

Obli Towers, 594, D.B. Road, R. S. Puram, Coimbatore-641 002. Mobile : 99430 99994 email: info@arthiscans.com

SID No : 033092 Mrs. DIVYA KUMARI

Age / Sex: 29 Y / Female Ref. By : **ARTHI LABS AND SCANS**



Collected Date : 19 Sep 21/11:36 Received Date : 19 Sep 21/11:36 Reported Date : 24 Sep 21/08:31

Final Test Report

Page 1 of 1

HISTOPATHOLOG	HISTOPATHOLOGY			
PAP - SMEAR				
SPECIMEN NO	CY 3582 /2021.PAP SMEARReceived three smears.			
MICROSCOPIC	Smear studied shows superficial cells, intermediate cells, endocervical cells and Doderlein's bacilli . There is no evidence of metaplasia or dysplasia.			
IMPRESSION	NEGATIVE FOR INTRA EPITHELIAL LESION.			



Dr.Prabha MD., (Path) Consultant Pathologist



Name	MRS. DIVYA KUMARI	Patient ID	60025
Accession No	61939	Age/Gender	29Y/FE MALE
Referred By	MEDIWHEEL	Date	19.09.2021

ECHOCARDIOGRAPHIC EVALUATION

MEASUREMENTS: ACOUSTIC WINDOW: OPTIMAL

2D/ M MODE PARAMETERS:

Parameters	Patient Values	Normal Adult Value
LA	2.31	(2.0 - 4.0 cm)
AO	1.91	(2.0 - 4.0 cm)
LVIDD	3.11	(3.5 – 5.5 cm)
LVIDS	1.77	(2.5 - 4.3 cm)
IVSd	0.79	(0.6 - 1.2 cm)
LVPWd	0.90	(0.6 - 1.2 cm)
EF	75	(50% - 70%)

DOPPLER PARAMETERS:

valv	ves	Aortic valve	Mitral valve	Tricuspid valve	Pulmonary valve
Ma Velocity(1.24	0.98	0.87	1.01
Ma Gradient(6.24	3.89	3.07	4.08
E:	0.98	A:	0.79	E/A:	1.25



Name	MRS. DIVYA KUMARI	Patient ID	60025
Accession No	61939	Age/Gender	29Y/FE MALE
Referred By	MEDIWHEEL	Date	19.09.2021

INTERPRETATION:

: NORMAL

IAS/IVS : INTACT

VALVES : NORMAL

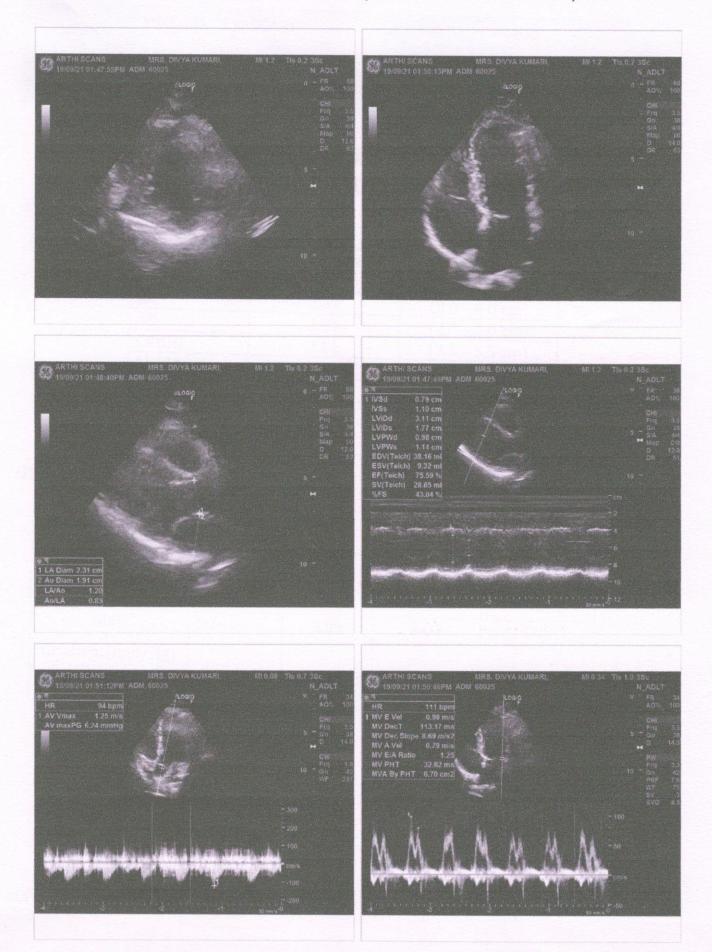
REGIONAL WALL MOTION ABNORMALITY: NO RWMA

