

Patient Name: Anila Wakkare UHID No: [redacted]
Age: 57 Date: 27/10/20 Gender: F

USG - Grade I Bony
Cholesterol
cysts
A.P - 100/70
WT - 61 kg
HT - 163 cm

RIE - 4 mm
Calcium oxalate
cyst

Ad. Gastroenterology consult

Citrus fruit - 1 cup, 12 hrs
24 - 5 days

urine for c/s.

27/10/20

Next Appointment

On

Apollo Clinic, Zoo Road

Chitraban Enclave, Opp Nexa. RG Baruah Road
Zoo Road Tiniali, Guwahati, Assam - 781003

For doctor's appointment

757 794 4444

For home blood collection

757 884 4444

Website: www.apollocliniczooroad.com | Email: info@apollocliniczooroad.com

Patient Name: Anika Lakkar UHID No: _____
Age: 57y Date: 27-03-23 Gender: Female

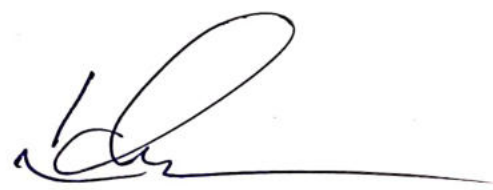
Adh
X Ray PNS

H/O pain in (R) side of face.
nasal blockage (+)

R
① Tab. VASOGRAN 1 tab. day x 5 days
Mucosa soft
pu.

O/R
E (R) / (L)
D (R)

St: BIL ITU
onav: (N)



Next Appointment
On

Name : Mrs. ANITA LAHKAR

Age: 57 Y

UHID:FGUZ.0000007093

Sex: F

FGUZ.0000007093

Address : Darakhar Nagar

OP Number:FGUZOPV9764

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT
 PAN INDIA OP AGREEMENT

Bill No :FGUZ-OCR-9607

Date :

| Sno | SAC Code | Service Type/ServiceName | Department |
|-----|----------|---|------------|
| 1 | | ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324 | |
| 1 | | GLUCOSE - (FASTING) | |
| 2 | | BLOOD GROUP AND RH TYPE | |
| 3 | | GYNAC CONSULTATION • | |
| 4 | | X-RAY CHEST PA ✓ | |
| 5 | | URINE GLUCOSE(FASTING) | |
| 6 | | GLYCOSYLATED HEMOGLOBIN (HBA1C) | |
| 7 | | 2D ECHO ✓ 1.30 | |
| 8 | | Height Weight BP BMI | |
| 9 | | GLUCOSE - (POST PRANDIAL) • | |
| 10 | | URINE GLUCOSE(POST PRANDIAL) | |
| 11 | | ULTRASOUND WHOLE ABDOMEN ✓ | |
| 12 | | LIVER FUNCTION TEST (PACKAGE) | |
| 13 | | URINE ROUTINE EXAMINATION | |
| 14 | | Diet Consultation • | |
| 15 | | Ophthal Consultation • | |
| 16 | | DENTAL Consultation ✗ | |
| 17 | | FITNESS BY GENERAL PHYSICIAN | |
| 18 | | PERIPHERAL SMEAR | |
| 19 | | ECG ✓ | |
| 20 | | PAP SMEAR FOR LBC | |
| 21 | | SONO MAMOGRAPHY | |
| 22 | | THYROID PROFILE - I(T3,T4 AND TSH) | |
| 23 | | ENT Consultation • | |
| 24 | | GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE | |
| 25 | | LIPID PROFILE TEST (PACKAGE) | |
| 26 | | COMPLETE HAEMOGRAM | |
| 27 | | KFT - RENAL PROFILE-SERUM | |

Putting more Care Into Healthcare

- Please bring the bill to collect the reports
- Please check the bill & your balance before leaving the counter. no disputes
- Management is not responsible for the reports not collected within 3 months from the date of investigation.
- Reports delivery time from 5:00 pm to 8:00 pm for same day & 12:00 noon from next day & on Sunday between: 2:00 pm to 5:00 pm

For doctor's appointment
757 794 4444

For home blood collection
757 884 4444



BIMAL



Date: 27/03/23

**Department of Dietetics
DIET FOR LIVER DISEASES**

Name: Anita Lahkar Sex: _____

Referred by Dr. _____

Diet Advised: _____

| TIME | QUANTITY |
|------|----------|
|------|----------|

EARLY MORNING

Red Tea +
Roasted Chana/ Soaked Almond/ 1 Cup
Handful

BREAKFAST

Whole Wheat Roti + 3 Rotis
Mixed Sabjis/Gravies (Mostly Include Papaya/Soyabeans) + 1 Medium Bowl
'OR'
Daliya Khichdi + Vegetables 1 Bowl
'OR'
Rolled Oats + Water and Nuts or Suji Halwa (No Milk) 1 Bowl
'OR'
Poha/ Upma + 1 Bowl
Boiled Egg (Egg White) 2 No.
OR
2 Slices of Bread with jam

MID MORNING

Coconut water 1 Glass
'OR'
Fruits (Any) 1 No

LUNCH

| | |
|---|---------------|
| Rice/ Roti + | 1 Bowl/ 3 Nos |
| Dal (Preferably Boiled)+ | 1 Bowl |
| Sabji + | 1 Medium Bowl |
| Veg/ Non-Veg Curry (Soyabeans/ Fish with less fat eg. Rohu) | 1 Bowl |

EVENING SNACK

| | |
|---|--------|
| Red Tea+ | 1 Cup |
| Puffed Rice Snack or Muri Laddoo/ Dates or Walnut | |
| OR | |
| Dal/ Chicken/ Vegetable Soup | 1 Bowl |

DINNER

| | |
|---|---------------|
| Rice/ Roti | 1 Bowl/ 3 Nos |
| Dal (Boiled) + | 1 Bowl |
| Sabji (Avoid Cruciferous Vegetables eg. Cabbages, Cauliflower, Raddish) | 1 Medium Bowl |

FOR REFERENCE:

HOUSEHOLD MEASUREMENTS

| | | |
|---------------|---|--------|
| 1 Cup | = | 150 ml |
| 1 tsp | = | 5 g |
| 1 Glass | = | 250 ml |
| 1 Bowl | = | 200 g |
| 1 Medium Bowl | = | 150 g |
| 1 Small Bowl | = | 75 g |

DO'S:

- Regularly do some physical activity like walking, cycling, swimming, etc. at least for 30 minutes
- Include lots of seasonal fruits and vegetables in your diet
- Drink plenty of water or fluids (soups) to rehydrate your body
- Avoid fast foods, cold drinks, bakery items, fatty foods (deep fried foods), junk foods (chips)
- Avoid alcohol and tobacco in any form
- Avoid spicy foods, red meat, fatty fishes, fatty milk, butter, ghee, junk foods, mixtures, deep fried items, bakery items, cold drinks, pickles, fried papad, pastries, chips etc

DONT'S:

- Don't skip any meal
- Don't go to bed immediately after having dinner, instead walk slowly for almost 15-20 minutes
- Don't take over stress, focus on the betterment of health.


PRIYA SAIKIA
 Consultant Dietician
 MSc Dietetics & Food Service Management
 Apollo Clinic Zoo Road

Patient Name : Mrs. ANITA LAHKAR
UHID/MR No. : FGUZ.0000007093
Visit Date : 27-03-2023 09:33
Sample Collected on : 27-03-2023 09:42
Ref Doctor : SELF
Emp/Auth/TPA ID : 496324036555
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
OP Visit No : FGUZOPV9764
Reported on : 27-03-2023 12:51
Specimen : Serum
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS | REMARKS |
|---|--------|--------------------------------|--------------|---------|
| KFT - RENAL PROFILE-SERUM | | | | |
| RENAL PROFILE | : | | | |
| S.Urea Method: urease-GLDH | 21 | 10 - 50 | mg/dl | |
| S. Creatinine Method: Jaffe | 0.8 | 0.55 - 1.05 | mg/dl | |
| S.Uric Acid Method: URICASE -PAP | 4.6 | 2.6 - 6.0 | mg/dl | |
| BUN Method: Calculated | 9.81 | 4.67 - 23 | mg/dl | |
| S.Sodium(Na) Method: ISE | 140 | 135 - 145 | mEq/l | |
| S.Potassium(K) Method: ISE | 3.6 | 3.5 - 5.0 | mEq/l | |
| S.Chloride(Cl) Method: ISE | 106 | 98 - 106 | mEq/l | |
| S.Calcium Method: OCPC | 8.4* | 8.8 - 10.6 | mg/dl | |
| S.Phosphorus Method: PHOSPHOMOLYBDATE UV | 4.0 | 2.5 - 5.0 | mg/dl | |
| S.Total Protein Method: Biuret | 8.0 | 6.6 - 8.3 | g/dl | |
| S.Albumin Method: BCP | 4.2 | 3.5 - 5 | g/dl | |
| S.Globulin Method: Calculated | 3.8 | 2.7 - 4.5 | g/dl | |
| COMPLETE BLOOD COUNT | | | | |
| Hb (Haemoglobin) Method: Non Cyanide,SIs Based | 12.5 | 11 - 15 | gm/dl | |
| Total WBC Count Method: Electrical Impedence | 5600 | 4000 - 11000 | /Cumm | |
| RBC Count Method: Electrical Impedence | 4.0 | 3.8 - 4.8 | Million/Cumm | |
| ESR Method: Westergren | 20 | 0 - 20 | mm/1st hr | |
| PCV/Haematocrit Method: Electrical Impedence | 37.3 | 36 - 46 | % | |
| Platelet Count Method: Electrical Impedence | 1.2* | 1.5 - 4.5 | Lakhs/Cumm | |
| MCV Method: Electrical Impedence | 91 | 80 - 100 | fl | |
| MCH Method: Electrical Impedence | 30 | 26 - 34 | pg | |

Method: Electrical Impedence
Licensee: Bimal Health Services Pvt. Ltd.

(CIN: U85100AS2015PTC01206)
For Home Blood Collection: +91 75788 44444
For Doctor's Appointment: +91 75779 44444

Apollo Clinic, Zoo Road

Chitran Enclave, Opp Nexa. RG Baruah Road
Zoo Road Tiniali, Guwahati, Assam - 781003

Patient Name : Mrs. ANITA LAHKAR
 UHID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

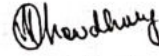
Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9764
 Reported on : 27-03-2023 12:51
 Specimen : Serum
 Pres Doctor: :

| Sponsor Name | 33 | 31.5 - 35 | gm/dl |
|------------------------------|-----------------------------|-----------|---------|
| MCHC | 33 | 31.5 - 35 | gm/dl |
| Method: Electrical Impedence | 50 | 40 - 80 | % |
| Neutrophil | 39 | 20 - 40 | % |
| Lymphocyte | 39 | 20 - 40 | % |
| Monocyte | 08 | 2 - 10 | % |
| Eosinophil | 03 | 1 - 6 | % |
| URINE ROUTINE & MICROSCOPY | : | | |
| Volume | 20 | | ml |
| Colour | Pale Yellow | | |
| Specific Gravity | 1.010 | | |
| Appearance | Clear | | |
| pH Reaction | 6.0 | | |
| CHEMICAL EXAMINATION | : | | |
| Protein | Nil | | Fasting |
| Sugar | Nil | | |
| MICROSCOPIC EXAMINATION | : | | |
| Pus Cells | 2-3 / hpf | | |
| Red Blood Cells | 0-1 / hpf | | |
| Epithelial Cells | 4-5 / hpf | | |
| Cast | Not seen | | |
| Crystals | Calcium Oxalate: Present | | |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
 Juhi_Daimari


 Dr. Madhurima Chowdhury Talukdar
 MD
 Pathologist

Patient Name : Mrs. ANITA LAHKAR
UHID/MR No. : FGUZ.0000007093
Visit Date : 27-03-2023 09:33
Sample Collected on : 27-03-2023 09:42
Ref Doctor : SELF
Emp/Auth/TPA ID : 496324036555
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
OP Visit No : FGUZOPV9764
Reported on : 27-03-2023 12:54
Specimen : Blood
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

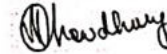
PERIPHERAL SMEAR

Smear reveals mild anisocytosis of the red cells.
No other remarkable morphological abnormalities seen in the red cell series.
No haematoparasites detected.
Cells of the WBC series are within normal limits.
No immature cells seen.
Platelets are adequate and normal in morphology.

