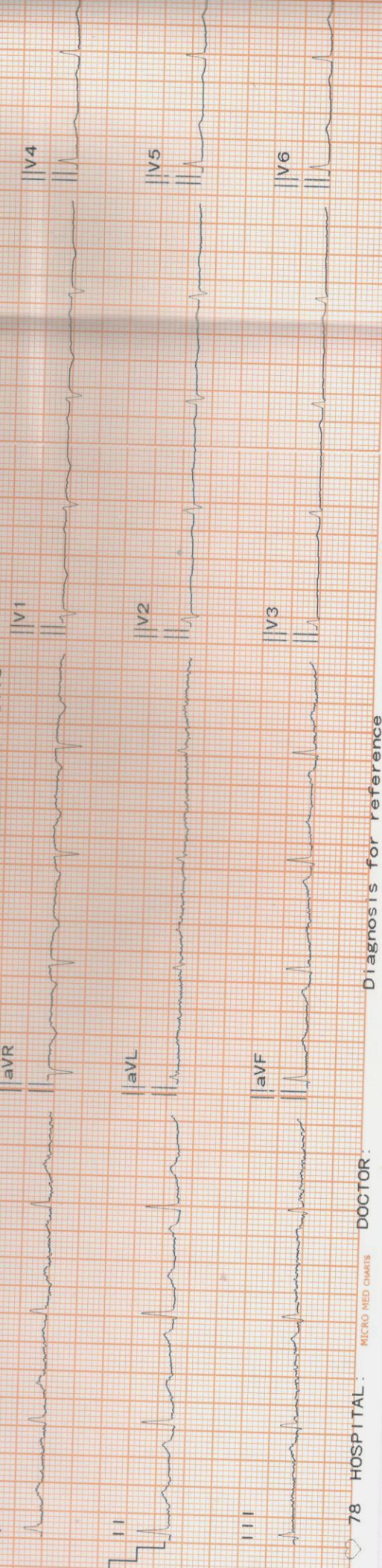


AUTO PRINT 3X4 10/5mm/mv 0 50HZ-25HZ AC 50HZ 25mm/s 2024-03-05 10:10



78 HOSPITAL: MICRO MED CHARTS DOCTOR: Diagnosis for reference

12 8020

||V4



||V5



||V6



ID : 2403050005

NAME :

AGE :

HEIGHT :

HR :

P Dur :

PR int :

QRS Dur :

QT/QTc int :

P/QRS/T axis :

RV5/SV1 amp :

RV5+SV1 amp :

RV6/SV2 amp :

BP :

SEX :

WEIGHT :

78 bpm

111 ms

177 ms

87 ms

376/429 ms

75/52/47 °

0.733/0.469 mV

1.202 mV

0.734/0.295 mV

mmHg

kg

Minnesota Code
9-1-2 (V1, V2, V3)
9-4-1 (V3)

Diagnosis Info
800 Sinus Rhyth
132 Low Voltage
121 Counter Clo

Confirmed By:

MICRO MED CHAIRS

2D ECHO / COLOUR DOPPLER

NAME : MRS. ANITA RAMANE M
REF BY : HOSPITAL PATIENT

47Yrs/F

OPD
05-Mar-24

M - Mode values

Doppler Values

AORTIC ROOT (mm)	25	TAPSE (mm)	24
LEFT ATRIUM (mm)	30	PULMONARY PG (mmHg)	2
RV (mm)		AORTIC VEL (m/sec)	1
LVID - D (mm)	41	PG (mmHg)	4
LVID - S (mm)	26	MITRAL E VEL (m/sec)	0.8
IVS - D (mm)	10	A VEL (m/sec)	0.6
LVPW -D (mm)	10	TRICUSPID VEL. (m/sec)	
EJECTION FRACTION (%)	60%	PG (mmHg)	

REPORT

Normal LV size & wall thickness.
No regional wall motion abnormality
Normal LV systolic function, LVEF 60%
Normal sized other cardiac chambers.

Pliable mitral valve., Trivial Mitral regurgitation.
Normal mitral diastolic flows.


Trileaflet aortic valve. No aortic stenosis / regurgitation.

Normal Tricuspid & pulmonary valve. No tricuspid regurgitation,
PA pressure = 20 mmHg - normal

Intact IAS & IVS
No PDA, coarctation of aorta.
No clots, vegetations, pericardial effusion noted.

IMPRESSION :

Normal study.
No regional wall motion abnormality.
Normal biventricular function, LVEF 60%
Normal PA pressure.



DR. RAJDATT DEORE
MD,DM-CARDIOLOGIST
MMC 2005/03/1520



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
 Company Name : BANK OF BARODA
 Referred By : Dr.HOSPITAL PATIENT

Lab No : 12707
 Req.No : 12707

Collection Date & Time: 05/03/2024 09:02 AM
 Reporting Date & Time : 05/03/2024 02:51 PM
 Print Date & Time : 05/03/2024 02:55 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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HAEMATOLOGY

HAEMOGRAM

HAEMOGLOBIN (Hb)	: 12.2	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 37.9	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 4.24	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 89.4	cu micron	76 - 96
M.C.H.	: 28.8	pg	27 - 32
M.C.H.C	: 32.2	picograms	32 - 36
RDW-CV	: 12.4	%	11 - 16
WBC TOTAL COUNT	: 5230	icumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 16000 CHILD 1MONTH-<1YR : 4000 - 10000 150000 - 450000
PLATELET COUNT	: 234000	cumm	
WBC DIFFERENTIAL COUNT			
NEUTROPHILS	: 62	%	ADULT : 40 - 70 CHILD : 20 - 40 2000 - 7000
ABSOLUTE NEUTROPHILS	: 3242.60	µL	
LYMPHOCYTES	: 31	%	ADULT : 20 - 40 CHILD : 40 - 70 1000 - 3000
ABSOLUTE LYMPHOCYTES	: 1621.30	µL	
EOSINOPHILS	: 03	%	01 - 04
ABSOLUTE EOSINOPHILS	: 156.90	µL	20 - 500
MONOCYTES	: 04	%	02 - 08
ABSOLUTE MONOCYTES	: 209.20	µL	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	µL	0 - 100

Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412

Pathologist

For Free Home Collection Call : 9545200011



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
 Company Name : BANK OF BARODA
 Referred By : Dr.HOSPITAL PATIENT

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PERIPHERAL BLOOD SMEAR

RBC MORPHOLOGY : Predominantly Normocytic Normochromic, Hypochromic
 : Few, Microcytes +.
 WBC MORPHOLOGY : Within Normal Limits
 PLATELETS : Adequate
 PARASITES : Not Detected

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

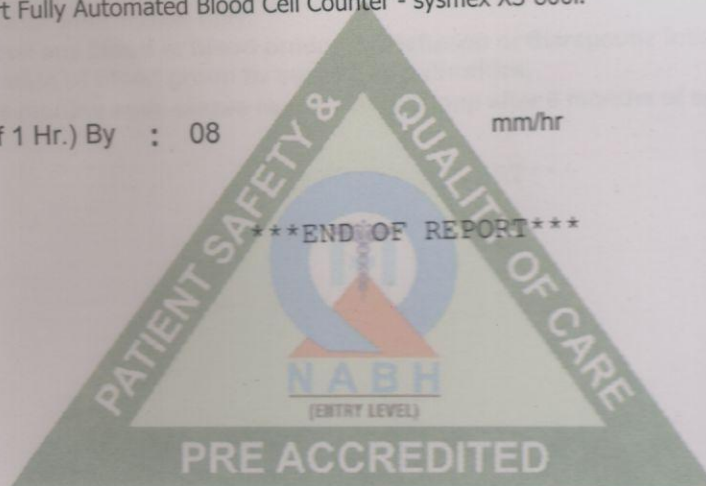
ESR

ESR MM (AT The End of 1 Hr.) By : 08
 Westergren Method

mm/hr

Male : 0 - 15
 Female : 0 - 20

END OF REPORT



Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412

Pathologist



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
Patient Name : Mrs. RAMANE ANITA M
Age/Sex : 47Yr(s)/Female

Lab No : 12707
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Referred By : Dr.HOSPITAL PATIENT

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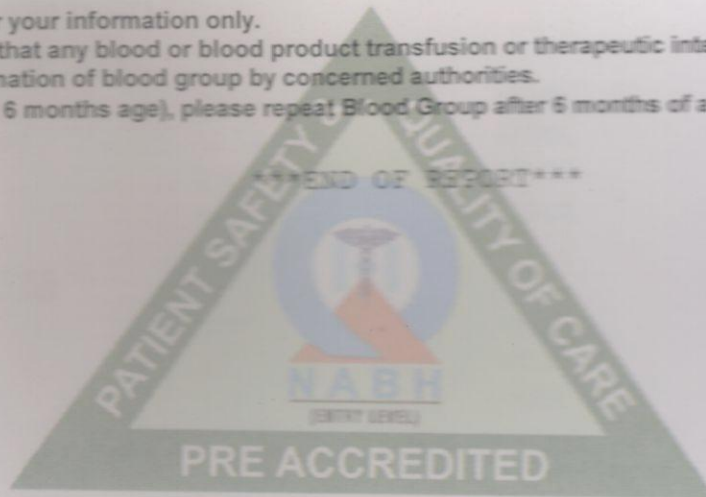
PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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HAEMATOLOGY

BLOOD GROUP

BLOOD GROUP : "O"
RH FACTOR : POSITIVE

NOTE : This is for your information only.
Kindly note that any blood or blood product transfusion or therapeutic intervention has to be done after confirmation of blood group by concerned authorities.
In infants (< 6 months age), please repeat Blood Group after 6 months of age for confirmation.



Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
M.D.(Pathology) R.No.180412

Pathologist

For Free Home Collection Call : 9545200011



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
Patient Name : Mrs. RAMANE ANITA M
Age/Sex : 47Yr(s)/Female
Company Name : BANK OF BARODA
Referred By : Dr.HOSPITAL PATIENT

Lab No : 12707
Req.No : 12707

Collection Date & Time : 05/03/2024 09:02 AM
Reporting Date & Time : 05/03/2024 02:51 PM
Print Date & Time : 05/03/2024 02:56 PM

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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BIOCHEMISTRY

BSL-F & PP

Blood Sugar Level Fasting	: 102	MG/DL	60 - 110
Blood Sugar Level PP	: 125	MG/DL	70 - 140

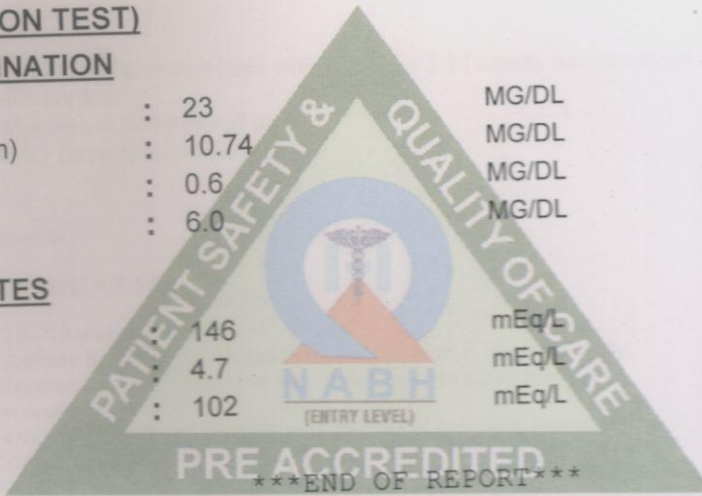
RFT (RENAL FUNCTION TEST)

BIOCHEMICAL EXAMINATION

UREA (serum)	: 23	MG/DL	0 - 45
UREA NITROGEN (serum)	: 10.74	MG/DL	7 - 21
CREATININE (serum)	: 0.6	MG/DL	0.5 - 1.5
URIC ACID (serum)	: 6.0	MG/DL	Male : 3.5 - 7.2 Female : 2.6 - 6.0

