

CONCLUSION OF HEALTH CHECKUP

ECU Number : 9264	MR Number : 21040542	Patient Name: ROSELY SIMON
Age : 48	Sex : Female	Height : 161
Weight : 57	Ideal Weight : 60	BMI : 21.99
Date : 10/02/2024		

Fit



Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.



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ECU Number : 9264 MR Number : 21040542 Patient Name: ROSELY SIMON
Age : 48 Sex : Female Height : 161
Weight : 57 Ideal Weight : 60 BMI : 21.99
Date : 10/02/2024

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : FATHER ; DM, HTM , MOTHER ; HTM

Habits : NO

Gen.Exam. : G.C.GOOD

B.P : 130/80

Pulse : 82

Others : SPO2 99%

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :





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MR Number : 21040542
Sex : Female
Ideal Weight : 60

Patient Name : ROSELY SIMON
Height : 161
BMI : 21.99

Ophthalmic Check Up :

Right

Left

Ext Exam

NORMAL

Vision Without Glasses

6/6

6/6

Vision With Glasses

N.5

N.5

Final Correction

-

-

Fundus

NORMAL

Color Vision

NORMAL

Advice

NIL

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice





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ECU Number : 9264
Age : 48
Weight : 57
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Sex : Female
Ideal Weight : 60

Patient Name : ROSELY SIMON
Height : 161
BMI : 21.99

Gynaec Check Up :

OBSTETRIC HISTORY : 2 FT LSCS
MENSTRUAL HISTORY : -
PRESENT MENSTRUAL CYCLE : LMP : 05/01/24
PAST MENSTRUAL CYCLE : IRREGULAR CYCLE
CHIEF COMPLAINTS : -
PA : SOFT
PS : Cx - (N) Vg - WHOLE DISCHARGE
PV : UT BULKY Fx CLEAR
BREAST EXAMINATION RIGHT : NORMAL
BREAST EXAMINATION LEFT : NORMAL
PAPSMEAR :
BMD :
MAMMOGRAPHY :
ADVICE :





Patient Name : Mrs. ROSELY SIMON
 Gender / Age : Female / 48 Years 5 Months 18 Days
 MR No / Bill No. : 21040542 / 242081610
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 198712
 Request Date : 10/02/2024 08:20 AM
 Collection Date : 10/02/2024 08:40 AM
 Approval Date : 10/02/2024 02:24 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	12.1	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.65	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	38.7	%	36 - 46
Mean Corpuscular Volume (MCV)	83.2	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	26.0	pg	27 - 32
MCH Concentration (MCHC)	31.3	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.3	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	40.8	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	7.76	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	61	%	40 - 80
Lymphocytes	27	%	20 - 40
Eosinophils	07	%	1 - 6
Monocytes	05	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	4.73	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.15	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.48	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.32	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.08	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	349	thou/cmm	150 - 410
Remarks	This is counter generated CBC Report, smear review is not done		
ESR	6	mm/1 hr	0 - 12

Test results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before a firm decision is reached.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. ROSELY SIMON	Type	: OPD
Gender / Age	: Female / 48 Years 5 Months 18 Days	Request No.	: 198712
MR No / Bill No.	: 21040542 / 242081610	Request Date	: 10/02/2024 08:20 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 10/02/2024 08:40 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification.

ESR on ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Ameer Soni
MD (Path)

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Patient Name : Mrs. ROSELY SIMON
Gender / Age : Female / 48 Years 5 Months 18 Days
MR No / Bill No. : 21040542 / 242081610
Consultant : Dr. Manish Mittal
Location : OPD
Type : OPD
Request No. : 198712
Request Date : 10/02/2024 08:20 AM
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Approval Date : 10/02/2024 03:09 PM

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	AB		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

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Approval Date : 10/02/2024 12:16 PM

Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	102	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	107	mg/dL	70 - 140

By Hexokinase method on EXL Dade Dimension

---- End of Report ----

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Heamoglobin (HbA1c)	5.4	%	
estimated Average Glucose (e AG) *	108.28	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (Done by Lipase /Glycerol kinase on Vitros 5600 < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	63	mg/dL	1 - 150
Total Cholesterol (Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600. <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	157	mg/dL	1 - 200
HDL Cholesterol (Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600 < 40 Low > 60 High)	64	mg/dL	40 - 60
Non HDL Cholesterol (calculated) Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	93	mg/dL	1 - 130
LDL Cholesterol (Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600 < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	69	mg/dL	1 - 100
VLDL Cholesterol (calculated)	12.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.08		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	2.45		3.5 - 5

--- End of Report ---

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.88	mg/dL	0 - 1
Bilirubin - Direct	0.23	mg/dL	0 - 0.3
Bilirubin - Indirect	0.65	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	21	U/L	13 - 35
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	17	U/L	14 - 59
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	48	U/L	42 - 98
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	10	U/L	5 - 55
<i>(Done by Multipoint Rate - L-γ³-glutamyl-p-nitroanilide on Vitros 5600)</i>			
Total Protein			
Total Proteins	8.02	gm/dL	6.4 - 8.2
Albumin	4.47	gm/dL	3.4 - 5
Globulin	3.55	gm/dL	3 - 3.2
A : G Ratio	1.26		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

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Approval Date : 10/02/2024 12:14 PM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (Done by Endpoint/Colorimetric - Urease on Vitros 5600)	19	mg/dL	10 - 45
BUN	8.88	mg/dL	5 - 21
Creatinine (By Modified Kinetic Jaffe Technique)	0.66	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. eGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)	3.3	mg/dL	2.2 - 5.8

---- End of Report ----

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Patient Name : Mrs. ROSELY SIMON
 Gender / Age : Female / 48 Years 5 Months 18 Days
 MR No / Bill No. : 21040542 / 242081610
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 198712
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 Collection Date : 10/02/2024 08:40 AM
 Approval Date : 10/02/2024 12:16 PM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.30	ng/ml	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (ng/ml)</i>			
1 - 3 days	: 0.1 - 7.4		
1-11 months	: 0.1 - 2.45		
1-5 years	: 0.1 - 2.7		
6-10 years	: 0.9 - 2.4		
11-15 years	: 0.8 - 2.1		
16-20 years	: 0.8 - 2.1		
Adults (20 - 50 years)	: 0.7 - 2.0		
Adults (> 50 years)	: 0.4 - 1.8		
Pregnancy (in last 5 months)	: 1.2 - 2.5		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroxine (T4)	9.03	mcg/dL	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (mcg/dL)</i>			
1 - 3 days	: 11.8 - 22.6		
1-2 weeks	: 9.8 - 16.6		
1 - 4 months	: 7.2 - 14.4		
4 - 12 months	: 7.8 - 16.5		
1-5 years	: 7.3 - 15.0		
5 - 10 years	: 6.4 - 13.3		
10 - 20 years	: 5.6 - 11.7		
Adults / male	: 4.6 - 10.5		
Adults / female	: 5.5 - 11.0		
Adults (> 60 years)	: 5.0 - 10.7		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			
Thyroid Stimulating Hormone (US-TSH)	3.25	microIU/ml	
<i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i>			
<i>Reference interval (microIU/ml)</i>			
Infants (1-4 days)	: 1.0 - 39		
2-20 weeks	: 1.7 - 9.1		
5 months - 20 years	: 0.7 - 6.4		
Adults (21 - 54 years)	: 0.4 - 4.2		
Adults (> 55 years)	: 0.5 - 8.9		
<i>Pregnancy :</i>			
1st trimester	: 0.3 - 4.5		
2nd trimester	: 0.5 - 4.6		
3rd trimester	: 0.8 - 5.2		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition)</i>			

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---- End of Report ----

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MD (Path)



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Patient Name : Mrs. ROSELY SIMON
Gender / Age : Female / 48 Years 5 Months 18 Days
MR No / Bill No. : 21040542 / 242081610
Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 198712
Request Date : 10/02/2024 08:20 AM
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Approval Date : 10/02/2024 02:22 PM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	40	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	5.5		
Specific Gravity	1.002		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	1+		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	1 - 5	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----

Dr. Ameer Soni
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Mammography

Interventional Radiology

Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21040542 Report Date : 10/02/2024
 Request No. : 190102062 10/02/2024 8.20 AM
 Patient Name : **Mrs. ROSELY SIMON**
 Gender / Age : Female / 48 Years 5 Months 18 Days

X-Ray Chest AP



Both lung fields are clear.

Both costophrenic sinuses appear clear.

Heart size is normal.

Hilar shadows show no obvious abnormality.

Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED



(Signature)

Dr. Priyanka Patel, MD.

Consultant Radiologist



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- Interventional Radiology
- Digital Subtraction Angiography (DSA)
- Foetal Echocardiography
- Echocardiography
- 4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21040542 Report Date : 10/02/2024
 Request No. : 190102125 10/02/2024 8.20 AM
 Patient Name : Mrs. ROSELY SIMON
 Gender / Age : Female / 48 Years 5 Months 18 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen. **Tiny concretions are seen in both kidneys.**

Urinary bladder is well distended and appears normal. No ascites.

COMMENT:

- **Bilateral renal concretions.**

Kindly correlate clinically

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Dr. Harsh Sanjay Vyas, D N
 B
 Consultant Radiologist





Computerized Radiography
Ultra Sensitive Colour Doppler
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Multi-Detector CT Scan
Magnetic Resonance Imaging (MRI)
Mammography
Interventional Radiology
Digital Subtraction Angiography (DSA)
Foetal Echocardiography
Echocardiography
4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 21040542 Report Date : 10/02/2024
 Request No. : 190102250 10/02/2024 8.20 AM
 Patient Name : Mrs. ROSELY SIMON
 Gender / Age : Female / 48 Years 5 Months 18 Days

Mammography (Both Breast)

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show scattered fibro glandular parenchyma.(Type c)
Well defined opacity is seen in lower and inner quadrant of left breast--appears benign lesion.
Oil cyst is seen in upper and inner quadrant of right breast.
 No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.
 No obvious skin thickening or nipple retraction seen.
 Bilateral benign axillary lymph nodes seen.

IMPRESSION:

Left breast benign lesion-?fibroadenoma ?cyst.
 BI-RADS category 3.

Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, 1- negative, 2- benign, 3- probably benign (require short term follow up), 4- suspicious (require further evaluation with biopsy), 5- highly suspicious for malignancy, 6- biopsy proven malignancy.

INFORMATION REGARDING MAMMOGRAMS:

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

Dr. Priyanka Patel, MD.

Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED


Patient No. : 21040542 Report Date : 10/02/2024
Request No. : 190102114 10/02/2024 8.20 AM
Patient Name : **Mrs. ROSELY SIMON**
Gender / Age : Female / 48 Years 5 Months 18 Days

Echo Doppler Screening

MITRAL VALVE : NORMAL, NO MR, NO MS
AORTIC VALVE : NORMAL, NO AR, NO AS
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LV SIZE AND SYSTOLIC FUNCTION LVEF -- 65%, NO
RESTING REGIONAL WALL MOTION ABNORMALITY
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : BULGING TO RA, NO LEFT TO RIGHT SHUNT ACROSS
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL
COLOUR/DOPPLER FLOW MAPPING : NO MR, NO AR, TRIVIAL TR, NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION, LVEF -- 65%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. NORMAL DIASTOLIC FUNCTION
5. NORMAL RIGHT HEART SIZE AND RV PRESSURES
6. NORMAL CARDIAC VALVES, NO MITRAL // AORTIC STENOSIS
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.


Dr. KILLOL KANERIA, D.M., CARD.

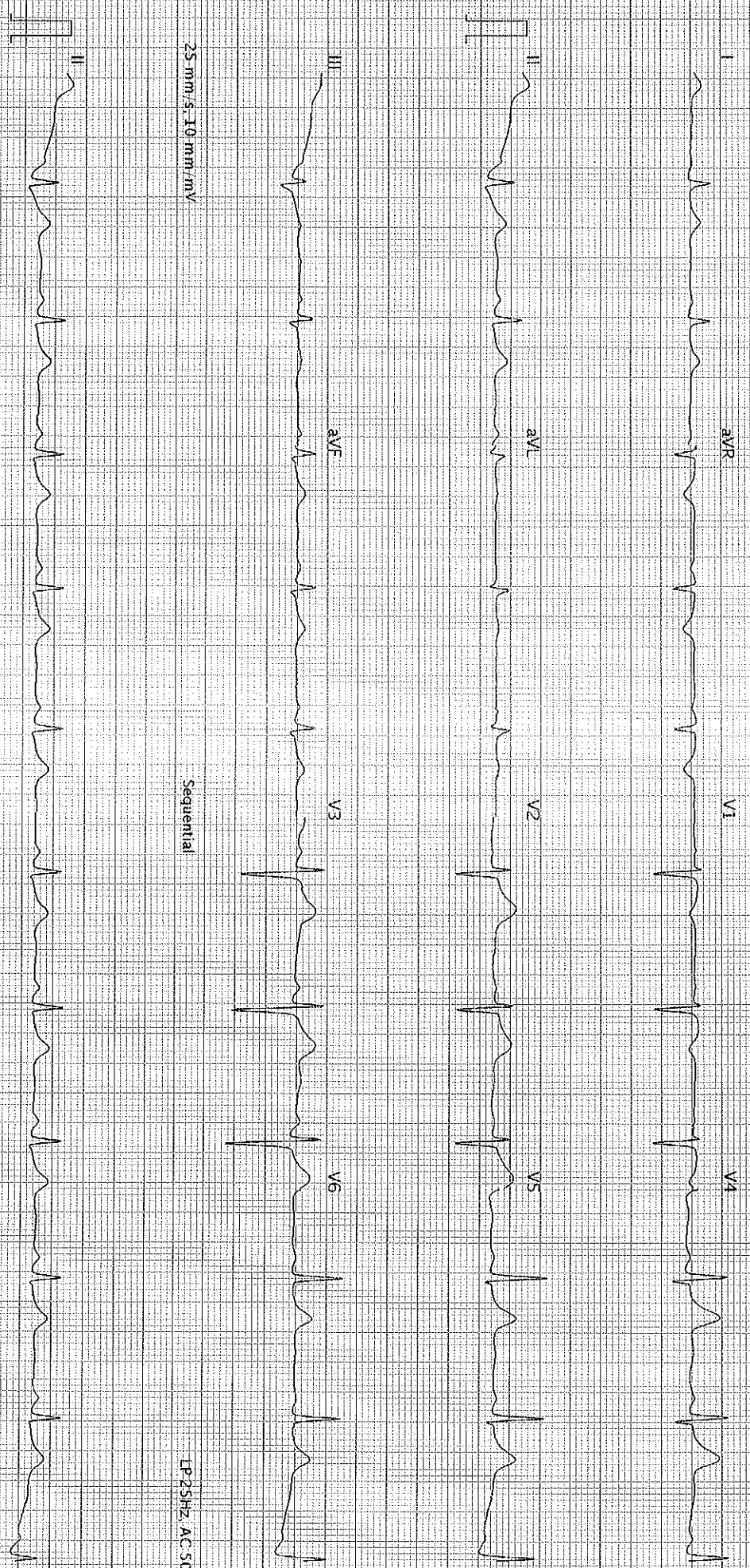
Age: 048Y Gender: Female Pacemaker: Unknown Remark:

Ref. phys:

HR 65 bpm RR 920 ms
 P axis 53° PR 104 ms
 QRS axis 37° QR 151 ms
 T axis 37° QTc 79 ms
 QTc 399 ms
 QTc 416 ms

Unconfirmed report

Handwritten signature



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz