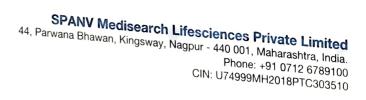
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Dr. Vimmi Goel MBBS, MD (Internal Medicine) Sr. Consultant Non Invasive Cardiology Reg. No: MMC- 2014/01/0113 C·N: 7499913052	KIMS-KINGSWAY HOSPITALS
Name: Nes. Usha Khiyani	Date: 01 11123
Age : Sex : M/F Weight : kg	Height : 58.2 inc BMI : 23.8
BP: 133771 mmHg Pulse: 80 5 Por 977.	bpm RBS:mg/dl Menopause 84



/





# DEPARTMENT OF PATHOLOGY

			V FAIHOLOGY		
Patient Name : Mrs. Us	ha Khiyani		Ann / 0		
Bill No/ UMR No : BIL2324	ill No/ UMR No : BIL2324052129/KH42744		Age /Gender : 59 Y(s)/Female		
	-23 09:16 ar		Referred By : Dr. Vimmi Goel MBBS, Mi		
HAEMOGRAM	20 00.10 a			3 11:37 am	
Parameter Haemoglobin Haematocrit(PCV) RBC Count Mean Cell Volume (MCV) Mean Cell Haemoglobin (MCH) Mean Cell Haemoglobin Concentration (MCHC) RDW Platelet count	<b>Specimen</b> Blood	Results 12.4 38.3 4.26 90 29.1 32.3 14.0 249	<b>Biological Reference</b> 12.0 - 15.0 gm% 36.0 - 46.0 % 3.8 - 4.8 Millions/cumm 83 - 101 fl 27 - 32 pg 31.5 - 35.0 g/l 11.5 - 14.0 %	Method Photometric Calculated Photometric Calculated Calculated Calculated Calculated	
WBC Count DIFFERENTIAL COUNT		4800	150 - 450  10^3/cumm 4000 - 11000  cells/cumm	Impedance Impedance	
Neutrophils Lymphocytes Eosinophils		60.4 33.7	50 - 70 % 20 - 40 %	Flow Cytometry/Ligh microscopy	
Monocytes		1.9	1-6 %	Flow Cytometry/Ligh microscopy	
Basophils		4.0 0.0	2 - 10 %	Flow Cytometry/Ligh microscopy Flow Cytometry/Ligh	
Absolute Neutrophil Count		2899.2	0 - 1  % 2000 - 7000 /cumm	microscopy Flow Cytometry/Ligh microscopy Calculated	

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Calculated





### **DEPARTMENT OF PATHOLOGY**

Patient	Name Mrs. Lick	na Khiyani				
				Age /Gender	:59 Y(s)/Fer	nale
Bill No/	UMR No : BIL2324	052129/KH4	2744	<b>Referred By</b>		
Receive	d Dt : 01-Nov-	23 09:16 an		-		Goel MBBS,MD
1		23 09:10 an	n	Report Date	:01-Nov-23	11:37 am
<u>Parame</u> Absolute	e <b>ter</b> Lymphocyte Count	<u>Specimen</u>	<b>Results</b> 1617.6	Biological	Reference	
	Eosinophil Count			1000 - 4800 /cui		Calculated
	Monocyte Count		91.2	20 - 500 /cumm		Calculated
	Basophil Count		192	200 - 1000 /cum	im	Calculated
			0	0 - 100 /cumm		Calculated
	IERAL SMEAR					Calculated
WBC			As Above			
Platelets			Adequate			
ESR						
			16	0-30 mm/hr		Automated
			*** End Of R			Westergren's Method

Suggested Clinical Correlation \* If neccessary, Please

Verified By : : 11100511

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### DEPARTMENT OF BIOCHEMISTRY

Patient Name	Mrs. Usha Khiyani		Age /Gender : 59 Y(s)	/Female
Bill No/ UMR No	: BIL2324052129/KH4	2744	Referred By :Dr. Vim	
Received Dt	:01-Nov-23 09:15 an	n		-23 11:27 am
<b>Parameter</b> Fasting Plasma Glucos	<b>Specimen</b> e Plasma	<u>Results</u>	<b>Biological Reference</b>	Method
Post Prandial Plasma (		<b>106</b> 112	< 100 mg/dl < 140 mg/dl	GOD/POD,Colorimetric
GLYCOSYLATED	HAEMOGLOBIN (H	IBA1C)		GOD/POD, Colorimetric
HbA1c		5.2	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 %	HPLC
		*** End Of F	Diabetic : >= 6.5 % Report ***	

Suggested Clinical Correlation \* If neccessary, Please Verified By : : 11100245

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# DEPARTMENT OF BIOCHEMISTRY

Patient Name	: Mrs. Usha Khiyani		Ann /Conden Town		
Bill No/ UMR No	: BIL2324052129/KH42744		Age /Gender : 59 Y(s)/F	Female	
Received Dt	:01-Nov-23 09:16 ar		Referred By : Dr. Vimm	ni Goel MBBS,MD	
	.01 1107 25 05.10 8		Report Date :01-Nov-2	23 11:27 am	
LIPID PROFI	LE				
<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>			
Total Cholesterol	Serum	264	< 200 mg/dl	Method	
Triglycerides		112	< 150 mg/di	Enzymatic(CHE/CHO/Pe D) Enzymatic	
HDL Cholesterol Dire	ect	65	> 50 mg/dl	(Lipase/GK/GPO/POD) Phosphotungstic	
LDL Cholesterol Dire	ct	166.34		acid/mgcl-Enzymatic (microslide)	
VLDL Cholesterol		22	< 100 mg/dl	Enzymatic	
Tot Chol/HDL Ratio		4	< 30 mg/dl	Calculated	
Intiate therapeut	C .	-	3 - 5	Calculation	
CHD OR CHD risk e			Consider Drug therapy	LDC-C	
Multiple major risk 10 yrs CHD risk>20	factors conferring %	>100	>130, optional at 100-129	<100	
Two or more additio	onal major risk	>130			
factors,10 yrs CHD	risk <20%	- 150	10 yrs risk 10-20 % >130	<130	
No additional major	risk or one	>160	10 yrs risk <10% >160		
additional major risl		- 100	>190,optional at 160-189		

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please Verified By : : 11100184

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#### **DEPARTMENT OF BIOCHEMISTRY**

Patient Hutte	: Mrs. Usha Khiyani		Age /Gender	:59 Y(s)/Fe	male
Bill No/ UMR No	: BIL2324052129/KH	42744	<b>Referred By</b>	:Dr. Vimmi	Goel MBBS,MD
Received Dt	:01-Nov-23 11:29 a	am	Report Date	:01-Nov-23	11:57 am
Parameter	Specimen	Result Values			
URINE SUGAR					
Urine Glucose		Negative			
THYROID PROP	ILE				
Т3		1.53	0.55 - 1.70 ng/	-	nhanced
Free T4		1.32	0.80 - 1.70 ng/		hemiluminescence Inhanced
TSH		2.16	0.50 - 4.80 uIU		Chemiluminescence
		*** End Of Rep	ort ***		hemiluminescence

Suggested Clinical Correlation \* If neccessary, Please discuss Verified By : : 11100184

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Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510



# DEPARTMENT OF BIOCHEMISTRY

			Age /Gender :59 Y(s)/	Female
Nama	: Mrs. Usha Khiyani			
Patient Name	: BIL2324052129/KH42744		Referred By : Dr. Vimmi Goel MBBS, MD	
Rill NO/ UMR NO			Report Date :01-Nov-	23 11:27 am
Received Dt	:01-Nov-23 09:16 am			
Parameter	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
RFT	Serum	28	15.0 - 36.0 mg/dl	Urease with indicator dye
Blood Urea Creatinine		0.69	0.52 - 1.04 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR		99.9		Calculation by CKD-EP 2021
Sodium		141	136 - 145 mmol/L	Direct ion selective electrode
Potassium		5.22	3.5 - 5.1 mmol/L	Direct ion selective electrode
LIVER FUNCTI	ON TEST(LFT)			
Total Bilirubin		0.60	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin		0.11	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin		0.49	0.1 - 1.1 mg/dl	Duel wavelength spectrophotometric
Alkaline Phosphatas	se	83	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT		21	13 - 45 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST		27	13 - 35 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein		7.77	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum		4.51	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin A/G Ratio		3.26	2.0 - 4.0 gm/dl	Calculated
AYO KALIO		1.38		

\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If neccessary, Please Verified By : : 11100184

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### **DEPARTMENT OF PATHOLOGY**

Patient Name	: Mrs. Usha Khiyani	Age /Gender	: 59 Y(s)/Female	
Bill No/ UMR No	:BIL2324052129/KH42744	<b>Referred By</b>	Dr. Vimmi Goel MBBS,MD	
Received Dt			:01-Nov-23 11:57 am	

#### URINE MICROSCOPY

۲	Parameter PHYSICAL EXAMINATION	<u>Specimen</u>	<u>Results</u>		Method
	Volume	Urine	30 ml		
	Colour.		Pale yellow		
	Appearance		Clear		
	CHEMICAL EXAMINATION	4			
	Reaction (pH) Specific gravity		5.0 1.010	4.6 - 8.0	Indicators
	Urine Protein			1.005 - 1.025	ion concentration
	Sugar Bilirubin		Negative Negative		protein error of pH indicator GOD/POD
	Ketone Bodies		Negative Negative		Diazonium
	Nitrate Urobilinogen		Negative		Legal's est Principle
(F	MICROSCOPIC EXAMINA Epithelial Cells	TION	Horman		Ehrlich's Reaction
T	R.B.C.		0-1 Absent	0 - 4 /hpf	Manual
	Pus Cells Casts		0-1 Absent	0 - 4 /hpf 0 - 4 /hpf	

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#### DEPARTMENT OF PATHOLOGY

Patient Name	: Mrs. Usha Khiyani	Age /Gender	: 59 Y(s)/Female
gill No/ UMR No	: Bil2324052129/KH4274	64 Referred By	: Dr. Vimmi Goel MBBS,MD
Received Dt	:01-Nov-23 10:00 am	Report Date	:01-Nov-23 11:57 am
Parameter	Specimen	Results	Method
Crystais	Ac	(bent	
		** End Of Report ***	

Suggested Clinical Correlation \* (\* neccessory, Please discuss Verified By - : 11100375

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DH. GAURI HARDAS, HBRS, HD CONSULTANT PATHOLOGIST

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## DEPARTMENT OF IMMUNO HAEMATOLOGY

: Mrs. Usha Khiyani Patient Name Bill No/ UMR No : BIL2324052129/KH42744 :01-Nov-23 09:16 am **Received Dt** 

Age /Gender : 59 Y(s)/Female Referred By : Dr. Vimmi Goel MBBS, MD :01-Nov-23 12:19 pm **Report Date** 

## **BLOOD GROUPING AND RH**

hrag

Parameter <b>e</b>	<u>Specimen</u>	Results
BLOOD GROUP.	EDTA Whole Blood & Plasma/ Serum	" O "
Rh (D) Typing.		" Positive "(+Ve) *** End Of Report ***

---I+-

Gel Card Method

Suggested Clinical Correlation \* If neccessary, Please discuss

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#### DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE

NAME	Usha Khiyani	STUDY DATE	01-11-2023 10:42:19
AGE/ SEX	59Y7M19D / F	HOSPITAL NO.	KH42744
ACCESSION NO.	BIL2324052129-9	MODALITY	DX
REPORTED ON	01-11-2023 12:34	REFERRED BY	Dr. Vimmi Goel

#### X-RAY CHEST PA VIEW

Both the lung fields are clear.

Heart and Aorta are normal

Resh hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal

#### **IMPRESSION:** No pleuro-parenchymal abnormality seen.

R KHANDELWAL.

SENIOR CONSULTANT

MD, RADIODIAGNOSIS [MMC-55870]

N.B : This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations.

N.B.: This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical minitagions. Hence, correlation with clinical findings and other investigations should be carried out to know true of the subject to variations due to technical minitagions. 44, Parwana Bhawan, Kingsway, Nagpur - 440 001, Maharashtra, India. Phone: +91 0712 6789100 CIN: U74999MH2018PTC303510

NAME OF PATIENT:	MRS. USHA KHIYANI	AGE & SEX:	59Y/F	
UMR NO	KH2744	BILL NO:	2324052129	
REF BY:	DR. VIMMI GOEL	DATE:	01/11/2023	

KIMS-KINGSWAY

#### USG ABDOMEN AND PELVIS

LIVER is normal in size (13.9 cm) and echotexture. No evidence of any focal lesion seen. Intrahepatic billiary radicals are not dilated. PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it. Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

SPLEEN is normal in size (7.9 cm), shape and echotexture. No focal lesion seen.

Right kidney measures 10.6 x 3.8 cm. Left kidney measures 10.3 x 3.9 cm. Both KIDNEYS are normal in shape, size and echotexture. No evidence of calculus or hydronephrosis seen. URETERS are not dilated.

URINARY BLADDER is well distended. No calculus or mass lesion seen.

Uterus appears atrophic with normal echotexture. No focal lesion. Bilateral ovaries could not be visualized – likely atrophic: consistent with post -menopausal status. No adnexal mass lesion seen.

There is no free fluid or abdominal lymphadenopathy seen.

# IMPRESSION: USG reveals,

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No significant visceral abnormality.

DR. POOTA CHANDAK MBBS, DMRD, FMF (UK) Consultant Radiologist & Fetal Medicine Specialist MMC 2016030471



							Page 1 / 1		
Kingsway <b>Ho</b>	enitale				S	tation			
					Т	elephone:			
Kingsway,	Mohan Nagar,		en starte se			ciepitone.			
Near Kasturel	hand Park, Nagpur								
		EX	ERCIS	SE STI	RESS T	EST RE	EPORT		
	Mar Haba Khin				DOB: 14.0	13 1964			
	: Mrs. Usha , Khiy	ani			Age: 59yr				
Patient ID: 42	27441	1	di shi di di	- 1 2 m - 10					
Height:					Gender: Female Race: Indian				
Weight:							Madiubaal HCII		
Study Date: 0					Referring	Physician:	: Mediwheel HCU		
Test Type: Treadmill Stress Test						: Dr. Vimmi Goel			
Protocol: BR	UCE	14 1 1 1	1.11.11		Technicia	n:			
Medications	•								
-									
Medical Hist HTN	tory:								
	· Exercise Test								
Neason IVI	CAD	•							
Screening f	or CAD								
	est Summary:								
se Name	Stage Name	Time	Speed	Grade	HR	BP	Comment		
		in Stage	(mph)	(%)	(bpm)	(mmHg)			
		00:00	0.00	0.00	75	120/80			
RETEST	SUPINE	00:03	0.00	0.00	75				
	WARM-UP	00:19	0.70	0.00	77				
XERCISE	STAGE 1	03:00	1.70	10.00	101	120/80			
	STAGE 2	03:00	2.50	12.00	120	140/80			
	OT LOP 1		3.40	14.00	150	1.70.00			
FOOVERY	STAGE 3		0.00	0 00					
ECOVERY	STAGE 3	01:00	0.00	0.00	110	170/90			
RECOVERY	STAGE 3		0.00 0.00 0.00	0.00 0.00 0.00	110 71 72	160/90			

The patient exercised according to the BRUCE for 7:51 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 75 bpm rose to a maximal heart rate of 150 bpm. This value represents 93 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 170/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

#### Interpretation:

ARROW

Summary: Resting ECG: normal. Protional Capacity: normal. Ark Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

#### Conclusions:

TMT is negative for inducible ischemia.

GO VIIVIMI Sr. Consultant-Non Invasive Cardiolog MBBS, MD Reg.No. 2014/01/0113

