

YOUR LAB PARTNER SINCE 1983

MEDICAL EXAMINATION REPORT (MER)

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

	Name of the examinee Mark of Identification		Mr./Mrs./Ms.— SIVA KAKA K.P (Mole/Scar/any other (specify location)):				
	Age/Date of Birth	- 2	SH	Gender:	CF/M		
4.	Photo ID Checked		(Passport/Election Card/PAN Card/Driving Licence/Company ID)				

PHYSICAL DETAILS:

a. Height (cms)	b. Weight7.2 (K	gs) c. Girth of A	bdomen (cms)
d. Pulse Rate (/Min)	e. Blood Pressure:	Systolic	Diastolic
	1" Readir	ig 130	80
	2 nd Readi	ng	nu no da esta la

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father	L.	Andrew of at	Last 1.1. Object
Mother		110014311/11 200 3011	19-301 Sauthful Sauthful
Brother(s)			
Sister(s)	=	ous pole of the	

HABITS & ADDICTIONS: Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
1101	Nil	110

PERSONAL HISTORY

- a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity.
 If No, please attach details.
- b. Have you undergone/been advised any surgical procedure?
- c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital?
- d. Have you lost or gained weight in past 12 months?

Have you ever suffered from any of the following?

- Psychological Disorders or any kind of disorders of the Nervous System?
- · Any disorders of Respiratory system?
- Any Cardiac or Circulatory Disorders?
- · Enlarged glands or any form of Cancer/Tumour?
- Any Musculoskeletal disorder?

- Any disorder of Gastrointestinal System?
- Unexplained recurrent or persistent fever, and/or weight loss
- Have you been tested for HIV/HBsAg / HCV before? If yes attach reports
- Are you presently taking medication of any kind?

Mclo DLP, 72 DM on A





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YIN

Corp. Office: Express House, Second Floor, Opp. Pothys Silks, Banerjee Road, Kaloor -682017
 Contact: 93334 93334, Web: www.ddrcagilus.com Email: info.ddrc@agilus.in

Any disorders of Urinary System?	Y/N	٠	Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin
OR FEMALE CANDIDATES ONLY			
a. Is there any history of diseases of breast/genital organs?	Y/N	d.	. Do you have any history of miscarriage/ abortion or MTP
b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports)	V/N	e.	For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension at

ny complication onal diabetes,

f. Are you now pregnant? If yes, how many months?

CONFIDENTAIL COMMENTS FROM MEDICAL EXAMINER

Was the examinee co-operative?

Ovaries?

c. Do you suspect any disease of Uterus, Cervix or

> Is there anything about the examine's health, lifestyle that might affect him/her in the near future with regard to his/her job?

Are there any points on which you suggest further information be obtained?

Based on your clinical impression, please provide your suggestions and recommendations below;

Patient is clinically well, Lab separts show elevated Parofile which need to be evaluated

Do you think he/she is MEDICALLY FIT or UNFIT for employment.

MEDICAL EXAMINER'S DECLARATION

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner

Paqueen 's'

Reg. No: 74089

Name & Seal of DDRC SRL Branch

Seal of Medical Examiner

Date & Time

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NAME: MRS: SIVAKALA

AGE:54/F

DATE: 24/02/2024

CHEST X-RAY REPORT

CHEST X-RAY PA VIEW

: Trachea central
No cardiomegaly
Normal vascularity
No parenchymal lesion.

Costophrenic and cardiophrenic angles clear

> IMPRESSION

: Normal Chest Xray

ELECTRO CARDIOGRAM

NSR: 82/minute

No evidence of ischaemia

IMPRESSION

: Normal Ecg.

Company name: MEDIWHEEL

DR SERIN LOPEZ MBBS

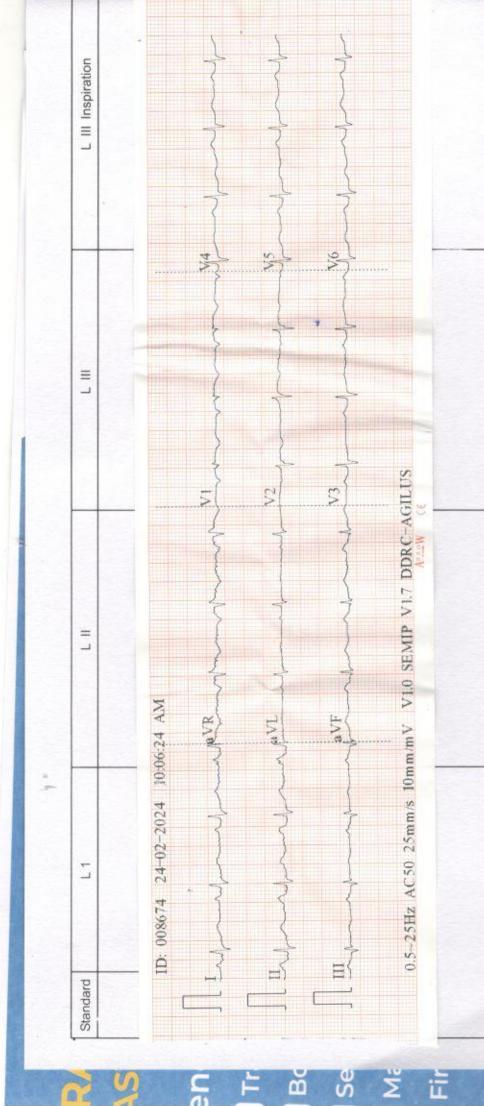
DDRC AGILOS PATHLABS LTD. Aster Square, Medical College, P.O, TVM

Reg No 77656

DDRC AGILUS PATHLABS LTD

		The state of the s	
		57/31/47 ° . 1 : 0.324/0.120 mV Report Confirmed by:	P/QRS/T RV5/SVI
		: 117 ms : 182 ms : 84 ms	PR QRS
	Standard	: 82 bpm (5) V6	, HR
		mw. Zaskikala. 6.P SONHUA	
		kg	04Years cm
		/ mmHg	Female
		Diagnosis Information:	ID: 008674
V4	V3	V.	
	5	VA	

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From

G. Sasikeumar, Ec. No. 53951. Bank of Baroda Nagercoil

To

DDRC, Agilus Trivandrum

Dear Sir/ Madam

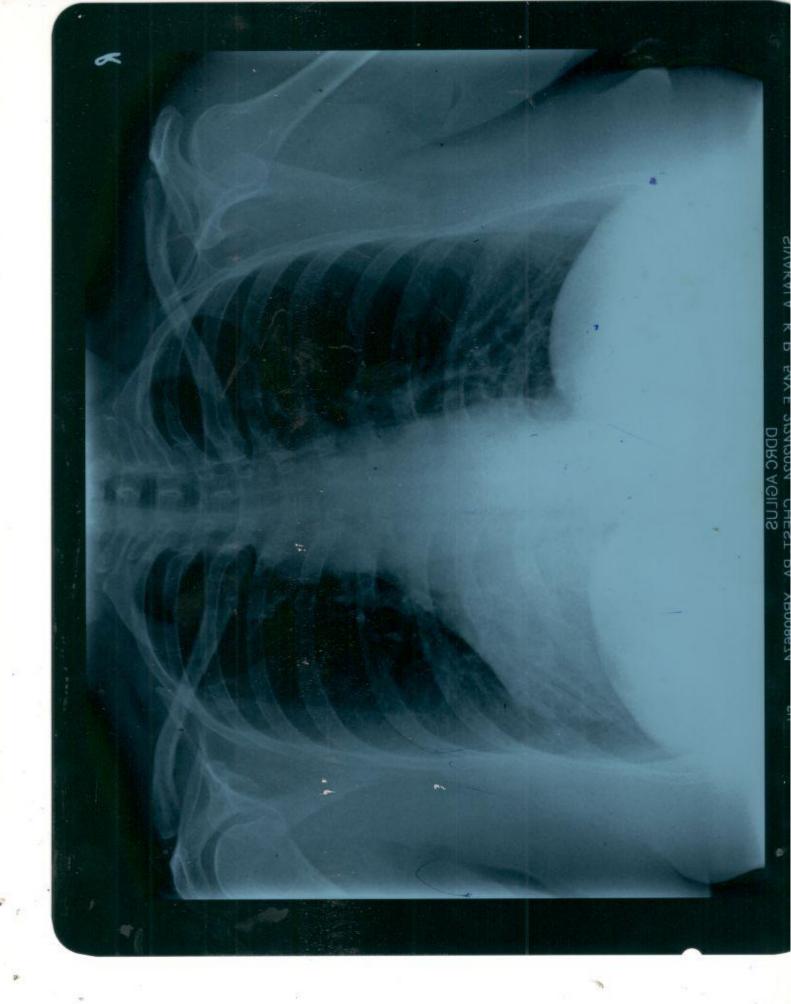
Me & as my wife Sivakala were not willing to take Eyechackup a Dental chockep

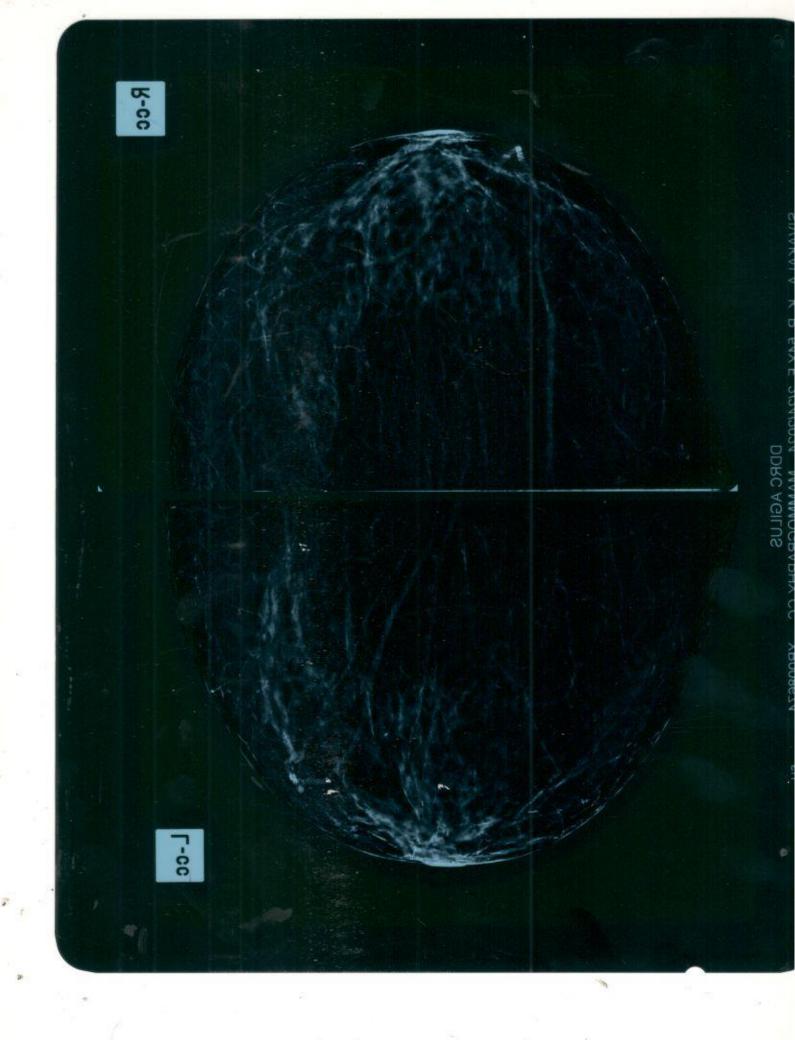
Thanking You

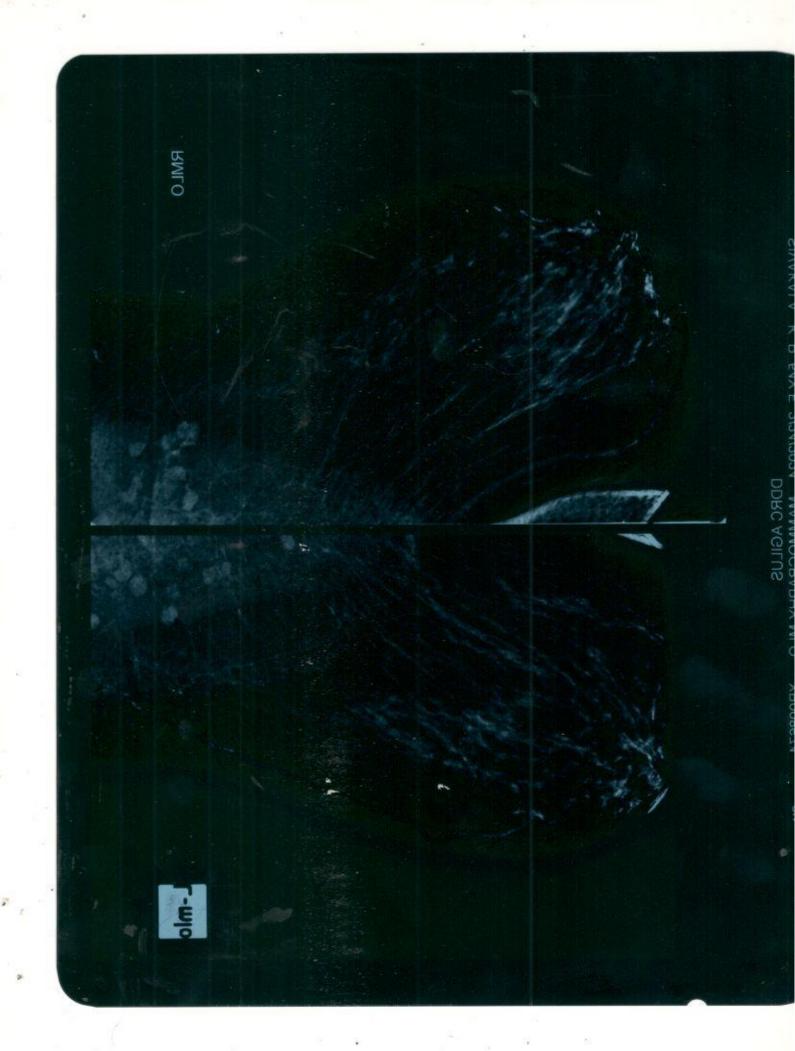
Trivandour 24.02.24.

