



HEALTH CHECK-UP SUMMARY

Race Course Road, Vadodara

Name: HEMLATA SANKHLA	
SH No: 300592	Date:09/11/2024
Age: 28	Gender: FEMALE

ASSESSMENT:

- o P/H/O HOSPITALIZATION : FEVER(2023)(1 DAY) , (2021)(1 DAY)
- o C/O: UNKNOWN COIAUSE LEADING TO RED PATCHES ON SKIN , ANXIETY, MOOD SWINGS , PIMPLES AT FACE , DISTURBED SLEEP , OCCASIONAL CONSTIPATION , OCCASIONAL HEADACHE , OCCAIONAL LIMB PAIN , OCCASIONAL VAGINAL DISCHARGE , DYSMENORRHEA
- o F/H/O: THYROID(MOTHER)
- o P/H/O: RENAL CALCULI , AMENORRHEA(2 MONTHS)
- o HIGH RBC COUNT(5.03 MILLION/ CMM)
- o HIGH ESR(30)
- o BORDERLINE HIGH CHOLESTEROL(210) , NEAR TO ABOVE OPTIMAL DIRECT LDL(125)
- o HIGH TOTAL PROTEIN (8.30) , HIGH GLOBULIN(3.60)
- o USG ABDOMEN AND PELVIS : CHOLELITHIASIS , NO EVIDENCE OF CHANGES OF CHOLECYSTITIS

ADVISED:

- o PLENTY OF LIQUIDS
- o LOW FAT DIET
- o AVOID OUT SIDE FOOD AND WATER
- o REGULAR EXERCISE.
- o REPEAT LIPID PROFILE AFTER 3 MONTH
- o OPHTHALMOLOGIST ADVICE : FOLLOW ADVICE
- o GYNAC CONSULTATION
- o PHYSICIAN CONSULTATION

Sterling Addlife India Limited
Unit-Sterling Hospital, Vadodara
Race Course Road, (West)
VADODARA - 390 007.

DR JAY S PANDIT

Prevention & Rehabilitation Dept

Hospital Address: Sterling Hospitals, Race Course Road, Opp. Inox Cinema Hari Nagar, Circle West, Vadodara - 390007, Gujarat, India | Call: 0265-6144111, 0265-2354455, 96-98-98-78-78
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Registered Office: Sterling Addlife India Private Limited | CIN U85110GJ2000PTC039121
Sterling Hospital, Sterling Hospital Road, Memnagar, Ahmedabad-380052, Gujarat, India



**HEALTH CHECK UP
MEDICAL EXAMINATION**

Name: Mamata Sarkar Employee ID: _____
 Company Name: _____ Age: 28 Sex: M/F
 Height: 162 cms. Weight: 65.7 Kgs BMI: 23.55 Blood Group: _____
 Name of HO / Registrar taking History: Dr. Jay Pradip

Allergies: <input type="checkbox"/> None <input type="checkbox"/> Yes (If Yes, describe)	
Drugs/Food/Latex/Dyes/Contrast/Other	Reaction
1. <u>Latex</u>	<u>Redness</u>
2. _____	_____
3. _____	_____

Chief Complaints :
ALO - Anxiety & mood swings
& pimples @ face.

Physical Examination :

Vital Signs :
 Temp: 37.8 °F SPO₂: 99 Pulse: 106 /min R/R: 18 /min B.P.: 110/70 mm Hg

Past History :

If Hypertension, since On Medication 1) _____ 2) _____ 3) _____	If Diabetes, since On Medication 1) _____ 2) _____ 3) _____
If Ischaemic Heart Disease since On Medication 1) _____ 2) _____ 3) _____	Under Treatment Dr. _____ If Tuberculosis, When _____ Any Other P/H _____
Under Treatment of Dr. _____ Any Intervention done _____ P/H of Operation Diagnosis : _____ Name of Operation : _____ Year of Operation : _____	Any Other Medication _____ P/H of Hospitalization Diagnosis: <u>fever</u> / <u>fever</u> Year: <u>2023</u> / <u>2021</u> Duration: <u>1 day</u> / <u>1 day</u> Blood Transfusion History : Yes <input checked="" type="checkbox"/> No _____ Year: _____
Others _____	

Family History : (Specify : F-Father, M-Mother, B-Brother, S-Sister)

(Pl. Circle whichever is applicable e.g. If Father has h/o 10 yrs then, Yes / No F/10 yrs)

Hypertension	Yes/No	Asthma	Yes/No
Heart Disease	Yes/No	Stroke	Yes/No
Diabetes	Yes/No	Arthritis/Gout	Yes/No
Tuberculosis	Yes/No	Cancer	Yes/No
Epilepsy	Yes/No	Other Chronic disease	Yes/No <i>Thyroid: mother</i>

Personal History :

Diet	<i>Veg.</i>	Smoking	Yes/No	since	/	per day
Appetite	<i>N.A.D</i>	Alcohol	Yes/No	since	/	(freq.)
Sleep	<i>Disturbed sleep</i>	Drugs	Yes/No	since	/	(freq.)
Micturition	<i>N.A.D</i>	Tobacco	Yes/No	since	/	(freq.)
Bowel Habits	<i>D.C. Constipation</i>	Any other habit				

FOR FEMALES :

 Obstetric History : L.D. *A.M.P - 12/10/2024*
 Abortion :
 Others :

General Examination :
 Anemia
 Cyanosis
 Jaundice
 Generalized lymphadenopathy
 Pedal oedema

General Examination :
Head : NSF *Headache.*

Injuries (Specify if any) :

Eyes : NSF

- Vision : Normal Blurred Double Colour Blind
- Pupils : Normal Abnormal
- Other : Inflammation Pain Itching Discharge No complaint

Remarks (if any) :

Ears : NSF

- Deaf Yes No • Pain Yes No • Discharge Yes No
- Dizziness Yes No

Nose : NSF

- Nosebleed Yes No • Congestion Yes No • Sinus problem Yes No

Mouth : NSF

- Lesion Yes No
- Dental Hygiene Good Poor Bleeding gums Yes No
- Sense of taste Yes No

Throat/Neck NSF

- Swollen glands Yes No
- Stiffness Yes No
- Dysphagia Yes No

SYSTEMIC EXAMINATION

Neurological : NSF

- Headache Yes No
- Memory changes Yes No
- Dizziness Yes No
- Syncope Yes No
- Seizures Yes No
- Paralysis Yes No
- Yes R L
- Cooperative Yes No
- Anxiety Yes No
- Depression Yes No
- Suicidal attempt Yes No
- Any psychiatric illness no
- Oriented Yes No
- if disoriented, to Person Place Time
- Reaction: Brisk Sluggish No response
- LOC: Alert Confused Sedated
- Speech: Clear Slurred

Respiratory : NSF

- Lung sounds: A E B E clear
- Dyspnoea: None With activity At rest lying down Retractions
- Cough: None Non-productive Productive - colour
- Hemoptysis: Yes No
- Night Sweats: Yes No
- Cyanosis: Yes No
- Where:

Cardiovascular : NSF

- Chest discomfort Yes No
- Oedema Yes No
- Location: Pitting Non-pitting

Extremities-Musculoskeletal : NSF

- Skin: Warm Cool Dry Firm Flaccid Colour
 - Extremities: Tingling Yes No
 - Weakness Yes No
 - Deformity Yes No
 - Joints: Pain Yes No
 - Stiffness Yes No
 - Usus: Walker Wheelchair None
- see BIL's over of tend pain of limb

Gastrointestinal : NSF

- Appetite Good Poor
- Nausea Yes No
- Vomiting Yes No
- Distension Yes No
- Heartburn Yes No
- Flatus Yes No
- Pain Yes No
- Rectal Bleeding Yes No
- Colostomy Yes No
- Ileostomy Yes No

Bowel

- Diarrhoea Constipation Incontinence Blood in stool None
- Pain Yes No
- Place:
- Hemorrhoids Yes No
- Frequency of stool 1 time / day
- Interventions: None
- Laxatives: Yes No
- Type:
- Frequency:

Genitorurinary : NSF

 Colour of Urine Pale yellow Frequency 5-6 time/day

 Pain Yes No Burning Yes No Itching Yes No

 Urgency Yes No Incontinence Yes No

 Nocturia Yes No Urastomy Yes No

 History of calculi Yes No History of UTI Yes No

 Foley's Catheter Yes No Date of Insertion _____

Reproductive : NA NSF

LMP _____ Regular / Irregular _____

 Dysmenorrhea Yes No Amenorrhea Yes No if yes, Duration 2 months

 Menopausal Yes No if yes, Duration _____

 Vaginal discharge Yes No Itching Yes No

Breasts NA NSF

 Breast Feeding Yes No Lumps Yes No

Positive Finding & Advice



Sign and Stamp of Medical Officer

 Sterling Hospital
 Racecourse Road

EMERGENCY HELPLINE

 992 444 9972
 0265 - 61 44 111

 Sterling Hospital
 Bhayli

EMERGENCY HELPLINE

 908 1000 557
 0265 - 61 23 333



OPHTHALMIC CHECK-UP

SIGNIFICANT HISTORY:

PAST HISTORY:

Refractive Error:

Any Surgery:

Color Blind:

Diabetes:

Hypertension:

Any Treatment:

Handwritten scribbles

EXAMINATION OF EYES:

	<u>Right Eye:</u>	<u>Left Eye:</u>
Distant Vision without Glasses:	<i>6/6</i>	<i>6/6</i>
Distant Vision with Glasses:	<i>1</i>	<i>1</i>
Near Vision without Glasses:	<i>20/20</i>	<i>20/20</i>
Near Vision with Glasses:	<i>1</i>	<i>1</i>
Intraocular Pressure:	<i>11</i>	<i>11</i>
Anterior Segment:	<i>NS</i>	<i>NS</i>
Fundus:	<i>NS</i>	<i>NS</i>

PRESCRIPTION OF GLASSES:

	RIGHT			LEFT		
	Sphere	Cylinder	Axis	Sphere	Cylinder	Axis
Distant	-	-	-	-	-	-
Near	-	-	-	-	-	-

Type of glass:

ADVICE:

Handwritten signature
DR MAYA PATEL
(OPHTHALMOLOGIST)





GYNAECOLOGIST CHECK UP

NAME: Hemlata Samkha

DATE: 09/11/24

AGE: 28 yrs

ML 345.
NO Kids

COMPLAINTS: NONE

MC 2-3 days
Irregular

O/H PARA: G₀P₀A₀L₀

MENSTRUAL H/O: 12/10/24

P/A: Soft

P/S: NAD

P/V: NAD

ADVICE: Pap smear test taken


DR. ARCHANA DWIVEDI
(GYNAECOLOGIST)





Scan to check report authenticity

Histo / Cyto No : C4000809

LABORATORY REPORT



Patient Information		Sample Information		Client / Location Information	
Name :	Mrs. Hemlata . Sankhla	Lab ID :	112407500789	Client Name :	Sterling Hospital Vadodars Health Checkup Main
Sex/Age :	Female /28 Years	Registered on :	08-Nov-2024 08:56	Location :	
Ref. Id :		Collected at :	non SAWPL	Approved on :	08-Nov-2024 14:46
Ref. By :	Dr. RMO . STERLING...	Collected on :	08-Nov-2024 13:00	Printed on :	08-Nov-2024 16:03
		Sample Type :	PAP Material	Processed at :	17 - Sterling Hospital, Bheyli (Vadodara)
Branch :	75 - Sterling Hospital, Race course (Vadodara)				

CYTOPATHOLOGY

* **PAP Smear No. :**

P - 588/24

* **Obstetric History :**

GO PO AO LO

* **Menstrual History :**

LMP : 12/10/24

* **Per-Speculum Examination :**

NAD

* **Per-Vaginal Examination :**

NAD

* **Specimen Adequacy :**

Satisfactory for evaluation : Endocervical and Transformation Zone Absent.

* :

NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY.

* :

Mild Acute Inflammation.

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



Dr. Swati Gupta

MD (Path) DipRCPath

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tests marked with # are referred tests

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Passport No :

LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mrs. Hemlata . Sankhla	Lab Id	: 112407500789	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 28 Y 17-Sep-1996	Registration on	: 09-Nov-2024 08:56	Location	: Main BNo.7
Ref. Id	: 300592 / 2817535	Collected at	: SAWPL	Approved on	: 09-Nov-2024 13:05 Status: Interim
Ref. By	: Dr. RMO . STERLING...	Collected on	: 09-Nov-2024 08:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Complete Blood Count

Test	Result	Unit	Biological Ref. Interval
Hemoglobin	13.9	g/dL	12.0 - 16.0
RBC Count	5.03	million/cmm	3.8 - 4.9
Hematocrit	41.9	%	36 - 48
MCV	83.3	fL	83 - 101
MCH	27.6	pg	26.4 - 33.2
MCHC	33.2	g/dL	31.8 - 35.9
RDW CV	13.30	%	11.8 - 14
Total WBC and Differential Count			
WBC count	7710	/cmm	4000 - 10000
Differential Count			
Neutrophils	60	%	40 - 80
Lymphocytes	31	%	20 - 40
Eosinophils	01	%	1 - 6
Monocytes	08	%	2 - 10
Basophils	0	%	0 - 2
Absolute Count			
Neutrophils	4626	/cmm	2000 - 6700
Lymphocytes	2390	/cmm	1000 - 3000
Eosinophils	77	/cmm	20 - 500
Monocytes	617	/cmm	200 - 1000
Basophils	0	/cmm	0 - 100
Platelet Count			
Platelet Count	294000	/cmm	150000 - 410000
MPV	9.80	fL	7.5 - 10.3
Platelets Morphology	Platelets are adequate on Smear		



Dr. C. Shrinivasan.,
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Consultant Pathologist

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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mrs. Hemlata . Sankhla	Lab Id	: 112407500789	Pt. Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 28 Y 17-Sep-1996	Registration on	: 09-Nov-2024 08:56	Location	: Main
Ref. Id	: 300502 / 2617536	Collected at	: SAWPL	Approved on	: 09-Nov-2024 13:05 Status : Interim
Ref. By	: Dr. RMO , STERLING...	Collected on	: 09-Nov-2024 08:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: EDTA blood	Process At	: 75 - Sterling Hospital, Race course (Vadodar

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Complete Blood Count

Test	Result	Unit	Biological Ref. Interval
Erythrocytes Sedimentation Rate			
ESR	H 30	mm/1hr	0 - 21

