

MEDICAL EXAMINATION REPORT

Name: - Mrs. SUMAN SINGH

Age/Sex: 46/F

DOB: 04-07-1977

ADDRESS: PLOT NO-31 RAM NAGAR HOUSING SOCIETY SCH-III, SHYAM NAGAR – 208013

she is not suffering from following disease:

- | | |
|-------------|--------------------|
| 1. DM-No | 5. Eye Disorder-No |
| 2. HTN -No | 6. Paralysis -No |
| 3. COPD -No | 7. Epilepsy -No |
| 4. TB -No | 8. Dental -Normal |

9. EAR: Normal B/E

BP: 130/70 mmhg

PR: 67 bpm

WEIGHT: 81 Kg

RR: 19 pm

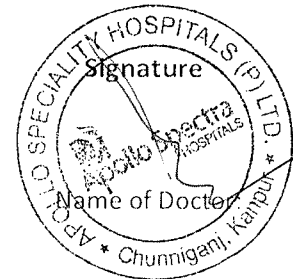
Height: 159 cm

BMI: 32 kg/m²

- *Advice for low fat diet.*
- *Advice for consultation with an Endocrinologist due to high sugar levels.*

Place: -Kanpur

Date: - 09.03.2024



Dr. Nikhat Siddiqui
M.B.B.S., M.S.(Obst. & Gynae.)
Consultant Gynaecologist & Obstetrician
Mob. : 9839601544

Suman Singh

48 yrs

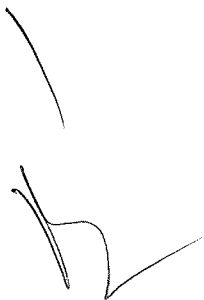
9/3/24

LMP - 2 March.

for health
checkup.

To come after
3 days for
Pap smear

P/S
menstrual
bleeding



Dr. Ajay Pratap Singh

MBBS, DLO

ENT (Ear, Nose & Throat)

Days: Monday to Friday

Timings: 02:00 PM to 3:00 PM

Emergency Mobile: +91 9935577550

Mrs. Saman Singh

48 yr/f

Rohini Health Checkup

ENT - Examination - GNL

↑
Ajay

MR. SUMAN SINGH 14/8/12

Vu $\left\{ \begin{array}{l} G/6 \\ G/6 \end{array} \right.$

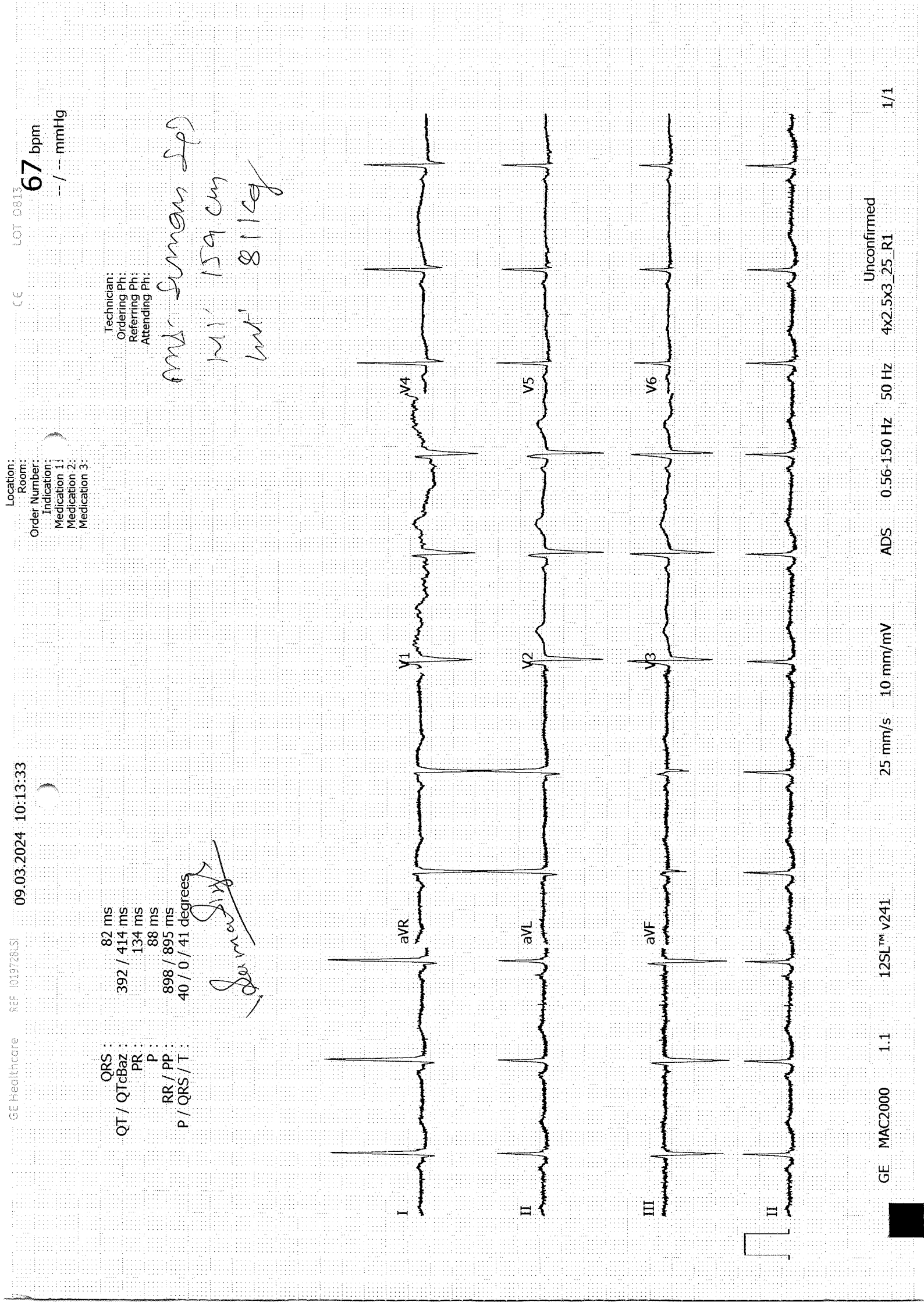
(Distant)

Nu $\left\{ \begin{array}{l} \text{Add: } 1.75^+ \text{ sph} \\ \text{Add: } 1.75^+ \text{ sph} \end{array} \right.$

Colour Vision $\left\{ \begin{array}{l} WNL \end{array} \right.$

No active intervention

Dr. Soniya Dmelo
एमवीओएसओ डीएनओबीओ
यूपीओ राजमेडिकल 40-4000



GE Healthcare REF 1049736LSI 09.03.2024 10:13:33

Location: CC
 Room: 67 bpm
 Order Number: -- / -- mmHg
 Indication:
 Medication 1:
 Medication 2:
 Medication 3:

Technician:
 Ordering Ph:
 Referring Ph:
 Attending Ph:

QRS : 82 ms
 QT / QTcBaz : 392 / 414 ms
 PR : 134 ms
 P : 88 ms
 RR / PP : 898 / 895 ms
 P / QRS / T : 40 / 0 / 41 degrees

Dr. Sumon Singh

Dr. Sumon Singh
 MI 159 cm
 WT 81 kg

Patient Name : Mrs. SUMAN SINGH
UHID : SKAN.0000133749
Reported on : 09-03-2024 11:31
Adm/Consult Doctor :

Age : 46 Y F
OP Visit No : SKANOPV163461
Printed on : 09-03-2024 11:45
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Note-Limited evaluation due to obesity

Observation

Liver- Mild hepatomegaly with diffuse grade I Fatty liver . No focal lesions. Intra hepatic biliary radicles not dilated. Portal vein is normal in course and caliber.

Gall Bladder- Normal in distension and wall thickness.No sizeable calculus or mass lesion. CBD normal in course, caliber & clear in visualized region.

Pancreas - Normal in size, shape and echogenicity. No sizeable mass lesion.Main Pancreatic duct not dilated.

Spleen -normal in size, shape and echogenicity. No focal lesion. Splenic vein at hilum is normal caliber.

Retroperitoneum -obscured by bowel gas..

Bilateral Kidney -Normal in size, shape, position and echogenicity. Corticomedullary differentiation preserved. Pelvicalyceal system not dilated.No calculus or mass lesion. Bilateral ureter not dilated.

Urinary Bladder -is empty. Pelvic organs could not be commented.

No evidence of ascites.

IMPRESSION:

Mild hepatomegaly with diffuse grade I Fatty liver

Suggest - clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

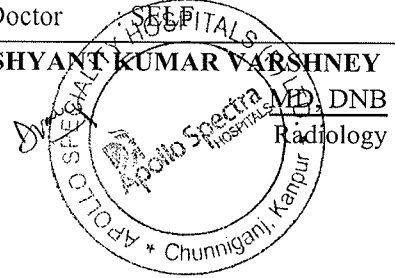
Printed on:09-03-2024 11:31

---End of the Report---

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Printed on : 09-03-2024 11:45
Ref Doctor

Dr. DUSHYANT KUMAR VARSHNEY



DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SUMAN SINGH	Age / Gender : 46Y/Female
UHID/MR No. : SKAN.0000133749	OP Visit No : SKANOPV163461
Sample Collected on : 09-03-2024 10:32	Reported on : 09-03-2024 14:25
LRN# : LAB13385390	Specimen : Blood(EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HEMOGRAM + PERIPHERAL SMEAR			
Hemoglobin Method: Cyanide Photometric	9.1*	11.5 - 15	g/dL
RBC Count Method: Electrical Impedance	4.27	3.8 - 4.8	millions/cu mm
Haematocrit Method: Calculated	30.8*	36 - 46	%
MCV Method: Calculated	72.1*	83 - 101	fl
MCH Method: Calculated	21.3*	27 - 32	pg
MCHC Method: Calculated	29.5*	31.5 - 34.5	g/dl
RDW	18.0*	11.6 - 14	%
Platelet Count Method: Electrical Impedance	4.77*	1.5 - 4.1	lakhs/cumm
TLC Count Method: Electrical Impedance	8900	4000 - 11000	cells/cumm



Results are to be correlated clinically

S. Sankar

NOTE: Technician/Technologist
An pathological test have technical limitations which may at times cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

Excel Hospitals (P) Ltd.

Dr. SATINDER SINGH
MD
14/138, Chunniganj, Kanpur - 208001
Ph: 0512-2555991, 2555992
Email : excelhospitals@gmail.com
❖ Emergency No. 9935577550

DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SUMAN SINGH	Age / Gender : 46Y/Female
UHID/MR No. : SKAN.0000133749	OP Visit No : SKANOPV163461
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LRN# : LAB13385390	Specimen : Blood(EDTA)
Ref Doctor : SELF	
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Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

Differential Leucocyte Count(Fluorescence Flow Cytometry / VCS Technology)

Neutrophils	60	40 - 80	%
Lymphocytes	35	20 - 40	%
Monocytes	02	2 - 10	%
Eosinophils	03	1-6	%
Basophils	00	0-2	%
Erythrocyte Sedimentation Rate (ESR) Method: Westergrens Method.	28*	0 - 20	mm/hr

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD GROUP ABO AND RH FACTOR			
ABO Method: Microplate Hemagglutination	O		
Rh (D) Type: Method: Microplate Hemagglutination	POSITIVE		

End of the report



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DEPARTMENT OF LABORATORY SERVICES

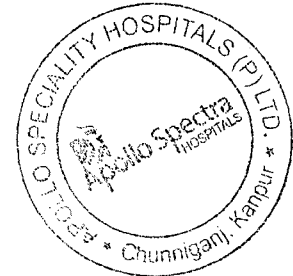
Patient Name : Mrs. SUMAN SINGH Age / Gender : 46Y/Female
UHID/MR No. : SKAN.0000133749 OP Visit No : SKANOPV163461
Sample Collected on : 09-03-2024 10:32 Reported on : 09-03-2024 14:28
LRN# : LAB13385390 Specimen : Blood(EDTA)
Ref Doctor : SELF
Emp/Auth/TPA ID : UBOIES4123. Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF LABORATORY MEDICINE

PERIPHERAL SMEAR

Methodology : Microscopic
RBC : are showing Normocytic Normochromic/Microcytic Hypochromic.
WBC : within normal limits. DLC is as mentioned.
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic /Microcytic Hypochromic Anemia.
Advised : Serum Iron Study.
Note/Comment : Please Correlate clinically

End of the report



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when may sometimes cause interpretative errors.
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Dr. SATINDER SINGH
Excel Hospitals (P) Ltd.

