



26374 261024

Name : MRS. RICHA SINHA	Registration ID : 26374	Sample Collection : 26/10/2024 08:53:39
Age/Sex : 38 Yrs. / F	Printed : 28/10/2024 13:34:27	Sample Received : 26/10/2024 08:53:39
Ref. By : BANK OF BARODA	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 28/10/2024 09:15:07

COMPLETE BLOOD COUNT

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 8.2	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 3.39	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 26.1	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 77.0	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 24.2	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 31.4	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 16.60	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 7380	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 58	%	40-75 %
Eosinophils Percentage (Calculated)	: 06	%	1-6 %
Lymphocyte Percentage (Calculated)	: 28	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 08	%	1-10 %
RBC Morphology	: Hypochromasia +, Microcytosis +		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 297000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 14	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 09:15:07)



Dr. Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-
 2000/08/2926





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Registration ID : 26374

Printed : 28/10/2024 13:34:27

Sent By : Arcofemi Healthcare Pvt Ltd

Sample Collection : 26/10/2024 08:53:39

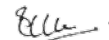
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----- End Of Report -----



NABL M(ELT)-00683


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Ref. By	: BANK OF BARODA	Sent By	: Arcofemi Healthcare Pvt Ltd	Report Released	: 28/10/2024 09:29:58

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 84	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: \geq 126 mg/dl
<i>Method: GOD-POD</i>			
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 92	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: \geq 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 09:29:58)

HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.40	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10
<i>EDTA Whole Blood, Method: HPLC</i>			
Estimated Average Glucose (eAG)	: 108.28	mg/dl	65.1-136.3 mg/dL mg/dl
<i>EDTA Whole Blood, Method: Calculated</i>			

Interpretation:

- The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 09:27:59)



Signature
Dr. Santosh Khairnar
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BLOOD GROUP

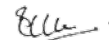
Test	Result	Unit	Biological Ref. Range
Blood Group	: 'O' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 09:27:46)

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Ref. By : BANK OF BARODA	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 28/10/2024 09:28:33

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 127	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 99	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 47	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 60.20	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 19.8	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 1.3		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 2.7		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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LIVER FUNCTION TEST

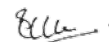
Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.98	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.20	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.78	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 23.2	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 23.0	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 95	IU/L	42-98 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 7.5	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.2	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 3.3	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.27		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 62	U/L	0-38 U/L

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

SERUM CREATININE

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.57	mg/dl	0.60-1.1 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

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BLOOD UREA NITROGEN (BUN)

Test	Result	Unit	Biological Ref. Range
Urea	: 15.23	mg/dl	13-40 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 7.12 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre

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SERUM URIC ACID

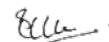
Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 4.27	mg/dl	2.6-6.0 mg/dl

Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

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BUN GREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 12.49		5-20

Serum, Method: Calculated

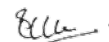
NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 09:16:23)

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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.2	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 9.24	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 2.59	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			

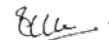
Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<u>PHYSICAL EXAMINATION</u>			
Quantity :	30	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.010		1.010 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells :	1 - 2	/ hpf	
Pus cells :	2 - 4	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<u>OTHER FINDINGS</u>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

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2D Echo Color Doppler

REASON FOR STUDY: AHC

CONCLUSION:

- NORMAL SIZE LA, LV, RA AND RV_
- **GOOD LV SYSTOLIC FUNCTION AT REST. L.V.E.F:55% WITH NO RWMA._**
- GOOD RV FUNCTION. TAPSE: 22 MM_
- STRUCTURALLY NORMAL MITRAL,TRICUSPID, AORTIC AND PULMONARY LEAFLETS._
- NO CLOTS IN LA AND LV._
- NO EVIDENCE OF LEFT VENTRICULAR HYPERTROPHY_
- NO EVIDENCE OF PERICARDIAL EFFUSION._
- NO EVIDENCE OF PULMONARY HYPERTENSION. PASP BY TR JET : 30 MMHG._

CONVENTIONAL DOPPLER:

- **NORMAL E TO A RATIO IN LV INFLOW.**

COLOUR DOPPLER: SHOWS TRIVIAL TR.

GRADE 0 /III MR	GRADE <I/III TR
GRADE 0/IV AR	GRADE 0/IV PR

IMPRESSION:

GOOD LV SYSTOLIC FUNCTION AT REST
NO DD
NO PHT



Dr. Yogesh Solanki
DrNB Interventional
Cardiology
Reg.No -2015/05/3063





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	OBSERVED
MITRAL VALVE:	
ANTERIOR LEAFLETS EXCURSION	NORMAL
POSTERIOR LEAFLETS EXCURSION	NORMAL
E.P.S.S	----
TRICUSPID VALVE:	
EXCURSION	NORMAL
OTHER FINDINGS	----
AORTIC VALVE:	
CUSPS OPENING	NORMAL
PULMONARY VALVE:	
EXCURSION	NORMAL
DIMENSIONS	
AORTIC ROOT	29
LEFT ATRIUM	35
LVID (D)	46
LVID (S)	24
IVST (D)	09
PWT (D)	08
RVID (D)	----

	VELOCITY(M/SEC)	STENOSIS GRADIENT PEAK/MEAN (MMHG)	REGURGITATION GRADING
MITRAL	----	----	0/III
TRICUSPID	----	----	<I/III
AORTIC	1.5	9	0/IV
PULMONARY	----	----	0/IV

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 DrNB Interventional
 Cardiology
 Reg.No -2015/05/3063




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X RAY CHEST PA VIEW

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.



Dr. Deepak Mishra
D.N.B. (Radio-
Diagnosis)
Reg. No:
2021/09/7488





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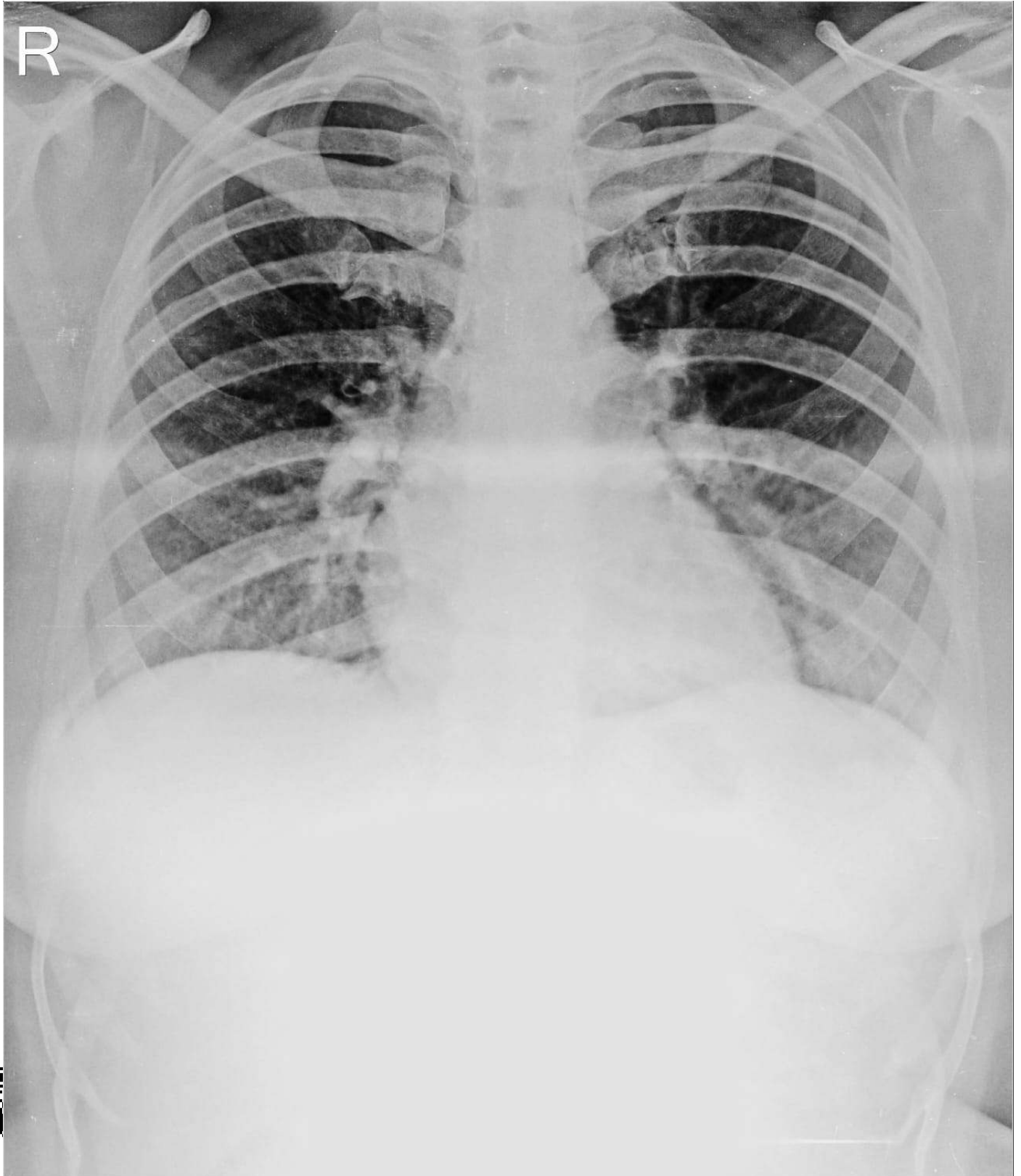
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MRS. RICHA SINHA. AGE:-38YRS/FEMALE. R50 CHEST PA 26-Oct-24 12:24 PM

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71



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Dr. Deepak Mishra

D.N.B. (Radio-

Diagnosis)

Reg. No:

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USG ABDOMEN & PELVIS - FEMALE

Liver:- is normal in size (14.6 cms), shape **and raised echotexture**. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. There is no IHBR dilatation seen.

Gall Bladder:- is normally distended. No calculus or mass lesion is seen.
No GB wall thickening or pericholecystic fluid is seen.
CBD is normal.

Pancreas:- is normal in size, shape and echotexture. There is no focal lesion seen.

Spleen:- is normal in size (7.8 cms) and echotexture. No focal lesion is seen.

Kidneys:- Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 10.9 x 4.4 cms.

Left kidney – 10.1 x 4.3 cms.

Urinary Bladder:- is well distended and shows normal wall thickness.
There is no intraluminal lesion within.

Uterus:- is anteverted, normal in size and measures 6.6 x 6.1 x 5.5 cms
Myometrium shows homogenous echo pattern. No focal lesion is seen.

ET : IUCD seen

Ovaries:- appear normal in size, shape & show normal follicular pattern.

Right ovary measures – 2.7 x 2.2 cms.

Left ovary measures – 2.8 x 2.1 cms.

Both adnexae appear normal. No e/o of free fluid noted in POD.

No ascites is seen. No significant lymphadenopathy is seen.

IMPRESSION:

- **Grade I fatty liver.**

Thanks for the Referral

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported By: Dr. Deepak Mishra (28/10/2024 13:24:05))



Dr. Deepak Mishra

D.N.B. (Radio-

Diagnosis)

Reg. No:

2021/09/7488





26374 261024

Name : MRS. RICHA SINHA

Age/Sex : 38 Yrs. / F

Ref. By : BANK OF BARODA

Registration ID : 26374

Printed : 28/10/2024 13:34:27

Sent By : Arcofemi Healthcare Pvt Ltd

Sample Collection : 26/10/2024 08:53:39

Sample Received : 26/10/2024 08:53:39

Report Released : 28/10/2024 13:24:05

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



Dr. Deepak Mishra

D.N.B. (Radio-

Diagnosis)

Reg. No:

2021/09/7488





26374 261024

Registration ID : 26374 Sample Collection : 26/10/2024 08:53:39
Name : MRS. RICHA SINHA Sample Received : 26/10/2024 08:53:39
Age/Sex : 38 Yrs. / F Printed : 28/10/2024 13:34:27 Report Released : 28/10/2024 13:33:35
Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

OPHTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 28/10/2024 13:33:35)

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





26374 261024

Name : MRS. RICHA SINHA
Age/Sex : 38 Yrs. / F
Ref. By : BANK OF BARODA

Registration ID : 26374
Printed : 28/10/2024 13:34:27
Sent By : Arcofemi Healthcare Pvt Ltd

Sample Collection : 26/10/2024 08:53:39
Sample Received : 26/10/2024 08:53:39
Report Released : 26/10/2024 16:45:49

CERVICAL CYTOLOGY REPORT

PAPANICOLAOU SMEAR (CONVENTIONAL)

Specimen :- 2 unstained air dried smear received

Stained with papanicolaou method and examined.

Smear shows :

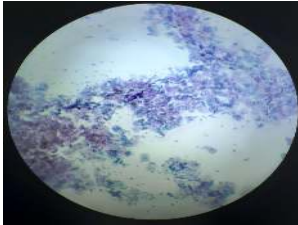
Many superficial, intermediate squamous epithelial cells and few endocervical cells.

Plenty of polymorphonuclear cells inflammatory infiltrate seen in the background.

No cellular atypia or malignancy noted.

- IMP: Inflammatory pap smear.

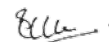
The smears are reported using bethesda system for cervical cytology(2014)
(Interpretation(s))



(Collected At: 26/10/2024 08:53:39, Received At: 26/10/2024 08:53:39, Reported At: 26/10/2024 16:45:49)

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




Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-
2000/08/2926



MEDICAL EXAMINATION REPORT

Name : Mr./Mrs./Miss Richa Sinha.

Date 26 / 10 / 2024

Sex : Male/Female

Age (yrs): 38 / F

Marital status: Married/Unmarried

Present complaints: Pain in both ankle joints for 14-15 days.
 No swelling / no redness / no tenderness at moments.

K/C/O - DM / HTN / IHD / T. B. / Hypothyroidism / Epilepsy / Asthma
 Dyslipidemia in Lym, Tb. Rosuvastatin 10mg 1 HS.

Past history: - Medical illness Dyslipidemia on 10/2023

Surgical illness NO

Family history: Father - HTN / DM / IHD DM + HTN

Mother - HTN / DM / IHD DM + HTN

History of Allergies: Nil

Diet: VEG / NON VEG / MIXED mixed.

Smoker Non smoker / Non-alcoholic.

History of Medication: Tb. Rosuvastatin (10) 1 HS.

LMP: 10 / 10 / 24.

On examination (O/E): (General Physical Examination)

Height (in cm):	Weight (in Kg):	BP- 134/82 mm of Hg	Pulse / Min: 86 / min	BMI:
-----------------	-----------------	---------------------	-----------------------	------

General condition: conscious oriented, Co-operative.

Conjunctiva - Pallor (+)	Sclera - no icterus.	Tongue - (N)	Skin - (N)
Nasal cavity - (N)	Lymph nodes - no lymphadenopathy	Neck veins - JVP (N)	Oedema - no
Cyanosis - no	Clubbing - no	Varicose veins - no	Joints (N)

Systemic Examination:

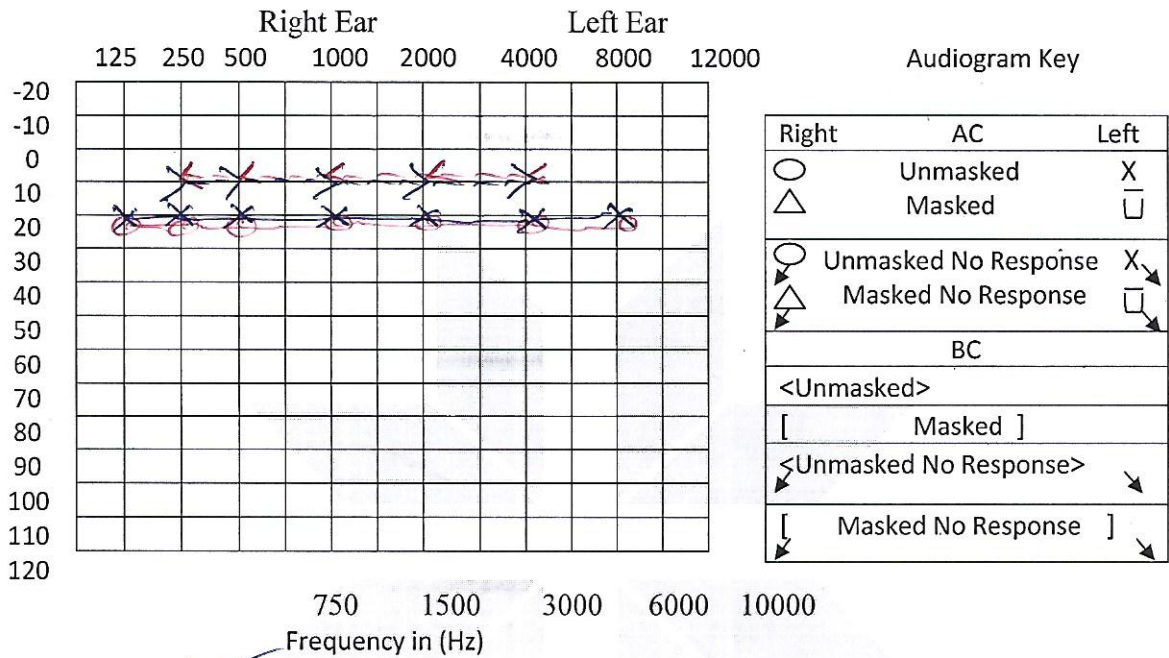
- PA	SOFT no CLM/T (0)°K	++
- CVS	S1 S2 (N) no murmur	
- RS	16 hr AET (N) no Ad, Jvw	
- CNS	purist BEATL Plantar ↓ ↓	

Advice:

- R/L X-ray Ankle joint (AD) to also Calcaneus
 (L) to also Calcaneus

NAME :Mrs. Richa Sinha	AGE: 38 Yrs / Female
REF BY: BOB	DATE:26/10/2024

AUDIOGRAM



Responses: Reliable / Fairly Reliable / Not Reliable

Speech Audiometry

Test Conduction: Satisfactory / Not Satisfactory


If any other specify

Procedure: Standard / Play

Test	P.T.A.
Ear	dBHL
Right	20
Left	20

Audiological Interpretations:

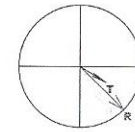
BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITS


EXCELLAS CLINICS PVT. LTD
 B-1, Vikas Park Commercial,
 Below Axis Bank, LBS Marg,
 Near Santoshi Mata Mandir,
 Mulund (West), Mumbai - 400080.

Excellas Clinics Private Ltd

B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W),
2222315/Richa Sinha 38Yrs/Female Kgs/ Cms BP: ___/___ mmHg
Ref.: Test Date: 26-Oct-2024(13:17:34) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 73 bpm



PR Interval: 136 ms
QRS Duration: 128 ms
QT/QTc: 401/443ms
P-QRS-T Axis: 58 - 44 - 31 (Deg)



*NSRWN New
correlate clinician*

DR. MANISH SOLTANKI
MBBS MD GENERAL MEDICINE
REG. NO. MMC 2024042065