IMPRESSION:

- No regional wall motion abnormality at rest.
- Normal valves and chambers.
- 🜲 Tachycardia During study.
- Normal LV systolic function.
- 🜲 No pulmonary hypertension.
- 4 No pericardial effusion.

Dr. KARTHIK C.S.MD.,PGD(CARDIOLOGY,UKR) CONSULTANT CARDIOLOGIST.

Thank you for the courtesy of this referral Foot note:Patient identify is not verified .Report is not valid for medico legal purpose. MRS. DIVYA KUMARI 29Y/F 60025 19-Sep-2021 12:08:58 PM Physician Name





NAME	MRS.DIVYA KUMARI	PATIENT ID	60025
ACCESSION NO	61939	AGE/GENDER	29 Y / FEMALE
REFERRED BY	MEDIWHEEL	DATE	19- SEP- 2021

VISION TEST

VISUAL ACUITY (VA)

If The Acuity Can Be Measures, Complete This Box Using Snellen acuities or snellen equivalents or NLP,LP,HM, or distance at which the patient sees the 20/100 letter.

WITH BEST CORRECTION

DISTANC	E VISION
Right	9/11
Left	9/11
Both	10/11

NEAR	VISION
Right	N6
Left	N6
Both	N6

COLOU	R VISION
вотн	Normal



Name	MRS. DIVYA KUMARI	Patient ID	61939
Accession No	60025	Age/Gender	29 Y/ Female
Referred By	MEDI WHEEL	Date	19-Sep-2021

USG REPORT - ABDOMEN AND PELVIS

LIVER:

Is normal in size ~ 12.4 cm and shows increased echo texture.

No obvious focal lesion seen. No intra – Hepatic biliary radical dilatation seen.

GALL BLADDER:

Is adequately distended. No calculus or internal echoes are seen. Wall thickness is normal.

PANCREAS:

Appears normal in size and it shows uniform echo texture.

SPLEEN:

Is normal in size ~ 10.4 cm and shows uniform echogenicity.

RIGHT KIDNEY:

Right kidney measures ~ 8.6 x 3 cms.

The shape, size and contour of the right kidney appear normal.

Cortico medullary differentiation is within normal. No evidence of pelvicalyceal dilatation.

No calculi seen.

LEFT KIDNEY:

Left kidney measures ~ 9.6 x 3.2 cms.

The shape, size and contour of the left kidney appear normal.

Cortico medullary differentiation is within normal. No evidence of pelvicalyceal dilatation.

No calculi seen.



Name	MRS. DIVYA KUMARI	Patient ID	61939
Accession No	60025	Age/Gender	29 Y/ Female
Referred By	MEDI WHEEL	Date	19-Sep-2021

USG REPORT - ABDOMEN AND PELVIS

BLADDER:

Is normal contour. No intra luminal echoes are seen.

UTERUS:

Uterus measures ~ 7.6 x 3.5 x 5 cm.

Endometrium is regular and normal (7 mm).

Cervix appears bulky and heterogenous with few nabothean cysts.

OVARIES:

Right ovary measures ~ 1.8 x 1.6 cms.

Dominant follicle measuring ~1.8 x 1 cm seen in left ovary.

No adnexal mass lesion seen. Pouch of Douglas is free. No free fluid in abdomen.

IMPRESSION:

- Grade I fatty liver.
- * Cervicitis.
 - Suggested clinical correlation.

Dr. Abinaya Rajasekaran, MD., RD., Reg. No: 119338.

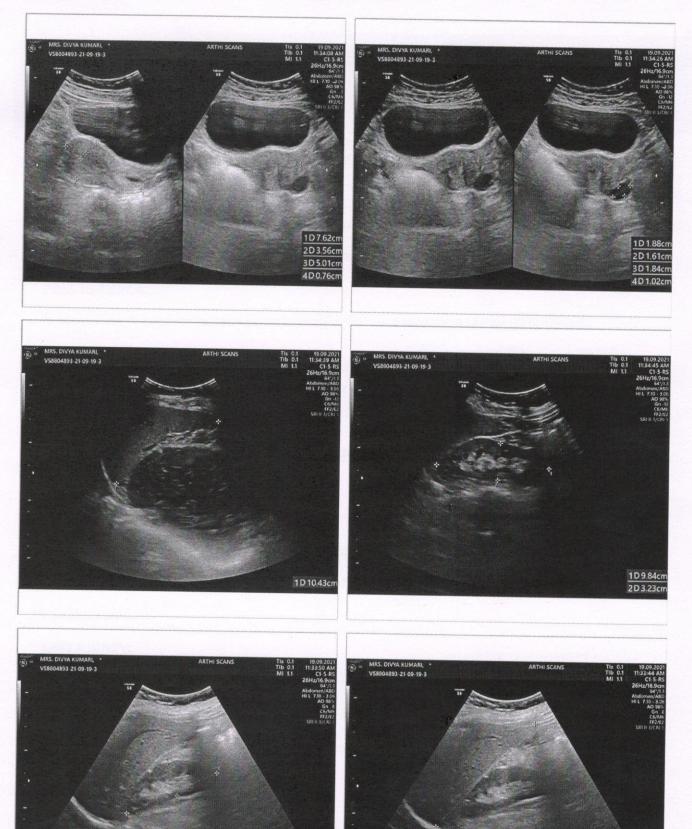
16-K

Dr.Abinaya Rajasekaran, MDRD., Radiologist

Thank you for the courtesy of this referral

Foot Note: Patient's identity is not verified. Report is not valid for medico legal purpose.

MRS. DIVYA KUMARI /F VS8804893-21-09-19-3 19-Sep-2021 10:04:01 AM Physician Name



1D 8.63cm 2D 3.01cm

1D12.45cm



Name	MRS. DIVYA KUMARI	Patient ID	61939
Accession No	60025	Age/Gender	29 Y/ Female
Referred By	MEDI WHEEL	Date	19-Sep-2021

USG REPORT - SONO MAMMOGRAM

Sonography of both breasts done

RIGHT BREAST:

Parenchyma appears normal.

Skin Thickness normal

Sub cutaneous fat normal.

No ductal Dilatation. Nipple areolar complex normal.

Retromammary area appears normal

LEFT BREAST:

Parenchyma appears normal.

Skin Thickness normal. No ductal Dilatation.

Nipple areolar complex normal.

Retromammary area appears normal.

No significant enlargement of axillary node seen.

IMPRESSION:

- BIRADS I No significant abnormality detected in bilateral breasts. .
- Bilateral axilla appears normal.

NOTE: BI - RADS SCORING KEY

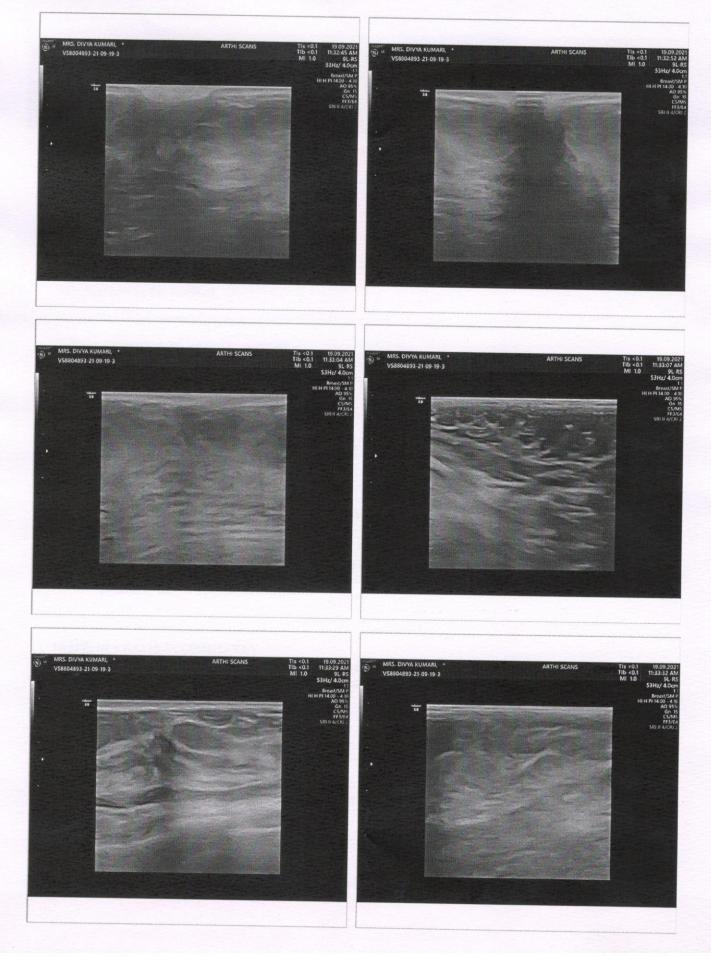
- O Needs additional evaluation, I Negative, II Benign findings, III Probably benign
- IV Suspicious abnormality Biopsy to be considered, V Highly suggestive of malignancy, Dr. Abinaya Rajasekaran, MD, RD.,
- VI Known biopsy proven malignancy.

Dr.Abinaya Rajasekaran, MDRD., Radiologist

Reg. No: 118338,

Thank you for the courtesy of this referral Foot Note: Patient's identity is not verified. Report is not valid for medico legal purpose.

MRS. DIVYA KUMARI /F VS8804893-21-09-19-3 19-Sep-2021 10:04:01 AM Physician Name





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Patient Name : MRS. DIVYA KUMARI Age / Gender : 29 years / Female Patient ID : 60025

Referral : MediWheel

Collection Time : Sep 19, 2021, 09:33 a.m.



			004226221
Test Description	Value(s)	Reference Range	
COMPLETE BLOOD COUNT (CBC)			
Hemoglobin (Hb)	10.9	12.0 - 15.0	gm/dL
Erythrocyte (RBC) Count	4.44	3.8 - 4.8	mil/cu.mm
Packed Cell Volume (PCV)	34.4	36 - 46	%
Mean Cell Volume (MCV)	77.48	83 - 101	fL
Mean Cell Haemoglobin (MCH)	24.55	27 - 32	pg
Mean Corpuscular Hb Concn. (MCHC)	31.69	31.5 - 34.5	g/dL
Red Cell Distribution Width (RDW)	14.4	11.6 - 14.0	%
Total Leucocytes (WBC) Count	7100	4000-10000	cell/cu.mm
Neutrophils	69	40 - 80	%
Lymphocytes	23	20 - 40	%
Monocytes	7	2 - 10	%
Eosinophils	1	1 - 6	%
Basophils	0	1-2	%
Absolute Neutrophil Count	4899	2000 - 7000	/c.mm
Absolute Lymphocyte Count	1633	1000 - 3000	/c.mm
Absolute Monocyte Count	497	200 - 1000	/c.mm
Absolute Eosinophil Count	71	20 - 500	/c.mm
Absolute Basophils Count	0	20 - 100	/c.mm
Platelet Count	195	150 - 410	10^3/ul
Mean Platelet Volume (MPV)	12.1	7.2 - 11.7	fL
РСТ	0.24	0.2 - 0.5	%
PDW	18.5	9.0 - 17.0	%

END OF REPORT

DR.UMA SAROJINI .K MBBS.,DCP.,





RTHI SPECIALITY B

Obli Towers, 594, D.B. Road, R. S. Puram, Coimbatore-641 002. Mobile : 99430 99994 email: info@arthiscans.com

Patient Name : MRS. DIVYA KUMARI Age / Gender : 29 years / Female Patient ID : 60025		Referral : MediWheel
		Collection Time : Sep 19, 2021, 09:33 a.m.
		Reporting Time : Sep 19, 2021, 03:34 p.m.
		Sample ID : 004226221
Test Description	Value(s)	Reference Range
BLOOD GROUP & RH TYPING		
Blood Group (ABO typing) Method : Manual-Hemagglutination	"B"	
RhD Factor (Rh Typing) Method : Manual hemagglutination	Positive	

END OF REPORT

DR.UMA SAROJINI .K MBBS.,DCP.,



ARTHI SPECIALITY I

Obli Towers, 594, D.B. Road, R. S. Puram, Coimbatore-641 002. Mobile : 99430 99994 email: info@arthiscans.com

Patient Name : MRS. DIVYA KUMARI			Referral : MediWhe	el
Age / Gender : 29 years / Female			Collection Time : S	Sep 19, 2021, 09:33 a.m.
Patient ID: 60025			Reporting Time : Sep 19, 2021, 03:21 p.m.	
			Sample ID :	004226221
Test Description		Value(s)	Reference Range	
GLUCOSE (F)				
Glucose fasting Method : GOD-POD		84	Normal: 70 - 110	mg/dL

END OF REPORT

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Patient Name : MRS. DIVYA KUMARI	Referral : MediWh	Referral : MediWheel Collection Time : Sep 19, 2021, 09:33 a.m.		
Age / Gender : 29 years / Female	Collection Time :			
Patient ID: 60025		Reporting Time : Sep 19, 2021, 03:22 p.m.		
		Sample ID :	004226221	
Test Description	Value(s)	Reference Range		
GLUCOSE (PP) Blood Glucose-Post Prandial Method : GOD-POD	113	70 - 120	mg/dL	

END OF REPORT

DR.UMA SAROJINI .K MBBS.,DCP.,



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Sample ID : 004226221
Reporting Time : Sep 19, 2021, 03:30 p.m.
Collection Time : Sep 19, 2021, 09:33 a.m.
Referral : MediWheel

Glycosylated HbA1c	
HbA1c (GLYCOSYLATED HEMOGLOBIN),	4.6
BLOOD	
Method : (HPLC, NGSP certified)	
Estimated Average Glucose :	85.32 -
Interpretation	
As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	<5.7
At risk (Prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
	Age > 19 years
	Goal of therapy: < 7.0
Therapeutic goals for glycemic control	Action suggested: > 8.0
	Age < 19 years
а ж.	Goal of therapy: <7.5

Note:

- Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

R UMA SAROJINI K MBBS..DCP..

Scan to Validate



%

mg/dL



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Patient Name : MRS. DIVYA KUMARI Age / Gender : 29 years / Female Patient ID : 60025 Referral : MediWheel

Collection Time : Sep 19, 2021, 09:33 a.m. Reporting Time : Sep 19, 2021, 03:30 p.m.

Sample ID :



Test Description

Value(s)

Reference Range

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

END OF REPORT

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Patient Name : MRS. DIVYA KUMARI	Referral : MediWh	eel	
Age / Gender : 29 years / Female		Collection Time :	Sep 19, 2021, 09:33 a.m.
Patient ID: 60025		Reporting Time :	Sep 19, 2021, 03:32 p.m.
		Sample ID :	004226221
Test Description	Value(s)	Reference Range	
RENAL PROFILE			
Urea Method : Uricase	18	15-36	mg/dL
Blood Urea Nitrogen-BUN Method : Serum, Urease	8.40	7 - 17	mg/dL
Creatinine Method : Serum, Jaffe	0.4	0.52-1.04	mg/dL
Uric Acid Method : Serum, Uricase	3.4	2.5 - 6.2	mg/dL
Sodium	-	137 - 145	mmol/L
Potassium	- 1	3.5 - 5.1	mmol/L
Chlorides	-	98-107	mmol/L

Remark:

In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.

END OF REPORT

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 Patient Name : MRS. DIVYA KUMARI
 Referral : MediWheel

 Age / Gender : 29 years / Female
 Collection Time : Sep

 Patient ID : 60025
 Reporting Time : Sep

 Sample ID :
 IIIII

Collection Time : Sep 19, 2021, 09:33 a.m. Reporting Time : Sep 19, 2021, 03:29 p.m. Sample ID :

Test Description	Value(s)	Reference Range	
LIPID PROFILE			
Cholesterol-Total Method : Spectrophotometry	166	Desirable level < 200 Borderline High 200-239 High >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	115	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	58	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	85	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic	23	6 - 38	mg/dL
CHOL/HDL Ratio	2.86	3.5 - 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic Note:	1.47	2.5 - 3.5	
8-10 hours fasting sample is required.			

END OF REPORT

DR.UMA SAROJINI .K MBBS.,DCP.,



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Patient Name : MRS. DIVYA KUMARI	Referral : MediWheel
Age / Gender : 29 years / Female	Collection Time : Sep 19, 2021, 09:33 a.m.
Patient ID: 60025	Reporting Time : Sep 19, 2021, 03:37 p.m.
	Sample ID : 004226221

Test Description	Value(s)	Reference Range	
LIVER FUNCTION TEST			
Total Protein	8.0	6.3 - 8.2	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.23	3.5 - 5.0	g/dL
Method : Serum, Bromocresol green			- (-1)
Globulin	3.77	1.8 - 3.6	g/dL
Method : Serum, EIA	19 19 20 1		
A/G Ratio	1.12	1.2 - 2.2	
Method : Serum, EIA			mg/dL
Bilirubin - Total	0.5	0.2 - 1.3	mg/ac
Method : Serum, Jendrassik Grof			mg/dL
Bilirubin - Direct	0.14	< 0.3	mg/ac
Method : Serum, Diazotization	0.00	0.0.11	mg/dL
Bilirubin - Indirect	0.36	0.0 - 1.1	mg/dL
Method : Serum, Calculated	28	14-36	U/L
SGOT	28	14-30	0/2
Method : Serum, UV with P5P, IFCC 37 degree	20	< 52	U/L
SGPT	20	< 5Z	0.12
Method : Serum, UV with P5P, IFCC 37 degree	136	38 - 126	U/L
Alkaline Phosphatase	150	00-120	0.2
Method : PNPP-AMP Buffer/Kinetic	<u> </u>	< 43	U/L
GGT-Gamma Glutamyl Transpeptidae	-		
Method : Serum, G-glutamyl-carboxy-nitoanilide			

END OF REPORT

DR.UMA SAROJINI .K MBBS.,DCP.,





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Patient Name : MRS. DIVYA KUMARI Age / Gender : 29 years / Female Patient ID : 60025

Referral : MediWheel

Sample ID :

Collection Time : Sep 19, 2021, 09:33 a.m.

Reporting Time : Sep 19, 2021, 03:34 p.m.



Test Description	Value(s)	Reference Range	
THYROID PROFILE TEST - TOTAL			
T3-Total	138.55	60 - 200	ng/dL

T4-Total	8.9	4.52 - 12	ug/dL
TSH-Ultrasensitive	5.42	0.32 - 5.5	ulU/mL
Method : CLIA		First Trimester : 0.1-2.5	
		Second Trimester : 0.2-3.0	
		Third trimester : 0.3-3.0	

Interpretation

TSH	тз	T4	Suggested Interpretation for the Thyroid Function Tests Pattern
Raised	Within range	Within range	Raised Within Range Within Range .Isolated High TSHespecially in the range of 4.7 to 15 m1U/m1 is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism.Intermittent 14 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 (anti-TPO antibodies)Intermittent 14 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,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 & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion'
Decreased	Decreased	Decreased	Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease).Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased Within Rang	Raised	Within range	T3 toxicosis •Non-Thyroidal illness
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in 13 level can be upto 25%

END OF REPORT

DR.UMA SAROJINI .K MBBS., DCP.,





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SID No.	:	61939
Name	:	MRS. DIVYA KUMARI
Age / Sex	:	29 Years / Female
Ref. By	:	MEDI WHEEL

