

THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

PROPOSAL NO.

Date

02/10/2021

Patient Name

MRS PREETI BHARDWAJ

Age

35 Yrs.

Ref. By Dr.

M. N. THAREJA

Sex

F

PART - X-RAYED :

X-RAY CHEST PA VIEW

REPORT

X-RAY CHEST P.A. VIEW

:-

Chest is bilaterally symmetrical.

:-

C.P. Angles are clear.

CONCLUSSION: Normal Study

DI Signature of Doctors
Thareja Nursing Home

Alwar-301001, (Raj.)





मेरा आधार, मेरी पहचान

(Brevolwa)

Dr. M. N. THAREJA
MBBS
Thareja Nursing Home
Alwar-301001, (Raj.)





PROPOSAL NO. PKG-10000228

THAREJA NURSING HOME



02/10/2021

Elisa Method

4-6%

Less Then 4.0 Ng/ml

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Ref. By Dr.	M. N. THAREJA		Age Sex	35Yrs.
	Details of packages	Patients report	Units	Normal value
	HB	11.1	gm%	M-11.5-18
	TRBC	4.14	million /cu mm	M-4.0-5.5, F-3.9-5.6
	TWBC	6400	cu mm	4000-11000
	Polymorphs	65	%	42-75
DLC	Lymphocytes	30	%	20-50
	Eosinophil	05	%	1-6
	ESR	03	mm 1" Hr.	M-0-9, F-0-20
	Platelets	158000	Lack / cu mm	1.5-4
	PCV	31.3	%	37-54
	MCV	75.6	Cubicmicrons	86-96
	MCH	26.8	Picograms	26-34
	MCHC	35.5	%	32-36
Blood Grouping & Rh Factor		"O"Rh+Ve(Positive)		
	Blood BUN	11.0	Mg%	7-21
	S.Creatinine	0.81	Mg/100ml	0.9-1.4 mg/100 ml
	VDRL	-		

4.9

HIV I & II

HbA1C

PSA

10.1			1.48/1111	Less Then 4.0 (vg/m)		
		Details of packages	Patients report	Units	Normal value	
LFT		GGTP	19	U/L	5-60	
		SGOT	15	Units / ml	Upto 40	
		SGPT	18	Units / ml	Upto 40	
		Total	0.32	mg%	Upto 1.2	
		Direct	0.14	mg%	0-0.25	
		Indirect	0.18	mg%	0-0.60	
	e pili-di-	T. Protein	7.42	Gm%	6.2-8.3	
	S. Bilirubin	S. Albumin	4.26	Gm%	3.2-5.3	
		Globulin	3.16	Gm%		
	1 1 1 1	Alkaline phosphate	125	IU/L	60 - 170	
		S. Calcium		Gm%	8.5-10.5	
		Uric Acid	4.1	Mg%	2.5-7 mg%	
		Blood Sugar Fasting	77	Mg%	60-110 mg %	
		Blood Sugar PP	112	Mg%	Upto 160	
Lipid S. Cholesterol			220	mg%	120-220	
Profile		S. Triglycerides		mg/ml	Upto 170	
	HDL Choles	HDL Cholesterol		IU/L		
	LDL chole	LDL cholesterol		TU/L	450 at 37° C	
	VLDL	VLDL		mg %	Upto 35	
		Routine	Urine Analysis	1 8	1 - 1 - 1 - 1	
Physical/ Chemical		Microscopie:				
		Clear	RBCs	Nil		
		1010	WBCs	1-2/ HPI	F	
Ph		ACIDIC	Epith. Cells	1-2/HPF		
Albumin		Nil	Casts	Nil		
Glucose		Nil	Crystals	Nil		
Ketones			Bacteria	Nil	1111	
ni i						

Signature of Technician

Blood

Thareja Nursing Home Alwar-301001, (Raj.)

PP.Glucose

Nil

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GUPTA ENT AND HEART CENTRE

Dayanand Marg, Nangli Circle, Alwar (Raj.) Ph. 0144-3591336 | M. 7378184427

Echocardiography Report

Name Age / Sex : Mrs. Preeti Bhardwaj : 35yrs./Female Refd by: Dr. M.N. Thareja Date : 2 October 2021

Clinical Diagnosis

For Cardiac Evaluation

2D Echocardiography Findings

Mitral Valve Aortic Valve Tricuspid Valve

Normal Normal Normal

Pulmonary Valve Left Atrium

3.1cm: Normal

Left Ventricle : Normal LV size with normal LV systolic function. No RWMA

 LVIDd
 4.4cm.
 IVSd
 0.7cm.
 EF
 60%
 Visual

 LVIDs
 2.3cm.
 PWd
 0.8cm.
 EF
 %
 F.S.

Right Atrium Right Ventricle Normal Normal

Aorta
Pulmonary Artery
Pulmonary Veins

2.3cm: Normal Normal

Pulmonary Veins Superior Venacava Inferior Venacava Pericardium : Normal : Normal : Normal

Intracardiac Masses IAS/IVS

: No Intracardiac masses seen : Intact

Doppler Findings:

Mitral Valve
Aortic Valve
Tricuspid Valve

Ö.					
	Peak Velocity (cm/s)	Peak Gradient (mmHg)	Mean Gradient (mmHg)	Regurgitation Grade	others/comments
	E-/A-99/87			No MR	
	144				
				Trace TR, No PAH.	

Diagnosis

Pulmonary Valve

Transthoracic echo done in supine position at resting heart rate of 90bpm, shows

Normal LV size with normal LV systolic function. LVEF~60% (Visual).

No RWMA.

86

Other cardiac chambers are normal in Size.

No MR, Trace TR, No PAH.

Normal MIP.

No pericardial effusion / Vegetation / Clot Intracardiac masses seen.

Normal left sided arch of aorta, No Coarctation.

Dr. Prachi Gupta MBBS, PGDCC (Non-invasive cardiologist)

Please correlate clinically

Dr. M. N. THAREJA



No Pain

Mild Pain

Distressing

Disressing

Intense

Excruciating

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Name			Way 354			, ,
VITALS	B.P.	Pulse	Temp.	Wt.	Ht.	Allergies
Complaints		Bout	1200 88	10 C ON	ook u	DR. M.N. THAREJA 7233 (RMC) Family Physician
Findings	11	Rout	(je ch		DR. SAVITA THAREJA 7600 (RMC) Infertility Specialist
VA (5 ,	C10.2	Hea Cl	2000 B	15	DR. JAYANT THAREJA A-0824 (RSDS) Ex. Sr AIIMS
Color	usra					DR. SHIVANI THAREJA 10807 / 31220 (RMC) Ophthalmologist
Treatment	Ad	lv lon				DR. PRERNA THAREJA A-3574 MDS (Endodontics) Ex. Sr AIIMS
Both	eyas	within	worms	al lini	t	DR. H.R. GUPTA 1744 (RMC) Sr. Surgeon, MS. Gen.
			M.S.	hivani Thar (OPHTHAL)		DR. VARUN SAPRA Reg. No. 70990 DNB, Ortho
Pain 0 Scale		2	L.V.P	TASAG EYO INS	ANT	10



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aae

Name: PREETI BHARDUWAJ

35

Sex: FEMALE

Ref. By: DR M.N. THAREJA

Lab No. :

Date: October 2, 2021

HORMONES & MARKERS

Test	Value	Units	Biological Ref. Values
T3 (Total Triiodothyronine)	1.06	ng/dL	0.60-1.81 ng/dL Adults
T4 (TotalThyroxine)	4.60	$\mu g/dL$	3,2-12.60 µg/dL : Adults
TSH (Thyroid Stimulating Hormone)	3.92	μIU/mL	Adults: $0.35-5.50 \mu\text{IU/mL}$

Interpretation of TSH :-

Children

0 Days: 1.0~39.0 ulu/mL 5 days: 1.7~9.1 ulu/mL 1 year: 0.4~8.6 ulu/mL 2 years: 0.4~7.6 ulu/mL 3 years: 0.3~6.7 ulu/mL 4-19 years: 0.4~6.2 ulu/mL

Interpretation of TSH :-

Children

3.20 - 34.6 µIU/mL 1- 2 Days 0.70 - 15.4 µIU/mL 3 - 4 Days 0.70 - 9.10 µIU/mL 15 Days - 5 Months 0.70 - 6.40 µIU/mL 5 Months - 20 Years

Adults

20-54 years : 0.35-5.50 uIU/mL 55-87 years : 0.5-8.9 uIU/mL

Pregnancy

1st Trimester : 0.30 - 4.50 μIU/mL 2nd Trimester : 0.50 - 4.60 μIU/mL 3rd Trimester : 0.80 - 5.20 μIU/mL

Pregnancy

 $\begin{array}{ll} 0.30 - 4.50 \; \mu IU/mL & 1st \; Trimester \\ 0.50 - 4.60 \; \mu IU/mL & 2nd \; Trimester \\ 0.80 - 5.20 \; \mu IU/mL & 3rd \; Trimester \end{array}$

Method : Fluorescence Immunoassay Technology

Sample Type: Fresh Blood Serum

Remarks:

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as T8H 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.

Dr. WW. TIANEJA Signature of MBBS Thateja Nursing 16881



THAREJA SONOGRAPHY CENTRE

1, Ram Kuteer, Company Bagh Road, ALWAR - 🖀 (0144) 2700184

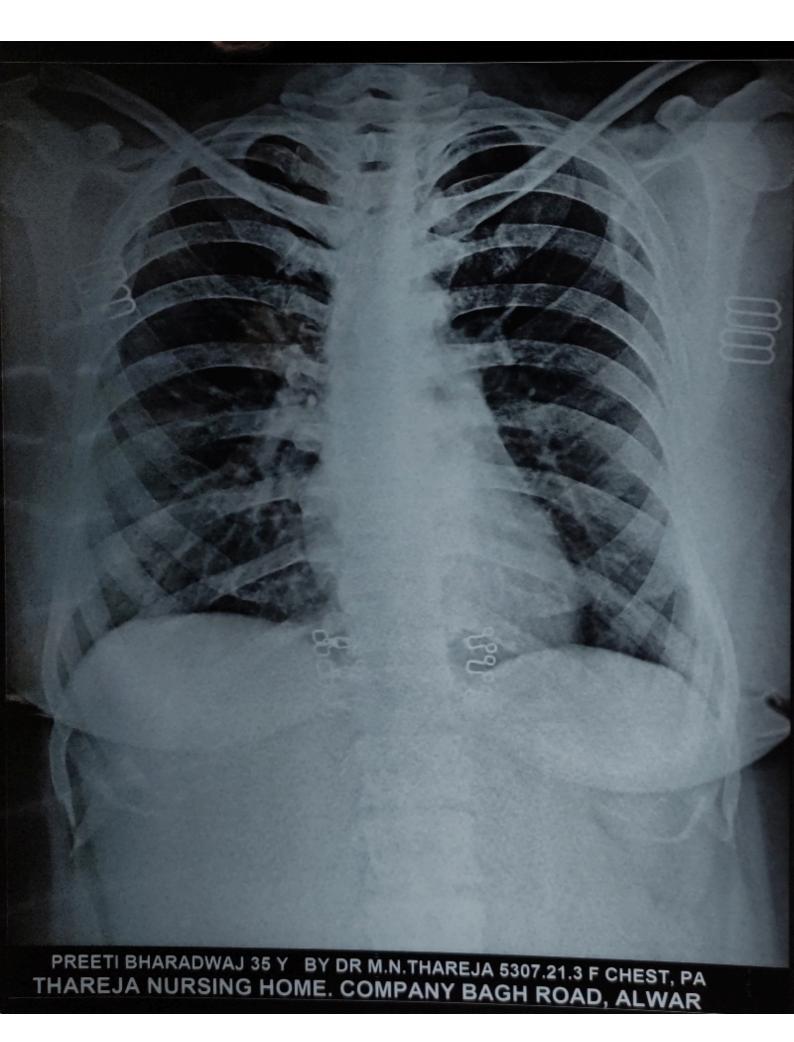


This report is not valid for MLC Purpose

		Tilla Teport la llot	rand for MLO Purpo:	30	027	10/2021
					02/	10/2021
ef. No).			Date		
	Name of Patient M Ref.By: DR M.N T	RS PREETI BHARDU\ HAREJA Sonography Re	VAJ Age port – abdomen	36 yrs	Sex	F
	LIVER:	Size: RL; 13.6 Margins: Regular Parenchyma: Echo	Cm. I. H. B.	L. L.: 5.6 Cm R.: ND		
	C. B. D.	Size: 3 mm.		LUMEN: Clear		
	P.V.	Size: mm	LUME	N: Clear		
	GALL BLADDER: Wall thickness: N PANCREAS: N SPLEEN: cm	: 3.2X1.8 cm	LUME	N: Clear		
	KIDNEYS: Size:-	Right: 9.7X4.2	cm Left: 9	.4X4.4 cm		
	Cortico – M RETROPERITONI LYMPH – NODES PLEURAL EFFUS ASCITES URINARY BLADD Prevoiding Volume Wall Thickness UTERUS Size End	SION : Not se	Shape: BULKY	Positio	n:- AV	
	My Cervix: size N	ometrium :Bright N Right :- - Upper Abd :- Nor	mal study	- N		
		Lower Abd :- BU	-	9		/

Dr. Savita Thanks

Reg. No. 7600 RMC



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