



HEALTH CHECK-UP SUMMARY

Name: Jignashaben S Parmar

Date: 19/07/2022

Email ID :

Sex: Female Age: 31 Years Contact No: 9662420472 Remarks :

Under-weight	<input type="checkbox"/>
Normal	<input checked="" type="checkbox"/>
Over-weight	<input type="checkbox"/>

i> **BMI**

Height (in Cm) : <u>145</u>	Weight (in Kg) : <u>49</u>	BMI: <u>23.3</u>
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ii> **Blood Pressure & Pulse**

114/70 mmHg
68/min. Pulse

If high or low, whether the person is on medication : YES / NO

iii> **Blood Tests & Lung Function Remarks**

RJ
CNS } ⓐ
CNS

If abnormal, whether the person is on medication : YES / NO

iv> **Eye Test Remarks**

Eye Test : 6/6 6/6
Color Vision:

v> **Heart Disease**

Whether any specific heart ailment detected (ECG findings) :
Normal

vi> **Any other problems needing attention / Overall Assessment :**

DM - last 1.5 month (Tab. Glycomet-M50 (1-1-1))

Dr. Chirag Patel
M.B.B.S. G-49432

Signature of the Doctor

J.S. Parmar

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NAME: Jigneshaben S Parmar SEX: Female
BIRTHDATE: 28/12/1990 AGE: 31

DEPARTMENT OF OPHTHALMOLOGY

EYE TEST:

1. VISION:

RIGHT EYE - 6/6

LEFT EYE - 6/6

2. COLOR VISION:

RIGHT EYE - (2)

LEFT EYE - (2)

3. FUNDUS:

RIGHT EYE - (2)

LEFT EYE - (2)

REMARKS:

(2) J. S. Parmar

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Ophthalmologist/Optomtrist

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Dental Assessment Form

NAME Tigma Shahen S Parmar
AGE 31

DATE 19/11/24
SEX female

* CHIEF COMPLAINT

- A CLINICAL FEATURES :- normal
- 1 CAVIES :- NO
- 2 MISSING TOOTH :- Ⓛ Lower 3rd molar
- 3 MALOCCLUSION :- NO
- 4 FILLING :- Ⓡ Lower 1st molar Ⓛ Lower - 1st - upper - 3rd molar
- B DIAGNOSIS :- Normal
- C PERSONAL HISTORY :- Average
- D PROVISIONAL D/G :- normal
- E MEDICAL HISTORY :- Tooth Extraction + filling.
- F FINAL D/G :- normal
- G TREATMENT PLAN :- NO

CLINT SIGN

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DOCTOR SIGN

Ⓡ J.S. Parmar

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Gynec consultation

Date: 19/11/2022

Name of Patient: Jignasha S. Parmar

Age: 31

C/O: WAD

M/H - LMP: 01/11/2022 28-30
1-2 day

Regular periods.

O/H - AML: 4 years

1 LSCS — 2 years (baby girl)

P/H: DM — last 1.5 month (Tab. glycomet M50)

M/H: DM on medication

F/H: not Alive

P/A: WAD

L/E:

P/S: not taken

P/V:

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2D-ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

Name:	JIGNASHABEN S. PARMAR	Age/Gender	31Yrs /Female
Referred by.	MEDI WHEEL	Date	19/11/2022

VITALS: BP = 114/70mmHg, PULSE =68 bpm, SPO2 =98%
INDICATION: Preventive Health check up


- **CARDIAC CHAMBERS:** Left Ventricle: Normal size, Left Atrium: Normal size.
- No e/o thrombus in LA/LV.
- **Right Atrium:** Normal size. **Right Ventricle:** Normal size,
- **Normal Right Ventricular function.** (TAPSE=20mm)
- **Normal Left Ventricular systolic function. LVEF = 65% ,**
No regional wall abnormality. No thinning / scarring / dyskinesia of LV wall.
- **No Concentric Left Ventricular Hypertrophy.** (IVSd= 10 mm),
- **LV Compliance :**
No Left Ventricular Diastolic Dysfunction [LVDD]. No Doppler e/o raised LVEDP.
- **VALVES:**
- Structurally Normal Mitral valve/ Aortic valve/Tricuspid valve/ Pulmonary valve .
No significant Valvular Stenosis.
- **Doppler findings:** AV max = 1.22 m/s, PV max = 0.9 m/s.
Trivial Pulmonary Regurgitation, Trivial Tricuspid regurgitation.
- **No Pulmonary Arterial Hypertension. PASP** by TRjet vel.method = 23 mmHg.
- **SEPTAE:** IAS / IVS Appear Intact.
- **IVC :** Normal in dimension and shows good inspiratory 15mm collapse.
- **OTHERS:** No e/o Pericardial effusion / vegetation.

IMPRESSION:

**NORMAL LV SYSTOLIC FUNCTION, LVEF= 65 %, NO RWMA,
NO LVH , NO LVDD ,NO TRIVIAL PR/TR, NO PAH.**

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DR. SUSHIL YADAV
CONSULTING & CLINICAL
CARDIOLOGIST



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Name	JIGNASHABEN S PARMAR	Age/Gender	31Yrs/Female
Reg No.	3317/22	Receipt No	3021
Referred By	BOB - MEDI WHEEL(PKG10000241)	Mode of Payment	CREDIT
Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

BLOOD GROUP - 19112245 Released at 19-Nov-2022 10:23 AM

Parameter	Result	Biological Ref.Range	Method
-Blood Group	"O"		
-Rh Factor	POSITIVE		

CBC - 19112243 Released at 19-Nov-2022 10:43 AM

Parameter	Result	Biological Ref.Range	Method
-Haemoglobin	11.9 gm/dL	L (12 - 16 gm/dL)	Auto
-RBC Count	4.55 mill/cumm	(4.2 - 5.4 mill/cumm)	Auto
-Total WBC Count	8400 /cumm	(4000 - 10000 /cumm)	Auto
-Platelet Count	3.49 lakh/cumm	(1.5 - 4.5 lakh/cumm)	Auto

Blood Indices

-HCT	37.1 %	L (40 - 55 %)	Auto
-MCV	81.6 fl	(80 - 92 fl)	Auto
-MCH	26.1 pg	L (27 - 31 pg)	Auto
-MCHC	32.0 gm/dL	(32 - 36 gm/dL)	Auto
-RDW	12.8 %	(11 - 15 %)	Auto

Diff WBC Count

-Polymorphs	60 %	(40 - 80 %)	Microscopically
-Lymphocytes	35 %	(20 - 40 %)	Microscopically
-Eosinophils	03 %	(1 - 6 %)	Microscopically
-Monocytes	02 %	(2 - 7 %)	Microscopically
-Basophils	00 %	(0 - 1 %)	Microscopically
-PLATELET ON SMEAR	Adequate		Microscopically
-MALARIAL PARASITES	Malarial Parasites Not Detected		Microscopically

[Test performed on Fully Automated Hematology Analyzer ERBA H-360]

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Dr. Mihir Icecreamwala
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Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

ESR - 19112243 Released at 19-Nov-2022 10:29 AM

Parameter	Result	Biological Ref.Range	Method
-E.S.R	07 mm/hr	(3 - 15 mm/hr)	



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Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

FBS & PPBS - 19112244 Released at 19-Nov-2022 02:02 PM

Parameter	Result	Biological Ref.Range	Method
-Fasting Blood Sugar (FBS)	126 mg/dL	H 70-100 mg/dl Impaired Tolerance:100-125 Diabetes Mellitus:>=126 (On more than one occasion) (American diabetes association guidelines 2022)	
-Fasting Urine Sugar	Absent		
-Fasting Urine Acetone	Absent		
-PPBS	233 mg/dL	H (90 - 140 mg/dL)	
-PP2BS URINE SUGAR	Present(+)		
-PP2BS URINE ACETONE	Absent		

HBA1C - 19112243 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-HBA1C	9.6 %	H HbA1C Degree of Glucose Control <5.6 % Non Diabetics 5.7 - 6.4 % Prediabetics > =6.5 % Diabetics (REF:Wallace, 11th Edition) REMARKS: 6 - 7 % Excellent Control 7 - 8 % Good Control 8 - 10 % Unsatisfactory Control >10 % Poor Control	Boronate Affinity
-Method[]	High Performance Liquid Chromatography (HPLC)		

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Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

LIVER FUNCTION TEST (LFT) - 19112245 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-Serum Total Bilirubin	0.7 mg/dL	(0 - 1.3 mg/dL)	Diazo
-Serum Direct Bilirubin	0.3 mg/dL	(0 - 0.4 mg/dL)	Diazo
-Serum InDirect Bilirubin	0.4 mg/dL	(0.1 - 1.3 mg/dL)	Calculated
-Total Protein (TP)	6.9 gm/dL	(6.4 - 8.3 gm/dL)	Biuret
-Albumin (ALB)	4.2 gm/dL	(3.5 - 5.2 gm/dL)	BCG
-Globulin	2.7 gm/dL	(2.3 - 3.6 gm/dL)	Calculated
-A/G Ratio	1.56 gm/dL	(1 - 2.3 gm/dL)	Calculated
-SGPT(ALT)	27 U/L	(5 - 45 U/L)	IFCC, Kinetic without Pyridoxal Phosphate
-SGOT (AST)	19 U/L	(0 - 35 U/L)	IFCC, Without Pyridoxal Phosphate
-Alkaline Phosph.	60 U/L	(42 - 128 U/L)	ALP-AMP
-GGT	22 U/L	(5 - 50 U/L)	Glupa-C

[Test performed on Fully Automated Biochemistry Analyzer ERBA EM200]

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Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

Creatinine - 19112245 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-Creatinine	0.6 mg/dL	(0.6 - 1.14 mg/dL)	ENZYMATIC

BUN - 19112245 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-Blood Urea Nitrogen (BUN)	11 mg/dL	(6 - 20 mg/dL)	Calculated

Uric Acid - 19112242 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-Uric Acid	6.1 mg/dL	(3.5 - 7.2 mg/dL)	Uricase-POD

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Referred By	BOB - MEDI WHEEL(PKG10000241)	Mode of Payment	CREDIT
Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

Lipid Profile - 19112245 Released at 19-Nov-2022 12:15 PM

Parameter	Result	Biological Ref.Range	Method
-Serum Cholesterol	180 mg/dL	Desirable < 200 mg/dl Borderline High : 200-239 mg/dl High : > 240 mg/dl	CHOD-PAP
-Serum Triglyceride	191 mg/dL	Normal < 150 mg/dl Borderline High : 150 - 159 mg/dl High : 200 - 499 mg/dl Very High : 500 mg/dl	GPO-POD Method
-Serum HDLD(Direct)	47 mg/dL	Normal :> 55 mg/dl Borderline : 35-55 mg/dl Undesirable: < 35 mg/dl	PVS-PEGME Precipitation with CHOD-POD
-Serum VLDL	38 mg/dL	H (5 - 30 mg/dL)	Calculated
-Serum LDLD(Direct)	95 mg/dL	Optimal:< 100 mg/dl Above Optimal : 100- 129 mg/dl Borderline High : 130-159 mg/dl High : > 160-189mg/dl Very High : >190 mg/dl	Calculated
-Chol/HDL	3.83	Low risk: <3.8 Medium Risk: 3.8 to 5.9 High Risk: > 6	Calculated
-LDL/Chol	1.90	Low risk: <3.55 Medium Risk: 3.55 to 4.0 High Risk: > 6	Calculated

[Test performed on Fully Automated Biochemistry Analyzer ERBA EM200]

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Referred By	BOB - MEDI WHEEL(PKG10000241)	Mode of Payment	CREDIT
Collection Type	CENTER	Collection DateTime	19-Nov-2022 08:53 AM

Urine Routine & Micro Examination - 19112247 Released at 19-Nov-2022 12:07 PM

Parameter	Result	Biological Ref.Range	Method
Physical Examination			
-Quantity	30		Manual
-Colour	Pale Yellow	Pale Yellow	Manual
-Appearance	Clear	Clear	Manual
-Reaction (pH)	Acidic		Dipstick
-Specific Gravity	1.030		Dipstick
Chemical Examination			
-Proteins.	Absent		Dipstick
-Sugar	Absent		Dipstick
-Acetone.	Absent		Dipstick
-Bile Salts	Absent	Absent	Dipstick
-Bile Pigments	Absent	Absent	Dipstick
-Occult Blood Test (OBT).	Negative		Dipstick
Microscopic Examination			
-Pus Cells	2-3		Microscopically
-Red Blood Cells	Absent		Microscopically
-Epithelial Cells	2-3		Microscopically
-Bacteria.	Absent		Microscopically
-Crystals	Absent	Absent	Microscopically
-Others	NIL	Absent	Microscopic Examination

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Total T3 T4 TSH - 19112245 Released at 19-Nov-2022 12:22 PM

Parameter	Result	Biological Ref.Range	Method
-Total T3	1.09 ng/ml	(0.87 - 1.78 ng/ml)	Fluorescence Enzyme Immunoassay
-Total T4	5.76 ug/dl	(4.6 - 11 ug/dl)	Fluorescence Enzyme Immunoassay
-TSH	0.83 uIU/ml	0.50 - 5.50 uIU/ml 5.5 to 15 ul U/ml - Suggested Clinical co-relation or Repeat test with new sample as physiological factors can give falsely high TSH Above 15uIU/ml Hypothyroid PREGNANT WOMEN normal ranges for TSH: 1st Trimester : 0.0878 - 2.8293 uIU/ml 2nd Trimester : 0.1998 - 2.7915 uIU/ml 3rd Trimester : 0.307 - 2.9028 uIU/ml Ref: TIETZ Fundamentals of Clinical Chemistry	Fluorescence Enzyme Immunoassay

[Test performed on Fully Automated Immunology Analyzer Maglumi-600]

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USG OF ABDOMEN & PELVIS

LIVER:

Liver is normal in size, shape and increased echotexture.

No evidence of focal SOL or dilatation of IHBR seen.

Portahepatis appear normal.

GALLBLADDER:

Gallbladder is distended and appears normal.

No e/o calculus, mass lesion or changes of cholecystitis seen.

PANCREAS:

Pancreas appears normal in size, shape and echotexture.

No e/o focal lesion, mass or changes of pancreatitis seen.

SPLEEN:

Spleen appears normal in size, shape and echotexture.

PARAAORTIC REGION:

Aorta grossly appears normal. No e/o paraaortic lymphnodes seen.

KIDNEYS:

Both kidneys appear normal in size, shape, position and echotexture.

Cortex and collecting system of both kidneys appear normal.

No evidence of calculus or obstructive uropathy on either side.

URINARY BLADDER:

Bladder is distended and appears normal.

No calculus, mass lesion or changes of cystitis is seen.

UTERUS:

Retroverted, Normal in size, shape and echotexture with empty central uterine cavity.

Cervix appears normal.

No e/o focal SOL. Endometrial thickness is normal.

OVARIES:

Both adnexal region appear normal.

No e/o adnexal mass lesion seen on either side.

No evidence of free fluid seen in pelvis.

COMMENTS:

fatty liver

Dr. Chirag K. Patel

MBBS-DMPD

Reg. No. G-23509

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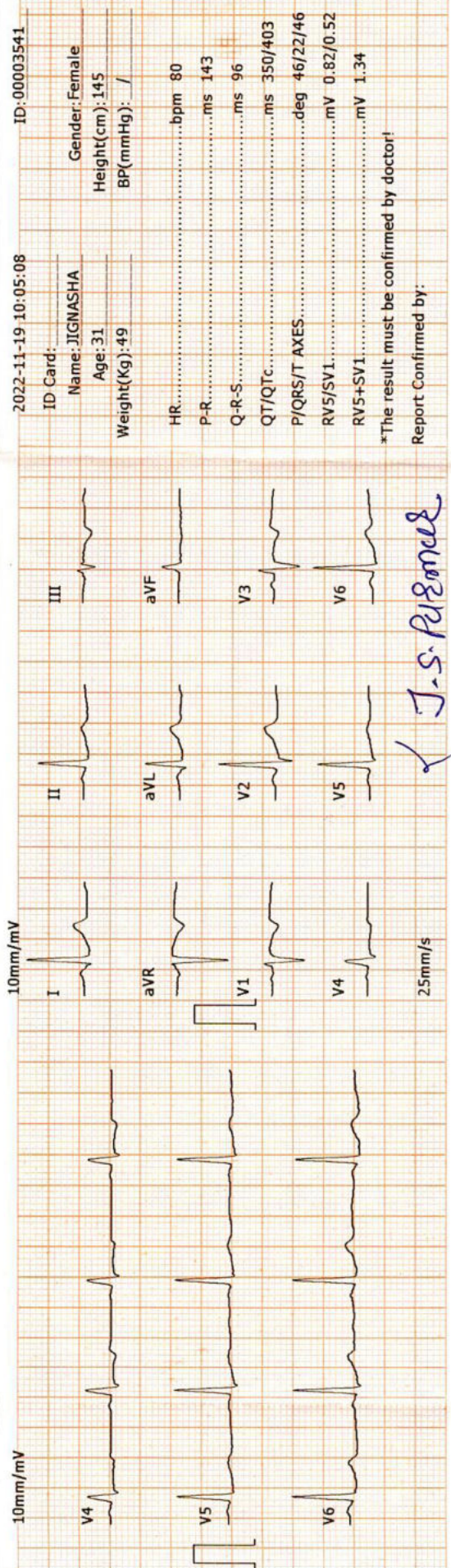
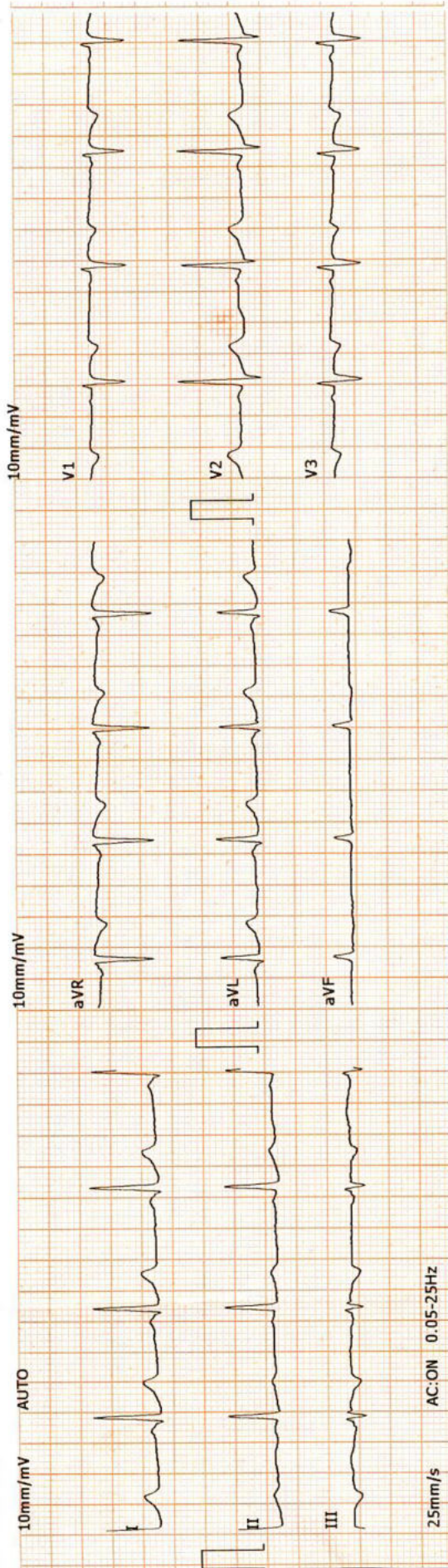
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DR. ADITI PATEL
M.B.B.S., D. CARD (MUM)
CLINICAL CARDIOLOGIST
REG.NO.G-42901



REVIVAL DIAGNOSTICS

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ECG

- REPORT :

1. The rhythm is sinus.
2. Heart rate is 80 beats per minute.
3. Normal P,QRS,T wave axis.
4. Normal PR,QRS,Q.T. Duration.
5. No pathological q wave or ST-T changes seen.
6. No evidence of chamber hypertrophy or enlargement seen.

IMPRESSION : ECG WITHIN NORMAL LIMITS

z

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DR. ADITI PATEL *Signature*
M.B.B.S., D. CARD (MUM)
CLINICAL CARDIOLOGIST
REG.NO.G-42901



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R

NAME : JIGNASHABEN S PARMAR
AGE: 31 YRS / FEMALE
REF BY: MEDICI WHEEL





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CHEST RADIOGRAPH (PA VIEW)

- Hilar shadows are within normal limits.
- Pulmonary vasculature appears normal.
- Cardiac appears normal in size.
- Both domeh of the diaphragm are smooth.
- Both costophrenic recesses are clear.
- Both lung fields appear normal.
- Visualized bones and soft tissue shadows appear normal.

IMPRESSION: NORMAL STUDY.

DR. CHIRAG K PATEL
RADIOLOGIST

Dr. Chirag K. Patel
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