



भारत सरकार
Government of India

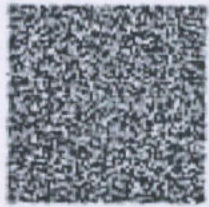
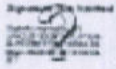
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

मान्यता प्राप्त/Enrolment No.: 0623/07475/66306

Download Date: 25/11/2019

To
शुभ देवी
Anju Devi
C/O. Pravin Kumar Jha
46
Chochak
Banerchua
Lalmatia
Lalmatia Colony
Goota, Jharkhand - 814165
8407854204

Aadhaar Letter: 03/09/2019



आपका आधार क्रमांक / Your Aadhaar No. :
5885 3767 4339
VID : 9130 6490 6439 4352
मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



शुभ देवी
Anju Devi
जन तिथि/DOB: 06/11/1971
पते/PE: 814165

DR. NITIN SONAVANE
M.B.B.S.AFLD.D.IAB, D.CARD.
CONSULTANT-CARDIOLOGIST
REGD. NO. : 87714

5885 3767 4339
VID : 9130 6490 6439 4352

मेरा आधार, मेरी पहचान



सूचना

- आपका पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन प्रमाणिकरण से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार कई सरकारी और गैर सरकारी सेवाओं को आसानी से उपलब्ध करता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट करें।
- आधार को अपने स्मार्ट फोन पर रखें, mAadhaar App के साथ।
- Aadhaar is valid throughout the country
- Aadhaar helps you avail various Government and non-Government services easily
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App

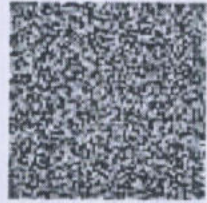


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



शुभ देवी
Anju Devi
जन तिथि/DOB: 06/11/1971
पते/PE: 814165

आपका आधार क्रमांक/Enrolment No.: 0623/07475/66306
C/O. Pravin Kumar Jha, 46, Chochak,
Banerchua, Lalmatia, Goota,
Jharkhand - 814165



5885 3767 4339
VID : 9130 6490 6439 4352

Anju Devi 12-11-22

Regd. Office:-
SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West)

Date:

To,
Suburban Diagnostics (India) Private Limited
301, 302 3rd Floor, Vini Eligance,
Above Tanushq Jewellers,
Borivali (W), Mumbai- 400092

SUBJECT- TO WHOMSOEVER IT MAY CONCERN

Dear Sir/ Madam,

This is to inform you that I, Myself Mr/ Mrs/ Ms. Anju Devi
don't want to performed the following tests:

- 1) PPBS
- 2) Stool -R
- 3) mammography (male Dst)
- 4) _____
- 5) _____
- 6) _____

CID No. & Date : 2231623122

Corporate/ TPA/ Insurance Client Name : medicwheel.

Thanking you.

Yours sincerely,

(Mr/Mrs/Ms. Anusha.)

Regd. Office:-
SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.

CID# : 2231623142
 Name : MRS.ANJU DEVI
 Age / Gender : 50 Years/Female
 Consulting Dr. :-
 Reg.Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:12
 Reported : 14-Nov-2022 / 09:38

PHYSICAL EXAMINATION REPORT

History and Complaints:

Asymptomatic

EXAMINATION FINDINGS:

Height (cms): 148 cms
 Temp (0c): Afebrile
 Blood Pressure (mm/hg): 130/70 mm/hg
 Pulse:

Weight (kg): 59 kg
 Skin: Normal
 Nails: Normal
 Lymph Node: Not palpable

Systems

Cardiovascular: S1S2 audible
 Respiratory: AEBE
 Genitourinary: NAD
 GI System: Liver & Spleen not palpable
 CNS: NAD

IMPRESSION:

R-G Correction.

ADVICE:

*Lipid profile - Low oily diet
 - Reg. exercise*

CHIEF COMPLAINTS:

- | | |
|----------------------|----|
| 1) Hypertension: | NO |
| 2) IHD | NO |
| 3) Arrhythmia | NO |
| 4) Diabetes Mellitus | NO |
| 5) Tuberculosis | NO |

CID# : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years/Female
Consulting Dr. :-
Reg.Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:12
Reported : 14-Nov-2022 / 09:38

6) Asthama	NO
7) Pulmonary Disease	NO
8) Thyroid/ Endocrine disorders	NO
9) Nervous disorders	NO
10) GI system	NO
11) Genital urinary disorder	NO
12) Rheumatic joint diseases or symptoms	NO
13) Blood disease or disorder	NO
14) Cancer/lump growth/cyst	NO
15) Congenital disease	NO
16) Surgeries	NO
17) Musculoskeletal System	NO

PERSONAL HISTORY:

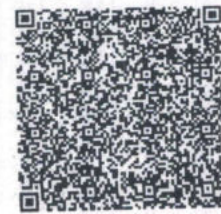
1) Alcohol	NO
2) Smoking	NO
3) Diet	VEG
4) Medication	NO

*** End Of Report ***

DR. NITIN SONAVANE
M.B.B.S.AFLH, D.DIAB, D.CARD.
CONSULTANT-CARDIOLOGIST
REGD. NO. 87714

Dr.NITIN SONAVANE
PHYSICIAN

Regd. Office:-
SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.



CID : 2231623142
Name : MRS. ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 13:41

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	13.5	12.0-15.0 g/dL	Spectrophotometric
RBC	4.34	3.8-4.8 mil/cmm	Elect. Impedance
PCV	41.9	36-46 %	Measured
MCV	97	80-100 fl	Calculated
MCH	31.1	27-32 pg	Calculated
MCHC	32.2	31.5-34.5 g/dL	Calculated
RDW	14.4	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5390	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	39.1	20-40 %	
Absolute Lymphocytes	2107.5	1000-3000 /cmm	Calculated
Monocytes	5.4	2-10 %	
Absolute Monocytes	291.1	200-1000 /cmm	Calculated
Neutrophils	49.5	40-80 %	
Absolute Neutrophils	2668.1	2000-7000 /cmm	Calculated
Eosinophils	5.3	1-6 %	
Absolute Eosinophils	285.7	20-500 /cmm	Calculated
Basophils	0.7	0.1-2 %	
Absolute Basophils	37.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	155000	150000-400000 /cmm	Elect. Impedance
MPV	13.9	6-11 fl	Calculated
PDW	36.4	11-18 %	Calculated



CID : 2231623142
 Name : MRS.ANJU DEVI
 Age / Gender : 50 Years / Female
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code
 Collected : 12-Nov-2022 / 10:15
 Reported : 12-Nov-2022 / 13:03

RBC MORPHOLOGY

Hypochromia -
 Microcytosis -
 Macrocytosis -
 Anisocytosis -
 Poikilocytosis -
 Polychromasia -
 Target Cells -
 Basophilic Stippling -
 Normoblasts -
 Others Normocytic, Normochromic

WBC MORPHOLOGY

Megaplatelets seen on smear

COMMENT

Specimen: EDTA Whole Blood

ESR, EDTA WB 23 2-20 mm at 1 hr. Westergren

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
 *** End Of Report ***



MC-2111

Bmhasakar
 Dr.KETAKI MHASKAR
 M.D. (PATH)
 Pathologist



CID : 2231623142
 Name : MRS.ANJU DEVI
 Age / Gender : 50 Years / Female
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
 Application To Scan the Code
 Collected : 12-Nov-2022 / 10:15
 Reported : 13-Nov-2022 / 00:51

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	105.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
 *** End Of Report ***



MC-2111



Bmhasakar
 Dr.KETAKI MHASKAR
 M.D. (PATH)
 Pathologist



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:32

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
KIDNEY FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BLOOD UREA, Serum	15.6	19.29-49.28 mg/dl	Calculated
Kindly note change in Ref range and method w.e.f.11-07-2022			
BUN, Serum	7.3	9.0-23.0 mg/dl	Urease with GLDH
Kindly note change in Ref range and method w.e.f.11-07-2022			
CREATININE, Serum	0.64	0.50-0.80 mg/dl	Enzymatic
Kindly note change in Ref range and method w.e.f.11-07-2022			
eGFR, Serum	104	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	7.2	5.7-8.2 g/dL	Biuret
Kindly note change in Ref range and method w.e.f.11-07-2022			
ALBUMIN, Serum	4.8	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.0	1 - 2	Calculated
URIC ACID, Serum	5.6	3.1-7.8 mg/dl	Uricase/ Peroxidase
Kindly note change in Ref range and method w.e.f.11-07-2022			
PHOSPHORUS, Serum	3.0	2.4-5.1 mg/dl	Phosphomolybdate
Kindly note change in Ref range and method w.e.f.11-07-2022			
CALCIUM, Serum	9.6	8.7-10.4 mg/dl	Arsenazo
Kindly note change in Ref range and method w.e.f.11-10-2022			
SODIUM, Serum	140	136-145 mmol/l	IMT
Kindly note change in Ref range and method w.e.f.11-07-2022			



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:32

POTASSIUM, Serum 4.5 3.5-5.1 mmol/l IMT

Kindly note change in Ref range and method w.e.f.11-07-2022

CHLORIDE, Serum 106 98-107 mmol/l IMT

Kindly note change in Ref range and method w.e.f.11-07-2022

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



J. Thakker

Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP (Medical Services)



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:50

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.5	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	111.2	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

*** End Of Report ***



J. Thakker

Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP(Medical Services)



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 20:09

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	45	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	2-3	Less than 20/hpf	
Others	-		

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



MC-2111

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2231623142
 Name : MRS.ANJU DEVI
 Age / Gender : 50 Years / Female
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
 Reported : 12-Nov-2022 / 17:37

Use a QR Code Scanner
 Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

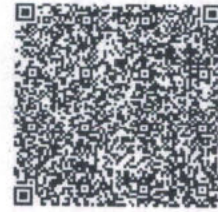
1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
 *** End Of Report ***



J. Thakker

Dr.JYOT THAKKER
M.D. (PATH), DPB
 Pathologist & AVP (Medical Services)



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:30

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIPID PROFILE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	206.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	178.3	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric
HDL CHOLESTEROL, Serum	50.5	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	155.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	120.1	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	35.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.1	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.4	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



J. Thakker

Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP(Medical Services)



CID : 2231623142
 Name : MRS.ANJU DEVI
 Age / Gender : 50 Years / Female
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
 Reported : 12-Nov-2022 / 17:33

Use a QR Code Scanner
 Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.3	3.5-6.5 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
Free T4, Serum	11.3	11.5-22.7 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
sensitiveTSH, Serum	1.754	0.55-4.78 microIU/ml	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			



CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:33

Use a QR Code Scanner
Application To Scan the Code

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1) TSH Values between high abnormal upto 15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2) TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine, Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation: 19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid, TSH receptor Antibody, Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until at least 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

1. O. Koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET. Vol 357
3. Tietz, Text Book of Clinical Chemistry and Molecular Biology -5th Edition
4. Biological Variation: From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



J. Thakker
Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP (Medical Services)



CID : 2231623142
Name : MRS. ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 12-Nov-2022 / 10:15
Reported : 12-Nov-2022 / 17:36

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIVER FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.65	0.3-1.2 mg/dl	Vanadate oxidation
Kindly note change in Ref range and method w.e.f.11-07-2022			
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Vanadate oxidation
Kindly note change in Ref range and method w.e.f.11-07-2022			
BILIRUBIN (INDIRECT), Serum	0.47	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	5.7-8.2 g/dL	Biuret
Kindly note change in Ref range and method w.e.f.11-07-2022			
ALBUMIN, Serum	4.8	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.0	1 - 2	Calculated
SGOT (AST), Serum	24.5	<34 U/L	Modified IFCC
Kindly note change in Ref range and method w.e.f.11-07-2022			
SGPT (ALT), Serum	15.6	10-49 U/L	Modified IFCC
Kindly note change in Ref range and method w.e.f.11-07-2022			
GAMMA GT, Serum	12.2	<38 U/L	Modified IFCC
Kindly note change in Ref range and method w.e.f.11-07-2022			
ALKALINE PHOSPHATASE, Serum	119.4	46-116 U/L	Modified IFCC

Kindly note change in Ref range and method w.e.f.11-07-2022

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab



J. Thakker
Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP (Medical Services)

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2231623142
Name : MRS.ANJU DEVI
Age / Gender : 50 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected :
Reported :

R
E
P
O
R
T

*** End Of Report ***

Date:-

CID:

Name:- Anju devi

Sex / Age: 50 / F

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

NIL
NIL

RT	LT.
6/12	6/12
N/18	N/18

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

R-E
D

12/11/22

Mrs. Anju Devi
50 yr

GYNAECOLOGICAL CONSULTATION

PARAMETER:

EXAMINATION:

RS :

} (N)

CVS :

BREAST EXAMINATION:

(N)

PER ABDOMEN:

} (N)

PER VAGINAL:

MENSTRUAL HISTORY: Post - menopausal

MENARCHE: 14 yrs.

PAST MENSTRUAL HISTORY:

(N)

OBSTETRIC HISTORY:

G₁ P₂ A₂ L₂ (↑ 25) } RTNA
(↓ 18)

PERSONAL HISTORY:

no.

ALLERGIES :

no.

BLADDER :

} (N)

BOWEL HABITS:

DRUG HISTORY: no

PREVIOUS SURGERIES: -

FAMILY HISTORY: nil.

CHIEF GYNAE COMPLAINTS:

RECOMMENDATIONS:

DR. MONALI SHAH
REG. NO. 57282
CONSULTING HOMOEOPATH
DIETITIAN & NUTRITIONIST

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2231623142
Name : Mrs Anju devi
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 12-Nov-2022
Reported : 12-Nov-2022 / 13:10

USG WHOLE ABDOMEN

LIVER: Liver is normal in size, shape and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any obvious focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

KIDNEYS: Right kidney measures 9.1 x 3.9 cm. Left kidney measures 8.5 x 3.2 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

UTERUS: Uterus is anteverted, normal and measures 5.0 x 4.1 x 2.3 cm. Uterine myometrium shows homogenous echotexture. Endometrium is normal in thickness and measures 4.4 mm. Cervix appears normal.

OVARIES: Both ovaries are not seen post menopausal status.

Bilateral adnexa is clear.

No free fluid or obvious significant lymphadenopathy is seen.



CID : 2231623142
Name : Mrs Anju devi
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 12-Nov-2022
Reported : 12-Nov-2022 / 13:10

Opinion:

- No significant abnormality is detected.

For clinical correlation and follow up.

Investigations have their limitations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

-----End of Report-----

This report is prepared and physically checked by DR SUDHANSHU SAXENA before dispatch.

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2231623142
Name : Mrs Anju devi
Age / Sex : 50 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 12-Nov-2022
Reported : 12-Nov-2022 / 18:32

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

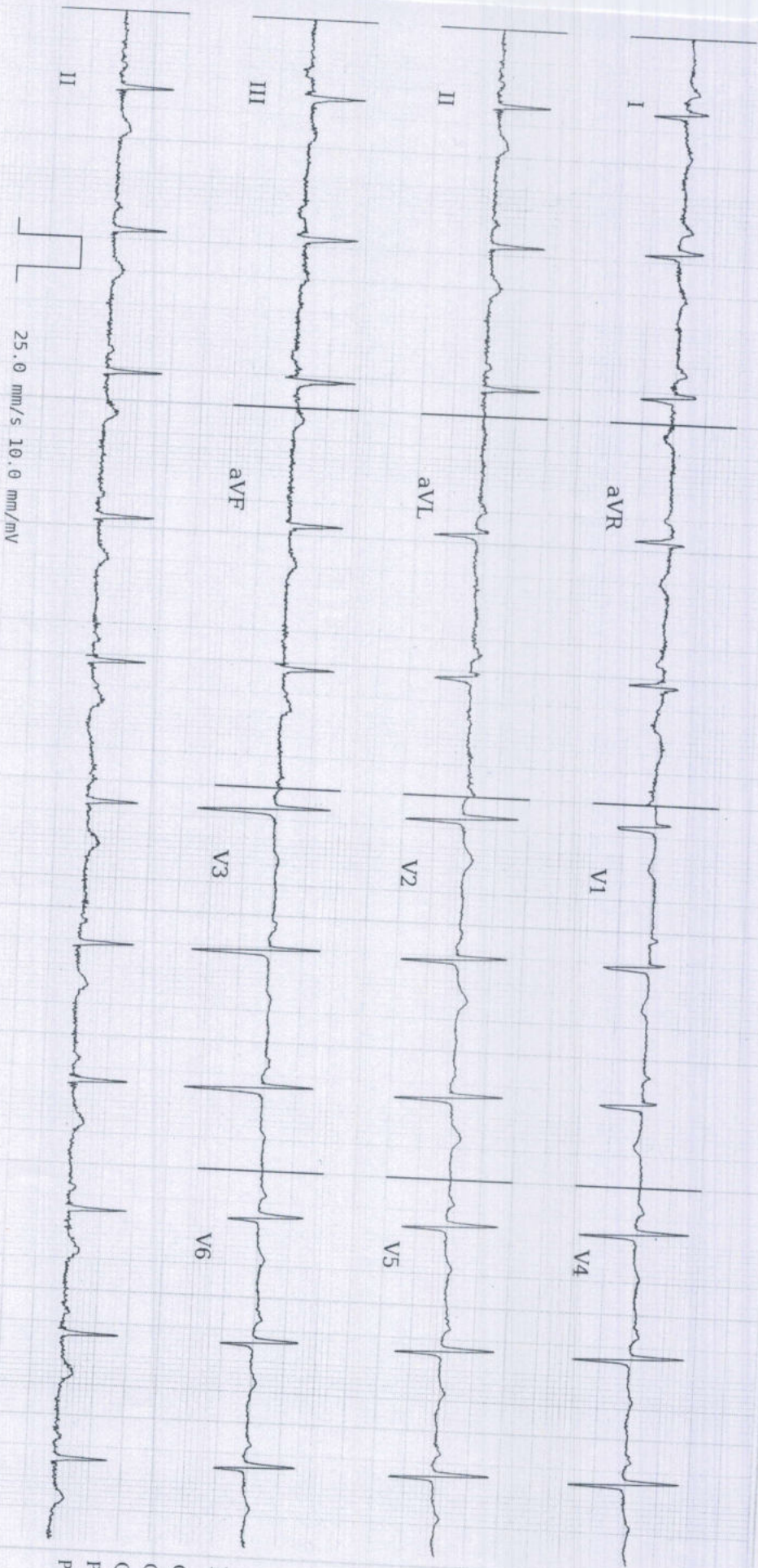
IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

This report is prepared and physically checked by Dr Rohit before dispatch.

DR. ROHIT MALIK
DNB, DMRD, DMRE (MUM)
RADIO DIAGNOSIS
REG. No. 82356



ECG Within Normal Limits: Sinus Rhythm Please correlate clinically.

DR. NITIN SONAWANE

M.B.B.S.AFLH, D.DIAB, D.CARD.
CONSULTANT-CARDIOLOGIST

REGD. NO. : 87714

Regd. Office:-

SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.

REPORTED BY

[Signature]

Dr. Nitin Sonawane
M.B.B.S.AFLH, D.DIAB.D.CARD
Consultant Cardiologist
87714

BP:	NA
Weight:	NA
Height:	NA
Pulse:	NA
Spo2:	NA
Resp:	NA
Others:	
Measurement	
QRSD:	70ms
QT:	386ms
QTc:	416ms
PR:	168ms
P-R-T:	-18° 9°



Disclaimer: This report is provided for informational purposes only and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. The accuracy of the data and the quality of the ECG are not guaranteed by the printer and may vary from the original.