



भारत सरकार
Government of India



अंजू चौकन
Anju Choken
जन्म तिथि / DOB : 21/07/1975
महिला / Female



2881 3386 4732

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता
अभेदिनी: राम पाल चौकन, डी-5
एच के एम नगर, अलवर, अलवर,
राजस्थान, 301001

Address:
W/O Ram Pal Choken, D-5
H.K.M Nagar, Alwar, Alwar,
Rajasthan, 301001

Handwritten signature

2881 3386 4732



1947



help@uidai.gov.in



www.uidai.gov.in

Handwritten signature: Anju Singh



THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC
LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

Date 01/04/2022
Age 46 Yrs.
Sex F

PROPOSAL NO. PKG10000237
Patient Name MRS. ANJU CHOKEN
Ref. By Dr. M. N. THAREJA

Details of packages		Patients report	Units	Normal value	
DLC	HB	10.5	gm%	M-13.5-18, F-11.5-16.5	
	TRBC	4.08	million /cu mm	M-4.0-5.5, F-3.9-5.6	
	TWBC	5500	cu mm	4000-11000	
	Polymorphs	55	%	42-75	
	Lymphocytes	40	%	20-50	
	Eosinophil	05	%	1-6	
	ESR	02	mm 1 st Hr.	M-0-9, F-0-20	
	Platelets	268000	Lack / cu mm	1.5-4	
	PCV	31.3	%	37-54	
	MCV	76.7	Cubicmicrons	86-98	
	MCH	26.0	Picograms	26-34	
	MCHC	33.9	%	32-36	
	Blood Grouping & Rh Factor		"O"Rh+(POSITIVE)		
	BUN	13	mg %	M-7-20	
S. Creatinine	0.89	Mg/100ml	0.9-1.4 mg /100 ml		
HBsAg	-				
HIV I & II	-	Elisa Method			
HbA1C	4.7	%	4-6%		
VDRL	-				

Details of packages		Patients report	Units	Normal value	
LFT	GGTP	28.0	U/L	5-60	
	SGOT	19.5	Units / ml	Upto 40	
	SGPT	26.7	Units / ml	Upto 40	
	S. Bilirubin	Total Bilirubin	0.52	mg%	Upto 1.2
		Direct Bilirubin	0.20	mg%	0-0.25
		Indirec Bilirubin	0.32	mg%	
		T. Protein	7.20	Gm%	6.2-8.3
		S. Albumin	4.35	Gm%	3.2-5.3
		Globulin	2.85	Gm%	
	Alkaline phosphate	87.0	IU/L	60 - 170	
	S. Calcium	-	Gm%	8.5-10.5	
	Uric Acid	3.71	Mg%	2.5-7 mg%	
	Blood Sugar Fasting	73	Mg%	60-110 mg %	
	Blood Sugar PP	98	Mg%	Upto 160	
Lipid Profile	S. Cholesterol	166.0	mg/ml	Upto 220	
	S. Triglycerides	96.0	mg/ml	Upto 170	
	HDL Cholesterol	53.0	IU/L		
	LDL cholesterol	93.0	IU/L	450 at 37° C	
	VLDL	19.0	mg %	Upto 35	

Routine Urine Analysis

Physical/ Chemical	Microscopic:	
Appearance	RBCs	Nil
Specific Gravity	WBCs	2-3/ HPF
Ph	Epith. Cells	2-3/HPF
Albumin	Casts	Nil
Glucose F	Crystals	Nil
Ketones	Bacteria	Nil
Blood	Glucose P.P.	Nil

Signature of Technician

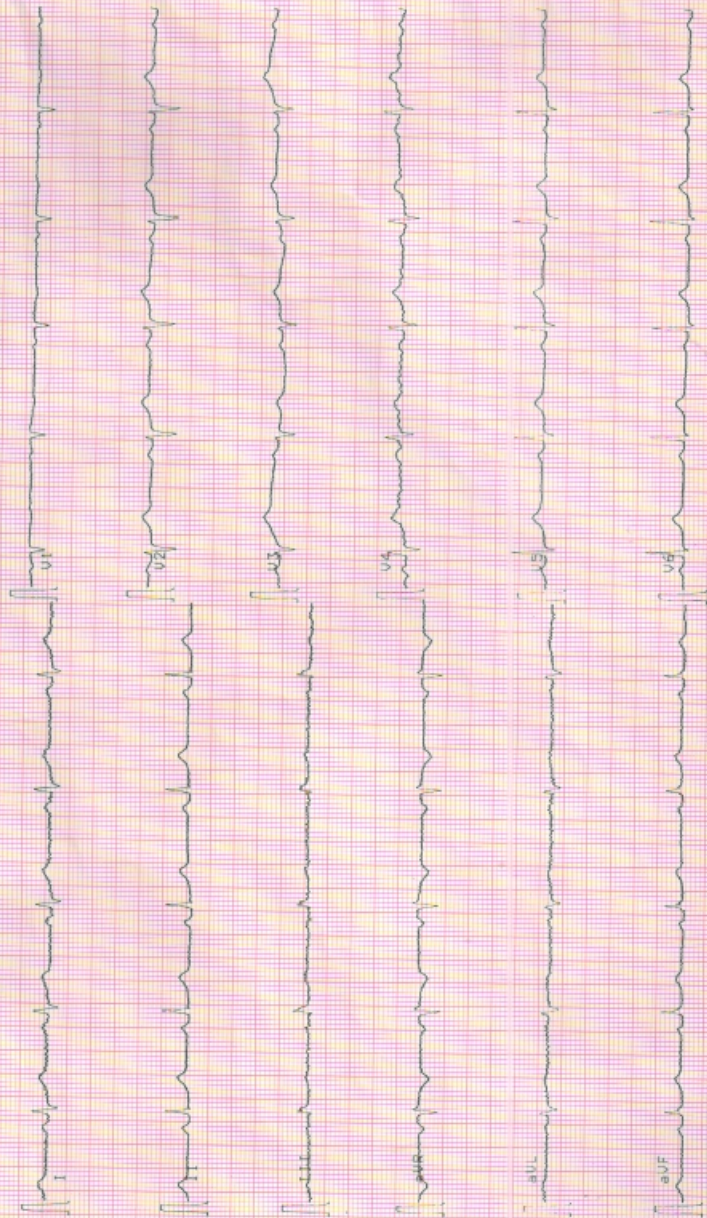
Signature of Doctor

Patient Name: *Angela Choken*
 Age: *46* Y / F
 Weight: *142* kg
 Height: *162* cm

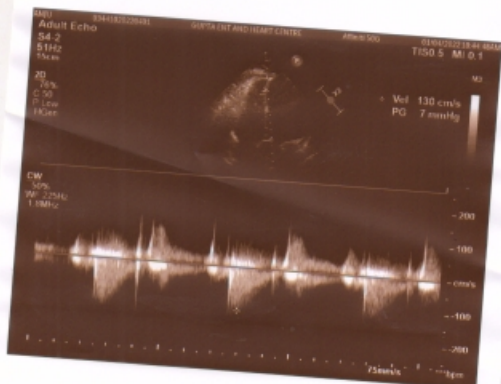
HR: 65/min
 Intervals:
 RR 928 ms
 P 124 ms
 PR 182 ms
 QRS 72 ms
 QT 480 ms
 QTc 417 ms

Axis: P 38°, QRS 88°, T 46°
 S: 78
 P (II) 0.12 mV
 S (VI) - mV
 R (V5) 0.75 mV
 Sokol. 1.39 mV

UNCONFIRMED REPORT
MS-2
Wicks
 18 mm/mV



25 mm/s
 0.05-35 Hz F50 Fr. 01-APR-22 18:21:18
 AT-2 C.3.03
 Part No. 157017M © 013





GUPTA ENT AND HEART CENTRE

Dayanand Marg, Nangli Circle, Alwar (Raj.) Ph. 0144-3591336 | M. 7378184427

Echocardiography Report

Name : Mrs. Anju Chokan Refd by: Dr. M. N. Thareja
Age / Sex : 45yrs./Female Date : 1 April 2022

Clinical Diagnosis : For Cardiac Evaluation
2D Echocardiography Findings
Mitral Valve : Normal
Aortic Valve : Normal
Tricuspid Valve : Normal
Pulmonary Valve : Normal
Left Atrium : 3.5cm: Normal
Left Ventricle : Normal LV size with normal LV systolic function. No RWMA


LVIDd	4.3cm.	IVSd	1.0cm.	EF	60%	Visual
LVIDs	2.5cm.	PWd	0.9cm.	EF	%	F.S.

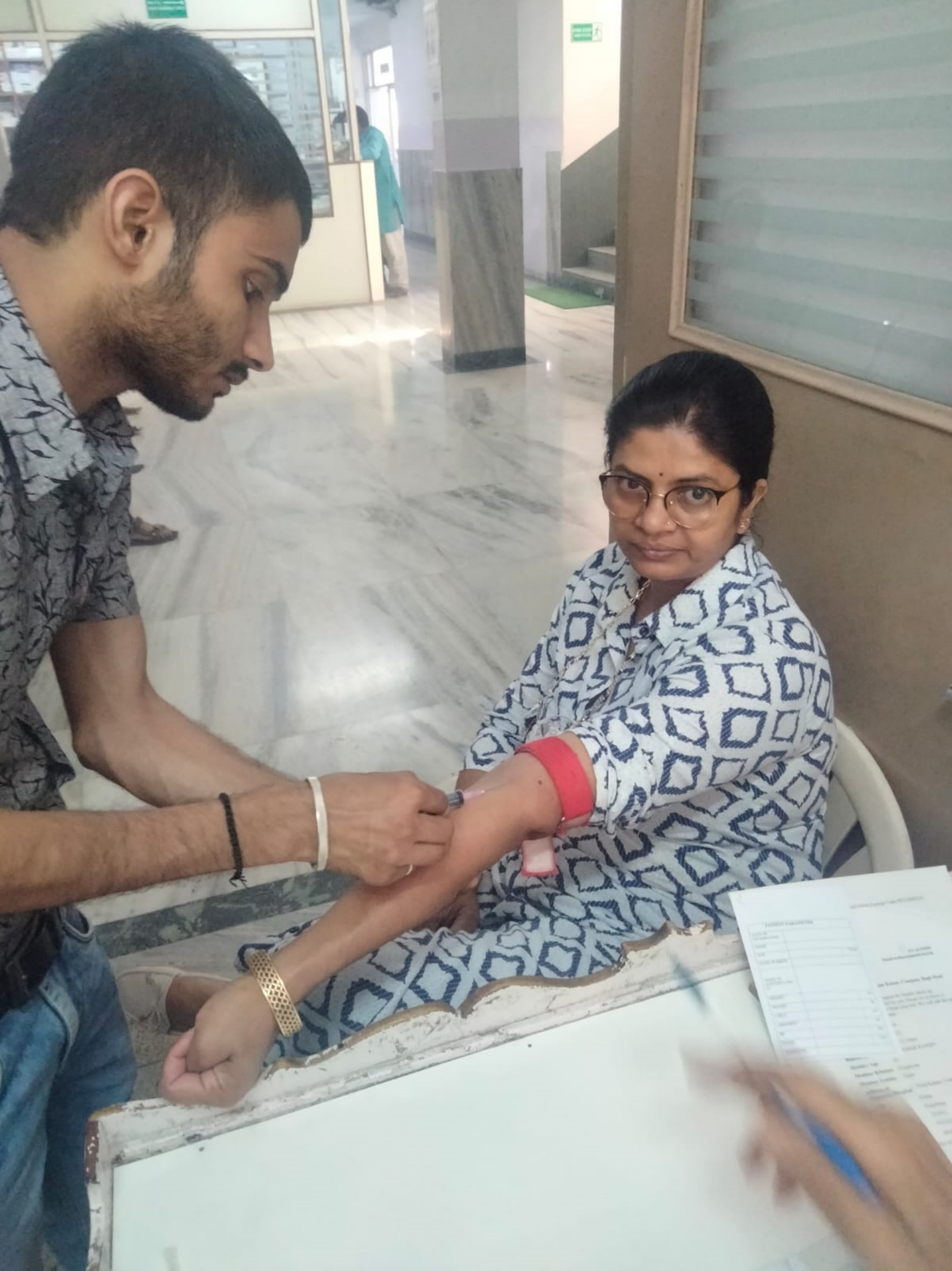
Right Atrium : Normal
Right Ventricle : Normal
Aorta : 2.4cm: Normal
Pulmonary Artery : Normal
Pulmonary Veins : Normal
Superior Venacava : Normal
Inferior Venacava : Normal
Pericardium : Normal
Intracardiac Masses : No Intracardiac masses seen
IAS/IVS : Intact

Doppler Findings:

Valve	Peak Velocity (cm/s)	Peak Gradient (mmHg)	Mean Gradient (mmHg)	Regurgitation Grade	others/comments
Mitral Valve	E-/A-77/56			No MR	
Aortic Valve	130				
Tricuspid Valve				No TR, No PAH.	
Pulmonary Valve	71				

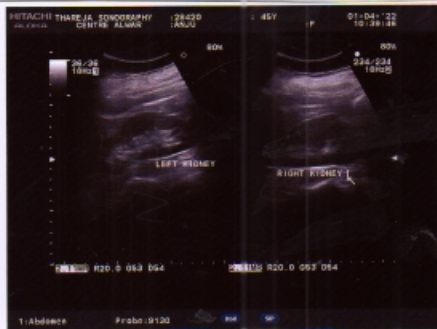
Diagnosis : Transthoracic echo done in supine position at resting heart rate of 66bpm, shows
Normal LV size with normal LV systolic function. LVEF~60% (Visual). No RWMA.
Other cardiac chambers are normal in Size.
No MR, No TR, No PAH.
Normal MIP.
No pericardial effusion /Vegetation /Clot Intracardiac masses seen.
Normal left sided arch of aorta, No Coarctation.


Dr. Prachi Gupta
MBBS, PGCC
Non-invasive cardiologist
Gupta ENT and Heart Centre
Nangli Circle, Alwar



TEST RESULT SHEET

TEST NAME	RESULT
HEMOCHEMISTRY	
GLUCOSE	
UREA	
CREATININE	
ALBUMIN	
BILIRUBIN	
ASPARTATE AMINO TRANSFERASE (ASAT)	
ALANINE AMINO TRANSFERASE (ALAT)	
AMYLASE	
LIPID PROFILE	
TOTAL CHOLESTEROL	
HDL CHOLESTEROL	
LDL CHOLESTEROL	
TRIGLYCERIDES	
HAEMATOLOGY	
HEMOCYTOGRAM	
HEMATOCRIT (%)	
HEMAGLOBIN (g/dl)	
MEAN CORPUSCULAR VOLUME (MCV) (fl)	
RED BLOOD CELL COUNT (RBC) (10 ¹² /L)	
WBC COUNT (10 ⁹ /L)	
DIFFERENTIAL WBC COUNT	
NEUTROPHILS (%)	
LYMPHOCYTES (%)	
MONOCYTES (%)	
PLATELET COUNT (10 ⁹ /L)	



C.B.D. Size 3.5cm
 PANCREAS N
 SPLEEN 8.5 cm
 KIDNEYS Size

Handwritten signature

Dr. Steve Thayer
 MD, PhD



THAREJA SONOGRAPHY CENTRE

1, Ram Kuteer, Company Bagh Road, ALWAR - (0144) 2700184



This report is not valid for MLC Purpose

Ref. No.

Date.....
01/04/2022

Name of Patient : MRS ANJU

Age 45 yrs

Sex F

Ref.By: DR SAVITA THAREJA

Sonography Report – abdomen

LIVER: Size: RL: 14.2 Cm. L. L.: 6.4 Cm.
Margins: Regular I. H. B. R.: ND
Parenchyma: Echo ,

C. B. D. Size: 3.4 mm. LUMEN: Clear
P.V. Size: mm LUMEN: Clear

GALL BLADDER Size 6.0 X 2.9 cm LUMEN: Clear
Wall thickness: N
PANCREAS: N

SPLEEN: 8.8 cm

KIDNEYS: Size:-

Right : 10.4 X 4.6 cm

Left: ^{11.2}12 X 4.8 cm

Pelvicacal System : N
Cortico – Medu. Diff : |

RETROPERITONEUM :]
LYMPH – NODES :] Not seen
PLEURAL EFFUSION : :]
ASCITES : :]

URINARY BLADDER:

Prevoiding Volume : 92 C. C.

Wall Thickness N Lumen: Clear

UTERUS

Size:- 5.2 X 3.8 cm

Shape: N

Position:- AV

Endometrium, : Thin

Endometrial Cavity: N

Myometrium : N

Cervix: size

Canal – N

OVARIESE : size

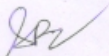
Right :- N

Left: -N

Other :- NIL

Conclusion : - Normal study

Thanks,


Dr. Savita Thareja
Reg. No. 7600
RMC

Enclosed: Photo - 2

PLEASE NOTE: **INTESTINAL PATHOLOGY CAN NOT BE RULE OUT.**

This is only an opinion, not an diagnosis, which should be clinically co-related. No procedure/surgery should be undertaken sim: y on the basis of this opinion because Ultrasound accuracy is only 96%.

* Subject to Alwar jurisdiction. * Not valid for medico-legal purpose.



THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC
LABORATORY EQUIPPED WITH COMPUTERISED AUTO ANALYZER & CBC

1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

Name : **ANJU** age **46** Sex : **FEMALE**

Ref. By : **DR M N THAREJA** Lab No. : Date : **April 1, 2022**

HORMONES & MARKERS

<u>Test</u>	<u>Value</u>	<u>Units</u>	<u>Biological Ref. Values</u>
T3 (Total Triiodothyronine)	1.21	ng/dL	0.60-1.81 ng/dL Adults
T4 (TotalThyroxine)	4.14	µg/dL	3.2-12.60 µg/dL : Adults
TSH (Thyroid Stimulating Hormone)	0.39	µIU/mL	Adults : 0.35-5.50 µIU/mL

Interpretation of TSH :-

Children

0 Days : 1.0-39.0 uIU/mL
5 days : 1.7-9.1 uIU/mL
1 year : 0.4-8.6 uIU/mL
2 years : 0.4-7.6 uIU/mL
3 years : 0.3-6.7 uIU/mL
4-19 years : 0.4-6.2 uIU/mL

Interpretation of TSH :-

Children

3.20 - 34.6 µIU/mL 1- 2 Days
0.70 - 15.4 µIU/mL 3 - 4 Days
0.70 - 9.10 µIU/mL 15 Days - 5 Months
0.70 - 6.40 µIU/mL 5 Months - 20 Years

Adults

20-54 years : 0.35-5.50 uIU/mL
55-87 years : 0.5-8.9 uIU/mL

Pregnancy

1st Trimester : 0.30 - 4.50 µIU/mL
2nd Trimester : 0.50 - 4.60 µIU/mL
3rd Trimester : 0.80 - 5.20 µIU/mL

Pregnancy

0.30 - 4.50 µIU/mL 1st Trimester
0.50 - 4.60 µIU/mL 2nd Trimester
0.80 - 5.20 µIU/mL 3rd Trimester

Method : **Fluorescence Immunoassay Technology**

Sample Type : **Fresh Blood Serum**

Remarks :

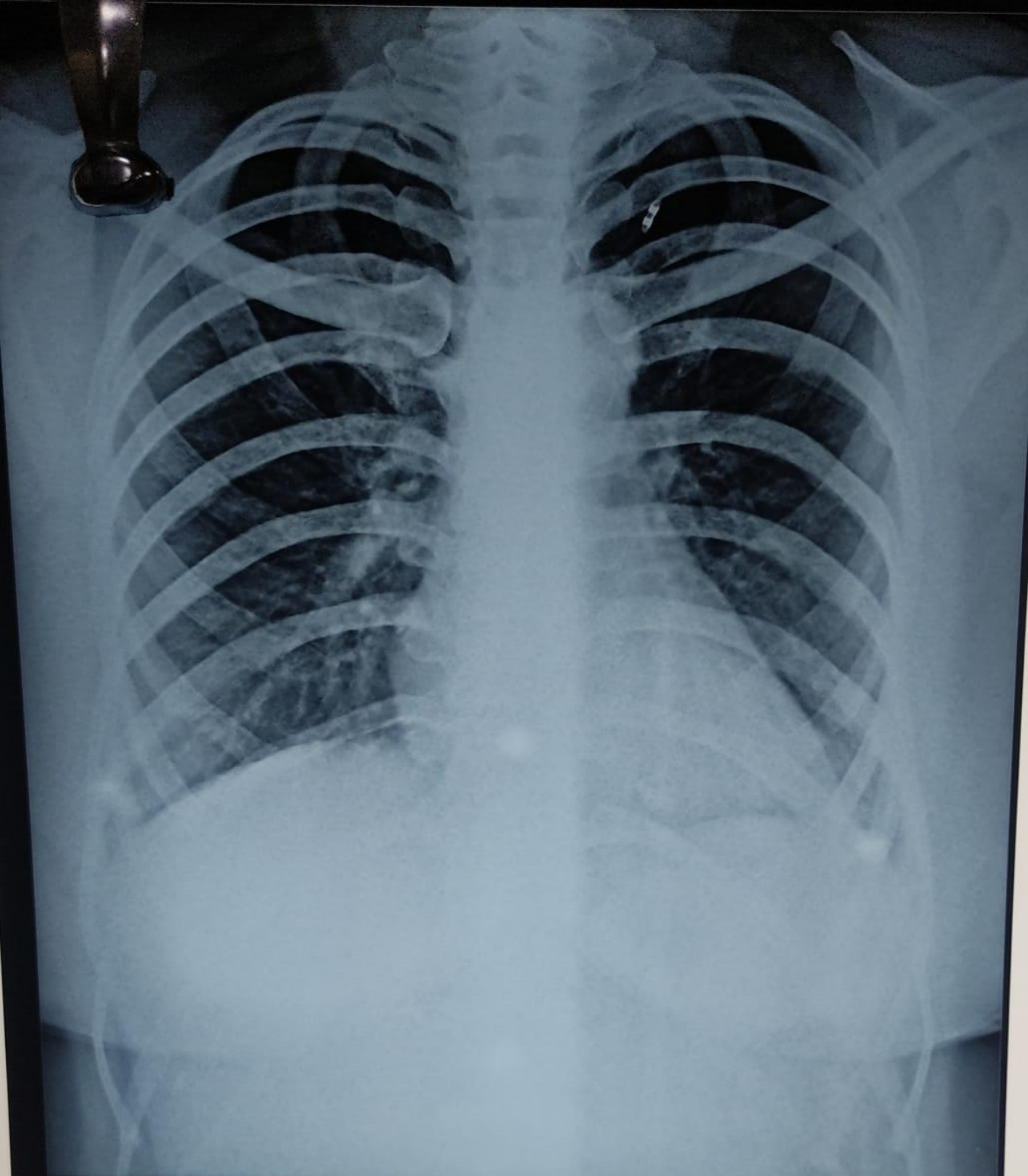
Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

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.

Signature of Technician

Signature of Doctor



ANJU CHOKAN 46 Y BY DR M.N. THAREJA 22....2 F CHEST, PA 4/1/2022
THAREJA NURSING HOME. COMPANY BAGH ROAD, ALWAR



THAREJA NURSING HOME



DIGITAL X-RAY, OPG, COMPUTERISED ECG & EEG, DIAGNOSTIC
LABORATORY EQUIPED WITH COMPUTERISED AUTO ANALYZER & CBC


1, Ram Kuteer, Company Bagh Road, ALWAR - 301001 (Raj.) Ph: 0144-2700184, 2331842

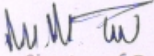
PROPOSAL NO. PKG10000237
Patient Name MRS ANJU CHOKEN
Ref. By Dr. M. N. THAREJA

Date 01/04/2022
Age 58Yrs.
Sex F

PART - X-RAYED : X-RAY CHEST PA VIEW
REPORT : X-RAY CHEST P.A. VIEW
:- Chest is bilaterally symmetrical.
:- C.P. Angles are clear.

CONCLUSION: Normal Study


Signature of Technician


Signature of Doctor