

2999


भारत सरकार
GOVERNMENT OF INDIA



बबिता
Babita
 जन्म वर्ष / Year of Birth :1987
 महिला / Female



4103 3593 7306


आधार - आम आदमी का अधिकार


P
Call
9785104624



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA


पता:
 W/O: विक्रम सिंह, वॉर्ड न. 9,
 पुरानी जेल के पास, खेतड़ी, झुंझुन,
 खेतड़ी, राजस्थान, 333503

Address:
 W/O: Vikram Singh, ward
 NO. 9, purani jel ke pass,
 Khetrj, Jhunjhunun, Khetri,
 Rajasthan, 333503

 1947
 1800 180 1947

 help@uidai.gov.in

 www.uidai.gov.in

 P.O. Box No.1947,
 Bangaluru-560 001

Rajasthanj Diagnostic & Medical Research Centre
Jhunjhunu



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RAJASTHANI DIAGNOSTIC & MRI CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMMOGRAPHY

NAME	BABITA	AGE-	SEX: F
REF/BY:	BOB MEDICAL HEALTH CHECK UP	DATE	25-Feb-23

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver: is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

Gall bladder: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

Pancreas: is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated

Rt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Lt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Spleen: is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

Urinary Bladder: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

Uterus: is normal in size, regular in shape and outline. Uterus is anteverted and ante flexed. Endometrium is normal in thickness. No sonolucent or echogenic mass lesion seen.

Adenexa: Both adenexal regions are seen normal. No focal mass or lesion is seen. bilateral ovary are normal in appearance.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

IMPRESSION:

❖ NORMAL SONOGRAPHY STUDY

Advised: clinicopathological correlation

DR. ANUSHA MAHALAWAT
MDRADIODIAGNOSIS

Dr. Anusha Mah. lawat
MD (Radiodiagnosis)
(RMC. 38742/25457)



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B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592 294977

Female

25.02.2023 12:03:23
RAJASTHANI DIAGNOSTICS CENTRE
JHUNDHUNU RAJ.

Location:
Order Number:
Visit:

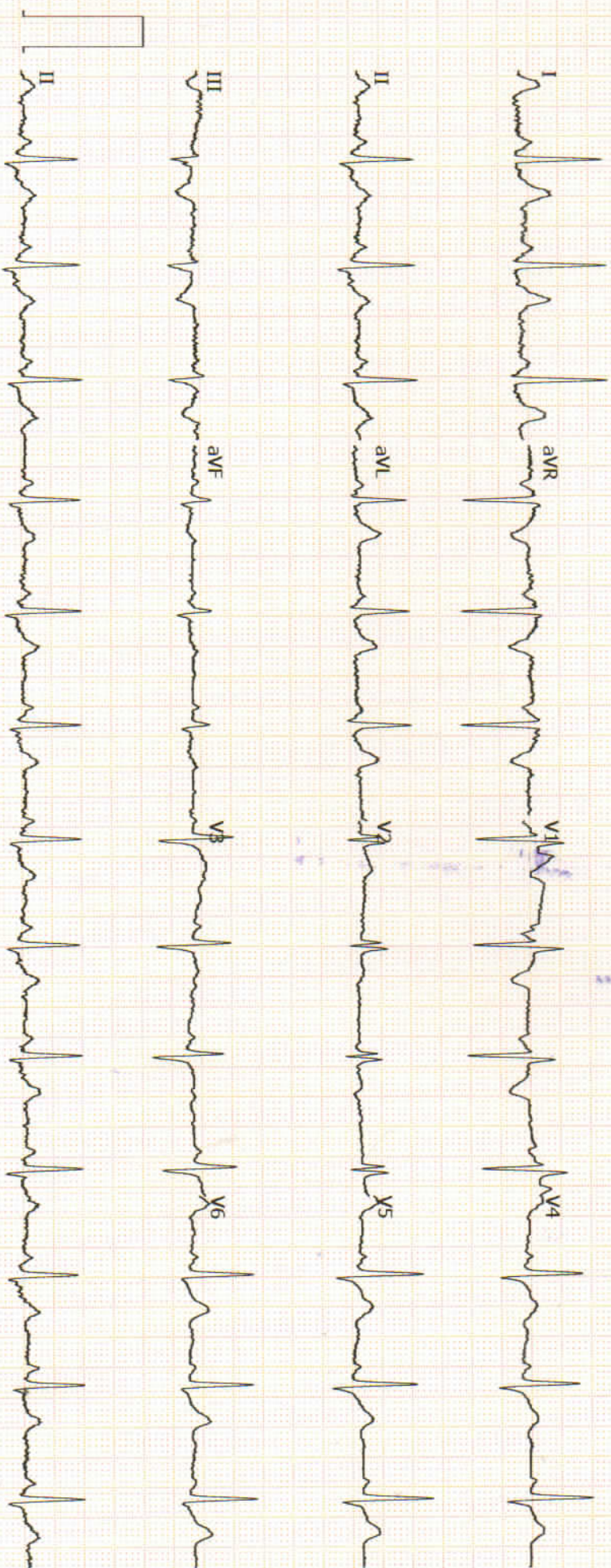
Room:

80 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 78 ms
QT / QTcBaz : 356 / 410 ms
PR : 110 ms
P : 54 ms
RR / PP : 746 / 750 ms
P / QRS / T : 71 / 21 / 11 degrees

Sinus rhythm with short PR
Otherwise normal ECG





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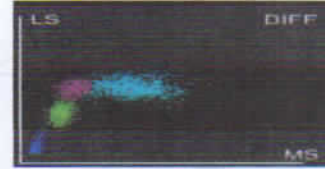
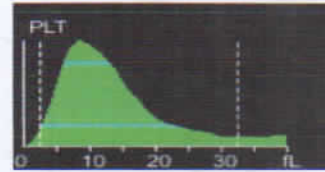
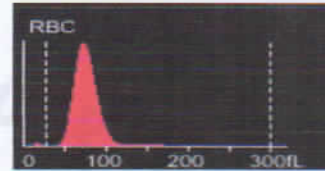
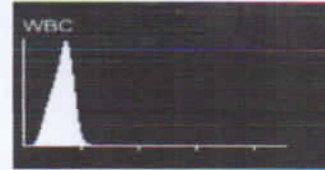
Hematology Analysis Report

First Name: BABITA
Last Name:
Gender: Female
Age: 36 Year

Sample Type:
Department:
Med Rec. No.:

Sample ID: 8
Test Time: 2023/02/25 11:12
Diagnosis:

Parameter	Result	Ref. Range	Unit
1 WBC	3.56 ↓	4.00-10.00	10 ³ /uL
2 Neu%	52.2	50.0-70.0	%
3 Lym%	34.3	20.0-40.0	%
4 Mon%	10.7	3.0-12.0	%
5 Eos%	2.4	0.5-5.0	%
6 Bas%	0.4	0.0-1.0	%
7 Neu#	1.86 ↓	2.00-7.00	10 ³ /uL
8 Lym#	1.22	0.80-4.00	10 ³ /uL
9 Mon#	0.38	0.12-1.20	10 ³ /uL
10 Eos#	0.09	0.02-0.50	10 ³ /uL
11 Bas#	0.01	0.00-0.10	10 ³ /uL
12 RBC	3.70	3.50-5.00	10 ⁶ /uL
13 HGB	10.6 ↓	11.0-15.0	g/dL
14 HCT	29.6 ↓	37.0-47.0	%
15 MCV	80.1	80.0-100.0	fL
16 MCH	28.5	27.0-34.0	pg
17 MCHC	35.6	32.0-36.0	g/dL
18 RDW-CV	14.3	11.0-16.0	%
19 RDW-SD	47.3	35.0-56.0	fL
20 PLT	287	100-300	10 ³ /uL
21 MPV	9.3	6.5-12.0	fL
22 PDW	11.2	9.0-17.0	fL
23 PCT	0.267	0.108-0.282	%
24 P-LCR	31.2	11.0-45.0	%
25 P-LCC	90	30-90	10 ³ /uL



Mamta Khutele
Dr. Mamta Khuteta
M D. (Path.)
RMC No : 4720/16260

Submitter: Operator: admin Approver:
Draw Time: 2023/02/25 11:11 Received Time: 2023/02/25 11:11 Validated Time:
Report Time: Remarks:

*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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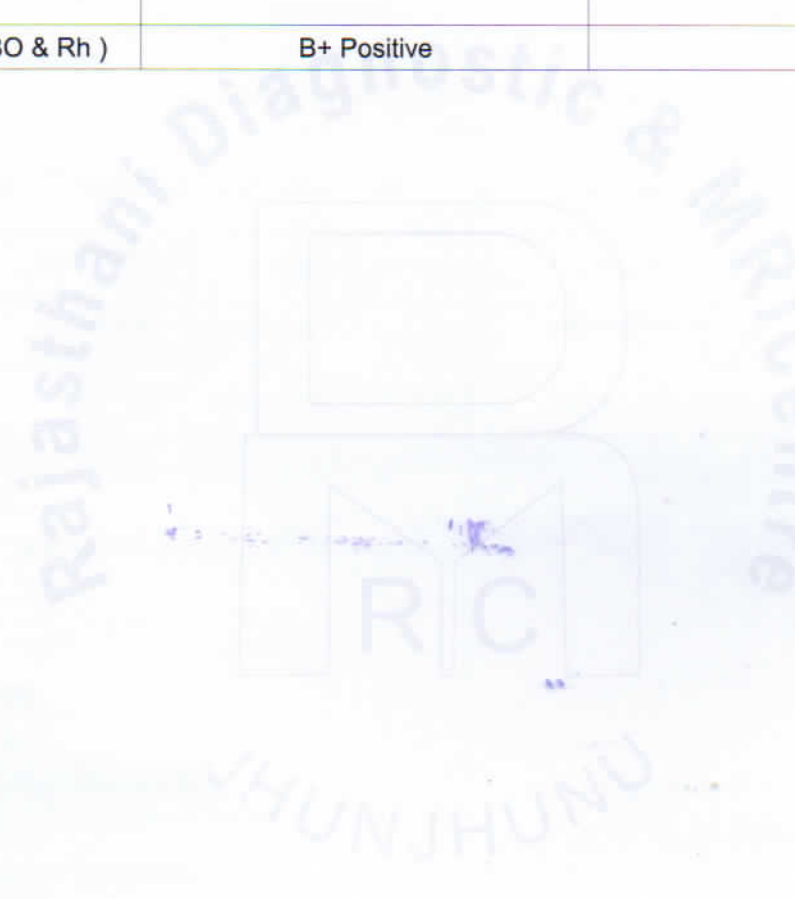


Laboratory Report

Name : **BABITA**
W/O : **VIKRAM**
Age : **36** Gender : **FEMALE**
Ref. By Dr : **MEDI WHEELFULLY BODY HEALTH CHEKEP**

Sr. Number : **61000**
Invoice Date : **25-02-2023 10:10 AM**
Invoice Number : **1197**
Registration No.: **1198**
Sample On : **25-02-2023 10:10 AM**
Report On : **25-02-2023 04:05 PM**

Test Name	Observed Values	Reference Intervals	Units
ESR (Erythrocyte Sedimentation Rate)	12	< 20	mm/hr
BLOOD GROUPING (ABO & Rh)	B+ Positive		



Nida
Dr. NIDA FAHMI
M.D.S. Pathology
Reg. No. A-4048



Mamta Khute
Dr. Mamta Khute
M.D. (Path.)
RMC No. : 4720/16260



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HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Reference Intervals	Units
HbA1c(Glycosylated hemoglobin)	4.60	< 5.8 % : Non Diabetic 5.8 - 6.6 % : Near Normal 6.7 - 7.6 % : Excellent 7.7 - 8.6 % : Good 8.7 - 9.6 % : Fair 9.7 - 10.6 % : Poor 10.7 - 11.6 % : Very Poor > 11.7 % : Out of Control	%
eAG (Estimated Average Glucose)	85.32		mg/dL
eAG (Estimated Average Glucose)	4.74		mmol/L

Method : **Fluorescence Immunoassay Technology**

Sample Type : **EDTA Blood**

Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

Nida
Dr. NIDA FAHMI
M.D.S. Pathology
Reg. No. A-4048

TECHNOLOGIST

Mamta Khuteta
Dr. Mamta Khuteta
M.D. (Path.)
GMC No. : 4720/16260

PATHOLOGIST

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Test Name	Observed Values	Reference Intervals	Units
Blood Sugar Fasting	76.00	60--110	mg/dL
Blood Sugar PP	92.00	< 140	mg/dL

RENAL FUNCTION TEST

Test Name	Observed Values	Reference Intervals	Units
Blood Urea	31.00	13--45	mg/dL
Creatinine	0.92	0.4--1.4	mg/dL
Uric Acid	6.22	3.6--8.2	mg/dL
Calcium	9.56	8.5--11	mg/dL
Gamma glutamyl transferase (GGT)	29.00	< 50	U/L

Nida
Dr. NIDA FAHMI
M.D.S. Pathology
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Sr. Number : **61000**
Invoice Date : **25-02-2023 10:10 AM**
Invoice Number : **1197**
Registration No.: **1198**
Sample On : **25-02-2023 10:10 AM**
Report On : **25-02-2023 04:05 PM**

Liver Function Test

Test Name	Observed Values	Reference Intervals	Units
S.G.O.T.	35.00	0-45	U/L
S.G.P.T.	31.00	0-45	U/L
Bilirubin(Total)	0.72	0.1-1.4	mg/dL
Bilirubin(Direct)	0.14	0-0.3	mg/dL
Bilirubin(Indirect)	0.58	0.1-0.9	mg/dL
Total Protein	6.79	6-8	mg/dL
Albumin	3.71	3.5-5	mg/dL
Globulin	3.08	3-4.5	mg/dL
A/G Ratio	1.20	0.5 - 1.2	g/dL
Alkaline Phosphatase	119.0	108-306	U/L

LIPID PROFILE COMPLETE

Test Name	Observed Values	Reference Intervals	Units
Cholesterol	169.00	110-200	mg/dL
HDL Cholesterol	40.00	35-88	mg/dL
Triglycerides	102.00	40-165	mg/dL
LDL Cholesterol	108.60	0-150	mg/dL
VLDL Cholesterol	20.40	0-35	mg/dL
TC/HDL Cholesterol Ratio	4.22	2.5-5	Ratio
LDL/HDL Ratio	2.71	1.5-3.5	Ratio

Nida
Dr. NIDA FAHMI
M.D.S. Pathology
Reg. No. A-4048

TECHNOLOGIST
FOR SERVICE

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Mamta Khuteta
Dr. Mamta Khuteta
M.D. (Path.)
RMC No. : 4720/16260

PATHOLOGIST



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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMMOGRAPHY

Laboratory Report	
Name : BABITA	Sr. Number : 61000
W/O : VIKRAM	Invoice Date : 25-02-2023 10:10 AM
Age : 36 Gender : FEMALE	Invoice Number : 1197
Ref. By Dr : MEDI WHEELFULLY BODY HEALTH CHEKEP	Registration No. : 1198
	Sample On : 25-02-2023 10:10 AM
	Report On : 25-02-2023 04:05 PM

T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Reference Intervals	Units
T3 (Total Triiodothyronine)	0.81	0.5--1.5 ng/dL	ng/ML
T4 (TotalThyroxine)	7.46	4.60-12.5 µg/dL	µg/dL
TSH (Thyroid Stimulating Hormone)	0.83	0.38 -- 5.5 µIU/mL	µIU/mL

Interpretation of TSH :-

Children

3.20 - 34.6 µIU/mL
0.70 - 15.4 µIU/mL
0.70 - 9.10 µIU/mL
0.70 - 6.40 µIU/mL

Pregnancy

1- 2 Days 0.30 - 4.50 µIU/mL 1st Trimester
3 - 4 Days 0.50 - 4.60 µIU/mL 2nd Trimester
15 Days - 5 Months 0.80 - 5.20 µIU/mL 3rd Trimester
5 Months - 20 Years

Interpretation of TSH :- Sample Type : Serum

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS) Abbott USA

Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

Test Name	Observed Values	Reference Intervals	Units
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

Nida
Dr. NIDA FAHMI
M.D.S. Pathology
Reg. No. A-4048



Mamta Khuteta
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MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME : BABITA DEVI	SEX : F
REF. BY : BOB MEDICAL HEALTH CHECUP UP	DATE: 25.02.2023

X-RAY CHEST (PA)

Both lung fields appear normal in under view

No e/o consolidation or cavitations is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

Ust

DR. UMMED SINGH RATHORE
MD RADIODIAGNOSIS
RMC NO. - 34498/24812

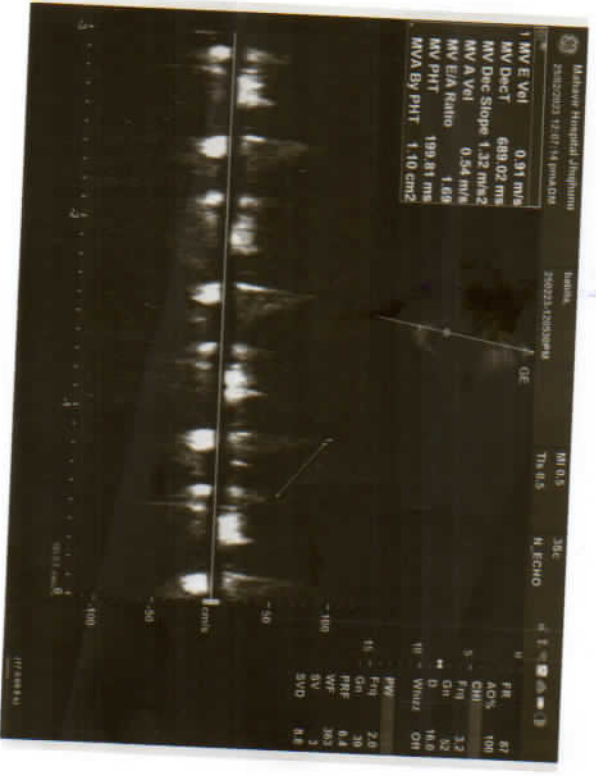
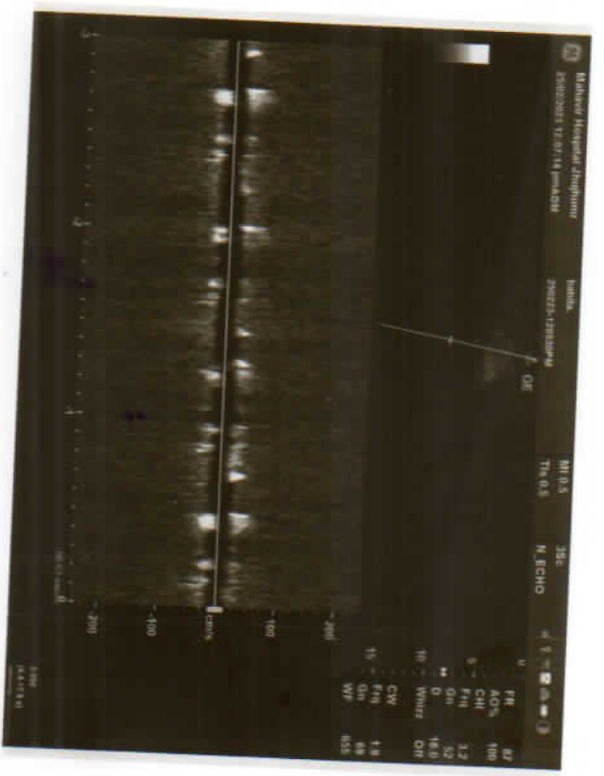
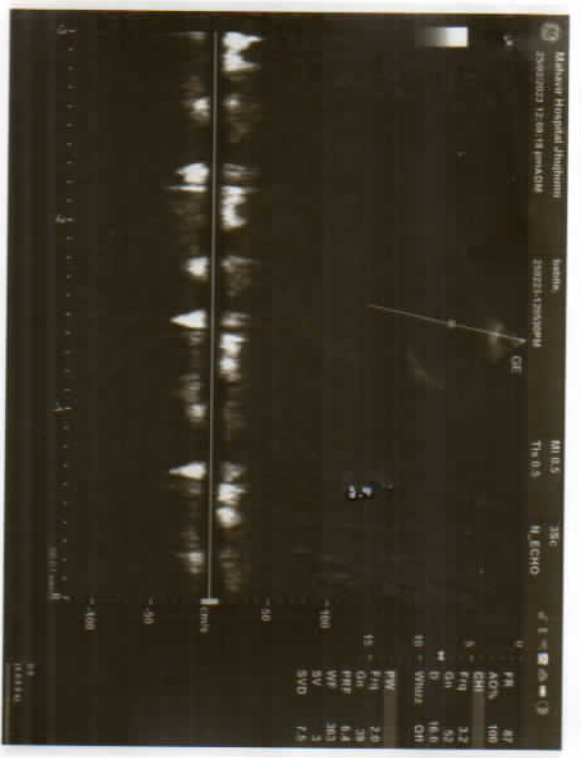
Dr. Ummed Singh
MD (Radiodiagnosis)
(RMC. 34498/24812)



आपातकालीन सेवाएं

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Patient name: Babita

Date: 25/02/2023

Age/sex: 36y/female

Ref doctor: Dr MS Meel

TRANSTHORACIC ECHO-DOPPLER TEST REPORT

MITRAL VALVE-

Morphology AML-Normal/Thickening/Calcification/Flutter/Restricted mobility/SAM/Doming.

PML-Normal/Thickening/Calcification/Prolapse/Fixed/Restricted Mobility/Flutter.

Doppler- Normal/Abnormal

Mitral E/A Velocity= 91/54 (cm/sec).

Mitral Regurgitation Absent/Trace/Mild/Moderate/Severe.

Mitral Stenosis Absent/Present.

TRICUSPID VALVE-

Morphology -Normal/Atresia/Thickening/Calcification/Prolapse/Doming.

Doppler- Normal/Abnormal

Tricuspid Regurgitation Absent/Trace/Mild/Moderate/Severe.

Tricuspid Stenosis Absent/Present.

PULMONARY VALVE-

Morphology -Normal/Atresia/Thickening/Doming/Vegetation.

Doppler- Normal/Abnormal

Pulmonary Velocity = 79 (cm/sec)

Pulmonary Regurgitation Absent/Trace/Mild/Moderate/Severe.

Pulmonary Stenosis Absent/Present.

AORTIC VALVE-

Morphology -Normal/Thickening/Calcification/Flutter/Sclerosis/Doming.

No of Cusps- 1/2/3.

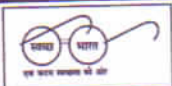
Doppler- Normal/Abnormal

Aortic Velocity = 109 (cm/sec)

Aortic Regurgitation Absent/Trace/Mild/Moderate/Severe.



भूयः सिंग परीक्षण करणा व कनधाना दण्डनीय उपराय हे
इमकी शिकारत 104 टोल फ्री संवा पा की ज सकती हे



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(कृपया अपनी पुरानी रिपोर्ट साथ लावें)



Aortic Stenosis

Absent/Present.

Aorta = 2.6cm (2.0 – 3.7cm)

Left Atrium = 4.5 cm (1.9 – 4.0 cm)

LV measurement

Diastole

Systole

IVS

0.64 cm (0.6-1.1cm)

0.88 cm

LVID

5.5 cm (3.7-5.6cm)

4.4 cm (2.2 – 4.0 cm)

LVPW

1.04 cm (0.6-1.1cm)

1.06 cm

LV

Normal/Enlarged/Clear/Thrombus/Hypertrophy.

Contraction Normal/Reduced.

Regional wall motion abnormality : Present/Absent.

LA **Normal/Enlarged/Clear/Thrombus.**

RA **Normal/Enlarged/Clear/Thrombus.**

RV **Normal/Enlarged/Clear/Thrombus.**

COMMENTS & SUMMARY-

ECHO window-Good/Fair/Poor.

No regional wall motion abnormality seen, LVEF=55%.

Normal cardiac chamber dimensions seen.

Trace MR, trace TR, no PAH.

Normal systolic function

Normal diastolic function.

No I/C clot/vegetation.

Intact IAS/IVS & No CoA, no pericardial effusion.

Dr. M. S. Meel

MD (Medicine)

Reg No 7937/2835

Mahavir Hospital, Jhunjhunu

Dr M S Meel

MD Medicine

Dr Pallavi Choudhary

MD Paediatrics



Senior Physician

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Consent (अवगत अपनी पुरानी रिपोर्ट साथ लावे)

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भूख लिए परीक्षण करना ये कपडाला दण्डनीय अपराध है
इसकी दण्डन 104 टोल फ्री सेवा पर की जा सकती है