



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

Name: DANESHWARI PATLE	
SH No: 2698706	Date:24 08 2024
Age: 32	Gender:FEMALE

ASSESSMENT:

- F/H/O :HYPERTENSION(MOTHER,FATHER),DIABETES(MOTHER,FATHER)
- C/O: NOT ABLE TO WALK FAST POST WAKING UP, OCCASIONAL HEADACHE AND HEAD HEAVINESS,DYSPNOEA WITH ACTIVITY PRESENT
- PT HAD UPPER GI SYMPTOMS ,RECTAL BLEEDING AND ABDOMINAL PAIN BEFORE 8-10 DAYS,PAIN WHILE DEFACATING AT ANAL OPENING, HAD ITCHING AT GENITAL ORGANS BEFORE 8-10 DAYS
- BORDERLINE HIGH RBC COUNT(5.03 MILLION/CMM),LOW MCV(79.6),LOW MCH(25),LOW MCHC(31.4),BORDERLINE HIGH RDW CV(14.90)
- HIGH ESR(25)
- BLOOD GROUP:B NEGATIVE/DU NEGATIVE
- BORDERLINE HIGH FBS(101),HIGH HBA1C(6)
- NEAR TO ABOVE OPTIMAL DIRECT LDL(125)
- URINE R/M:LOW SPECIFIC GRAVITY(1.010)
- PAP SMEAR-MILD ACUTE INFLAMMATION.

ADVISED:

- PLENTY OF LIQUIDS
- AVOID OUT SIDE FOOD AND WATER
- REGULAR EXERCISE.
- SURGEON CONSULTATION:
- GYNAC CONSULTATION
- PHYSICIAN CONSULTATION

*(Signature)*  
Sterling Addlife India Limited  
Unit-Sterling Hospital Vadodara  
Race Course Circle (West)  
VADODARA - 390 007.

DR.JAY S PANDIT

Prevention & Rehabilitation Dept

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara – 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 98 98 98 78 78  
www.sterlinghospitals.com | info@sterlinghospitals.com

Registered Office: Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121  
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India





**HEALTH CHECK UP  
MEDICAL EXAMINATION**

Name : Mrs. Panshewari Patle. Employee ID : \_\_\_\_\_  
Company Name : \_\_\_\_\_ Age : 32 Sex : MF  
Height : 146 cms. Weight : 47.9 Kgs BMI : 22.23 Blood Group : B-ve  
Name of HO / Registrar taking History : Dr. Jay S. Pawar

Allergies : <input checked="" type="checkbox"/> None <input type="checkbox"/> Yes (If Yes, describe)	
Drugs/Food/Latex/Dyes/Contrast/Other .....	Reaction
1. _____	_____
2. _____	_____
3. _____	_____

**Chief Complaints :**

.....  
.....  
.....

**Physical Examination :**

**Vital Signs :**

Temp : ..... °F SPO<sub>2</sub> : 99 Pulse : 78 /min R/R : 18 /min B.P. : 136/80 mm Hg

**Past History :**

<p>If Hypertension, since</p> <p>On Medication 1).....</p> <p>2).....</p> <p>3).....</p> <p>If Ischaemic Heart Disease since</p> <p>On Medication 1).....</p> <p>2).....</p> <p>3).....</p> <p>Under Treatment of Dr. ....</p> <p>Any Intervention done .....</p> <p>P/H of Operation</p> <p>Diagnosis : .....</p> <p>Name of Operation : .....</p> <p>Year of Operation : .....</p> <p>Others .....</p>	<p>If Diabetes, since</p> <p>On Medication 1).....</p> <p>2).....</p> <p>3).....</p> <p>Under Treatment Dr. ....</p> <p>If Tuberculosis, When .....</p> <p>Any Other P/H .....</p> <p>Any Other Medication .....</p> <p>P/H of Hospitalization .....</p> <p>Diagnosis : .....</p> <p>Year : .....</p> <p>Duration : .....</p> <p>Blood Transfusion History : Yes /No</p> <p>Year : .....</p>
--	--

**Family History :** (Specify : F-Father, M-Mother, B-Brother, S-Sister)

(Pl. Circle whichever is applicable e.g. If Father has h/o 10 yrs then, Yes / No F/10 yrs)

Hypertension	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	M, F	Asthma	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No
Heart Disease	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No		Stroke	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No
Diabetes	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	M, F	Arthritis/Gout	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No
Tuberculosis	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No		Cancer	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No
Epilepsy	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No		Other Chronic disease	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No

