

**CONCLUSION OF HEALTH CHECKUP**

ECU Number : 9918	MR Number : 23230083	Patient Name: ARCHANA SINGH
Age : 49	Sex : Female	Height : 175
Weight : 86	Ideal Weight : 70	BMI : 28.08
Date : 07/03/2024		

- Hypothyroidism
- Continue the medicines.
- Repeat - Free TSH after 3 months.
- Life style modifications.

Dr. M. L. Verma

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

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Patient Name: ARCHANA SINGH  
Height : 175  
BMI : 28.08

Past H/O : K/C/O HYPOTHYROIDISM  
T. THYRONORM 25MCG OD

Present H/O : BACKACHE

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO

Gen.Exam. : G.C.GOOD

B.P : 150/90

Pulse : 84

Others : SPO2 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :

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### Ophthalmic Check Up :

	Right	Left
Ext Exam		NIL
Vision Without Glasses	6/6	6/6
Vision With Glasses	N.6 + 1.75 D SPH	N.6 + 1.75 D SPH
Final Correction	14.6	14.6
Fundus	NORMAL	
Colour Vision	NORMAL	
Advice	NIL	

### Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

### ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

### General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



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ESTD. 1964



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## Gynaec Check Up :

OBSTETRIC HISTORY	2 FTNDS
MENSTRUAL HISTORY	POSTMENOPAUSAL - 4 YRS.
PRESENT MENSTRUAL CYCLE	-
PAST MENSTRUAL CYCLE	-
CHIEF COMPLAINTS	NIL
PA	SOFT - (N) Vg
PS	UT NS Fx CLEAR
PV	NORMAL
BREAST EXAMINATION RIGHT	NORMAL
BREAST EXAMINATION LEFT	TAKEN
PAPSMEAR	
BMD	
MAMMOGRAPHY	
ADVICE	





Patient Name : Ms. ARCHANA SINGH  
 Gender / Age : Female / 49 Years 10 Months 22 Days  
 MR No / Bill No. : 23230083 / 242087906  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 205373  
 Request Date : 07/03/2024 08:04 AM  
 Collection Date : 07/03/2024 08:12 AM  
 Approval Date : 07/03/2024 12:39 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	<b>11.6</b>	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.29	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	39.1	%	36 - 46
Mean Corpuscular Volume (MCV)	91.1	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	27.0	pg	27 - 32
MCH Concentration (MCHC)	<b>29.7</b>	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<b>14.7</b>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	<b>48.6</b>	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	5.42	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	49	%	40 - 80
Lymphocytes	40	%	20 - 40
Eosinophils	<b>7</b>	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	2.64	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.16	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.37	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.22	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	226	thou/cmm	150 - 410
Remarks	This is counter generated CBC Report, smear review is not done		
ESR	<b>25</b>	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms. ARCHANA SINGH  
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**CBC + ESR**

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.  
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification.

ESR on ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Ameet Soni  
MD (Path)

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DEPARTMENT OF LABORATORY MEDICINE

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**Haematology**

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	A		
Rh system.	Positive		
By Gel Technology / Tube Agglutination Method			
Note :			
- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol			
- This method check`s group both on Red blood cells and in Serum for "ABO" group.			

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.

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DEPARTMENT OF LABORATORY MEDICINE

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**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	106	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	99	mg/dL	70 - 140

By Hexokinase method on EXL Dade Dimension

---- End of Report ----

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	6.0	%	
estimated Average Glucose (e AG) *	125.5	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

\* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides (Done by Lipase /Glycerol kinase on Vitros 5600 < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	<b>175</b>	mg/dL	1 - 150
Total Cholesterol (Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600. <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	<b>220</b>	mg/dL	1 - 200
HDL Cholesterol (Done by Colorimetric: non HDL precipitation method PTAMgCl <sub>2</sub> on Vitros 5600 < 40 Low > 60 High)	58	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	<b>162</b>	mg/dL	1 - 130
LDL Cholesterol (Done by Enzymatic (Two Step CHE/CHO/POD ) on Vitros 5600 < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	<b>116</b>	mg/dL	1 - 100
VLDL Cholesterol (calculated)	<b>35</b>	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	<b>2</b>		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	3.79		3.5 - 5

---- End of Report ----

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MD (Path). DCP.



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## DEPARTMENT OF LABORATORY MEDICINE

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## Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (Done by Endpoint/Colorimetric - Urease on Vitros 5600)	28	mg/dL	10 - 45
BUN	13.08	mg/dL	5 - 21
Creatinine (By Modified Kinetic Jaffe Technique)	0.81	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. eGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)	7.0 R/C	mg/dL	2.2 - 5.8

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.40	mg/dL	0 - 1
Bilirubin - Direct	0.18	mg/dL	0 - 0.3
Bilirubin - Indirect	0.22	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	34	U/L	13 - 35
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	25	U/L	14 - 59
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	<b>105</b>	U/L	42 - 98
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	24	U/L	5 - 55
<i>(Done by Multipoint Rate - L-γ<sup>3</sup>-glutamyl-p-nitroanilide on Vitros 5600)</i>			
<b>Total Protein</b>			
Total Proteins	8.03	gm/dL	6.4 - 8.2
Albumin	4.62	gm/dL	3.4 - 5
Globulin	<b>3.41</b>	gm/dL	3 - 3.2
A : G Ratio	1.35		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path). DCP.



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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (ng/ml)</i> 1 - 3 days : 0.1 - 7.4 1-11 months : 0.1 - 2.45 1-5 years : 0.1 - 2.7 6-10 years : 0.9 - 2.4 11-15 years : 0.8 - 2.1 16-20 years : 0.8 - 2.1 Adults (20 - 99 years) : 1.07 - 1.85 Pregnancy (in last 5 months) : 1.2 - 2.5 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	1.73	ng/ml	
Thyroxine (T4) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (mcg/dL)</i> 1 - 3 days : 11.8 - 22.6 1 - 2 weeks : 9.8 - 16.6 1 - 4 months : 7.2 - 14.4 4 - 12 months : 7.8 - 16.5 1-5 years : 7.3 - 15.0 5 - 10 years : 6.4 - 13.3 10 - 20 years : 5.6 - 11.7 Adults (20-99 years) : 5.91 - 12.98 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	10.39	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (microIU/ml)</i> Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (20-99 years) : 0.4001 - 4.049 Pregnancy : 1st trimester : 0.3 - 4.5 2nd trimester : 0.5 - 4.6 3rd trimester : 0.8 - 5.2 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	4.57	microIU/ml	
Test Remark	on tab		

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--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path). DCP.



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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	20	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	5.0		4.6 - 8.0
Specific Gravity	1.008		1.005 - 1.030
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	1+		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	1 - 5	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	<b>Absent</b>	/hpf	Absent
Organism	Absent		

Reference : Wallach`s Interpretation to laboratory test, 10th edition

--- End of Report ---

Dr. Rakesh Vaidya  
MD (Path). DCP.

Dr. Ameet Soni  
MD (Path)



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Mammography

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Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23230083      Report Date : 07/03/2024  
 Request No. : 190106491      07/03/2024 8.04 AM  
 Patient Name : Ms. ARCHANA SINGH  
 Gender / Age : Female / 49 Years 10 Months 22 Days

**X-Ray Chest AP**

Both lung fields are clear.  
 Both costophrenic sinuses appear clear.  
 Heart size is normal.  
 Hilar shadows show no obvious abnormality.  
 Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

**Dr. Priyanka Patel, MD.**

Consultant Radiologist



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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23230083      Report Date : 07/03/2024  
 Request No. : 190106565      07/03/2024 8.04 AM  
 Patient Name : **Ms. ARCHANA SINGH**  
 Gender / Age : Female / 49 Years 10 Months 22 Days

**Mammography (Both Breast)**

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show scattered fibro glandular parenchyma.  
 No obvious focal mass seen on either side.  
 No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.  
 No obvious skin thickening or nipple retraction seen.  
 Bilateral benign axillary lymph nodes seen.

**IMPRESSION:**

No obvious focal mass in breasts.  
 BI-RADS category 2.

Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, 1- negative, 2- benign, 3- probably benign (require short term follow up), 4- suspicious (require further evaluation with biopsy), 5- highly suspicious for malignancy, 6- biopsy proven malignancy.

**INFORMATION REGARDING MAMMOGRAMS:**

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

**Dr. Priyanka Patel, MD.**  
 Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED



Patient No. : 23230083      Report Date : 07/03/2024  
Request No. : 190106513      07/03/2024 8.04 AM  
Patient Name : **Ms. ARCHANA SINGH**  
Gender / Age : Female / 49 Years 10 Months 22 Days

**USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen**

**Liver is mild enlarged in size with raised echopattern.** No mass lesion identified. The hepatic veins are clear and patent.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.  
Spleen is normal in size and echopattern.

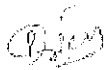
Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

No ascites.

**COMMENT:**

- **Mild hepatomegaly with fatty liver.**

Kindly correlate clinically.



**Dr. Priyanka Patel, MD.**

Consultant Radiologist



ECU

Patient No. : 23230083      Report Date : 07/03/2024  
Request No. : 190106496      07/03/2024 8.04 AM  
Patient Name : **Ms. ARCHANA SINGH**  
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**Echo Doppler Screening**

MITRAL VALVE : NORMAL, NO MR, NO MS  
AORTIC VALVE : NORMAL, NO AR, NO AS  
TRICUSPID VALVE : NORMAL, NO TR, NO PAH  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL LV SIZE AND SYSTOLIC FUNCTION LVEF -- 60%, NO  
RESTING REGIONAL WALL MOTION ABNORMALITY  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
COLOUR/DOPPLER FLOW MAPPING : NO MR, NO AR // TR, NO PAH

**FINAL CONCLUSION:**

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION, LVEF -- 60%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL DIASTOLIC FUNCTION
5. NORMAL RIGHT HEART SIZE AND RV PRESSURES
6. NORMAL CARDIAC VALVES, NO MITRAL // AORTIC STENOSIS
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

  
Dr. V.C. CHAUHAN, M.D., CARD.

Name Ms. Archana Singh  
Patient ID ECU/232330083

07.03.2024 08:12:33  
Standard 12-Lead

BHAJAL AMIN GENERAL HOSPITAL

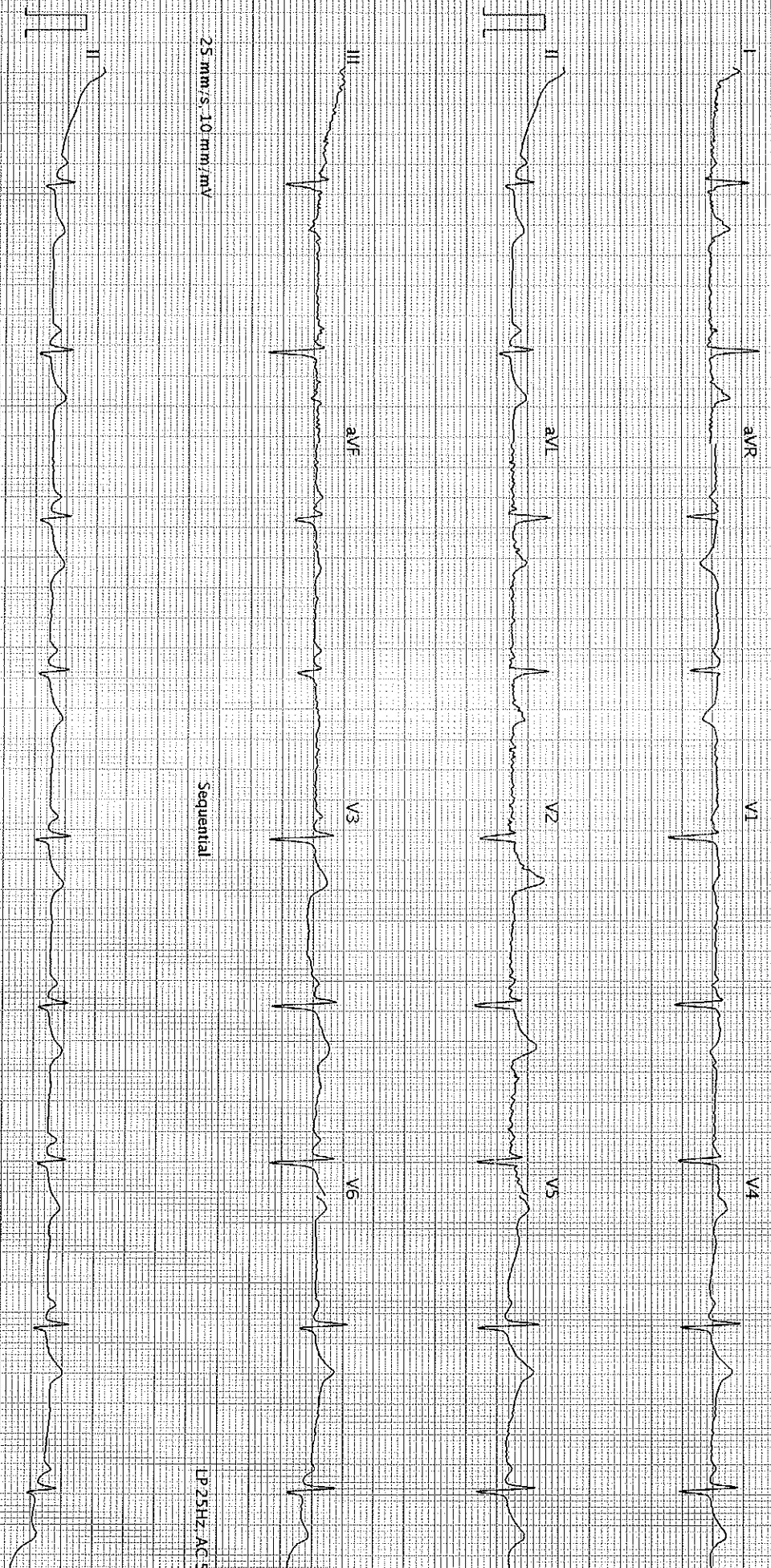
Age 049Y  
Gender Female  
Pacemaker Unknown

Ref. phys.

HR 55 bpm  
RR 1091 ms  
P 101 ms  
PR 142 ms  
QR 92 ms  
QT 440 ms  
QTc 421 ms  
P axis 60°  
QRS axis -18°  
T axis 0°

Unconfirmed report

*Handwritten signature*



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz

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