

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	VANITHA
DATE OF BIRTH	06-01-1992
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	10-02-2024
BOOKING REFERENCE NO.	23M175653100087660S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. S SARAVANAKUMAR
EMPLOYEE EC NO.	175653
EMPLOYEE DESIGNATION	BRANCH HEAD
EMPLOYEE PLACE OF WORK	UTTUKULI
EMPLOYEE BIRTHDATE	07-03-1992

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **04-02-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

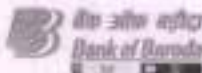
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



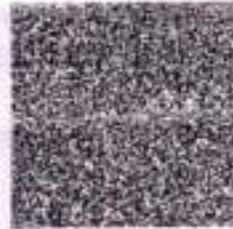


இந்திய அரசாங்கம்  
Government of India

Unique Identification Authority of India

பதிவேட்டு எண்/ Enrolment No.: 2193/11112/00158

To  
வனிதா  
Vanitha  
C/O Saravanakumar,  
5,  
KASBA PALAYAKOTTAI,  
KUTTAPALAYAM POST,  
NATHAKADAIYUR VIA,  
VTC: Palayakottai,  
PO: Palayakottai,  
Sub District: Kangeyam,  
District: Tiruppur,  
State: Tamil Nadu,  
PIN Code: 638108,  
Mobile: 8973991712



Signature Verified  
This Aadhaar Number is linked to the following details:  
Name: Vanitha  
DOB: 06/01/1992  
Gender: FEMALE

உங்கள் ஆதார் எண் / Your Aadhaar No. :

**8530 5049 8931**

VID : 9195 9587 4085 9675

எனது ஆதார், எனது அடையாளம்



இந்திய அரசாங்கம்  
Government of India



வனிதா  
Vanitha  
பிறந்த நாள்/DOB: 06/01/1992  
Gender/ FEMALE

ஆதார் என்பது அடையாளத்திற்கான எனதுதான். குடியரசின் அல்லது பிறந்த தேதிக்கான எனதுதான் பிறந்த தேதி என்பது ஆதார் என அடையாளப்படுத்தப்படும் சமர்ப்பிக்கப்படும். உத்தியோகத்தில் குடியிடப்படும் பிறந்த தேதி ஆவணத்தின் ஆதாரம் மூலம் ஆதரிக்கப்படும் தகவலின் அடிப்படையில் அமைந்துள்ளது.

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

**8530 5049 8931**

எனது ஆதார், எனது அடையாளம்



Government of India



AADHAAR

தகவல் / INFORMATION

- ஆதார் என்பது அடையாளத்திற்கான எனதுதான். குடியரசின் அல்லது பிறந்த தேதிக்கான எனதுதான் பிறந்த தேதி என்பது ஆதார் என அடையாளப்படுத்தப்படும் சமர்ப்பிக்கப்படும். உத்தியோகத்தில் குடியிடப்படும் பிறந்த தேதி ஆவணத்தின் ஆதாரம் மூலம் ஆதரிக்கப்படும் தகவலின் அடிப்படையில் அமைந்துள்ளது.
- பிறந்த ஆதார் ஆதாரம் மூலம் நியமிக்கப்பட்ட பிறந்த தேதி ஆவணத்தின் அடிப்படையில் அல்லது ஆர் சிஓ சமர்ப்பிக்கப்பட்ட கிடைக்கும் ஆதார் அல்லது ஆதார் சிஓ சமர்ப்பிக்கப்பட்ட ஆவணம் மூலம் ஆதரிக்கப்படும் தகவலின் அடிப்படையில் அமைந்துள்ளது.
- ஆதார் தனித்துவமானது மற்றும் பாதுகாப்பானது.
- ஆதார் பதிவு செய்யப்பட்ட நபர்/பெண் ஒவ்வொரு 10 வருடங்களாகும் பிறந்த ஆதாரின் அடையாளம் மற்றும் முகவரிக்கான ஆவணங்கள் சமர்ப்பிக்கப்பட வேண்டும்.
- பல்வேறு அரசு மற்றும் அரசு சார்பானவை / சேவைகளைப் பெற ஆதார் உங்களுக்கு உதவுகிறது.
- உங்கள் மொழியை நீங்கள் மற்றும் உங்கள் குடும்ப ஆதாரம் புதுப்பிக்கவும்.
- ஆதார் சேவைகளைப் பெற Aadhaar சமர்ப்பிக்கப்பட்ட பதிவிறக்கவும்.
- ஆதார்பயோமெட்ரிக்ஸ் மூலம் அடையாளப்படுத்தப்பட்டு பாதுகாப்பு உறுதிசெய்ய ஆதார்பயோமெட்ரிக்ஸ் பாதுகாப்பு அமைப்பைப் பயன்படுத்தவும்.
- ஆதார் சேரும் நிறுவனங்கள் ஒப்புதலைப் பெற வேண்டிய கட்டணம் உடனடி.
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Downloaded mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

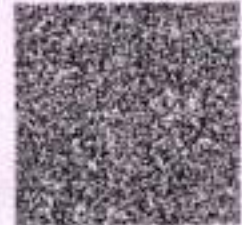


இந்திய அரசாங்கம்  
Unique Identification Authority of India



வனிதா  
C/O சரவணகாமர், 5, கஸ்பா  
பலையகட்டை, கட்டபலையம் அஞ்சல்,  
நாதகடையூர் வியா, பலையகட்டை,  
பலையகட்டை, திருப்பூர்,  
தமிழ்நாடு - 638108

Address  
C/O Saravanakumar, 5, KASBA  
PALAYAKOTTAI, KUTTAPALAYAM POST,  
NATHAKADAIYUR VIA, Palayakottai, PO:  
Palayakottai, Truppur,  
Tamil Nadu - 638108



**8530 5049 8931**

VID : 9195 9587 4085 9675

help@uidai.gov.in | www.uidai.gov.in

*Handwritten signature*

# Master Health Check-up

SENTHIL  
MULTI SPECIALITY  
HOSPITAL



547, PERUNDURAI ROAD, ERODE-638011.

☎ 0424-2260375, 2260376, 2260377

Name : Mrs. Vanitha

Date : 10/02/2024 I.D.No. 170/91

Age : 32 Occupation : -

Sex : Male  Female  Tel. No. 89739-91712

Address : c/o. Siva Varakumar S, K. J. Sub. Palayam

Examined by Dr.: DR. Chokula Priya MD 20.9

Kattalukottam Per. Nathaladeiyar Nilg. Kanjyay.

CONSULTANT : PHYSICIAN-IN-CHARGE

## MEDICAL SUMMARY

### Chief complaints :

Patient came with c/o neck  
Bilateral shoulder pain since 6 months  
more since last 1 month

### History of Present illness :

c/o low back ache ⊕ .  
Pain aggravating during travelling .  
c/o ⊕ heel pain ⊕ .  
c/o giddiness since 1 month  
during morning .  
No vomiting / bladder & bowel disturbance  
c/o epigastric burning sensation  
after intaking of spicy food .  
c/o Breathlessness on exertion  
x 2 months  
c/o generalized tiredness .  
c/o excessive sleepiness .  
No headache .

## Systemic Review

### I. Cardiovascular System :

- Chest pain ⊕ Epigastric region.  
Breathing Difficulty even on sitting.  
Palpitation ⊖  
Swelling-feet ⊕  
History of High Blood Pressure ⊕  
Any medications ⊕

### II. Respiratory system including naso bronchial complaints:

- Sneezing ⊖ Running nose ⊕ Nose block ⊖  
Cough ⊖  
Dyspnoea  
Wheezing ⊖

### III. Dental: Normal

### IV. Gastro Intestinal system :

- Appetite Normal  
Abdominal pain Epigastric pain  
Flatulence and Dyspepsia -  
Bowel habits ⊕  
Peptic ulcers 4-5 yrs.  
Mouth ulcers Nil  
Piles - No

### V. Genito urinary :

- Frequency 10/ Day 2-3/ Night  
Burning ⊖  
Urgency ⊖ Hesitency ⊖ Dribbling ⊖ Overflow ⊖  
Prostate enlargement Hydrocele  
GYN

### VI. Central Nervous System :

- Headache ⊖  
Giddiness ⊕ Subjective objective Aura  
Memory and Concentration -  
Neuritis Sleep Excessive -

VII. Eyes : } normal  
VIII. Ears : }

Vision wearing Spectacles .  
Hearing (N)

IX. Spine & Joints : (N)

X. Skin: Normal

XI. General Symptoms:

XII. Present Medications

(No)

### Past History

Medical R/O DPD (now end on Ex)

Surgical H/O (1) LSCS done

### Personal History :

Marital Status : S / M / W 6 Years

Habits-Cigarettes -

Tobacco & Snuff -

No. of Children (1)

Diet Normal

Veg. / Non-Veg. Mixed

Alcohol

Physical Activity

### Drug Allergies

(0)

### Family History :

Father 70, Alive Healthy - Newly diagnosed prediabetic on meal plan.  
Mother 60, Alive Healthy.

Siblings Younger Brother, 28 Alive healthy

Diabetes (1) father B.P.

Heart - C.V.A. -

Allergies -

Cancer - Epilepsy -

Endocrine & Others

### Physical Examination

**General :** Build *Normal* Height *156cm* Weight *53kg* Clubbing  
Anaemia Icterus Cyanosis  
Oedema Glands

**HENT :**

**CVS :** Heart Rate & Rhythm *92/min*  
B.P. : Supine *120/70mmHg* Sitting *110/70mmHg* Standing *110/70mmHg*  
Chest shape  
Heart Sounds *C, S2 ⊕*  
Murmurs *No murmur*  
Thrills

**RS :** Rate & Type *18/min*  
*NVBS ⊕*  
Breath Sounds

**Abdomen :** Appearance *Normal*  
Liver *(N)* Spleen *(N)* Kidney *(N)* Colon *(N)*  
Tenderness *(N)*  
Bowel Sounds *BS ⊕* Fluid *No free fluid*

### HYDROCELE & HERNIAL ORIFICES

**GYNEC** *LMP - 29/01/2024 | 1-2/30, no clot*

**CNS :** Cranial Nerves }  
Sensory System } *No abnormality detected*  
Motor System }  
Reflexes }

### EYES AND FUNDUS

**SKIN** *⊕*

**EXTREMITIES** *Normal*

## INVESTIGATIONS

**Haemogram :** -Haemoglobin 11.2  
 -MCV 82.3  
 -Total WBC 6220

Total RBC 4.31  
 MCH 26.1

PVC 35.4  
 MCHC 31.7  
 ESR 25

Blood Grouping & Rh. Typing: "O" +  
 P 53.7      L 38.4      E 3.0      M 4.0

VDRL :  
 6.8

0.64

4.7

Biochemistry :

Blood Urea

Creatinine

Uric Acid

140.0  
 Total Cholesterol

67.9  
 HDL

55.8  
 LDL

Ratio of

Total Chol  
 HDL Chol

81.6  
 Triglycerides

Live Functions:

6.8  
 Total Proteins

3.9  
 Albumin

2.9  
 Globulin

69  
 Alk. phs

12  
 SGPT

20.0  
 GGTP

Glucose Tolerance

Fasting

1hr

2hrs

- Blood Sugar

81.7

75.0.

- Urine Sugar

nil

nil

Urine Examination

Report Attached

Stools:

X-ray Chest. P.A. View;

Report Attached

E.C.G. Resting :

Report Attached.

Others :

Final Impression :

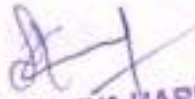
MASTER HEALTH CHECK-UP

Fit / Healthy.

ADVISED :



MEDICAL OFFICER

  
**Dr. GOKULAPRIYA HARINIVAS**  
M.D. (O.G.), F.M.S  
Reg. No. 05362  
CONSULTANT OBSTETRICIAN & GYNECOLOGIST  
SENTHIL MULTI SPECIALITY HOSPITAL  
No.547, Perundurai Road, CHUOL - 11





# SMS DIAGNOSTIC CENTRE

## Senthil Multi Speciality Hospital

No. 547, Perundural Road, Phone : 0424 2260375 / 2260376 / 2260377  
 Erode - 638 011 Emergency Helpline : 88 830 55 555  
 Email: smshospitalerode@gmail.com



Patient ID : 0200034453  
 Patient Name : **MRS. VANITHA**  
 Age /Sex : **32 Y/ F**  
 Ref By : **BANK OF BARODA**  
 Referred By : Dr.Dr.C.SENTHILVEL., M.D (Gen) ,D.M (Neuro)

SID No : **02107869**  
 Collected Date : 10/02/2024 / 11:55  
 Received Date : 10/02/2024 / 11:56  
 Reported Date : 10/02/2024 / 13:51

Partial Test Report

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
<b>BIOCHEMISTRY</b>					
<b>RENAL FUNCTION TEST-INSURANCE (RFT)</b>					
Serum	<b>UREA</b> ( Urease/GLDH )	14.6		mg/dl	Adult less than (65 y) <50
Serum	<b>BLOOD UREA NITROGEN (BUN)</b> ( Urease -GLDH /End Point )	6.8		mg/dl	9.5 - 20
<b>Interpretation :</b>					
Serum	<b>CREATININE</b> ( Jaffe's Kinetic )	0.64		mg/dl	Female : 0.60-1.2
Serum	<b>BUN/CREATININE RATIO</b>	10.6		Ratio	12.1 - 20.1
Serum	<b>URIC ACID</b> ( Uricase / Bichromatic end Point )	4.7		mg/dl	Female: <7.0 Male: <7.0 Male:(>65Y)<8.4
<b>Interpretation :</b>					
<b>HAEMATOLOGY</b>					
<b>COMPLETE BLOOD COUNT (CBC)</b>					
EDTA	<b>TOTAL WBC COUNT.</b> ( Electrical Impedance )	6220		Cells / Cumm	4000 to 11000
<b>DIFFERENTIAL COUNT</b>					
EDTA	<b>Polymorphs</b>	53.7		%	40.0 - 65.0
EDTA	<b>Lymphocytes</b>	38.4		%	20.0 - 45.0
EDTA	<b>Eosinophils</b>	3.0		%	1.0 - 6.0
EDTA	<b>Monocyte</b>	4.0		%	2.0 - 8.0
EDTA	<b>Basophils</b>	0.9		%	0.0 - 1.0
EDTA	<b>HAEMOGLOBIN (Hb)</b>	11.2	L	g/dL	12 - 16
EDTA	<b>PCV (HCT)</b>	35.4	L	%	Female 37 - 47

Page 1 of 7

Biochemistry & Molecular Biology

Mr K.Kamalasekaran M.Sc (UK)

Dr S.Sowmya PhD | Mr B.Baskar MSc

Microbiology

Dr H.Banathya MD

Mr S.Sridharanjan M.Sc

Pathology

Dr S.Aravinth MD

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**CISTRON**  
BIOLOGICAL LABORATORY

Disclaimer:

Isolated Laboratory Investigations are not conclusive. But should be used along with the other clinical examinations and related investigations to confirm the final diagnosis. The result of a laboratory investigation is dependent on the methodology used and sample received. WE WISH YOU A HEALTHY LIFE

cistronlabs@gmail.com

www.cistronlabs.com



# SMS DIAGNOSTIC CENTRE

## Senthil Multi Speciality Hospital

No. 547, Perundurair Road,  
Erode - 638 011  
Email: smshospitalerode@gmail.com

Phone : 0424 2260375 / 2260376 / 2260377  
Emergency Helpline : 88 830 55 555



Patient ID : 0200034453

Patient Name : **MRS. VANITHA**

Age /Sex : **32 Y/ F**

Ref By : **BANK OF BARODA**

Referred By : Dr.Dr.C.SENTHILVEL., M.D (Gen) .,D.M (Neuro)

