




PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited
Certificate No.:MC-2566

TEST REPORT

Name	: MS.SHIVANI [SPOUSE]	TID/SID	: UMR1006531/ 25048120
Age / Gender	: 27 Years / Female	Registered on	: 14-Jan-2023 / 07:59 AM
Ref.By	: -	Collected on	: 14-Jan-2023 / 08:04 AM
Req.No	:  BIL2725431	Reported on	: 14-Jan-2023 / 13:52 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Straw		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	6.0		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	1 - 2	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	2 - 3	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
Regd. No: 52272
MD PATHOLOGY






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Req.No	:  BIL2725431	Reported on	: 14-Jan-2023 / 13:43 PM
		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	B
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	16	mm/hour	0-20 mm/hour
Method:Westergren			

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DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	9.2	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	5.3	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	30	%	36-46 %
MCV Method:Calculated	57	fL	83-101 fL
MCH Method:Calculated	17.3	pg	27-32 pg
MCHC Method:Calculated	30.1	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	17.9	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	5.9	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	56	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	37	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	4	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	3	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Platelet Count Method:Electrical Impedence	390	10 ³ /μL	150-410 10 ³ /μL

Peripheral Smear

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Sundays & Holidays : 7.00 am to 1.00 pm

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DEPARTMENT OF HEMATOLOGY

Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
RBC Method:Microscopy	Microcytic and Hypochromic, Anisocytosis +		
WBC Method:Microscopy	Within normal limits. No abnormal cells seen.		
Platelets Method:Microscopy	Discrete and adequate. Normal in morphology.		
Note	Advised Serum Iron studies.		

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Req.No :  Reported on : 14-Jan-2023 / 14:30 PM
Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	12.8	mg/dL	7-23 mg/dL
Method:Calculated			

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.63	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

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TEST REPORT

Name : **MS.SHIVANI [SPOUSE]** TID/SID : UMR1006531/ 25048121F
Age / Gender : 27 Years / Female Registered on : 14-Jan-2023 / 07:59 AM
Ref.By : - Collected on : 14-Jan-2023 / 08:04 AM
Req.No :  Reported on : 14-Jan-2023 / 15:38 PM
Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	88	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : >=126 mg/dL

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Req.No	:  BIL2725431	Reported on	: 14-Jan-2023 / 15:38 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	102	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	5.3	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	105	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	152	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	43	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	96	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	13	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	69	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	3.53		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	2.23		

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Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.39	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.15	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.24	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	20	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	25	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	51	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.15	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.50	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	2.65	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.70		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	39	U/L	7.0-50.0 U/L

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Req.No  Reported on : 14-Jan-2023 / 13:55 PM
Reference : Medi Wheel
BIL2725431

DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.62	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	10.7	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	1.84	µIU/mL	0.400-4.049 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3rd Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors(secondary).

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DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	2.55	mg/dL	1.9-7.5 mg/dL

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TEST REPORT

Name : **MS.SHIVANI [SPOUSE]** TID/SID : UMR1006531/ 25049363
Age / Gender : 27 Years / Female Registered on : 14-Jan-2023 / 07:59 AM
Ref.By : - Collected on : 14-Jan-2023 / 08:04 AM
Req.No  Reported on : 14-Jan-2023 / 17:02 PM
Reference : Medi Wheel
BIL2725431

DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Fasting

Urine Glucose Fasting Nil NIL
Method:Reagent strip/Reflectance photometry

Glucose Urine Post Prandial

Urine Glucose Post Prandial Nil NIL
Method:Reagent strip/Reflectance photometry

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MEDICAL EXAMINATION REPORT

Name	Ms. Shivani		Date :	14/1/23
Company	c/o - Mediwheel		Reg. No. :	2725431
Contact No.	9035870645		Sex <input type="checkbox"/> M <input checked="" type="checkbox"/> F	Age : <input type="checkbox"/> 24 <input checked="" type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27
Type	Pre-Emp		Emp. No.:	Spouse
	Overseas		Height	168 cms
	Annual	<input checked="" type="checkbox"/>	Weight	61 kgs
Remarks	<p>- Microcytic Hypochromic Anisocytosis ⊕ Advice follow up to increase Hb. level. Repeat CBP after 4-6 weeks.</p> <p>X-ray - Scoliosis of Dorsal spine towards left. Advice follow up = Orthopaedic consultation.</p>			
Fitness Status	Medically Fit / Unfit		DR. PRIYANKA SANNIDHI Physician's Signature Regn. No : 11351	

Distant Vision : Near Vision :

Right Eye: 6/6

Right Eye: N6

With glasses / Without glasses

With glasses / Without glasses

left Eye: 6/6

left Eye: N6

with glasses / without glasses

with glasses / without glasses

Colour Vision: DL normal

Ophthalmologist's Signature

DR. KATTIA
M.S., D.O., F.R.F.
Regd. Ophthalmologist
Reg. No. 2725437

Right Ear

Left Ear

Hearing: (N)

(N)

Rinee's Test ;

Weber Test :

Discharge :

NIL

NIL

SYSTEMIC EXAMINATION

Pulse : 78 bpm

B.P. : 110/80 mmHg

Lungs : A. Shape of Chest B/C symmetrical
B. Breath Sounds B/C clear ⊕
C. Adventitious Sounds no

Heart : A. Sounds S1 S2 ⊕
B. Murmurs no murmurs

Nervous System

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles no
D. Any Lump no

A. Higher Function :
B. Cranial Nerves :
C. Sensory System :
D. Motor System :
E. Jerks :

(N)

General : A. Hernia
B. Hydrocele] NPD
C. Varicocele

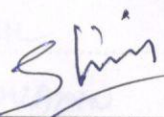
Breast : Rt (N) Lt. (N)

DR. PRIYANKA SANNIDHI
Physician's Signature
Reg. No. 11361

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :


Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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NABL Accredited
Certificate No.MC-2566

ENT CONSULTATION

S.No. 2725431

Emp.No. spouse

Date 14/1/23

Name Ms: Shivani

Age 27 Yrs

Sex M/F

EARS :

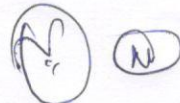
Right

Left

EAC :



TM :



TFT :

Right: -Rane's A&R

Left: A&R

webes

ABC

same as exam

NOSE :

Septum cleft

THROAT :

AP/T/P/PPW

NECK :

No cleft / larynx neck seen

IMPRESSION:

ENT with (N) larynx

Dr. POORNIMA
M.B.B.S, D.L.O.,(ENT)
Reg No.100155(KMC)

7799686970



Name : Shirani Sex : F Age : 28

Date : 14/1

OPD No : 1144



ASV opcs



 MULTI SPECIALITY DENTAL CLINIC
Smile Combines... Not Coincidentally...
 B.D.S, IMPLANTOLOGIST (USA)
 1-3-1, Rajamudaliar Street, Kalasiguda,
 Secunderabad, Cell : 8977910590,

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TEST REPORT

Name : Ms . SHIVANI [SPOUSE]
Age / Gender : 27 Years / Female
Ref.By :
Req. No : BIL2725431

TID : UMR1006531
Registered on : 14-Jan-2023 07:59 AM
Reported On : 14-Jan-2023 09:56 AM
Reference : Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and echotexture. No focal lesions.

No IHBD /CBD dilatation. Portal vein is normal.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder - Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 10.8 x 3.8 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

LEFT KIDNEY : 12.3 x 4.4 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended.Normal in contour.
Wall thickness is normal. No calculus / sol.

UTERUS : Anteverted measuring 11.4 x 4.7 x 3.3 cms - Normal in size and echotexture.
No space occupying lesion is seen.
Cervix is normal in size and echopattern.

ENDOMETRIUM : Normal.

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TEST REPORT

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Reference : Medi Wheel

OVARIES : Right ovary : 2.9 x 1.0 cms Left ovary : 3.7 x 2.2 cms
Both ovaries normal in size and echotexture.
No adnexal mass seen.
No fluid in POD.

IMPRESSION : Normal Study.

Clinical correlation.



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Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist



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TEST REPORT

Name : Ms . SHIVANI [SPOUSE]

Age / Gender : 27 Years / Female

Ref.By :

Req. No : BIL2725431

TID : UMR1006531

Registered on : 14-Jan-2023 07:59 AM

Reported On : 14-Jan-2023 09:18 AM

Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lungs are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Scoliosis of dorsal spine with convexity to left.



Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist

PATIENT SUMMARY REPORT

PARKLINE DIAGNOSTICS PVT.LTD

ID : 2725431
NAME : **MS SHIVANI**
AGE / SEX : 27 / FEMALE

HEIGHT (cm) : 168
WEIGHT (kg) : 61
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL
DONE BY : DR SAMEER G VANKAR
TECHNICIAN : G.M.SURESH

CASE HISTORY :

MEDICATION :

OBJECT OF TEST : Routine Check Up.

RISK FACTOR : None.

ACTIVITY : Very Active.

OTHER INVESTIGATION : E C G

REASON FOR TERMINATION : THR ACHIEVED

EXERCISE TOLERANCE : Good (> 10 METS).

EXERCISE INDUCED ARRHYTHMIAS : No.

HAEMO RESPONSE : Normal.

CHRONO RESPONSE : Normal.

FINAL IMPRESSION :

EXTRA COMMENTS :

Ami regu

Dr. SAMEER G. VANKAR
M.D. D.M.
Consultant Interventional Cardiologist
Reg.No.8245

Confirmed By : _____

Signature

ID: 2725431
MS.SHIVANI
Female 27Years

14-01-2023 08:30:52 AM

CARDIART

HR : 73 bpm
P : 88 ms
PR : 143 ms
QRS : 75 ms
QT/QTc : 371/410 ms
P/QRS/T : 45/66/52 °
RV5/SV1 : 1.501/0.904 mV

Diagnosis Information:

Sinus Rhythm

Poor R Wave Progression(V4)

NIR
WW

Dr. SAMEER G. VANKAR
MD., D.M.
Consultant Interventional Cardiologist
Reg.No.3245

Report Confirmed by: