

VID CARD



ભારત સરકાર

Government of India



નિમિષાબેન નરેન્દ્રભાઈ જાદવ
Nimishaben Narendrabhai Jadav
જન્મ તારીખ/DOB: 15/06/1988
સ્ત્રી/ FEMALE

6936 5515 2917

VID : 9120 7004 5965 0409

મારી આધાર. મારી ઓળખ

Principal
No: C-3459

96878143

N. N. Jadhav



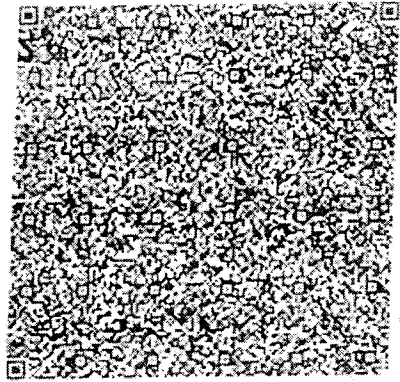
संघीय विशिष्ट ओळखास प्राधिकरण

Unique Identification Authority of India



संख्या :
45, नवदुर्गा सोसायटी, मेलडी मातानु मंदिर पास, नल सरोवर रोड, सानंद, अहमदाबाद, गुजरात - 382110

Address:
45, Navdurga society, near Meldi Matanu Mandir, Nal Sarovar Road, Sanand, Ahmedabad, Gujarat - 382110



6936 5515 2917

VID : 9120 7004 5965 0409



1947



help@uidai.gov.in



www.uidai.gov.in

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968

v 687MA43

N. N. Jadhav

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	NIMISHA HIRENKUMAR PATEL
DATE OF BIRTH	15-10-1988
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	10-06-2024
BOOKING REFERENCE NO.	24J102584100108434S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. PATEL HIRENKUMAR LALJIBHAI
EMPLOYEE EC NO.	102584
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR B
EMPLOYEE PLACE OF WORK	GANDHINAGAR,INFOCITY
EMPLOYEE BIRTHDATE	26-07-1987

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **07-06-2024** till **31-03-2025**.The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



LABORATORY REPORT

Name :	Mrs. Nimishaben Narendrabhai Jadav	Reg. No :	406100899
Sex/Age :	Female/36 Years	Reg. Date :	17-Jun-2024 09:29 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	17-Jun-2024 04:40 PM

Medical Summary

GENERAL EXAMINATION

Height (cms) : 151

Weight (kgs) : 66.90

Blood Pressure : 110/70mmHg

Pulse : 70/Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

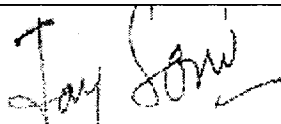
Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A

This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

DR. MUKESH LADDHA

Page 1 of 4



TEST REPORT

Reg. No : 406100899 **Ref Id** : **Collected On** : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav **Reg. Date** : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female **Pass. No.** : **Tele No.** : 9687818143
Ref. By : **Dispatch At** :
Sample Type : EDTA **Location** : CHPL

Parameter	Results	Unit	Biological Ref. Interval
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COMPLETE BLOOD COUNT (CBC)

Hemoglobin (Colorimetric method)	L 10.5	g/dL	12.5 - 16
Hematocrit (Calculated)	L 34.00	%	40 - 50
RBC Count (Electrical Impedance)	L 4.36	million/cmm	4.73 - 5.5
MCV (Calculated)	L 78.2	fL	83 - 101
MCH (Calculated)	L 24.1	Pg	27 - 32
MCHC (Calculated)	L 30.8	%	31.5 - 34.5
RDW (Calculated)	H 14.8	%	11.5 - 14.5
WBC Count Flowcytometry with manual Microscopy	9600	/cmm	4000 - 10000
MPV (Calculated)	10.9	fL	6.5 - 12.0

DIFFERENTIAL WBC COUNT	[%]	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Neutrophils (%)	57.10 %	40 - 80	5482 /cmm	2000 - 7000
Lymphocytes (%)	32.80 %	20 - 40	3149 /cmm	1000 - 3000
Eosinophils (%)	1.90 %	0 - 6	749 /cmm	200 - 1000
Monocytes (%)	7.80 %	2 - 10	182 /cmm	20 - 500
Basophils (%)	0.40 %	0 - 2	38 /cmm	0 - 100


PERIPHERAL SMEAR STUDY

RBC Morphology Microcytic+ Hypochromic+ & Anisocytosis +
WBC Morphology Normal

PLATELET COUNTS

Platelet Count (Electrical Impedance) 353000 /cmm 150000 - 450000
Electrical Impedance
Platelets Platelets are adequate with normal morphology.
Parasites Malarial parasite is not detected.
Comment -

This is an electronically authenticated report.
* This test has been out sourced.

Approved By :  **Dr. Purvish Darji**
MD (Pathology)
Approved On : 17-Jun-2024 10:39 AM
Page 1 of 10



TEST REPORT

Reg. No : 406100899 Ref Id : Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female Pass. No. : Tele No. : 9687818143
Ref. By : Dispatch At :
Sample Type : EDTA Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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HEMATOLOGY

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO	"A"
Rh (D)	Positive
Note	-

ERYTHROCYTE SEDIMENTATION RATE [ESR]


ESR 1 hour 06 mm/hr ESR AT 1 hour : 3-12
Westergreen method

ERYTHRO SEDIMENTATION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (0-1mm) in polycythaemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

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* This test has been out sourced.

Approved By : 
Dr. Purvish Darji
MD (Pathology)

Approved On : 17-Jun-2024 02:47 PM
Page 2 of 10



TEST REPORT

Reg. No : 406100899 **Ref Id** : **Collected On** : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav **Reg. Date** : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female **Pass. No.** : **Tele No.** : 9687818143
Ref. By : **Dispatch At** :
Sample Type : Flouride F, Flouride PP **Location** : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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
BIO - CHEMISTRY

Fasting Blood Sugar (FBS) <i>GOD-POD Method</i>	96.20	mg/dL	70 - 110
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Post Prandial Blood Sugar (PPBS) <i>GOD-POD Method</i>	103.7	mg/dL	70 - 140
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* This test has been out sourced.

Approved By : 
Dr. Purvish Darji
MD (Pathology)

Approved On : 17-Jun-2024 01:24 PM
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TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
Lipid Profile			
Cholesterol	143	mg/dL	Desirable: <200.0 Borderline High: 200-239 High: >240.0
<i>Enzymatic, colorimetric method</i>			
Triglyceride	76.60	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499 Very High : > 500.0
<i>Enzymatic, colorimetric method</i>			
HDL Cholesterol	41.60	mg/dL	Low: <40 High: >60
<i>Accelerator selective detergent method</i>			
LDL	86.08	mg/dL	Optimal: <100.0 Near Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >190.0
<i>Calculated</i>			
VLDL	15.32	mg/dL	15 - 35
<i>Calculated</i>			
LDL / HDL RATIO	2.07		0 - 3.5
<i>Calculated</i>			
Cholesterol /HDL Ratio	3.44		0 - 5.0
<i>Calculated</i>			

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* This test has been out sourced.

Approved By : 
 Dr. Purvish Darji
 MD (Pathology)

Approved On : 17-Jun-2024 11:28 AM
 Page 4 of 10



TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
LFT WITH GGT			
Total Protein	6.90	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year : 6.0-8.0 Adults : 6.6-8.7
<i>Biuret Reaction</i>			
Albumin	4.54	g/dL	0 - 4 days: 2.8 - 4.4 4 days - 14 yrs: 3.8 - 5.4 14 - 19 yrs: 3.2 - 4.5 20 - 60 yrs: 3.5 - 5.2 60 - 90 yrs: 3.2 - 4.6 > 90 yrs: 2.9 - 4.5
<i>By Bromocresol Green</i>			
Globulin (Calculated)	2.36	g/dL	2.3 - 3.5
A/G Ratio (Calculated)	1.92		0.8 - 2.0
SGOT	16.70	U/L	0 - 31
<i>UV without P5P</i>			
SGPT	14.30	U/L	0 - 34
<i>UV without P5P</i>			
Alakaline Phosphatase	91.9	IU/l	42 - 98
<i>P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate</i>			
Total Bilirubin	0.61	mg/dL	0.3 - 1.2
<i>Vanadate Oxidation</i>			
Direct Bilirubin	0.19	mg/dL	0.0 - 0.4
<i>Vanadate Oxidation</i>			
Indirect Bilirubin	0.42	mg/dL	0.0 - 1.1
<i>Calculated</i>			
GGT	13.10	U/L	< 38
<i>SZASZ kinetic Method</i>			

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* This test has been out sourced.

Approved By : 
 Dr. Purvish Darji
 MD (Pathology)

Approved On : 17-Jun-2024 10:38 AM



TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL


Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

Uric Acid <i>Enzymatic, colorimetric method</i>	3.84	mg/dL	2.6 - 6.0
Creatinine <i>Enzymatic Method</i>	0.53	mg/dL	0.6 - 1.1
BUN <i>UV Method</i>	5.80	mg/dL	5.0 - 25.0

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* This test has been out sourced.


Approved By : Dr. Purvish Darji
MD (Pathology)

Approved On : 17-Jun-2024 10:34 AM
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TEST REPORT

Reg. No : 406100899 **Ref Id** :
Name : Mrs. Nimishaben Narendrabhai Jadav **Collected On** : 17-Jun-2024 09:31 AM
Age/Sex : 36 Years / Female **Pass. No.** : **Reg. Date** : 17-Jun-2024 09:29 AM
Ref. By : **Tele No.** : 9687818143
Sample Type : EDTA **Dispatch At** :
Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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HEMOGLOBIN A1 C ESTIMATION
Specimen: Blood EDTA

*Hb A1C	5.1	% of Total Hb	Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : 6.5 % or higher
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Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose	99.67	mg/dL
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Calculated

Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.


*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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* This test has been out sourced.

Approved By : 
Dr. Purvish Darji
MD (Pathology)

Approved On : 18-Jun-2024 09:09 AM
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TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Urine Spot		Location : CHPL

Test	Result	Unit	Biological Ref. Interval
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URINE ROUTINE EXAMINATION
PHYSICAL EXAMINATION

Quantity	30 cc	
Colour	Pale Yellow	
Clarity	Clear	Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	6	4.6 - 8.0
Sp. Gravity	1.005	1.001 - 1.035
Protein	Nil	Nil
Glucose	Nil	Nil
Ketone Bodies	Nil	Nil
Urobilinogen	Nil	Nil
Bilirubin	Nil	Nil
Nitrite	Nil	Nil
Blood	Nil	Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	Occasional/hpf	Nil
Erythrocytes (Red Cells)	Nil	Nil
Epithelial Cells	Occasional	Nil
Crystals	Absent	Absent
Casts	Absent	Absent
Amorphous Material	Absent	Absent
Bacteria	Absent	Absent
Remarks	-	

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* This test has been out sourced.


Approved By : Dr. Purvish Darji
 MD (Pathology)

Approved On : 17-Jun-2024 12:48 PM
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TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

Parameter	Result	Unit	Biological Ref. Interval
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IMMUNOLOGY

THYROID FUNCTION TEST

T3 (Triiodothyronine) <small>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</small>	0.99	ng/mL	0.86 - 1.92
---	------	-------	-------------

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine) <small>CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY</small>	7.70	µg/dL	3.2 - 12.6
---	------	-------	------------

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).


In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding sites.
2. F T4 values may be decreased in patients taking carbamazepine.
3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

This is an electronically authenticated report.

* This test has been out sourced.

Approved By : 
Dr. Purvish Darji
MD (Pathology)

Approved On : 17-Jun-2024 12:49 PM
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TEST REPORT

Reg. No : 406100899	Ref Id :	Collected On : 17-Jun-2024 09:31 AM
Name : Mrs. Nimishaben Narendrabhai Jadav		Reg. Date : 17-Jun-2024 09:29 AM
Age/Sex : 36 Years / Female	Pass. No. :	Tele No. : 9687818143
Ref. By :		Dispatch At :
Sample Type : Serum		Location : CHPL

TSH 2.190 μ IU/ml 0.35 - 5.50
CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.
TSH levels During Pregnancy :
First Trimester : 0.1 to 2.5 μ IU/mL
Second Trimester : 0.2 to 3.0 μ IU/mL
Third trimester : 0.3 to 3.0 μ IU/mL
Referance : Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Sounders, 2012:2170

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

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* This test has been out sourced.

[Signature]
Approved By : Dr. Purvish Darji
MD (Pathology)
Approved On : 17-Jun-2024 12:49 PM
Page 10 of 1



LABORATORY REPORT

Name : Mrs. Nimishaben Narendrabhai Jadav
Sex/Age : Female/36 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 406100899
Reg. Date : 17-Jun-2024 09:29 AM
Collected On :
Report Date : 18-Jun-2024 11:12 AM

Electrocardiogram

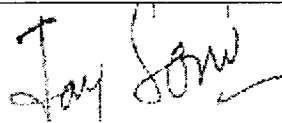
Findings

Normal Sinus Rhythm.

Within Normal Limit.

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

This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

DR. MUKESH LADDHA

Page 1 of 1

NINISHBEN

HR 70/min

Paxist:

P 53°

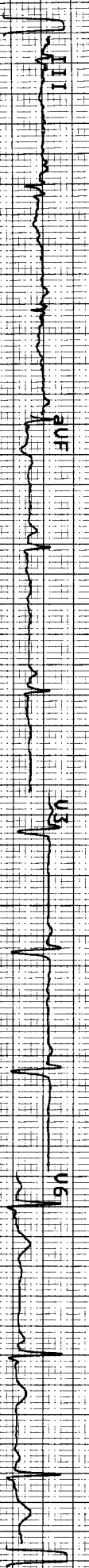
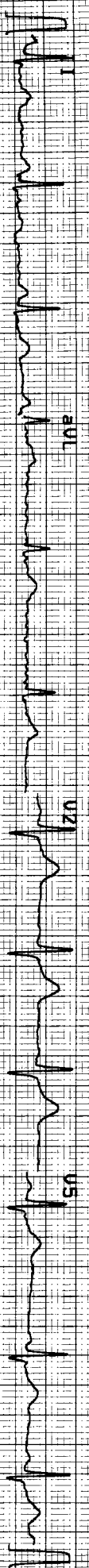
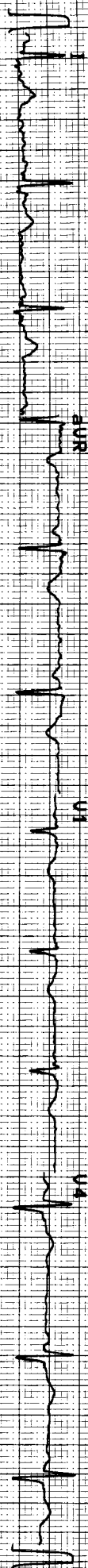
QRS 35°

T 7°

16
35 years
151 cm / 66 kg
Female

Intervals:
 RR 860 ms
 P 92 ms
 PR 134 ms
 QRS 78 ms
 QT 382 ms
 QTc 415 ms (Bazett)
 10 mm/mV

P (II) 0.17 mV
 S (VI) -0.56 mV
 R (V5) 0.96 mV
 Sokol. 1.80 mV



SCHILLER

CURCUI'S HEALTHCARE

Part No. 2.157017M

CE 0123

R.88



LABORATORY REPORT

Name : Mrs. Nimishaben Narendrabhai Jadav

Reg. No : 406100899

Sex/Age : Female/36 Years

Reg. Date : 17-Jun-2024 09:29 AM

Ref. By :

Collected On :

Client Name : Mediwheel

Report Date : 17-Jun-2024 03:07 PM

X RAY CHEST PA

Both lung fields shows prominent broncho-vascular markings.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results. Not valid for medico legal purposes. Results are subject to variations due to technical limitations and patient's preparation, hence correlation with clinical findings and other investigation should be carried out to know the nature of illness.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494



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LABORATORY REPORT

Name :	Mrs. Nimishaben Narendrabhai Jadav	Reg. No :	406100899
Sex/Age :	Female/36 Years	Reg. Date :	17-Jun-2024 09:29 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	17-Jun-2024 03:10 PM

USG OF ABDOMEN

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic biliary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder is partially distended. No evidence of calculus or mass lesion.

Uterus appears normal. No adnexal mass is seen.

No evidence of ascites.

No evidence of lymph adenopathy.

No evidence of dilated small bowel loops.

COMMENTS :

NO SIGNIFICANT ABNORMALITY DETECTED.

Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results. Not valid for medico legal purposes. Results are subject to variations due to technical limitations and patient's preparation, hence correlation with clinical findings and other investigation should be carried out to know the nature of illness.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





LABORATORY REPORT

Name :	Mrs. Nimishaben Narendrabhai Jadav	Reg. No :	406100899
Sex/Age :	Female/36 Years	Reg. Date :	17-Jun-2024 09:29 AM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	17-Jun-2024 03:11 PM

BILATERAL BREAST SONO GRAPHY :-

Normal breast parenchyma is seen on either side. No evidence of solid or cystic mass lesion is seen.
No evidence of mass or architectural distortion is seen.
No evidence of skin thickening or nipple retraction is noted.
No evidence of axillary lymphadenopathy.
Vasculature appears normal.
No evidence of abnormal collection or mass lesion seen.

COMMENT :

- No significant abnormality detected (BI-RADS- I).
- No direct or indirect sign of malignancy seen.

BIRADS Categories :

- 0 Need imaging evaluation.
- I Negative
- II Benign finding
- III probably benign finding.
- IV Suspicious abnormality.
- V Highly suggestive of malignancy.

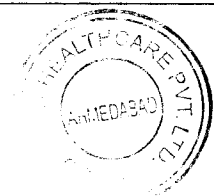
Radiological interpretation is professional opinion and not the final diagnosis. Please see your referring doctor for interpretation of these results. Not valid for medico legal purposes. Results is subject to variations due to technical limitations and patient's preparation, hence correlation with clinical findings and other investigation should be carried out to know the nature of illness.

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

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





LABORATORY REPORT

Name : Mrs. Nimishaben Narendrabhai Jadav **Reg. No** : 406100899
Sex/Age : Female/36 Years **Reg. Date** : 17-Jun-2024 09:29 AM
Ref. By : **Collected On** :
Client Name : Mediwheel **Report Date** : 17-Jun-2024 04:32 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: +0.25

CY: -3.75

AX: 16

LEFT EYE

SP : +0.25

CY : -1.25

AX :177

	Without Glasses	With Glasses
Right Eye	6/18	6/6
Left Eye	6/6	6/6

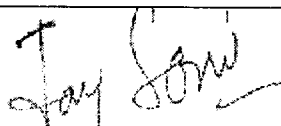
Near Vision: Right Eye - N/6, Left Eye - N/6

ColorVision : Normal

Comments: Normal

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

This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE

Page 2 of 4

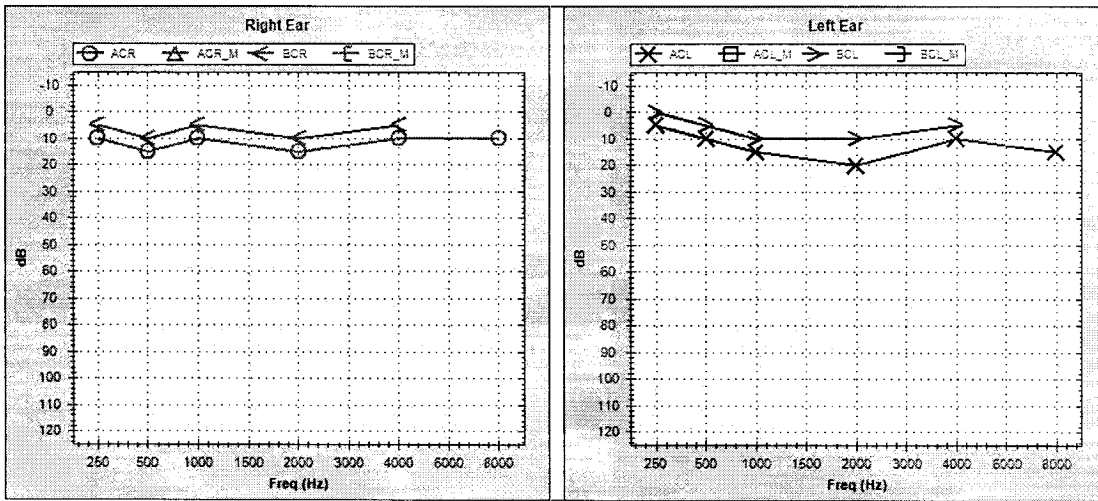


LABORATORY REPORT

Name : Mrs. Nimishaben Narendrabhai Jadav
Sex/Age : Female/36 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 406100899
Reg. Date : 17-Jun-2024 09:29 AM
Collected On :
Report Date : 17-Jun-2024 04:32 PM

AUDIOGRAM



EAR	MODE	Air Conduction		Bone Conduction		Colour Code
		Masked	UnMasked	Masked	UnMasked	
LEFT		□	×	⌈	⌋	Blue
RIGHT		△	○	⌈	⌋	Red
NO RESPONSE : Add ↓ below the respective symbols						

Threshold In dB	RIGHT	LEFT
AIR CONDUCTION	10.5	11
BONE CONDUCTION		
SPEECH		

Comments: - Bilateral Hearing Sensitivity Within Normal Limits.

This is an electronically authenticated report

Dr. Jay Soni
M.D, GENERAL MEDICINE

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 1122

Stage: Supine

Date: 17-06-2024

Speed: 0 kmph

Exec Time : 0:00:00

Grade: 0%

Stage Time: 00:21

THR: 157 bpm

HR: 100 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

V1 0.4 -0.4

V2 -0.4 0.8

V3 -0.3 0

V4 -0.7 0.3

V5 -0.7 0.2

V6 -0.6 0.1

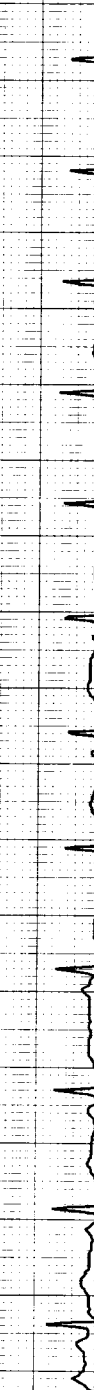
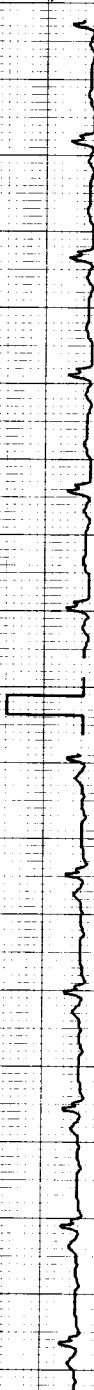
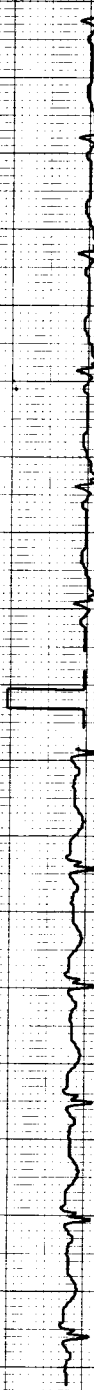
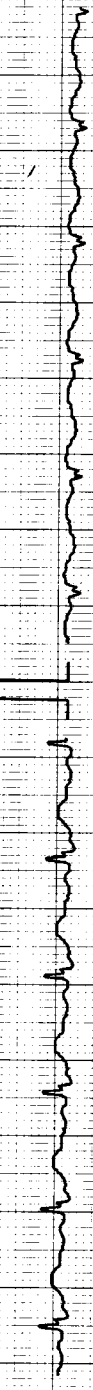


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller-Cardiovit CS-10 Version 3.5

Printed Median

VS

Handwritten notes: 100 bpm, 2

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

ID: 1122

Date: 17-06-2024

Exec Time: 0:00:00

Stage Time: 00:11

HR: 98 bpm

STLevel(mm) STSlope(mV/s)

Speed: 0 kmph

Grade: 0%

THR: 157 bpm

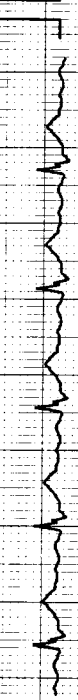
BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

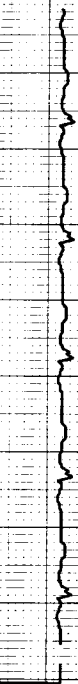
Stage: Standing

STLevel(mm) STSlope(mV/s)