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Salehah_Hussain



Dr. Madhurima Chowdhury Talukdar
MD
Pathologist

Patient Name : Mrs. ANITA LAHKAR
 UHID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9764
 Reported on : 27-03-2023 12:57
 Specimen : EDTA Blood
 Pres Doctor: :

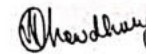
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|---|----------|--------------------------------|-------|
| BLOOD GROUP AND RH TYPE | "O" | | |
| BLOOD GROUP AND RH TYPE Method: Slide Test | | | |
| RH TYPE | POSITIVE | | |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Salehah_Hussain



Dr. Madhurima Chowdhury Talukdar
MD
Pathologist

Patient Name : Mrs. ANITA LAHKAR
AID/MR No. : FGUZ.0000007093
Visit Date : 27-03-2023 09:33
Sample Collected on : 27-03-2023 09:42
Ref Doctor : SELF
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS
CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA -
FY2324
Emp/Auth/TPA ID : 496324036555
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED


Age / Gender : 57 / Female
OP Visit No : FGUZOPV0764
Reported on : 27-03-2023 15:25
Specimen : Urine
Pres Doctor :
ZERO WAIT

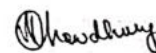
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|------------------------------|--------|--------------------------------|-------|
| URINE GLUCOSE(POST PRANDIAL) | Absent | | |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Lucky_Dehingiam



Dr. Madhurima Chowdhury Talukdar
MD
Pathologist

Licensee: Bimal Health Services Pvt. Ltd.

(CIN: U85100AS2015PTC01206)

For Home Blood Collection: +91 75788 44444

For Doctor's Appointment: +91 75779 44444

Apollo Clinic, Zoo Road
Chitraban Enclave, Opp Nexa. RG Baruah Road
Zoo Road Tiniali, Guwahati, Assam - 781003

Patient Name : Mrs. ANITA LAHKAR
 HID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Amp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9764
 Reported on : 27-03-2023 12:49
 Specimen : Serum(Spl)
 Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|---|--------|--------------------------------|--------|
| THYROID PROFILE - I(T3,T4 AND TSH) | | | |
| TOTAL T3: TRI IODOTHYRONINE - SERUM, Method: CLIA | 0.89 | 0.61 - 1.81 | ng/mL |
| TOTAL T4: THYROXINE - SERUM, Method: CLIA | 6.8 | 3.2 - 12.6 | µg/dl |
| TSH: THYROID STIMULATING HORMONE - SERUM, Method: CLIA | 3.18 | 0.35 - 5.50 | µIU/mL |

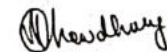
INTERPRETATION:

1. Triiodothyronine (T3) is a hormone produced by thyroidal secretion (20%) and from the peripheral deiodination mechanism which converts T4 to T3 (80%). As T3 is physiologically much more active than T4, it plays an important part in maintaining euthyroidism (1,2)
2. T3 determination much be associated with other tests such as TSH and T4 assay.
3. T4 (Thyroxine) is a hormone secreted by the thyroid gland. It is predominantly bound to carrier proteins (99.9%). The fraction that remains free is considered as the active part of the hormone. (1)
4. T4 titre must also be associated with the other titers of the thyroid assessment, such as TSH and T3, as well as with the clinical examination of the patient.
5. Thyrotropin or thyroid-stimulating hormone (TSH) is a glycoprotein with a molecular weight of 28,000 to 30,000 daltons.
6. In cases of hyperthyroidism, TSH level is severely inhibited and may even be undetectable.
7. In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.
8. It is recommended that above test results should be correlated with clinical findings to arrive at the final diagnosis.

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
 Lucky_Dehingiam



Dr. Madhurima Chowdhury Talukdar
 MD
 Pathologist

Patient Name : Mrs. ANITA LAHKAR
 UHID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9764
 Reported on : 27-03-2023 12:50
 Specimen : Serum
 Pres Doctor: :

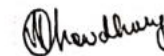
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|---|--------|--|-------|
| LIPID PROFILE TEST (PACKAGE) | | | |
| S.Cholesterol | 233* | < 200 Desirable 200-239 Borderline High >=240 High | mg/dl |
| S.Triglyceride | 115 | <150 Desirable 150-199 Borderline High 200-499 High >500 Very High | mg/dl |
| S.VLDL-Cholesterol | 23 | 10 - 40 | mg/dl |
| S.HDL-Cholesterol | 56 | <40 (Man) - Poor <50 (Women) - Poor 40-49 (Man) - Good 50-59 (Women) - Good >=60 - Best | mg/dl |
| S.LDL-Cholesterol | 155 | <100 Ideal for people at risk of heart disease 100 - 129 Near Ideal 130 - 159 Borderline High 160 - 189 high >=190 Very High | mg/dl |
| Ratio of Cholesterol/HDL Method: Calculated. | 4.16 | 0 - 4.5 | |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Lucky_Dehingiam


 Dr. Madhurima Chowdhury Talukdar
 MD
 Pathologist

Patient Name : Mrs. ANITA LAHKAR
 UHID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9784
 Reported on : 27-03-2023 12:52
 Specimen : Serum
 Pres Doctor :

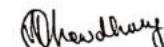
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|--|--------|--------------------------------|---------|
| LIVER FUNCTION TEST (PACKAGE) | | | |
| S. Total Bilirubin Method: Jendrassik | 0.5 | 0.2 - 1.0 | mg/dl |
| S. Direct Bilirubin Method: Diazotised | 0.2 | 0.00 - 0.30 | mg/dl |
| S. Indirect Bilirubin Method: Calculated | 0.3 | 0.2 - 0.6 | mg/dl |
| S. Total Protein Method: Biuret | 8.0 | 6.4 - 8.2 | g/dl |
| S. Albumin Method: BCP | 4.2 | 3.4 - 5.0 | g/dl |
| S. Globulin Method: Calculated | 3.8 | 2.7 - 4.5 | g/dl |
| A/G Ratio Method: Calculated | 1.11* | 1.2 - 2.0 | |
| SGOT/AST Method: UV with P5P | 21 | 15 - 37 | U/L |
| SGPT/ALT Method: UV with P5P | 29 | 15 - 65 | U/L |
| S. Alkaline Phosphate Method: IFCC,PNP,AMP,Buffer | 116 | 50 - 136 | U/l |
| PT Patient | 12.1 | | Seconds |
| PT Control | 13.0 | | Seconds |
| INR | 0.93 | | |
| GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE | | | |
| GGTP: Method: IFCC. | 28 | 5 - 85 | U/l |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Lucky_Dehingiam



Dr. Madhurima Chowdhury Talukdar
MD
Pathologist

Patient Name : Mrs. ANITA LAHKAR
 UHID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 09:42
 Ref Doctor : SELF
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
 OP Visit No : FGUZOPV9764
 Reported on : 27-03-2023 13:33
 Specimen : Whole Blood (Edta)
 Pres Doctor :

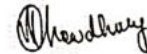
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|---|--------|---|-------|
| GLYCOSYLATED HEMOGLOBIN (HBA1C) | | | |
| GLYCOSYLATED HEMOGLOBIN (HBA1C) - (WHOLE BLOOD) Method: HPLC | 5.5 | Normal - <5.7% Prediabetes 5.7% - 6.4% Diabetes >=6.5% American Diabetes Association | % |
| GLUCOSE - (FASTING) | | | |
| GLUCOSE - (FASTING). Method: Hexokinase | 96 | 70 - 110 | mg/dl |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
 Lucky_Dehingiam



Dr. Madhurima Chowdhury Talukdar
 MD
 Pathologist

Age / Gender : 57 / Female
 OP Visit No : FGUZOPV9784
 Reported on : 27-03-2023 15:25
 Specimen : Plasma(PP)
 Pres Doctor: :

Patient Name : Mrs. ANITA LAHKAR
 ID/MR No. : FGUZ.0000007093
 Visit Date : 27-03-2023 09:33
 Sample Collected on : 27-03-2023 15:02
 Ref Doctor : SELF
 Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS
 CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA -
 FY2324
 Emp/Auth/TPA ID : 496324036555
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

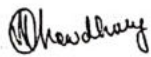
DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME | RESULT | BIOLOGICAL REFERENCE INTERVALS | UNITS |
|--|--------|--------------------------------|-------|
| GLUCOSE - (POST PRANDIAL) GLUCOSE - (POST PRANDIAL) Method: Hexokinase | 125 | 90 - 140 | mg/dl |

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Lucky_Dehingiam


 Dr. Madhurima Chowdhury Talukdar
 MD
 Pathologist

Patient Name : ANITA LAHKAR

MR No.: FGUZ0000007093

Age/Gender: 57 Y/FEMALE

Referred By: SELF

Date: 27 /03 /2023

ECHOCARDIOGRAPHY 2D

TRANSTHORACIC ECHOCARDIOGRAPHY REPORT:

ECHO WINDOW:GOOD

MEASUREMENT (by M-Model)

: REFERENCE LIMITS

| | | |
|-----------|---------|-------------------------------|
| Aorta | : 26 mm | (12 - 22 mm/m ²) |
| LAes | : 25 mm | (12 - 23 mm/m ²) |
| IVS (ed) | : 11 mm | (6 - 10 mm) |
| IVS (es) | : 16 mm | (07 - 12 mm) |
| LVID (ed) | : 36 mm | (19 - 32 mm/ m ²) |
| LVID (es) | : 23 mm | (16 - 19 mm/ m ²) |
| LVPW (ed) | : 11 mm | (07 - 10 mm) |
| LVPW (es) | : 13 mm | (07 - 12 mm) |
| LVEF | : 66 % | (≥ 55 %) |
| FS | : 35 % | (28 - 44 %) |

MITRAL VALVE

Anterior Mitral Leaflet : NORMAL
 Posterior Mitral Leaflet : NORMAL
 Subvalvular Apparatus : Normal

E>A ; E = 0.8m/ Sec ; A = 0.6m/ sec
 E/E' = 6.80

Mitral Regurgitation : ABSENT
 Mitral Aortic continuity : Present

AORTIC VALVE

No of Cusp : Three
 Morphology : NORMAL
 Aortic Regurgitation : ABSENT
 Peak Velocity : 1.1 m/ Sec

TRICUSPID VALVE

Morphology of Leaflets : Normal
 Tricuspid Regurgitation : MILD TR

PULMONARY VALVE

Morphology : Normal
Peak Velocity : 0.9m/ Sec
Pulmonary Regurgitation : Absent


IAS : Intact
PATENT FORAMEN OVALE : Absent
IVS : Intact
PERICARDIUM : Normal; No effusion/ thickening/ Calcification seen

COMMENTS:

Situs solitus, Levocardia
Structurally normal valves
Normal chamber dimension
No Resting regional wall motion abnormality
Normal LV systolic function
No clot or vegetation

IMPRESSION:

**NORMAL SIZED CARDIAC CHAMBERS
MILD TR, RVSP=16 mmHg +RAP
NO RWMA
GOOD BIVENTRICULAR FUNCTION**


**DR. J. NESSA, MBBS, PGDCC
Consultant Clinical Cardiologist**



Name: MRS.ANITA LAHKAR

Age: 57Y Sex: FEMALE

MR No: FGUZ0000007093

Date: 27 /03/2023


ECG

RESULTS

1. The rhythm is sinus
2. Heart rate is 76 beats per minute.
3. Normal P, QRS, T wave axis.
4. Normal PR, QRS, QT duration.
5. No pathological Q wave or ST - T changes seen.

IMPRESSION

Normal sinus rhythm.


DR. YABIN NESSA.
MBBS, PGDCC

57 Years

Female

27.03.2023 9:50:45
APOLLO CLINIC
ZOO ROAD
GUWAHATI

76 bpm
- / - mmHg

| | | |
|------------|------------------|---------------------|
| QRS: | 84 ms | Normal sinus rhythm |
| QT/QTcBaz: | 372/418 ms | Normal ECG |
| PR | 122 ms | |
| P | 104 ms | |
| RR/PP: | 788/789 ms | |
| P/ORS/T | 58/53/43 degrees | |



GE MAC2000 1 1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-40 Hz 50 Hz 4x2.5x3.25 R1 Unconfirmed 1/1

Patient Name : Mrs. ANITA LAHKAR
Age/Sex : 57 Y/F
Pres Doctor :
Ref.by : SELF

MR No : FGUZ.0000007093
Visit No : FGUZOPV9764
Bill Date : 27-03-2023 09:33
Report Date : 27-03-2023 11:24

ULTRASOUND WHOLE ABDOMEN (FEMALE)

Liver: Right and left lobe of the liver are well seen and show bright homogenous echotexture. Intrahepatic portal and hepatic venous systems are normal. Multiple cysts seen involving bilateral lobes measuring upto 17mm in greatest dimension. Biliary radicles are not dilated.
Gall Bladder: Gall bladder is normally distended with normal wall thickening. No intraluminal echorefective calculus is seen. No pericholecystic fluid is seen. GB / Liver demarcation is intact.
Common Bile Duct: Common Bile Duct measures 3.9 mm in diameter and appears normal. No intraluminal calculus or mass lesion is seen.
Pancreas: Pancreas is seen in its entirety and shows normal echotexture. MPD is not dilated. No calcification or mass lesion is seen. No peripancreatic collection seen.
Spleen: Spleen is normal in size and echotexture. No focal lesion or calcification is seen.
Kidneys: Both the kidneys are normal in size, shape, contour, position and echotexture. Cortico-medullary differentiation is intact. No focal lesion or hydronephrosis is seen. No echorefective calculus is noted. Right and left kidneys measure 108 mm and 107 mm in length. Ureters are not dilated.
Urinary Bladder: Urinary bladder optimally distended. No significant wall thickening is noted. No calculus or demonstrable intrinsic pathology is noted.
Uterus: Anteverted uterus is normal in size & myometrial echotexture. No focal mass lesion is seen in myometrium. Endometrial thickness is within normal limit. Central endometrial echo is normal. No endometrial pathology is seen. Cervix is normal.
Adnexa: Could not be traced(atrophied) .No adnexal mass is seen. No ascites or adenopathy is seen. No POD fluid is seen.

IMPRESSION :

GRADE I FATTY CHANGES OF LIVER WITH MULTIPLE SIMPLE PARENCHYMAL CYSTS

Technician



Dr. S. Sharma
MBBS(AMCH), Diploma in Radiology (FAAMCH)
RADIOLOGIST

HEALTH CHECKUP

Name: Mrs. Aniladaman

Date: 27/12/23

Age: 57 yr

Sex: Male / Female

Marital Status: Married / Single

PERSONAL HISTORY

Habits: Smoking / Tobacco & Snuff / Alcohol

Drug allergy if any: None

Medical: Migraine. COVID 19 2020.

Surgical: None

Height: 163 cm Weight: 61 Kg BP: 100/70 Pulse: 76

Vision: Rt 6/12 Lt 6/12 With spectacles: Rt 6/12 Lt 6/12

Colour vision: Normal / Abnormal Near vision: Normal / Abnormal

Family History

Father: Deceased Mother: Deceased Siblings: (2)

CVS Heart sound Normal Murmurs None Absent Thrills None Absent
RS: Rate 71 /mt Breath sounds (N) Normal Adventitious None Absent
Abdomen: Tenderness None Absent Rigidity None Absent Bowel sound (N) Normal

Liver (N) NAD Kidney (N) NAD Hernia None Absent

CNS: Cranial Nerves (N) NAD Sensory System (N) NAD Motor System (N) NAD

ENT (N) NAD

Remarks

[Signature]

Dr. Kumar Bhaskar Baruah



Putting more Care Into Healthcare

- Please bring the bill to collect the reports
- Please check the bill & your balance before leaving the counter. no disputes
- Management is not responsible for the reports not collected within 3 months from the date of investigation.
- Reports delivery time from 5:00 pm to 8:00 pm for same day & 12:00 noon from next day & on Sunday between: 2:00 pm to 5:00 pm

For doctor's appointment
757 794 4444

For home blood collection
757 884 4444

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Anita Lakya on 27/12/2023

After reviewing the medical history and on clinical examination it has been found that he/she is

| | Tick |
|---|--------------------------|
| <ul style="list-style-type: none"> Medically Fit | <input type="checkbox"/> |
| <ul style="list-style-type: none"> Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However, the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p> | <input type="checkbox"/> |
| <ul style="list-style-type: none"> Currently Unfit. <p>Review after _____ recommended</p> | <input type="checkbox"/> |
| <ul style="list-style-type: none"> Unfit | <input type="checkbox"/> |

[Signature]
Dr. K. B. BARKATI
Medical Officer
The Apollo Clinic,



This certificate is not meant for medico-legal purposes

Putting more Care Into Healthcare

- Please bring the bill to collect the reports
- Please check the bill & your balance before leaving the counter, no disputes
- Management is not responsible for the reports not collected within 3 months from the date of investigation.
- Reports delivery time from 5:00 pm to 8:00 pm for same day & 12:00 noon from next day & on Sunday between: 2:00 pm to 5:00 pm

For doctor's appointment

757 794 4444

For home blood collection

757 884 4444

Patient Name : Mrs. ANITA LAHKAR
Age/Sex : 57 Y/F
Pres Doctor :
Ref.by : SELF

MR No : FGUZ.0000007093
Visit No : FGUZOPV9764
Bill Date : 27-03-2023 09:33
Report Date : 27-03-2023 12:16

CHEST (PA VIEW)

Lung fields do not reveal any active parenchymal lesion.

Pleural angles are clear and domes of the diaphragm are of normal contour.

Cardio-thoracic ratio is within normal limits.

Hilar shadows are normal.

Bony thorax is intact.

Soft tissue shadows are normal.

Technician



Dr. S. Sharma
MBBS(AMCH), Diploma in Radiology (FAAMCH)
RADIOLOGIST

Patient Name : Mrs. ANITA LAHKAR
UHID/MR No. : FGUZ.0000007093
Visit Date : 27-03-2023 09:33
Sample Collected on : 29-03-2023 12:54
Ref Doctor : SELF
Emp/Auth/TPA ID : 496324036555
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 57Y/Female
OP Visit No : FGUZOPV9764
Reported on : 29-03-2023 13:04
Specimen : Smear
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

PAP SMEAR

PAP FORMAT:

Specimen: Cervical pap smear

PAP SMEAR

Adequacy : Satisfactory for evaluation.

General Categorisation: Negative for malignancy or intraepithelial lesion.

Descriptive Diagnosis:

(i) Benign cellular changes:

(a) Inflammatory/Infective : Few neutrophils are seen dispersed along with moderate number of red blood cells.

(b) Reactive changes: Nucleomegaly noted in some cells.

(ii) Epithelial cell abnormalities

(a) Squamous: Mostly sheets of parabasal cells along with intermediate cells seen.

(b) Glandular: Endocervical and endometrial cells not seen.

Others :

IMPRESSION : Atrophic changes.

Note :

1) "Cervical cytology is a screening test and has associated false negative and false positive results.

Regular sampling and follow up is recommended".

2) The smear are reported using the Bethesda system of Reporting cervical cytology

End of the report

Results are to be correlated clinically

Lab Technician / Technologist
Lucky_Dehingiam



Dr. Madhurima Chowdhury Talukdar
MD
Pathologist