**Personal History :**

Diet	Yes	Smoking	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	since ..... / ..... per day
Appetite	Regular	Alcohol	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	since ..... / ..... (freq.)
Sleep	Regular	Drugs	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	since ..... / ..... (freq.)
Micturition	Regular	Tobacco	<input checked="" type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No	since ..... / ..... (freq.)
Bowel Habits		Any other habit		

**FOR FEMALES :**

 Obstetric History : L.D. L.M.P - 15/8/2024  
 Abortion : 9.9.2024  
 Others :

**General Examination :**

- 
- Anemia
- 
- Cyanosis
- 
- Jaundice
- 
- Generalized lymphadenopathy
- 
- Pedal oedema

**General Examination :**
**Head :**  NSF    Occ. headache & head heaviness

Injuries (Specify if any) :

**Eyes :**  NSF

- Vision :  Normal     Blurred     Double     Colour Blind
- Pupils :  Normal     Abnormal
- Other :  Inflammation     Pain     Itching     Discharge     No complaint

Remarks (if any) :

**Ears :**  NSF

- Deaf     Yes     No    • Pain     Yes     No    • Discharge     Yes     No
- Dizziness     Yes     No

**Nose :**  NSF

- Nosebleed     Yes     No    • Congestion     Yes     No    • Sinus problem     Yes     No

**Mouth :**  NSF

- Lesion     Yes     No
- Dental Hygiene     Good     Poor    Bleeding gums     Yes     No
- Sense of taste     Yes     No

**Throat/Neck :**  NSF

- Swollen glands  Yes  No      Stiffness  Yes  No      Dysphagia  Yes  No

**SYSTEMIC EXAMINATION**

**Neurological :**  NSF

- Headache  Yes  No      • Memory changes  Yes  No      • Dizziness  Yes  No
- Syncope  Yes  No      • Seizures  Yes  No      • Paralysis  Yes  No if yes  R  L
- Cooperative  Yes  No      • Anxiety  Yes  No      • Depression  Yes  No
- Suicidal attempt  Yes  No      Any psychiatric illness MO
- Oriented  Yes  No      if disoriented, to  Person  Place  Time
- Reaction:  Brisk  Sluggish  No response
- LOC :  Alert  Confused  Sedated
- Speech :  Clear  Slurred

**Respiratory :**  NSF

- Lung sounds : .....
- Dyspnoea :  None  With activity  At rest  Lying down  Retractions
- Cough :  None  Non-productive      Productive - colour
- Hemoptysis:  Yes  No
- Night Sweats :  Yes  No
- Cyanosis :  Yes  No      Where .....

**Cardiovascular :**  NSF

- Chest discomfort  Yes  No
- Oedema  Yes  No      Location : .....  Pitting  Non-pitting

**Extremities-Musculoskeletal :**  NSF

- Skin :  Warm  Cool  Dry  Firm  Flaccid  Colour
  - Extremities : Tingling  Yes  No      • Weakness  Yes  No      Deformity  Yes  No
  - Joints : Pain  Yes  No      • Stiffness :  Yes  No
  - Uses :  Walker  Wheelchair  None
- unable to walk fast post walking up*

**Gastrointestinal :**  NSF

- Appetite  Good  Poor      • Nausea  Yes  No      • Vomiting  Yes  No
- Distension  Yes  No      • Heartburn  Yes  No      • Flatus  Yes  No
- Pain  Yes  No      • Rectal Bleeding  Yes  No
- Colostomy  Yes  No      • Ileostomy  Yes  No

**Bowel**

- Diarrhoea  Constipation  Incontinence  Blood in stool  None
  - Pain  Yes  No      Place anal opening      Hemorrhoids  Yes  No
  - Frequency of stool 1x per day
  - Interventions :  None      • Laxatives  Yes  No      Type ..... Frequency .....
- not stool. Before 8-10 days*

**Genitorurinary :**  NSF

 Colour of Urine Not yellow Frequency 5-6 times/day  
 Pain  Yes  No Burning  Yes  No Itching  Yes  No  
 Urgency  Yes  No Incontinence  Yes  No  
 Nocturia  Yes  No Urostomy  Yes  No  
 History of calculi  Yes  No History of UTI  Yes  No  
 Foleys Catheter  Yes  No Date of Insertion \_\_\_\_\_

**Reproductive :**  NA  NSF

 LMP 15/8/24 Regular / Irregular Irregular  
 Dysmenorrhea  Yes  No Amenorrhea  Yes  No if yes, Duration \_\_\_\_\_  
 Menopausal  Yes  No if yes, Duration \_\_\_\_\_  
 Vaginal discharge  Yes  No Itching  Yes  No 8-10 days Before.
**Breasts**  NA  NSF

 Breast Feeding  Yes  No Lumps  Yes  No

**Positive Finding & Advice**

.....