SERUM ELECTROLYTES

SERUM SODIUM	: 146	mEq/L	136 - 149
SERUM POTASSIUM	: 4.7	mEq/L	3.8 - 5.2
SERUM CHLORIDE	: 102	mEq/L	98 - 107



END OF REPORT

Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
M.D.(Pathology) R.No.080412

Pathologist

For Free Home Collection Call : 9545200011



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
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BIOCHEMISTRY

HbA1C (HPLC Method)

Glycated Haemoglobin (HbA1C), by HPLC : 6.6

%

Non - diabetic (Normal) : < 5.7
 Pre - diabetes : > or = 5.7 - < 6.5
 Diabetes : > or = 6.5

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

For diagnosis of Diabetes Mellitus (>= 18 yrs of age) :

5.7 % - 6.5 % : Increased risk for developing diabetes.
 >= 6.5 % : Diabetes

Therapeutic goals for glycemic control :

Adults : < 7%
 Toddlers and Preschoolers : < 8.5% (but > 7.5 %)
 School age (6-12 yrs) : < 8%
 Adolescents and young adults (13 - 19 yrs) : < 7.5 %
 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.
 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.
 In patients with Homozygous forms of rare variant Hb(CC,SS,EE,SO), HbA1c cannot be quantitated as there is no HbA. In such circumstances glycemic control needs to be monitored using alternative methods like plasma glucose levels or serum Fructosamine.

END OF REPORT

Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412

Pathologist



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
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BIOCHEMISTRY

LIPID PROFILE

CHOLESTEROL (serum)	: 177	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 109	MG/DL	0 - 150
HDL (serum)	: 38	MG/DL	Male : 42 - 79.5 Female : 42 - 79.5
LDL (serum)	: 105	MG/DL	0 - 130
VLDL (serum)	: 21.80	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 4.66		Male : 1.0 - 5.0 Female : 1.0 - 4.5
LDL/HDL RATIO	: 2.76		Male : <= 3.6 Female : <= 3.2

NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.
 Cholesterol & Triglycerides reprocessed , & confirmed.

END OF REPORT

Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTWAR
 M.D.(Pathology) R.No.080412
 Pathologist



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
 Company Name : BANK OF BARODA
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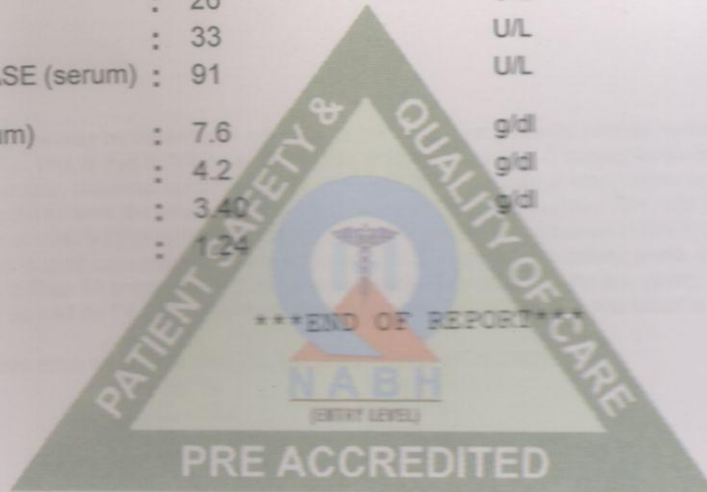
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BIOCHEMISTRY

LFT (Liver function Test)

BILIRUBIN TOTAL (serum)	: 0.8	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT (serum)	: 0.2	mg/dL	0.0 - 0.5
BILIRUBIN INDIRECT (serum)	: 0.60	mg/dL	0.1 - 1.0
S.G.O.T (serum)	: 26	U/L	0 - 35
S.G.P.T (serum)	: 33	U/L	0 - 45
ALKALINE PHOSPHATASE (serum)	: 91	U/L	Male : 53 - 128 Female : 42 - 98
PROTEINS TOTAL (serum)	: 7.6	g/dl	6.6 - 8.7
ALBUMIN (serum)	: 4.2	g/dl	3.5 - 5.0
GLOBULIN (serum)	: 3.40	g/dl	1.8 - 3.6
A/G RATIO	: 1.24		1.1 - 2.2



