ROHIT, SHARDABEN
Female

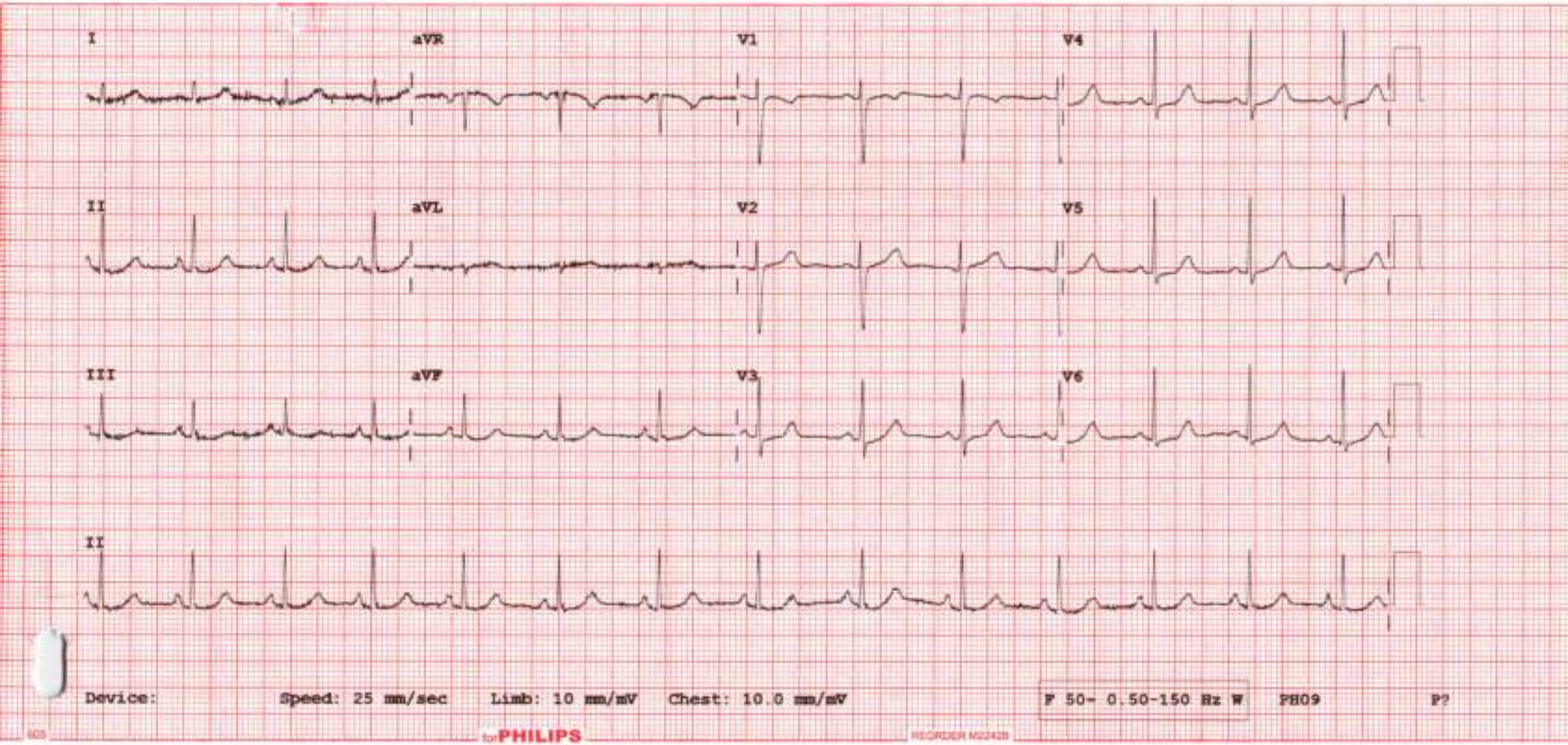
19-Mar-24 3:14:20 PM

Rate	83
PR	136
QRSD	78
QT	368
QTc	433

--AXIS--

P	72
QRS	67
T	35

12 Lead; Standard Placement



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Superspeciality Hospital
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2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT

NAME: SHARDABEN ROHIT

DATE: 19/03/2024

AGE/SEX: 43 YRS/FEMALE

REF BY: DIRECT

OBSERVATION:

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NO LV DIASTOLIC DYSFUNCTION.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- TRIVIAL TR. NO PAH.
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- INTACT IAS & IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

