

आयकर विभाग
INCOME TAX DEPARTMENT
SUMAN MEENA

भारत सरकार
GOVT. OF INDIA

HARPHOOL SINGH

07/08/1987
Permanent Account Number
CVIPM3928A

सुमन मीणा
Signature

28082015



सुमन मीणा
9610846847


Rajasthani Diagnostic &
Medical Research Centre
Jhunjhunu



RAJSTHANI DIAGNOSTIC & MRI CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMMOGRAPHY

| | | | |
|---------|--------------------------|------|-----------|
| NAME | SUMAN MEENA | AGE- | SEX: F |
| REF/BY: | MEDIWHEEL HEALTH CHECKUP | DATE | 17-Nov-23 |

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver: 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.

Gall bladder: 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.

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

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

Urinary Bladder: 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.

Uterus: 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.

IMPRESSION:

❖ NORMAL SONOGRAPHY STUDY.

Advised: clinicopathological correlation

DR. ANUSHA MAHALAWAT
MD RADIODIAGNOSIS

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



THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE



Name: **Bobss0531**
Patient ID: **Suman meena**

17.11.2023 11:41:01
Standard 12-Lead

Rajasthan Diagnostic & Ref Centre
B-130 Subhash Marg, Indira Nagar, Jaipur

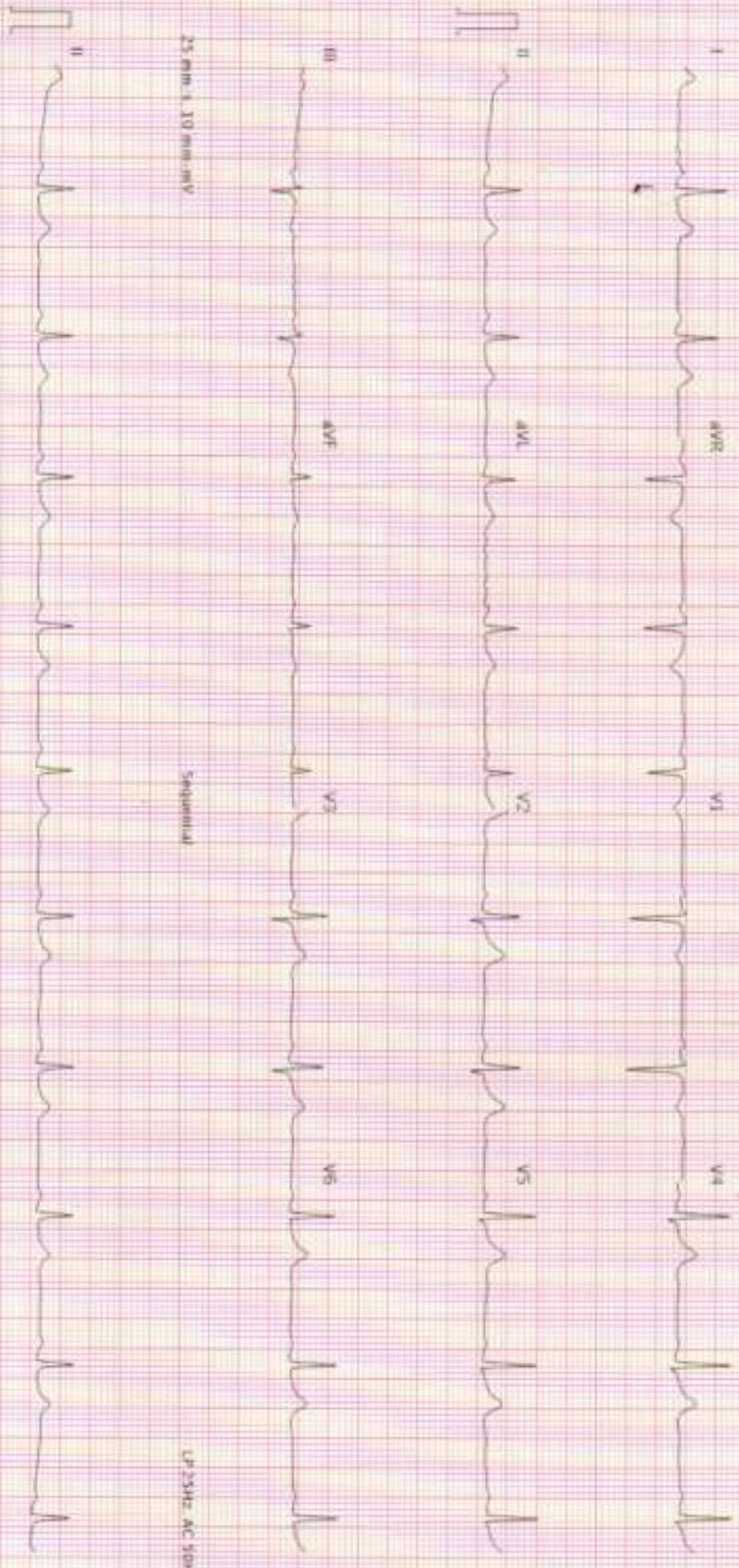
Date of birth: 07.08.1987
Gender: Female
Height:
Weight:
Ethnicity: Undefined
Past medical hx: Unknown
Indication:
Remarks:
Visit ID:
Room:
Medication:
Order ID:
Ord. prov:
Ord. prov:

HR: 61 bpm
P axis: 20
QRS axis: 9
T axis: 14
QTc: 389 ms

PR: 141 ms
QRS: 84 ms
QT: 387 ms
QTc: 389 ms

sinus rhythm
 normal electrical axis
 normal ECG
 (un)ordered report

Rajasthan Diagnostic & Medical Research Centre
Dr. Anshu Janghun
Janghun



25 mm/s 10 mm/mV

Sequential

UP 25Hz AC 50Hz

25 mm/s 10 mm/mV

UP 25Hz AC 50Hz



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MRI

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TMT

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| | |
|-------------------------------|------------------|
| NAME : SUMAN MEENA | AGE 36 /SEX F |
| REF. BY : BOB HEALTH CHECK UP | DATE: 17.11.2023 |

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)

DR. ANUSHA MAHALAWAT

MD (RADIOLOGIST)

RMC - 38742/25457

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



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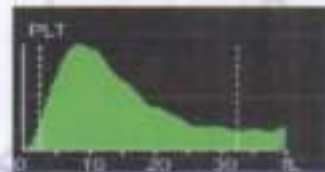




Hematology Analysis Report

First Name: SUMAN MEENA Sample Type: Sample ID: 4
 Last Name: Department: Test Time: 17/11/2023 09:28
 Gender: Female Med Rec. No.: Diagnosis:
 Age: 36 Year

| Parameter | Result | Ref. Range | Unit |
|-----------|--------|--------------|---------------------|
| 1 WBC | 6.81 | 4.00-10.00 | 10 ³ /uL |
| 2 Neu% | 60.9 | 50.0-70.0 | % |
| 3 Lym% | 26.3 | 20.0-40.0 | % |
| 4 Mon% | 7.6 | 3.0-12.0 | % |
| 5 Eos% | 4.3 | 0.5-5.0 | % |
| 6 Bas% | 0.9 | 0.0-1.0 | % |
| 7 Neu# | 4.15 | 2.00-7.00 | 10 ³ /uL |
| 8 Lym# | 1.79 | 0.80-4.00 | 10 ³ /uL |
| 9 Mon# | 0.52 | 0.12-1.20 | 10 ³ /uL |
| 10 Eos# | 0.29 | 0.02-0.50 | 10 ³ /uL |
| 11 Bas# | 0.06 | 0.00-0.10 | 10 ³ /uL |
| 12 RBC | 3.88 | 3.50-5.50 | 10 ⁶ /uL |
| 13 HGB | 10.7 | L 11.0-16.0 | g/dL |
| 14 HCT | 29.8 | L 37.0-54.0 | % |
| 15 MCV | 76.7 | L 80.0-100.0 | fL |
| 16 MCH | 27.5 | 27.0-34.0 | pg |
| 17 MCHC | 35.8 | 32.0-36.0 | g/dL |
| 18 RDW-CV | 13.3 | 11.0-16.0 | % |
| 19 RDW-SD | 42.1 | 35.0-56.0 | fL |
| 20 PLT | 225 | 100-300 | 10 ³ /uL |
| 21 MPV | 10.0 | 6.5-12.0 | fL |
| 22 PDW | 13.7 | 9.0-17.0 | fL |
| 23 PCT | 0.225 | 0.108-0.282 | % |
| 24 P-LCR | 37.8 | 11.0-45.0 | % |
| 25 P-LCC | 85 | 30-90 | 10 ³ /uL |



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

Submitter: Operator: admin Approver:
 Draw Time: 17/11/2023 09:27 Received Time: 17/11/2023 09:27 Validated Time:
 Report Time: 19/11/2023 14:13 Remarks:

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



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RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.
MC-5346



Laboratory Report

Name : **SUMAN MEENA**
Age : **36** Gender : **FEMALE**
Ref. By Dr : **MEDI WHEELFULLY BODY HEALTH CHEKEP**

Sr. Number : **75011**
Invoice Date : **17-11-2023 09:38 AM**
Invoice Number : **10033**
Registration No.: **12253**
Sample On : **17-11-2023 09:38 AM**
Report On : **19-11-2023 02:16 PM**

HAEMATOLOGY

| Test Name | Observed Values | Reference Intervals | Units |
|--------------------------------------|-----------------|---------------------|-------|
| ESR (Erythrocyte Sedimentation Rate) | 18 | 0-20 | mm/hr |
| BLOOD GROUPING (ABO & Rh) | B+ Positive | | |

HbA1c(Glycosylated hemoglobin)

| Test Name | Observed Values | Reference Intervals | Units |
|--|-----------------|--|--------|
| HbA1c(Glycosylated hemoglobin)(Tech. :- HPLC (D-10 Bio-Rad)) | 5.40 | < 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.01 - 8.00 Adequate Control 8.01 - 9.00 Suboptimal Control 9.01 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control | % |
| eAG (Estimated Average Glucose)(Tech. :- Calculated) | 108.28 | 90 - 120 Very Good Control 121 - 150 Adequate Control 151 - 180 Suboptimal Control 181 - 210 Poor Control > 211 Very Poor Control | mg/dL |
| eAG (Estimated Average Glucose) | 6.01 | | mmol/L |

Method : **Fluorescence Immunoassay Technology(Erba[®] Mannheim-EM-200)**

Sample Type : **EDTA Blood**

Remarks :

Glycosylated 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 Treatment Goals (and That have stable glycemc Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemc 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.

Utkash



Utkash
Dr. Manoj Choudhary
B.D. Pathologist
Qual. No. : 4120/1987



PATHOLOGIST

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B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977



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BIO-CHEMISTRY

| Test Name | Observed Values | Reference Intervals | Units |
|---------------------|-----------------|---------------------|-------|
| Blood Sugar Fasting | 98.00 | 70-110 | mg/dL |

RENAL FUNCTION TEST

| Test Name | Observed Values | Reference Intervals | Units |
|----------------------------------|-----------------|---------------------|-------|
| Blood Urea | 26.00 | 10-45 | mg/dL |
| Creatinine | 0.86 | 0.4-1.4 | mg/dL |
| Uric Acid | 4.15 | 3.6-7.2 | mg/dL |
| Calcium | 9.60 | 8.5-11 | mg/dL |
| Gamma glutamyl transferase (GGT) | 30.08 | < 50 | U/L |

Uikash

24/7
EMERGENCY SERVICE
PATHOLOGIST

Kavita Kalia
Dr. Kavita Kalia
B.L.D. (Path.)
QMC No. 4120/1823

PATHOLOGIST



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BIO-CHEMISTRY Liver Function Test

| Test Name | Observed Values | Reference Intervals | Units |
|----------------------|-----------------|---------------------|-------|
| S.G.O.T. | 34.00 | 0-40 | U/L |
| S.G.P.T. | 27.01 | 0-40 | U/L |
| Bilirubin(Total) | 0.98 | 0.1-1.2 | mg/dL |
| Bilirubin(Direct) | 0.20 | 0-0.3 | mg/dL |
| Bilirubin(Indirect) | 0.78 | 0.1-1.0 | mg/dL |
| Total Protein | 7.05 | 6-8 | mg/dL |
| Albumin | 3.98 | 3.5-5 | mg/dL |
| Globulin | 3.07 | 3-4.5 | mg/dL |
| A/G Ratio | 1.30 | 0.5 - 2.65 | g/dL |
| Alkaline Phosphatase | 169.00 | 108-306 | U/L |

LIPID PROFILE COMPLETE

| Test Name | Observed Values | Reference Intervals | Units |
|--------------------------|-----------------|---------------------|-------|
| Cholesterol | 171.00 | 110-200 | mg/dL |
| HDL Cholesterol | 48.00 | 35-70 | mg/dL |
| Triglycerides | 109.00 | 40-170 | mg/dL |
| LDL Cholesterol | 101.20 | 0-150 | mg/dL |
| VLDL Cholesterol | 21.80 | 0-35 | mg/dL |
| TC/HDL Cholesterol Ratio | 3.56 | 2.5-5 | Ratio |
| LDL/HDL Ratio | 2.11 | 1.5-3.5 | Ratio |

Uikash
24/7
LOGIST

Manita Khali
Dr. Manita Khali
M.D. (Path.)
SAC No.: 4730/2023

PATHOLOGIST



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RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.
MC-5348



Laboratory Report

Name : **SUMAN MEENA**
Age : **36** Gender : **FEMALE**
Ref. By Dr : **MEDI WHEELFULLY BODY HEALTH CHEKEP**

Sr. Number : **75011**
Invoice Date : **17-11-2023 09:38 AM**
Invoice Number : **10033**
Registration No.: **12253**
Sample On : **17-11-2023 09:38 AM**
Report On : **19-11-2023 02:16 PM**

URINE EXAMINATION URINE COMPLETE

| Test Name | Observed Values | Reference Intervals | Units |
|---------------------------|-----------------|---------------------|---------|
| PHYSICAL | | | |
| Quantity | | | ml |
| Colour | Pale Yellow | | |
| Appearance / Transparency | Clear | | |
| Specific Gravity | 1.025 | | |
| PH | 5.0 | 4.5-8.5 | |
| CHEMICAL | | | |
| Reaction | Acidic | | |
| Albumin | Trace | | |
| Urine Sugar | Nil | | |
| MICROSCOPIC | | | |
| Red Blood Cells | Nil | | /h.p.f. |
| Pus Cells | 5-7 | | /h.p.f. |
| Epithelial Cells | 1-2 | | /h.p.f. |
| Crystals | Nil | | /h.p.f. |
| Casts | Nil | | /h.p.f. |
| Bactria | Nil | | /h.p.f. |
| Others | | | /h.p.f. |
| Test Name | Observed Values | Reference Intervals | Units |
| URINE SUGAR FASTING | Nil | | |

<<< END OF REPORT >>>

Uikash
24/7
LOGIST

Kavita Kulkarni
Dr. Kavita Kulkarni
MBBS (Path)
SAC No.: 4730/12023

PATHOLOGIST



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B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977



RAJASTHANI DIAGNOSTIC & MRI CENTRE




FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Name :- Mrs. SUMAN MEENA W/O BABLU MEENA
Sex / Age :- Female
Doctor :-
Client Name :- RAJASTHANI LAB- JHUNJHNU
Sample Type :- Serum

Patient ID / CCL No :-102340124
Sample Collected :- 18/11/2023 15:32:4
Sample Received on:18-11-2023 15:33:45
Report Released on: 18-11-2023 17:14:11
Barcode 

| TEST NAME | VALUE | UNIT | REFERENCE RANGE |
|---|--------|--------|---|
| TFT | | | |
| T3 (TOTAL TRIIODOTHYRONINE) (Tech.- Chemiluminescence Immunoassay) | 117.00 | ng/dl | 70 - 204 |
| T4 (TOTAL THYROXINE) (Tech.- Chemiluminescence Immunoassay) | 7.55 | ug/dl | 4.6 - 12.5 |
| TSH. (Ultra Sensitive) (Tech.- Chemiluminescence Immunoassay) | 3.97 | uIU/ml | 0.35 - 5.5 0.52 - 16.00 : 1-30 Days 0.46 - 8.10 : 1 mo - 5 Yrs. 0.35 - 5.50 : Adults |

INTERPRETATION

1. Remark - Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin) Nephrosis etc.

2. Remark - Decreased values of T3 (T4 and TSH normal) have minimal clinical significance and not recommended for diagnosis of hypothyroidism. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy, Drugs (Androgens, Estrogens, O C pills, Phenytoin), Nephrosis etc. In such cases Free T3 and Free T4 give corrected values. 3.Total T3 may decrease by <25 percent in healthy older individuals.

3. Remark - TSH values may be transiently altered because of non-thyroidal illness like severe infections, liver disease, renal and heart failure, severe burns, trauma and surgery etc 2.Drugs that decrease TSH values e.g. L-dopa, Glucocorticoids Drugs that increase TSH values e.g. Iodine, Lithium, and Amiodaron.Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH and a low T4 and low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate TSH produced from the pituitary and so one tends to see low or normal TSHs, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary- adrenal axis. The third type of under-functioning is due to poor conversion of T4 to T3. This requires enzymes and co-factors, in particular selenium, zinc and iron. In this condition there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of T3. This requires micronutrients and also T3 to correct.

- End of Report



डिजिटल प्रमाण

Technologist THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE

M.D.S., (Path.)
Reg No. A-4018

MD. (Path.)
Reg No. 51752

DR. ASHISH SETHI
Consultant Biochemist