Differential Count
Absolute Count

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LABORATORY TEST REPORT


Patient Information	Sample Information	Location Information
Name : Mrs. Homlata . Sankhla	Lab Id : 112407500709	Pl. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Female / 28 Y 17-Sep-1996	Registration on : 09-Nov-2024 08:56	Location : BNo.1
Ref. Id : 300592 , 2917535	Collected at : SAWPL	Approved on : 09-Nov-2024 12:26 Status : Interim
Ref. By : Dr. RMO . STERLING...	Collected on : 09-Nov-2024 09:24	Printed On : 09-Nov-2024 13:53
	Sample Type : EDTA blood	Process At : 75 - Sterling Hospital, Race course (Vadodara)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Blood Group

Test	Result	Unit	Biological Ref. Interval
ABO Type <small>Type Agglutination</small>	"B"		
Rh (D) Type	Positive		


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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	Mrs. Hemlata , Sankhla	Lab Id	: 112407500789	PL Type	: Sterling Hospital Vadodara Health Checkup
Sex/Age	: Female / 28 Y 17-Sep-1996	Registration on	: 09-Nov-2024 09:58	Location	: Main BNo.7
Ref. Id	: 300582 / 2817535	Collected at	: SAWPL	Approved on	: 09-Nov-2024 11:06 Status : Interim
Ref. By	: Dr. RMD , STERLING	Collected on	: 09-Nov-2024 09:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: Serum, Urine	Process At	: 75 - Sterling Hospital, Race course (Vadodar

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE

Test	Result	Unit	Biological Ref. Interval
Fasting Blood Glucose <small>(FPG) (113)</small>	81.0	mg/dL	74 - 100
Fasting Urine Glucose <small>(FUG) (100)</small>	Absent		Absent
Fasting Urine Ketone <small>(FK) (100)</small>	Absent		Absent

	Fasting Blood Glucose*	Postprandial Blood Glucose #	Random Blood Glucose
Normal	< 100 mg/dL	< 140 mg/dL	< 140 mg/dL
Prediabetic	100 - 125 mg/dL	140 - 199 mg/dL	140 - 199 mg/dL
Diabetic	≥ 126 mg/dL	≥ 200 mg/dL	≥ 200 mg/dL

* Fasting is defined as no caloric intake for more than 8 hours

The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.

Criteria for Diagnosis of Diabetes:

1. Fasting blood glucose (FBG) ≥ 126 mg/dL
2. Two-hour blood glucose (2-h OGTT) = 200 mg/dL
3. HbA1c values (A1c) ≥ 6.5%
4. Random plasma glucose ≥ 200 mg/dL

(With symptoms of hyperglycemia or hyperglycemic crises)

In the absence of unequivocal hyperglycemia, diagnosis of DM using A1C, FPG or 2-h OGTT requires two abnormal test results from the same sample or in two separate samples.

References:

1. American diabetes association: Standards of medical care in diabetes 2024
2. National Library of Medicine – National institute of Health (USA) – Diabetes Mellitus
3. World Health Organization – Factsheet on Diabetes – Prevention and treatment


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LABORATORY TEST REPORT


Patient Information	Sample Information	Location Information
Name : Mrs. Hemlata , Sankhla	Lab Id : 112407500789	Pt. Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Female / 28 Y 17-Sep-1996	Registration on : 09-Nov-2024 08:56	Location : Main B/No./
Ref. Id : 300582 / 2817535	Collected at : SAWPL	Approved on : 08-Nov-2024 11:41 Status : Interim
Ref. By : Dr. RMO , STERLING...	Collected on : 09-Nov-2024 09:24	Printed On : 09-Nov-2024 13:53
	Sample Type : EDTA blood	Process At : 75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
HbA1c (Glycosylated Hemoglobin) by HPLC

Test	Result	Unit	Biological Ref. Interval
HbA1c	4.30	%	For Screening: Diabetes: $\geq 6.5\%$; Pre-Diabetes: 5.7 - 6.4%; Non-Diabetes: $< 5.7\%$
Mean Blood Glucose	76.71	mg/dL	For Diabetic Patient: Poor Control : $> 7.0\%$; Good Control : 6.0-7.0%

Description:

- Total haemoglobin A1c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c (HbF) or differences in their glycation from that of HbA (HbS).

Reference: American diabetes association. Standards of medical care in diabetes 2024


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Patient report

Sterling HOSPITALS

H3ro-Rad
D-10

S/N: #DJ8G550303

Sample ID:

Injection date:

Injection #: 7

Rack #: ---

DATE: 09/11/2024

TIME: 11:16 AM

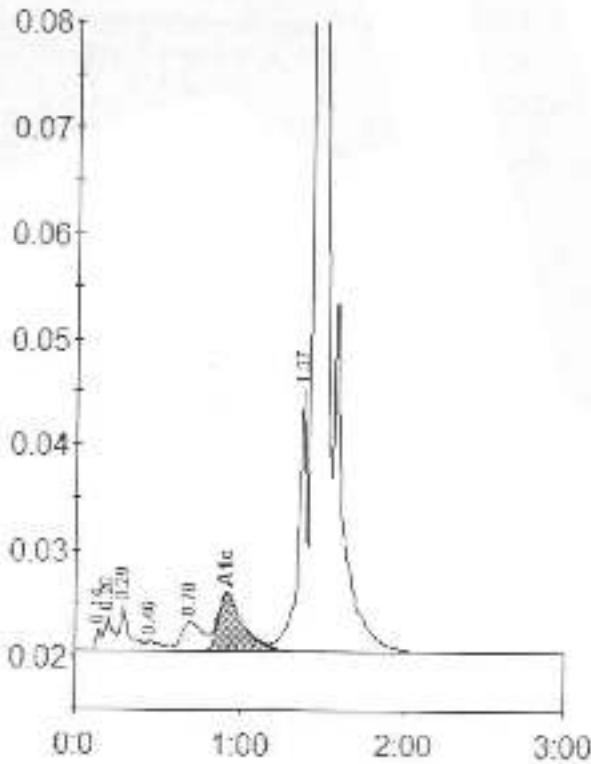
Software version: 4.30-2

112407500789

09/11/2024 11:16 AM

Method: HbA1c

Rack position: 7



Peak table - ID: 112407500789

Peak	R.time	Height	Area	Area %
Unknown	0.14	1970	4611	0.3
A1a	0.20	3267	11573	0.6
A1b	0.29	4364	17009	1.0
F	0.46	916	6439	0.4
LA1c/CHb-1	0.70	2807	25046	1.4
A1c	0.92	5460	58630	4.3
P3	1.37	24960	95682	5.4
A0	1.44	530332	1565747	87.7
Total Area:			1784737	

Concentration:	%
A1c	4.3





Passport No:

LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name :	Mrs. Hemlata , Sankhla	Lab Id :	112407500789	Pt. Type :	Sterling Hospital Vadodara Health Checkup Main
Sex/Age :	Female / 28 Y 17-Sep-1996	Registration on :	09-Nov-2024 08:56	Location :	BNo.7
Ref. Id :	300592 , 2017635	Collected at :	SAWPL	Approved on :	09-Nov-2024 11:19 Status: Interim
Ref. By :	Dr. RMO , STERLING,...	Collected on :	09-Nov-2024 09:24	Printed On :	09-Nov-2024 13:53
		Sample Type :	Serum	Process At :	75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Lipid Profile

Test	Result	Unit	Biological Ref. Interval
Cholesterol <small>Cholesterol oxidase - Phosphotungstic acid</small>	H 210.0	mg/dL	Desirable : <200 Borderline High : 200-239 High : >240
Triglyceride <small>Erythrinic / Glycerol (GPO/POD)</small>	129.0	mg/dL	Normal : <150 Borderline : 150-199 High : 200-499 Very High : >500
HDL Cholesterol <small>PTA/Tyros</small>	53.0	mg/dL	Low: <40.0 High: >60.0
Direct LDL <small>Direct assay method</small>	H 125.00	mg/dL	Optimal: <100 Near to above Optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: =190
VLDL <small>Calculated</small>	25.80	mg/dL	15 - 35
CHOL/HDL Ratio <small>Calculated</small>	4.0		Up to 5.0
dLDL/HDL Ratio <small>Calculated</small>	2.4		Up to 3.5


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Patient Information	Sample Information	Location Information
Name : Mrs. Hemlata , Sankhla	Lab Id : 112407500789	PL Type : Sterling Hospital Vadodara Health Checkup
Sex/Age : Female / 28 Y 17-Sep-1996	Registration on : 09-Nov-2024 08:58	Location : Main
Ref. Id : 300592 / 2817535	Collected at : SAWPL	Location : BNo.7
Ref. By : Dr. RMO . STERLING...	Collected on : 08-Nov-2024 09:24	Approved on : 08-Nov-2024 11:19 Status : Interim
	Sample Type : Serum	Printed On : 09-Nov-2024 13:53
		Process At : 75 - Sterling Hospital, Race course (Vadodar

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE

Test	Result	Unit	Biological Ref. Interval
Uric Acid <small>Uric acid</small>	4.30	mg/dL	2.5 - 6.2
Blood Urea Nitrogen <small>Calculated</small>	8.88	mg/dL	7.0 - 17.0
Urea <small>Urea: Creatinine</small>	19.0	mg/dL	15.0 - 36.4
Creatinine, serum <small>Creatinine: Amphotericin</small>	0.60	mg/dL	0.52 - 1.04
BUN Creatinine Ratio <small>Calculated</small>	14.80		
Urea Creatinine Ratio <small>Calculated</small>	31.67		