Sample Collected and Sent

Patient ID : 60025

Registered On	: 20 Sep 21/11:16
Collected On	: 20 Sep 21/11:16
Reported On	: 20 Sep 21/16:36
	Page # : 1/1

Specimen	Test Name	Result	Units	Biological Reference Value /	Method
CLINICA	L PATHOLOGY				
Stool Com	<u>plete</u>				
Stool	Physical Examination	:			
Stool	Colour	Brownish			
Stool	Consistency	Semi Solid			
Stool	Mucous	Absent			
Stool	Blood	Absent			
Stool	Chemical Examination				
Stool	Reaction	Alkaline			
Stool	Occult Blood	Negative			
Stool	Microscopic Examination	:			
Stool	Ova & Cyst	Nil		*	
Stool	Pus Cells / HPF	3 - 5			-
Stool	RBC's / HPF	Nil			
Stool	Mucus threads	Absent			
Stool	Fat Globules	Absent			

END OF THE REPORT

DR.UMA SAROJINI .K MBBS., DCP.,

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Patient Name : MRS. DIVYA KUMARI	Referral : MediWheel
Age / Gender : 29 years / Female	Collection Time : Sep 19, 2021, 09:33 a.m.
Patient ID: 60025	Reporting Time : Sep 19, 2021, 03:36 p.m.
	Sample ID : 004226221

Reference Range

Value(s)

URINE COMPLETE ANALYSIS,

Test Description

	Physical Exa	mination	
Quantity	28	-	ml
Colour	Pale Yellow	Pale yellow/Yellow	
Appearance	Clear	Clear	
Specific Gravity	1.010	1.005-1.025	
pH	5.0	5.0 - 8.0	
Deposit	Present	Absent	
	Chemical Exa	mination	
Protein	Absent	Absent	
Sugar	Absent	Absent	
Ketones	Absent	Absent	
Bile Salt	Absent	Absent	
Bile Pigment	Absent	Absent	
Urobilinogen	Normal	Normal	
	Microscopic Exam	ination (/hpf)	
Pus Cell	2-4	Upto 5	
Epithelial Cells	1-2	Upto 5	
Red Blood Cells	Absent	Absent	
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous Deposit	Absent	Absent	
Yeast Cells	Absent	Absent	
Bacteria	Absent	Absent	
Other findings	Not seen	Not seen	

DR.UMA SAROJINI .K MBBS.,DCP.,





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Obli Towers, 594, D.B. Road, R. S. Puram, Coimbatore-641 002. Mobile : 99430 99994 email: info@arthiscans.com

Name	MRS.DIVYA KUMARI	Patient ID	61939
Accession No	60025	Age/Gender	29 Y / Female
Referred By	Dr.MEDIWHEEL	Date	19-Sep-2021

X-RAY - CHEST PA VIEW

OBSERVATION:

The trachea is central.

The mediastinal and cardiac silhoutte are normal.

Cardiothoracic ratio is normal.

Cardiophrenic and costophrenic angles are normal.

Both hila are normal.

Lung zones are clear.

Bones of the thoracic cage are normal.

