



To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

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

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

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	NIBEDITA BAISAKHI
DATE OF BIRTH	22-05-1989
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	24-06-2023
BOOKING REFERENCE NO.	23J123717100062648S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. PRUSTY SUKANTA KUMAR
EMPLOYEE EC NO.	123717
EMPLOYEE DESIGNATION	FOREX BACK OFFICE
EMPLOYEE PLACE OF WORK	GANDHINAGAR,GIFT CITY,NATIONAL
EMPLOYEE BIRTHDATE	29-06-1985

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 **23-06-2023** till **31-03-2024**. 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's spouse 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 Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Health Check up Booking Confirmed Request(bobS41203),Package Code-PKG10000241, Beneficiary Code-64041

1 message

Mediwheel <wellness@mediwheel.in>
To: sukant3639@gmail.com
Cc: customercare@mediwheel.in

Sat, 24 Jun, 2023 at 3:12 pm



Mediwheel
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear **Nibedita Baisakhi**,

Please find the confirmation for following request.

Booking Date : 23-06-2023
Package Name : Medi-Wheel Metro Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Aashka Multispeciality Hospital
Address of Diagnostic/Hospital : Between Sargasan & Reliance Cross Road
Contact Details : 9879752777/7577500900
City : Gandhi Nagar
State : Gujarat
Pincode : 382315
Appointment Date : 26-06-2023
Confirmation Status : Confirmed
Preferred Time : 8:00am-8:30am
Comment : APPOINTMENT TIME 8:30AM

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.



Name: ^E NIBEDITA Age: 38yrs

Complaints:
Routine check.

No of deliveries: 10th C.S

Last Delivery: 5yrs.

History of abortion:

H/O medical conditions associated:

Last abortions:

DM	-
HTN	-
Thyroid	+

during pregnancy
No medicines

MH: reg 9/30 NE Reg: Pain + before periods.

LMP: 13.6.23. H/O DM + HTN +

P/A: Suprapubic Scar +

P/S: Child m/b done

P/V: ul AV, NS, M, FR Breasts Normal.

Sample:-

Vagina	<input checked="" type="checkbox"/>
Cervix	<input type="checkbox"/>

Looks pale
To see
2 reports

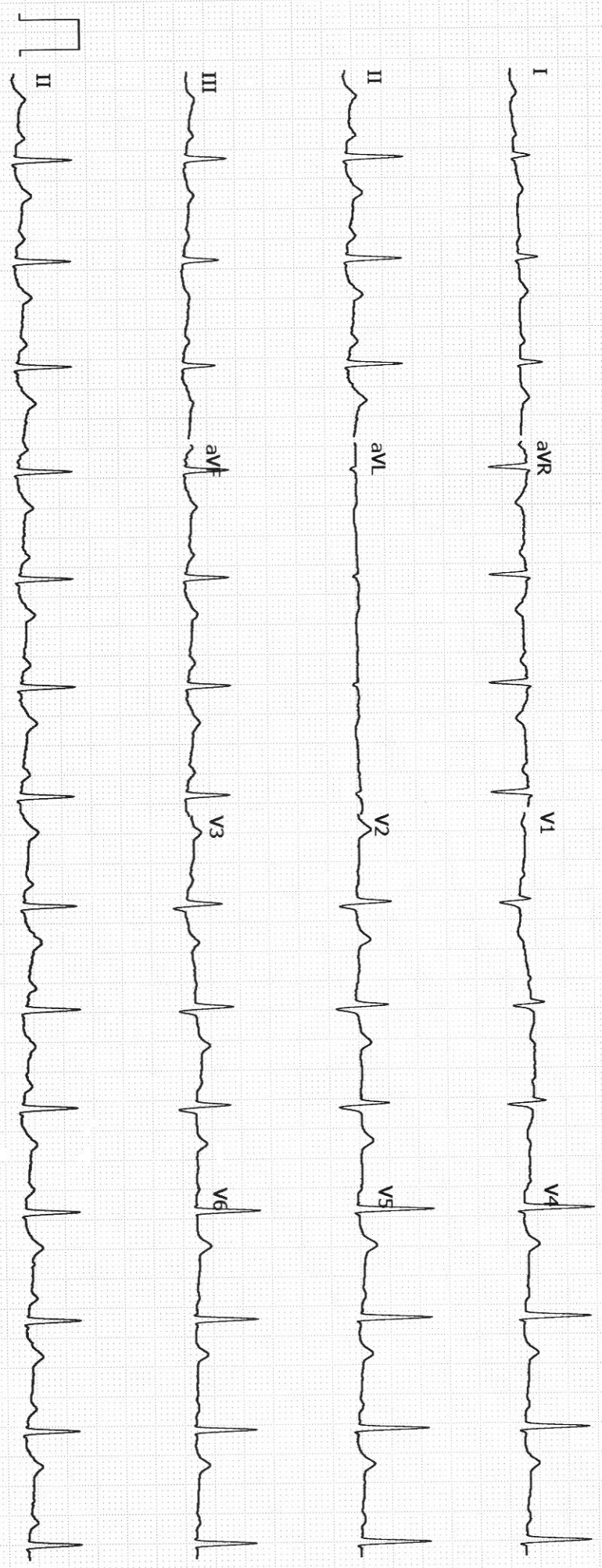
Doctors Sign:- [Signature]

10.50 AM
26/6/23

Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:
Room:
84 bpm
- / - mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 78 ms
QT / QTcbaz : 350 / 413 ms
PR : 164 ms
P : 90 ms
RR / PP : 716 / 714 ms
P / QRS / T : 67 / 72 / 62 degrees
Normal sinus rhythm
Nonspecific ST abnormality
Abnormal ECG



GE MAC2000 1.1 125L™ V241 25 mm/s 10 mm/mV ADS 0.56-2.0 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1



LABORATORY REPORT



Name : NIBEDITA BAISAKHI	Sex/Age : Female/ 38 Years	Case ID : 30602200492
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type :	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O23242209

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Haemogram (CBC)			
Haemoglobin	11.9	G%	12.00 - 15.00
PCV(Calc)	35.14	%	36.00 - 46.00
MCV (RBC histogram)	74.6	fL	83.00 - 101.00
MCH (Calc)	25.3	pg	27.00 - 32.00
Lymphocyte	44.0	%	20.00 - 40.00
Lipid Profile			
HDL Cholesterol	40.9	mg/dL	48 - 77
Chol/HDL	4.32		0 - 4.1
LDL Cholesterol	115.92	mg/dL	65 - 100
Liver Function Test			
S.G.P.T.	12.43	U/L	14 - 59
A/G Ratio	2.3		1.0 - 2.1
Thyroid Function Test			
Triiodothyronine (T3)	69.07	ng/dL	70 - 204

Abnormal Result(s) Summary End

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

Page 1 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : **NIBEDITA BAISAKHI** Sex/Age : **Female/ 38 Years** Case ID : **30602200492**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2806893**
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19 Sample Type : **Whole Blood EDTA** Mobile No : **9668711182**
 Sample Date and Time : 26-Jun-2023 08:19 Sample Coll. By : Ref Id1 : **OSP30640**
 Report Date and Time : 26-Jun-2023 08:37 Acc. Remarks : **Normal** Ref Id2 : **O23242209**

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	L 11.9	G%	12.00 - 15.00
RBC (Electrical Impedance)	4.71	millions/cumm	3.80 - 4.80
PCV(Calc)	L 35.14	%	36.00 - 46.00
MCV (RBC histogram)	L 74.6	fL	83.00 - 101.00
MCH (Calc)	L 25.3	pg	27.00 - 32.00
MCHC (Calc)	33.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	15.50	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

			EXPECTED VALUES	[Abs]	EXPECTED VALUES
Total WBC Count	6350	/μL	4000.00 - 10000.00		
Neutrophil	[%] 48.0	%	40.00 - 70.00	3048	/μL 2000.00 - 7000.00
Lymphocyte	H 44.0	%	20.00 - 40.00	2794	/μL 1000.00 - 3000.00
Eosinophil	3.0	%	1.00 - 6.00	191	/μL 20.00 - 500.00
Monocytes	4.0	%	2.00 - 10.00	254	/μL 200.00 - 1000.00
Basophil	1.0	%	0.00 - 2.00	64	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	225000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.09		0.78 - 3.53

SMEAR STUDY

RBC Morphology	Microcytic hypochromic RBCS.
WBC Morphology	Lymphocytosis
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

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

Page 2 of 12

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

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LABORATORY REPORT



Name : **NIBEDITA BAISAKHI** Sex/Age : **Female/ 38 Years** Case ID : **30602200492**
Ref.By : **HOSPITAL** Dis. At : Pt. ID : **2806893**
Bill. Loc. : **Aashka hospital** Pt. Loc :
Reg Date and Time : **26-Jun-2023 08:19** Sample Type : **Whole Blood EDTA** Mobile No : **9668711182**
Sample Date and Time : **26-Jun-2023 08:19** Sample Coll. By : Ref Id1 : **OSP30640**
Report Date and Time : **26-Jun-2023 09:49** Acc. Remarks : **Normal** Ref Id2 : **O23242209**

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR <i>Westergren Method</i>	14		mm after 1hr 3 - 20	

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

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Page 3 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI	Sex/Age : Female/ 38 Years	Case ID : 30602200492
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Whole Blood EDTA	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 08:42	Acc. Remarks : Normal	Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type	A
Rh Type	POSITIVE

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

Page 4 of 12

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LABORATORY REPORT



Name : NIBEDITA BAISAKHI	Sex/Age : Female/ 38 Years	Case ID : 30602200492
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Spot Urine	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 09:11	Acc. Remarks : Normal	Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)				

Physical examination

Colour : Pale yellow
 Transparency : Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025		1.003 - 1.035
pH	5.5		4.6 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/ul	Nil
Yeast	Nil	/ul	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

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

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 M.D. (Pathologist)

Page 5 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI Sex/Age : Female/ 38 Years Case ID : 30602200492
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2806893
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19 Sample Type : Spot Urine Mobile No : 9668711182
 Sample Date and Time : 26-Jun-2023 08:19 Sample Coll. By : Ref Id1 : OSP30640
 Report Date and Time : 26-Jun-2023 09:11 Acc. Remarks : Normal Ref Id2 : O23242209

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

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

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M.D. (Pathologist)

Page 6 of 12

Printed On : 26-Jun-2023 13:46



Neuberg Supratech Reference Laboratories Private Limited

📍 "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006
 📞 079-40408181 / 61618181 ✉ contact@supratechlabs.com 🌐 www.neubergsupratech.com



LABORATORY REPORT



Name : NIBEDITA BAISAKHI Sex/Age : Female/ 38 Years Case ID : 30602200492
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2806893
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19 Sample Type : Serum Mobile No : 9668711182
 Sample Date and Time : 26-Jun-2023 08:19 Sample Coll. By : Ref Id1 : OSP30640
 Report Date and Time : 26-Jun-2023 10:48 Acc. Remarks : Normal Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <i>Colorimetric, CHOD-POD</i>	176.71	mg/dL	110 - 200	
HDL Cholesterol	L 40.9	mg/dL	48 - 77	
Triglyceride <i>Glycerol Phosphate Oxidase</i>	99.43	mg/dL	<150	
VLDL <i>Calculated</i>	19.89	mg/dL	10 - 40	
Chol/HDL <i>Calculated</i>	H 4.32		0 - 4.1	
LDL Cholesterol <i>Calculated</i>	H 115.92	mg/dL	65 - 100	

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	Border 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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DCP.

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Page 7 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI Sex/Age : Female/ 38 Years Case ID : 30602200492
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2806893
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19 Sample Type : Serum Mobile No : 9668711182
 Sample Date and Time : 26-Jun-2023 08:19 Sample Coll. By : Ref Id1 : OSP30640
 Report Date and Time : 26-Jun-2023 11:08 Acc. Remarks : Normal Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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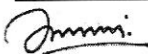
BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with P5P</i>	L 12.43	U/L	14 - 59	
S.G.O.T. <i>UV with P5P</i>	17.77	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	67.44	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	13.75	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Biuret</i>	6.96	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.82	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	2.14	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	H 2.3		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.47	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.16	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.31	mg/dL	0 - 0.8	

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

Page 8 of 12



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LABORATORY REPORT



Name : NIBEDITA BAISAKHI	Sex/Age : Female/ 38 Years	Case ID : 30602200492
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Serum	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 10:48	Acc. Remarks : Normal	Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <i>GLDH</i>	17.2	mg/dL	7.00 - 18.70	
Creatinine	0.66	mg/dL	0.50 - 1.50	
Uric Acid <i>Uricase</i>	3.65	mg/dL	2.6 - 6.2	

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

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Page 9 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI Sex/Age : Female/ 38 Years Case ID : 30602200492
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2806893
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Whole Blood EDTA	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 08:55	Acc. Remarks : Normal	Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				

HbA1C	5.68		% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
--------------	-------------	--	---------------	---

Estimated Avg Glucose (3 Mths) <i>Calculated</i>	116.32	mg/dL
--	---------------	-------

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 glycemc 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 glycemc 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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Page 10 of 12

Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI	Sex/Age : Female/ 38 Years	Case ID : 30602200492
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Serum	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 12:21	Acc. Remarks : Normal	Ref Id2 : O23242209

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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Thyroid Function Test

Triiodothyronine (T3)	L 69.07	ng/dL	70 - 204	
Thyroxine (T4) CMIA	5.7	ng/dL	4.87 - 11.72	
TSH CMIA	2.340	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), PRTN 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 & incipient 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 suppressed 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

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

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Page 11 of 12
Printed On : 26-Jun-2023 13:46





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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 2806893
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 26-Jun-2023 08:19	Sample Type : Serum	Mobile No : 9668711182
Sample Date and Time : 26-Jun-2023 08:19	Sample Coll. By :	Ref Id1 : OSP30640
Report Date and Time : 26-Jun-2023 12:21	Acc. Remarks : Normal	Ref Id2 : O23242209

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

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

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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

Dr. Amit Prajapati
DCP.