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Consultant Pathologist

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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mrs. Hemlata . Sankhla	Lab Id	: 112407500789	PL Type	: Sterling Hospital Vadodra Health Checkup
Sex/Age	: Female / 28 Y 17-Sep-1996	Registration on	: 09-Nov-2024 08:56	Location	: Main
Ref. Id	: 300582 / 2817535	Collected at	: SAWPL	Approved on	: 09-Nov-2024 11:19 Status: Interim
Ref. By	: Dr. RMD . STERLING...	Collected on	: 09-Nov-2024 09:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: Serum	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Liver Function Test

Test	Result	Unit	Biological Ref. Interval
ALT (SGPT) <small>UV with PSP, JCC</small>	21.0	U/L	0 - 35
AST (SGOT) <small>UV with PSP</small>	25.0	U/L	14 - 35
GGT (Gamma Glutamyl Transferase) <small>UV-Glutamyl-p-nitroanilide</small>	14.0	U/L	12 - 43
Alkaline Phosphatase <small>BNPP, AMP Buffer, JCC</small>	64.0	U/L	38 - 126
Total Bilirubin <small>Ascorbic acid chromogenic</small>	0.70	mg/dL	0.2 - 1.3
Conjugated Bilirubin <small>Catalytic Method Billing</small>	0.10	mg/dL	0.0 - 0.3
Unconjugated Bilirubin <small>Catalytic Method Billing</small>	0.40	mg/dL	0.0 - 1.1
Delta Bilirubin <small>Calculated</small>	0.20	mg/dL	0.0 - 0.2
Total Protein <small>Copper sulfate bi colorimetric</small>	H 8.30	g/dL	6.3 - 8.2
Albumin <small>Bromocresol Green Method</small>	4.70	g/dL	3.5 - 5.0
Globulin <small>Calculated</small>	H 3.60	g/dL	2.3 - 3.5
A/G Ratio <small>Calculated</small>	1.31		1.3 - 1.7


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Passport No :

LABORATORY TEST REPORT


Patient Information	Sample Information	Location Information
Name : Mrs. Hemlata . Sankhla	Lab Id : 112407500789	Pl. Type : Sterling Hospital Vadocara Health Checkup
Sex/Age : Female / 28 Y 17-Sep-1996	Registration on : 09-Nov-2024 08:56	Location : BMO.7
Ref. Id : 300892 / 2817535	Collected at : SAWPL	Approved on : 09-Nov-2024 11:19 Status : Interim
Ref. By : Dr. RMO . STERLING...	Collected on : 09-Nov-2024 09:24	Printed On : 09-Nov-2024 13:53
	Sample Type : Serum	Process At : 75 - Sterling Hospital, Race course (Vadocara)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
Thyroid Function Tests

Test	Result	Unit	Biological Ref. Interval
T3, total (Triiodothyronine) CLM	1.50	ng/mL	0.58 - 1.59
T4, total (Thyroxine) CLM	7.68	ug/dl	4.87 - 11.72
TSH (3rd Gen.) Chemiluminescence	2.7750	uIU/mL	Non-Pregnant Woman: 0.4001-4.049; Pregnant Woman: 1st Trimester: 0.1298-3.120; 2nd Trimester: 0.2749-2.652; 3rd Trimester : 0.3127-2.947



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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mrs. Hemlata , Sankhla	Lab Id	: 112407500789	Pl. Type	: Sterling Hospital Vadodara Health Checkup Main BNo./
Sex/Age	: Female / 28 Y 17-Sep-1996	Registration on	: 09-Nov-2024 08:56	Location	: BNo./
Ref. Id	: 300582 / 2817535	Collected at	: SAWPL	Approved on	: 09-Nov-2024 11:19 Status : Interim
Ref. By	: Dr. RMO - STERLING...	Collected on	: 09-Nov-2024 09:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: Serum	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE

Levels of TSH in pregnancy (µIU/ml): First Trimester 0.1 - 2.5; Second Trimester 0.2 - 3.0; Third Trimester 0.3 - 5.0.

NOTE: TSH concentrations in apparently normal euthyroid subjects are known to be highly skewed, with a strong tailed distribution towards higher TSH values. This is well documented in the pediatric population including the infant age group.

TSH	T3/FT3	T4/FT4	Suggested Interpretation of Thyroid function tests pattern
Within range	Decreased	Within range	Isolated low T3 often seen in elderly & associated Non-Thyroid illness. In elderly the drop in T3 level can be up to 25%.
Raised	Within Range	Within Range	Isolated High TSH Especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability; subclinical Autoimmune Hypothyroidism; Intermediate T4 therapy for hypothyroidism; Recovery phase after Non-Thyroidal illness.
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis, Post thyroidectomy, post radioiodine; hypothyroid phase of transient thyroiditis.
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (ant: TPO antibodies); Intermediate T4 therapy or T4 overdose; Drug Interference-Amlodiarans, Heparin, Beta blocker, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH - Especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness; Subclinical Hyperthyroidism; Thyroxine ingestion.
Decreased	Decreased	Decreased	Central hypothyroidism; Non-Thyroidal illness; Recent treatment for Hypothyroidism (TSH remains suppressed)
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease), Multinodular goitre toxic nodules, Transient thyroiditis: postpartum, Silent (lymphocytic), Post viral (granulomatous, subacute, DeQuervain's) Gestational thyrotoxicosis hyperemesis gravidarum.
Decreased or within range	Raised	Within range	T3 toxicosis; Non-Thyroidal illness.