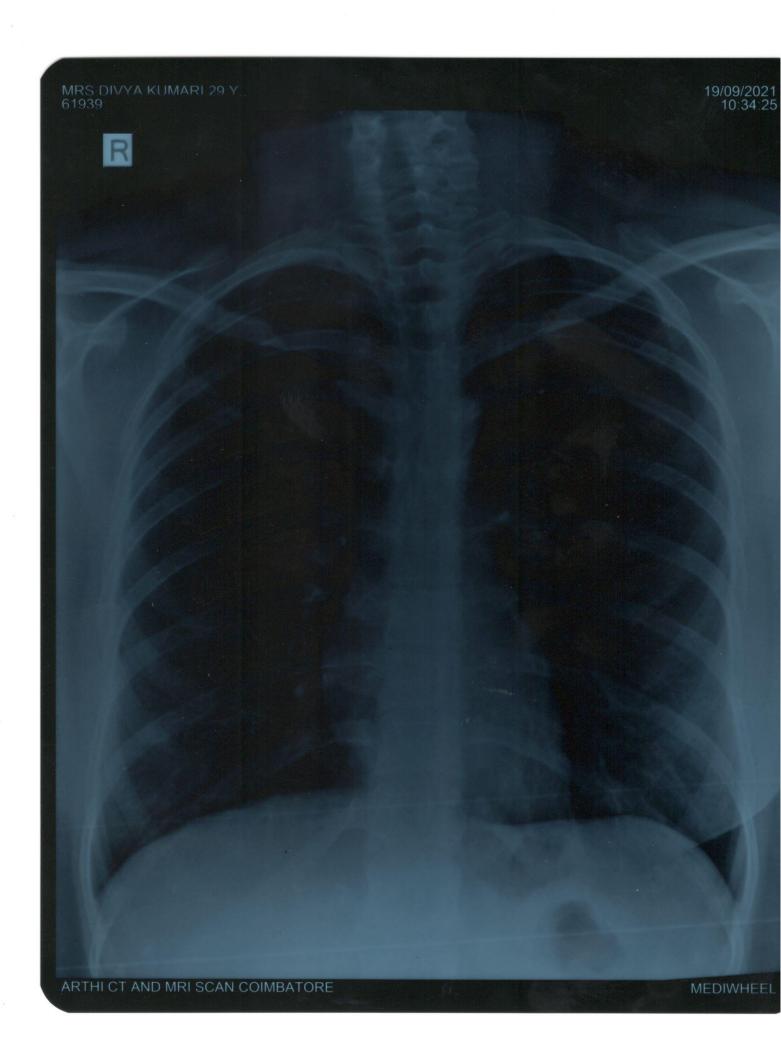
Soft tissues of the chest wall are normal.

IMPRESSION:

> No significant abnormality seen.

R binayo

Dr. Abinaya. R MDRD., Consultant Radiologist

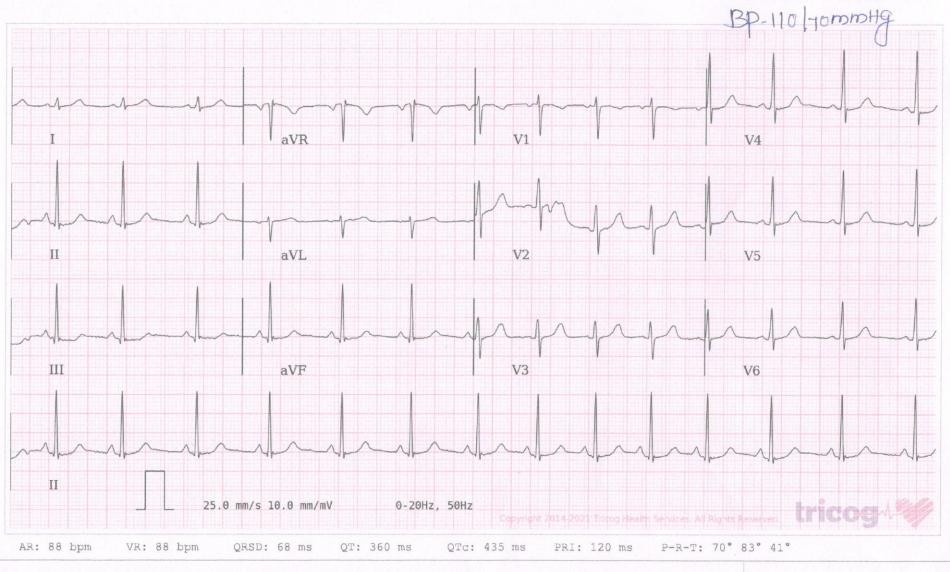


Aarthi CT and MRI Scans, R S Puram West



Age / Gender:29/FemalePatient ID:0000060025Patient Name:MRS. DIVYA KUMARI

Date and Time: 19th Sep 21 10:16 AM



ECG Within Normal Limits: Sinus Rhythm, Normal Axis, with Sinus Arrhythmia.Please correlate clinically.

AUTHORIZED BY

REPORTI

Sunithra Dr Sumi

Dr. Charit MD, DM: Cardiology

67297

5431

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a gualified abveigian

/