Yours faitefully

Sinkela









MAMMOGRAM REPORT (BOTH) RADIOLOGY DIVISION

Acc no:4182XB008674 Name: Mrs. Sivakala P Age: 54 y Sex: Female Date:24.02.24

(i) INDICATION: - Screening

(ii) BREAST COMPOSITION : -

RIGHT : Heterogeneously dense breast which may obscure small masses

LEFT : Heterogeneously dense breast which may obscure small masses.

(iii) OBSERVATION:-

RIGHT: - No mass / asymmetry / architectural distortion / significant calcifications. Suggestion of a few axillary lymphnodes.

LEFT: No mass / asymmetry / architectural distortion / significant calcifications. Suggestion of a few axillary lymphnodes.

- (iv) COMPARISON WITH THE PREVIOUS STUDIES : No previous breast imaging
- (v) ULTRASOUND FINDINGS :-

RIGHT: Breast composition - Heterogeneous background echotexture.

Coarsening, hypoechogenicity of glandular elements and hyperechogenicity of glandular elements and hypoechogenicity of periglandular stromal elements noted - ? Nature. ? Due to mild fibroadenotic changes. No mass / cysts / intramammary duct dilation. Nipple areolar complex normal. A few morphologically benign axillary lymphnodes noted, largest measuring 1.8 x 0.8 cm.

<u>LEFT</u>: - Breast composition - Heterogeneous background echotexture.

Coarsening, hypoechogenicity of glandular elements and hyperechogenicity of glandular elements and hypoechogenicity of periglandular stromal elements noted - ? Nature. ? Due to mild fibroadenotic changes. No mass / cysts / intramammary duct dilation. Nipple areolar complex normal. A few morphologically benign axillary lymphnodes noted, largest measuring 3 x 0.9 cm

(vi) <u>IMPRESSION</u>:-

RIGHT: - BIRADS assessment category - Negative / Benign BIRADS numeric code - 1 / 2

LEFT: - BIRADS assessment category - Negative / Benign. BIRADS numeric code - 1 / 2.

(vii) RECOMMENDATIONS: - Routine mammography screening.

Dr. Nisha Unni MD , DNB (RD) Consultant radiologist.

Thanks, your feedback will be appreciated.

(Please bring relevant investigation reports during all visits).

Because of technical and technological limitations complete accuracy cannot be assured on imaging.

Suggested correlation with clinical findings and other relevant investigations consultations, and if required repeat imaging recommended in the event of controversities. AR

(For appointments please contact 9496005190 between 9 am - 5.30 pm).

















RADIOLOGY DIVISION

Acc no:4182XB008674

Name: Mrs. Sivakala P

Age: 54 y

Sex: Female

Date:24.02.24

US SCAN WHOLE ABDOMEN (TAS + TVS)

LIVER is normal in size (14.4 cm). Margins are regular. Hepatic parenchyma shows increased echogenicity. No focal lesions seen. No dilatation of intrahepatic biliary radicles. CBD is not dilated. Portal vein is normal in caliber (11 mm).

GALL BLADDER is distended. Calculi seen layered out at the dependent wall, altogether measuring 2. 7x 0.7 cm. Wall thickness is normal. No pericholecystic fluid seen.

SPLEEN is normal in size (9.9 cm) and parenchymal echotexture. No focal lesion seen.

PANCREAS Head and body visualized, appears normal in size and parenchymal echotexture. Pancreatic duct is not dilated.

RIGHT KIDNEY is normal in size (10.8 x 3.9 cm) and shows normal parenchymal echotexture. Cortico medullary differentiation is maintained. Parenchymal thickness is normal. No echogenic focus with shadowing suggestive of renal calculi seen. Renal pelvis appears partially extra renal and dilated measuring 17.8 mm in APD. No dilatation of calyceal system seen. Ureter is not dilated. Perinephric spaces are normal.

LEFT KIDNEY is normal in size (11.3 x 4.8 cm) and shows normal parenchymal echotexture. Cortico medullary differentiation is maintained. Parenchymal thickness is normal. No echogenic focus with shadowing suggestive of renal calculi seen. Renal pelvis appears partially extra renal and prominent measuring 11.5 mm in APD. No dilatation of calyceal system seen. Ureter is not dilated. Perinephric spaces are normal.

PARAAORTIC AREA No retroperitoneal lymphadenopathy or mass seen.

URINARY BLADDER is distended, normal in wall thickness, lumen clear.

UTERUS measures 7 x 1.8 x 3.7 cm, myometrial echopattern normal. No focal lesions seen. Endometrial thickness is 2.6 mm.

Both ovaries are not separately identified. No adnexal mass seen. No fluid in pouch of Douglas. No ascites or pleural effusion.

Gaseous distension of bowel loops noted. No obvious bowel wall thickening seen sonologically.

- Grade II fatty liver Correlate with LFT.
- Cholelithiasis. No evidence of acute inflammation

Dr. Nisha Unni MD, DNB (RD) Consultant radiologist.

Thanks for referral. Your feedback will be appreciated. (Please bring relevant investigation reports during all visits)

Because of technical and technological limitations complete accuracy cannot be assured on imaging. Suggested correlation with clinical findings and other celevant investigations consultations, and if required repeat imaging recommended in the event of controversities. AR





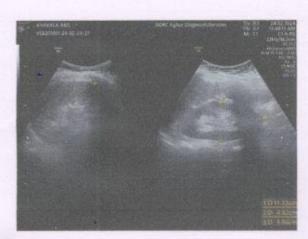














RADIOLOGY DIVISION

ECHO REPORT

SRD No :XB008674	Name:SIVAKALA.K.P	Age:54Y	Sex:F	Date: 24/02/24
	28 (8)			

Left Ventricle:-

	Diastole	Systole
IVS	1.04cm	1.15cm
LV	4.06cm	2.19cm
LVPW	1.15cm	1.24cm

EF -77% FS- 46%

AO	LA
3.13cm	3.54cm

PV - 0.88m/s AV - 1.27m/s MVE - 0.60m/s MVA - 0.82m/s E/A - 0.73

IMPRESSION:-

TRIVANDRUM

- Normal chambers dimension
- No RWMA
- Good LV systolic function
- No diastolic dysfunction
- ➤ No AS,AR,MR,MS,TR,PAH
- > IAS/IVS intact.No clots/effussion/coarctation

Dr. SAJITH. K
MD,DNB
CONSULTANT CARDIOLOGIST
Reg:No: 19436

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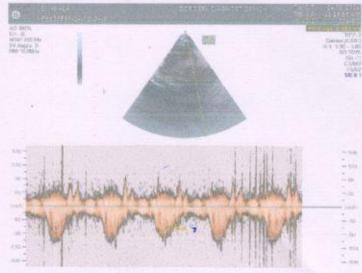
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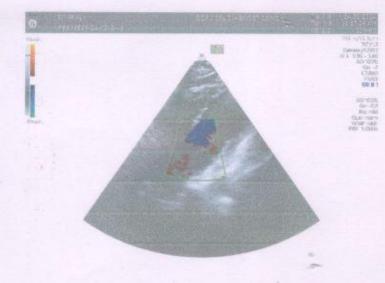
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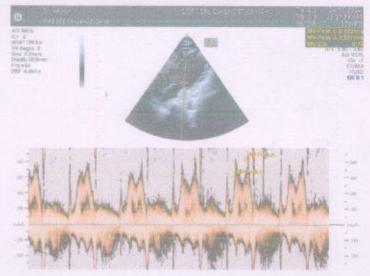
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Contact: -93334 93334, Web: www.ddrcagilus.com Email: info.ddrc@agilus.in











DRAWN

PATIENT NAME: MRS. SIVAKALA K P REF. DOCTOR: SELF

CODE/NAME & ADDRESS : CA00010147 -ACCESSION NO: 4182XB008674 AGE/SEX :54 Years Female MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

PATIENT ID : SIVAF2402704182 F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,

CLIENT PATIENT ID: RECEIVED: 24/02/2024 08:49:27 DELHI,

ABHA NO REPORTED :27/02/2024 09:51:14 SOUTH DELHI 110030 8800465156

Test Report Status Results **Biological Reference Interval** Units **Preliminary**

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

PHYSICAL EXAMINATION

PHYSICAL EXAMINATION REPORT GIVEN

Misha

DR NISHA UNNI, MBBS,MD (RD), DNB (Reg. No: 50162) **Consultant Radiologist**





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View Report



DDRC AGILUS PATHLABS LIMITED ASTER SQUARE BUILDING, ULLOOR, MEDICAL COLLEGE P.O TRIVANDRUM, 695011 KERALA, INDIA Tel: 93334 93334, Fax: CIN - U85190MH2006PTC161480





PATIENT NAME: MRS. SIVAKALA K P

CODE/NAME & ADDRESS : CA00010147 -MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED PATIENT ID

F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,

DELHI,

SOUTH DELHI 110030

8800465156

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:54 Years Female

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MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

ECG WITH REPORT

REPORT

REPORT GIVEN

2D - ECHO WITH COLOR DOPPLER

REPORT

REPORT GIVEN

USG ABDOMEN AND PELVIS

REPORT

REPORT GIVEN

CHEST X-RAY WITH REPORT

REPORT

REPORT GIVEN

MAMMOGRAPHY-BOTH

REPORT

REPORT GIVEN

HAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE

BLOOD HBA1C

Nisha

9.4 High

Non-diabetic Adult < 5.7 Pre-diabetes 5.7 - 6.4

%

DR NISHA UNNI, MBBS,MD (RD), DNB (Reg. No: 50162) **Consultant Radiologist**

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) **HEAD - Biochemistry & Immunology**

DR. VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150)

HOD - HAEMATOLOGY





Vi<u>ew</u> Report

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PERFORMED AT:

DDRC AGILUS PATHLABS LIMITED ASTER SQUARE BUILDING, ULLOOR, MEDICAL COLLEGE P.O. TRIVANDRUM, 695011 KERALA, INDÍA

Tel: 93334 93334, Fax: CIN - U85190MH2006PTC161480



SOUTH DELHI 110030



REPORTED :27/02/2024 09:51:14

PATIENT NAME: MRS. SIVAKALA K P REF. DOCTOR: SELF

CODE/NAME & ADDRESS: CA00010147 - ACCESSION NO: 4182XB008674 AGE/SEX: 54 Years Female

ABHA NO

MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED PATIENT ID : SIVAF2402704182 DRAWN :

F701A, LADO SARAI, NEW DELHI, SOUTH DELHI, CLIENT PATIENT ID:

RECEIVED : 24/02/2024 08:49:27

8800465156

Test Report Status <u>Preliminary</u> Results Units

Diabetes diagnosis: > or = 6.5 Therapeutic goals: < 7.0 Action suggested : > 8.0 (ADA Guideline 2021)

MEAN PLASMA GLUCOSE **223.1 High** < 116.0 mg/dL

BLOOD COUNTS, EDTA WHOLE BLOOD

HEMOGLOBIN	12.1	12.0 - 15.0	g/dL
RED BLOOD CELL COUNT	4.23	3.80 - 4.80	mil/µL
WHITE BLOOD CELL COUNT	11.36 High	4.0 - 10.0	thou/µL
PLATELET COUNT	271	150 - 410	thou/µL

RBC AND PLATELET INDICES

HEMATOCRIT	38.5	36.0 - 46.0	%
MEAN CORPUSCULAR VOL	91.0	83.0 - 101	fL
MEAN CORPUSCULAR HGB.	28.6	27.0 - 32.0	pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION	31.4 Low	31.50 - 34.50	g/dL
RED CELL DISTRIBUTION WIDTH	13.9	11.60 - 14.0	%
MENTZER INDEX	21.5		
MEAN PLATELET VOLUME	10.0	6.80 - 10.90	fL

WBC DIFFERENTIAL COUNT

SEGMENTED NEUTROPHILS	43	40.0 - 80.0	%
LYMPHOCYTES	51 High	20.0 - 40.0	%
MONOCYTES	3	2.0 - 10.0	%
EOSINOPHILS	3	1.0 - 6.0	%
BASOPHILS	0	0.0 - 1.0	%
ARSOLLITE MELITROPHIL COLINIT	1 86	20-70	thou/ul

ABSOLUTE NEUTROPHIL COUNT 4.86 2.0 - 7.0 thou/µL

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) HEAD - Biochemistry & Immunology DR.VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150) HOD - HAEMATOLOGY



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ADCOLLITE LYMPHOCYTE COUNT	E 76 Uiah	10.20	thou/ul
ABSOLUTE LYMPHOCYTE COUNT ABSOLUTE MONOCYTE COUNT	5.76 High 0.39	1.0 - 3.0 0.20 - 1.0	thou/µL thou/µL
ABSOLUTE EOSINOPHIL COUNT	0.39	0.20 - 1.0	thou/μL
ABSOLUTE BASOPHIL COUNT	0.00	0.02 0.50	thou/µL
NEUTROPHIL LYMPHOCYTE RATIO (NLR)	0.8		/
,			

ERYTHROCYTE SEDIMENTATION RATE (ESR), EDTA BLOOD

53 High SEDIMENTATION RATE (ESR) 0 - 20mm at 1 hr

SUGAR URINE - POST PRANDIAL

DETECTED (TRACE) SUGAR URINE - POST PRANDIAL NOT DETECTED

SUGAR URINE - FASTING

SUGAR URINE - FASTING **NOT DETECTED** NOT DETECTED

IMMUNOHAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD

ABO GROUP TYPE A **POSITIVE RH TYPE**

METHOD: COLUMN AGGLUTINATION TECHOLOGY

Interpretation(s)

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) **HEAD - Biochemistry & Immunology**

DR. VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150)

HOD - HAEMATOLOGY





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Vi<u>ew</u> Report



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CLIENT PATIENT ID:

SOUTH DELHI 110030 8800465156

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REPORTED :27/02/2024 09:51:14 ABHA NO

Test Report Status Results Units **Preliminary**

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD-Blood group is identified by antigens and antibodies present in the blood. Antigens are protein molecules found on the surface of red blood cells. Antibodies are found in plasma. To determine blood group, red cells are mixed with different antibody solutions to give A,B,O or AB.

Disclaimer: "Please note, as the results of previous ABO and Rh group (Blood Group) for pregnant women are not available, please check with the patient records for availability of the same.

The test is performed by both forward as well as reverse grouping methods.

BIO CHEMISTRY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

BLOOD UREA NITROGEN (BUN), SERUM

BLOOD UREA NITROGEN 8 Adult(<60 yrs): 6 to 20 mg/dL

BUN/CREAT RATIO

BUN/CREAT RATIO 15.3

CREATININE, SERUM

mg/dL CREATININE 0.52 18 - 60 yrs : 0.6 - 1.1

GLUCOSE, POST-PRANDIAL, PLASMA

GLUCOSE, POST-PRANDIAL, PLASMA 275 High Diabetes Mellitus : > or = 200. mg/dL

> Impaired Glucose tolerance/ Prediabetes: 140 - 199. Hypoglycemia: < 55.

GLUCOSE FASTING, FLUORIDE PLASMA

179 High Diabetes Mellitus : > or = 126. FBS (FASTING BLOOD SUGAR) mg/dL

> Impaired fasting Glucose/ Prediabetes : 101 - 125. Hypoglycemia : < 55.

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) **HEAD - Biochemistry & Immunology**

DR. VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150) **HOD - HAEMATOLOGY**



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PATIENT ID : SIVAF2402704182

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Test Report Status	Preliminary	Results	Units
lest Report Status	Preliminary	Kesuits	

ABHA NO

LIVER	FUNCTION	TEST WITH GGT

BILIRUBIN, TOTAL	0.36	General Range : < 1.1	mg/dL
BILIRUBIN, DIRECT	0.19	General Range : < 0.3	mg/dL
BILIRUBIN, INDIRECT	0.17	General Range : <0.85	mg/dL
TOTAL PROTEIN	7.7	Ambulatory: 6.4 - 8.3 Recumbant: 6 - 7.8	g/dL
ALBUMIN	4.5	20-60yrs : 3.5 - 5.2	g/dL
GLOBULIN	3.2	General Range : 2 - 3.5 Premature Neonates : 0.29 - 1.04	g/dL
ALBUMIN/GLOBULIN RATIO	1.4	General Range: 1.1 - 2.5	RATIO
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	59	Adults: < 33	U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)	65	Adults: < 34	U/L
ALKALINE PHOSPHATASE	114	Adult (<60yrs) : 35 - 105	U/L
GAMMA GLUTAMYL TRANSFERASE (GGT)	88 High	Adult (female) : < 40	U/L

Comments

Kindly correlate clinically. Kindly contact lab within 24 hrs if clinically not correlated.

TOTAL PROTEIN, SERUM

g/dL TOTAL PROTEIN 7.7 Ambulatory: 6.4 - 8.3 Recumbant: 6 - 7.8

URIC ACID, SERUM

URIC ACID 3.8 Adults: 2.4-5.7 mg/dL

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) **HEAD - Biochemistry &**



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View Report



Immunology

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DELHI,
SOUTH DELHI 110030

CLIENT PATIENT ID:
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A NO : REPORTED :27/02/2024 09:51:14

Test Report Status Preliminary Results Units

BIOCHEMISTRY - LIPID

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO				
	LIPID PROFILE, SERUM			
	CHOLESTEROL	134	Desirable : < 200 Borderline : 200-239 High : >or= 240	mg/dL
	TRIGLYCERIDES	120	Normal : < 150 High : 150-199 Hypertriglyceridemia : 200-499 Very High : > 499	mg/dL
	HDL CHOLESTEROL	49	General range: 40-60	mg/dL
	LDL CHOLESTEROL, DIRECT	70	Optimum : < 100 Above Optimum : 100-129 Borderline High : 130-159 High : 160- 189 Very High : > or= 190	mg/dL
	NON HDL CHOLESTEROL	85	Desirable: < 130 Above Desirable: 130 -159 Borderline High: 160 - 189 High: 190 - 219 Very high: > / = 220	mg/dL
	VERY LOW DENSITY LIPOPROTEIN	24.0	= 30.0</th <th>mg/dL</th>	mg/dL
	CHOL/HDL RATIO	2.7	Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.0	

1.4



LDL/HDL RATIO

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) HEAD - Biochemistry & Immunology



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Moderate Risk: 7.1 - 11.0

Desirable/Low Risk - 0.5-3 Borderline/Moderate Risk- 3.1-

High Risk: > 11.0

High Risk- >6.0



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View Details

View Report





PATIENT NAME: MRS. SIVAKALA K P REF. DOCTOR: SELF

CODE/NAME & ADDRESS : CA00010147 -ACCESSION NO: 4182XB008674 AGE/SEX :54 Years Female MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,

DELHI,

SOUTH DELHI 110030

8800465156

PATIENT ID : SIVAF2402704182

CLIENT PATIENT ID: ABHA NO

DRAWN

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Test Report Status Results Units **Preliminary**

HISTOPATHOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHROSULT PENDING

CYTOLOGY - CS (PAP SMEAR) RESULT PENDING

SPECIALISED CHEMISTRY - HORMONE

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

THYROID PANEL, SERUM

T3 126.00 Adult: 80-200 ng/dL T4 9.85 Adults: 4.5-12.1 μg/dl TSH 3RD GENERATION 2.550 Non-Pregnant: 0.4-4.2 μIU/mL

Pregnant Trimester-wise:

1st: 0.1 - 2.5 2nd: 0.2 - 3 3rd: 0.3 - 3

CLINICAL PATH - URINALYSIS

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)2DECHO

PHYSICAL EXAMINATION, URINE

COLOR YELLOW **APPEARANCE** CLEAR

CHEMICAL EXAMINATION, URINE

4.7 - 7.5 PH 5.0 SPECIFIC GRAVITY 1.003 - 1.035 1.021 PROTEIN **NEGATIVE NOT DETECTED GLUCOSE NEGATIVE NOT DETECTED KETONES NEGATIVE** NOT DETECTED

DR.HARI SHANKAR, MBBS MD (Reg No - TCMC:62092) **HEAD - Biochemistry & Immunology**

DR. VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150)

HOD - HAEMATOLOGY





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MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED PATIENT ID DRAWN : SIVAF2402704182 F701A, LADO SARAI, NEW DELHI, SOUTH DELHI,

CLIENT PATIENT ID: RECEIVED: 24/02/2024 08:49:27 DELHI, ABHA NO REPORTED :27/02/2024 09:51:14 SOUTH DELHI 110030

Test Report Status Results Units **Preliminary**

BLOOD NEGATIVE NOT DETECTED BILIRUBIN **NEGATIVE** NOT DETECTED UROBILINOGEN NORMAL NORMAL

NITRITE NEGATIVE NOT DETECTED

MICROSCOPIC EXAMINATION, URINE

/HPF **RED BLOOD CELLS NOT DETECTED NOT DETECTED WBC** 2-3 0-5 /HPF **EPITHELIAL CELLS** /HPF 2-3 0-5

CASTS NEGATIVE NEGATIVE CRYSTALS REMARKS NIL

DR. VAISHALI RAJAN, MBBS DCP (Pathology) (Reg No - TCC 27150) **HOD - HAEMATOLOGY**



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