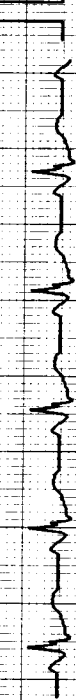
-0.1 0.6 I



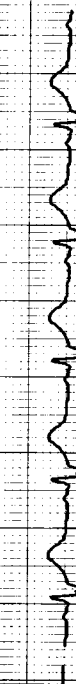
V1 -0.1 -0.2



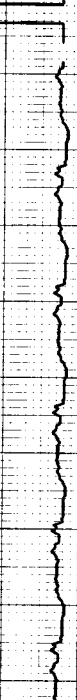
-0.9 0.4 II



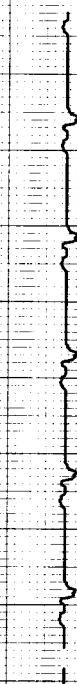
V2 -0.3 0.8



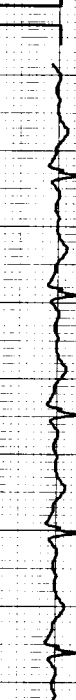
-0.7 -0.1 III



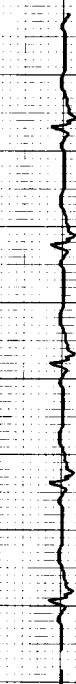
V3 -0.4 0.1



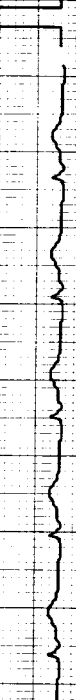
0.3 -0.5 aVR



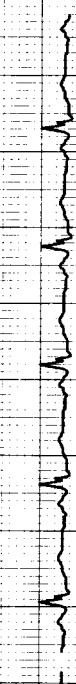
V4 -0.7 0.3



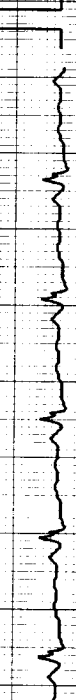
0.4 0.3 aVL



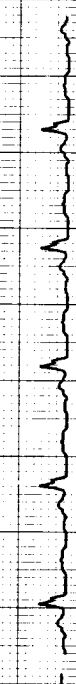
V5 -0.7 0.2



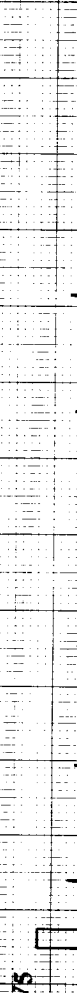
-0.8 0.1 aVF



V6 -0.6 0.1



V5



V6 -0.6 0.1

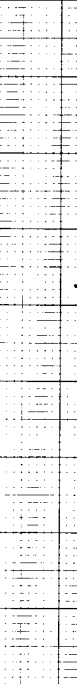


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version:3.5

I Inverted

VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

ID: 1122

Date: 17-06-2024

Exec Time : 0:00:00

Stage Time: 00:15

HR: 94 bpm

STLevel(mm) STSlope(mV/s)

Stage: HyperVentilation

Speed: 0 kmph

Grade: 0%

THR: 157 bpm

BP: 110/70 mmHg

0 0.4

I

0.4

0.1

V1

-0.5

0.4

II

0.7

0.1

V2

-0.6

0

III

0.1

0.1

V3

0.1

-0.4

aVR

0.2

0.2

V4

0.2

0.2

aVL

0.2

0.2

V5

-0.5

0.1

aVF

0.2

0.2

V6

VS

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R + 60 ms, J = R + 60 ms, Post J = J + 80 ms

Infra Median

Schiller Cardiovit CS-10 Version: 3.5

VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

-0.6 0.4

ID: 1122

Stage: PreTest

Date: 17-06-2024

Speed: 1.6 kmph

Exec Time : 0:00:00

Grade: 0%

Stage Time: 00:32

THR: 157 bpm

HR: 100 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

V1 -0.3 0.2

V2 -0.7 1.1

V3 -1.6 0.2

V4 -0.8 0.2

V5 -0.2 0.8

V6 -0.3 0.2

I

II

III

aVR

aVL

aVF

V5

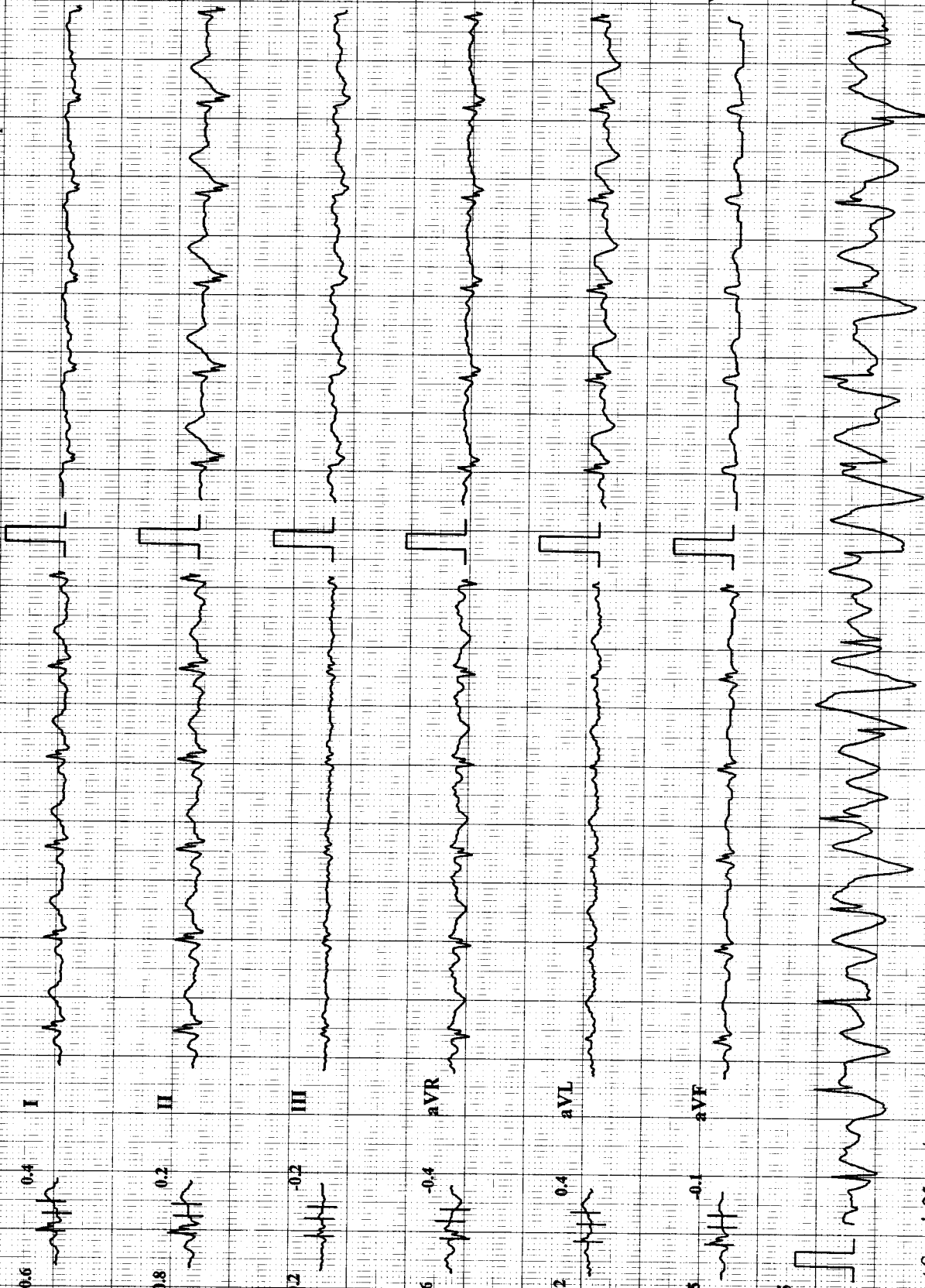


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60ms, J = R + 60ms, Post J = J + 80ms

inked Median

Schiller CardioIT CS-10 Version 3.5

VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

STLevel(mm) STISlope(mV/s)

ID: 1122

Stage: 1

Date: 17-06-2024

Speed: 2.7 kmph

Exec Time : 0:03:00

Grade: 10%

Stage Time: 03:00

THR: 157 bpm

HR: 139 bpm

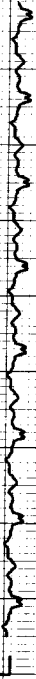
BP: 114/76 mmHg

STLevel(mm) STISlope(mV/s)

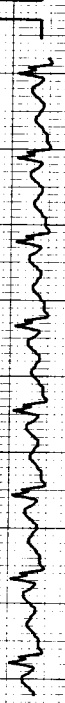
0 0.9 I



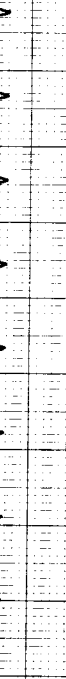
V1 0.3 -0.1



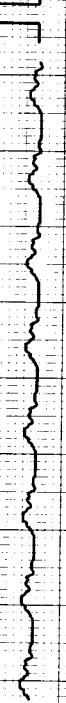
-0.6 0.8 II



V2 0.2 1.2



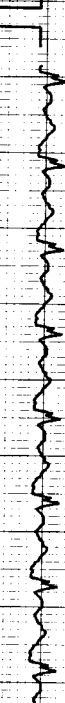
-0.7 -0.1 III



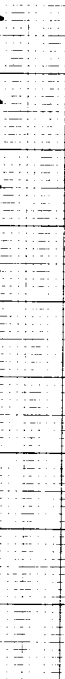
V3 0.5 0.2



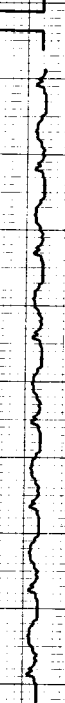
0.2 -0.8 aVR



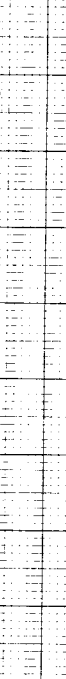
V4 -0.6 0.5



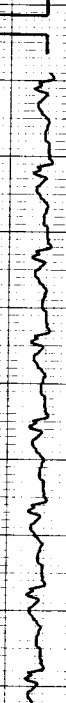
0.3 0.5 aVL



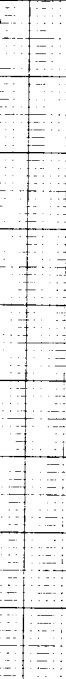
V5 -0.9 0.5



-0.7 0.3 aVF



V6 -0.4 0.3



V5

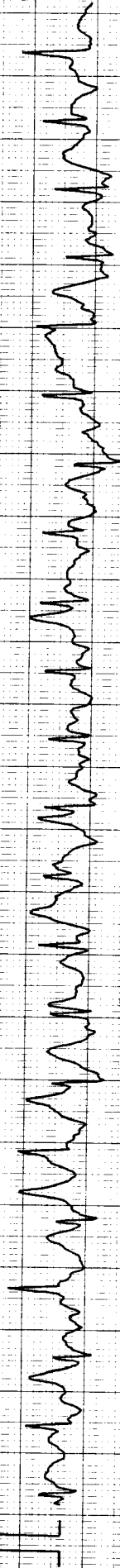


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J - R + 60 ms, Post J = J + 80 ms

T linked Median

Schiller Cardiovit CS-10 Version:3.5

VS

Curovis Healthcare Pvt Ltd, Ahmedabad

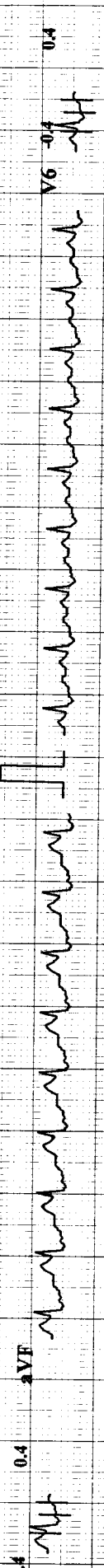
NIMISHABEN, (35 F)

Bruce Protocol
ID: 1122
Stage: 2

Date: 17-06-2024
Speed: 4 kmph

Exec Time : 0:06:00
Grade: 12%

HR: 164 bpm
BP: 118/80 mmHg
STLevel(mm) STSlope(mV/s)



Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

ID: 1122

Date: 17-06-2024

Exec Time: 0:06:30

Stage Time: 00:30

HR: 169 bpm

Bruce Protocol
STLevel(mm) STSlope(mV/s)

Stage: Peak Exercise
Speed: 5.5 kmph

Grade: 14%

THR: 157 bpm

BP: 118/80 mmHg

STLevel(mm) STSlope(mV/s)

V1 0.3 -0.9



V2 0.7 1.3



V3 -0.1 0.2



V4 0 0.9



V5 -0.3 1.2



V6 -0.7 0.5

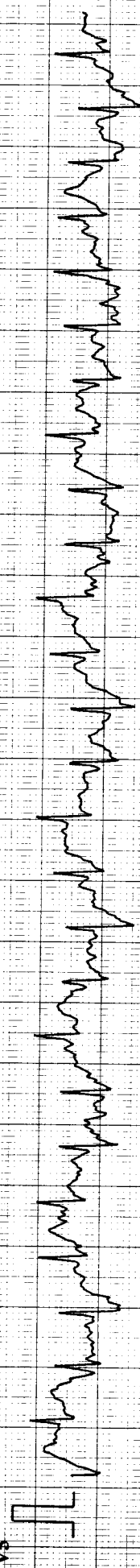
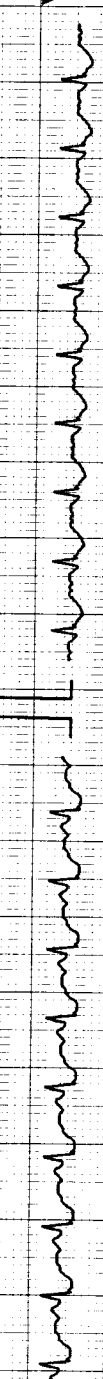


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Inkjet Median

Schiller-Cardiovit CS-10 Version 3.5

VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

HR: 136 bpm
BP: 120/82 mmHg
STLevel(mm) STSlope(mV/s)

Stage Time: 01:00
THR: 157 bpm

Exec Time: 0:07:30
Grade: 0%

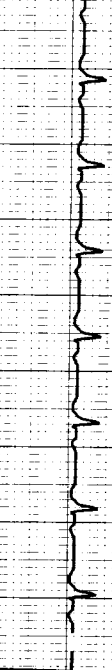
Date: 17-06-2024
Speed: 0 kmph

ID: 1122
Stage: Recovery

Bruce Protocol

STLevel(mm) STSlope(mV/s)

V1 0.2 -0.3



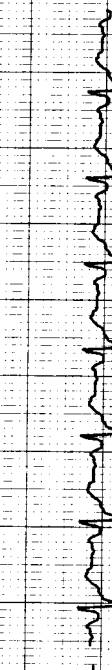
V2 1.9 1.8



V3 0.6 0.6



V4 0.7 0.9



V5 0.5 0.8



V6 0.3 0.6

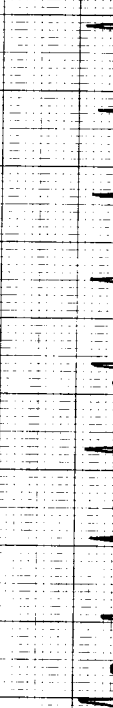
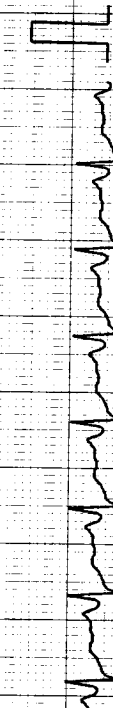
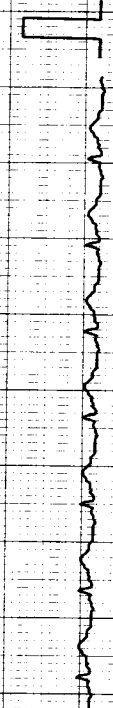
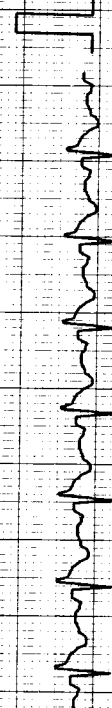
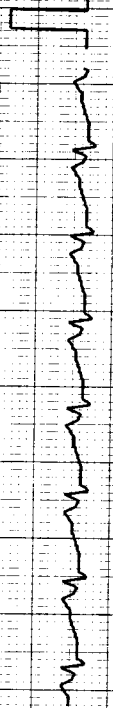
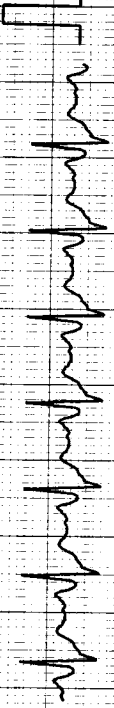
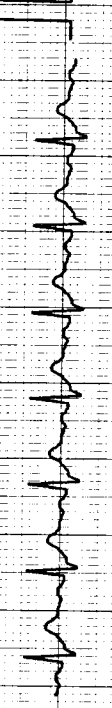


Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO R = 60 ms, J = R + 60 ms, Post J = J + 80 ms
Printed Meridian VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN , (35 F)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 1122

Date: 17-06-2024

Stage: Recovery2
Speed: 0 kmph

Exec Time: 0:08:30

Grade: 0%

Stage Time: 01:00

THR: 157 bpm

HR: 119 bpm

BP: 116/80 mmHg

STLevel(mm) STSlope(mV/s)

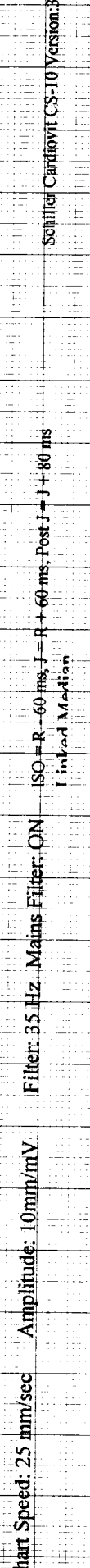
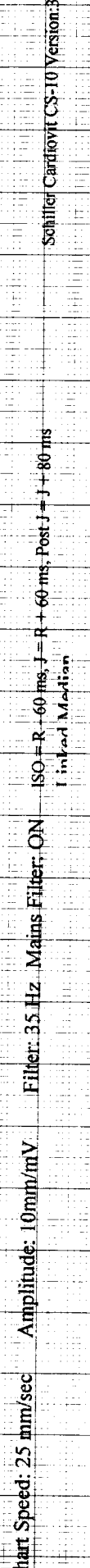
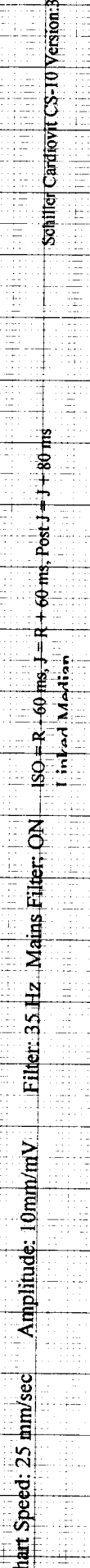
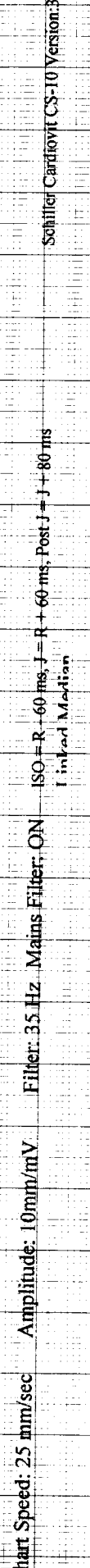
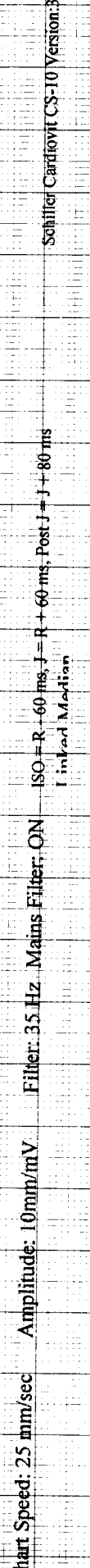
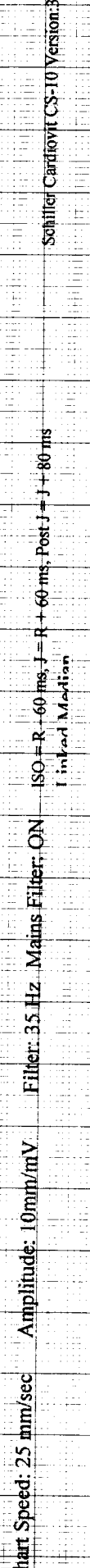


Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO = R + 60 ms, J = R + 60 ms, Post J = J + 80 ms
linked Median VS

Curovis Healthcare Pvt Ltd, Ahmedabad

NIMISHABEN, (35 F)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 1122

Date: 17-06-2024

Stage: Recovery3
Speed: 0 kmph

Exec Time : 0:08:53

Grade: 0%

Stage Time: 00:23

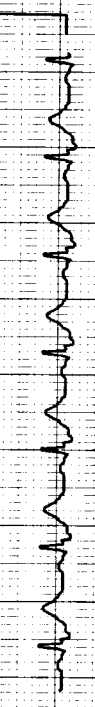
THR: 157 bpm

HR: 119 bpm

BP: 112/80 mmHg

STLevel(mm) STSlope(mV/s)

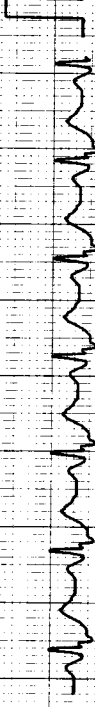
0.2 0.9 I



V1 0.2 -0.3



-0.1 0.9 II



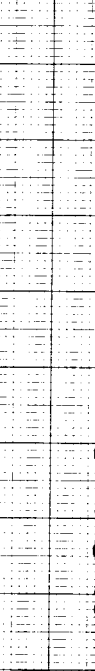
V2 1.1 1.6



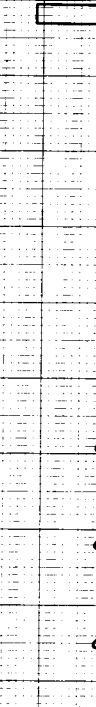
-0.4 -0.1 III



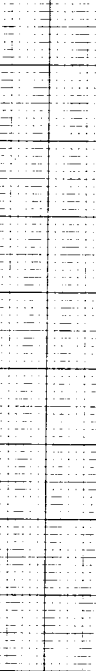
V3 0.1 0.2



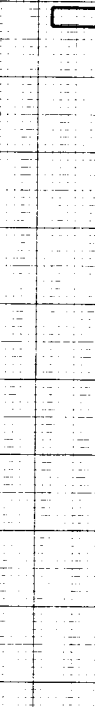
0 -0.9 aVR



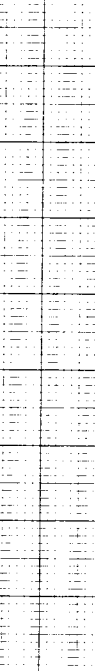
V4 0.1 0.6



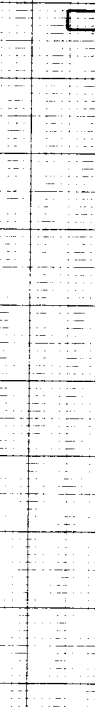
0.3 0.5 aVL



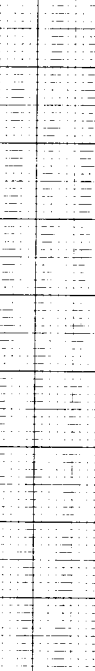
V5 0.1 0.6



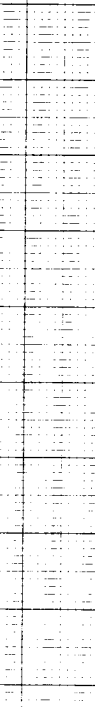
-0.2 0.4 aVF



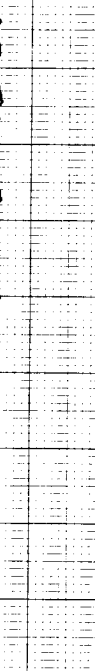
V6 -0.1 0.4



V5



V6 -0.1 0.4



V6 -0.1 0.4

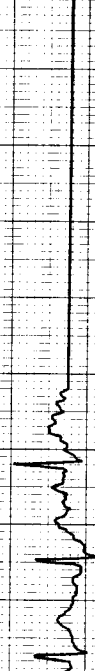


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Mains Filter: ON

ISO = R - 60ms, J = R + 60ms, Post J = J + 80ms

I included

Schiller CardioIT CS-10 Version 3.5

VS

N. N. J. S. D. M.

Curovis Healthcare Pvt Ltd, Ahmedabad

Name: NIMISHABEN, **Date:** 17-06-2024 **Time:** 11:36
Age: 35 **Gender:** F **Height:** 151 cms **Weight:** 66 Kg **ID:** 1122

Clinical History:

Medications:

Test Details:

Protocol: Bruce **Predicted Max HR:** 185 **Target HR:** 157 (85% of Pr. MHR)
Exercise Time: 0:06:30 **Achieved Max HR:** 169 (91% of Pr. MHR)
Max BP: 120/82 **Max BP x HR:** 20280 **Max Mets:** 7.3
Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:21	1	0	0	100	110/70	11000	-0.8 II	0.8 V2
Standing	00:11	1	0	0	98	110/70	10780	-0.9 II	0.8 V2
HyperVentilation	00:15	1	0	0	94	110/70	10340	-0.6 III	0.7 V2
PreTest	00:32	1	1.6	0	100	110/70	11000	-1.6 V3	1.1 V2
Stage: 1	03:00	4.7	2.7	10	139	114/76	15846	-0.9 V5	1.2 V2
Stage: 2	03:00	7	4	12	164	118/80	19352	-1.5 III	1.2 V2
Peak Exercise	00:30	7.3	5.5	14	169	118/80	19942	0.7 V2	1.3 V2
Recovery1	01:00	1	0	0	136	120/82	16320	1.9 V2	1.8 V2
Recovery2	01:00	1	0	0	119	116/80	13804	0.9 V2	1.8 V2
Recovery3	00:23	1	0	0	119	112/80	13328	1.1 V2	1.6 V2

Interpretation

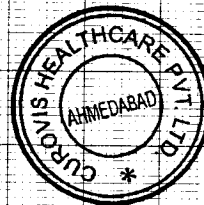
The Patient Exercised according to Bruce Protocol for 0:06:30 achieving a work level of 7.3 METS.
 Resting Heart Rate, initially 100 bpm rose to a max. heart rate of 169bpm (91% of Predicted Maximum Heart Rate).
 Resting Blood Pressure of 110/70 mmHg, rose to a maximum Blood Pressure of 120/82 mmHg

STRESS TEST NEGATIVE.

Dr. Jay Soni

~~M.D. (General Medicine)~~

~~Reg. No.: G-23899~~



Ref. Doctor: ---

Doctor: ---

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The Art of Diagnostics

(Summary Report edited by User)
 Cardiovit CS-10 Version:3.5