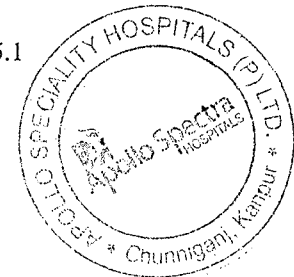
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DEPARTMENT OF LABORATORY SERVICES

Patient Name : Mrs. SUMAN SINGH	Age / Gender : 46Y/Female
UHID/MR No. : SKAN.0000133749	OP Visit No : SKANOPV163461
Sample Collected on : 09-03-2024 10:32	Reported on : 09-03-2024 14:31
LRN# : LAB13385390	Specimen : Serum
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GAMMA GLUTAMYL TRANSFERASE (GGT)			
GAMMA GT	50*	< 38	U/L
Method: Kinetic Photometric			
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)			
CREATININE - SERUM / PLASMA	0.8	0.55 - 1.02	mg/dl
Method: Jaffe's Kinetic			
URIC ACID - SERUM	3.7	2.6 - 6.0	mg/dl
Method: Modified Uricase			
UREA - SERUM/PLASMA	25	Female: 15 - 36	mg/dl
Method: Urease with indicator dye			
CALCIUM	11.2*	8.5 - 10.1	mg/dl
Method: O-Cresolphthalein complexone			
BUN	11.66	7-17	mg/dl
Method: Urease with indicator dye			
PHOSPHORUS	4.13	2.5 - 4.5	mg/dl
Method: Phosphomolybdate -UV			
ELECTROLYTES (Na)	135	135 - 145	meq/L
Method: ISE-Direct			
ELECTROLYTES (K)	4.8	3.5 - 5.1	meq/L



Results are to be correlated clinically

S. S. S. S.

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Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
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Method: ISE-Direct

LIVER FUNCTION TEST (LFT)

BILIRUBIN TOTAL 0.33 0.2 - 1.3 mg/dL

Method: Azobilirubin/dyphylline

BILIRUBIN (DIRECT) 0.19 Adults: 0.0 - 0.3 mg/dL

Method: Dual Wavelength Spectrophotometric Neonates: 0.0 - 0.6

BILIRUBIN UNCONJUGATED(INDIRECT) 0.14 0.0 - 1.1 mg/dL

Method: Dual Wavelength Spectrophotometric

ALBUMIN 4.3 3.0 - 5.0 g/dL

Method: Bromocresol Green dye binding

PROTEIN TOTAL 7.7 6.0 - 8.2 g/dL

Method: Biuret Reaction

AST (SGOT) 69* 14 - 36 U/L

Method: Kinetic (Leuco dye) with P 5 P

GLOBULIN 3.4 2.8 - 4.5 g/dL

Method: Calculation

ALT(SGPT) 64* 9 - 52 U/L

LIPID PROFILE

CHOLESTEROL 249* <200 - Desirable mg/dL

Method: CHOD-End Point POD (Enzymatic) 200-239 - Borderline High

>=240 - High

HDL 56 <40 - Low mg/dL



Results are to be correlated clinically

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DEPARTMENT OF LABORATORY SERVICES

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LRN# : LAB13385390	Specimen : Blood(bio/EDTA)
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
HbA1c, GLYCATED HEMOGLOBIN			
HbA1c, GLYCATED HEMOGLOBIN Method:HPLC	8.3*	<=5.6:Non-Diabetic 5.7-6.4: Prediabetes (Increased Risk for Diabetes) >=6.5: Diabetes Mellitus Note: In absence of unequivocal Hyperglycemia and the presence of discordant fasting, post prandial or Random Glucose values, result should be confirmed by repeat test(ADA Guidelines 2015)	%
eAG (estimated Average Glucose) Method: Calculated	191.51		mg/dL

End of the report



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Lab Technician / Technologist
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DEPARTMENT OF LABORATORY SERVICES

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UHID/MR No. : SKAN.0000133749	OP Visit No : SKANOPV163461
Sample Collected on : 09-03-2024 10:32	Reported on : 09-03-2024 18:26
LRN# : LAB13385390	Specimen : Urine
Ref Doctor : SELF	
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	
Emp/Auth/TPA ID : UBOIES4123.	Adm/Consult Doctor :
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED	

