

Date: - 11/11/2023

CID: 2331521502

Name: - Shipra Srivastava

Sex/Age: 34/F

EYE CHECK UP

Chief complaints: NO

Systemic Diseases: NO

Past history: NO

Unaided Vision:

Aided Vision:

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	-	-	-	6/6	-	-	-	6/6
Near	-	-	-	N/6	-	-	-	N/6

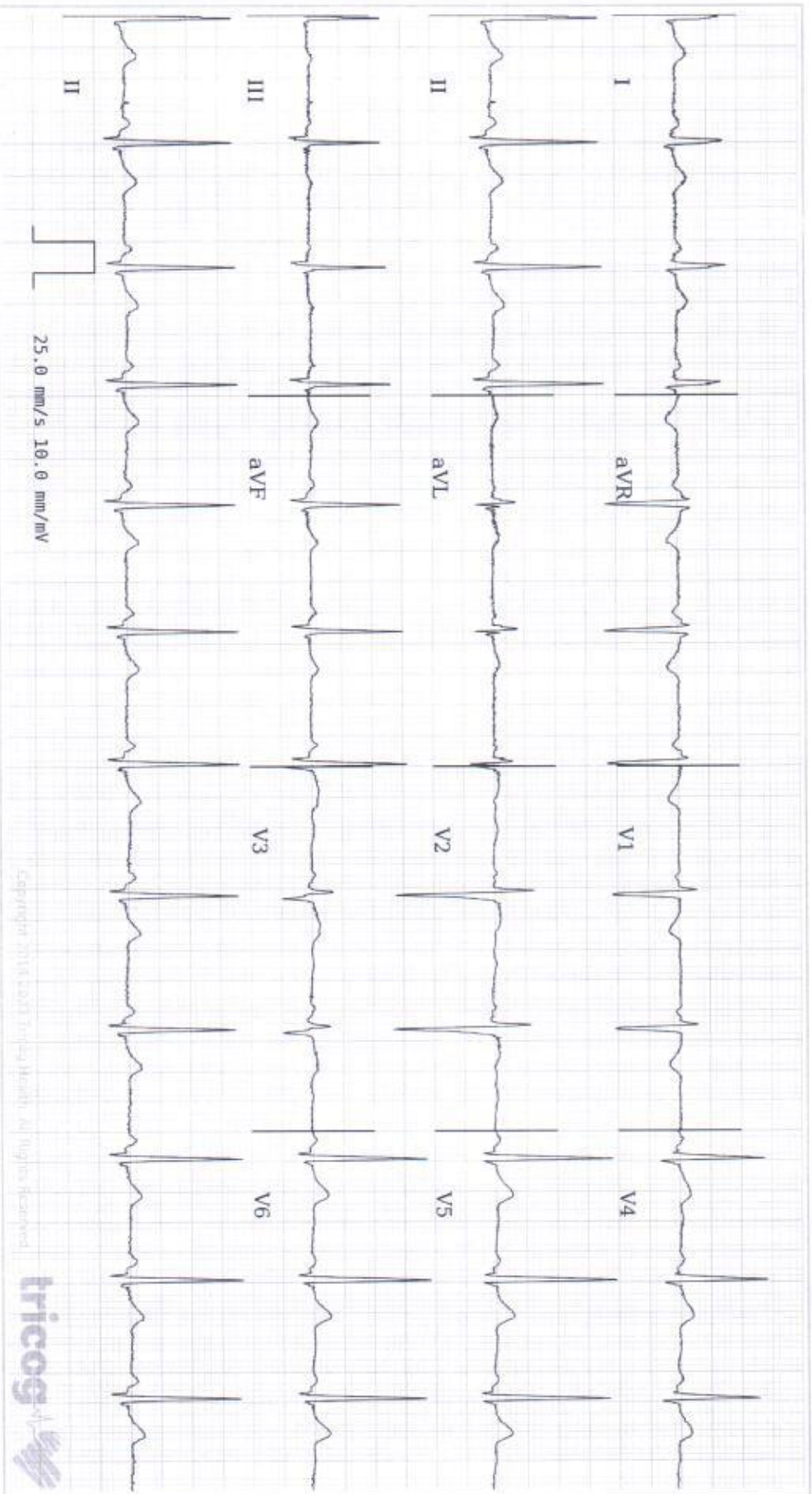
Colour Vision: Normal / Abnormal

Remark: Normal

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.
Row House No. 3, Aangen,
Thakur Village, Kandivali (east),
Mumbai - 400101.
Tel : 61700000

Patient Name: SHIPRA SRIVASTAVA
Patient ID: 2331521502

Date and Time: 11th Nov 23 12:02 PM



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Age **34** NA
years months

Gender **Female**

Heart Rate **74bpm**

Patient Vitals

BP: 130/80 mmHg

Weight: 92 kg

Height: 165 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 96ms

QT: 384ms

QTcB: 426ms

PR: 120ms

P-R-T: 47° 66° 39°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

REPORTED BY

DR. AKHIL PARULEKAR
MBBS MD, MEDICINE, DNB Cardiology
Cardiologist
20120824831

This report is based on ECG alone and should be read in conjunction with clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. All values are entered by the technician and not derived from the ECG.

CID : 2331521502
Name : Mrs SHIPRA SRIVASTAVA
Age / Sex : 34 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 11-Nov-2023
Reported : 11-Nov-2023 / 18:41

Use a QR Code Scanner
Application To Scan the Code

USGBILATERAL SONOMAMMOGRAPHY

Both the breasts reveal normal parenchymal echotexture.

No focal solid or cystic lesion is seen.

No ductal dilatation is seen.

Retroareolar regions are normal.

Bilateral axillae are unremarkable.

IMPRESSION:

No significant abnormality is seen.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. Please interpret accordingly.

-----End of Report-----



DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

Click here to view images <<ImageLink>>

Name : Shriya Srivastav Age / Gender : 34/f
Dr. : _____ Date : 11/11/23

GYNAEC EXAMINATION REPORTS

PERSONAL HISTORY

CHIEF COMPLAINTS : Delayed periods 2 day
MARITAL STATUS : married (WPT -ve)
MENSTRUAL HISTORY : (kit test)
(i) MENARCHE : @ age 15 yrs
(ii) PRESENT MENSTRUAL HISTORY : Reg
(iii) PAST MENSTRUAL HISTORY : 10/10/23
OBSTETRIC HISTORY : G2 P2 L2 A0
PAST HISTORY : - NIL
PREVIOUS SURGERIES : USS 2016, 2022
ALLERGIES : NO
FAMILY HISTORY : mother - DM
DRUG HISTORY : - NO
BOWEL HABITS : 1 (P)
BLADDER HABITS :

Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg.No.69548

Name : Shipra Srivastava

Age / Gender 34 | F

Dr. :

Date : 11/11/23

GYNAEC EXAMINATION REPORTS

GENERAL EXAMINATION

TEMPERATURE : (M)

RS :

PULSE : 72 / min

CVs :

BP : 130/80

Breasts :

Per Abdomen :

NAD, Scar of US Healthy

Per vaginal :

PLS - ex Healthy

RECOMMENDATIONS

ADVISE :


Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg.No.69548



CID : 2331521502
Name : Mrs SHIPRA SRIVASTAVA
Age / Sex : 34 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 11-Nov-2023
Reported : 11-Nov-2023 / 10:38

USG WHOLE ABDOMEN

LIVER:

The liver is enlarged in size (18.2 cms) normal in shape and smooth margins. It shows bright parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein measures 12 mm and CBD measures 3.5 mm. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualized and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Right kidney measures 11.0 x 3.8 cm. Left kidney measures 11.5 x 5.4 cm.
Both the kidneys are normal in size shape and echotexture.
No evidence of any calculus, hydronephrosis or mass lesion seen.

SPLEEN:

The spleen is normal in size (10.6 cm) and echotexture. No evidence of focal lesion is noted.
There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

The uterus is anteverted and appears normal. It measures 8.0 x 5.5 x 5.1 cm in size.
IUD noted in the endometrium.