.....

.....

.....

**Sterling Addlife India Limited**  
 Unit-Sterling Hospital Vadodara  
 Race Course Circle, (West)  
 VADODARA - 390 007.

Sign and Stamp of Medical Officer

**Sterling Hospital**  
 Racecourse Road

**EMERGENCY HELPLINE**

 992 444 9972  
 0265 - 61 44 111

**Sterling Hospital**  
 Bhayli

**EMERGENCY HELPLINE**

 908 1000 557  
 0265 - 61 23 333



GYNAECOLOGIST CHECK UP

NAME: Demeshwasi Patil

DATE: 24/8/24

AGE: 32yrs.

1 male - 3yrs  
LSES

COMPLAINTS: none

TL not done

O/H PARA: G, P, A, L, 1

mc - 1-2 days  
26-30

MENSTRUAL H/O: 15/08/24

P/A: Soft

P/S: NAD

P/V: NAD

ADVICE: Pap Smear test taken

Sterling Addlife India Limited  
Unit: Sterling Hospital Vadodara  
Race Course Circle, (West)  
VADODARA - 390 007.

DR. ARCHANA DWIVEDI  
(GYNAECOLOGIST)





Passport No :

**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mrs. Daneshwari . Patle	Lab Id	: 082407502302	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: Main BNo./
Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 12:58 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadoda

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Complete Blood Count**

Test	Method	Result	Unit	Biological Ref. Interval
Hemoglobin	Colorimetric	12.6	g/dL	12.0 - 16.0
RBC Count	Electrical impedance	H 5.03	million/cmm	3.8 - 4.8
Hematocrit	Calculated	40.1	%	36 - 48
MCV	Derived	L 79.6	fL	83 - 101
MCH	Calculated	L 25.0	pg	26.4 - 33.2
MCHC	Calculated	L 31.4	g/dL	31.8 - 35.9
RDW CV	Calculated	H 14.90	%	11.6 - 14
<b>Total WBC and Differential Count</b>				
WBC count	SF Cube cell analysis	8940	/cmm	4000 - 10000
<b>Differential Count</b>				
Neutrophils	Microscopic	72	% 40 - 80	<b>Absolute Count</b> 6437 /cmm 2000 - 6700
Lymphocytes	Microscopic	24	% 20 - 40	2146 /cmm 1000 - 3000
Eosinophils	Microscopic	00	% 1 - 6	0 /cmm 20 - 500
Monocytes	Microscopic	04	% 2 - 10	358 /cmm 200 - 1000
Basophils	Microscopic	00	% 0 - 2	0 /cmm 0 - 100
<b>Platelet Count</b>				
Platelet Count	Electrical impedance	369000	/cmm	150000 - 410000
MPV	Calculated	10.10	fL	7.5 - 10.3
Platelets Morphology	Platelets are adequate on Smear			



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tests marked with # are referred tests

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**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Complete Blood Count**

Test	Result	Unit	Biological Ref. Interval
<b>Erythrocytes Sedimentation Rate</b>			
ESR	H 25	mm/1hr	0 - 21
	<small>Capillary photometry</small>		

**Differential Count**
**Absolute Count**

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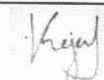
Passport No :

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Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: Main BNo./
Ref. Id	: 298706 / 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:56 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: EDTA blood	Process At	: 75 – Sterling Hospital, Race course (Vadoda)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Blood Group**

Test	Result	Unit	Biological Ref. Interval
ABO Type <i>Tube Agglutination</i>	"B"		
Rh (D) Type	Negative/ Du Negative		


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Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 12:57 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Serum, Urine	Process At	: 75 – Sterling Hospital, Race course (Vadodara)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**

Test	Result	Unit	Biological Ref. Interval
<b>Fasting Blood Glucose</b> <i>GOD-POD</i>	H 101.0	mg/dL	74 - 100
<b>Fasting Urine Glucose</b> <i>GOD-POD</i>	Absent		Absent
<b>Fasting Urine Ketone</b> <i>Nitroprusside</i>	Absent		Absent

	Fasting Blood Glucose*	Postprandial Blood Glucose #	Random Blood Glucose
Normal	< 100 mg/dL	< 140 mg/dL	< 140 mg/dL
Prediabetic	100 – 125 mg/dL	140 – 199 mg/dL	140 – 199 mg/dL
Diabetic	>/=126 mg/dL	>/= 200 mg/dl	>/= 200 mg/dl

