

Dr. Vimmi Goel  
MBBS, MD (Internal Medicine)  
Sr. Consultant Non Invasive Cardiology  
Reg. No: MMC-2014/01/0113

Preventive Health Check up  
KIMS Kingsway Hospitals  
Nagpur  
Phone No.: 7499913052

 **KIMS-KINGSWAY  
HOSPITALS**

Name: ms. Ruchika chaudhari Date: 23/01/24

Age: 34yr Sex: M/F Weight: 47.9 kg Height: 157 inc BMI: 19.4

BP: 104/67 mmHg Pulse: 79/min bpm RBS: \_\_\_\_\_ mg/dl

SpO2 - 99%

LMP - 28/12/23



**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age / Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 23-Jan-24 08:37 am	<b>Report Date</b> : 23-Jan-24 10:06 am

**HAEMOGRAM**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	<b>11.6</b>	12.0 - 15.0 gm%	Photometric
Haematocrit(PCV)		<b>35.8</b>	36.0 - 46.0 %	Calculated
RBC Count		4.54	3.8 - 4.8 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>79</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>25.5</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		32.3	31.5 - 35.0 g/l	Calculated
RDW		<b>15.3</b>	11.5 - 14.0 %	Calculated
Platelet count		367	150 - 450 $10^3$ /cumm	Impedance
WBC Count		6500	4000 - 11000 cells/cumm	Impedance

**DIFFERENTIAL COUNT**

Neutrophils	<b>49.8</b>	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes	<b>44.5</b>	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils	1.5	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes	4.2	2 - 10 %	Flow Cytometry/Light microscopy
Basophils	0.0	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count	3237	2000 - 7000 /cumm	Calculated



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<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Lymphocyte Count		2892.5	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		97.5	20 - 500 /cumm	Calculated
Absolute Monocyte Count		273	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
<b><u>PERIPHERAL SMEAR</u></b>				
RBC		Microcytosis +(Few), Hypochromia +(Few), Anisocytosis +(Few)		Light microscopy
WBC		As Above		
Platelets		Adequate		
ESR		18	0 - 20 mm/hr	Automated Westergren's Method

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100499

Test results related only to the item tested.

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**Dr. VAIDEHEE NAIK, MBBS,MD  
CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age / Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 23-Jan-24 08:36 am	<b>Report Date</b> : 23-Jan-24 10:06 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	94	< 100 mg/dl	GOD/POD,Colorimetric
Post Prandial Plasma Glucose		82	< 140 mg/dl	GOD/POD, Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HbA1c)</b>				
<b>HbA1c</b>		5.5	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

\*\*\* End Of Report \*\*\*

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**CONSULTANT PATHOLOGIST**

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Phone: +91 0712 6789100

CIN: U74999MH2018PTC303510





**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age /Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
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**LIPID PROFILE**

<b>Parameter</b>	<b>Specimen</b>	<b>Results</b>	<b>Method</b>
Total Cholesterol	Serum	145 < 200 mg/dl	Enzymatic(CHE/CHO/POD)
Triglycerides		31 < 150 mg/dl	Enzymatic (Lipase/GK/GPO/POD)
HDL Cholesterol Direct		36 > 50 mg/dl	Phosphotungstic acid/mgcl-Enzymatic (microslide)
LDL Cholesterol Direct		96.76 < 100 mg/dl	Enzymatic
VLDL Cholesterol		6 < 30 mg/dl	Calculated
Tot Chol/HDL Ratio		4 3 - 5	Calculation

<b>Initiate therapeutic</b>	<b>Consider Drug therapy</b>	<b>LDC-C</b>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%		<100
Two or more additional major risk factors, 10 yrs CHD risk <20%	>130	10 yrs risk 10-20 % >130
No additional major risk or one additional major risk factor	>160	10 yrs risk <10% >160
		>190, optional at 160-189
		<160

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age / Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 23-Jan-24 08:37 am	<b>Report Date</b> : 23-Jan-24 10:36 am

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
<b>RFT</b>				
Blood Urea	Serum	21	15.0 - 36.0 mg/dl	Urease with indicator dye
Creatinine		<b>0.50</b>	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		126.1	>90 mL/min/1.73m square.	Calculation by CKD-EPI 2021
Sodium		143	136 - 145 mmol/L	Direct ion selective electrode
Potassium		3.77	3.5 - 5.1 mmol/L	Direct ion selective electrode
<b>THYROID PROFILE</b>				
<b>T3</b>		1.51	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
<b>Free T4</b>		1.10	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
<b>TSH</b>		3.92	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence

\*\*\* End Of Report \*\*\*

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**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mrs. RUCHIKA CHAUDHARI  
**Age / Gender** : 34 Y(s)/Female  
**Bill No/ UMR No** : BIL2324071565/UMR2324034683  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 23-Jan-24 08:37 am  
**Report Date** : 23-Jan-24 10:36 am

**LIVER FUNCTION TEST(LFT)**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Total Bilirubin	Serum	0.39	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.26	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.13	0.1 - 1.1 mg/dl	Dual wavelength spectrophotometric pNPP/AMP buffer
Alkaline Phosphatase		57	38 - 126 U/L	Kinetic with pyridoxal 5 phosphate
SGPT/ALT		15	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		19	13 - 35 U/L	Biuret (Alkaline cupric sulphate)
Serum Total Protein		7.32	6.3 - 8.2 gm/dl	Bromocresol green Dye Binding
Albumin Serum		4.23	3.5 - 5.0 gm/dl	Calculated
Globulin		3.09	2.0 - 4.0 gm/dl	
A/G Ratio		1.37		

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. VAIDEHEE NAIK, MBBS,MD  
CONSULTANT PATHOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY****DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age / Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 23-Jan-24 08:54 am	<b>Report Date</b> : 23-Jan-24 11:12 am

<b>Parameter</b>	<b>Specimen</b>	<b>Results</b>	<b>Method</b>
<b>URINE MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
Volume	Urine	40 ml	
Colour.		Pale yellow	
Appearance		Clear	Clear
<b>CHEMICAL EXAMINATION</b>			
Reaction (pH)	Urine	7.0	4.6 - 8.0
Specific gravity		1.005	1.005 - 1.025
Urine Protein		Negative	Negative
Sugar		Negative	Negative
Bilirubin		Negative	Negative
Ketone Bodies		Negative	Negative
Nitrate		Negative	Negative
Urobilinogen		Normal	Normal
<b>MICROSCOPIC EXAMINATION</b>			
Epithelial Cells	Urine	0-1	0 - 4 /hpf
R.B.C.		Absent	0 - 4 /hpf
Pus Cells		0-1	0 - 4 /hpf
Casts		Absent	Absent
Crystals		Absent	
<b>USF(URINE SUGAR FASTING)</b>			
Urine Glucose	Urine	Negative	

**\*\*\* End Of Report \*\*\***

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. VAIDEHEE NAIK, MBBS,MD****CONSULTANT PATHOLOGIST**  
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CIN: U74999MH2018PTC303510





**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF IMMUNO HAEMATOLOGY**

<b>Patient Name</b> : Mrs. RUCHIKA CHAUDHARI	<b>Age / Gender</b> : 34 Y(s)/Female
<b>Bill No/ UMR No</b> : BIL2324071565/UMR2324034683	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 23-Jan-24 08:37 am	<b>Report Date</b> : 23-Jan-24 10:51 am

**BLOOD GROUPING AND RH**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	
BLOOD GROUP.	EDTA Whole Blood & Plasma/ Serum	" A "	Gel Card Method
Rh (D) Typing.		* Positive "(+Ve) *** End Of Report ***	

Suggested Clinical Correlation \* If necessary, Please discuss  
Verified By : : 11100499  
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**Dr. VAIDEHEE NAIK, MBBS,MD  
CONSULTANT PATHOLOGIST**

**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	RUCHIKA CHAUDHARI	STUDY DATE	23-01-2024 10:12:28
AGE/ SEX	34Y / F	HOSPITAL NO.	UMR2324034683
ACCESSION NO.	BIL2324071565-10	MODALITY	DX
REPORTED ON	23-01-2024 10:31	REFERRED BY	Dr. Vinmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION** -No pleuro-parenchymal abnormality seen.



**DR R.R KHANDELWAL**

**SENIOR CONSULTANT**

**MD, RADIODIAGNOSIS [MMC-55870]**

N.B.: This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

NAME OF PATIENT:	MRS. RUCHIKA CHAUDHARI	AGE & SEX:	34YRS/FEMALE
UMR NO	2324034683	BILL NO:	2324071565
REF BY:	DR. VIMMI GOEL	DATE:	23/01/2024

**USG ABDOMEN AND PELVIS**

LIVER is normal in size and echotexture. No evidence of any focal lesion seen.  
Intrahepatic biliary radicals are not dilated. PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it.  
Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

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

Both KIDNEYS are normal in shape, size and echotexture.  
No evidence of calculus or hydronephrosis seen.  
URETERS are not dilated.

URINARY BLADDER is well distended. No calculus or mass lesion seen.

Uterus is anteverted and normal.  
No focal myometrial lesion seen.  
Endometrial echo-complex appear normal.  
No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

**IMPRESSION:** USG reveals,  
No significant visceral abnormality seen.



DR. R.R. KHANDELWAL  
SENIOR CONSULTANT  
MD RADIO DIAGNOSIS [MMC-55870]



Kingsway Hospitals  
46 Kingsway, Mohan Nagar,  
Near Kasturchand Park, Nagpur

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: Mrs. Ruchika, Chaudhari  
Patient ID: 034683  
Height:  
Weight:  
Study Date: 23.01.2024  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

DOB: 07.07.1989  
Age: 34yrs  
Gender: Female  
Race: Indian  
Referring Physician: Mediwheel HCU  
Attending Physician: Dr. Vimmi Goel  
Technician: --