Reference: *Waller's Interpretation of Diagnostic* by Mary Williams, 10th edition, 2015.

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LABORATORY TEST REPORT


Patient Information		Sample Information		Location Information	
Name	: Mrs. Hemlata . Sankhla	Lab Id	: 112407500789	PL Type	: Sterling Hospital Vadodra Health Checkup
Sex/Age	: Female / 28 Y / 17-Sep-1996	Registration on	: 09-Nov-2024 08:56	Location	: Main Bldg
Ref. Id	: 300592 / 2817535	Collected at	: SAWPL	Approved on	: 09-Nov-2024 10:56 Status : Insert
Ref. By	: Dr. RMO, STERLING...	Collected on	: 09-Nov-2024 09:24	Printed On	: 09-Nov-2024 13:53
		Sample Type	: Urine	Process At	: 75 - Sterling Hospital, Race course (Vadodra)

MEDIWHEEL FULL BODY ANNUAL PLUS CHECK/ ADVANCE
URINE ROUTINE EXAMINATION

Test	Result	Unit	Biological Ref. Interval
Physical & Chemical (Dip strip) examination			
Colour	Pale Yellow		Pale Yellow
pH <small>Doupe Indicator</small>	6.0		5.5 - 7.0
Specific Gravity <small>Polyelectrolyte based reaction</small>	1.020		1.015 - 1.025
Protein <small>Protein error of indicators</small>	Absent		Absent
Glucose <small>GOD-PDO</small>	Absent		Absent
Ketone <small>Alloxyasole</small>	Absent		Absent
Blood <small>Peroxidase like reaction</small>	Absent		Absent
Bilirubin <small>Diazot reaction</small>	Absent		Absent
Leucocytes <small>Esterase reaction</small>	Absent		Absent
Nitrite <small>p-aminic acid reductant compound</small>	Absent		Absent
Microscopic Examination			
Erythrocytes (RBCs)	Absent	/hpf	0 - 2
Pus Cells	2-3	/hpf	0 - 5
Epithelial Cells	Plenty	/hpf	
Crystals	Absent		Absent
Casts	Absent		Absent
Bacteria	Absent		Absent
Amorphous Material	Absent		Absent
Yeast	Absent		Absent

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


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Report Date: 09 Nov 2024 - 10:54 AM

Patient id	: RCR-300592	Patient Name	: SANKHLA HEMLATA ,
Age	: 28Y 1M 23D	Sex	: Female
Ref. Doctor	: DR. RMO , STERLING	Study Date	: 09 Nov 2024 - 10:10 AM

X-RAY CHEST PA VIEW

Both lung fields show prominent broncho-vascular markings.
 Cardiac size appears within normal limit.
 Trachea and mediastinal soft tissue shadow appear unremarkable.
 Lateral C.P. angles and both domes of diaphragm appear normal.
 Bony thorax under vision appears normal.

CONCLUSION:

No significant chest abnormality detected.



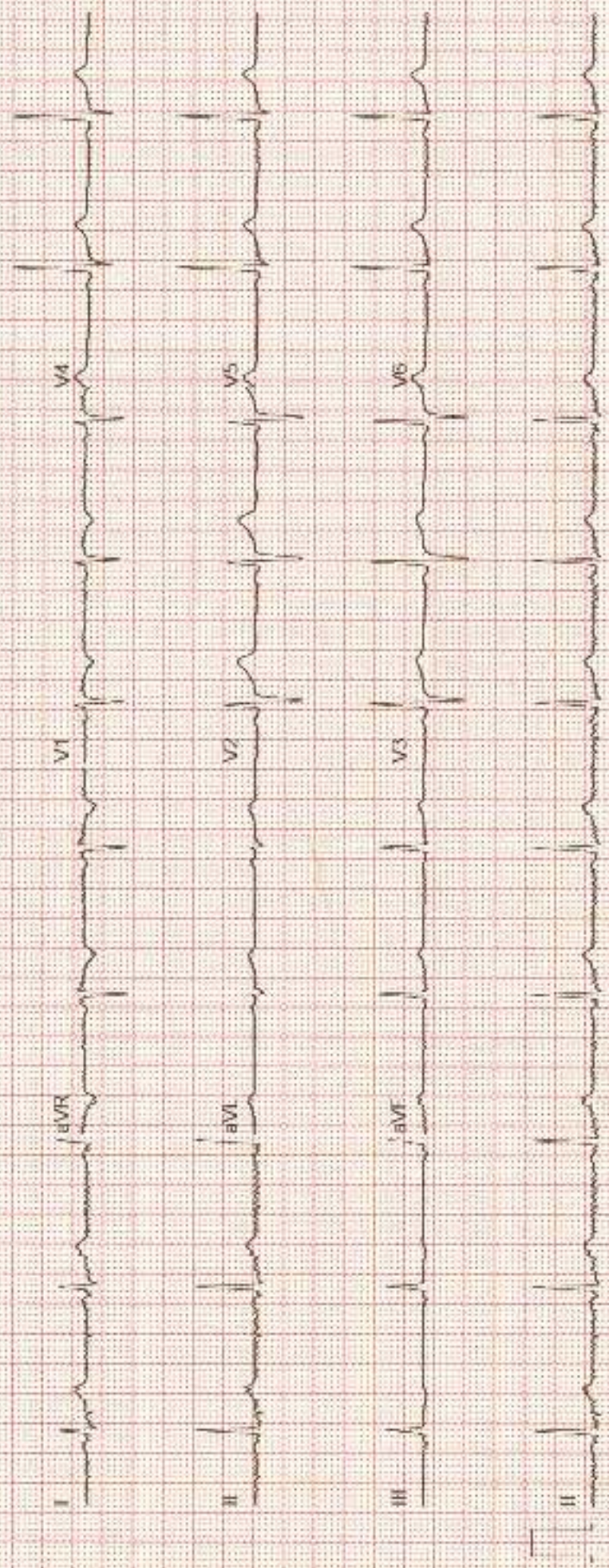
Dr. Shilpi Gupta MD
Sr. Consultant Radiologist



Male

28 Years

QRS 78 ms
 QT / QTcBaz 402 / 404 ms
 PR 124 ms
 P 100 ms
 RR / PP 973 / 983 ms
 P / QRS / T 18 / 69 / 25 degrees





2D ECHOCARDIOGRAPHY REPORT



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HOSPITALS

Race Course Road, Vadodara

Name: Mrs. HEMLATA SANKHLA
Age: 28 Years
Sex: F
Date: 09-Nov-2024

Ref By: HCP
Study: 2D Echo

M-MODE:

IVS	10mm	LVDD	46mm
PW	10mm	LVDS	26mm
LA	34mm	LV EF	60 %

DOPPLER STUDY:

MITRAL	E 0.98	A 0.72
AORTIC	1.36	
TRICUSPID	N	
PULMONARY	N	

CONCLUSION :

- NORMAL SIZED CHAMBERS
- NORMAL LV SYSTOLIC FUNCTION LVEF 60 %
- NO RWMA AT REST
- NO DIASTOLIC DYSFUNCTION
- NORMAL RV SIZE AND FUNCTION
- ALL VALVES ARE NORMAL
- NO CLOT OR VEGETATION
- NO PERICARDIAL EFFUSION
- NORMAL IVC


Dr. KAUSHIK TRIVEDI MD
Consultant interventional Cardiologist

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SonoDoc 91-20-25443913





Patient Id	: RCR-300592	Patient Name	: SANKHLA HEMLATA .
Age	: 28Y 1M 23D	Sex	: Female
Ref. Doctor	: DR.RMO.STERLING	Study Date	: 09 Nov 2024 - 09:06 AM

SONOGRAPHY OF WHOLE ABDOMEN: -

LIVER: Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicals appear normal. Portal vein is normal in caliber at porta & shows hepatopetal blood flow.

GALL BLADDER: Gall bladder is distended and shows multiple (at least 3-4) calculi in the gall bladder lumen largest measuring up to 7-8 mm. No evidence of changes of cholecystitis is seen. CBD appears normal (3.8 mm).

PANCREAS: Pancreas is partially visualized and visualized portion is normal in size & shows normal parenchymal echoes.

SPLEEN: Spleen is normal in size & shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

BOTH KIDNEYS: Both kidneys are normal in size, shape, position and contour. Cortical thickness & echo appear normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side.

Right kidney measures 9.9 x 4.0 cm

Left kidney measures 9.9 x 4.5 cm

No evidence of suprarenal mass lesion is seen on either side.

URINARY BLADDER: Bladder is normally distended and appears unremarkable.

UTERUS: Uterus is anteverted & appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 7.0 mm. No evidence of intrauterine pregnancy or uterine mass lesion is seen.

OVARIES: Both ovaries appear normal in size, shape and position. No evidence of solid or cystic ovarian mass lesion is seen on either side.

No evidence of ascites, lymphadenopathy is seen.

Mild gaseous distention of bowel loops is seen.

CONCLUSION:

- Cholelithiasis. No evidence of changes of cholecystitis
- No other significant abdominal abnormality detected.

Dr. Shilpi Gupta MD
Sr. Consultant Radiologist

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