MEDICAL SUMMARY

NAME:	Mrs. Milima Patil.	UHID:	
AGE:	45	DATE OF HEALTHCHECK:	27-1-2024
GENDER:	F		

HEIGHT:	155	MARITAL STATUS:	M
WEIGHT:	66.0	NO OF CHILDREN:	2
BMI:	27.8		

C/O: Cough & fever, cold
Acidity

K/C/O: D.M.

PRESENT MEDICATION:- Not taking medicine

P/M/H:- NO

P/S/H:- TL

ALLERGY: - Sun

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING:
ALCOHOL: } NAD
TOBACCO/PAN:

FAMILY HISTORY FATHER: -
MOTHER: - Asthma

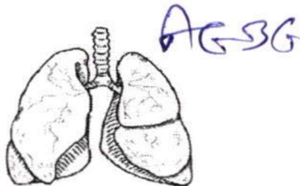
O/E:

BP: 110/70 PULSE: - 78/min

TEMPERATURE: N SCARS:

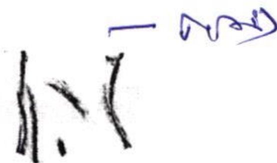
LYMPHADENOPATHY:
PALLOR/ICTERUS/CYNOSIS/CLUBBING: } NAD
OEDEMA:

S/E:
RS:



AEBG

P/A: - NAD



CVS: S1 S2 +

Extremities & Spine: Pain & cramps in legs

ENT: Sore throat

CNS: Conscious oriented

Skin: - NAD

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

Name:	Age:	Date of Health check-up:

Findings and Recommendation:

Findings:-

- Dyslipidemia
- PP↑
- CxR - Cardiomegaly seen

Recommendation:-

- Diet / Exercise
- Cardiologist opinion

Signature:

Consultant –

DR. ANIRBAN DASGUPTA
MBBS, D.N.B MEDICINE
DIPLOMA CARDIOLOGY
MMC- 2005/02/0920

Apollo

Apollo Clinic VASHI

OPHTHALMIC EVALUATION

UHID No.: ____________ Date: 27/11/24

Name: Mrs Neelima Age: 45 Gender: Male/Female ✓

Without Correction:

Distance: Right Eye ____________ Left Eye ____________

Near : Right Eye ____________ Left Eye ____________

With Correction:

Distance: Right Eye 6/6 Left Eye 6/6

Near : Right Eye N6 Left Eye N6

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near	+1.25					+1.25				

Colour Vision: NAD Progressives (BE)

Anterior Segment Examination: ____________

Pupils: NAD (BE)

Fundus: ____________

Intraocular Pressure: 12 mmHg (BE)

Diagnosis: ____________

Advice: glasses

Re-Check on: 6 mths (This Prescription needs verification every year)

Dr. [signature]
(Consultant Ophthalmologist)

DR. RUCHIRA SHARMA
M. S. (OPHTH)
CONSULTING OPHTHALMOLOGIST
& MICRO SURGEON
REG. No.: 3262 / 09/ 02

Name : Mrs Nilima Patel Age : 45 Sex : F UHID No. : Date : 27/01/20

45 years / P_2L_2 [prev FTND]

No complains ; willing for PAP smear

MH: LMP - 8/01/2024

O/E

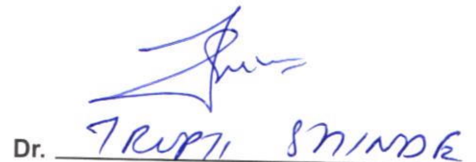
GC fair
Afebrile
P - 78/min

PA - soft, NT

P/S: Cx } healthy
V }

(PAP smear taken)

F/U with reports



Dr. TRUPTI SHINDE

Apollo Clinic VASHI
DR. TRUPTI VIJAY SHINDE
MBBS, M.S. (OBS & GYNAE)
REG. NO.: 2014/07/3301

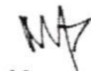
■ Consultation ■ Diagnostics ■ Health Check-Ups ■ Dentistry

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
Haemoglobin(Colorimetric method)	**15.9**	g/dl	11.5 - 15
RBC Count (Impedance)	5.35	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	47.9	%	35 - 55
MCV:(Calculated)	89.5	fl	78 - 98
MCH:(Calculated)	29.7	pg	26 - 34
MCHC:(Calculated)	33.2	gm/dl	30 - 36
RDW-CV:	12.8	%	10 - 16
Total Leucocyte count(Impedance)	10150	/cumm.	4000 - 10500
Neutrophils:	69	%	40 - 75
Lymphocytes:	26	%	20 - 40
Eosinophils:	02	%	0 - 6
Monocytes:	03	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.87	Lakhs/c.mm	1.5 - 4.5
MPV	9.2	fl	6.0 - 11.0
ESR(Westergren Method)	08	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination) RBCs:	Normochromic,Normocytic		
WBCs:	Normal		
Platelets	Adequate		

Remark *** Rechecked & confirmed. Kindly Correlate Clinically***
Note: Test Run on 5 part cell counter. Manual diff performed.



Ms Kaveri Gaonkar
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

Indira Health And Lifestyle Private Limited.
NABL Accredited Laboratory
The Emerald, 1st Floor, Plot No. 195, Sector-12,
Besides Neel Siddhi Tower, Vashi-Navi Mumbai-400703.
Tel.: (022) - 2788 1322 / 23 / 24 8291490000
Email: apolloclinicvashi@gmail.com

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

TEST	RESULTS
	Blood Grouping (ABO & Rh)-WB(EDTA) Serum
ABO Group:	**:A:**
Rh Type:	**Positive**
Method :	Matrix gel card method (forward and reverse)
------	--------------------------

Pooja Surve
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

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Apollo Clinic VASHI

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
HbA1c(Glycosylated Haemoglobin)WB-EDTA			
(HbA1C) Glycosylated Haemoglobin :	5.5	%	Normal <5.7 % Pre Diabetic 5.7 - 6.5 % Diabetic >6.5 % Target for Diabetes on therapy < 7.0 % Re-evalution of therapy > 8.0 %
Mean Blood Glucose :	111.15	mg/dL	

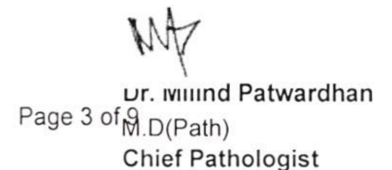
Corelation of A1C with average glucose

A1C (%)	**Mean Blood Glucose (mg/dl)**
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Method High Performance Liquid Chromatography (HPLC).

INTERPRETATION

* The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
* This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
* It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
* Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels



Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

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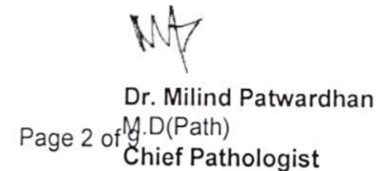
Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Fasting Plasma Glucose :	110	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : >= 126 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Post Prandial Plasma Glucose :	**161**	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : >= 200 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)

Method : Hexokinase



Alsaba Shaikh
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

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Apollo TOUCHING LIVES — MC-2364 — Apollo Clinic VASHI

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

LIPID PROFILE - Serum

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
S. Cholesterol(Oxidase)	218	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	187	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	37.4	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	**35.3**	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	145.3	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	**6.2**		3.5 - 5
Ratio of LDL/HDL	**4.1**		2.5 - 3.5

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Chief Pathologist

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Apollo TOUCHING LIVES

MC-2364

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Apollo Clinic VASHI

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

LFT(Liver Function Tests)-Serum

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
S.Total Protein (Biuret method)	7.52	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.90	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.62	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.87		0.9 - 2
S.Total Bilirubin (DPD):	0.93	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.26	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.67	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	18	U/L	5 - 32
S.ALT (SGPT) (IFCC Kinetic with P5P):	20	U/L	5 - 33
S.Alk Phosphatase(pNPP-AMP Kinetic):	66	U/L	35 - 105
S.GGT(IFCC Kinetic):	**41**	U/L	07 - 32

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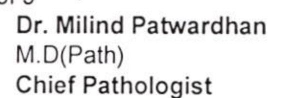

Alsaba Shaikh
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End of Report
Results are to be correlated clinically

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
	BIOCHEMISTRY		
S.Urea(Urease Method)	21.2	mg/dl	10.0 - 45.0
BUN (Calculated)	9.89	mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	0.71	mg/dl	0.50 - 1.1
BUN / Creatinine Ratio	13.93		9:1 - 23:1
S.Uric Acid(Uricase Method)	3.9	mg/dl	2.4 - 5.7

Alsaba Shaikh
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
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Chief Pathologist

End of Report
Results are to be correlated clinically

Apollo
TOUCHING LIVES

MC-2364

Indira Health And Lifestyle Private Limited.
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Apollo Clinic VASHI

Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
	Thyroid (T3,T4,TSH)- Serum		
Total T3 (Tri-iodo Thyronine) (ECLIA)	1.9	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	96.68	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	4.58	□IU/ml	Euthyroid :0.35 - 5.50 □IU/ml Hyperthyroid : < 0.35 □IU/ml Hypothyroid : > 5.50 □IU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:
T3 :
1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyrodism.
2. 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) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :
1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :
1. 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.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

Alsaba Shaikh
Entered By

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Verified By

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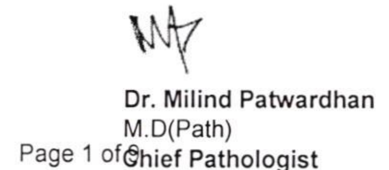
Barcode No	: 5822	Reported On	: 27/01/2024 17:24		

URINE REPORT

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
PHYSICAL EXAMINATION			
QUANTITY	20	mL	
COLOUR	Pale Yellow		
APPEARANCE	Slightly Hazy		Clear
SEDIMENT	Absent		Absent
CHEMICAL EXAMINATION(Strip Method)			
REACTION(PH)	5.0		4.6 - 8.0
SPECIFIC GRAVITY	1.015		1.005 - 1.030
URINE ALBUMIN	Absent		Absent
URINE SUGAR(Qualitative)	Absent		Absent
KETONES	Absent		Absent
BILE SALTS	Absent		Absent
BILE PIGMENTS	Absent		Absent
UROBILINOGEN	Normal(<1 mg/dl)		Normal
OCCULT BLOOD	Absent		Absent
Nitrites	Absent		Absent
MICROSCOPIC EXAMINATION			
PUS CELLS	Occasional		0 - 3/hpf
RED BLOOD CELLS	Nil /HPF		Absent
EPITHELIAL CELLS	**6 - 8 / hpf**		3 - 4/hpf
CASTS	Absent		Absent
CRYSTALS	Absent		Absent
BACTERIA	Absent		Absent



Dilpreetkaur S Singh
Entered By

Ms Kaveri Gaonkar
Verified By

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M.D(Path)
Chief Pathologist

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Name	: Mrs. Nilima Dilip Patil	Gender	: Female	Age	: 45 Years
UHID	: FVAH 10384.	Bill No	:	Lab No	: V-3552-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 08:10		
Barcode No	: 5822	Reported On	: 29/01/2024 16:16		

CYTOPATHOLOGY REPORT

Specimen No: AP-131-24

Specimen Adequacy: ADEQUATE

CELLS

ENDOCERVICAL:	Absent
ENDOMETRIAL:	Absent
SQUAMOUS:	**SUPERFICIAL(++) AND INTERMEDIATE(+) SQUAMOUS CELLS**
HISTIOCYTES:	Absent
RBCs:	Absent
POLYMORPHS:	**Present(Few)**

FLORA

TRICHOMONAS VAGINALIS:	Absent
FUNGI:	Absent
LACTOBACILLI:	Absent

CELLULAR CHANGES

METAPLASIA:	Absent
DYSPLASIA:	Absent
MALIGNANT CELL:	Absent
ATROPHIC CHANGES:	Absent
BARE NUCLEI:	Absent
IMPRESSION:	**NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY**

Anushka Chavan
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

Nilima, Patil
10384

45 Years Female

27.01.2024 9:08:35
Apollo Clinic
1st Flr,The Emerald,Sector-12,
Vashi, Mumbai-400703.

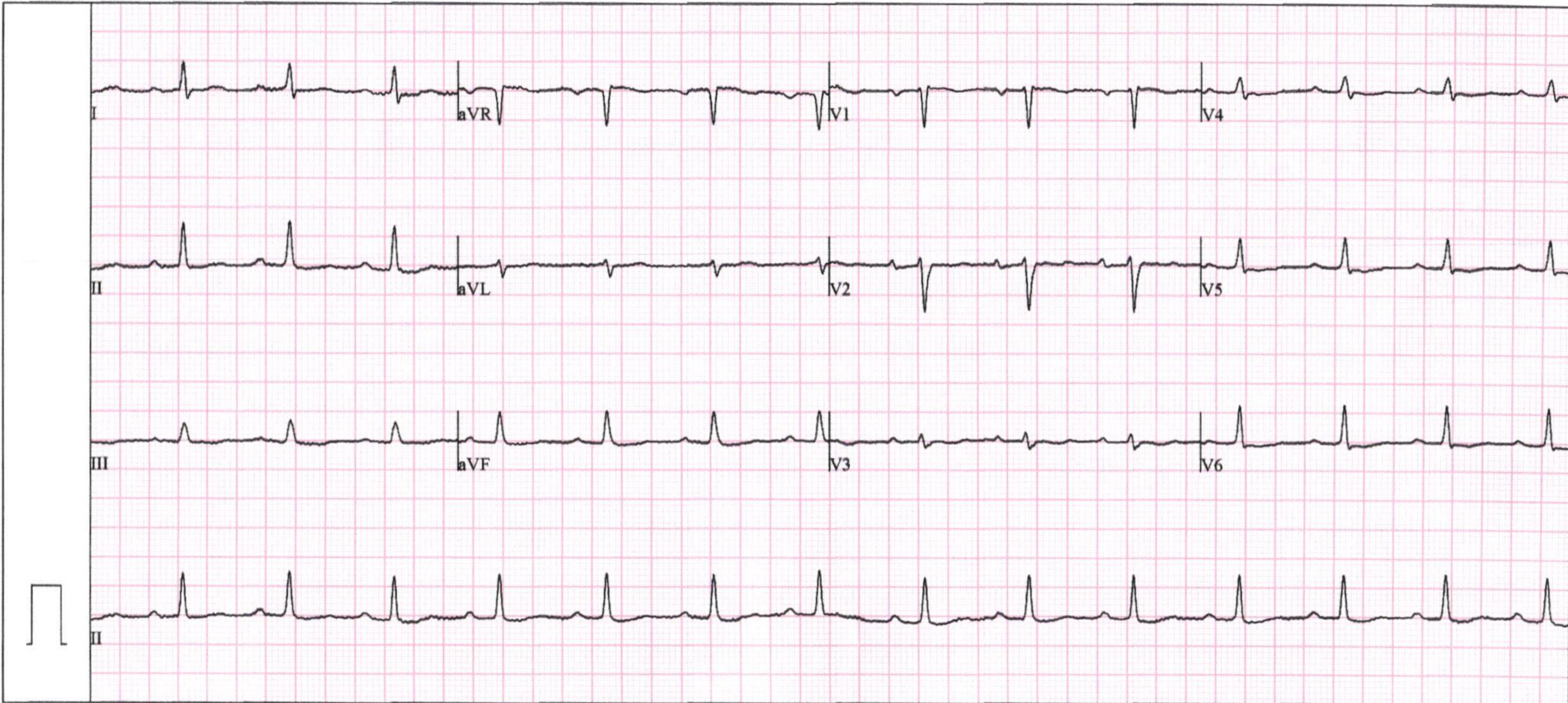
85 bpm
-- / -- mmHg

QRS :	88 ms
QT / QTcBaz :	252 / 299 ms
PR :	192 ms
P :	82 ms
RR / PP :	708 / 705 ms
P / QRS / T :	42 / 65 / 215 degrees

Normal sinus rhythm
Nonspecific T wave abnormality
Abnormal ECG

NORMAL ECG

Dr. ANIRBAN DASGUPTA
M.B.,B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0920



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

PATIENT'S NAME	NILIMA DILIP PATIL	AGE :- 45 Y/F
UHID	10384	DATE :- 27-01-24

2D Echo and Colour Doppler Report

All cardiac chambers are normal in dimension

Mild jerky motion of anterioseptum

Interatrial and Interventricular septum – Appears Normal

Valves – Structurally normal

Preserved biventricular function.

IVC is normal.

Pericardium is normal.

Great vessels - Origin and visualized proximal part are normal.

No coarctation of aorta.

Doppler study

Normal flow across all the valves.

No pulmonary hypertension.

No diastolic dysfunction.

Vashi : M/S. Indira Health & Lifestyle Pvt. Ltd. The Emerald, 1st Floor, Plot No. 195, Sector - 12, Besides Neel Siddhi Tower, Vashi - Navi Mumbai - 400703.
Tel.: (022) - 2788 1322 / 23 / 24 8291490000 • Email: apolloclinicvashi@gmail.com

Measurements

Aorta annulus	19 mm
Left Atrium	30 mm
LVID(Systole)	22 mm
LVID(Diastole)	39 mm
IVS(Diastole)	09 mm
PW(Diastole)	10 mm
LV ejection fraction.	Around 55%

Conclusion

- Preserved biventricular function
- No RWMA
- Valves – Structurally normal
- No diastolic dysfunction
- No PAH

Performed by: Dr. Anirban Dasgupta
D.N.B. Internal Medicine, Diploma Cardiology (PGDCC-IGNOU).

Apollo TOUCHING LIVES

Apollo Clinic VASHI

PATIENT'S NAME	NILIMA D PATIL	AGE :- 45Y/M
UHID	10384	29 Jan 2024

X-RAY CHEST PA VEIW

OBSERVATION:

Bilateral lung fields are clear.
Both hila are normal.
Bilateral cardiophrenic and costophrenic angles are normal.
The trachea is central.
Aorta appears normal.
Cardiomegaly seen.
The mediastinal and cardiac silhouette are normal.
Soft tissues of the chest wall are normal.
Bony thorax is normal.

IMPRESSION:

- **Cardiomegaly seen.**

DR. DISHA MINOCHA
DMRE (RADIOLOGIST)

Apollo TOUCHING LIVES

Apollo Clinic VASHI

PATIENT'S NAME	NILIMA D PATIL	AGE :- 45Y/F
UHID	10384	27 Jan 2024

USG WHOLE ABDOMEN (TAS)

LIVER is normal in size, shape and echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepato-petal flow. No evidence of intra-hepatic biliary duct dilatation.

Gall Bladder appears well distended with normal wall thickness. There is no calculus or pericholecystic collection. CBD appears normal.

Visualised parts of head & body of PANCREAS appear normal.

SPLEEN is normal in size and echotexture. No focal lesion seen. Splenic vein is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.
RIGHT KIDNEY measures 9.8 x 4.1 cm. **LEFT KIDNEY** measures 10.6 x 4.6 cm.

URINARY BLADDER is well distended; no e/o wall thickening or mass or calculi seen.

UTERUS is anteverted and is enlarged in size but shows normal, shape and echotexture; No focal lesion seen. It measures 8.6 x 6.1 x 4.8 cm; ET measures 6 mm.

Both ovaries are normal in size, shape and position.

Visualised BOWEL LOOPS appear normal. There is no free fluid seen.

IMPRESSION –

- **Bulky uterus.**
- **No other significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE.THE CONTENTS OF THIS REPORT REQURE CLINICAL CO-RELATION BEFORE ANY APPLICATION.

DR. DISHA MINOCHA
DMRE (RADIOLOGIST)