\* Fasting is defined as no caloric intake for more than 8 hours

# The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.

**Criteria for Diagnosis of Diabetes:**

1. Fasting blood glucose (FPG)  $\geq$  126 mg/dL
2. Two-hour blood glucose (2-h OGTT) = 200 mg/dL
3. HbA1c values (A1c)  $\geq$  6.5%
4. Random plasma glucose  $\geq$  200 mg/dL

(With symptoms of hyperglycemia or hyperglycemic crisis)

In the absence of unequivocal hyperglycemia, diagnosis of DM using A1C, FPG or 2-h OGTT requires two abnormal test results from the same sample or in two separate samples.

**References:**

1. American diabetes association. Standards of medical care in diabetes 2024
2. National Library of Medicine – National Institute of Health (USA) – Diabetes Mellitus
3. World Health Organization – Factsheet on Diabetes – Prevention and treatment



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Ref. Id	: 298706 / 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 15:17 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 13:52	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Fluoride	Process At	: 75 – Sterling Hospital, Race course (Vadodara)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**

Test	Result	Unit	Biological Ref. Interval
<b>Post-breakfast Blood Glucose</b> <i>GOD-POD</i>	87	mg/dL	70 - 140
<b>Post-breakfast Urine Glucose</b> <i>GOD-POD</i>	Absent		Absent
<b>Post Breakfast Urine Ketone</b> <i>Nitroprusside</i>	Absent		Absent



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Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:55 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: EDTA blood	Process At	: 75 – Sterling Hospital, Race course (Vadodara)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**HbA1c (Glycosylated Hemoglobin) by HPLC**

Test	Result	Unit	Biological Ref. Interval
HbA1c	H 6.00	%	For Screening: Diabetes: $\geq 6.5\%$ ; Pre-Diabetes: 5.7 - 6.4%; Non-Diabetes: $< 5.7\%$
Mean Blood Glucose	125.50	mg/dL	For Diabetic Patient: Poor Control : $> 7.0\%$ ; Good Control : 6.0-7.0%

**Description:**

- Total haemoglobin A1c is continuously synthesized 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).

**Reference:** American diabetes association. Standards of medical care in diabetes 2024



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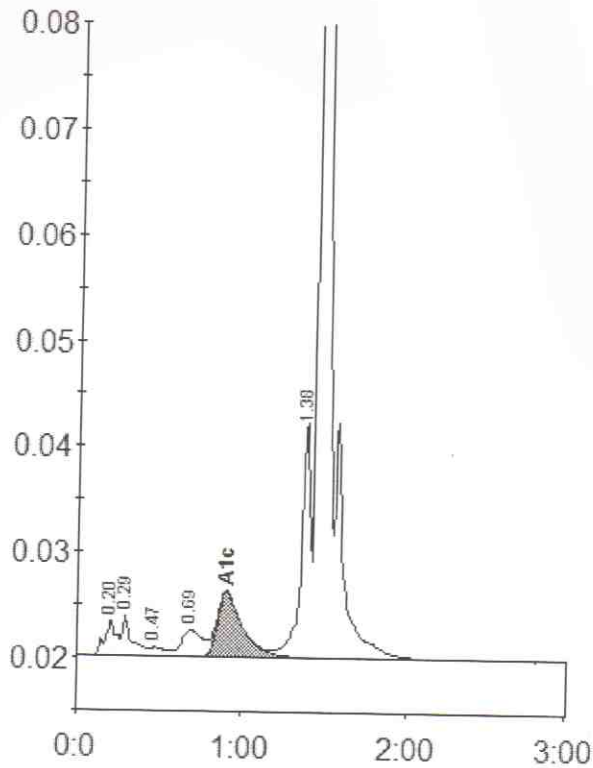
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Bio-Rad                      DATE: 24/08/2024  
D-10                            TIME: 01:57 PM  
S/N: #DJ8G550303        Software version: 4.30-2  
Sample ID:                    082407502302  
Injection date                24/08/2024 01:57 PM  
Injection #: 6                 Method: HbA1c  
Rack #: ---                    Rack position: 6



Peak table - ID: 082407502302

Peak	R.time	Height	Area	Area %
A1a	0.20	3353	16463	1.1
A1b	0.29	3963	17311	1.2
F	0.47	900	6346	0.4
LA1c/CHb-1	0.69	2573	22927	1.6
A1c	0.91	6165	66779	6.0
P3	1.38	22353	86446	6.0
A0	1.45	472444	1234612	85.1
Total Area:	1450883			

