

 भारत सरकार  
GOVERNMENT OF INDIA

 नीतू कुमारी  
Nitu Kumari  
जन्म वर्ष / Year of Birth : 1989  
महिला / Female

6185 1821 2521/ 

आधार — आम आदमी का अधिकार

 भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता: D/O: विर सिंह, किशोरपुरा,  
झुंझुनू, किशोरपुरा, झुंझुनू,  
किशोरपुरा, राजस्थान, 333028

Address: D/O: Veer Singh, Kishorpura,  
Jhunjhunu, Kishorpura,  
Jhunjhunun, Kishorpura,  
Rajasthan, 333028

1947 \* 1800 180 1947 help@uidai.gov.in www.uidai.gov.in P.O. Box No.1947, Bengaluru-560 001

*mika kumar*  
7688899707

  
Rajasthan Diagnostic &  
Medical Research Centre  
Jhunjhunu

Name: Nitu Kumari  
Patient ID: Bobs 7767

Date of birth: 01.03.1989  
Gender: Female  
Height: Undefined  
Weight: Undefined  
Ethnicity: Unknown  
Pacemaker: Unknown

Visit ID:  
Room:  
Medication:  
Order ID:  
Ord. prov.:  
Ord. prot.:

*[Signature]*  
Rajasthan Diagnostic &  
Medical Research Centre  
Jhunjhunu

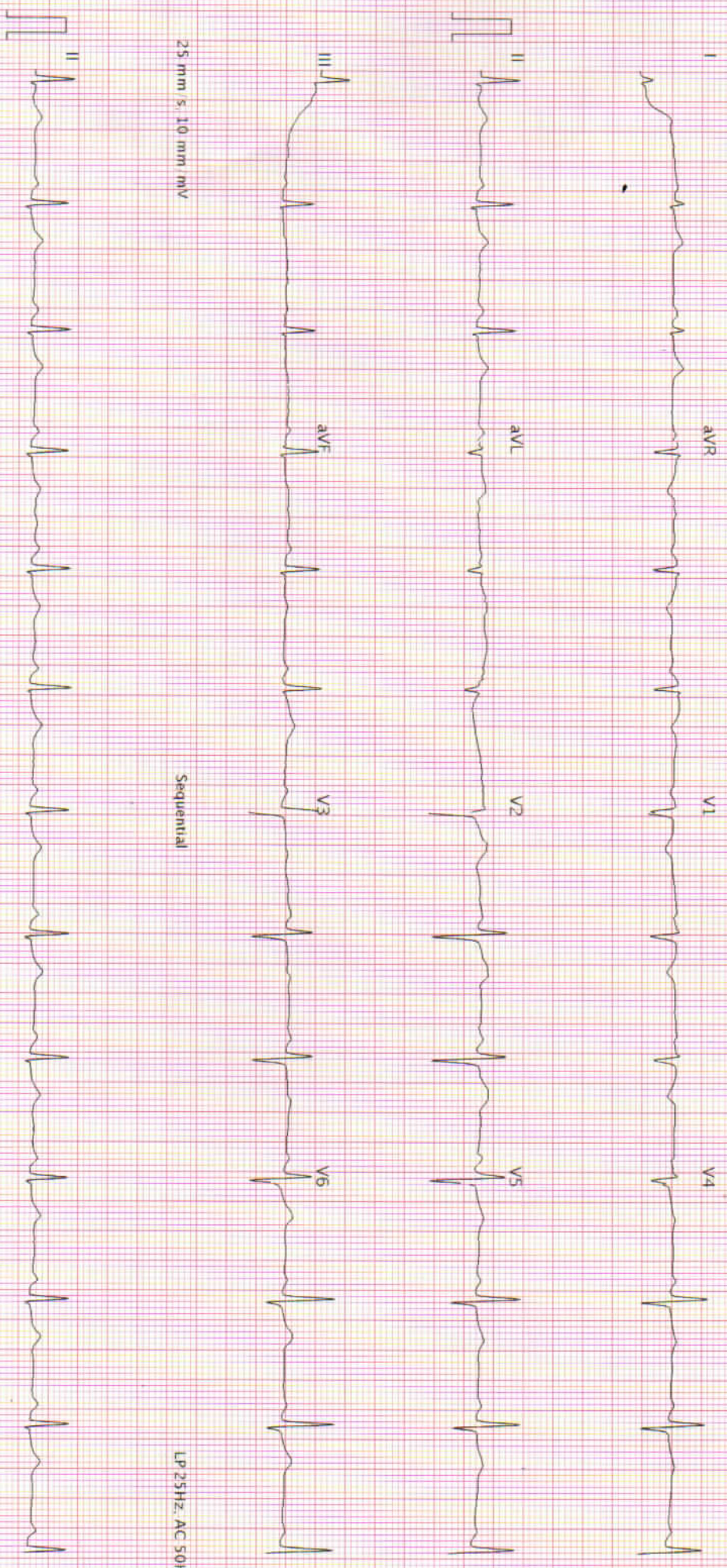
06.02.2024 11:53:55  
Standard 12-Lead

HR 73 bpm  
P axis 42°  
QRS axis 77°  
T axis 22°  
RR 823 ms  
P 102 ms  
PR 142 ms  
QRS 75 ms  
QT 369 ms  
QTcB 407 ms

Rajasthan Diagnostic & MR Centre  
B-110, Subhash Marg, Indira Nagar, Mandawa Mod  
(Jhunjhunu (Raj.))

Sinus rhythm  
Normal electrical axis  
Nonspecific T abnormality  
Borderline ECG  
Unconfirmed report

Borderline



25 mm/s, 10 mm/mV

Sequential

LP 25HZ, AC 50HZ

25 mm/s, 10 mm/mV

LP 25HZ, AC 50HZ

AT 102 G2 1.2 0 (1080,009831)

Printed on 06.02.2024 11:54:10

Page 1 of 1

SCHILLER

Part No. 2.157048M

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5.00



# RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MEMOGRAPHY

NAME : NITU KUMARI	AGE 34 /SEX F
REF.BY :BOB HEALTH CHECK-UP	DATE: 06.02.2024

## X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

DR. ANUSHA MAHALAWAT

MD (RADIODIAGNOSIS)

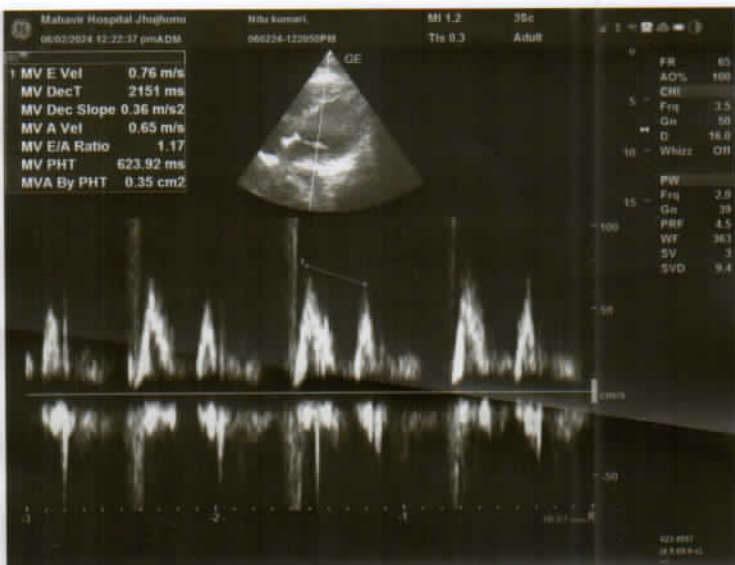
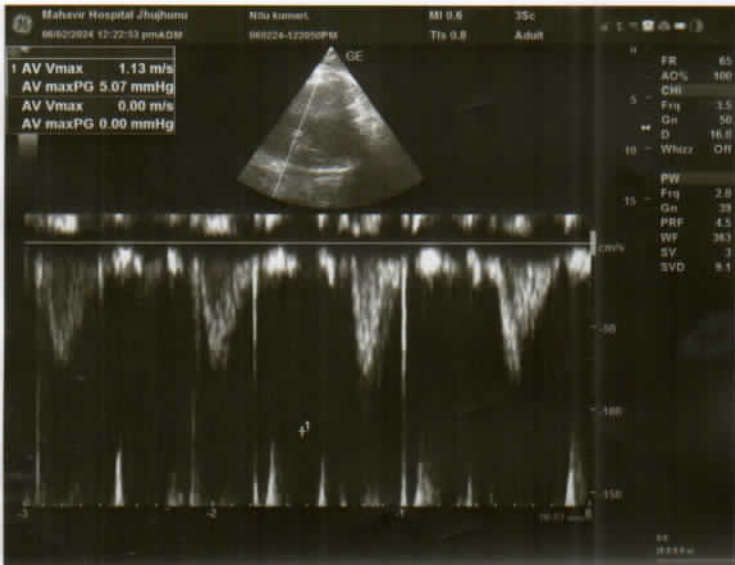
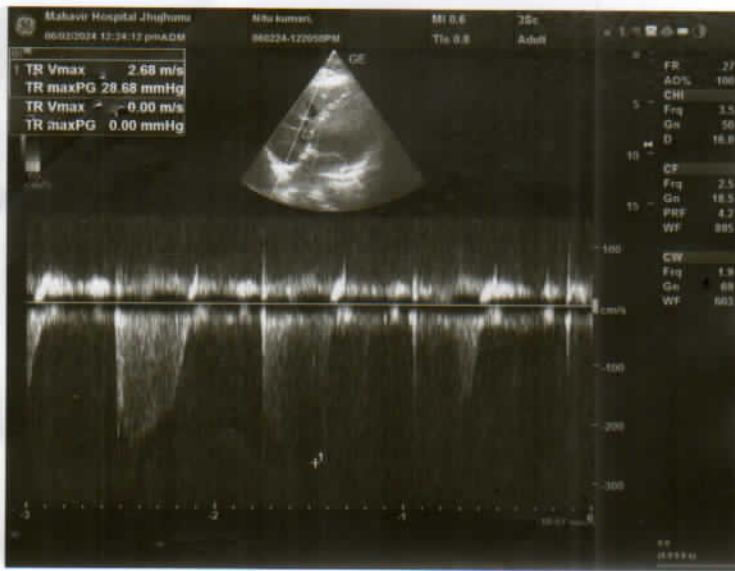
RMC -38742/25457  
 Dr. Anusha Mahalawat  
 MD (Radiodiagnosis )  
 (RMC. 38742/25457 )



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# MAHAVIR HOSPITAL

Health & Hygiene



Tel. : 01592-232361  
9680960962

D-15, Indira Nagar, Subhash Marg, JHUNJHUNU (Raj.)

MAHAVIR HOSPITAL

Name	:NITU KUMARI	Father/Husband	:HITESH	IPD/OPD status	:OPD
Age/Sex	:34 Y/Female	Reg. No.	:OutSide	Catagory	:CASH
Consultant	:M. S. MEEL	Accession No.	:20240206033	Bed No.	:-
		BILL.NO	:2302289024	Date	:06/02/2024 3:55:13 PM

## TRANSTHORACIC ECHO-DOPPLER TEST REPORT

### MITRAL VALVE-

Morphology **AML**-Normal/Thickening/Calcification/Flutter/Restricted mobility/SAM/Doming.

PML-Normal/Thickening/Calcification/Prolapse/Fixed/Restricted Mobility/Flutter.

Doppler- **Normal**/Abnormal Mitral E/A Velocity= 76/65 (cm/sec).

Mitral Regurgitation Absent/**Trace**/Mild/Moderate/Severe.

Mitral Stenosis **Absent**/Present.

### TRICUSPID VALVE-

Morphology **-Normal**/Atresia/Thickening/Calcification/Prolapse/Doming.

Doppler- **Normal**/Abnormal

Tricuspid Regurgitation Absent/**Trace**/Mild/Moderate/Severe.

Tricuspid Stenosis **Absent**/Present.

### PULMONARY VALVE-

Morphology **-Normal**/Atresia/Thickening/Doming/Vegetation.

Doppler- **Normal**/Abnormal Pulmonary Velocity = 79 (cm/sec)

Pulmonary Regurgitation Absent/**Trace**/Mild/Moderate/Severe.

Pulmonary Stenosis Absent/Present.

### AORTIC VALVE-

Morphology **-Normal**/Thickening/Calcification/Flutter/Sclerosis/Doming.

No. of Cusps- 1/2/3.

Doppler- **Normal**/Abnormal

Aortic Velocity = 117 (cm/sec)

Aortic Regurgitation Absent/**Trace**/Mild/Moderate/Severe.

Aortic Stenosis Absent/Present.

Area = 2.6cm (2.0 – 3.7cm) Left Atrium = 4.5 cm (1.9 – 4.0 cm)

Measurement	Diastole	Systole
LA	1.3 cm (0.6-1.1cm)	1.5 cm
RA	5.4 cm (3.7-5.6cm)	3.5 cm (2.2 – 4.0 cm)
LA	1.6 cm (0.6-1.1cm)	1.9 cm

LA Normal/Enlarged/Clear/Thrombus/**Hypertrophy**.

Contraction Normal/Reduced.

**Regional wall motion abnormality : Present/Absent.**

LA Normal/Enlarged/Clear/Thrombus.

RA Normal/Enlarged/Clear/Thrombus.

LA Normal/Enlarged/Clear/Thrombus.



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( कृपया अपनी पुरानी रिपोर्ट साथ लावें )

भूयः शिक्षण प्रयोग कालां व कर्मकाण्ड एण्डलीय उपचार्य है  
इसकी छिकारत 104 टोल फ्री सेवा पर की जा सकती है

# MAHAVIR HOSPITAL

Health & Hygiene

D-15, Indira Nagar, Subhash Marg, JHUNJHUNU (Raj.)



Tel. : 01592-232361  
9680960962

MAHAVIR HOSPITAL

## COMMENTS & SUMMARY-

### ECHO window-Good/Fair/Poor.

No regional wall motion abnormality seen, LVEF=55%.

Mild left ventricular hypertrophy seen.

Mild MR, mild TR, no PAH(RVSP=32mmHg).

Normal systolic function.

Normal diastolic function.

No I/C clot/vegetation.

Intact IAS/IVS & No CoA, no pericardial effusion.

Dr M S Meel  
MD Medicine  
Senior Physician

Dr. M.S. MEEL  
MD (Medicine)  
Reg. No. 7937/2635  
Mahavir Hospital, Jhunjhunu

Dr Pallavi Choudhary  
MD Paediatrics  
Consultant



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भूयः विना परीक्षण कराना व कानधाना नगडनीय उपराध है  
इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है



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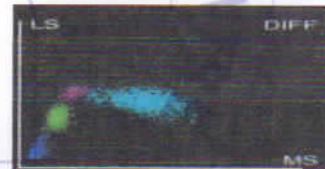
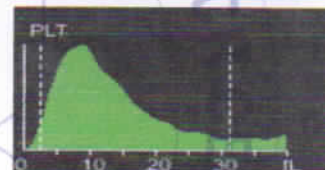
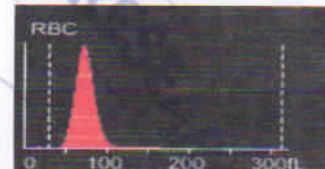
## Hematology Analysis Report

First Name: NITU KUMARI  
Last Name:  
Gender: Female  
Age: 34 Year

Sample Type:  
Department:  
Med Rec. No.:

Sample ID: 3  
Test Time: 06/02/2024 11:13  
Diagnosis:

Parameter	Result	Ref. Range	Unit
1 WBC	5.37	4.00-10.00	10 <sup>3</sup> /uL
2 Neu%	60.1	50.0-70.0	%
3 Lym%	32.9	20.0-40.0	%
4 Mon%	5.0	3.0-12.0	%
5 Eos%	1.6	0.5-5.0	%
6 Bas%	0.4	0.0-1.0	%
7 Neu#	3.22	2.00-7.00	10 <sup>3</sup> /uL
8 Lym#	1.77	0.80-4.00	10 <sup>3</sup> /uL
9 Mon#	0.27	0.12-1.20	10 <sup>3</sup> /uL
10 Eos#	0.09	0.02-0.50	10 <sup>3</sup> /uL
11 Bas#	0.02	0.00-0.10	10 <sup>3</sup> /uL
12 RBC	4.84	3.50-5.00	10 <sup>6</sup> /uL
13 HGB	10.9 L	11.0-15.0	g/dL
14 HCT	37.8 L	37.0-47.0	%
15 MCV	78.1 L	80.0-100.0	fL
16 MCH	22.5 L	27.0-34.0	pg
17 MCHC	28.7 L	32.0-36.0	g/dL
18 RDW-CV	12.8	11.0-16.0	%
19 RDW-SD	41.2	35.0-56.0	fL
20 PLT	235	100-300	10 <sup>3</sup> /uL
21 MPV	9.1	6.5-12.0	fL
22 PDW	11.8	9.0-17.0	%
23 PCT	0.213	0.108-0.282	%
24 P-LCR	30.8	11.0-45.0	%
25 P-LCC	72	30-90	10 <sup>3</sup> /uL



Dr. Mamta Khuteta  
M D. (Path.)  
RMC No : 4720/16260

Submitter: Operator: admin Approver:  
Draw Time: 06/02/2024 11:11 Received Time: 06/02/2024 11:11 Validated Time:  
Report Time: 07/02/2024 10:49 Remarks:

\*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977



# RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

**MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY**

Patient Name: <b>NITU KUMARI</b>		Registered on : 06-02-2024 11:34 AM
Sr. No. : 1186		Collected On : 06-02-2024 11:34 AM
Patient ID No.: 1870		Received On : 06-02-2024 11:34 AM
Age : 34 Gender : FEMALE		Reported On : 07-02-2024 10:52 AM
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP		Bar Code 
		LIS Number 7 9 3

## HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	15	mm/hr	20
BLOOD GROUPING (ABO & Rh)	B+ Positive		



*Ashish sethi*

Dr. Ashish Sethi  
Consultant Biochemist

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*Mamta Khuteta*

Dr. Mamta Khuteta  
M.D.(Path.)

RMC No. 4720/16260



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## HAEMATOLOGY

### HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	4.90	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	93.93	mg/dL	
eAG (Estimated Average Glucose)	5.21	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-

Fully Automated (EM 200 ) ERBA MANNHEIM.

#### Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos.therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.



Ashish sethi

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 Consultant Biochemist

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Dr.Mamta Khute  
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## BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
 <b>Glucose Fasting</b> (Method : GOD-POD)	87.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born,>1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121

## KIDNEY FUNCTION TEST

Test Name	Observed Values	Units	Reference Intervals
<b>Blood Urea</b> (Method : Urease-GLDH)	26.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
<b>Creatinine</b> (Method : Enzymatic Creatininase)	0.89	mg/dL	0.6--1.30
<b>Calcium</b>	9.87	mg/dL	8.5--11
<b>Uric Acid</b> (Method : Uricase-POD)	4.56	mg/dL	2.4--7.2
<b>Gamma glutamyl transferase (GGT)</b>	23.00	IU/L	15.0--85.0



*Ashish Sethi*  
 Dr. Ashish Sethi  
 Consultant Biochemist

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## LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol (Method: CHOD-PAP)	H 214.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	56.30	mg/dL	35--88
Triglycerides (Method: GPO)	H 225.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	H 112.70	mg/dL	0--100
VLDL Cholesterol	H 45.00	mg/dL	0--35
TC/HDL Cholesterol Ratio	3.80	Ratio	2.5--5
LDL/HDL Ratio	2.00	Ratio	1.5--3.5



Ashish sethi

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## BIO-CHEMISTRY

### Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.: -UV Kinetic)	16.00	U/L	5-40
SGPT/ALT(Tech.: -UV Kinetic)	22.00	U/L	5-40
Bilirubin(Total) (Method : Diazo)	0.95	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.16	mg/dL	0-0.3
Bilirubin(Indirect)	0.79	mg/dL	0.1-1.0
Total Protein (Method : BIURET Method)	7.01	g/dL	Adults : 6.4 - 8.3 Premature : 3.6 - 6.0 Newborn : 4.6 - 7.0 1 Week : 4.4 - 7.6 7-12 months : 5.1 - 7.3 1-2 Years : 5.6 - 7.5 > 2 Years : 6.0 - 8.0
Albumin(Tech.: -BCG) (Method : BCG)	3.98	gm/dL	0-4 days:2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y : 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Globulin(CALCULATION)	3.03	gm/dL	2.5-4.5
A/G Ratio(Tech.: -Calculated)	1.31		1.2 - 2.5
Alkaline Phosphatase(Tech.: -Pnp Amp Kinetic)	168.00	U/L	108-306



*Ashish sethi*  
 Dr. Ashish Sethi  
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## THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	1.02	ng/ML	0.5 - 1.5 ng/ML
T4 (Total Thyroxine)	9.87	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	4.25	µIU/mL	0.35 -- 5.50 µIU/mL

Sample Type : Serum

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS ) Abbott USA

**Remarks :**

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.



*Ashish Sethi*  
 Dr. Ashish Sethi

Consultant Biochemist

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*Mamta Khutele*  
 Dr. Mamta Khutele

M.D.(Path.)  
 RMC No. 4720/16260



T&C : \* This Reports is not to be used for legal purpose. Identification and name of person is not our responsibility.  
 B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977

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# RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory

MRI

CT SCAN

TMT

SONOGRAPHY


X-RAY

ECG

MEMOGRAPHY

Patient Name: **NITU KUMARI**  
 Sr. No. : 1186  
 Patient ID No.: 1870  
 Age : 34 Gender : FEMALE  
 Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 06-02-2024 11:34 AM  
 Collected On : 06-02-2024 11:34 AM  
 Received On : 06-02-2024 11:34 AM  
 Reported On : 07-02-2024 10:52 AM  
 Bar Code   
 LIS Number 1 7 9 3

## URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
<b>PHYSICAL</b>			
Quantity		ml	
Colour	Pale Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.025		
PH	5.0		4.5-6.5
<b>CHEMICAL</b>			
Reaction	Acidic		
Albumin	trace		
Urine Sugar	Nil		
<b>MICROSCOPIC</b>			
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	3-5	/h.p.f.	
Epithelial Cells	1-2	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bacteria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	
Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		

&lt;&lt;&lt; END OF REPORT &gt;&gt;&gt;

&gt;&gt;&gt; Results relate only to the sample as received. Kindly correlate with clinical condition. &lt;&lt;&lt;

Note: This report is not valid for medico legal purposes.



*Ashish Sethi*  
 Dr. Ashish Sethi  
 Consultant Biochemist

आपातकालीन सेवाएं

THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE

*Mamta Khute*  
 Dr. Mamta Khute  
 M.D.(Path)  
 RMC No. 4720/16260

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