



भारत सरकार

Government of India



रुपाली बाथम  
Rupali Batham  
जन तिथि/DOB: 04/12/1993  
लिंग/ FEMALE



8779 7410 5643

VID: 9169 2223 6051 2300

मेरा आधार, मेरी पहचान



**Patient Name : MS RUPALI BATHAM**



**CMSH23/30289**

Age/Gender : 29 Yrs/Female

Registration Date : 23/12/2023 09:26 AM

Ref. Dr. : Dr. APOLLO CLINIC

Collection Date : 23/12/2023 12:28 PM

Center : INSURANCE

Report Date : 23/12/2023 03:54 PM



## HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
HbA1c Glycosilated Haemoglobin	5.0	%	Non-diabetic: <= 6.0 Pre-diabetic: 6.0-7.0 Diabetic: >= 7.0

Estimated Average Glucose : 97 mg/dL

### Reference Range (Average Blood Sugar):

Excellent control : 90 - 120 mg/dl

Good control : 121 - 150 mg/dl

Average control : 151 - 180 mg/dl

Action suggested : 181 - 210 mg/dl

Panic value : > 211 mg/dl

### Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 \times A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
  - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .

**Dr. Subhash Parmar**  
Consultant Pathologist



# CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755-4272669, 4250134



Patient Name : MS RUPALI BATHAM



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## HAEMATOLOGY REPORT

Test Description	Result	Unit	Biological Reference Ranges
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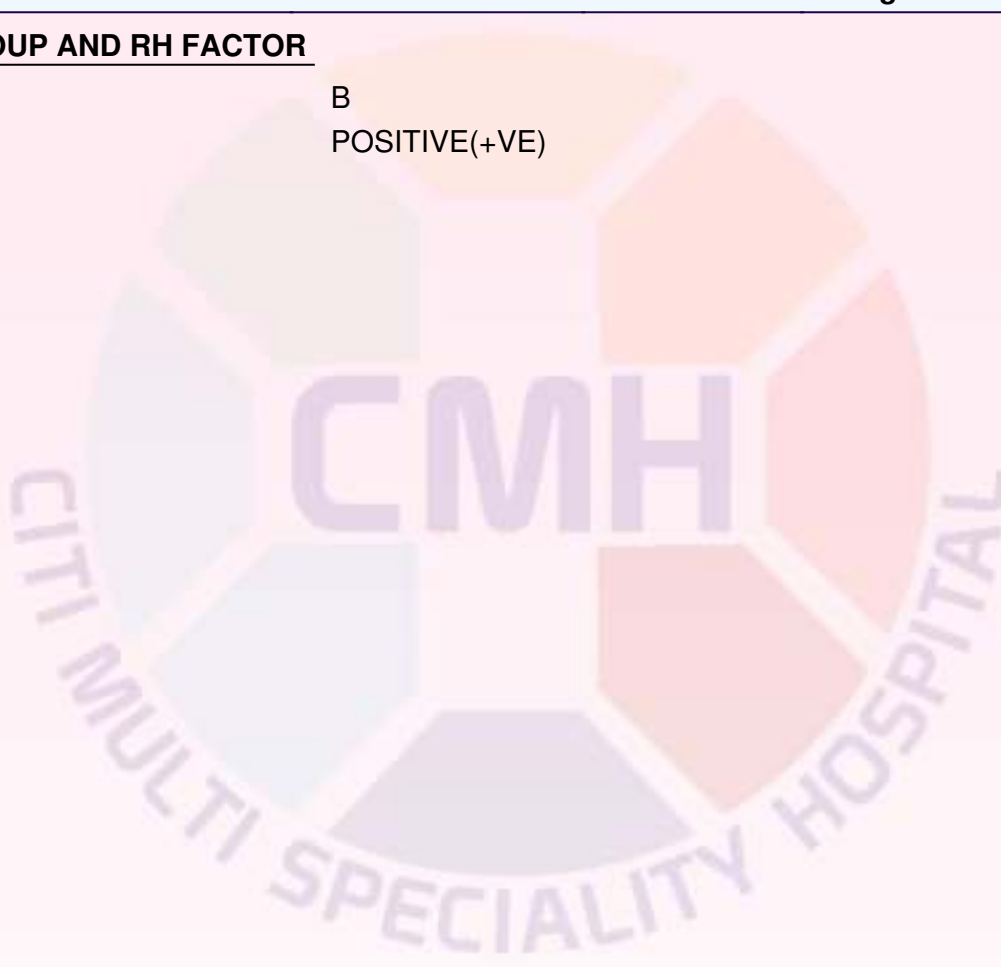
### BLOOD GROUP AND RH FACTOR

ABO Type

B

Rh Factor

POSITIVE(+VE)



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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>RENAL FUNCTION TEST (RFT)</b>			
Blood Urea	19.0	mg/dl	15 - 50
Serum Creatinine	0.69	mg/dl	0.6 - 1.5
eGFR	118	ml/min	
Blood Urea Nitrogen-BUN	8.88	mg/dl	7 - 20
Serum Sodium	141.3	mmol/L	135 - 150
Serum Potassium	4.22	mmol/L	3.5 - 5.0
Ionic Calcium	1.17	mmol/L	1.10 - 1.35
Chloride	97.3	mmol/L	94.0 - 110.0
Uric Acid	4.7	mg/dl	2.6 - 6.0

**NOTE** : Please correlate with clinical conditions.

Dr. Subhash Parmar  
Consultant Pathologist





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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b><u>LIVER FUNCTION TEST (LFT)</u></b>			
TOTAL BILIRUBIN	0.65	mg/dl	0 - 1.2
DIRECT BILIRUBIN	0.14	mg/dL	0 - 0.3
INDIRECT BILIRUBIN	0.51	mg/dl	0.1 - 0.8
SGOT (AST)	19.0	U/L	0 - 35
SGPT (ALT)	17.2	U/L	0 - 45
ALKALINE PHOSPHATASE	84.0	U/L	64 - 147
GAMMA GLUTAMYL TRANSFERASE	21.5	IU/L	12 - 43
TOTAL PROTEIN	7.25	g/dl	6.4 - 8.3
SERUM ALBUMIN	4.15	g/dl	3.2 - 5.2
SERUM GLOBULIN	3.10	g/dl	1.8 - 3.6
A/G RATIO	1.34		1.2 - 2.2

**NOTE :** Please correlate with clinical conditions.

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Consultant Pathologist



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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
<b>LIPID PROFILE</b>			
Cholesterol-Total	152.0	mg/dL	< 200 Desirable 200-239 Borderline High > 240 High
Triglycerides level	84.0	mg/dL	< 150 Normal 150-199 Borderline High 200-499 High > 500 Very High
HDL Cholesterol	43.0	mg/dL	< 40 Major Risk for Heart > 40 Normal
LDL Cholesterol	92.20	mg/dL	< 100 Optimal 100-129 Near/Above Optimal 130-159 Borderline high 160-189 High > 190 Very High
VLDL Cholesterol	16.80	mg/dL	6 - 38
CHOL/HDL RATIO	3.53		3.5 - 5.0
LDL/HDL RATIO	2.14		2.5 - 3.5

### NOTE

8-10 hours fasting sample is required

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## BIOCHEMISTRY REPORT

Test Description	Result	Unit	Biological Reference Ranges
Fasting Blood Sugar	74.0	mg/dl	Normal: 70-110 Impaired Fasting Glucose(IFG): 100-125 Diabetes mellitus: $\geq 126$

Method : Hexokinase

**Note:-** An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons.

The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity,

Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

Post-Prandial Blood Sugar 96.0 mg/dl 70 - 140

After Taking Meal

Method : Hexokinase

### **Interpretation:-**

Normal: 70-140

Impaired Glucose Tolerance:140-200

Diabetes mellitus:  $\geq 200$

(on more than one occassion)

**Dr. Subhash Parmar**  
Consultant Pathologist



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## IMMUNOASSAY REPORT

Test Description	Result	Unit	Biological Reference Ranges
TRI-iodothyronin, (T3)	1.20	ng/mL	0.69 - 2.15
Thyroxin, (T4)	081.0	ng/mL	52 - 127
Thyroid Stimulating Hormone(TSH)- Serum	2.39	μIU/mL	0.3-4.5 Pregnancy (As per American Thyroid Association)

First Trimester : 0.1-2.5  
Second Trimester : 0.2-3.0  
Third trimester : 0.3-3.0

Method : CLIA

### INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radioiodine • Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion"
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

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## URINE EXAMINATION REPORT

Test Description	Result	Unit	Biological Reference Ranges
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### URINE ROUTINE

#### General Examination

Colour	Pale Yellow		Pale Yellow
Transparency (Apperance)	Clear		Clear
Deposit	Absent		Absent
Reaction (pH)	Acidic		5.0-8.5
Specific Gravity	1.020		-1.005-1.030

#### Chemical Examination

Urine Protein	Absent		Absent
Urine Ketones (Acetone)	Absent		Absent
Urine Glucose	Absent		Absent
Bile pigments	Absent		Absent
Bile salts	NIL		NIL
Urobilinogen	Normal		Normal
Nitrite	Negative		Negative

#### Microscopic Examination

RBC's	NIL	/hpf	NIL
Leukocyte (Pus cells)	2-4	/hpf	0-5/hpf
Epithelial Cells	1-2	/hpf	0-4/hpf
Crystals	Absent		Absent
Casts	Not Seen		Not Seen
Amorphous deposits	Absent		Absent
Bacteria	Not seen		Not seen
Yeast Cells	Not seen		Not seen

**Note :** 1. Chemical examination through Dipstick includes test methods as Protein (Protein Error Principle), Glucose (Glucose oxidase-Peroxidase), Ketone (Legals Test), Bilirubin (Azo- Diazo reaction), Urobilinogen (Diazonium ion Reaction) Nitrite (Griess Method). All abnormal results of chemical examination are confirmed by manual methods. 2. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight. 3. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections, Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes,

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Test Description	Result	Unit	Biological Reference Ranges
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## **COMPLETE BLOOD COUNT**

Haemoglobin	12.6	gm/dL	11.0 - 15.0
RBC Count	4.58	mil/cu.mm	3.50 - 5.50
Hematocrit HCT	37.2	%	37.0 - 47.0
Mean Corp Volume MCV	81.2	fL	80.0 - 100.0
Mean Corp Hb MCH	27.5	pg	27.0 - 34.0
Mean Corp Hb Conc MCHC	33.9	gm/dL	32.0 - 36.0
Platelet Count	2.65	lac/cmm	1.50 - 4.50
Total WBC Count /TLC	7.4	10 <sup>3</sup> /cu.mm	4.0 - 11.0

## **DIFFERENTIAL LEUCOCYTE COUNT**

Neutrophils	67	%	40 - 70
Lymphocytes	28	%	20 - 40
Monocytes	03	%	02 - 10
Eosinophils	02	%	01 - 06
Basophils	00	%	00 - 01

## **Absolute Differential Count**

Absolute Neutrophils Count	5.0	thou/mm <sup>3</sup>	2.00 - 7.00
Absolute Lymphocyte Count	2.1	thou/mm <sup>3</sup>	1.00 - 3.00
Absolute Monocytes Count	0.2	thou/mm <sup>3</sup>	0.20 - 1.00
Absolute Eosinophils Count	0.1	thou/mm <sup>3</sup>	0.02 - 0.50

**EDTA Whole Blood** - Tests done on Automated Three Part Cell Counter. (WBC, RBC Platelet count by impedance method, WBC differential by VCS technology other parameters calculated) All Abnormal Haemograms are reviewed confirmed microscopically.

**Dr. Subhash Parmar**  
Consultant Pathologist



# CITI MULTI SPECIALITY HOSPITAL

MIG -215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755-4272889, 4250134



**Patient Name : MS RUPALI BATHAM**

Age/Gender : 29 Yrs/Female

Ref. Dr. : Dr. APOLLO CLINIC

Center : INSURANCE



**CMSH23/30289**

Registration Date : 23/12/2023 09:26 AM

Collection Date : 23/12/2023 12:28 PM

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Test Description	Result	Unit	Biological Reference Ranges
<b>ESR - ERYTHROCYTE SEDIMENTATION RATE</b>	14	mm/hr	0 - 20

Method: Wintrob's

### INTERPRETATION :

1. It indicates presence and intensity of an inflammatory process, never diagnostic of a specific disease. Changes are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

\*\*\*\* End of the report\*\*\*\*

*This report is not valid for medico legal aspects. This is just a professional opinion not the final. Kindly correlate clinically because of technical, lack of clinical information and physical findings, if any disparity noted please inform.*

**Dr. Subhash Parmar**  
Consultant Pathologist

MER- MEDICAL EXAMINATION REPORT

Date of Examination	23-12-2023		
NAME	MISS BAHAM KHALI		
AGE	29	Gender	Female
HEIGHT(cm)	151	WEIGHT (kg)	65.80
B.P.	110/70		
ECG	WNL		
X Ray	NORMAL		
Vision Checkup	Color Vision: No		
	Far Vision Ratio: No		
	Near Vision Ratio: No		
Present Ailments	No Any present ailments		
Details of Past ailments (If Any)	No. Any past ailments		
Comments / Advice : She /He is Physically Fit	She is physically fit.		

Dr. SBYASACHI GUPTA  
 MBBS (Gold Medalist) MD (Med) RCGP (U.K.)  
 Reg. No. 11671

Signature with Stamp of Medical Examiner



# CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of MISS BATHAM RUPALI on 23-12-23

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"><li>• Medically Fit</li></ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"><li>• Fit with restrictions/recommendations</li></ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after.....</p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"><li>• Currently Unfit. Review after..... recommended</li></ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"><li>• Unfit</li></ul>	<input checked="" type="checkbox"/>

**Dr. SBYASACHI GUPTA**  
Dr. **MSBS (Gold Medalist), MD (Med.), RCGP (U.K.)**  
Medical Officer, Reg. No. 11671  
The Apollo Clinic, (Location)

*This certificate is not meant for medico-legal purposes*





# CITI MULTI SPECIALITY HOSPITAL

MID-215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)

Phone No. : 0755-4300134

NAME - MISS. RUPALI BATHAM

Mobile No. : 9822009796, 9303135719

AGE - 29Y/F



REF: BY- DR. S. S. GUPTA

DATE- 23/12/23

## 2D- ECHO COLOUR DOPPLER EVALUATION:-

- ❖ Normal great vessel relationship
- ❖ ALL cardiac valve are normal
- ❖ Normal Four chambered heart
- ❖ Normal LV Size with Normal LV function LVEF- 65%
- ❖ No intracardiac shunt
- ❖ No LV thrombus or clot seen
- ❖ No Pericardium effusion
- ❖ FINAL IMPRESSION
  
- ❖ Normal LV SIZE with Normal LV function LVEF- 65%

Dr. SARYA S. S. GUPTA  
DR. S. S. GUPTA (M.D.)

MBBS (Gen. Med.) MD (Gen. Med.) DCCP (U.K.)

Reg. No. 11671

CONSULTANT ECHOCARDIOLOGIST

**Empanelled with :** State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat

**CITI MULTI SPECIALITY HOSPITAL**  
**MIG-215-216 GAUTAM NAGAR GOVINDPURA, BHOPAL**  
**MOB-7987913713**

Name: MISS. RUPALI BATHAM 29  
Birthdate: 01/01/1994  
Perf. Physician:

Patient Id: 231223-135054  
Sex: Female  
Ref. Physician:

Date: 23/12/2023  
Accession #:  
Operator: ADM

**M-MODE & PW**

D-E Excursion	1.34 cm
E-F Slope	0.08 m/s
EPSS	0.59 cm
Ao Diam	2.89 cm
LA Diam	2.19 cm
AV Cusp	1.50 cm
LA/Ao	0.76
Ao/LA	1.32
RVIDd	2.30 cm
IVSd	1.02 cm
LVIDd	3.37 cm
LVPWd	0.96 cm
IVSs	1.12 cm
LVIDs	2.19 cm
LVPWs	1.02 cm
EDV(Teich)	46.47 ml
ESV(Teich)	16.09 ml
EF(Teich)	65.37 %
%FS	34.92 %
SV(Teich)	30.38 ml
Time	783.92 ms
HR	77 BPM
CO(Teich)	0.00 l/min

Print Date: 12/23/2







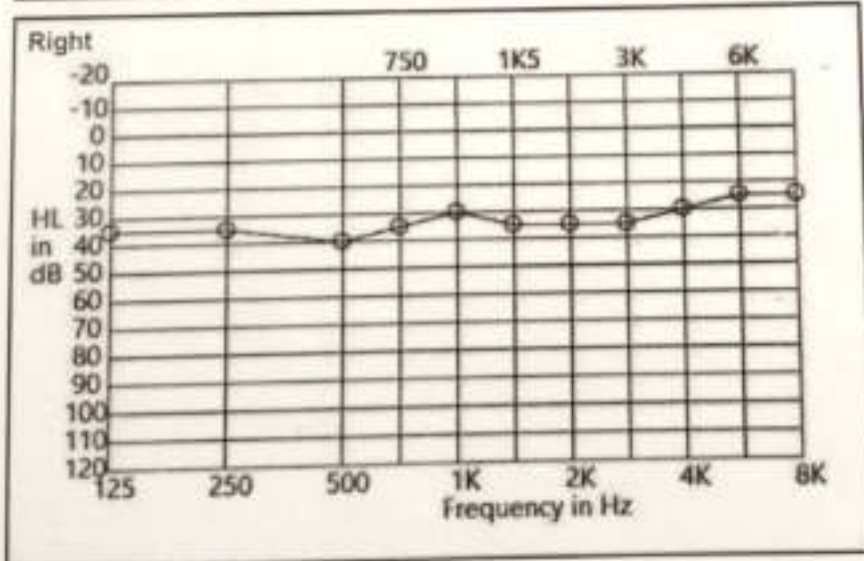
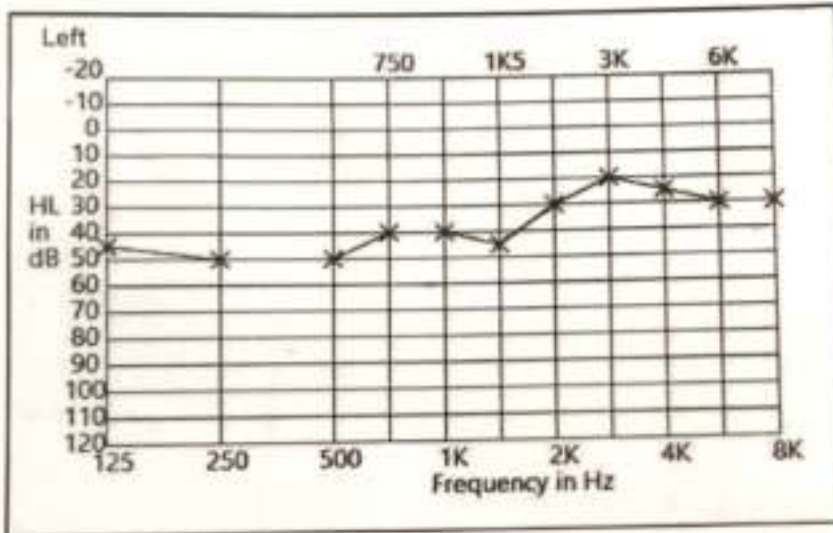
# CITI MULTISPECIALITY HOSPITAL

MIG 216, Gautam Nagar

BHOPAL

462023

Name	Case No.	Age	Sex	Phone No.
MISS. RUPALI BATHAM	23/12/	29	Female	9754664972
Address	Referred By	Date & Time		
LIG 60 M SECTOR AYODHYA NAGAR BHOPAL	MEDDY WHEEL	23/12/23		



### Interpretation

NORMAL HEARING STUDY

Doctor/Audiologist **Dr. SABYASACHI GUPTA**  
MBBS (Gold Medalist), MD (Med.), RCGP (U.K.)  
DR. S. S. GUPTA (M.D.) Reg. No. 11671



# CITI MULTI SPECIALITY HOSPITAL

BHG-215 216, Gautam Nagar, Govindpura, Bhopal-462023 (M.P.)  
Phone No. : 0755-4250134  
Mobile No. : 7222909795, 7222909796, 9303135710



23/12/23

RUPALI BATHAM  
29/11/23

o/c  
no. complaint



o/c

VA  
R.E. 2/10/23  
L.E. 2/10/23

- no. complaint in Both-eye.
- no water-discharge in eye.
- clear vision in Both-eye.

Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank  
Food Corporation of India, Ayushman Bharat



# CITI MULTI SPECIALITY HOSPITAL

MID-215 216, Gauram Nagar, Gwalidpura, Bhopal-462023 (M.P.)

Phone No. : 0755-4877723

Mobile No. : 7222909795, 7222909796, 9303135719



Name of Patient : MISS. RUPALI BATHAM  
Age/Sex : 29YEAR/F  
Date : 23/12/23

## USG ABDOMEN

Liver : The liver is normal in size, shape, and normal in echogenecity. No intra hepatic biliary radical dilation seen.

Gall Bladder : Gall bladder Normal in size, shape and echotexture.

Spleen . Normal in size, shape and echotexture.

Kidneys : Both the kidneys are normal in size, shape,axis and position. Cortico medullary differentiation are both kidney fine concretion .

Urinary bladder : Normal size, shape and echotexture.

Uterus & Ovaries: Uterus is Normal in size, shape and echotexture

Pancreas : Normal in size, shape and echotexture.

IVC & ABDOMINAL AORTA:-IVC and abdominal aorta are normal.

Retroperitoneum: No lymphadenopathy seen. No free fluid or ascites seen.

IMPRESSION:

**NORMAL STUDY**

Dr. SAURABH MISHRA

MBBS (M.D. Radiology)

Reg. No. MP-16861

**CONSULTANT RADIOLOGIST**

For Emergency Contact: 7771008660

Sister Concern: Citi Hospital, 115 Zone II MP Nagar, Bhopal 462011, Ph: 0755-487772-73

**Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank Food Corporaton of India, Ayushman Bharat**





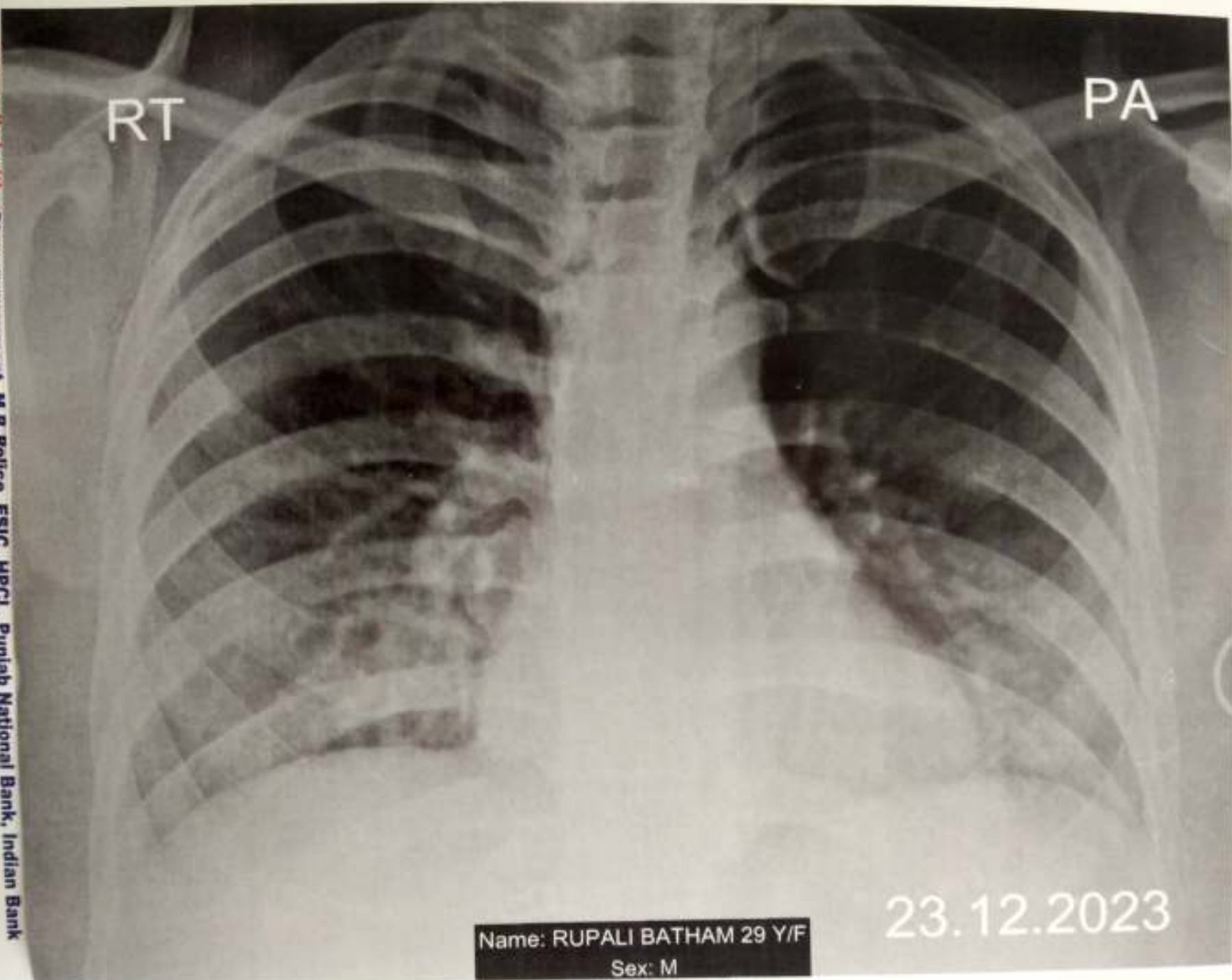




Empanelled with : State Government, M.P. Police, ESIC, HPCL, Punjab National Bank, Indian Bank

RT

PA



Name: RUPALI BATHAM 29 Y/F  
Sex: M

23.12.2023



Patient- Name:	RUPALI BATHAM	Age/Sex:	29 Y/F
Referred By:	INS	Date:	23.12.2023

## X-RAY CHEST PA VIEW

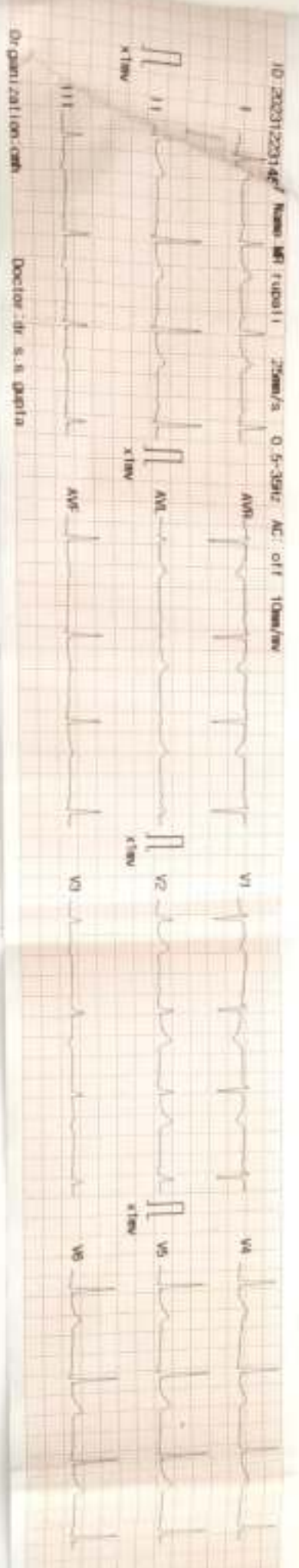
- Bilateral Lungs Fields Appear Clear.
- Bilateral Hilar Shadows Appear Clear.
- Bilateral CP Angels Appear Clear.
- Both The Domes Of Diaphragm Appear normal in shape and position.
- Visualized bony cage and soft tissue appear normal.

## IMPRESSION

No Significant Abnormality.

Dr. SANJAY..  
CONSULTANT RADIOLOGIST

10/20/2011 22:31 467 Name: MR. F. UPODI  
25mm/s 0.5-35mV AC: OFF 10mm/mV  
Dr. Giancarlo, MD  
Doctor: Dr. S. S. Gupta





ID	20231223145407	
Name	Mr. Rupali	001 Sinus Rhythm
Sex	Female	034 Ectopic Premature Contractions
Age	29	174 Maybe Abnormal Rhythm ECG
HR	78	bpm
R-R	742	ms
P-R	180	ms
QRS	85	ms
QT/QTc	417/476	ms
P/QRS/T	32/ 51/ 25	12-23-2023 14:54:27
RV5/SV1	1.172/-0.665	ms
RV5+SV1	0.504	ms
QTcF	0.561	ms

Reference Report Confirmed by: \_\_\_\_\_

**Dr. SARDASACHI GUPTA**  
MBBS (Gen. Med.), MD (Gen. Med.), DCP (G.S.)  
 Reg. No. 11871




DISASTER	MANAGER GUARD MAINTENANCE	ACTIVATE CENTRAL COMMAND CENTRE
GRIEVANCE DISCIPLINARY ACTION	NO ADMINISTRATOR HR MANAGER/HR	CODE PURPLE - ACTIVATE IMMEDIATE
CHILD ABDUCTION	ADMINISTRATOR NURSE OPERATION MANAGER GUARD MAINTENANCE	CODE PINK - ACTIVATE IMMEDIATE
BOMB THREAT	NO ADMINISTRATOR NURSE OPERATION MANAGER GUARD MAINTENANCE	CODE BLACK - ACTIVATE CENTRAL COMMAND CENTRE

4. Get treated Get your hepatitis B vaccines.

5. ID source ... related injuries to your insure appropriate follow-

6. Get follow ... gram effectiveness ... contact occupational health and



 **GPS Map Camera**



**Bhopal, Madhya Pradesh, भारत**

M-216, Janata Quarter Internal Rd, Gautam Nagar, Housing Board Colony, Maharana Pratap Nagar, Bhopal, Madhya Pradesh 462016, भारत

Lat 23.235144°

Long 77.441138°

23/12/23 02:27 PM GMT +05:30