Concentration:	%
A1c	6.0





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		Sample Type	: Serum	Process At	: 75 – Sterling Hospital, Race course (Vadoda)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Lipid Profile**

Test	Result	Unit	Biological Ref. Interval
<b>Cholesterol</b> <i>Cholesterol oxidase – Peroxidase</i>	182.0	mg/dL	Desirable : <200 Borderline High : 200-239 High : >240
<b>Triglyceride</b> <i>Ezymatic (Lipase/GK/GPo/POD)</i>	120.0	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very High : >500
<b>HDL Cholesterol</b> <i>PTA/MgCl<sub>2</sub></i>	43.0	mg/dL	Low: <40.0 High: >60.0
<b>Direct LDL</b> <i>Direct measured</i>	H 125.00	mg/dL	Optimal: <100 Near to above Optimal: 100–129 Borderline High: 130-159 High: 160–189 Very High: =190
<b>VLDL</b> <i>Calculated</i>	24.00	mg/dL	15 - 35
<b>CHOL/HDL Ratio</b> <i>Calculated</i>	4.2		Up to 5.0
<b>dLDL/HDL Ratio</b> <i>Calculated</i>	2.9		Up to 3.5


**Dr. Kajal Parmar**

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**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mrs. Daneshwari . Patle	Lab Id	: 082407502302	Pt. Type	: Sterling Hospital Vadodara Health Checkup Main
Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: BNo./
Ref. Id	: 298706 / 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 12:57 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Serum	Process At	: 75 – Sterling Hospital, Race course (Vadoda

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**

Test	Result	Unit	Biological Ref. Interval
<b>Uric Acid</b> <i>Uricase</i>	4.20	mg/dL	2.5 - 6.2
<b>Blood Urea Nitrogen</b> <i>Calculated</i>	7.01	mg/dL	7.0 - 17.0
<b>Urea</b> <i>Urease, Colorimetric</i>	15.0	mg/dL	15.0 - 36.4
<b>Creatinine, serum</b> <i>Creatinine Amidohydrolase</i>	0.60	mg/dL	0.52 - 1.04
<b>BUN Creatinine Ratio</b> <i>Calculated</i>	11.68		
<b>Urea Creatinine Ratio</b> <i>Calculated</i>	25.00		


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Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: Main BNo./
Ref. Id	: 298706 / 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:27 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Serum	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Liver Function Test**

Test	Result	Unit	Biological Ref. Interval
<b>ALT (SGPT)</b> <i>UV with P5P, IFCC</i>	15.0	U/L	0 - 35
<b>AST (SGOT)</b> <i>UV with P5P</i>	19.0	U/L	14 - 36
<b>GGT (Gamma Glutamyl Transferase)</b> <i>L-y-Glytamyl-p-nitroanilide</i>	13.0	U/L	12 - 43
<b>Alkaline Phosphatase</b> <i>PNPP, AMP Buffer, IFCC</i>	67.0	U/L	38 - 126
<b>Total Bilirubin</b> <i>Azobilirubin chromophores</i>	0.50	mg/dL	0.2 - 1.3
<b>Conjugated Bilirubin</b> <i>Cationic Mordant Binding</i>	0.10	mg/dL	0.0 - 0.3
<b>Unconjugated Bilirubin</b> <i>Cationic Mordant Binding</i>	0.30	mg/dL	0.0 - 1.1
<b>Delta Bilirubin</b> <i>Calculated</i>	0.10	mg/dL	0.0 - 0.2
<b>Total Protein</b> <i>Copper tartrate to colour complex</i>	8.20	g/dL	6.3 - 8.2
<b>Albumin</b> <i>Bromocresol Green Method</i>	4.70	g/dL	3.5 - 5.0
<b>Globulin</b> <i>Calculated</i>	3.50	g/dL	2.3 - 3.5
<b>A/G Ratio</b> <i>Calculated</i>	1.34		1.3 - 1.7


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Name	: Mrs. Daneshwari . Patle	Lab Id	: 082407502302	Pt. Type	: Sterling Hospital Vadodara Health Checkup Main
Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: BNo./
Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:26 Status: Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Serum	Process At	: 75 - Sterling Hospital, Race course (Vadodara)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**Thyroid Function Tests**

Test	Result	Unit	Biological Ref. Interval
T3, total (Triiodothyronine) <i>CLIA</i>	1.51	ng/mL	0.58 - 1.59
T4, total (Thyroxine) <i>CLIA</i>	11.70	µg/dl	4.87 - 11.72
TSH (3rd Gen.) <i>Chemiluminescence</i>	1.1670	µIU/mL	Non-Pregnant Woman: 0.4001-4.049; Pregnant Woman: 1st Trimester: 0.1298-3.120; 2nd Trimester: 0.2749-2.652; 3rd Trimester : 0.3127-2.947


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**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mrs. Daneshwari . Patle	Lab Id	: 082407502302	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: Main BNo./
Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:26 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Serum	Process At	: 75 – Sterling Hospital, Race course (Vadodra)

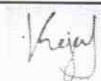
**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**

Levels of TSH in pregnancy ( $\mu\text{IU/mL}$ ): First Trimester 0.1 - 2.5; Second Trimester 0.2 – 3.0; Third Trimester 0.3 – 3.0.

NOTE: TSH concentrations in apparently normal euthyroid subjects are known to be highly skewed, with a strong tailed distribution towards higher TSH values. This is well documented in the pediatric population including the infant age group.

TSH	T3/FT3	T4/FT4	Suggested interpretation of Thyroid function tests pattern
Within range	Decreased	Within range	Isolated low T3 often seen in elderly & associated Non-Thyroid illness. In elderly the drop in T3 level can be up to 25%.
Raised	Within Range	Within Range	Isolated High TSH Especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability; Subclinical Autoimmune Hypothyroidism; Intermediate T4 therapy for hypothyroidism; Recovery phase after Non-Thyroidal illness.
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis; Post thyroidectomy, post radioiodine; Hypothyroid phase of transient thyroiditis.
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies); Intermediate T4 therapy of T4 overdose; Drug Interference-Amiodarone, Heparin, Beta blocker, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH – Especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness; Subclinical Hyperthyroidism; Thyroxine ingestion.
Decreased	Decreased	Decreased	Central Hypothyroidism; Non-Thyroidal illness; Recent treatment for Hypothyroidism (TSH remains suppressed).
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease), Multinodular goitre Toxic nodule; Transient thyroiditis: postpartum, Silent (lymphocytic), Post viral (granulomatous, subacute, DeQuervain'a) Gestational thyrotoxicosis hyperemesis gravidarum.
Decreased or within range	Raised	Within range	T3 toxicosis; Non-Thyroidal illness.

Reference: Wallach's Interpretation of Diagnostic by Mary Williamson, 10th edition, 2015.



**Dr. Kajal Parmar**  
MD

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**LABORATORY TEST REPORT**


Patient Information		Sample Information		Location Information	
Name	: Mrs. Daneshwari . Patle	Lab Id	: 082407502302	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 32 Y 22-Mar-1992	Registration on	: 24-Aug-2024 10:37	Location	: Main BNo./
Ref. Id	: 298706 , 2806934	Collected at	: SAWPL	Approved on	: 24-Aug-2024 13:26 Status : Final
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 11:32	Printed On	: 26-Aug-2024 11:28
		Sample Type	: Urine	Process At	: 75 - Sterling Hospital, Race course (Vadoda)

**MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE**
**URINE ROUTINE EXAMINATION**

Test	Result	Unit	Biological Ref. Interval
<b>Physical &amp; Chemical (Dip strip) examination</b>			
Colour	Pale Yellow		Pale Yellow
pH <i>Double indicator</i>	6.0		5.5 - 7.0
<b>Specific Gravity</b> <i>Polyelectrolyte based reaction</i>	L 1.010		1.015 - 1.025
Protein <i>Protein error of indicators</i>	Absent		Absent
Glucose <i>GOD-POD</i>	Absent		Absent
Ketone <i>Nitroprusside</i>	Absent		Absent
Blood <i>Peroxidase like reaction</i>	Absent		Absent
Bilirubin <i>Diazo reaction</i>	Absent		Absent
Leucocytes <i>Esterase reaction</i>	Absent		Absent
Nitrite <i>p-arsanilic acid to diazonium compound</i>	Absent		Absent
<b>Microscopic Examination</b>			
Erythrocytes (RBCs)	Absent	/hpf	0 - 2
Pus Cells	Occasional	/hpf	0 - 5
Epithelial Cells	Occasional	/hpf	
Crystals	Absent		Absent
Casts	Absent		Absent
Bacteria	Absent		Absent
Amorphous Material	Absent		Absent
Yeast	Absent		Absent


**Dr. Kajal Parmar**

MD

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**LABORATORY REPORT**


Patient Information		Sample Information		Client / Location Information	
Name	: Mrs. Daneshwari . Patle	Lab ID	: 082407502302	Client Name	: Sterling Hospital Vadodara Health Checkup Main
Sex/Age	: Female /32 Years	Registered on	: 24-Aug-2024 10:37	Location	:
Ref. Id	:	Collected at	: non SAWPL	Approved on	: 24-Aug-2024 16:19
Ref. By	: Dr. RMO . STERLING...	Collected on	: 24-Aug-2024 13:40	Printed on	: 26-Aug-2024 11:28
		Sample Type	: PAP Material	Processed at	: 17 – Sterling Hospital, Bhayli (Vadodara)
Branch	: 75 – Sterling Hospital, Race course (Vadodara)				

**CYTOPATHOLOGY**

\* **PAP Smear No. :**  
P - 509/24

\* **Obstetric History :**  
G1 P1 A0 L1

\* **Menstrual History :**  
LMP : 15/8/24

\* **Per-Speculum Examination :**  
NAD

\* **Per-Vaginal Examination :**  
NAD

\* **Specimen Adequacy :**  
Satisfactory for evaluation : Endocervical and Transformation Zone Absent.

\* :  
NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY.

\* :  
Mild Acute Inflammation.

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



**Dr. Swati Gupta**  
MD (Path) DipRCPATH

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Report Date: 24 Aug 2024 - 02:34 PM

Patient Id	: RCR-298706	Patient Name	: PATLE DANESHWARI .
Age	: 32Y 5M 2D	Sex	: Female
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 24 Aug 2024 - 01:17 PM

### RADIOGRAPH CHEST PA

Both lungs and CP angles appear clear.  
Mediastinal shadow and hilar region appear normal.  
Cardiac shadow appears normal.  
Both domes of diaphragm show normal position and contour.  
Only thorax under vision appears normal.

### IMPRESSION

No significant abnormality detected.

**Dr. Palak Nandolia**  
Consultant Radiologist

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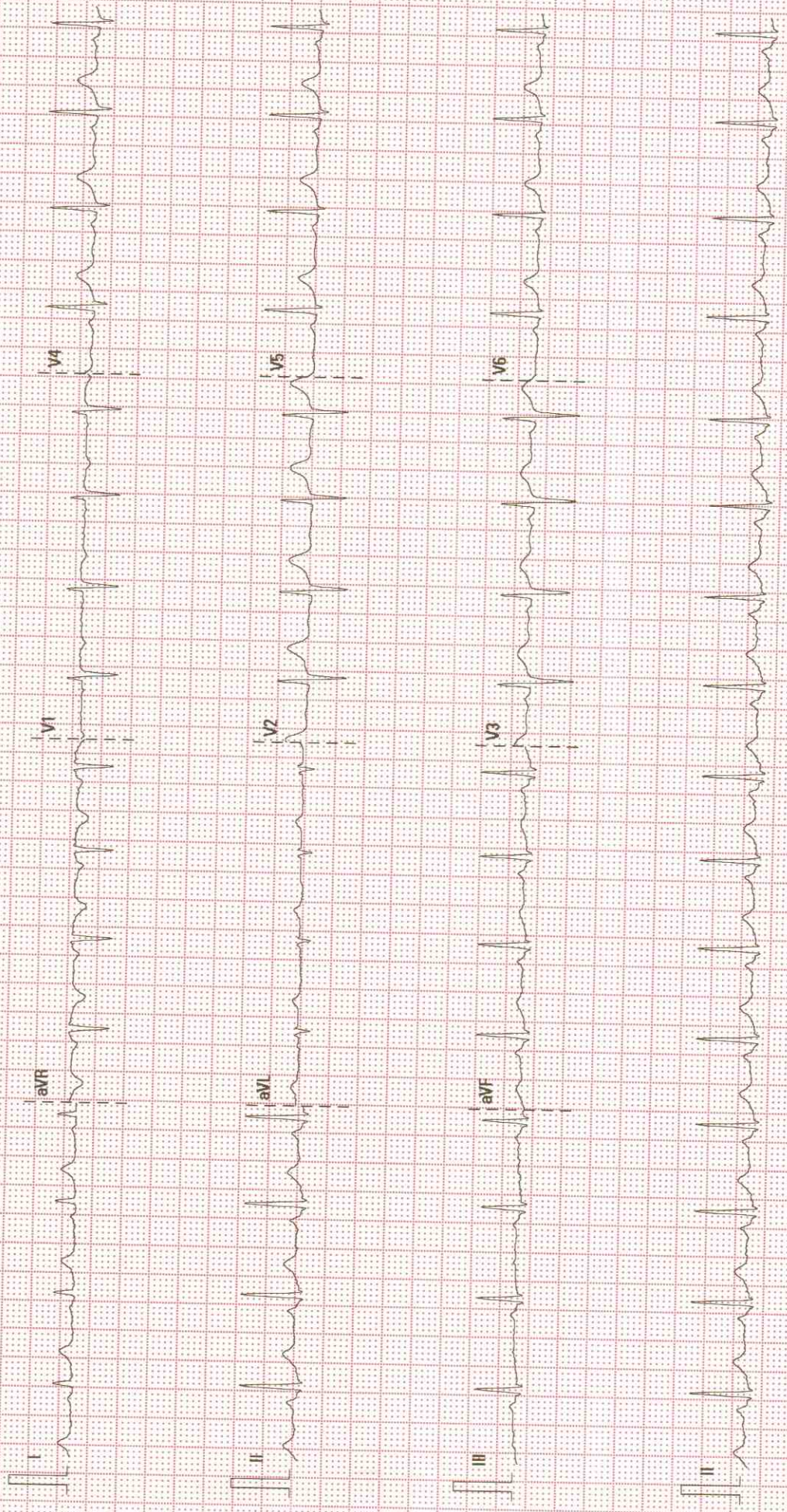
24-08-2024 02:08:14 PM

ID: 2024082414082446  
Name: DANESHWARI PATIL  
Age: 32 Years  
Gender: Female

Vent. Rate	96 bpm	Sinus arrhythmia
PR Interval	102 ms	Short PR interval
QRS Duration	74 ms	
QT/QTc Interval	332/395 ms	
P/QRS/T Axes	65/65/34 deg	Borderline ECG
QTc-Hodges		

Unconfirmed Diagnosis

*Normal*



25 mm/s 10 mm/mV 50 Hz BDR 20 Hz

02.06.00.V28.4.1 SN:FN:74007622



# 2D ECHOCARDIOGRAPHY REPORT



Race Course Road, Vadodara

Name: Mrs. DANESHWARI PATLE  
Age: 32 Years  
Sex: F  
Date: 24-Aug-2024

Ref By: HCP  
Study: 2D Echo

### M-MODE:


IVS	09mm	LVDD	48mm
PW	10mm	LVDS	24mm
LA	35mm	LV EF	60 %

### DOPPLER STUDY:

MITRAL	E 0.99	A 0.25
AORTIC	1.20	
TRICUSPID	N	
PULMONARY	N	

### CONCLUSION :

- NORMAL SIZED CHAMBERS
- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NO RWMA AT REST
- NO DIASTOLIC DYSFUNCTION
- NORMAL RV SIZE AND FUNCTION
- ALL VALVES ARE NORMAL
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION
- NORMAL IVC

  
Dr. KAUSHIK TRIVEDI MD  
Consultant interventional Cardiologist

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Patient Id	: RCR-298706	Patient Name	: PATLE DANESHWARI .
Age	: 32Y 5M 2D	Sex	: Female
Ref. Doctor	: DR. RMO . STERLING	Study Date	: 24 Aug 2024 - 10:57 AM

### ULTRASOUND OF ABDOMEN AND PELVIS

**Liver** is normal in size and shows normal echotexture. No focal lesion seen. No IHBR dilatation. **Portal vein** (11 mm) and CBD (4 mm) appear normal.

**Gall bladder** distended and shows normal wall thickness. No evidence of calculus or mass lesion seen.

Visualized **pancreas** appears normal.

**Spleen** appears normal in size (8 cm) and shows normal echotexture.

**Right kidney** (8.9 x 3.5 cm) appears normal. There is no evidence of scarring, hydronephrosis or calculi. Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Left kidney** (8.7 x 3.6 cm) appears normal. There is no evidence of scarring, hydronephrosis or calculi. Normal cortical echogenicity and cortico-medullary differentiation are maintained.

**Urinary bladder** is well distended and shows normal wall. No calculus or mass lesion is seen.

**Uterus** appears normal in size and shape and reveals normal echotexture. Endometrial thickness is 5.6 mm.

Both **ovaries** appear normal. Right ovary measures ~ 3.4 x 1.6 cm Left ovary measures ~ 3.1 x 1.7 cm. No adnexal mass is seen.

No evidence of ascites seen.

### IMPRESSION

- No significant intra-abdominal abnormality seen in present study.

**Dr. Palak Nandolia**  
Consultant Radiologist

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