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

Page 12 of 12
Printed On : 26-Jun-2023 13:46





LABORATORY REPORT



Name : NIBEDITA BAISAKHI Sex/Age : Female/ 38 Years Case ID : 30602200492
 Ref.By : HOSPITAL Dis. At : Pt. ID : 2806893
 Bill. Loc. : Aashka hospital Pt. Loc :

Reg Date and Time : 26-Jun-2023 08:19 Sample Type : Plasma Fluoride F, Plasma Fluoride PP Mobile No : 9668711182
 Sample Date and Time : 26-Jun-2023 08:19 Sample Coll. By : Ref Id1 : OSP30640
 Report Date and Time : 26-Jun-2023 14:06 Acc. Remarks : Normal Ref Id2 : O23242209
TEST RESULTS UNIT BIOLOGICAL REF RANGE REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H	101.70	mg/dL	70 - 100
Plasma Glucose - PP <i>Photometric, Hexokinase</i>		92.17	mg/dL	70.0 - 140.0

Reference range has been changed as per recent guidelines of ISPAD 2018.

- <100 mg/dL : Normal level
- 100-<126 mg/dL: Impaired fasting glucoseer guidelines
- >=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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

Dr. Shreya Shah
M.D. (Pathologist)

Dr. Manoj Shah
M.D. (Path. & Bact.)

Page 1 of 1

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www.aashkahospitals.in

CIN: L85110GJ2012PLC072647



PATIENT NAME:NIBEDITA BAISAKHI

GENDER/AGE:Female / 38 Years

DATE:26/06/23

DOCTOR:

OPDNO:OSP30640

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 appears normal. 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 10.1 x 4.6 cms in size.

Left kidney measures about 10.6 x 4.8 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 190 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6 mm. No evidence of uterine mass lesion is seen.

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


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

PATIENT NAME: NIBEDITA BAISAKHI

GENDER/AGE: Female / 34 Years

DATE: 26/06/23

DOCTOR:

OPDNO: OSP30640

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.

No evidence of cervical rib is seen on either side.


DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

PATIENT NAME: NIBEDITA BAISAKHI

GENDER/AGE: Female / 34 Years


DATE: 26/06/23

DOCTOR: DR. HASIT JOSHI

OPDNO: OSP30640

2D-ECHO

MITRAL VALVE : AML LONG REDUNDANT
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
AORTA : 34mm
LEFT ATRIUM : 34mm
LV Dd / Ds : 41/27mm EF 60%
IVS / LVPW / D : 10/9mm
IVS : INTACT
IAS : INTACT
RA : NORMAL
RV : NORMAL
PA : NORMAL
PERICARDIUM : NORMAL
VEL : PEAK MEAN
M/S : Gradient mm Hg Gradient mm Hg
MITRAL : 1/0.7m/s
AORTIC : 1.2m/s
PULMONARY : 0.8m/s
COLOUR DOPPLER : TRIVIAL MR/TR
RVSP : 26mmHg
CONCLUSION : NORMAL LV SIZE / SYSTOLIC FUNCTION.


CARDIOLOGIST
DR. HASIT JOSHI (9825012235)

DR. PRERAK TRIVEDI
M.D., IDCCM
CRITICAL CARE MEDICINE
REG.NO.G-59493

UHID:		Date: 26/6/23	Time: 2:30 PM
Patient Name: Nibedita		Height: 159 cm	
Age / Sex: 35y / F LMP:		Weight: 52.4	
History:			
C/C/O: Gen. weakness - 2-3 day		History:	
Allergy History: NAD		Addiction: NAD	
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Vitals & Examination:			
Temperature: Normal			
Pulse: 68/min			
BP: 120/78 mmHg			
SPO2: 98% on RA			
Provisional Diagnosis:			

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

MID:		Date: 26/6/23	Time:
Patient Name: NIBEDITA BAI SARHS		Age / Sex: 34 / F	Height: 159 cm
		Weight: 52.4 kg	
History: <u>eye</u> Rupa chubh (BC) nana			
Allergy History:			
Nutritional Screening: Well-Nourished / Malnourished / Obese			
Examination: D.v. 2 G16 G16 N.v. 2 G16 G16 color vision normal.			
Diagnosis:			