OVARIES:

Both the ovaries are well visualized and appears normal.
There is no evidence of any ovarian or adnexal mass seen.
Right ovary = 2.6 x 1.6 cm Left ovary = 3.3 x 2.0 cm



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IMPRESSION:-

HEPATOMEGALY WITH GRADE II FATTY LIVER.

IUD IN THE ENDOMETRIUM.

-----End of Report-----

DR. Akash Chhari
MBBS, MD. Radio-Diagnosis Mumbai
MMC REG NO - 2011/08/2862



CID : 2331521502
Name : Mrs SHIPRA SRIVASTAVA
Age / Sex : 34 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 11-Nov-2023
Reported : 11-Nov-2023 / 17:29

Use a QR Code Scanner
Application To Scan the Code

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

Kindly correlate clinically.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X ray is known to have inter-observer variations. Further / follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Please interpret accordingly. In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days post which the center will not be responsible for any rectification.

-----End of Report-----

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=202311112120954>

Name : Mrs . SHIPRA SRIVASTAVA
VID : 2331521502
Ref By : Arcofemi Healthcare Limited

Reg Date : 11-Nov-2023 12:11
Age/Gender : 34 Years
Regn Centre : Kandivali East (Main Centre)

History and Complaints:

No

EXAMINATION FINDINGS:

Height (cms):	165 cms	Weight (kg):	92 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	130/80	Nails:	Normal
Pulse:	72/min	Lymph Node:	Not palpable

Systems

Cardiovascular: Normal
Respiratory: Normal
Genitourinary: Normal
GI System: Normal
CNS: Normal

IMPRESSION:

*use - fatty liver
IUP in endometrium*

ADVICE:

*Reduce weight
- low fatty diet*

CHIEF COMPLAINTS:

- | | |
|---------------------------------|----|
| 1) Hypertension: | No |
| 2) IHD | No |
| 3) Arrhythmia | No |
| 4) Diabetes Mellitus | No |
| 5) Tuberculosis | No |
| 6) Asthama | No |
| 7) Pulmonary Disease | No |
| 8) Thyroid/ Endocrine disorders | No |

Print Date : 13-Nov-2023 09:43

Page: 1 of 2

Name : Mrs . SHIPRA SRIVASTAVA
VID : 2331521502
Ref By : Arcofemi Healthcare Limited

Reg Date : 11-Nov-2023 12:11
Age/Gender : 34 Years
Regn Centre : Kandivali East (Main Centre)

- | | |
|--|----------------|
| 9) Nervous disorders | No |
| 10) GI system | No |
| 11) Genital urinary disorder | No |
| 12) Rheumatic joint diseases or symptoms | No |
| 13) Blood disease or disorder | No |
| 14) Cancer/lump growth/cyst | No |
| 15) Congenital disease | No |
| 16) Surgeries | LSCS 2006,2002 |
| 17) Musculoskeletal System | No |

PERSONAL HISTORY:

- | | |
|---------------|-------|
| 1) Alcohol | No |
| 2) Smoking | No |
| 3) Diet | Mixed |
| 4) Medication | No |

Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg. No. 69548
Jagruti Dhale
Dr. Jagruti Dhale

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.
Row House No. 3, Aangan,
Thakur Village, Kandivali (east),
Mumbai - 400 101.
Tel : 61700000



EMail:

2342 / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg Date: 11 / 11 / 2023 12:15:14 PM Refd By : AERCOFEMI

REPORT :

Heart Rate 163.0 bpm

Systolic BP 150.0 mmHg Diastolic BP 80.0 mmHg

Exercise Time 04:18 Mins. Ectopic Beats 0.0

METS 5.8 Test End Reason , Heart Rate Achieved Target Heart Rate 88% of 186

TEST OBJECTIVE	ROUTINE CHECK UP
RISK FACTOR	NONE
ACTIVITY	MODERATE ACTIVE
MEDICATION	NONE
REASON FOR TERMINATION	HEART RATE ACHIEVED
EXERCISE TOLERANCE	GOOD
EXERCISE INDUCED ARRHYTHMIAS	NO
HAEMODYNAMIC RESPONSE	NORMAL
CHRONOTROPIC RESPONSE	NORMAL
FINAL IMPRESSION	NO SIGNIFICANT ST T CHANGES NOTED

DISCLAIMER Negative stress test does not rule out coronary artery disease. Positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical correlation is mandatory.

Dr. Akhil P. Parulekar.**MBBS. MD. Medicine****DNB Cardiology****Reg. No. 2012082483****SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD**

Row House No. 3, Aangan,

Thakur Village, Kandivali (east),

Mumbai - 400101.

Tel : 817000000

Doctor : DR.AKHIL PARULEKAR

SUBURBAN DIAGNOSTICS KANDIVALI EAST

Email:

Report



2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg
 Date: 11 / 11 / 2023 12:15:14 PM Refd By : AERCOFEMI Examined By: DRAKHIL PARULEKAR

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:09	0:09	00.0	00.0	01.0	075	40 %	130/80	097	00	
Standing	00:50	0:41	00.0	00.0	01.0	087	47 %	130/80	113	00	
HV	01:06	0:16	00.0	00.0	01.0	086	46 %	130/80	111	00	
ExStart	01:32	0:26	00.0	00.0	01.0	093	50 %	130/80	120	00	
BRUCE Stage 1	04:32	3:00	02.7	10.0	04.7	145	78 %	130/80	188	00	
PeakEx	05:50	1:18	04.0	12.0	05.8	163	88 %	150/80	244	00	
Recovery	06:50	1:00	00.0	00.0	01.0	135	73 %	150/80	202	00	
Recovery	07:09				00.0	000	0 %	--/--	000	00	

FINDINGS :

Exercise Time : 04:18
 Initial HR (ExStrt) : 93 bpm 50% of Target 186
 Initial BP (ExStrt) : 130/80 (mm/Hg)
 Max Workload Attained : 5.8 Fair response to induced stress
 Duke Treadmill Score : 03.2
 Test End Reasons : Heart Rate Achieved

Max HR Attained 163 bpm 88% of Target 186
 Max BP Attained 150/80 (mm/Hg)

Dr. Akhil P. Parulekar.
 MBBS. MD. Medicine
 DNB Cardiology
 Reg. No. 2012082483

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 Row House No. 3, Aangan,
 Thakur Village, Kandivali (east),
 Mumbai - 400101.
 Tel : 617000000

Doctor : DR.AKHIL PARULEKAR

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 75



Date: 11 / 11 / 2023 12:15:14 PM

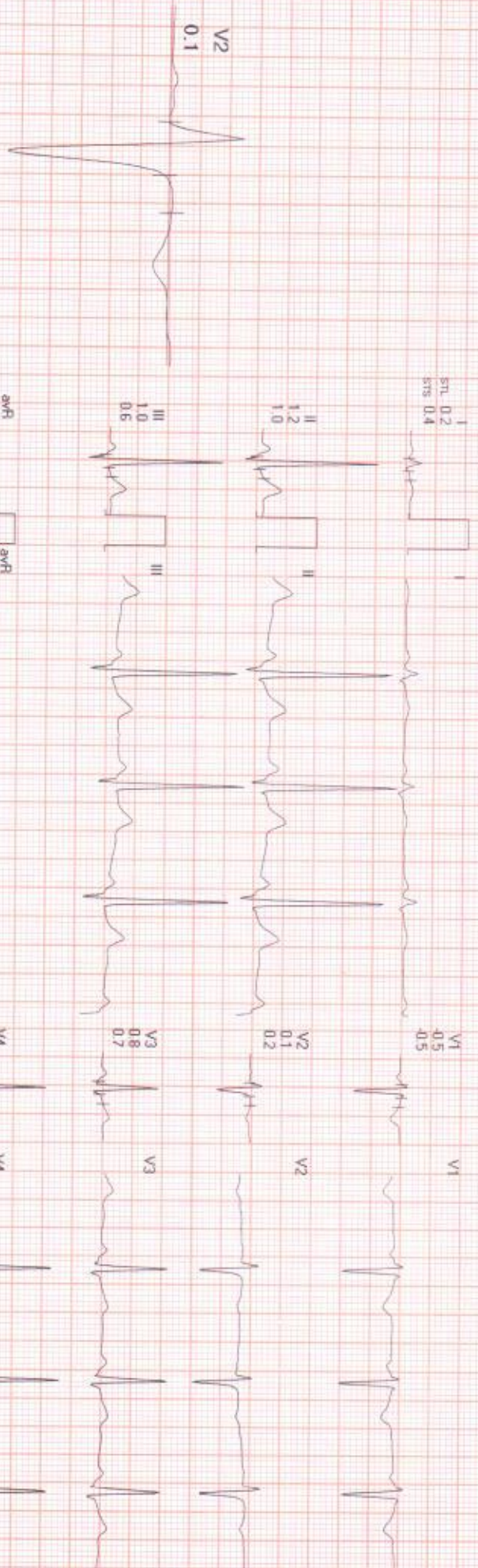
METS: 1.0 / 75 bpm 40% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Kmph, 0.0%

4X 80 ms Post J

25 mm/Sec. 1.0 Cm/mV

V2 0.1



REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6

SUBURBAN DIAGNOSTICS KANDIVALI EAST

STANDING (00:41)

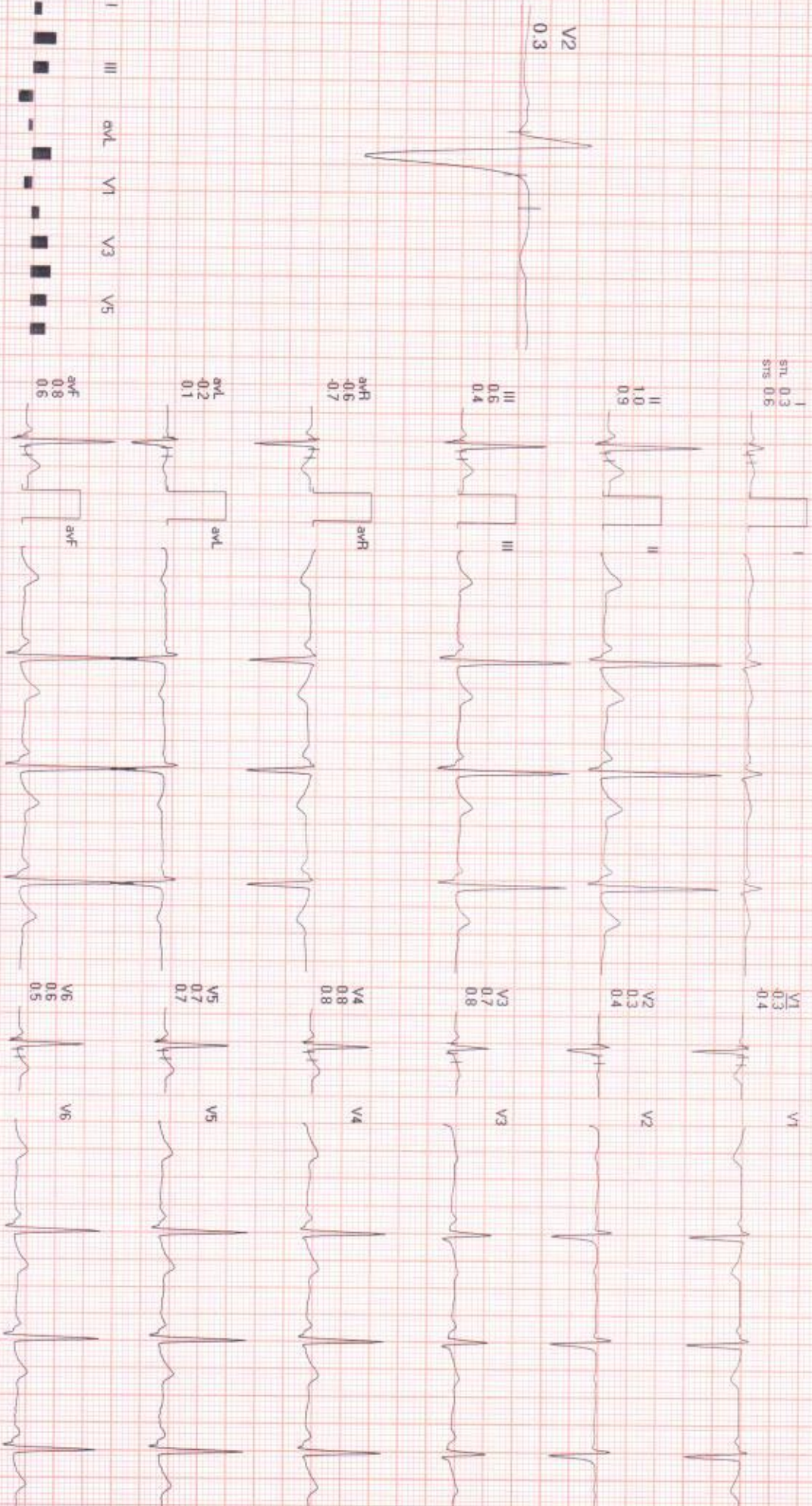
2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 87



Date: 11/11/2023 12:51:14 PM METS: 1.0/87 bpm 47% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

EX Time: 00:00 0.0 Km/hr, 0.0%

4X 80 ms Post J



REMARKS: avR avF V2 V4 V6

SUBURBAN DIAGNOSTICS KANDIVALI EAST

HV (00:16)

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 86



Date: 11 / 11 / 2023 12:15:14 PM

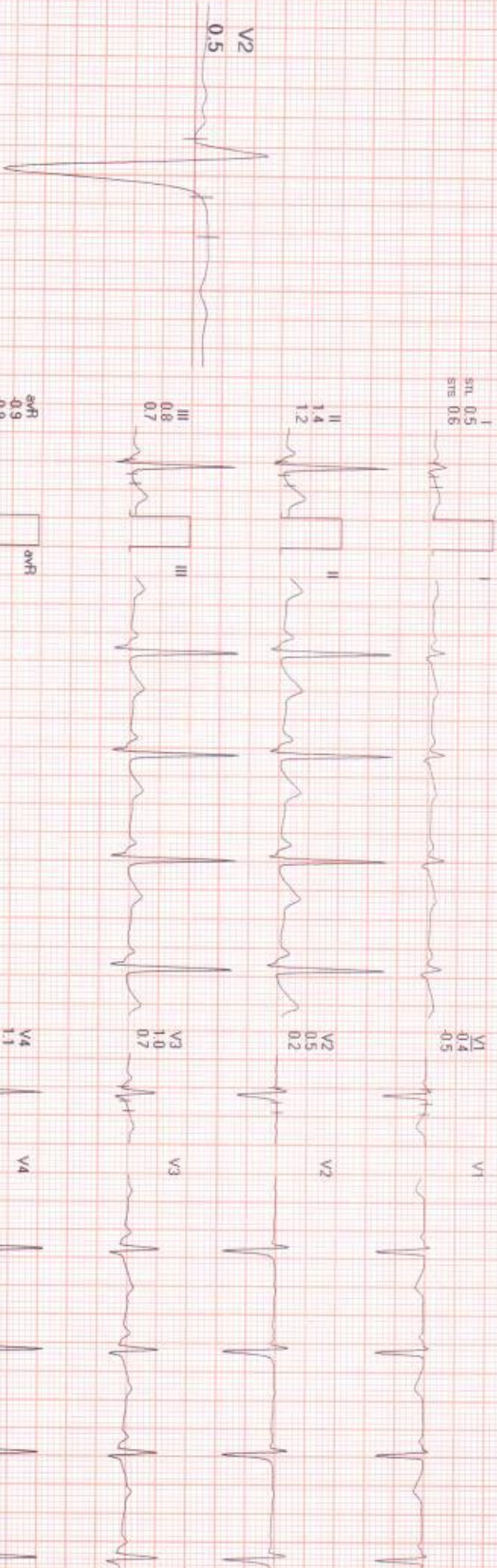
METS: 1.0 / 86 bpm 46% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00:00 KmPh. 0.0%

4X 80 ms Post J

25 mm/Sec 1.0 Cm/mV

V2 0.5



REMARKS

I II III aVR aVL aVF V1 V2 V3 V4 V5 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