[Signature]

Technician

Report Type By :- PEERZADE SHOYEB

[Signature]

Dr. AJAY A GANGSHETTIWAR
M.D.(Pathology) R.No.080412

Pathologist

For Free Home Collection Call : 9545200011



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
 Company Name : BANK OF BARODA
 Referred By : Dr.HOSPITAL PATIENT

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ENDOCRINOLOGY

TFT (THYROID FUNCTION TEST)

T3-Total (Tri iodothyronine)	: 1.58	ng/mL	0.80 - 2.00
T4 - Total (Thyroxine)	: 13.78	µg/dL	5.1 - 14.1
Thyroid Stimulating Hormones (Ultra TSH)	: 2.16	µIU/mL	0.27 - 4.20

Method :- serum by ECLIA

NOTE:-

Three common ways in which there may be inadequate amounts of the thyroid hormone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid gland, possibly due to autoantibody disease, possibly due to toxic stress or possibly due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition there is inadequate thyroid stimulating hormone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is most common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The third type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels of thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are taking T3 as part of their thyroid supplement need have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours after their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4, Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	6.60 - 12.4	0.30 - 4.50
2 nd Trimester	1.0 - 2.60	6.60 - 15.5	0.50 - 4.60
3 rd Trimester	1.0 - 2.60	6.60 - 15.5	0.60 - 5.20

The guidelines for age related reference ranges for T3, T4 & Ultra TSH

	Total T3	Total T4	Ultra TSH
Cord Blood	0.30 - 0.70	1-3 day 8.2-19.9	Birth- 4 day: 1.0-38.9
New Born	0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years	1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years	0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years	0.80 - 2.10	3-10 Years 5.5-12.8	

END OF REPORT

Technician

Report Type By :- PEERZADE SHOYEB

Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412

Pathologist

For Free Home Collection Call : 9545200011



Dept. of Pathology

(For Report Purpose Only)



PRN : 106226
 Patient Name : Mrs. RAMANE ANITA M
 Age/Sex : 47Yr(s)/Female
 Company Name : BANK OF BARODA
 Referred By : Dr.HOSPITAL PATIENT

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
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CLINICAL PATHOLOGY

URINE ROUTINE

PHYSICAL EXAMINATION

QUANTITY : 20 ML
 COLOUR : PALE YELLOW
 APPEARANCE : SLIGHTLY HAZY
 REACTION : ACIDIC
 SPECIFIC GRAVITY : 1.020

CHEMICAL EXAMINATION

PROTEIN : ABSENT
 SUGAR : ABSENT
 KETONES : ABSENT
 BILE SALTS : ABSENT
 BILE PIGMENTS : ABSENT
 UROBILINOGEN : NORMAL

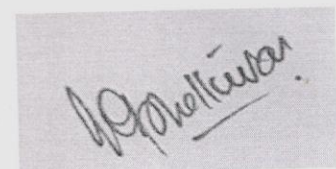
MICROSCOPIC EXAMINATION

PUS CELLS : OCCASIONAL /hpf
 RBC CELLS : ABSENT /hpf
 EPITHELIAL CELLS : OCCASIONAL /hpf
 CASTS : ABSENT /hpf
 CRYSTALS : ABSENT
 OTHER FINDINGS : ABSENT
 BACTERIA : ABSENT

END OF REPORT


 Technician

Report Type By :- PEERZADE SHOYEB


 Dr. AJAY A GANGSHETTIWAR
 M.D.(Pathology) R.No.080412


 Pathologist



Dept. of Radiology

(For Report Purpose Only)



REQ. DATE : 05-MAR-2024
NAME : MRS. RAMANE ANITA M
PATIENT CODE : 106226
REFERRAL BY : Dr. HOSPITAL PATIENT

REP. DATE : 05-MAR-2024
AGE/SEX : 47 YR(S) / FEMALE

USG ABDOMEN AND PELVIS

OBSERVATION :

Liver : Is normal in size , shape & echotexture. No focal lesion / IHBR dilatation.