**Medications:**  
--

**Medical History:**  
NIL

**Reason for Exercise Test:**

Screening for CAD

**Exercise Test Summary:**

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:31	0.00	0.00	84	100/60	
	WARM-UP	00:06	0.60	0.00	91		
EXERCISE	STAGE 1	03:00	1.70	10.00	105	100/60	
	STAGE 2	03:00	2.50	12.00	109	100/60	
	STAGE 3	03:00	3.40	14.00	141	110/70	
	STAGE 4	00:29	4.20	16.00	160		
RECOVERY		01:00	0.00	0.00	114	120/70	
		02:00	0.00	0.00	100	110/70	
		00:36	0.00	0.00	84	110/70	

The patient exercised according to the BRUCE for 9:29 min:s, achieving a work level of Max. METS: 11.60. The resting heart rate of 83 bpm rose to a maximal heart rate of 162 bpm. This value represents 87% of the maximal, age-predicted heart rate. The resting blood pressure of 100/60 mmHg, rose to a maximum blood pressure of 120/70 mmHg. The exercise test was stopped due to Target heart rate achieved.

**Interpretation:**

Summary: Resting ECG: Minor ST-T changes seen..

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

**Conclusions:**

TMT is negative for inducible ischemia.

Insignificant ST-T changes seen.



34 Years

MRS RUCHIKA CHAUDHARI

Female

23-Jan-24 8:49:50 AM

KIMS-KINGSWAY HOSPITALS

PBC DEPT.

Rate 65 Sinus rhythm.....normal P axis, V-rate 50- 99  
 PR 139 Atrial premature complex.....SV complex w/ short P-R interval  
 QRS 99 RSR' in V1 or V2, probably normal variant.....small R' only  
 QT  
 QTc

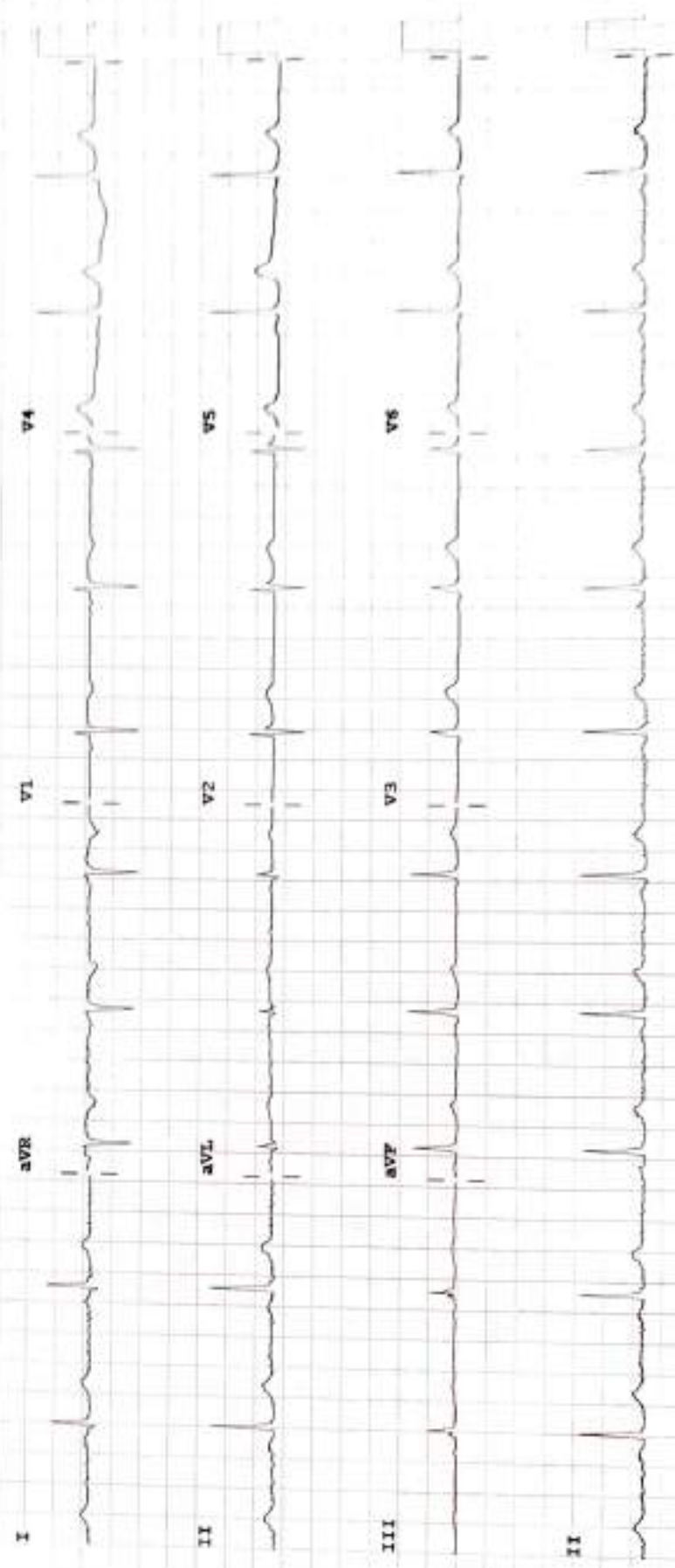
--AXIS--

P 41  
 QRS 56  
 T 44

12 Lead: Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50~ 0.50-150 Hz W 100B CL P7

PHILIPS

PHILIPS

200