

Health Check up Booking Confirmed Request(bobS6948),Package Code-
PKG10000475, Beneficiary Code-291949

Mediwheel <wellness@mediwheel.in>

Tue 2/13/2024 6:01 PM

To: Tarun Mallara <TARUN.MALLARA@bankofbaroda.com>

Cc: customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

ध्यान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक
CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT

011-41195959

Dear **TARUN MALLARA,**

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 29-01-2024

Hospital Package Name : Mediwheel Full Body Health Checkup Female Below 40

Patient Package Name : Mediwheel Full Body Health Checkup Female Below 40

Name of Diagnostic/Hospital : Aashka Multispeciality Hospital

Address of Diagnostic/Hospital- : Between Sargassan & Reliance Cross Road, Gandhinagar
-0382421

City : Gandhi Nagar

State :

Pincode : 382421

Appointment Date : 24-02-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:30am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
SHALINI BAYA	29 year	Female

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).



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	SHALINI BAYA
DATE OF BIRTH	02-05-1994
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	30-08-2023
BOOKING REFERENCE NO.	23S125827100067868S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. MALLARA TARUN
EMPLOYEE EC NO.	125827
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	SANDHELI
EMPLOYEE BIRTHDATE	23-06-1991

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 **26-08-2023** 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))





संस्था संख्या
Tarun Mallara

संस्था संख्या
125827

संस्था संख्या
125827



Tarun Mallara

संस्था संख्या
125827



Name: Shalini Baga, Age: 29 yrs

Complaints: None, Bartha

No of deliveries: 1/0 Sect
Last Delivery: 1st preg / Preterm

History of abortion: None

H/O medical conditions associated:

Last abortions:

DM
HTN
Thyroid

4 yrs
since 3 yrs

MH: _____ Reg: _____

LMP: 9/10/23

P/A:

P/S: not done
P/V: not done

Pap not taken

Sample:-

Vagina
Cervix

Doctors Sign:-

Shabari



LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type :	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O232410406

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	100.71	mg/dL	70 - 100
Haemogram (CBC)			
Haemoglobin	11.9	G%	12.0 - 15.0
PCV(Calc)	35.07	%	36.00 - 46.00
Neutrophil	75.0	%	40.00 - 70.00
Neut/Lympho Ratio (NLR)	3.75		0.78 - 3.53
Lipid Profile			
Cholesterol	211.99	mg/dL	110 - 200
Triglyceride	227.68	mg/dL	<150
VLDL	45.54	mg/dL	10 - 40
LDL Cholesterol	112.85	mg/dL	0.00 - 100.00
Thyroid Function Test			
Triiodothyronine (T3)	241.06	ng/dL	70 - 204
Thyroxine (T4)	12.59	ng/dL	4.87 - 11.72
ESR	66	mm after 1hr	3 - 20

Abnormal Result(s) Summary End

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : **SHALINI BAYA** Sex/Age : **Female/ 29 Years** Case ID : **40202200683**
 Ref.By : **HOSPITAL** Dis. At : Pt. ID : **3377763**
 Bill. Loc. : **Aashka hospital** Pt. Loc. :

Reg Date and Time : **24-Feb-2024 09:00** Sample Type : **Whole Blood EDTA** Mobile No :
 Sample Date and Time : **24-Feb-2024 09:00** Sample Coll. By : Ref Id1 : **OSP33347**
 Report Date and Time : **24-Feb-2024 10:49** Acc. Remarks : **Normal** Ref Id2 : **O232410406**

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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HAEMOGRAM REPORT

HB AND INDICES

Haemoglobin	L 11.9	G%	12.0 - 15.0
RBC (Electrical Impedance)	3.91	millions/cumm	3.80 - 4.80
PCV(Calc)	L 35.07	%	36.00 - 46.00
MCV (RBC histogram)	89.7	fL	83.00 - 101.00
MCH (Calc)	30.4	pg	27.00 - 32.00
MCHC (Calc)	33.9	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.40	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

Total WBC Count	8060	/μL	4000.00 - 10000.00		
Neutrophil	H 75.0	%	EXPECTED VALUES 40.00 - 70.00	[Abs] 6045	EXPECTED VALUES /μL 2000.00 - 7000.00
Lymphocyte	20.0	%	20.00 - 40.00	1612	/μL 1000.00 - 3000.00
Eosinophil	2.0	%	1.00 - 6.00	161	/μL 20.00 - 500.00
Monocytes	3.0	%	2.00 - 10.00	242	/μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/μL 0.00 - 100.00

PLATELET COUNT (Optical)

Platelet Count	288000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	H 3.75		0.78 - 3.53

SMEAR STUDY

RBC Morphology : Normocytic Normochromic RBCs.
 WBC Morphology : Neutrophilia
 Platelet : Platelets are adequate in number.
 Parasite : Malarial Parasite not seen on smear.

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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 contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi,
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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 14:40	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR Westergren Method	H 66	mm after 1hr	3 - 20	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh -A-Abnormal)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :

Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 11:44	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group)

ABO Type	O
Rh Type	POSITIVE

Note (LL-Very Low,L-Low,H-High,HH-Very High ,A-Abnormal)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :

Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 12:27	Acc. Remarks : Normal	Ref Id2 : O232410406
TEST	RESULTS	UNIT BIOLOGICAL REF RANGE
		REMARKS

BIOCHEMICAL INVESTIGATIONS

Blood Glucose Level (Fasting & Post Prandial)

Plasma Glucose - F <small>Photometric, Hexokinase</small>	H	100.71	mg/dL	70 - 100
Plasma Glucose - PP		138.23	mg/dL	70.0 - 140.0

Note: Reference range has been changed as per recent guidelines of ISPAD 2018.
 <100 mg/dL : Normal level
 100-126 mg/dL: Impaired fasting glucoseer guidelines
 >=126 mg/dL: Probability of Diabetes, Confirm as per guidelines

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 10:48	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	5.13	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) <small>Calculated</small>	100.53	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
Patients with Homozygous forms of rare variant Hb(CC,55,EE,5C) HbA1c can not be quantitated as there is no HbA.
In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 16:42	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Lipid Profile

Cholesterol <small>Colorimetric, CHOD-POD</small>	H	211.99	mg/dL	110 - 200
HDL Cholesterol		53.6	mg/dL	48 - 77
Triglyceride <small>Glycerol Phosphate Oxidase</small>	H	227.68	mg/dL	<150
VLDL <small>Calculated</small>	H	45.54	mg/dL	10 - 40
Chol/HDL <small>Calculated</small>		3.96		0 - 4.1
LDL Cholesterol <small>Calculated</small>	H	112.85	mg/dL	0.00 - 100.00

NEW ATP III GUIDELINES (MAY 2001). MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpretation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment

Note (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

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M.D. (Pathologist)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 16:42	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

S.G.P.T. <i>UV with PSP</i>	15.03	U/L	14 - 59	
S.G.O.T. <i>UV with PSP</i>	18.72	U/L	15 - 37	
Alkaline Phosphatase <i>Enzymatic, PNPP-AMP</i>	68.94	U/L	46 - 116	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-Carboxy-4-nitroanilide Substrate</i>	13.37	U/L	0 - 38	
Proteins (Total) <i>Colorimetric, Buret</i>	8.30	gm/dL	6.40 - 8.30	
Albumin <i>Bromocresol purple</i>	4.32	gm/dL	3.4 - 5	
Globulin <i>Calculated</i>	3.98	gm/dL	2 - 4.1	
A/G Ratio <i>Calculated</i>	1.1		1.0 - 2.1	
Bilirubin Total <i>Photometry</i>	0.43	mg/dL	0.3 - 1.2	
Bilirubin Conjugated <i>Diazotization reaction</i>	0.14	mg/dL	0 - 0.50	
Bilirubin Unconjugated <i>Calculated</i>	0.29	mg/dL	0 - 0.8	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh A-Abnormal)

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M.D. (Pathologist)

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Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 16:42	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) <small>GLOH</small>	9.3	mg/dL	7.00 - 18.70	
Uric Acid <small>Uricase</small>	2.64	mg/dL	2.6 - 6.2	
Creatinine	0.50	mg/dL	0.50 - 1.50	

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh A-Abnormal)

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Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 11:19	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3)	H 241.06	ng/dL	70 - 204	
Thyroxine (T4) CMA	H 12.59	ng/dL	4.87 - 11.72	
TSH CMA	3.85	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTN and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipient hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a suppressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy

First trimester
Second trimester
Third trimester

Reference range (microIU/ml)

0.24 - 2.00
0.43-2.2
0.8-2.5

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

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Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Serum	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 11:19	Acc. Remarks : Normal	Ref Id2 : O232410406

Interpretation Note:

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & if TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT



Name : SHALINI BAYA	Sex/Age : Female/ 29 Years	Case ID : 40202200683
Ref.By : HOSPITAL	Dis. At :	Pt. ID : 3377763
Bill. Loc. : Aashka hospital		Pt. Loc :
Reg Date and Time : 24-Feb-2024 09:00	Sample Type : Spot Urine	Mobile No :
Sample Date and Time : 24-Feb-2024 09:00	Sample Coll. By :	Ref Id1 : OSP33347
Report Date and Time : 24-Feb-2024 10:58	Acc. Remarks : Normal	Ref Id2 : O232410406

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
------	---------	------	----------------------	---------

URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)

Physical examination

Colour	Pale yellow
Transparency	Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.025	1.005 - 1.030
pH	7.00	5 - 8
Leucocytes (ESTERASE)	Negative	Negative
Protein	Negative	Negative
Glucose	Negative	Negative
Ketone Bodies Urine	Negative	Negative
Urobilinogen	Negative	Negative
Bilirubin	Negative	Negative
Blood	Negative	Negative
Nitrite	Negative	Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	Present +	/HPF	Present(+)
Bacteria	Nil	/µL	Nil
Yeast	Nil	/µL	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh) A-Abnormal)

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M.D. (Pathologist)

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Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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www.neubergsupratech.com

PATIENT NAME:SHALINI BAYA
GENDER/AGE:Female / 29 Years
DOCTOR:DR.HASIT JOSHI
OPDNO:OSP33347

DATE:24/02/24

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 27mm	
LEFT ATRIUM	: 29mm	
LV Dd / Ds	: 40/26mm	EF 60%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/0.7m/s	
AORTIC	: 1.2m/s	
PULMONARY	: 0.9m/s	
COLOUR DOPPLER	: MILD MR/TR	
RVSP	: 28mmHg	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST
DR.HASIT JOSHI (9825012235)



REPORT REPORT REPORT REPORT REPORT

DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL
RATINA)
REG.NO.G-21350

UHID: <i>OSP 33347</i>	Date: <i>24/02/24</i>	Time:
Patient Name: <i>Shelina</i>	Age / Sex: <i>25 / F</i>	Height: <i>159 cm</i>
	Weight: <i>68 kg</i>	
History: <i>Postive chemo.</i>		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: <i>BE - am</i>		
Diagnosis: <i>non -</i>		

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D						
N						

Other Advice:

AKL
S. 055 →

Follow-up:

Consultant's Sign:

Amal

DR. SEJAL J AMIN
B.D.S, M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID: 05P33347	Date: 24/2/24	Time:
Patient Name: Shalini bayer	Age/Sex: 29/F	Height: 154
	Weight: 66.	
Chief Complain: → Routine dental check up		
History:		
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination:		
Extra oral :		
Intra oral - Teeth Present :	→ Dehiscent	* Periapical?!
Teeth Absent :	→ Stain ++	2/
	→ Calculus 1	
Diagnosis:		