ExStn



2342 (2331521502) / SHIPRA SRINIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 93

Date: 11 / 11 / 2023 12:51:14 PM

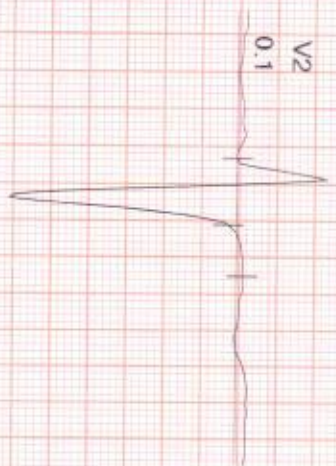
MEETS: 1.0/93 bpm 50% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime 00:00 0.0 KmPh 0.0%

4X 80 mS Padd J

25 mm/Sec. 1.0 Cm/mV

V2 0.1



SI 0.3
ST 0.5

II 1.1
0.9



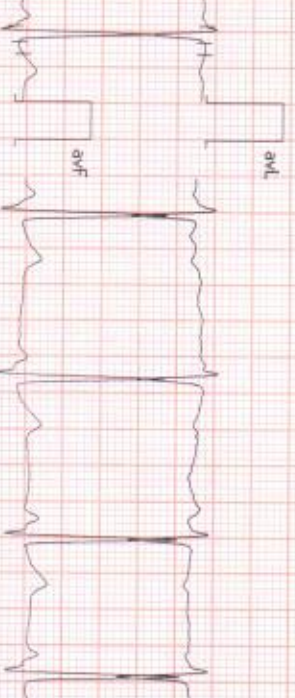
III 0.9
0.4

aVR 0.7
0.7



aVL 0.3
0.0

aVF 1.0
0.6



V1 0.4
0.4

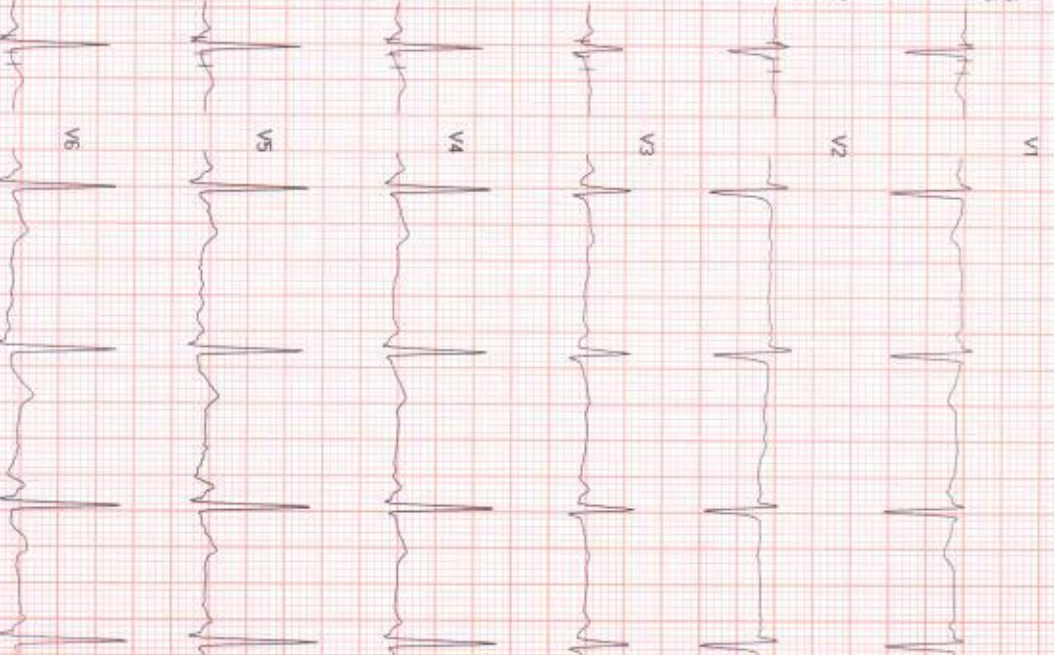
V2 0.1
0.1
0.4

V3 0.7
0.7

V4 0.9
0.8

V5 0.8
0.8

V6 0.9
0.5



REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 1 (03:00)

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 145



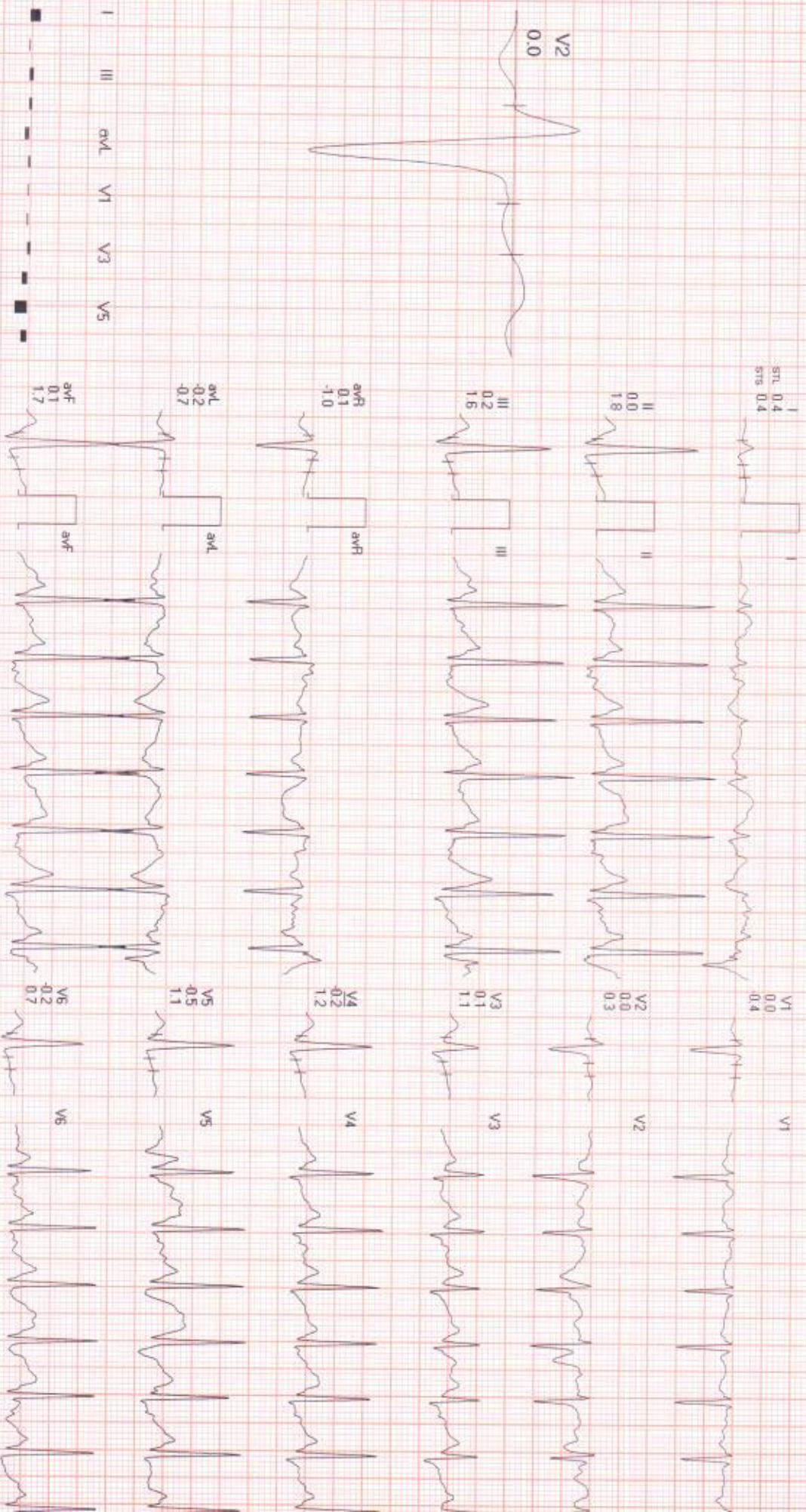
Date: 11 / 11 / 2023 12:15:14 PM

METS: 4.7 / 1.45 bpm 78% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 2.7 Kmph, 10.0%

4X 60 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6

SUBURBAN DIAGNOSTICS KANDIVALI EAST

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 163

PeakEx



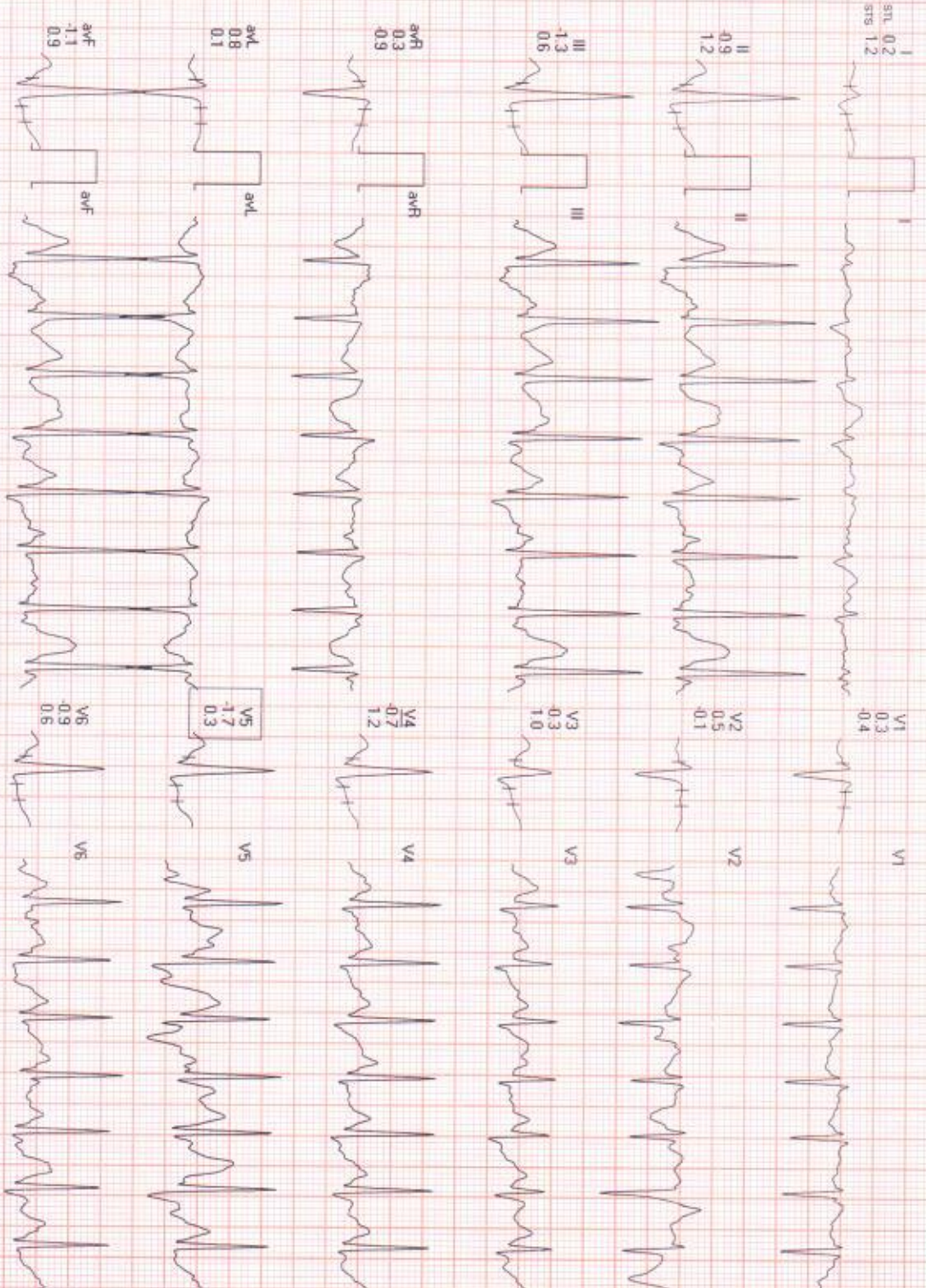
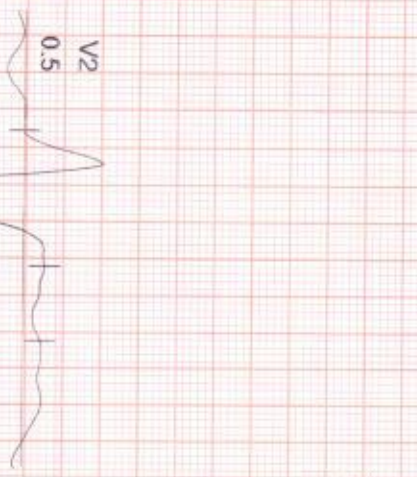
Date: 11 / 11 / 2023 12:15:14 PM

METS: 5.8 / 163 bpm 88% of THR BP: 150/80 mmHg Raw ECG/BLO On/Notch On/HF 0.05 Hz/LF 35 Hz

ExTime 04:18 4.0 Km/h 12.0%

4X 60 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS: I II aVR aVL V1 V2 V3 V4 V5 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR : 135

Recovery : (01:00)



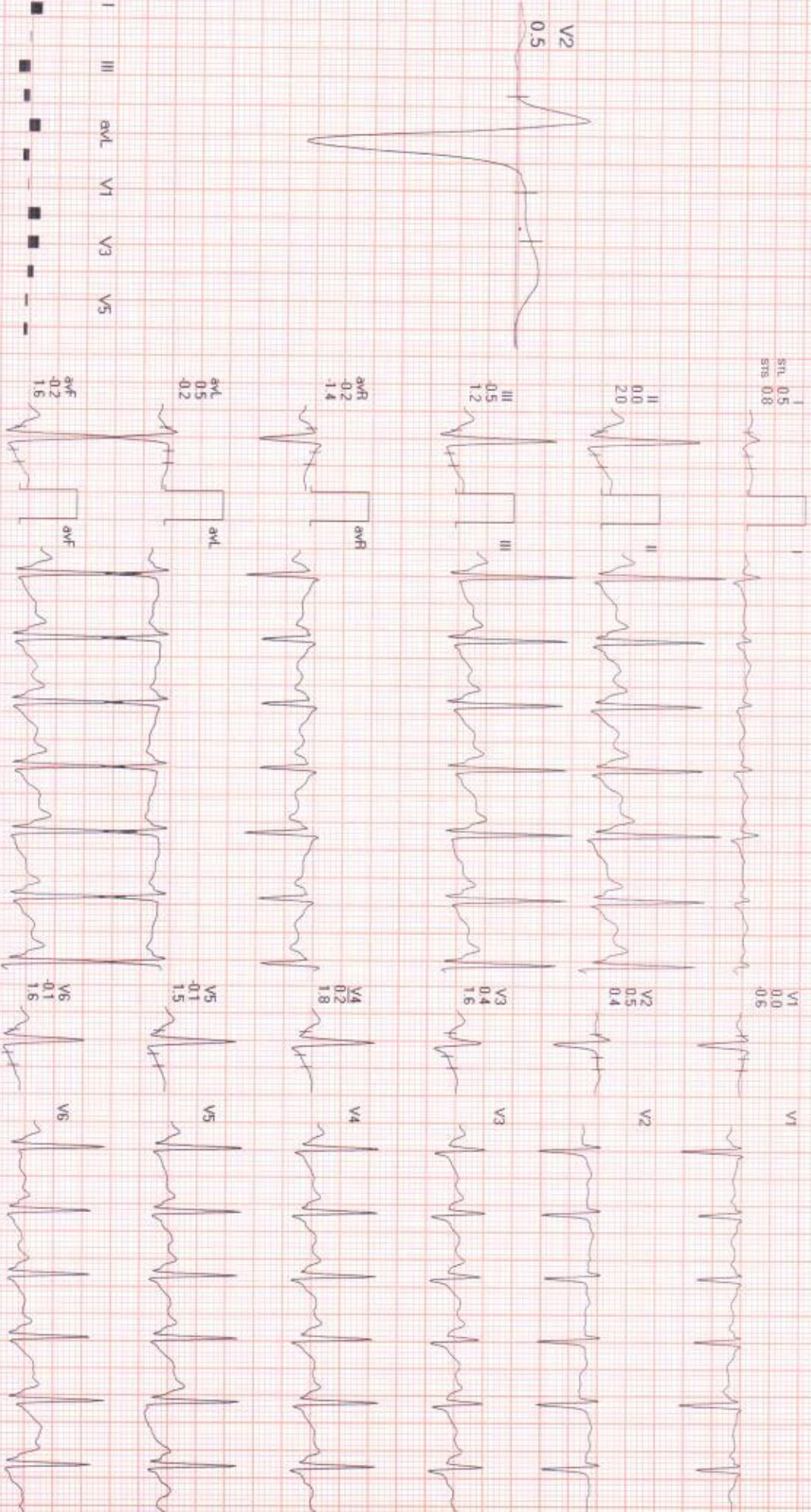
Date: 11 / 11 / 2023 12:15:14 PM

METS: 1.0 / 135 bpm 73% of THR BP- 150/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 04:18 0.0 Km/h 0.0%

4X 60 ms Post

25 mm/Sec 1.0 Cm/mV



REMARKS
II aVR aVF V2 V4 V6

SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (01:19)

2342 (2331521502) / SHIPRA SRIVASTAVA / 34 Yrs / F / 165 Cms / 92 Kg / HR 124



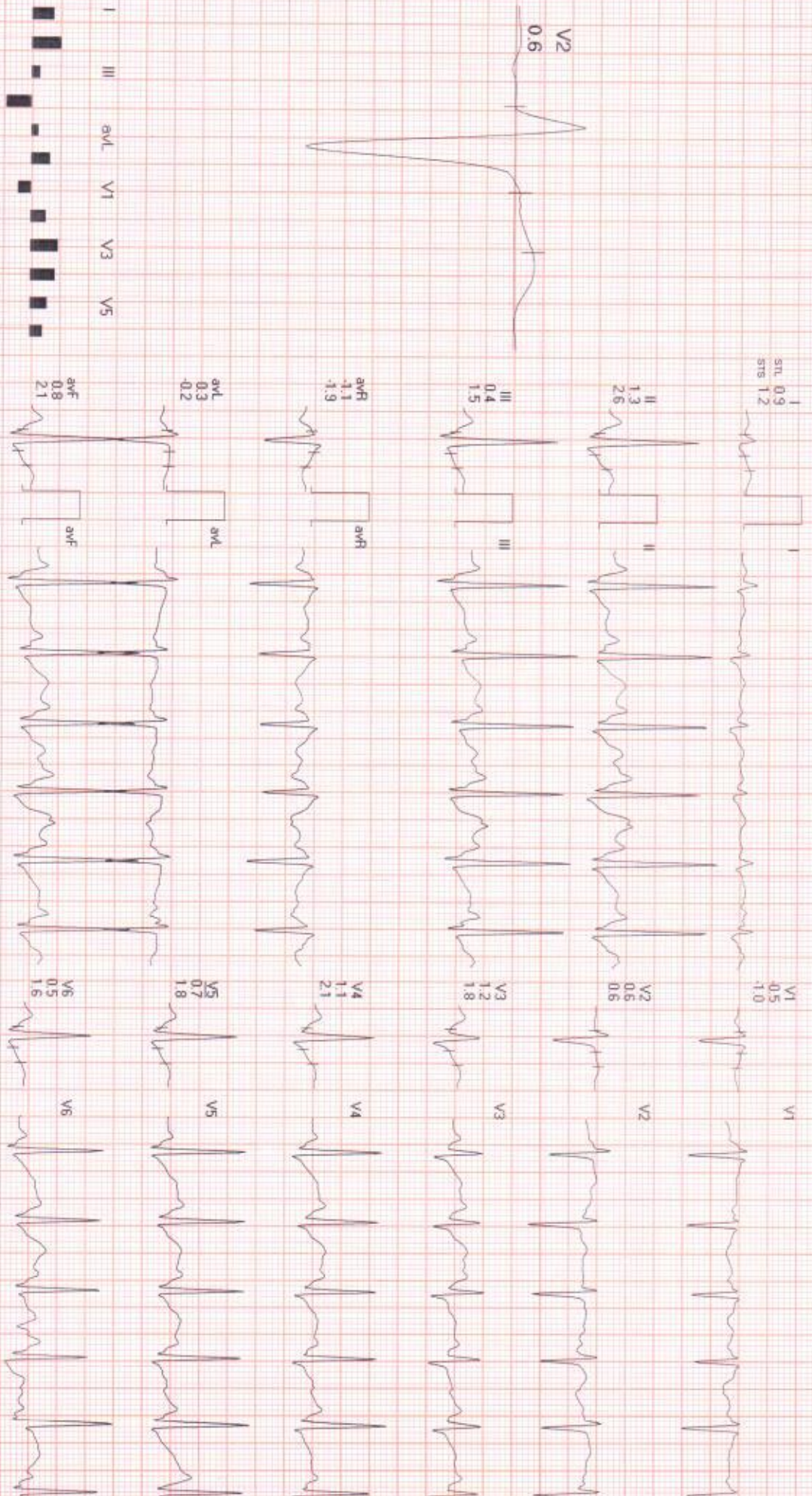
Date: 11 / 11 / 2023 12:15:14 PM

METS: 1.0/124 bpm 67% of THR BP: 140/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

EXTime 04:18 0.0Kmph, 0.0%

4X 80 ms Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS





CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 11-Nov-2023 / 12:18
Reported : 11-Nov-2023 / 17:25

Use a QR Code Scanner
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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	12.1	12.0-15.0 g/dL	Spectrophotometric
RBC	4.44	3.8-4.8 mil/cmm	Elect. Impedance
PCV	37.0	36-46 %	Measured
MCV	83	80-100 fl	Calculated
MCH	27.3	27-32 pg	Calculated
MCHC	32.8	31.5-34.5 g/dL	Calculated
RDW	14.1	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7690	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	20.6	20-40 %	
Absolute Lymphocytes	1584.1	1000-3000 /cmm	Calculated
Monocytes	8.6	2-10 %	
Absolute Monocytes	661.3	200-1000 /cmm	Calculated
Neutrophils	66.5	40-80 %	
Absolute Neutrophils	5113.9	2000-7000 /cmm	Calculated
Eosinophils	4.2	1-6 %	
Absolute Eosinophils	323.0	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	7.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	222000	150000-400000 /cmm	Elect. Impedance
MPV	11.7	6-11 fl	Calculated
PDW	25.4	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



CID : 2331521502
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Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 59 2-20 mm at 1 hr. Sedimentation

Result rechecked.
Kindly correlate clinically.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	99.7	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	104.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



MC-2111

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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Reported : 11-Nov-2023 / 19:15

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
KIDNEY FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	25.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	12.0	6-20 mg/dl	Calculated
CREATININE, Serum	0.69	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	117	(ml/min/1.73sqm) Normal or High: Above 90 Mild decrease: 60-89 Mild to moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15	Calculated

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
URIC ACID, Serum	5.3	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.9	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.1	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	138	135-148 mmol/l	ISE
POTASSIUM, Serum	4.8	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	101	98-107 mmol/l	ISE

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



MC-2111

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.1	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	99.7	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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*** End Of Report ***



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
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Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
URINE EXAMINATION REPORT**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Present	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	Less than 20/hpf	
Others	-		

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein (1+ = 25 mg/dl , 2+ =75 mg/dl , 3+ = 150 mg/dl , 4+ = 500 mg/dl)
- Glucose(1+ = 50 mg/dl , 2+ =100 mg/dl , 3+ =300 mg/dl ,4+ =1000 mg/dl)
- Ketone (1+ =5 mg/dl , 2+ = 15 mg/dl , 3+= 50 mg/dl , 4+ = 150 mg/dl)

Reference: Pack inert

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*** End Of Report ***



MC-2111

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	B
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

*** End Of Report ***



Dr. Vrushi Shroff

Dr.VRUSHALI SHROFF
M.D.(PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	156.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	95.9	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	42.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	113.8	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	95.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	18.8	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.7	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.3	0-3.5 Ratio	Calculated

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*** End Of Report ***



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Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.6	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.6	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	3.26	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



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Age / Gender : 34 Years / Female
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Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

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Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2331521502
Name : MRS.SHIPRA SRIVASTAVA
Age / Gender : 34 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIVER FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.92	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.49	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.43	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
SGOT (AST), Serum	40.4	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	58.4	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	35.6	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	87.5	35-105 U/L	Colorimetric

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Bmhasakar

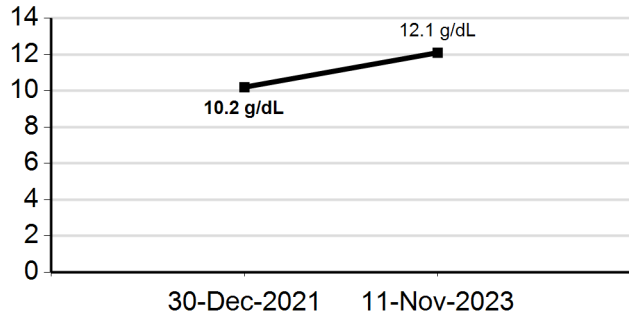
Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



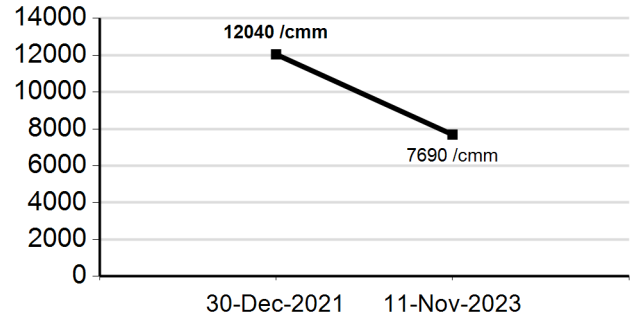
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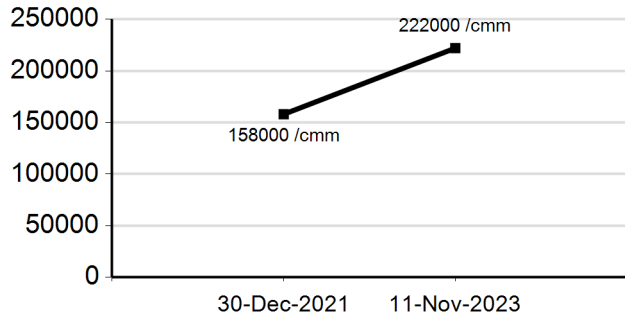
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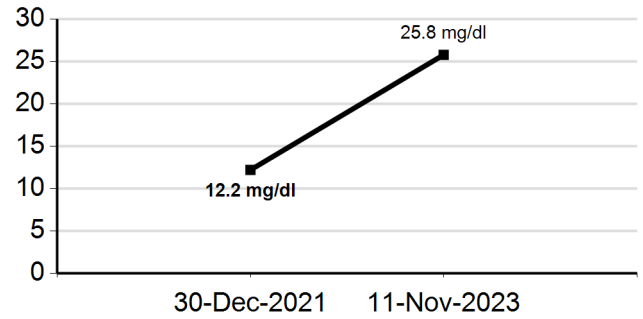
WBC Total Count



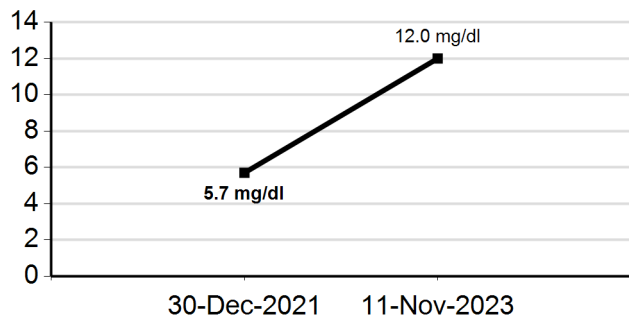
Platelet Count



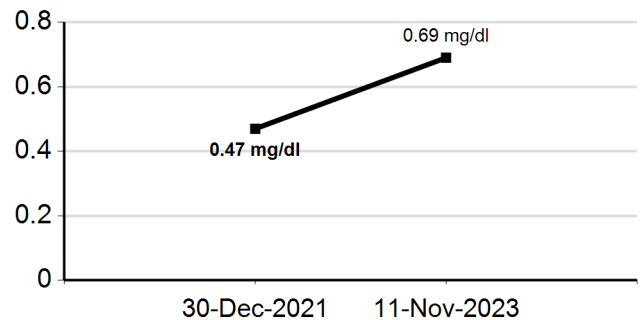
BLOOD UREA



BUN



CREATININE

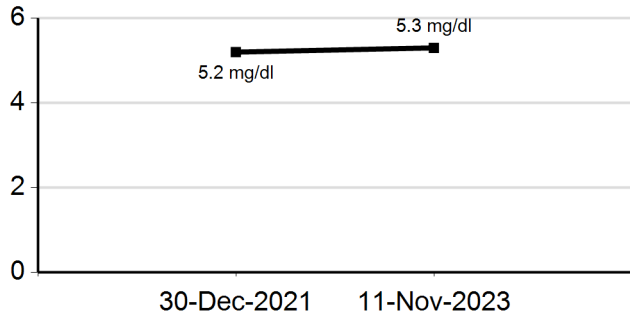




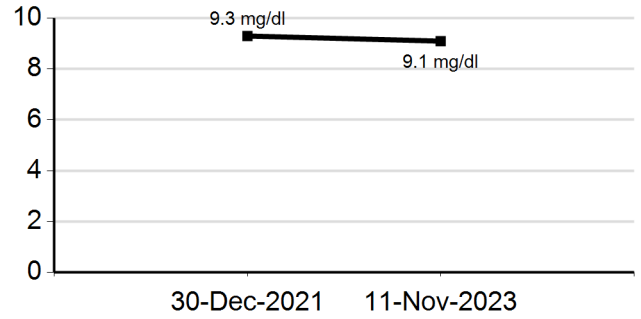
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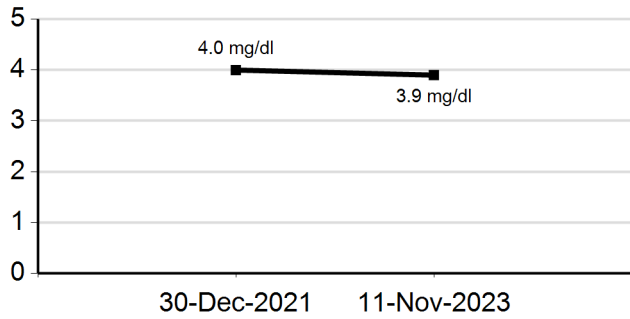
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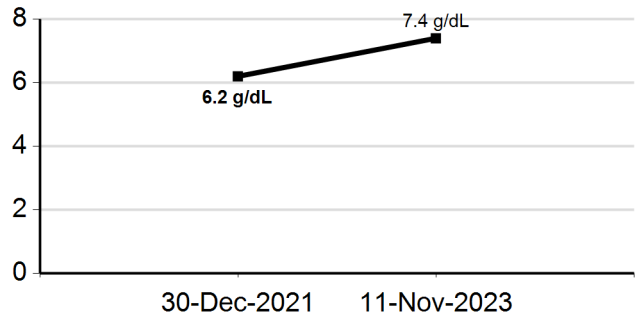
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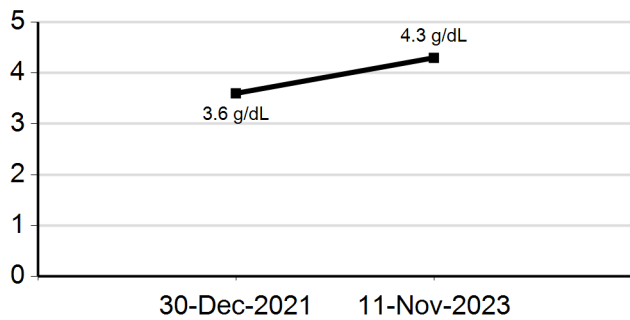
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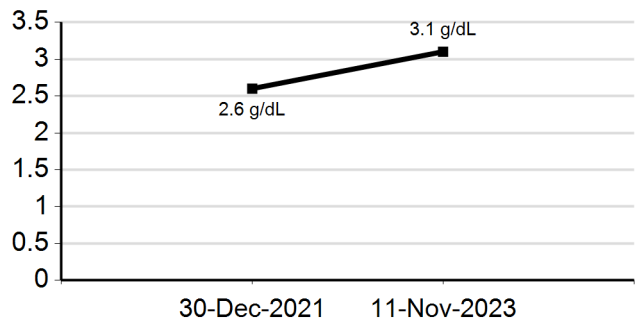
TOTAL PROTEINS