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
COMPLETE URINE EXAMINATION			
Color:	Straw	Pale Yellow	
Specific Gravity Method: Indicator Method	1.025	1.005 - 1.035	
Transparency:	Clear	Clear	
Protein : Method: Indicator Method	Nil	Nil	
Glucose: Method: Glucose Oxidase	Absent	Nil	
pH Method: Indicator Method	6.0 (Acidic)	4.6 - 8	
DEPOSITS:	Absent		
WBC/Pus Cells	Nil	0-5	/hpf
Tc/Sqc(Transitional/Squamous epithelial cells)	Occasional	2-3	/hpf



Results are to be correlated clinically

S. S. Singh

NOTE Technical/Technologist technical limitations which may cause interpretative errors. Collaborative clinical pathological co-relation is necessary. In case of any discrepancy, results may be reviewed and repeat investigation is advised. Typographical errors should be reported immediately for correction. The report is not valid for medico legal purpose.

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RBC	Nil	0 - 2	/hpf
Crystals:	Nil		
Casts:	Nil		/hpf

End of the report



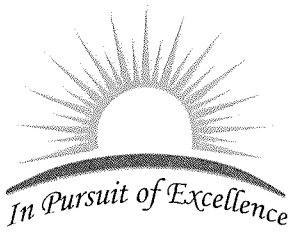
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SONI DIAGNOSTICS

118/572, KAUSHALPURI, GUMTI NO. 5, KANPUR - 208012

Ph. : 0512-2219667, 8858154254

e-mail : sonidiagnostics01@gmail.com

Patient Name : MRS. SUMAN SINGH

Age / Gender : 46 years / Female

Patient ID : 46524

Source : Excel Hospital

Referral : SELF

Collection Time : 09/03/2024, 03:02 p.m.

Reporting Time : 09/03/2024, 08:19 p.m.

Sample ID :



240690039

Test Description	Value(s)	Reference Range	Unit(s)
------------------	----------	-----------------	---------

T3,T4,TSH

SAMPLE TYPE : SERUM

T3 Method : CLIA	1.28	0.79 - 1.58	ng/mL
T4 Method : CLIA	10.3	5.2-12.7	µg/dL
TSH Method : CLIA	3.51	0.3-4.5	µIU/mL

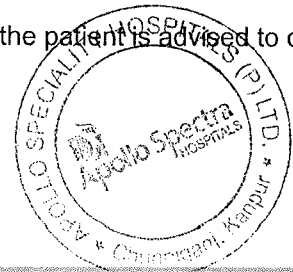
Interpretation

TSH	T4	T3	INTERPRETATION
HIGH	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPOTHYROIDISM
HIGH	LOW OR NORMAL	LOW OR NORMAL	HYPOTHYROIDISM
LOW	NORMAL	NORMAL	MILD (SUBCLINICAL)HYPERTHYROIDISM
LOW	HIGH OR NORMAL	HIGH OR NORMAL	HYPERTHYROIDISM
LOW	LOW OR NORMAL	LOW OR NORMAL	NON-THYROIDAL ILLNESS: RARE PITUITARY (SECONDARY)HYPOTHYROIDISM

****END OF REPORT****

All the reports have to be correlated clinically. If the result of the tests are unexpected, the patient is advised to contact the lab immediately for a recheck.

Dr. S.S.Soni
M.D. (PATHOLOGY)




All diagnostic tests have limitations & clinical interpretation should not be solely based on single investigation. Clinical correlation and further relevant investigations advised if warranted. Any discrepancies in test results should be notified within 24 hours. This report is not valid for medicolegal purpose.

भारत सरकार
GOVERNMENT OF INDIA



सुमन सिंह
Suman Singh
जन्म तिथि/ DOB: 04/07/1977
महिला / FEMALE



2357 8983 0616

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: W/O प्रदीप सिंह, प्लॉट
एन0-31 रामनगर स्कीम-3,
रामपुरम श्यामनगर,
सी.ओ.डी., कानपुर नगर,
उत्तर प्रदेश - 208013

Address: W/O Pradeep Singh, Plot NO-31
Rannagar scheme-3,
Rampuram Shyamnagar, COD,
Kanpur Nagar,
Uttar Pradesh - 208013

2357 8983 0616

MEERA AADHAAR, MERI PEHACHAN

Submitted for health check