CBD & PV : Normal in caliber.

G.B. : Moderately distended, Few calculi seen within, largest 8 mm

Spleen : Is normal in size , shape & echotexture. No focal lesion.

Pancreas : Normal in size, shape & echotexture.

Both kidneys are normal in size, shape & echotexture, CMD maintained. No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 10 x 4.2 cm.
Left kidney measures : 9.8 x 4.5 cm.

Urinary bladder : Moderately distended, normal.

Uterus : Post OP status

Few prominent feecal loaded bowel loops seen in umbilical region on each side
No ascites / lymphadenopathy.

IMPRESSION :

Few prominent feecal loaded bowel loops seen in umbilical region on each side--Needs CT abdomen correlation

Cholelithiasis without cholecystitis

- Kindly correlate clinically.

Dr. SAURABH PATIL
(MBBS, MD(RADIOLOGY))



Dept. of Radiology

(For Report Purpose Only)



REQ. DATE : 05-MAR-2024 REP. DATE : 05-MAR-2024 e defined
NAME : MRS. RAMANE ANITA M
PATIENT CODE : 106226 AGE/SEX : 47 YR(S) / FEMALE
REFERRAL BY : Dr. HOSPITAL PATIENT

BILATERAL SONOMAMMOGRAPHY

OBSERVATION:

RT. BREAST.

Fibro-glandular tissues appear normal.
Skin and subcutaneous tissue appear normal.
Nipple shows normal features.
No significant axillary adenopathy.

LT. BREAST.

Fibro-glandular tissue appear normal.
Skin and subcutaneous tissue appear normal.
Nipple appear normal.
No e/o axillary lymphadenopathy.

IMPRESSION :

No sonologically demonstrable focal breast lesion.

- Kindly correlate clinically.

Dr. SAURABH PATIL
(MBBS, MD(RADIOLOGY))

आयकर विभाग
INCOME TAX DEPARTMENT
RAMANE ANITA MACHINDRA
DEVGRAM W/ GHOLE

17/02/1977
Permanent Account Number
BHMPR7671G

अ.म.रामाणे
Signature

भारत सरकार
GOVT. OF INDIA



12062012



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम/Enrolment No.: 2085/12019/53913

To
अनिता मच्छिंद्र रामाने
Anita Machindra Ramane
gat no 1446, shriram housing society
near tower line
haveli
mhetrewadi, chikhali
Chikhali Bk.
Pune Chikhlee
Maharashtra - 412114
9604871867

Download Date: 17/08/2017

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18/08/2017 10:03:45



आपका आधार क्रमांक / Your Aadhaar No. :

5310 3527 2432

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India

अनिता मच्छिंद्र रामाने
Anita Machindra Ramane
जन्म तिथि/DOB: 17/02/1977
महिला / FEMALE



5310 3527 2432

मेरा आधार, मेरी पहचान



Government of India



- सूचना
- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
 - पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
 - यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार अविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा।
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
गट न 1446, श्रीराम हाउसिंग
सोसाइटी, टॉवर लाइन जवळ,
महेत्रवाडी, चीखली, हवेली, चीखली
बक., पुणे,
महाराष्ट्र - 412114

Address:
gat no 1446, shriram housing
society, near tower line,
mhetrewadi, chikhali, haveli,
Chikhali Bk., Pune,
Maharashtra - 412114

5310 3527 2432



18-17

help@uidai.gov.in

www.uidai.gov.in



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	ANITA MACHINDRA RAMANE
DATE OF BIRTH	17-02-1977
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	05-03-2024
BOOKING REFERENCE NO.	23M161672100093406S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. RAMANE MACHINDRA SWAMI
EMPLOYEE EC NO.	161672
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR B
EMPLOYEE PLACE OF WORK	MAHALUNGE
EMPLOYEE BIRTHDATE	19-12-1971

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 **23-02-2024** 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/-



कृते बँक ऑफ बडौदा
For Bank of Baroda

अधिकारी/Officer

Chief General Manager, महालुंगे शाखा, पुणे./Mahalunge Br., Pune
HRM Department
Bank of Baroda

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

