



BHAILAL AMIN
GENERAL HOSPITAL



H-2015-0297



MC-3004



E-2021-0037



CONCLUSION OF HEALTH CHECKUP

ECU Number : 1552	MR Number : 23199555	Patient Name : NUNNA ARUNA
Age : 55	Sex : Female	Height : 151
Weight : 62	Ideal Weight : 52	BMI : 27.19
Date : 31/01/2023		

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.



ECU Number : 1552 MR Number : 23199555 Patient Name: NUNNA ARUNA
Age : 55 Sex : Female Height : 151
Weight : 62 Ideal Weight : 52 BMI : 27.19
Date : 31/01/2023

Past H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Present H/O : K/C/O DIABETES - 10 YRS -- ON MEDICATION.

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 130/90 mm Hg

Pulse : 92/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



ECU Number : 1552
Age : 55
Weight : 62
Date : 31/01/2023

MR Number : 23199555
Sex : Female
Ideal Weight : 52

Patient Name: NUNNA ARUNA
Height : 151
BMI : 27.19

Ophthalmic Check Up :

Right

Left

Ext Exam

-

Vision Without Glasses

-

-

Vision With Glasses

WITH NEW TREAT : 6/6 N.5

6/6 N.5

Final Correction

C/D 0.6

C/D 0.6

Fundus

GLAUCOMA SUSPECT

Colour 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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GENERAL HOSPITAL

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ECU Number : 1552
Age : 55
Weight : 62
Date : 31/01/2023

MR Number : 23199555
Sex : Female
Ideal Weight : 52

Patient Name : NUNNA ARUNA
Height : 151
BMI : 27.19

Gynaec Check Up :

OBSTETRIC HISTORY	FTND - FEMALE
MENSTRUAL HISTORY	POSTMENOPAUSAL > 15 YRS.
PRESENT MENSTRUAL CYCLE	REGULAR
PAST MENSTRUAL CYCLE	-
CHIEF COMPLAINTS	-
PA	SOFT
PS	Cx - (N) Vg - SENILE VAGINITIS
PV	UT NS Fx CLEAR
BREAST EXAMINATION RIGHT	NORMAL
BREAST EXAMINATION LEFT	NORMAL
PAPSMEAR	TAKEN
BMD	
MAMMOGRAPHY	
ADVICE	FOLLOWUP WITH REPORTS.



Dietary Assessment

ECU Number : 1552 MR Number : 23199555 Patient Name : NUNNA ARUNA
Age : 55 Sex : Female Height : 151
Weight : 62 Ideal Weight : 52 BMI : 27.19
Date : 31/01/2023

Body Type : Normal / Underweight / Overweight
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional
Frequency of consuming Sweets : / Day / or occasional
Frequency of consuming outside food : / Day / Week or occasional
Amount of water consumed / day : Glasses / liters

Life style assessment :
Physical activity : Active / moderate / Sedentary / Nil
Alcohol intake : Yes / No
Smoking : Yes / No
Allergic to any food : Yes / No
Are you stressed out ? : Yes / No
Do you travel a lot ? : Yes / No

General diet instructions :

- Have small frequent meals.
- Avoid fatty products like oil, ghee, butter, cheese.
- Take salt restricted diet and avoid table salt.
- Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.
- Keep changing your cooking oil every three months.
- Avoid Maida, Starchy foods and Bakery products.
- Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple
- Dring 3 to 4 liters (12 - 14 glass) of water daily.
- Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary
- Drink green Tea or black Coffee once in a day.
- Do brisk walking daily.



Patient Name : Ms. NUNNA ARUNA Type : OPD
 Gender / Age : Female / 55 Years 5 Months 3 Days Request No. : 103552
 MR No / Bill No. : 23199555 / 231063582 Request Date : 31/01/2023 08:41 AM
 Consultant : Dr. BAGH Doctor Collection Date : 31/01/2023 08:44 AM
 Location : OPD Approval Date : 31/01/2023 11:26 AM

Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	68	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High)</i>			
Total Cholesterol	147	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High)</i>			
HDL Cholesterol	72	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 40 Low</i>			
<i>> 60 High)</i>			
Non HDL Cholesterol (calculated)	75	mg/dL	1 - 130
<i>(Non- HDL Cholesterol</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High)</i>			
LDL Cholesterol	62	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High)</i>			
VLDL Cholesterol (calculated)	13.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	0.86		2.1 - 3.5
T. Ch./HDL Ch. Ratio	2.04		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms. NUNNA ARUNA
 Gender / Age : Female / 55 Years 5 Months 3 Days
 MR No / Bill No. : 23199555 / 231063582
 Consultant : Dr. BAGH Doctor
 Location : OPD

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 Request No. : 103552
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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	27	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.71	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate <i>(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)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	4.2	mg/dL	2.2 - 5.8

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



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Consultant	: Dr. BAGH Doctor	Collection Date	: 31/01/2023 08:44 AM
Location	: OPD	Approval Date	: 31/01/2023 02:48 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
<i>Haemoglobin.</i>			
Haemoglobin	14.3	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.93	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	41.2	%	36 - 46
Mean Corpuscular Volume (MCV)	83.6	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.0	pg	27 - 32
MCH Concentration (MCHC)	34.7	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	12.3	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	37.7	fl	39 - 46
<i>Total Leucocyte Count (TLC)</i>			
Total Leucocyte Count (TLC)	8.00	thou/cmm	4 - 10
<i>Differential Leucocyte Count</i>			
Polymorphs	73	%	40 - 80
Lymphocytes	19	%	20 - 40
Eosinophils	3	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	5.91	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.58	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.22	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.26	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
<i>Platelet Count</i>			
Platelet Count	267	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	3	mm/1 hr	0 - 19

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 any firm opinion is made. Recheck / retest may be requested.

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Home Collection Facility Available
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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. 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 Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms. NUNNA ARUNA
 Gender / Age : Female / 55 Years 5 Months 3 Days
 MR No / Bill No. : 23199555 / 231063582
 Consultant : Dr. BAGH Doctor
 Location : OPD

Type : OPD
 Request No. : 103552
 Request Date : 31/01/2023 08:41 AM
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 Approval Date : 31/01/2023 11:26 AM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.10	ng/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</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)	9.05	mcg/dL	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</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)	4.77	microIU/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</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		
Pregnancy :			
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>			

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology

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Gender / Age	: Female / 55 Years 5 Months 3 Days	Request No.	: 103552
MR No / Bill No.	: 23199555 / 231063582	Request Date	: 31/01/2023 08:41 AM
Consultant	: Dr. BAGH Doctor	Collection Date	: 31/01/2023 08:44 AM
Location	: OPD	Approval Date	: 31/01/2023 02:42 PM

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	B		
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 Autocontrol.
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.

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 any firm opinion is made. Recheck / repeat may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

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Gender / Age : Female / 55 Years 5 Months 3 Days
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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	104	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	175	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology

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Gender / Age	: Female / 55 Years 5 Months 3 Days	Request No.	: 103552
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Consultant	: Dr. BAGH Doctor	Collection Date	: 31/01/2023 08:44 AM
Location	: OPD	Approval Date	: 31/01/2023 11:26 AM

HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
<i>HbA1c (Glycosylated Hb)</i>			
Glycosylated Hemoglobin (HbA1c)	6.7	%	
estimated Average Glucose (e AG) *	145.59	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 ----

Dr. Sejal Odedra
M.D.Pathology



Patient Name	: Ms. NUNNA ARUNA	Type	: OPD
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Consultant	: Dr. BAGH Doctor	Collection Date	: 31/01/2023 08:44 AM
Location	: OPD	Approval Date	: 31/01/2023 02:05 PM

Pap Smear

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Pap Smear	Pap Smear Screening Report / Cervico-Vaginal Cytology...		

Cyto no : P/157/23
Received at 12:10 pm.

Clinical Details : No complain
P/V findings : Cx. - NAD / Vg. - Senile vaginitis
LMP : >15 years ago

TBS Report / Impression :

- * Satisfactory for evaluation; transformation zone components identified.
- * Postmenopausal smears, with atrophic changes and repair.
- * Mild inflammatory cellularity (Neutrophils rich).
- * No epithelial cell abnormality favouring Squamous intraepithelial lesion or frank malignancy (NILM).

Note / Method :

The material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bathesda system (Modified 2014)

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.



Patient Name	: Ms. NUNNA ARUNA	Type	: OPD
Gender / Age	: Female / 55 Years 5 Months 3 Days	Request No.	: 103616
MR No / Bill No.	: 23199555 / 231063582	Request Date	: 31/01/2023 08:41 AM
Consultant	: Dr. BAGH Doctor	Collection Date	: 31/01/2023 11:40 AM
Location	: OPD	Approval Date	: 31/01/2023 12:46 PM

Stool Routine

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Physical Examination (Stool)</i>			
Colour	Brown		
Consistency	Solid		
Mucus.	Absent		
Blood.	Absent		
<i>Chemical Examination</i>			
Reaction	Acidic		
Occult Blood	Negative		
<i>Microscopic Examination</i>			
Ova	Absent		
Cyst.	Absent		
Trophozoites	Absent		
Red Blood Cells.	Absent	/hpf	
Pus Cells	Absent	/hpf	
Epithelial Cells	Absent		
Fat	Absent		

(Method : Manual + Chemical (Occult Blood by Peroxidase like activity of Haemoglobin) + Microscopy)

Test Note :

- Stool Occult Blood test needs to be tested on three consecutive samples for proper interpretation.

- For 72 hours prior to Occult Blood test, patient should not take following items: Red meat, fish, poultry, turnips, horseradish, cauliflower, spinach, broccoli, bananas, black grapes, plums etc., drugs like aspirin, NSAIDs, anticoagulants, reserpine, iodine and high dose of Vitamin C.)

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



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Location	: OPD	Approval Date	: 31/01/2023 11:19 AM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
<i>Physical Examination</i>			
Quantity	50	mL	
Colour	Pale Yellow		
Appearance	Clear		
<i>Chemical Examination (By Reagent strip method)</i>			
pH	6.0		
Specific Gravity	<=1.005		
Protein	Negative	gm/dL	0 - 5
Glucose	2+ (R/C)	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<i>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</i>			
Red Blood Cells	0 - 1	/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. Sejal Odedra
M.D.Pathology



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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.43	mg/dL	0 - 1
Bilirubin - Direct	0.11	mg/dL	0 - 0.3
Bilirubin - Indirect	0.32	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	24	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	42	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	104	U/L	53 - 141
<i>(By PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	24	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.82	gm/dL	6.4 - 8.2
Albumin	3.87	gm/dL	3.4 - 5
Globulin	3.95	gm/dL	3 - 3.2
A : G Ratio	0.98		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23199555 Report Date : 31/01/2023
Request No. : 190051119 31/01/2023 8.41 AM
Patient Name : Ms. NUNNA ARUNA
Gender / Age : Female / 55 Years 5 Months 3 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

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

Priyanka Patel

Dr. Priyanka Patel, MD
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037

SCALE 0/1



DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23199555 Report Date : 31/01/2023
Request No. : 190051098 31/01/2023 8.41 AM
Patient Name : Ms. NUNNA ARUNA
Gender / Age : Female / 55 Years 5 Months 3 Days

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

Liver is normal in size and shows increased in echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

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 seen. **6mm echogenic lesion is seen in left kidney--benign--angiomyolipoma. 3mm calculus is seen in mid calyx of left kidney.**

Uterus is post menopausal.

Uterine length : 52 mm.
A.P. 30 mm.

No adnexal mass seen.

Urinary bladder is partially distended and appears normal.

No ascites.

COMMENT:

**Fatty liver.
Echogenic lesion in left kidney--benign--angiomyolipoma.
Left renal calculus.**

Kindly correlate clinically

Hasani

Dr.Prerna C Hasani, MD
Consultant Radiologist



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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- Echocardiography

Patient No. : 23199555 Report Date : 31/01/2023
Request No. : 190051126 31/01/2023 8.41 AM
Patient Name : Ms. NUNNA ARUNA
Gender / Age : Female / 55 Years 5 Months 3 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 B B).

No obvious focal mass seen on either side.

No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.

No obvious skin thickening or nipple retraction seen.

No enlarged right axillary lymph nodes seen. Left axillary node is seen possibly benign.

IMPRESSION:

No obvious focal mass in breasts.
BI-RADS category 2.

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.

Priyanka
Dr. Priyanka Patel, MD
Consultant Radiologist



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

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- Echocardiography

Patient No. : 23199555 Report Date : 31/01/2023
 Request No. : 190051187 31/01/2023 8.41 AM
 Patient Name : Ms. NUNNA ARUNA
 Gender / Age : Female / 55 Years 5 Months 3 Days

Echo Color Doppler

MITRAL VALVE : NORMAL, NO MS, TRIVIAL MR
 AORTIC VALVE : TRILEAFLET, NO AS, NO AR
 TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
 PULMONARY VALVE : NORMAL, NO PR, NO PS
 LEFT ATRIUM : NORMAL SIZE
 AORTA : NORMAL
 LEFT VENTRICLE : NORMAL LVEF – 60%, NO RWMA AT REST
 RIGHT ATRIUM : NORMAL SIZE
 RIGHT VENTRICLE : NORMAL SIZE
 I.V.S. : INTACT
 I.A.S. : INTACT
 PULMONARY ARTERY : NORMAL
 PERICARDIUM : NO EFFUSION
 COLOUR/DOPPLER FLOW MAPPING : TRIVIAL MR, TRIVIAL TR, NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 60%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. GRADE I LV DIASTOLIC DYSFUNCTION
5. NORMAL ALL CARDIAC VALVES, NO MITRAL / AORTIC STENOSIS
6. NORMAL RIGHT HEART SIZE AND RV PRESSURES
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

DR.V.C.CHAUHAN, M.D.
 INTERVENTIONAL CARDIOLOGIST

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