SID No : **02107869**

Collected Date : 10/02/2024 / 11:55

Received Date : 10/02/2024 / 11:56

Reported Date : 10/02/2024 / 13:51

**Partial Test Report**

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
EDTA	RBC COUNT	4.31		millions / cumm	Female: 3.8 - 4.8
EDTA	MCV	82.3		fL	76 - 96
EDTA	MCH	26.1	L	pg	27 - 31
EDTA	MCHC	31.7		%	30 - 35
EDTA	PLATELET COUNT	2.50		Lakhs / Cumm	1.5 - 4.0
EDTA	MPV (Electrical Impedance)	11	H	fL	6 - 10
cit.Blood	ESR ( 30 mins /1 hr ) ( Westergren's )	25		mm/hr	Male <50 Years: 0 - 15 > 50 Years :0 - 20 Female <50 Years: 0 - 20 >50 Years : 0 - 30

### BLOOD GROUPING & RH TYPING

EDTA	Blood Group	"O"
EDTA	RH Typing	POSITIVE

### BIOCHEMISTRY

Plasma	BLOOD GLUCOSE (Fasting) ( GOD/POD )	81.7		mg/dl	70 - 110
Plasma	BLOOD GLUCOSE (Post Prandial) ( GOD/POD )	75.0	L	mg/dl	80-140
	HbA1C				



Page 2 of 7

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Microbiology

Dr M. Banumathy MD

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[cistronlabs@gmail.com](mailto:cistronlabs@gmail.com)

[www.cistronlabs.com](http://www.cistronlabs.com)



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Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
EDTA	Glycosylated Haemoglobin (HbA1c)	5.2		%	Non Diabetic : Less than 6 % Diabetic Range : Good Control - 6.1 - 7.0 % Fair Control - 7.1 - 8.0 % Unsatisfactory Control - 8.1 - 10 % Poor Control : Above 10 % Method:HPLC

**Notes** : HBA1C is an Index of Your Blood Glucose control for the past three Months.

EDTA      **Estimated Average Glucose (eAG)**    102.5      mg/dl

  
Verified By  
Mr. B. Baskar  
Lab Incharge



*S. Aravinth*

Dr. S. Aravinth., M.D (Path)  
Consultant Pathologist



Biochemistry & Molecular Biology

Mr K.Kamalasekaran M.Sc (UK)

Dr S.Sowmya PhD | Mr B.Baskar MSc

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# SMS DIAGNOSTIC CENTRE

## Senthil Multi Speciality Hospital

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Erode - 638 011  
Email: smshospitalerode@gmail.com

Phone : 0424 2260375 / 2260376 / 2260377  
Emergency Helpline : 88 830 55 555



Patient ID : 0200034453

Patient Name : **MRS. VANITHA**

Age /Sex : **32 Y/ F**

Ref By : **BANK OF BARODA**

Referred By : Dr.Dr.C.SENTHILVEL., M.D (Gen) ,D.M (Neuro)

SID No : **02107869**

Collected Date : 10/02/2024 / 11:55

Received Date : 10/02/2024 / 11:56

Reported Date : 10/02/2024 / 13:51

Partial Test Report

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
<b>BIOCHEMISTRY</b>					
<b>LIPID PROFILE</b>					
Serum	<b>TOTAL CHOLESTEROL</b> ( Oxidase-Peroxidase )	140.0		mg/dl	Less Than 220
<b>Interpretation :</b>					
Serum	<b>TRIGLYCERIDES (TGL)</b> ( GPO- Bichromatic end Point )	81.6		mg/dl	Less Than 150
<b>Interpretation :</b>					
Serum	<b>HDL CHOLESTEROL</b> ( Enzymatic )	67.9		mg/dl	NCEP guidelines (Coronary heart disease risk) < 40 : High Risk 40 - 60 : Normal Risk >= 60 : Low Risk
Serum	<b>LDL - CHOLESTEROL</b> ( Calculated )	55.8		mg/dl	Less Than 170
<b>Interpretation :</b>					
Serum	<b>VLDL CHOLESTEROL</b> ( Calculated )	16.3		mg/dl	Less than 46
Serum	<b>NON HDL CHOLESTEROL</b> ( Calculated )	72.1		mg/dl	< 130
Serum	<b>TOTAL CHOL/HDL CHOL. RATIO</b> ( Calculated )	2.1			Less than 4.5



**Biochemistry & Molecular Biology**

Mr K.Kamalasekaran M.Sc (UK)

Dr S.Sowmya PhD | Mr B.Baskar MSc

**Microbiology**

Dr M. Banumathy MD

Mr S.Soundarapandian M.Sc

**Pathology**

Dr S.Aravinth MD

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**Partial Test Report**

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
	LDL/HDL Ratio	0.8			2.5 - 3.5

Verified By  
 Mr. B.Baskar  
 Lab Incharge



*S. Aravinth.*  
 Dr. S. Aravinth.,M.D (Path)  
 Consultant Pathologist



<b>Biochemistry &amp; Molecular Biology</b> Mr K.Kamalasekaran M.Sc (UK) Dr S.Sowmya PhD   Mr B.Baskar MSc	<b>Microbiology</b> Dr M. Banumathy MD Mr S.Soundarapandian M.Sc	<b>Pathology</b> Dr S.Aravinth MD
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<b>BIOCHEMISTRY</b>					
<b>LIVER FUNCTION TEST (LFT)</b>					
Serum	<b>BILIRUBIN ( TOTAL )</b> ( Diazo )	0.88		mg/dl	Adults & children up to 1.0
Serum	<b>BILIRUBIN (DIRECT)</b> ( Diazo )	0.38		mg/dl	0.2 - 0.4
<b>Interpretation :</b>					
Serum	<b>BILIRUBIN (INDIRECT)</b> ( Calculated )	0.5		mg/dl	0.2 - 1.0
<b>TOTAL PROTEIN &amp; A/G RATIO</b>					
Serum	<b>TOTAL PROTEIN</b> ( Biuret / End Point )	6.8		gm/dl	6.6-8.7
<b>Interpretation :</b>					
Serum	<b>ALBUMIN</b> ( Bromocresol Green(BCG) )	3.9		gm/dl	Adults 3.4-4.8
Serum	<b>GLOBULIN</b> ( Calculated )	2.9	L	g/dL	Adults 3.0 - 3.5
Serum	<b>A/G Ratio</b>	1.34			1.2 -1.5
<b>Interpretation :</b>					
Serum	<b>SGOT (AST)</b> ( Modified With out P-5-P )	18		U/L	Female : up to 32
Serum	<b>SGPT (ALT)</b> ( Modified With out P-5-P )	12		U/L	Females: up to 31
Serum	<b>ALKALINE PHOSPHATASE</b> ( p-NPP- (AMP Buffer) )	69		U/L	42 - 98
Serum	<b>GAMMA GT</b> ( IFCC )	20.0		U/L	Male :10 - 50 Female :7 - 35
<b>Interpretation :</b>					
Urine	<b>URINE SUGAR (PP)</b> ( Urstick Method )	Nil			



Page 6 of 7

**Biochemistry & Molecular Biology**

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**Microbiology**

Dr M. Banumath MD

Mr S.Soundarapandian M.Sc

**Pathology**

Dr S.Aravindh MD

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**Partial Test Report**

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
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**CLINICAL PATHOLOGY**

**URINE ROUTINE ANALYSIS**

Urine	Color	Straw Yellow			Pale yellow
Urine	Appearance	Slightly Turbid			Clear
Urine	Sp.Gravity	1.015			1.010 - 1.025
Urine	pH	6.5			5.0 - 8.0
Urine	Proteins	Nil			Nil
Urine	Sugar (F/ R/ PP)	Nil			Nil

**MICROSCOPY**

Urine	Pus Cells	2 - 4			0 - 5 /hpf
Urine	Epithelial Cells	4 - 6			0 - 5 /hpf
Urine	RBC's	1 - 2			Nil
Urine	Casts	Nil			Nil
Urine	Crystals	Nil			Nil
Urine	Others	Nil			Nil

Verified By  
 Mr. B.Baskar  
 Lab Incharge



S. Aravinth.

Dr. S. Aravinth.,M.D (Path)  
 Consultant Pathologist



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Patient ID : 0200034453

Patient Name : **MRS. VANITHA**

Age /Sex : **32 Y/ F**

Ref By : **BANK OF BARODA**

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SID No : **02107869**

Collected Date : 10/02/2024 / 11:55

Received Date : 10/02/2024 / 11:56

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Final Test Report

Specimen	Test Name (Method)	Result	Flag	Units	Reference Value
<b>IMMUNOLOGY</b>					
<b>THYROID FUNCTION TEST (FREE)</b>					
Serum	<b>FT3</b> ( ECLIA )	2.85		pg/ml	Adults:2.0 - 4.4
Serum	<b>FT4</b> ( ECLIA )	1.37		ng/dL	Adults:0.70 - 2.00
Serum	<b>TSH (Thyroid Stimulating Hormone)</b> ( ECLIA )	3.530		µIU/ml	Adult-0.35-5.5

End Of Report

✓  
 Verified By  
 Mr. B.Baskar  
 Lab Incharge



S. Aravindh.

Dr. S. Aravindh.,M.D (Path)  
 Consultant Pathologist



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# SMS SCANS

- 3D ULTRASOUND SCAN
- ECHO CARDIOGRAPHY

- COLOUR DOPPLER
- TRANSCRANIAL DOPPLER



NAME: MRS. VANITHA      AGE: 32 YRS      SEX: FEMALE,  
 DATE: 10.02.2024      REF BY: DR. C. SENTHILVEL M.D.,DM (Neuro)

## ULTRASOUND ABDOMEN AND PELVIS

Liver : Size is normal. Echogenecity Normal.  
 Intrahepatic biliary radicles normal.  
 CBD and portal vein normal.

Gall bladder : Distended. Wall normal. No calculus.

Pancreas : Head, neck, body and tail appears normal.

Spleen : Size is normal Echogenecity normal.

Aorta and IVC : Normal.

Right kidney : Size normal. Cortical echoes normal.  
 Corticomedullary differentiation maintained.  
 Pelvicalyceal system normal. No calculus

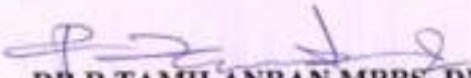
Left kidney : Size normal. Cortical echoes normal.  
 Corticomedullary differentiation maintained.  
 Pelvicalyceal system Normal .No calculus

Urinary bladder : Distended. Wall regular.

Uterus & Ovaries : Normal in size and echotexture.

### IMPRESSION:

➤ NORMAL ULTRASOUND STUDY OF ABDOMEN AND PELVIS.

  
 DR.R.TAMILANBAN MBBS.,DNB(Rad),  
 Consultant Radiologist



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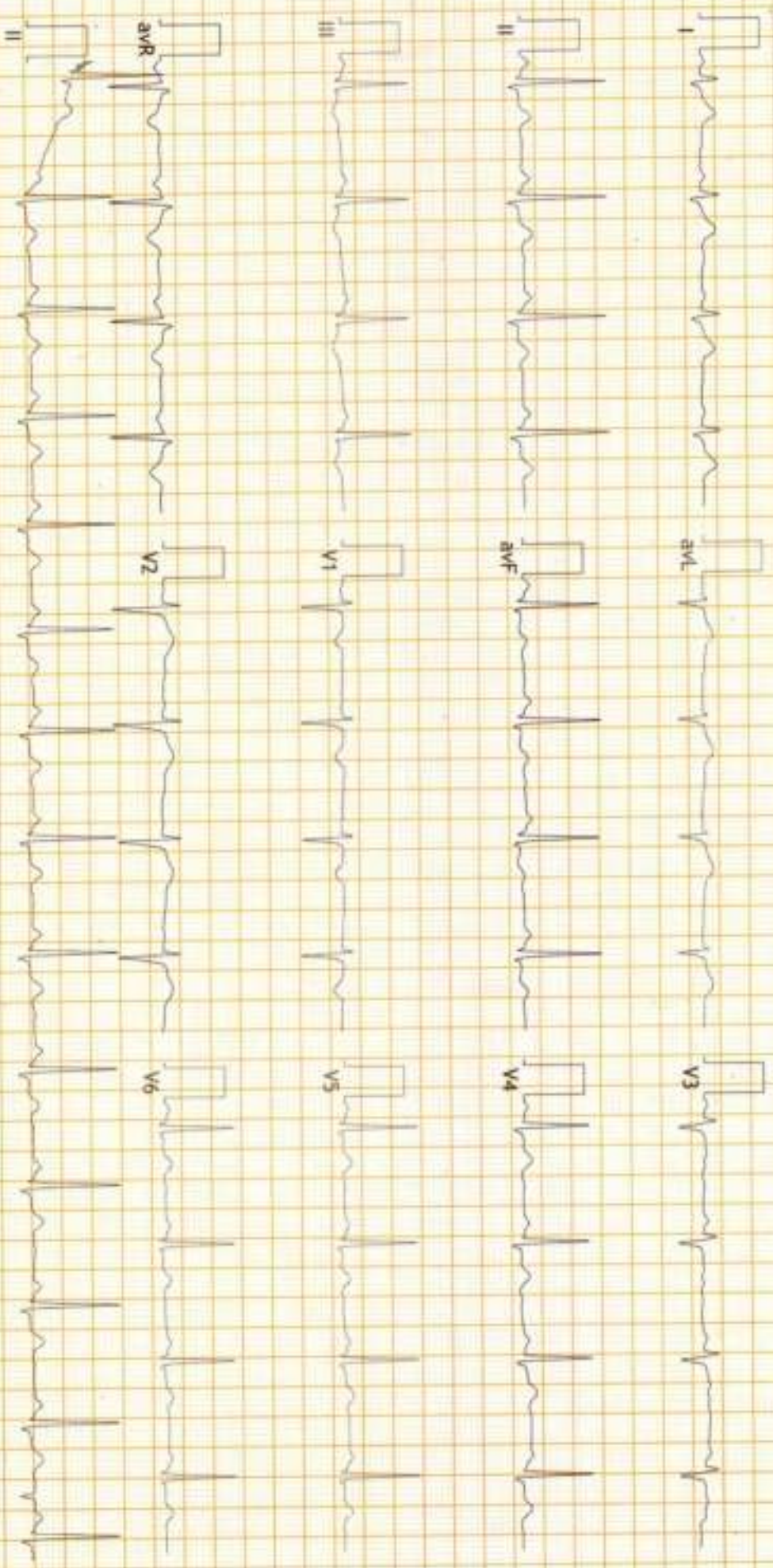
EMERGENCY AMBULANCE SERVICE 98432 55055







PR Interval: 132 ms  
QRS Duration: 92 ms  
QT/QTc: 347/402ms  
P-QRS-T Axis: 57 - 81 - -21 (Deg)



**FINDINGS: Normal Sinus Rhythm**

Vent Rate : 80 bpm; PR Interval : 132 ms; QRS Duration: 92 ms; QT/QTc Int : 347/402 ms

P-QRS-T axis: 57 • 81 • -21 • (Deg)

Comments :

*[Handwritten Signature]*  
Reg. No. : 54943

**DR. R. ANANDHAKUMAR**  
MBBS, MD (Gen Med), DM (Cardiology)  
Interventional Cardiologist  
Reg. No. : 54943

*[Handwritten Signature]*  
**DR. C. SENTHILVEL MD, DM (NEURO)**  
MICRO VESSEL CLINIC



# SMS SCANS

- 3D ULTRASOUND SCAN
- ECHO CARDIOGRAPHY

- COLOUR DOPPLER
- TRANSCRANIAL DOPPLER



**NAME: MRS. VANITHA**

**AGE: 32 YRS**

**SEX: FEMALE**

**DATE : 10.02.2024**

**REF BY: DR. C. SETHILVEL M.D.,DM (Neuro).**

## ***ECHO CARDIOGRAPHY REPORT***

**Left ventricle:** Normal in size and function. EF – 66 %. No regional wall motion abnormality. No LV hypertrophy.

**Right ventricle :** Normal in size and function .

**Inter ventricular septum :** Intact

**Left atrium:** Normal.

**Right atrium:** Normal.

**Interatrial septum :** Intact

**Mitral valve :** Normal leaflet motion . No MS / No MR .

**Aortic valve :** Normal leaflet motion . No AS/ No AR

**Tricuspid valve :** Normal leaflet motion. No TR

**Pulmonary valve :** Normal .

**Ascending aorta and arch:** Normal

**IVC:** 1.3 cm, 30 % inspiratory collapse.

**Pericardium :** No pericardial effusion



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**IMPRESSION :**

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LV SYSTOLIC FUNCTION

NORMAL LV DIASTOLIC FUNCTION

NO PULMONARY HYPERTENSION



**DR. ANANDHAKUMAR, MBBS, MD, DNB[CARDIO]**

**Consultant Interventional Cardiologist**

**Dr. R. ANANDHAKUMAR**

MBBS, MD. (Gen.Med), DNB (Cardiology)

**Interventional Cardiologist**

Reg.No : 84943

**Patient Information**

Name: VANITHA 32F, ECHO  
Birthdate:  
Ref. Physician:

Patient Id: DFGH  
Sex:  
Ref. Physician:

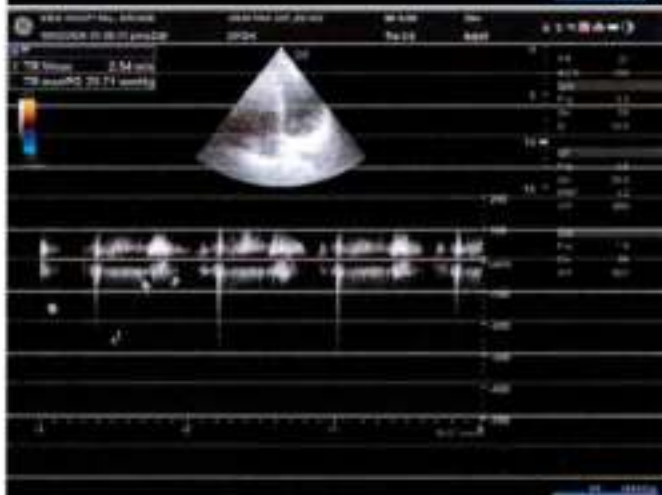
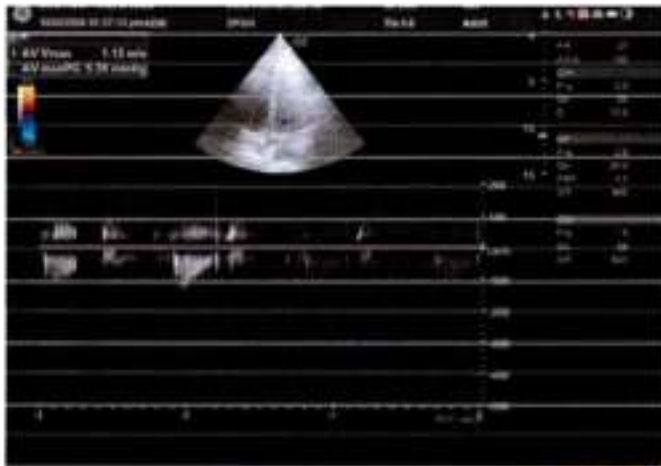
Date: 10/02/2024  
Accession #:  
Operator: ADM

**Measurements**

2D

**M-Mode & PW**

IVSd	1.27 cm
LVIDd	3.20 cm
LVPWd	0.98 cm
IVSs	1.96 cm
LVIDs	1.59 cm
LVPWs	1.53 cm
EDV(Teich)	40.95 ml
ESV(Teich)	7.00 ml
EF(Teich)	82.91 %
%FS	50.45 %
SV(Teich)	33.95 ml
MV E Vel	0.92 m/s
MV DecT	170.53 ms
MV Dec Slope	5.41 m/s <sup>2</sup>
MV A Vel	0.51 m/s
MV E/A Ratio	1.82
MV PHT	49.45 ms
MVA By PHT	4.45 cm <sup>2</sup>
e	0.13 m/s
E/e	6.88
AV Vmax	1.15 m/s
AV maxPG	5.28 mmHg
TR Vmax	2.54 m/s
TR maxPG	25.71 mmHg



Handwritten notes in a cursive script, likely providing clinical context or patient information. The text is mostly illegible due to blurriness and fading.



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Phone : (0424) 2280 375, 376, 377  
Emergency Helpline: 88 830 55 555, 81 100 00 699

**SMS**

PATIENT NAME : MRS VANITHA  
AGE : 32 YRS / FEMALE  
CHEST X-RAY : PA View  
DATE : 10.02.2024

## X-RAY CHEST- REPORT

Trachea in mid line  
Both Hilar regions normal.  
CT Ratio normal  
Both lung fields normal  
Thoracic Bony cage normal  
Soft tissue normal.

### IMPRESSION:

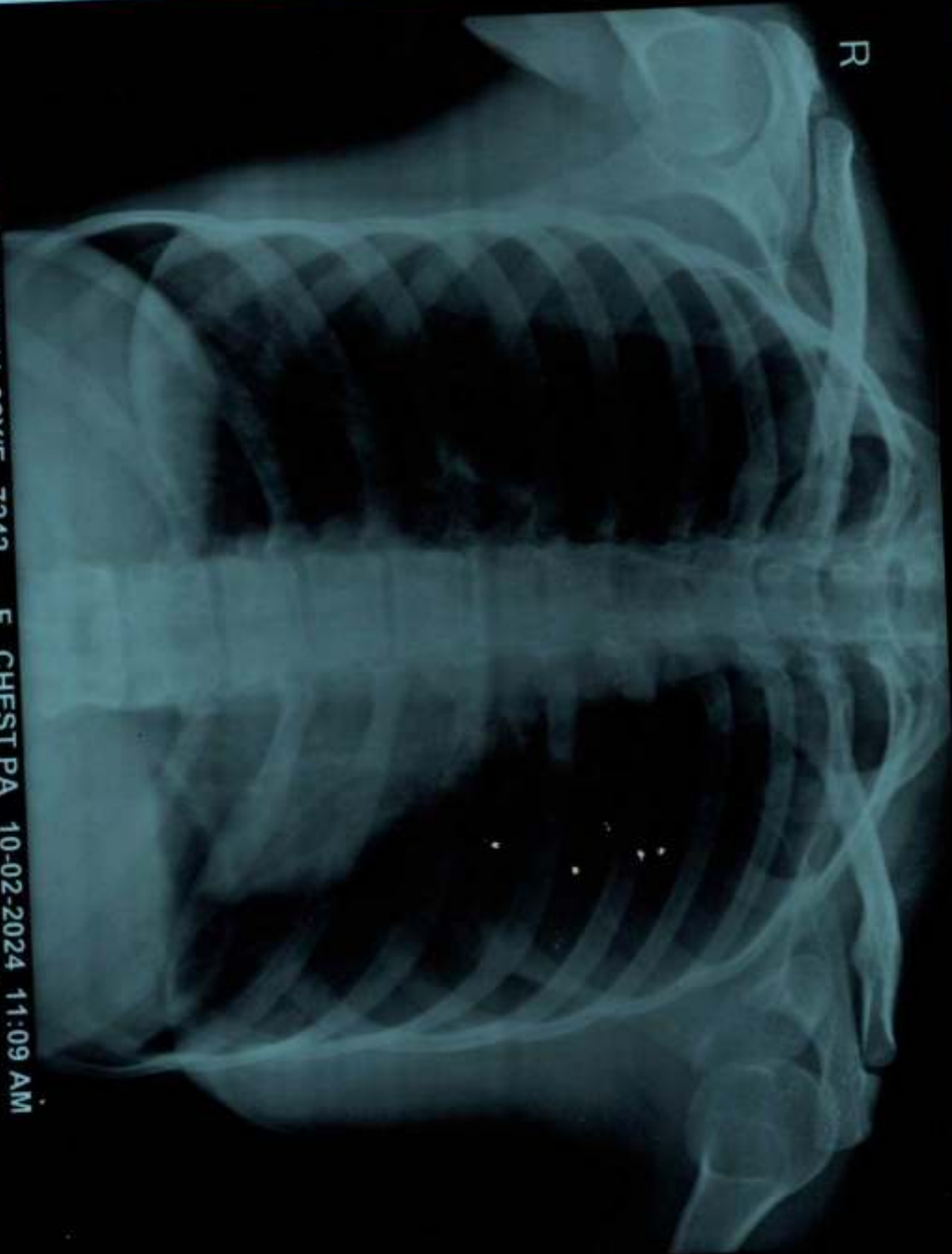
- ESSENTIALLY NORMAL STUDY .



DR. R.TAMILANBAN MBBS., DNB (Rad),  
Consultant Radiologist



R



MRS. VANITHA 32Y/F 7242 F CHEST PA 10-02-2024 11:09 AM  
SENTHIL MULTISPECIALITY HOSPITAL, ERODE



GPS Map  
Camera Lite

81, Perundurair Rd, Nggo Colony, Erode, Tamil Nadu 638011, India

Latitude

11.3388423 N

Longitude

77.7138979 E

Local 10:28:50 AM

GMT 04:58:50 AM

Altitude 590.54 feet

Saturday, 10.02.2024