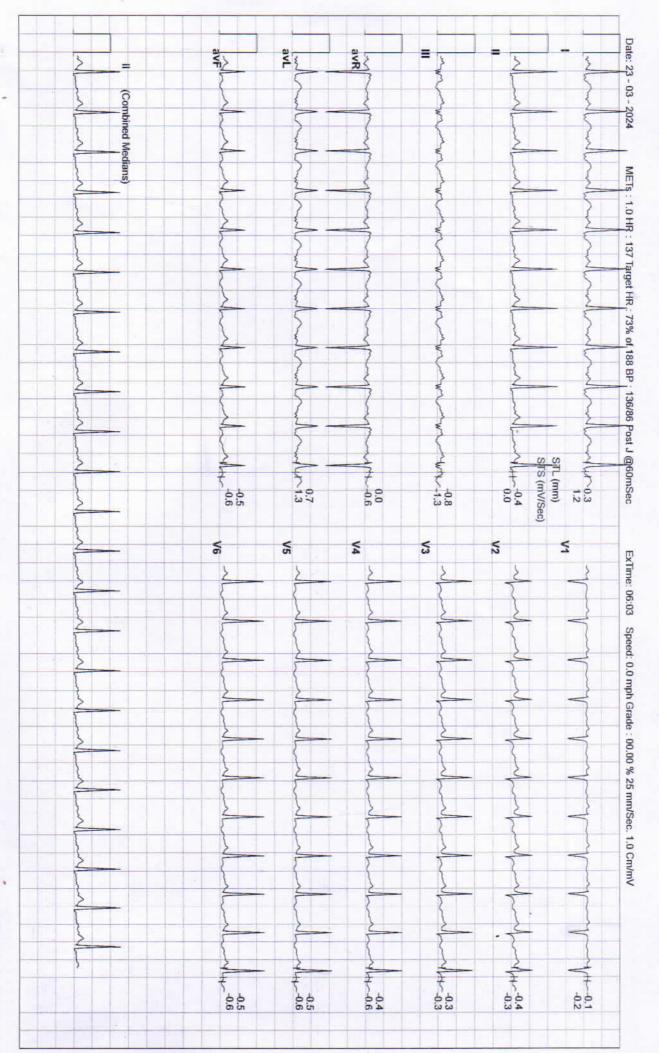
6X2 Combine Medians + 1 Rhythm Recovery(1:00)





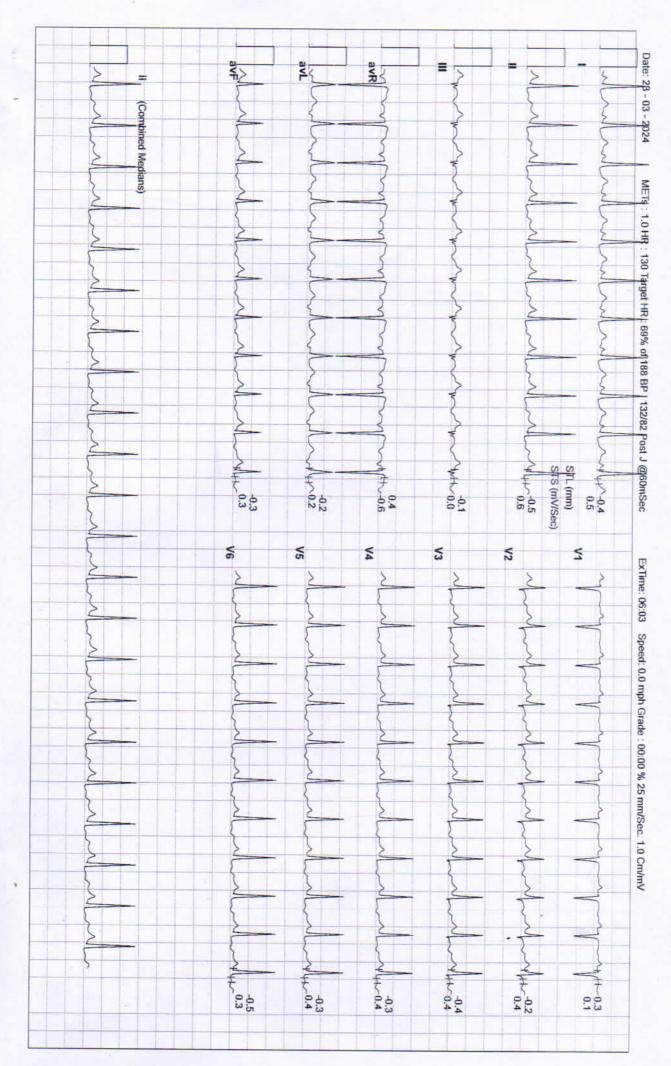
6X2 Combine Medians + 1 Rhythm Recovery(2:00)





6X2 Combine Medians + 1 Rhythm Recovery(3:00)





6X2 Combine Medians + 1 Rhythm Recovery(3:37)