LA: 27MM **AO: 20MM** **IVS: 09/13MM** **LVPW: 10/13MM** **LVID: 39/21MM**

CONCLUSION:

- **NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.**
- **NO RWMA AT REST.**
- **LVEF = 60% (VISUAL).**

DR.NIRAV BHALANI
[CARDIOLOGIST]

DR.ARVIND SHARMA
[CARDIOLOGIST]

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PATIENT NAME: SHARADBEN ROHIT	
AGE/SEX: 42 YRS/F	DATE: Tuesday, 19 March 2024

CHEST X-RAY (PA)

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

IMPRESSION:

- **NO SIGNFICANT ABNORMALITY NOTED IN LUNG FIELDS**
- **NORMAL CARDIAC SHADOW**

DR SHARAD RUNGTA (MD & DNB)
CONSULTANT RADIOLOGIST
Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.

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PATIENT NAME: SHARDABEN ROHIT	
AGE/SEX: 42 YRS/F	DATE: Tuesday, 19 March 2024

ULTRASOUND OF ABDOMEN & PELVIS

LIVER appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

GALL BLADDER is distended. No evidence of abnormal wall thickening or any significant calculus within.

PANCREAS appears normal. MPD is WNL.

SPLEEN appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

BOTH KIDNEYS appear normal in size, shape and position.
Show normal cortical echogenicity. Corticomedullary differentiation is maintained.
No evidence of calculus or hydronephrosis on either side.

URINARY BLADDER is partially full. No evidence of abnormal wall thickening or any significant calculus within.

UTERUS appears normal in size and position. CET is 5.2 mm WNL. No evidence of focal lesion noted.
No evidence of focal or obvious adnexal mass lesion noted.

BOWEL LOOPS appear normal and show normal peristalsis.
No evidence of LYMPHADENOPATHY noted.
No evidence of ASCITES noted.

IMPRESSION:

- **NO SIGNIFICANT ABNORMALITY AT PRESENT SCAN.**

DR SHARAD RUNGTA (MD & DNB)
COUNSULTANT RADIOLOGIST

Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.

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Patient Name :	Shardaben Rajnikant Rohit	**Sample No. :**	20240314424
Patient ID :	20240308954	**Visit No. :**	OPD20240328608
Age / Sex :	43y/Female	**Coll. Date :**	19/03/2024 09:15
Consultant :	DR SAURABH JAIN	**S. Coll. Date :**	19/03/2024 10:21
Ward :	-	**Report Date :**	19/03/2024 15:50

CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	**11.5** gm/dl [L]	12.5 to 16.0 gm/dl
P.C.V. :	**35.3** % [L]	37.0 to 47.0 %
M.C.V. :	**76.6** fL [L]	78 to 100 fL
M.C.H. :	**24.9** pg [L]	27 to 31 pg
M.C.H.C. :	32.6 g/dl	32 to 36 g/dl
RDW :	12.2 %	11.5 to 14.0 %
RBC Count :	4.61 X 10^6/ cumm	4.2 to 5.4 X 10^6/ cumm
Polymorphs :	61 %	38 to 70 %
Lymphocytes :	35 %	15 to 48 %
Eosinophils :	2 %	0 to 6 %
Monocytes :	**2** % [L]	3 to 11 %
Basophils :	0 %	0.0 to 1.0 %
Total :	100	< 100 > 100
WBC Count :	7000 /cmm	4000 to 10000 /cmm
Platelets Count :	309000 / cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	9 mm/hr	1 to 20 mm/hr

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521

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Blood Group

Investigation	Result	Normal Value
BLOOD GROUP :		
ABO	A	
Rh	Negative	

HBA1C

Investigation	Result	Normal Value
Glycosylated Hb :	6.2 % [H]	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	131.24	

FBS & PPBS

Investigation	Result	Normal Value
Blood Sugar (FBS) :	89 mg/dl	74 - 100 mg/dl
Urine Sugar (FUS) :	Nil	
Blood Sugar (PP2BS) :	77 mg/dl	70 to 120 mg/dl
Urine Sugar (PP2US) :	Nil	

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Consultant :	DR SAURABH JAIN	**S. Coll. Date :**	19/03/2024 10:22
Ward :	-	**Report Date :**	19/03/2024 15:50

RENAL FUNCTION TEST

Investigation	Result	Normal Value
Creatinine :	0.7 mg/dl	0.6 - 1.4 mg/dl
Urea :	27 mg/ dl	13 - 45 mg/dl
Uric Acid :	2.4 mg/dl	3.5 - 7.2 mg/dl
Calcium :	9.8 mg/dl	8.5 - 10.5
Phosphorus :	3.5 mg/dl	1.5 - 6.8

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Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	174 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	75 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	51 mg/dl	Low risk: >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	**108 mg/dl [L]**	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	15 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	2.12	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.41	Low Risk : 3.3 to 4.4 Average Risk : 4.4 to 7.1 Moderate Risk : 7.1 to 11.0 High Risk : > 11.0
Total Lipids :	600 mg/dl	400 to 700 mg/dl

Note :- Lipemic samples give high triglyceride value and falsely low LDL value.

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LFT (Liver Function Test)

Investigation	Result	Normal Value
Total Bilirubin :	0.7 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.3 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.4 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	20 U/L	5 to 34 U/L
ALT (SGPT) :	12 U/L	0 to 55 U/L
Total Protein (TP) :	**6.3** g/dL [L]	6.4 to 8.3, g/dl
Albumin (ALB) :	3.9 g/dl	3.5 to 5.2 g/dl
Globulin :	2.4 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.63	
Alkaline Phosphatase (ALP) :	66 U/L	40 to 150 U/L
GAMMA GT. :	10 U/L	7 to 35 U/L

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Urine R/M

Investigation	Result	Normal Value
Quantity - :	10 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	7.0	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.030	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	Absent /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	4-7 /hpf	

Dr.Mehul Desai
M.B.D.C.P
Reg.No.G-9521

CONDITIONS OF REPORTING

1. The reported results are for the referring doctor's information only. Isolated results may not confirm the final diagnosis of a disease and should be interpreted with patient's clinical history, keeping in mind the limitations of methodology and technology. Partial reproduction of these reports are illegal.
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3. In case of collected specimens, which are referred to USL(B). LLP, from a referral centre, it is presumed that patient's demographics are verified and confirmed at the point of generation of the said specimens and the result(s) relate only to the samples(s) receive.
4. USL(B).LLP does not verify client/patients' identity at the time of sample collection. It is presumed that whatever information given by them is true which is reflected in reports.
5. Laboratory results are subject to pre-analytical, analytical, post-analytical variable and technical limitations including human errors. USL(B).LLP kindly requests to correlate the reported results clinically. USL(B). LLP strongly recommends reconfirmation of high abnormal/unusual results with repeat fresh sample before taking any medical decision.
6. Results relate only to the sample tested. Result of laboratory tests may very from laboratory to laboratory and also in some parameters from time to time for the same patient; may be due to physiological variations, different methodology, technology & its limitations etc.
7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolysed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
8. In unanticipated circumstances (non-availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule. However USL(B). LLP, will ensure that the delay is minimized.
9. The sex of the fetus will not be revealed as per the Prenatal Diagnostic Technique (Regulation and Prevention of Misuse Act, 1994).
10. Tests parameters marked by asterisks (*) are excluded from the "scope" of NABL accredited tests.
11. It is mandatory to send Biopsy/Histopathology specimen in 10% formalin.
12. Partial reproduction of these reports are illegal & not permitted.
13. These reports are not valid for medico-legal purposes.
14. Any queries regarding possible interpretation / clinical - pathological correlation from referring doctor/patient should be directed to the pathologists.
15. Subject to Baroda Jurisdiction only.

GENERAL PRINCIPLES OF LABORATORY TESTING & LABORATORY REFERENCE RANGES

1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are sufficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
4. Negative laboratory test results do not necessary rule out a clinical diagnosis.

TEAM OF DOCTORS

Dr. Girish Gupta, MD (Path)
Dr. Ankit Jhaveri MD (Path)
Dr. Rachna Parekh DCP
Dr Priya Mangukiya MD (Microbiology)
Dr. Varsha Raimalani, PhD
Dr. Nehal Tiwari MD (Path)
Dr. Rakesh Shah MD (Path) , DCP
Dr. Vishal Jhaveri, DCP
Dr. Hetal Parikh MD (Path) FRCPath (UK)
Dr. Sukanya Patra MBBS, MD (Path)
Dr. Shreyas Nisarta MD(Path)
Dr. Vaishali Bhatt, DCP

OUR UNITS

a) Aayu Path Lab (Tarsali) - 9376224836, 7043940202

b) Purak Hi-Tech Lab (Nizampura) - 7229046350, 9377559900

c) Dr. Jhaveri Laboratory (Akota) - 0265-2329428, 9998724579

d) Dr. Jhaveri Laboratory (Polo Ground) - 0265-2424335, 9725282172

e) Jhaveri Advanced Path Lab (Subhanpura)

f) Jhaveri Advanced Path Lab (Waghodiya road)

TEST REPORT

Reg. No.	: 40301011530	**Reg. Date**	: 19-Mar-2024 12:17	**Collected On**	: 19-Mar-2024 12:17
Name	: Ms. SHARDABEN ROHIT			**Approved On**	: 19-Mar-2024 14:40
Age	: 43 Years	**Gender**	: Female **Ref. No. :**	**Dispatch At**	:
Ref. By	:			**Tele No.**	:
Location	: SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD				

Test Name	Results	Units	Bio. Ref. Interval
	THYROID FUNCTION TEST		
T3 (triiodothyronine) Method CLIA	0.98	ng/mL	0.6 - 1.81
T4 (Thyroxine) Method CLIA	9.20	µg/dL	4.5 - 12.6
SH (ultra sensitive) Method CLIA	2.900	µIU/mL	0.55 - 4.78

Sample Type:Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

End Of Report

This is an electronically authenticated report.

Test done from collected sample.

Dr. Vishal Jhaveri
M.B.B.S, D.C.P
Reg. G-13041

Printed On: 19-Mar-2024 14:40

We are open 24 x 7 & 365 days

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Examination by Ophthalmologist

Name: SHARDABEN ROHIT Reg. No: 20240308954

Age/ Sex: 43/FEMALE DOE: 19/03/2024

C/O PV + (BE)
itching

Medical History:

Examination of Eye: Right LEFT

External Examination: (BE) dry eyes

Anti seg Examination: WNL

Schiot Tonometry IOP:

Fundus:

Without Glass Distant Vision: 6/18 6/18

Near Vision: N10 N10

With Glass Distant Vision: 6/6 6/6

Near Vision: N6 N6

Colour Vision (With Ishihara Chart): WNL

Impression:

Advice: (BE) Glass use (Bifocals)

(BE) I-kul plus eye drop — BD

Signature:

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Examination by DENTAL

Name: SHARDABEN ROHIT

Reg. No: 2024030854

Age/sex 43/FEMALE

DOE: 19/03/2024

Presenting Complaints:

Routine checkup

Medical History:

HAD

Examination:

Calculus +1, Stain ++

Impression:

Advice:

Scaling and polishing

Signature:

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Examination by Physician

Name: SHARDABEN ROHIT

Reg. No: 20240308954

Age/ Sex: 43/FEMALE

DOE: 19/03/2024

Physical Examination

Height: 147 cm Weight: 40.kg BMI: 18.51

Temperature: N Pulse: 79 BP: 110/74

SPO2-99.1

ChiefComplaints:

backache

(pre-diabetes).

PastHistory:

NAD

Examination:

General Examination:

NAD

Systemic Examination:

NAD

Investigation:

RBS

ECG

Others

Advice: T. PREGABON TOTAL 0-0-1 x 1 month

T. METFORMIN SR (500) 0-1-0 AL x 3 month

Signature

Repeat HbA1c after 3 months.

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Examination by Gynaecologist

Name: SHARDABEN ROHIT

Reg. No: 20240308954

Age/ Sex: 43/FEMALE

DOE: 19-03-2024

Presenting Complaints:

LMP = 18/2/24 → 27/2/24

Medical History:

M/H:

O/H: P2L2 pm 2CSCS.

Other:

Examination:

P/A :

P/S :

P/V : USG – NAD.

Impression:

Advice: F/U > next menses.

Signature:

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Bill of Supply (Intesim Bill)

Patient ID : 20240308954
Age / Sex : 43y / F
Patient Name : SHARDABEN RAJNIKANT ROHIT
Dr. Name : DR SAURABH JAIN
Referred By : self
City/Village : Vadodara
Class : Contract
PAN Card : AAQCS5566G

Visit No. : OPD20240328608(OPD)
Bill No. : OPD20240328608
Bill Date : N/A
Speciality : INTERNAL MEDICINE
Company Name : Mediwheel Health Check Up
GSTIN : 24AAQCS5566G2ZW
SAC : 999312 "Medical Service covered undeg healthcare service"
Mobile No. : 9998359517

Expense Details		Qty	Rate	Gross Amount	Waive	Net Amount
Visit Charge						
19/03/2024	Physician First Consultation OPD	1.0	0.0	0.00	0.0	0.00
	Opthalmologist First Consultation OPD	1.0	0.0	0.00	0.0	0.00
	Dentist First Consultation OPD	1.0	0.0	0.00	0.0	0.00
	Ob & Gy Surgeon First Consultation OPD	1.0	0.0	0.00	0.0	0.00
	Visit Charge (Subtotal)			**0.0**	**0.0**	**0.00**
PATHOLOGY						
19/03/2024	CBC, ESR	1.0			0.0	
	Urine R/M	1.0			0.0	
	STOOL EXAMINATION	1.0			0.0	
	Blood Group	1.0			0.0	
	HBA1C	1.0			0.0	
	FBS & PPBS	1.0			0.0	
	TFT (Thyroid Function Test)	1.0			0.0	
	Lipid Profile	1.0			0.0	
	RENAL FUNCTION TEST	1.0			0.0	
	LFT (Liver Function Test)	1.0			0.0	
	MediWheel Full Body Health Check-Up(Female Above 40)	1.0	3000.0	3000.00	0.0	3000.00
	PATHOLOGY (Subtotal)			**3000.0**	**0.0**	**3000.00**
Radiology						
19/03/2024	X-RAY CHEST PA	1.0			0.0	
	USG WHOLE ABDOMEN SCREENING	1.0			0.0	
	Memography	1.0	0.0	0.00	0.0	0.00
	X-RAY CHEST PA	1.0	0.0	0.00	0.0	0.00
	USG WHOLE ABDOMEN SCREENING	1.0	0.0	0.00	0.0	0.00
	Radiology (Subtotal)			**0.0**	**0.0**	**0.00**
Non Invasive Cardiology						
19/03/2024	ECG Charge(OPD Base)	1.0			0.0	
	ECHO COLOUR DOPPLER SCREENING	1.0			0.0	
	ECHO COLOUR DOPPLER SCREENING	1.0	0.0	0.00	0.0	0.00
	ECG Charge(OPD Base)	1.0	0.0	0.00	0.0	0.00
	Non Invasive Cardiology (Subtotal)			**0.0**	**0.0**	**0.00**

Total Bill Amount 3000.00
Net payable amount 3000.00
Bill Outstanding 3000.00

Received With Thanks From SHARDABEN RAJNIKANT ROHIT of Rs 0.0 /-
(Rs Zero Only)

SAVITA SUPERSPECIALITY HOSPITAL VADODARA

Health Check up Booking Confirmed Request(bobS16495),Package Code-PKG10000477, Beneficiary Code-311236

Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Mon 18-03-2024 15:48

To:rohit1985@gmail.com <rohit1985@gmail.com>
Cc:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Mediwheel
...Your wellness partner

011-41195959

Dear **MR. ROHIT RAJNIKANT AMBALAL**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name	: Mediwheel Full Body Health Checkup Female Above 40
Patient Package Name	: Mediwheel Full Body Health Checkup Female Above 40
Name of Diagnostic/Hospital	: Savita Superspeciality Hospital
Address of Diagnostic/Hospital-	: Parivar Char Rasta, Dabhoi - Waghodia Ring Rd, Sarthi Nagar 2, Kendranagar, Vadodara - 390019
City	: Vadodara
State	:
Pincode	: 390019
Appointment Date	: 19-03-2024
Confirmation Status	: Booking Confirmed
Preferred Time	: 8:30am
Booking Status	: Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
SHARDABEN RAJNIKANT ROHIT	43 year	Female

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

ભારત સરકાર
Government of India
રોહિત શાન્તાબેન
Rohit Shantaben
જન્મ તારીખ / DOB : 16/10/1980
સ્ત્રી / Female
6321 4143 1092
આધાર – સામાન્ય માણસનો અધિકાર

ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ
Unique Identification Authority of India
સરનામું: W/O: Rohit Rajnikant, 23, Tarsiya Nagar, Behind GIDC Police Station, GIDC Makarpura, Vadodara, M.I. Estate, Gujarat, 390010
Address: W/O: Rohit Rajnikant, 23, Tarsiya Nagar, Behind GIDC Police Station, GIDC Makarpura, Vadodara, M.I. Estate, Gujarat, 390010
6321 4143 1092