ALBUMIN



GLOBULIN

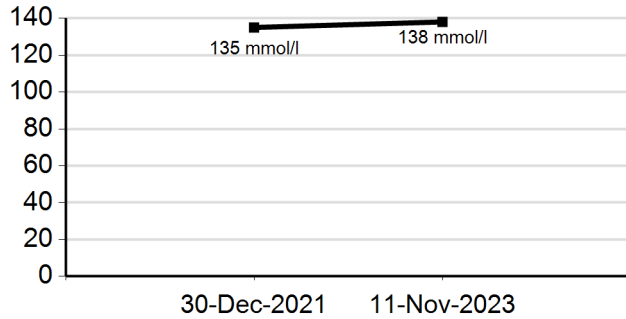




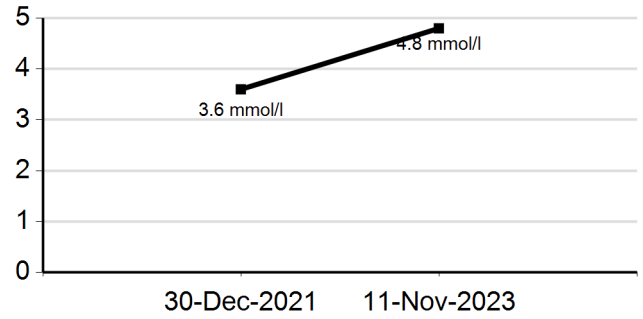
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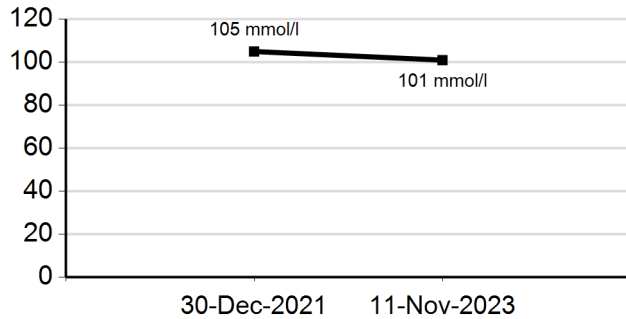
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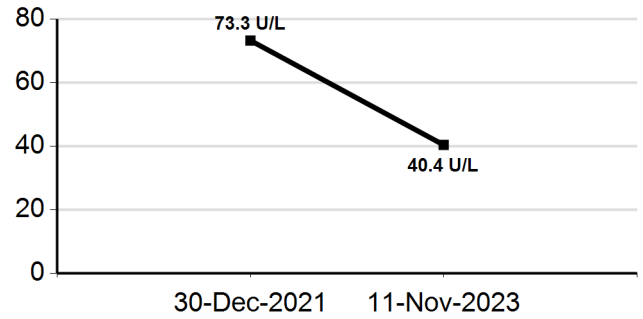
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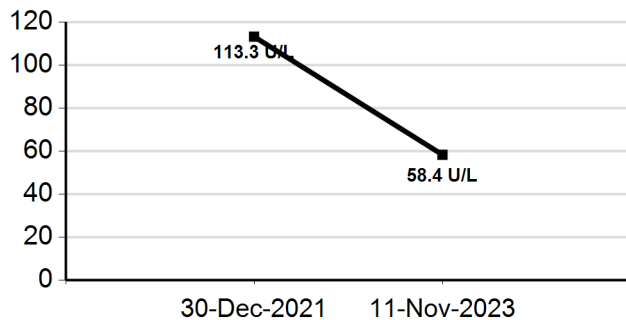
CHLORIDE



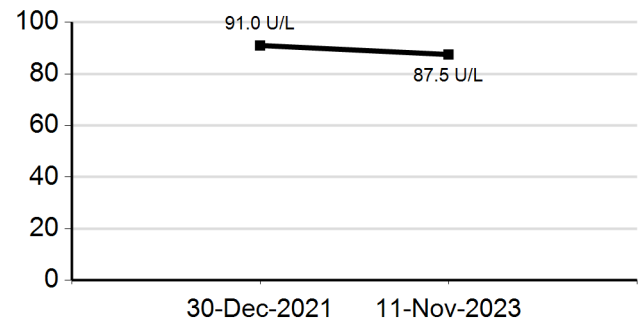
SGOT (AST)



SGPT (ALT)



ALKALINE PHOSPHATASE

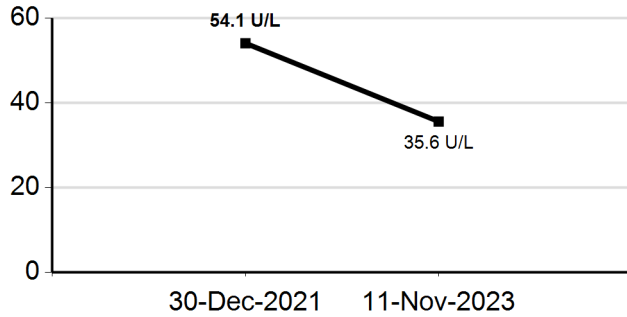




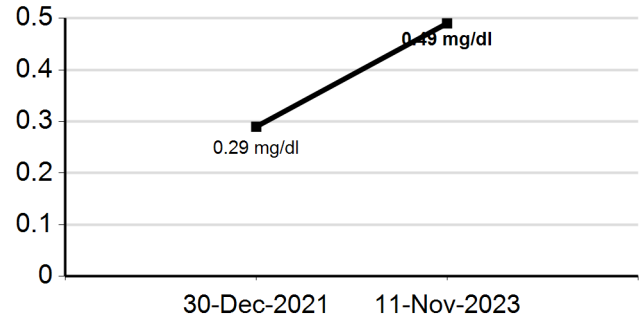
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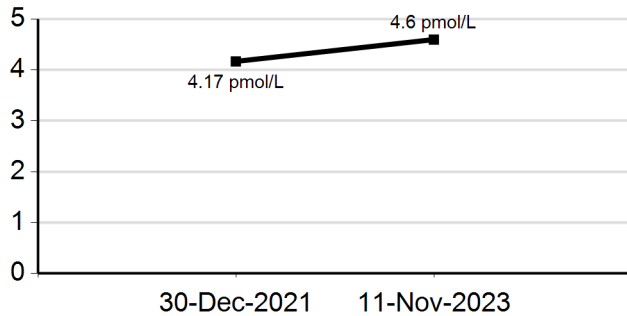
GAMMA GT



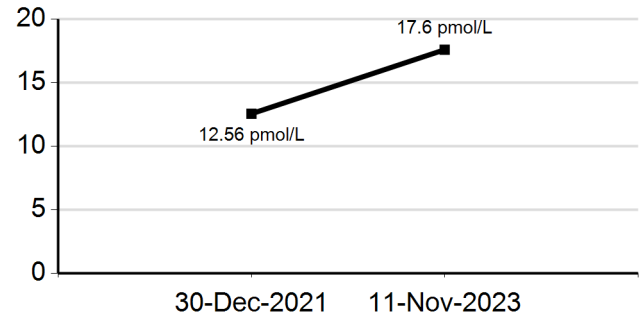
BILIRUBIN (DIRECT)



Free T3



Free T4



sensitiveTSH

