देना बैंक बड़ौदा Bank of Baroda

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. PRAJAPATI FALGUNI BABUBHAI
EC NO.	168839
DESIGNATION	CUSTOMER SERVICE ASSOCIATE
PLACE OF WORK	GHADKAN
BIRTHDATE	07-07-1990
PROPOSED DATE OF HEALTH CHECKUP	23-11-2024
BOOKING REFERENCE NO.	24D168839100118596E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **24-10-2024** till **31-03-2025** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM & Marketing Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))


पहचान पत्र संख्या/
I Card No.
10790
देना बैंक
DENA BANK
(A Government of India Enterprise)
नाम / Name : FALGUNI B. PRAJAPATI
DOB / जन्म तिथि : 07/07/1990
पिता का नाम /
Father's Name : BABUBHAI S. GURJAR
P. A. N. / PAN : 0911212
ब्लड ग्रुप / BG :
जारी करने की तिथि / Date Of Issue : 22/12/2017
कर्मचारी के हस्ताक्षर
Signature of User
जारीकर्ता प्राधिकारी के हस्ताक्षर
Signature of Issuing Authority

Falguni prajapati

23.11.2024 11:36:44 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

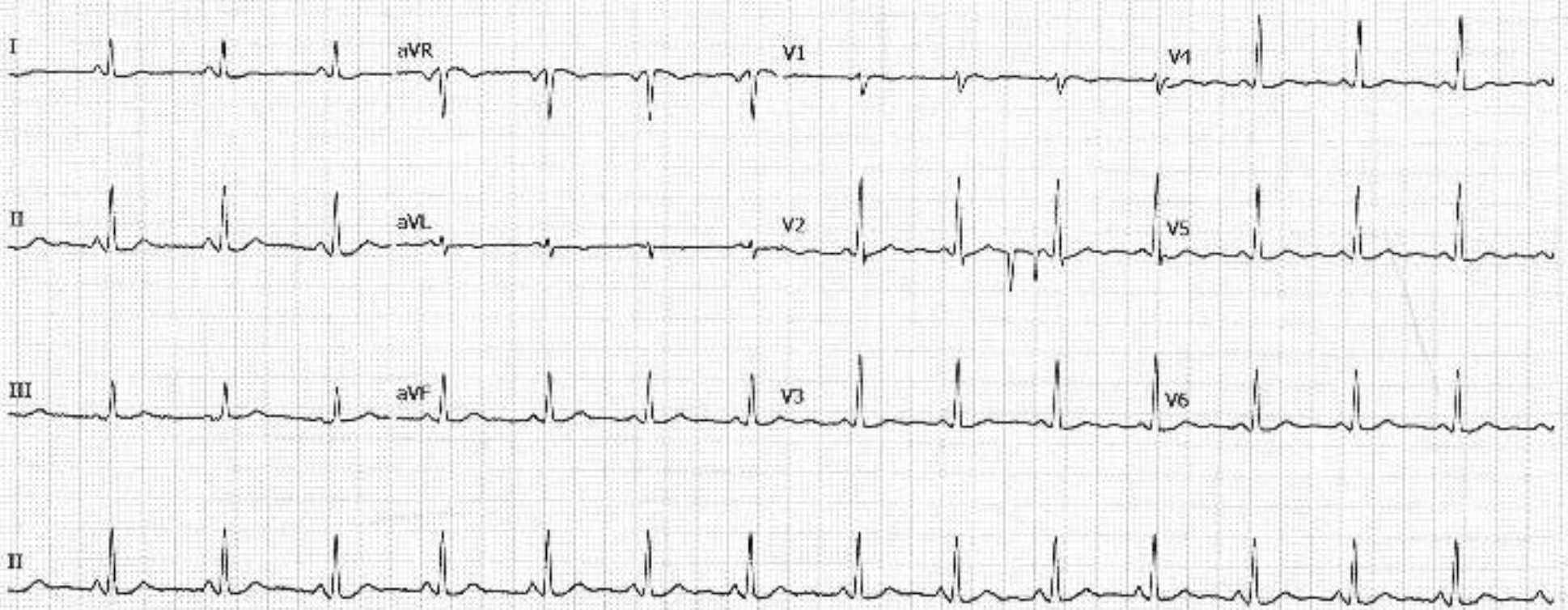
Room:

89 bpm
/ – mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS :	68 ms
QT / QTcBaz :	334 / 406 ms
PR :	102 ms
P :	98 ms
RR / PP :	670 / 674 ms
P / QRS / T :	41 / 62 / 74 degrees

Sinus rhythm with short PR
Otherwise normal ECG



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV AD5 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

aashka HOSPITAL

ADDRESSOGRAPH

COLOUR DOPPLER ECHOCARDIOGRAPH REPORT

COLOUR DOPPLER ECHOCARDIOGRAPH REPORT

Patient's Name : Falguniben Age : _____ Sex : _____

Ref. by Doctor : _____ IP/OP No. : _____ Date: _____

MITRAL VALVE	:		
AORTIC VALVE	:		
TRICUSPID VALVE	:		
PULMONARY VALVE	:		
AORTA	:	29	
LEFT ATRIUM	:	29	
LV Dd/ Ds	:	37/22	EF-60%
IVS / LVPW / D	:	10/9	
IVS	:	Intact	
IAS	:		
RA	:		
RV	:	N	
PA	:		
PERICARDIUM	:	N	
VEL	:	PEAK	MEAN
M/S	:	Gradient mm Hg	Gradient mm Hg
MITRAL	:	0.9/07	
AORTIC	:	1.0	
PULMONARY	:	07	
COLOUR DOPPLER	:	NO MR/AR/TR	
RSVP	:		
CONCLUSION	:	N size chamber	

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421. Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

PATIENT NAME:FALGUNI B PRAJAPATI
GENDER/AGE:Female / 34 Years **DATE:23/11/24**
DOCTOR:
OPDNO:OSP35456

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
Left cervical rib is seen.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

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aashka HOSPITAL

PATIENT NAME:FALGUNI B PRAJAPATI
GENDER/AGE:Female / 34 Years **DATE:23/11/24**
DOCTOR:
OPDNO:OSP35456

SONOGRAPHY OF ABDOMEN AND PELVIS

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 radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and show tiny GB polyp of about 4.2 mm. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

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

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.2 x 4.3 cms in size.
Left kidney measures about 9.9 x 4.4 cms in size

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

Aorta, IVC and para aortic region appears normal.
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 320 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 4.7 mm. No evidence of uterine mass lesion is seen.

Bilateral adenxa appears normal.

COMMENT: Tiny GB polyp.
Normal sonographic appearance of liver, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

LABORATORY REPORT

Name	: **FALGUNI B PRAJAPATI**	Sex/Age	: **Female/ 34 Years**	Case ID	: **41102200485**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	:	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	:	Acc. Remarks	: Normal	Ref Id2	: O24256899

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
Haemoglobin	**15.4**	G%	12.0 - 15.0
RBC (Electrical Impedance)	**5.27**	millions/cumm	3.80 - 4.80
PCV(Calc)	**46.69**	%	36.00 - 46.00
Lipid Profile			
Cholesterol	**238.77**	mg/dL	110 - 200
Triglyceride	**172.04**	mg/dL	<150
Chol/HDL	**5.00**		0 - 4.1
LDL Cholesterol	**156.56**	mg/dL	0.00 - 100.00
Liver Function Test			
Proteins (Total)	**9.40**	gm/dL	6.40 - 8.30
Albumin	**5.84**	gm/dL	3.5 - 5.2

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Neuberg Diagnostics Private Limited
Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 079-40408181 / 61618181 contact@neubergsupratech.com
Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi, Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099 www.neubergsupratech.com

LABORATORY REPORT

Name	: FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200485
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 09:51	Acc. Remarks	: Normal	Ref Id2	: O24256899

HAEMOGRAM REPORT

TEST		RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
HB AND INDICES					
•Haemoglobin	H	15.4	G%	12.0 - 15.0	
RBC (Electrical Impedance)	H	5.27	millions/cumm	3.80 - 4.80	
PCV(Calc)	H	46.69	%	36.00 - 46.00	
MCV (RBC histogram)		88.6	fL	83 - 101	
MCH (Calc)		29.2	pg	27.00 - 32.00	
MCHC (Calc)		33.0	gm/dL	31.50 - 34.50	
RDW (RBC histogram)		11.90	%	11.00 - 16.00	
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)					
Total WBC Count		8270	/µL	4000.00 - 10000.00	
		[%]		[Abs]	
Neutrophil		57.0	% EXPECTED VALUES 40.00 - 70.00	4714	/µL EXPECTED VALUES 2000.00 - 7000.00
Lymphocyte		36.0	% 20.00 - 40.00	2977	/µL 1000.00 - 3000.00
Eosinophil		2.0	% 1.00 - 6.00	165	/µL 20.00 - 500.00
Monocytes		5.0	% 2.00 - 10.00	414	/µL 200.00 - 1000.00
•Basophil		0.0	% 0.00 - 2.00	0	/µL 0.00 - 100.00
PLATELET COUNT (Optical)					
Platelet Count		359000	/µL	150000.00 - 410000.00	
Neut/Lympho Ratio (NLR)		1.58		0.78 - 3.53	
SMEAR STUDY					
RBC Morphology		Normocytic Normochromic RBCs.			
WBC Morphology		Total WBC count within normal limits.			
Platelet		Platelets are adequate in number.			
Parasite		Malarial Parasite not seen on smear.			

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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www.neuberg-supratech.com

LABORATORY REPORT

Name	: FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200465
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35458
Report Date and Time	: 23-Nov-2024 10:36	Acc. Remarks	: Normal	Ref Id2	: 024256899

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR Westergren Method	03	mm after 1hr	3 - 20	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

Name	: FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200485
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 09:32	Acc. Remarks	: Normal	Ref Id2	: O24256899

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
HAEMATOLOGY INVESTIGATIONS				
BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)				
ABO Type	B			
Rh Type	POSITIVE			

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

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LABORATORY REPORT

Name	: FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200485
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Plasma Fluoride F,Plasma Fluoride PP,Serum	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 10:36	Acc. Remarks	: Normal	Ref Id2	: O24256899

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F Photometric/Hexokinase	94.9	mg/dL	70.0 - 100	
Plasma Glucose - PP Photometric/Hexokinase	113.9	mg/dL	70.0 - 140.0	
BUN (Blood Urea Nitrogen) GLDH	8.0	mg/dL	7.00 - 16.70	
Uric Acid Uricase	5.34	mg/dL	2.6 - 6.2	
Creatinine	0.55	mg/dL	0.50 - 1.50	

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LABORATORY REPORT

Name	FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200485
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 12:00	Acc. Remarks	: Normal	Ref Id2	: O24256899

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C Immunoturbidimetric	5.60		% of total Hb <5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) Calculated	114.02	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy,comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-VeryLow, L-Low, H-High,HH-VeryHigh ,A-Abnormal)

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M.D. (Pathologist)

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LABORATORY REPORT

Name	: FALGUNI B PRAJAPATI	Sex/Age	: Female/ 34 Years	Case ID	: 41102200485
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Serum	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 10:36	Acc. Remarks	: Normal	Ref Id2	: O24256899

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS					
Lipid Profile					
Cholesterol CHOD-POD	H	236.77	mg/dL	110 - 200	
HDL Cholesterol *Accelerator Selective Detergent*		47.8	mg/dL	40 - 60	
Triglyceride *Glycerol Phosphate Oxidase*	H	172.04	mg/dL	<150	
VLDL *Calculated*		34.41	mg/dL	10 - 40	
Chol/HDL *Calculated*	H	5.00		0 - 4.1	
LDL Cholesterol *Calculated*	H	156.56	mg/dL	0.00 - 100.00	

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Borderline High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
  Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note:(LL-VeryLow L-Low H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT

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Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 5090009
Bill. Loc.	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 23-Nov-2024 09:00	Sample Type	: Serum	Mobile No	:
Sample Date and Time	: 23-Nov-2024 09:00	Sample Coll. By	:	Ref Id1	: OSP35456
Report Date and Time	: 23-Nov-2024 10:52	Acc. Remarks	: Normal	Ref Id2	: O24256899

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS					
Liver Function Test					
S.G.P.T. *NADH (Without P-5-P)*		30.42	U/L	0 - 55	
S.G.O.T. *NADH (Without P-5-P)*		22.82	U/L	5.0 - 34.0	
Alkaline Phosphatase *Para-Nitrophenyl Phosphate*		145.00	U/L	40.00 - 150.00	
Gamma Glutamyl Transferase *L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate*		37.33	U/L	0 - 38	
Proteins (Total) *Colorimetric, Biuret*	H	9.40	gm/dL	6.40 - 8.30	
Albumin *Colorimetric Bromo Cresol Green*	H	5.84	gm/dL	3.5 - 5.2	
Globulin *Calculated*		3.56	gm/dL	2 - 4.1	
A/G Ratio *Calculated*		1.64		1.0 - 2.1	
Bilirubin Total *Photometry*		0.67	mg/dL	0.3 - 1.2	
Bilirubin Conjugated *Diazotization reaction*		0.21	mg/dL	0 - 0.50	
Bilirubin Unconjugated *Calculated*		0.46	mg/dL	0 - 0.8	

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LABORATORY REPORT

Name : FALGUNI B PRAJAPATI		Sex/Age : Female/ 34 Years	Case ID : 41102200485
Ref.By : HOSPITAL		Dis. At :	Pt. ID : 5090009
Bill. Loc. : Aashka hospital			Pt. Loc :
Reg Date and Time : 23-Nov-2024 09:00	Sample Type : Serum		Mobile No :
Sample Date and Time : 23-Nov-2024 09:00	Sample Coll. By :		Ref Id1 : OSP35456
Report Date and Time : 23-Nov-2024 10:07	Acc. Remarks : Normal		Ref Id2 : O24256899

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3) CMIA	131.86	ng/dL	70 - 204	
Thyroxine (T4) CMIA	9.94	ng/dL	4.87 - 11.72	
TSH CMIA	1.41	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipent hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a supressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone.
Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy	**Reference range (microIU/ml)**
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

Printed On : 23-Nov-2024 13:33

Neuberg Diagnostics Private Limited
Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 079-40408181 / 61618181 contact@neubergsupratech.com
Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi, Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN201/PTC114099
www.neubergsupratech.com

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421, Gujarat, India
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Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

DR.KHUSHBOO PATEL
MS (OBS & GYN)
REG. NO. G-31287

Date: 23/11/24 Time: 11:25 AM

UHID:

Patient Name: Falguni Prajapati Age: 31 yr. Mobile No:

Complaint and duration:
Health checkup Unmarried

History: c/o Menstrual irregularity
Menstrual history: 3-4 / 38-40 ② Irr ②
Cycles Flow Duration of Bleeding Presence of pain

LMP: 18/11/24

H/O Associated Illnesses:
HTN: DM:
Thyroid disorder: Others:
Family History:
NAD.

Medication history: On Homeopathy sinusitis RA

Obstetric History :
No of deliveries : Unmarried Last child:

Allergy History: NAD.

Nutritional Screening: Well-Nourished / Malnourished / Obese

General Examination:
CVS BP: Oedema of ft

RS Wt: 49 kg Tongue

Breast examination:

P/

A

L/E

P/S- cervix

P/V

Provisional Diagnosis:

Investigation: USG Pelvis (~~Fake~~

Plan of care:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
		T. Ovables MR 30		Oral	1-0-0	x 30 L

Follow-up:

Consultant's Sign: DR. Khan

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aashka HOSPITAL

DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL RATINA)
REG.NO.G-21350

UHID:	**Date:** **Time:**
Patient Name:	**Age /Sex:** 3y/F **Height:** 153 . cm **Weight:** 48.7. Kg

History:

CIU

Right chin rs

Allergy History:

Nutritional Screening: Well-Nourished / Malnourished / Obese

Examination:

D.V. $\frac{6}{6}$
$\frac{6}{6}$
N.V. $\frac{6}{6}$
$\frac{6}{6}$

— Colour vision normal

Diagnosis:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

Other Advice:

Follow-up:

Consultant's Sign: