



Chavada Dayalal11 <chavadadayalal11@gmail.com>

Fwd: Health Check up Booking Request(bobE31900), Beneficiary Code-27344

3 messages

Chetan Dadhaniya <cpdadhaniya@gmail.com>
To: chavadadayalal11@gmail.com, sindhavaradhika@gmail.com

Sat, Mar 4, 2023 at 2:54 PM

----- Forwarded message -----

From: Mediwheel <wellness@mediwheel.in>
Date: Sat, Mar 4, 2023, 2:53 PM
Subject: Health Check up Booking Request(bobE31900), Beneficiary Code-27344
To: <cpdadhaniya@gmail.com>
Cc: <mediwheelwellness@gmail.com>



Mediwheel
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear Panchmukhi Hospital,

City : Rajkot . Address : Poonam Society, Mavdi , Chokadi ,150 Ring Road, Oppo. BRT Bus Stand - 360005,

We have received the confirmation for the following booking .

Name : MS. PADIYA DIMPLE VINODBHAI
 Age : 31
 Gender : Female
 Package Name : Medi-Wheel Full Body Health Checkup Female Below 40/Pap Smear
 User Location : DHORAJI,DHORAJI,Gujarat,360410
 Contact Details : 96389 87588
 Booking Date : 04-03-2023
 Appointment Date : 11-03-2023

Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
MS. PADIYA DIMPLE VINODBHAI	31	Female	Cashless
Total amount to be paid			Cashless

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name : Medi-Wheel Full Body Health Checkup Female Below 40/Pap Smear - Includes (37)Tests

Tests included in this Package : Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio,

1 of 2

C. P. DADHANIYA
 M.B.B.S., D.P.M.
 M.D., Diabetologist
 Regd. No. 412708
 PANCHMUKHI HOSPITAL
 MAVADI CHOKADI,
 150' RING ROAD, RAJKOT.

3/11/2023, 9:13 AM

GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin

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Chavada Dayalal11 <chavadadayalal11@gmail.com>
To: chudasamasanjana69@gmail.com

Fri, Mar 10, 2023 at 12:07 PM

[Quoted text hidden]

Chavada Dayalal11 <chavadadayalal11@gmail.com>
Draft To: chudasamasanjana69@gmail.com

Fri, Mar 10, 2023 at 12:12 PM

----- Forwarded message -----

From: Chetan Dadhaniya <cpdadhaniya@gmail.com>
Date: Sat, 4 Mar, 2023, 2:55 PM

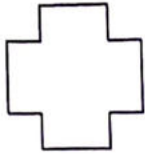
[Quoted text hidden]

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C. P. DADHANIYA
M.B.B.S., D.G.O.
C.T.H., Diabetologist
Regd. No. 619798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT.

Date: 22/03/23



PANCHMUKHI HOSPITAL

Dr CP Dadhaniya

Dr RC Dadhaniya

MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639, 8320711901

policy number :
full name : Padmaja Dimple Vinod Bey
identity proof : adhar card
identity proof no : 1470
gender : Female / 32yr
height : 150 cm
weight : 75 kg
BP : 110/70
pulse : 74/min
blood sample : YES
fasting mode : YES
non fasting mode : NO

past history : NO DM, HT, Thyroid
LSCs done 23 June 2022

Dental : Healthy
Gynae : Healthy
General : - RS } NAD
 LVS }
 CNU }

C. P. DADHANIYA
M.B.B.S., D.G.O.
C.I.H., Diabetologist
Regd. No. G19798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT.

NAME : Dimple . v. Padiya
AGE/GENDER: female / 32

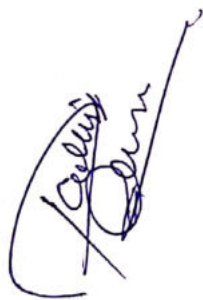
DIAG. DATE: 11/03/23

PATIENT'S REFRACTION DETAILS

		<u>SPHE</u>	<u>CYL</u>	<u>AXIS</u>	<u>VN</u>
<u>R</u>	<u>D</u>	N	N	N	6/6
	<u>N</u>	N			6/6
<u>L</u>	<u>D</u>	N	N	N	6/6
	<u>N</u>	N			6/6

REMARKS :

CHECKED BY : D.P. C.P. Dadhaniya



C. P. DADHANIYA
M.B.B.S., D.G.O.
C.I.H., Diabetologist
Regd. No. 619798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT.



LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. PADIYA DIMPLE VINODBHAI
EC NO.	115868
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	RAJKOT, PARA BAZAR
BIRTHDATE	13-01-1990
PROPOSED DATE OF HEALTH CHECKUP	11-03-2023
BOOKING REFERENCE NO.	22M115868100046338E

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 **04-03-2023** till **31-03-2023** 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 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/-


C. P. DADHANIYA
M.B.B.S., D.G.O.
C.I.H., Diabetologist
Regd. No. G19798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT.



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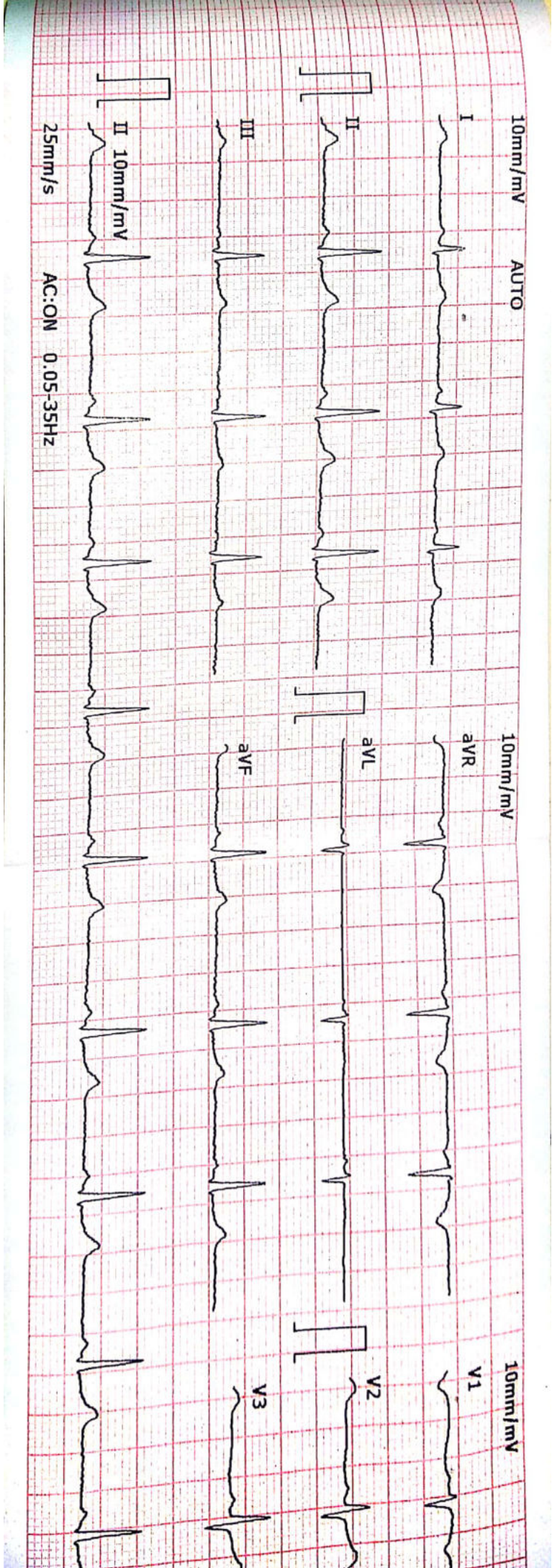
This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **04-03-2023** till **31-03-2023** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee 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.

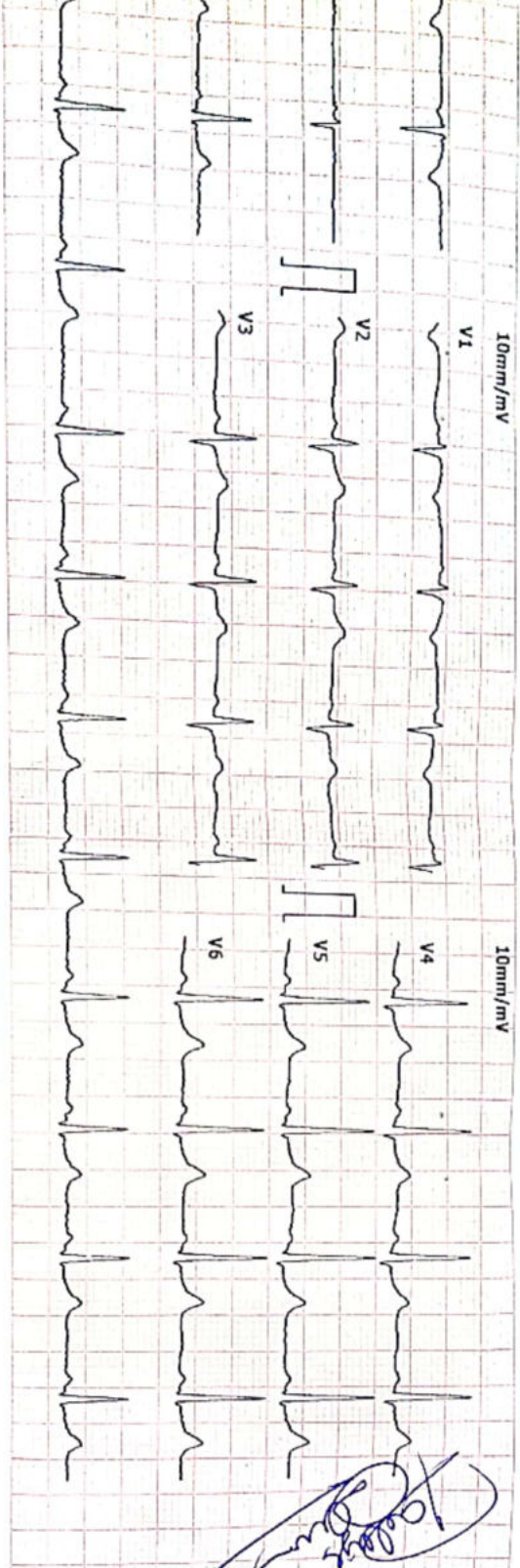
We solicit your co-operation in this regard.

Yours faithfully,

Sd/-


C. P. DAUHANIYA
M.B.B.S., D.G.O.
C.I.H., Diabetologist
Regd. No. G19798
PANCHMUKHI HOSPITAL
MAVADI CHOKADI,
150' RING ROAD, RAJKOT





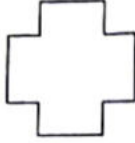
2023-3-11 10:05:57

ID: 00002688

ID Card:
 Name: Dimpa Padiny
 Age: 32 Height(cm): Female
 Weight(kg): 52 BP(mmHg): 1

HR: 70 bpm
 P-R: 185 ms
 Q-R-S: C.P. DADHANIA ms 83
 QT/QTc: M.B.B.S., D.G.O. ms 360/386

P/QRS/T: EE. H. Diabetologist deg 60/70/56
 RV5/Bagd: No. 619798 mV 1.16/0.35
 RANJHIMUKHI HOSPITAL
 MAYADI CHOKADI
 150' RING ROAD, RAJKOT
 *The result is confirmed by doctor!
 Report confirmed by:



PANCHMUKHI HOSPITAL

Dr C P Dadhaniya

Dr R C Dadhaniya
MBBS, Dip.G.O, Diabetologist

150' RING ROAD, MAVDI CHOKDI, SANESHWAR ARCADE, RAJKOT Mo.9925333639, 8320711901

Tread Mill Test

Patient Name	:	Dimple Padiya	Age	:	32yrs/F
OPD/IPD	:	OPD	ID. No.	:	
Ref. By	:	Dr. C.P Dadhaniya	Resting BP	:	130/80
Report Date	:	11/03/2023	Max. BP	:	160/80

Patient Reaches exercise limit at 7.00 METS.

No signs of ischemia at the exercise level.

Adequate increase of HR & BP.

No significant Arrhythmia.

The stress test was terminated after 6:00 minutes as patient complained of Fatigue.
Patient achieved 96% THR without chest pain.

The recovery was uneventful.

Fair effort tolerance.

Conclusion: - The stress test is NEGATIVE for exercise induced myocardial ischaemia.

Hansalia
DR. MAULIK HANSALIA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

DR. NISHANT SIRODARIYA
M.B.B.S., PG DIPLOMA CLINICAL CARDIOLOGY

PANCHMUKHI HOSPITAL

MAVADI CHOWK, 150 RING ROAD, RAJKOT
 121/DIMPLE PADIYA 32 Yrs/Female 0 Kg/0 Cms

Date: 11-Mar-2023 10:18:16 AM

Ref.By :

Protocol : BRUCE

Objective :

Summary



Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (kmph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine	0:01	0:52	0.0	0.0	1.0	109	130/80	141	-	
Standing	0:01	0:55	0.0	0.0	1.0	104	130/80	135	-	
HV	0:01	0:58	0.0	0.0	1.0	106	130/80	137	-	
ExStart	0:01	1:04	0.0	0.0	1.0	105	130/80	136	-	
Stage 1	3:00	3:01	2.7	10.0	4.6	158	140/80	221	-	
PeakEx	3:00	6:00	4.0	12.0	7.0	180	160/80	288	-	
Recovery	1:00	6:01	0.0	0.0	1.0	134	160/80	214	-	
Recovery	3:00	6:01	0.0	0.0	1.0	107	130/80	139	-	

Medication :

History :

Test End Reason : Test Complete, Fatigue

Findings :

The patient exercised according to BRUCE for 6:0, achieving a work level of Max METS:7. Resting heart rate initially 109 bpm, rose to a max. heart rate of 180 bpm which represents 96% of maximum age predicted heart rate. Resting blood pressure 130/80 mmhg, rose to a maximum blood Pressure of 160/80 mmhg. The exercise stress test was stopped due to Test Complete, Fatigue

Parameters :

- Exercise Time : 6:00 minutes
- Max HR attained : 180 bpm 96% of Max Predictable HR 188
- Max BP : 160/80(mmHg)
- WorkLoad attained : 7 (Fair Effort Tolerance)
- significant ST segment changes noted during exercise or recovery.
- Angina/Arrhythmia/S3/murmur
- Final Impression : Test is negative for inducible ischaemia.

Advice/Comments:

PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 121 / DIMPLE PADIYA
 32 Yrs / Female
 0 Kg / 0 Cm
 Date: 11-Mar-2023 10:18:16 AM

3x4+1 Rhythm Lead

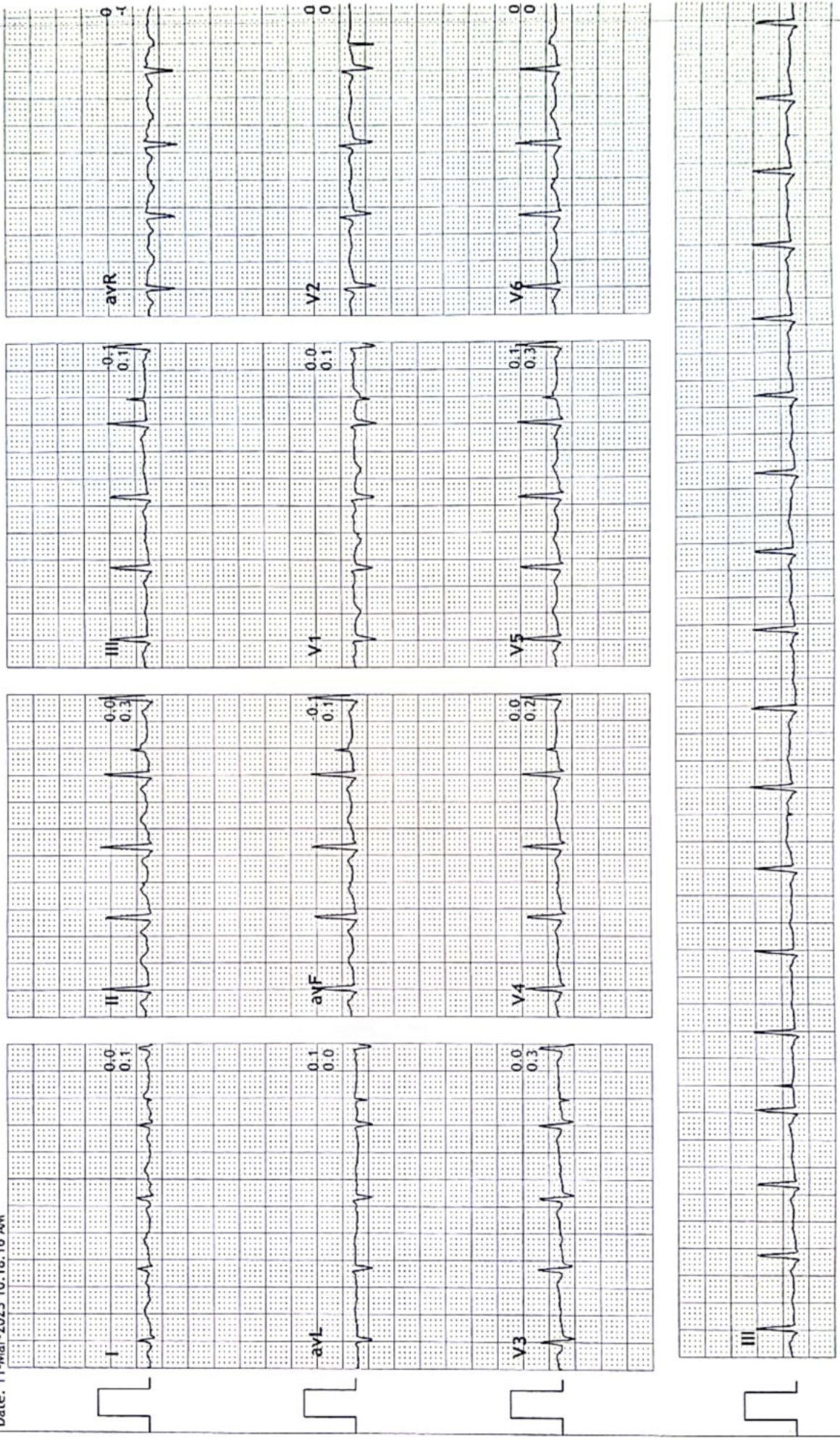
HR: 109 bpm
 METS: 1.0
 BP: 130/80

MPHR: 57% of 188
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:51
 BLC :On
 Notch :On

Supine
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 121 / DIMPLE PADIYA
 32 Yrs / Female
 0 Kg / 0 Cm
 Date: 11-Mar-2023 10:18:16 AM

3x4+1 Rhythm Lead

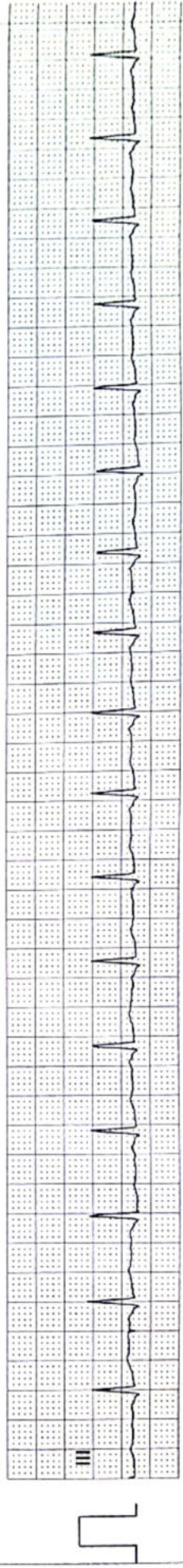
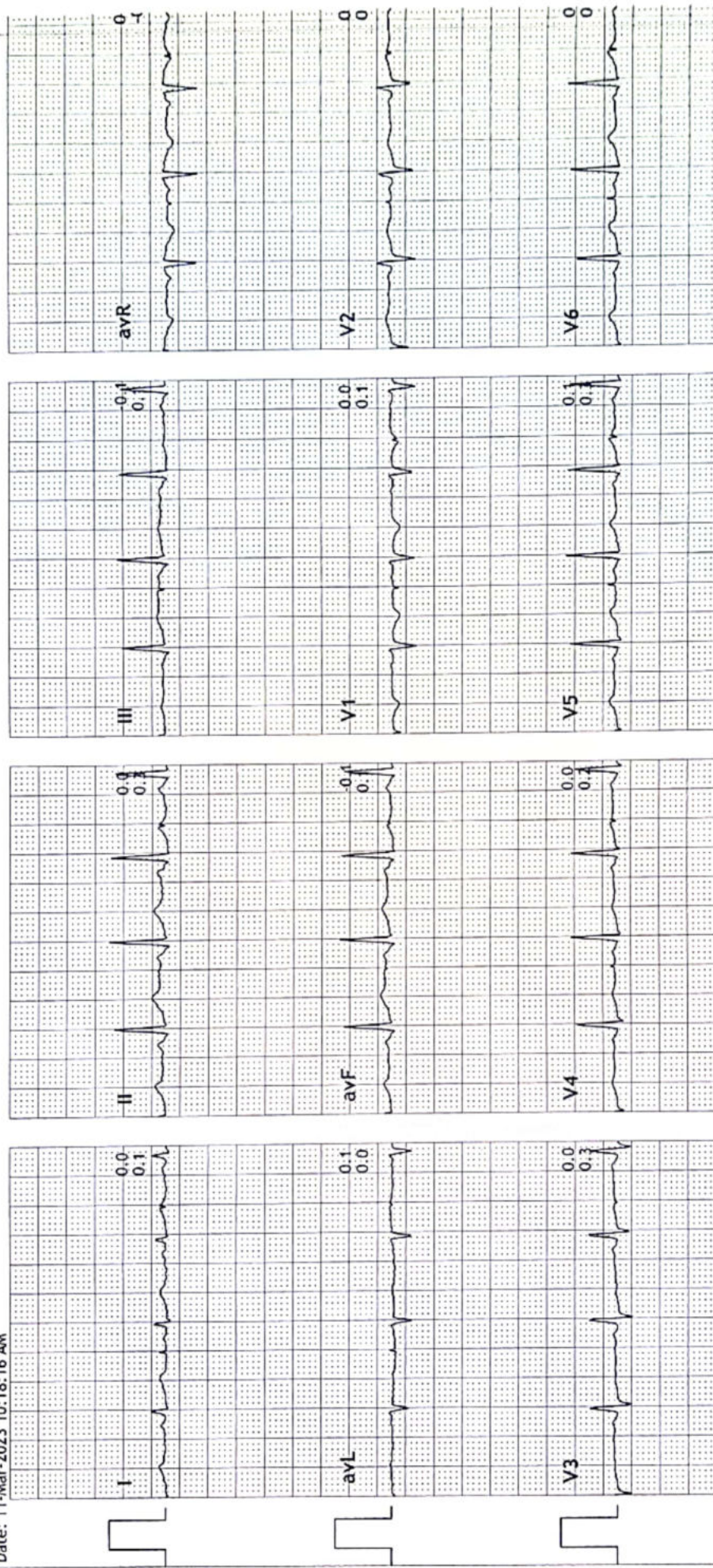
HR: 104 bpm
 METS: 1.0
 BP: 130/80

MPHR: 55% of 188
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:54
 BLC :On
 Notch :On

Standing
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 121 / DIMPLE PADIYA
 32 Yrs / Female
 0 Kg / 0 Cm
 Date: 11-Mar-2023 10:18:16 AM

3x4+1 Rhythm Lead

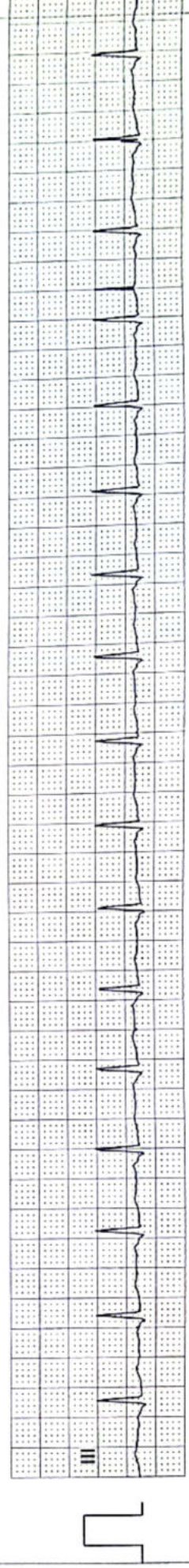
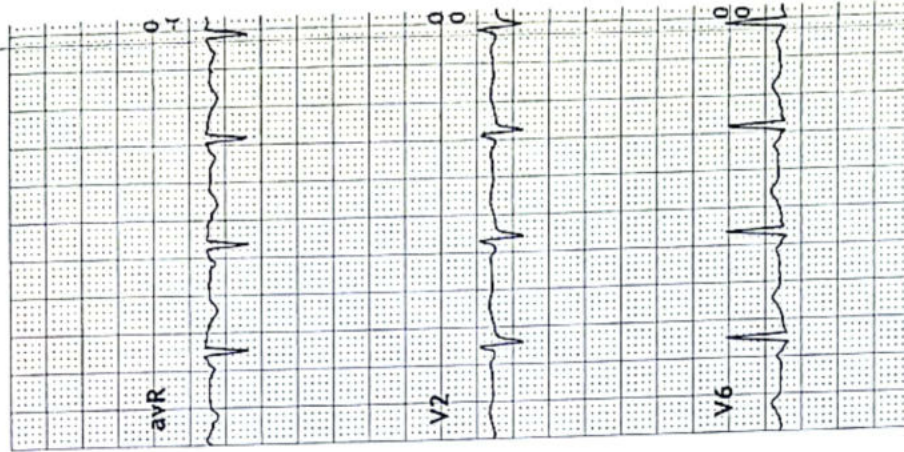
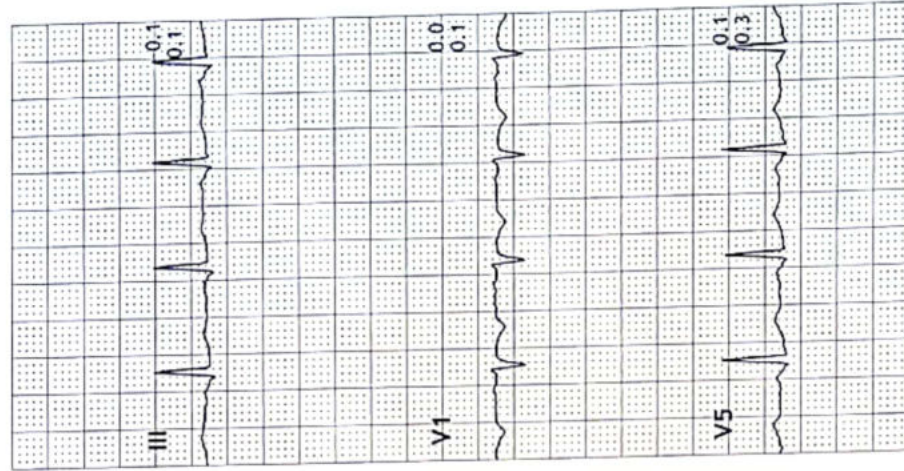
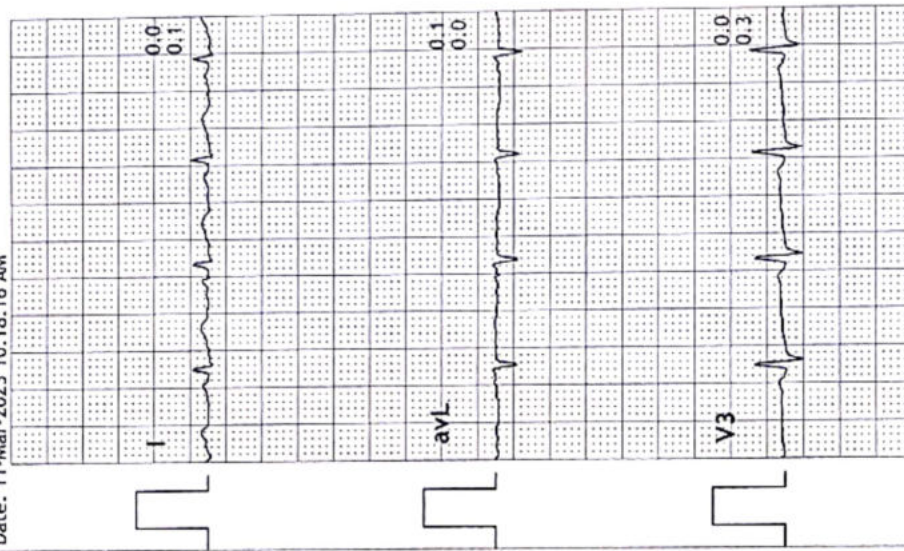
HR: 106 bpm
 METS: 1.0
 BP: 130/80

MPHR: 56% of 188
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)Hz

Ex Time 00:57
 BLC : On
 Notch : On

HV
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 32 Yrs / Female
 0 Kg / 0 Cm
 Date: 11-Mar-2023 10:18:16 AM

3x4+1 Rhythm Lead

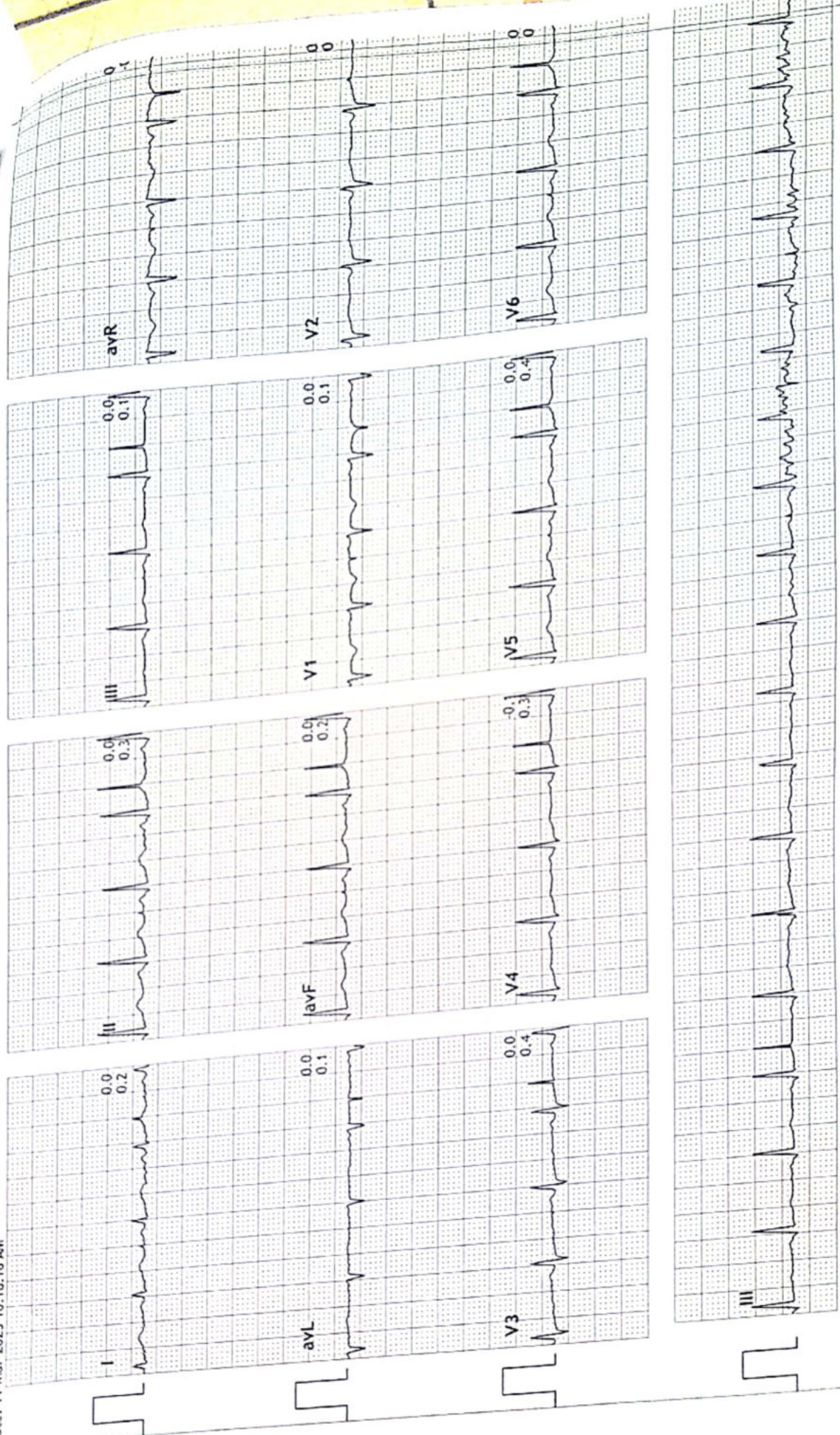
HR: 105 bpm
 METS: 1.0
 BP: 130/80

MPHR: 55% of 188
 Speed: 0.0 kmph
 Grade: 0.0%

Raw ECG
 BRUCE
 (0.05-100)HZ

Ex Time 01:03
 BLC :On
 Notch :On

ExStart
 10.0 mm/mV
 25 mm/Sec.



PANCHMUKHI HOSPITAL

MAVADI CHOWK, 150 RING ROAD, RAJKOT

121 / DIMPLE PADIYA

32 Yrs / Female

0 Kg / 0 Cm

Date: 11-Mar-2023 10:18:16 AM

HR: 158 bpm

METS: 4.6

BP: 140/80

MPHR: 84% of 188

Speed: 2.7 kmph

Grade: 10.0%

Raw ECG

BRUCE

(0.05-100)HZ

Ex Time 03:00

BLC :On

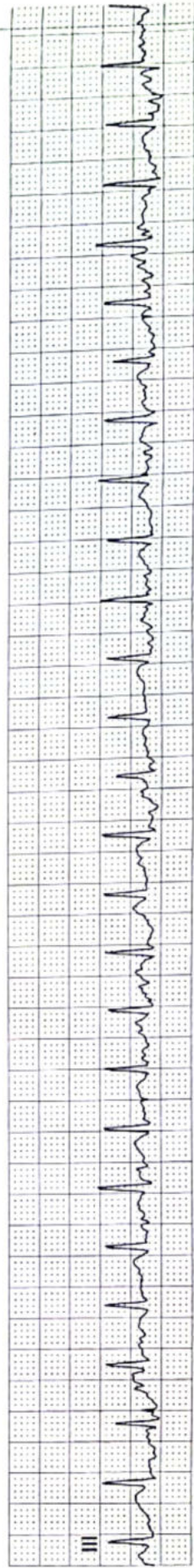
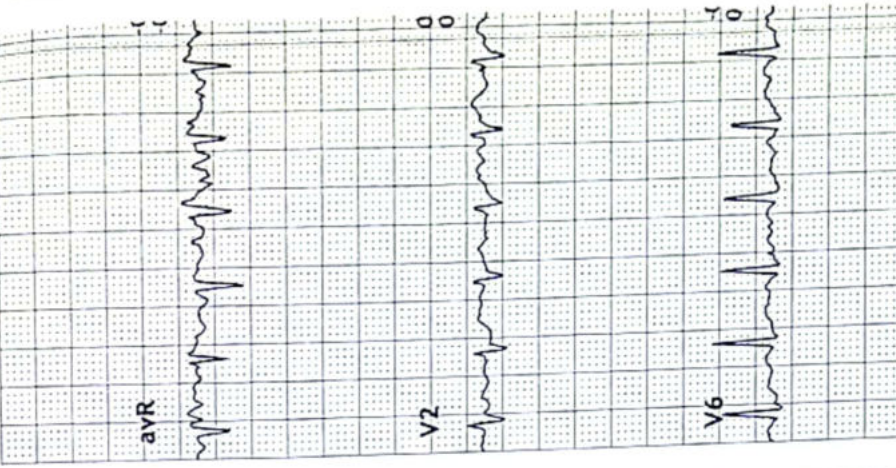
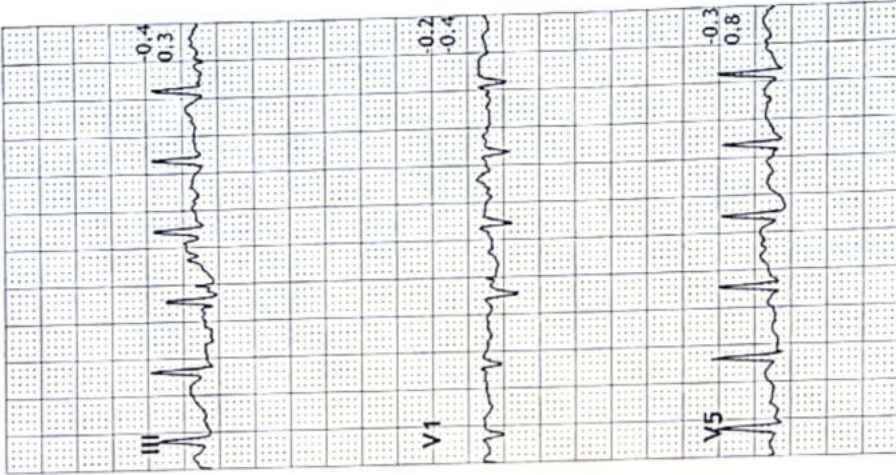
Notch :On

BRUCE:Stage 1

10.0 mm/mV

25 mm/Sec.

3x4+1 Rhythm Lead



PANCHMUKHI HOSPITAL
MAVADI CHOWK, 150 RING ROAD, RAJKOT
 121 / DIMPLE PADIYA
 32 Yrs / Female
 0 Kg / 0 Cm
 Date: 11-Mar-2023 10:18:16 AM

3x4+1 Rhythm Lead

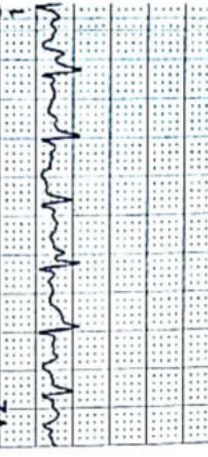
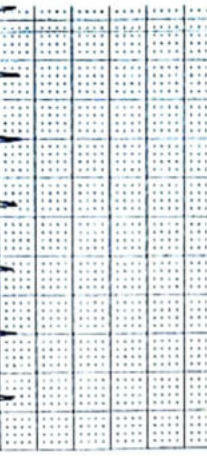
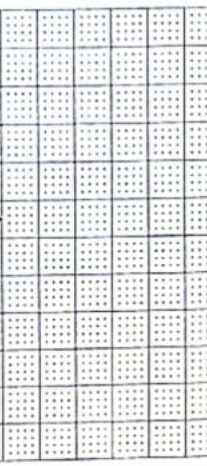
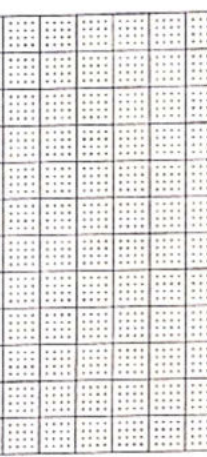
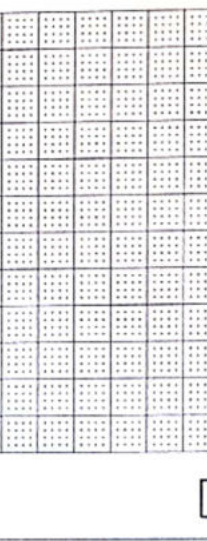
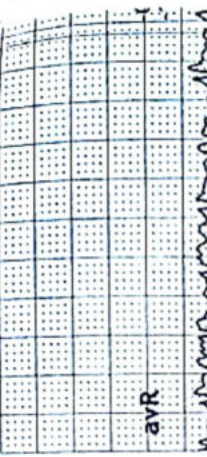
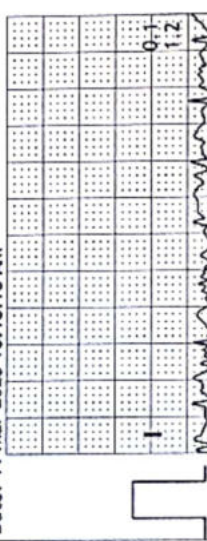
HR: 180 bpm
 METS: 7.0
 BP: 160/80

MPHR: 95% of 188
 Speed: 4.0 kmph
 Grade: 12.0%

Ex Time 05:59
 BLC : On
 Notch : On

BRUCE: PeakEx
 10.0 mm/mV
 25 mm/Sec.

Raw ECG
 BRUCE
 (0.05-100)Hz



PANCHMUKHI HOSPITAL

MAVADI CHOWK, 150 RING ROAD, RAJKOT

121 / DIMPLE PADIYA

32 Yrs / Female

0 Kg / 0 Cm

Date: 11-Mar-2023 10:18:16 AM

HR: 134 bpm

METS: 1.0

BP: 160/80

MPCR: 71% of 188

Speed: 0.0 kmph

Grade: 0.0%

3x4+1 Rhythm Lead

Raw ECG

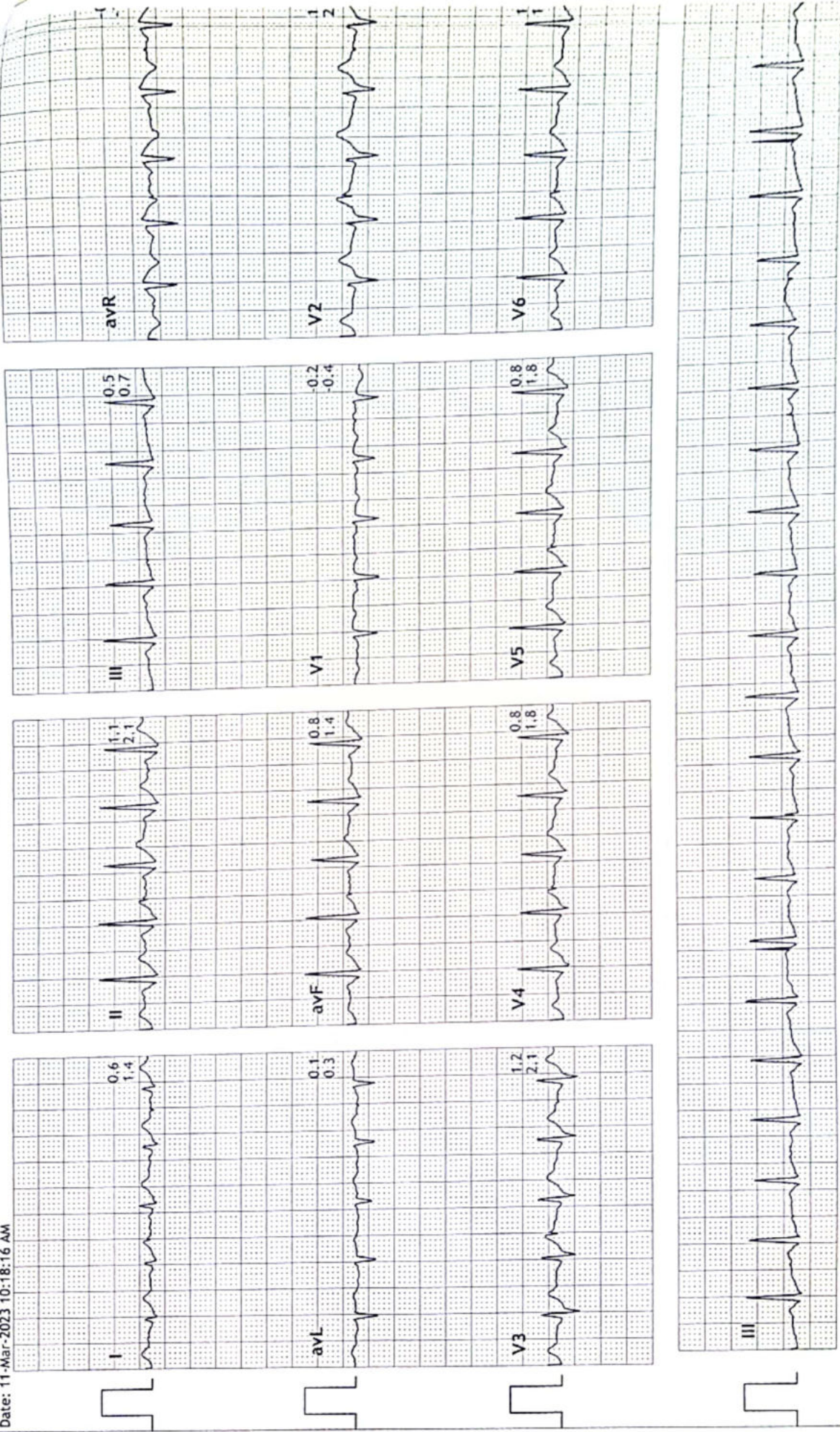
BRUCE

(0.05-100)Hz

Recovery (1:00)

10.0 mm/mV

25 mm/Sec.



PANCHMUKHI HOSPITAL

MAYADI CHOWK, 150 RING ROAD, RAJKOT

121 / DIMPLE PADIYA

32 Yrs / Female

0 Kg / 0 Cm

Date: 11-Mar-2023 10:18:16 AM

HR: 107 bpm

METS: 1.0

BP: 130/80

MPHR: 56% of 188

Speed: 0.0 kmph

Grade: 0.0%

Raw ECG

BRUCE

(0.05-100)Hz

Ex Time 06:00

BLC : On

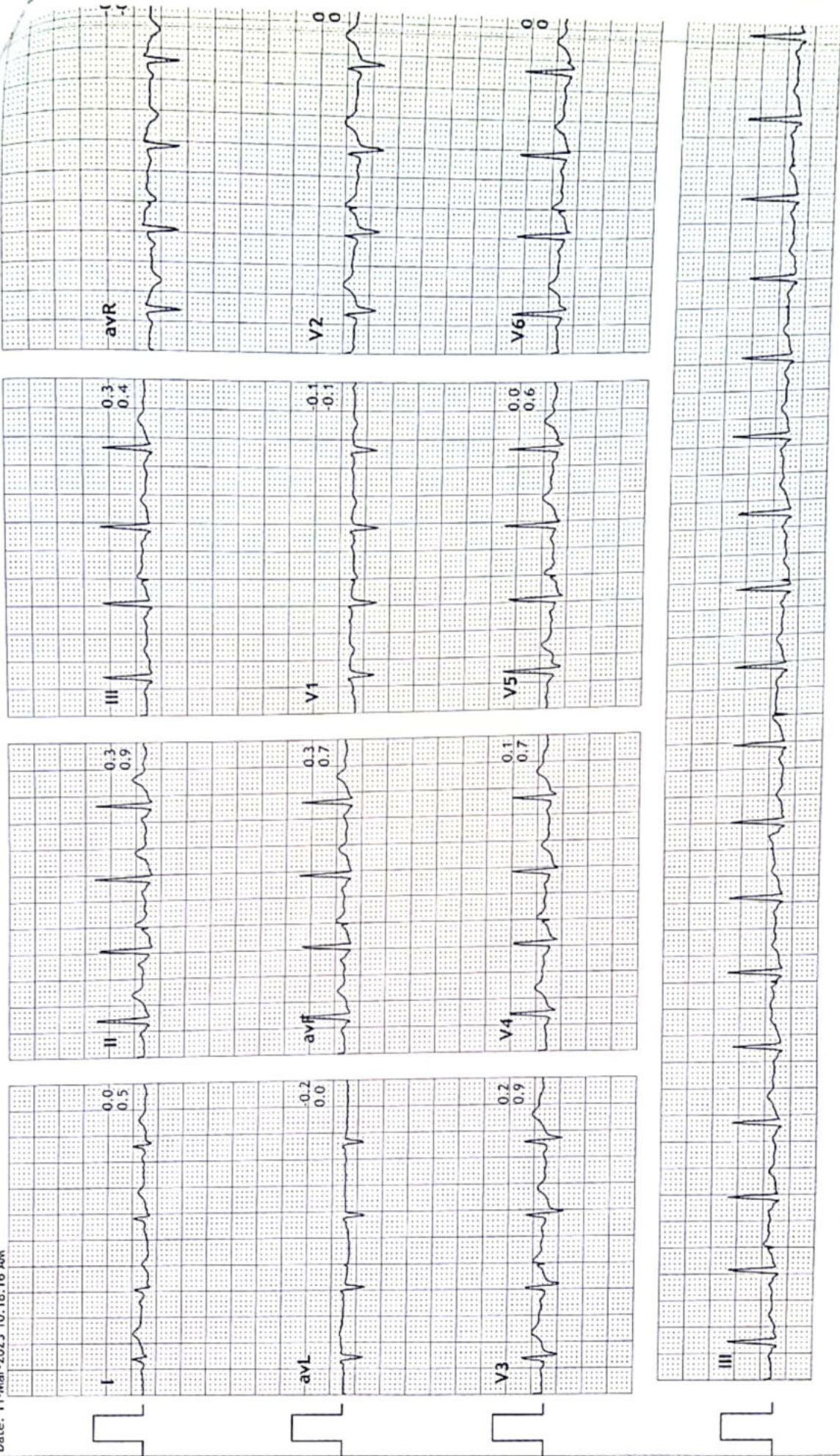
Notch : On

Recovery(3:00)

10.0 mm/my

25 mm/Sec.

3x4+1 Rhythm Lead





Medi wheel dimple padiya  GPS Map
Camera Lite

1-R, Ring Rd, near Mahiraj Hotel, Poonam Society, Om
Nagar, Rajkot, Gujarat 360004, India

Latitude
22.2657188°

Longitude
70.784435°

Local 09:32:45 AM
GMT 04:02:45 AM

Altitude 146 meters
Saturday, 11.03.2023



2023/3/11 10:29



बैंक
Bank of Baroda



नाम

Name **Dimple Vinodray Padiya**

कर्मचारी कूट कं.

E.C. No. **115868**

J. B. Rohda

J. B. ROHDA
REGIONAL HEAD
RAJKOT REGION, RAJKOT

जारीकर्ता प्राधिकारी

Issuing Auth



Dimple Padiya

धारक के हस्ताक्षर

Signature of Holder



ભારત સરકાર

Government of India

પડિયા ડિમ્પલ વિનોદરાય

Padiya Dimple Vinodray



જન્મ તારીખ / DOB: 13/01/1990

સ્ત્રી / Female

2297 5059 1470



પડિયા ડિમ્પલ, પડિયા ચૌભાઈ



ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ

Unique Identification Authority of India

સરનામું: જૂના પાંચપીપળા રોડ,
38-ગોવર્ધનનગર સોસાઈટી, જેતપુર,
રાજકોટ, જેતપુર, ગુજરાત, 360370

Address: juna panchapipla road,
38-govardhannagar society,
Jetpur, Rajkot, Jetpur, Gujarat,
360370

2297 5059 1470



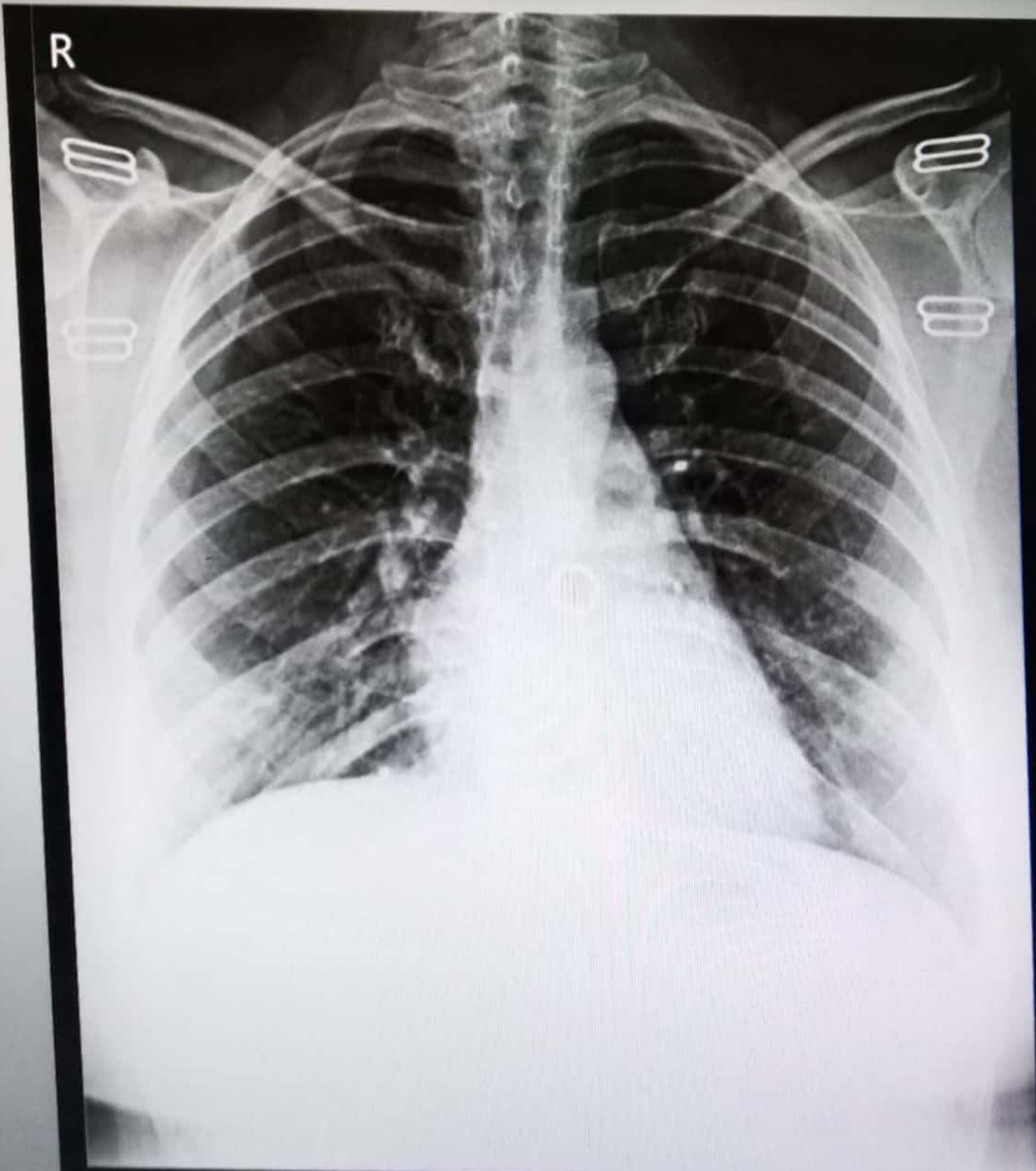
1947



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DIMPLE V PADIYA 32 Y/F CHEST PA 11-Mar-23
NEELKANTH DIAGNOSTICS - RAJKOT (DR. PRATIK KAGATHARA)

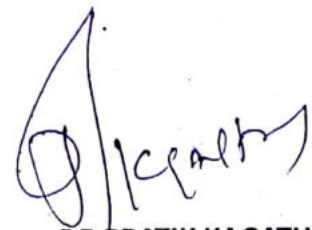
Pt.'s Name: DIMPLE V PADIYA

Date: 11 March, 2023

Radiograph of chest (PA view)

- Both the lung fields are clear
- *No e/o consolidation, cavitations or collapse.*
- Both the hila appears normal
- *Both costophrenic angles appear clear.*
- Both domes of diaphragm appear normal.
- Cardiac size is within normal limit.
- Bones under view reveals no evident abnormality.

Thanks for reference.



DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

PATIENT NAME : DIMPLE V PADIYA

DATE: 11 March 2023

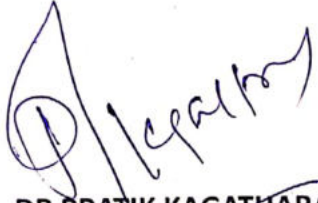
USG ABDOMEN AND PELVIS

- **LIVER:** is normal in size and shows **bright** parenchymal echotexture. No focal or diffuse lesions are seen. The intra hepatic biliary and portal radicles are normal. The portal vein and CBD are normal.
- **GALL BLADDER:** Well distended and appears unremarkable. No evidence of calculus or cholecystitis is seen. Gall bladder wall thickness appears normal.
- **PANCREAS:** appears normal in size and echotexture. No focal lesion seen. No evidence of peripancreatic inflammatory changes.
- **SPLEEN:** is normal in size and echotexture. No evidence of focal or diffuse lesion seen.
- **BOTH KIDNEYS:** are normal in size and echotexture. Cortical echogenicity appears normal. Cortico medullary differentiation is preserved. No evidence of calculus or hydronephrosis on either side.
- **URINARY BLADDER:** Minimally distended. No evidence of calculus, wall thickening, diverticula or mass lesion.
- **UTERUS:** is grossly normal. No focal lesion is seen. No adnexal mass is seen.
- No free fluid is seen in the POD. Visualized bowel loops appears unremarkable, No evidence of necrotic lymphadenopathy is seen. RIF/ LIF clear. Bilateral C-P angel is clear

CONCLUSION:

- Grade I fatty changes in liver.

Thanks for reference



DR PRATIK KAGATHARA
MD

Krishna Arcade, 150 Feet Ring Road, Opp. Om Nagar (BRTS), Rajkot. Mo. 72838 42020

32 SLICE CT SCAN | 3D-4D SONOGRAPHY | COLOUR DOPPLER | X-RAY & PROCEDURE INTERVENTIONS



TEST REPORT

Name : Padiya Dimple V	Reg. No : 303100750
Age/Sex : 32 Years / Female	Reg. Date : 11-Mar-2023 02:11 PM
Ref. By : Dr. PANCHMUKHI HOSPITAL / INSURANCE	Collected On : 11-Mar-2023 12:00 AM
Client Name : PANCHMUKHI HOSPITAL	Report Date : 11-Mar-2023 07:27 PM

COMPLETE BLOOD COUNT (CBC)
Specimen: EDTA blood

Parameter	Result	Unit	Biological Ref. Interval	
RBC Parameters				
Hemoglobin (SLS method)	10.5	g/dL	12.5 - 16.0	
Hematocrit (Electrical Impedance)	35.6	%	37 - 47	
RBC Count (Electrical Impedance)	4.14	million/cmm	4.2 - 5.4	
MCV (Calculated)	86.0	fL	78 - 100	
MCH (Calculated)	25.5	Pg	27 - 31	
MCHC (Calculated)	29.6	%	30 - 35	
RDW (Calculated)	17.0	%	11.5 - 14.0	
WBC Parameters				
WBC Count (Flowcytometry)	12810	/cmm	4000 - 10500	
DIFFERENTIAL WBC COUNT				
Neutrophils (%)	72 %	% Range 42.02 - 75.2	Abs. Value 9223 /cmm	Abs. Range 1800 - 7700
Lymphocytes (%)	19 %	20 - 45	2434 /cmm	1000 - 3900
Eosinophils (%)	04 %	1 - 4	512 /cmm	0 - 450
Monocytes (%)	05 %	2 - 8	641 /cmm	200 - 1000
Basophils (%)	00 %	0 - 1	0 /cmm	20 - 100
Platelete Parameter				
Platelet Count	318000	/cmm	150000 - 450000	
MPV	14.4	fL	7.4 - 10.4	
PDW	47.5	%	8.3 - 56.6	
PCT (Platelet Haematocrit)	0.46	%	0.2 - 0.5	

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Dr. Viral R. Jethava
M.D. (Path, PDCC)





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BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

Parameter	Result	Unit	Biological Ref. Interval
ABO	"O"		
Rh (D)	Positive		

The Blood Group is done from received sample. Kindly ask for Blood Group Card. In case of any query, please contact Laboratory.

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Test	Result	Unit	Biological Ref. Interval
Erythrocyte sedimentation rate Sample, EDTA whole blood			
ESR (After 1 hour)	9	mm/hr	3 - 12

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FASTING PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Fasting Blood Sugar (FBS) <i>HEXOKINASE</i>	87.00	mg/dL	<100 :Non-Diabetic 100-125 :Impaired Fasting Glucose (IFG) >=126 :Diabetic
Urine Glucose -F <i>Glucose Oxidase-Peroxidase</i>	Nil		
Urine Acetone -F	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 %Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34: S11.

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POST PRANDIAL PLASMA GLUCOSE
Specimen: Flouride plasma

Parameter	Result	Unit	Biological Ref. Interval
Post Prandial Blood Sugar (PPBS) <i>HEXOKINASE</i>	125.00	mg/dL	70 - 140
Urine Glucose- PP <i>Glucose Oxidase-Peroxidase</i>	Nil		
Urine Acetone- PP	Nil		

Criteria for the diagnosis of diabetes :

- HbA1c \geq 6.5 % Or
- Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.Or
- Two-hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing the equivalent of 75 gm anhydrous glucose dissolved in water.Or
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LIPID PROFILE
Specimen: Serum

Parameter	Result	Unit	Biological Ref. Interval
Cholesterol <i>Cholesterol Oxidase</i>	123.2	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>Enzymatic Reaction With Glycerol Kinase</i>	99.5	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
HDL Cholesterol <i>Siemens AHDL</i>	42.3	mg/dL	High Risk : < 40 Low Risk : >= 60
LDL Cholesterol <i>Siemens ALDL</i>	71.0	mg/dL	Optimal : < 100 Near Optimal/above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >=190
VLDL Cholesterol <i>Calculated</i>	19.90	mg/dL	15 - 35
LDL / HDL RATIO <i>Calculated</i>	1.68		0 - 3.5
Cholesterol /HDL Ratio <i>Calculated</i>	2.91		0 - 5.0

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UREA & BLOOD UREA NITROGEN

Spicimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Urea <i>Calculated</i>	23.4	mg/dL	17 - 43
Blood Urea Nitrogen (BUN) <i>UREASE/GLDH</i>	10.93	mg/dL	7.0 - 18.0
Uric Acid <i>Uricase</i>	4.6	mg/dL	2.6 - 6.2
GGT <i>Siemens/37C</i>	36.1	U/L	5 - 55

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Creatinine With eGFR

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Creatinine <small>ALKALINE PICRATE, COLORIMETRIC KINETIC</small>	0.79	mg/dL	0.55 - 1.02
eGFR	84	ml/min/1.73 sq m	Normal or High: ≥ 90 Mild decrease: 60-89 Mild moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: < 15

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Client Name	: PANCHMUKHI HOSPITAL	Report Date	: 11-Mar-2023 07:27 PM

HEMOGLOBIN A1 C ESTIMATION
Specimen: Blood EDTA

Parameter	Result	Unit	Biological Ref. Interval
HBA1C (HPLC)	5.2	% of Total Hb	Non-Diabetic : Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : >6.4 % Diabetic : Poor Control : > 7.0 % Good Control : 6.0 % - 7.0 %
MEAN BLOOD GLUCOSE <i>Calculated</i>	102.54	mg/dL	Please correlate with clinical condition 90-115: Normal 115-133: Pre-Diabetic 134-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value

Explanation :

- Total hemoglobin A1 c is continuously synthesized in the red blood cell through its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.
- The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.
- The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half-life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.
- It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures

HbA1c assay Interferences :

- Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

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TEST REPORT

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THYROID FUNCTION TEST

Parameter	Result	Unit	Biological Ref. Interval
Thyroid Stimulating Hormone (TSH) CLIA	2.15	µIU/ml	0.35 - 5.50

Remarks:

- Thyroid-stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4.
- Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism.
- In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy:

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL
- Reference: Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders, 2012: 2170

Triiodothyronine (T3) CLIA	0.81	ng/mL	0.6 - 1.81
-------------------------------	------	-------	------------

Clinical Significance:

- Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus.
- In the circulation, 99.7% of T3 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.
- In hypothyroidism and hyperthyroidism, FT3 levels parallel changes in total T3 levels. Measuring FT3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

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Client Name : PANCHMUKHI HOSPITAL	Report Date : 11-Mar-2023 07:27 PM

Thyroxine (T4) 9.01 µg/dL 4.5 - 12.6
CLIA

Clinical Significance :

- Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland, and hypothalamus. In the circulation, 99.95% of T4 is reversibly bound to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to T3.
- In hypothyroidism and hyperthyroidism, FT4 levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

- The anticonvulsant drug phenytoin may interfere with total and FT4 levels due to competition for TBG binding sites.
- FT4 values may be decreased in patients taking carbamazepine.
- Thyroid autoantibodies in human serum may interfere and cause falsely elevated FT4 results.

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M.D. (Path, PDCC)





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STOOL EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Colour	Yellow		
Consistency	Semi Solid		
CHEMICAL EXAMINATION			
Occult Blood <i>Peroxidase Reaction with o-Dianisidine</i>	Negative		
Reaction <i>pH Strip Method</i>	Neutral		
Reducing Substance	Absent		
MICROSCOPIC EXAMINATION			
Mucus	Present		
Pus Cells	Absent		
Red Cells	Absent		
Epithelial Cells	Absent		
Vegetable Cells	Absent		
Trophozoites	Absent		
Cysts	Absent		
Ova	Absent		
Neutral Fat	Absent		
Monilia	Absent		
Bacteria	Absent		

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.
False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.
False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

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LABORATORY REPORT

Name	: Padiya Dimple V	Reg. No	: 303100750
Sex/Age	: Female/32 Years	Histo / Cyto No	: C3H00024
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Reg. Date	: 11-Mar-2023 02:11 PM
Client Name	: PANCHMUKHI HOSPITAL	Collected On	: 11-Mar-2023 02:12 PM
		Report Date	: 11-Mar-2023 07:02 PM

CYTOPATHOLOGY REPORT

Specimen :

Liquid Based Cervical Cytology Material.

Grossing Description :

C3H00024/23 - 1 [H & E]

Microscopic Description :

Specimen Adequacy : Satisfactory for evaluation.

Endocervical cells (Transformation Zone Component) : Seen.

Partially obscuring component like inflammation : Seen.

General Categorization : Negative for Intraepithelial Lesion and Malignancy.

Non Neoplastic cellular variation like :

Squamous metaplasia : Not seen.

Keratotic changes : Not seen.

Tubal metaplasia : Not seen.

Atrophic changes : Not seen.

Pregnancy associated changes : Not seen.

Reactive cellular changes associated with :

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LABORATORY REPORT

Name	: Padiya Dimple V	Reg. No	: 303100750
Sex/Age	: Female/32 Years	Histo / Cyto No	: C3H00024
Ref. By	: Dr. PANCHMUKHI HOSPITAL / INSURANCE	Reg. Date	: 11-Mar-2023 02:11 PM
Client Name	: PANCHMUKHI HOSPITAL	Collected On	: 11-Mar-2023 02:12 PM
		Report Date	: 11-Mar-2023 07:02 PM

Inflammation : Absent.

Radiation : Absent.

Intrauterine Contraceptive Device (IUD) : Absent.

Organism :

Normal vaginal flora preserved.

Shift in flora suggestibve of bacterial vaginosis : Not seen.

Trichomonas Vaginalis : Not seen.

Fungal organism morphologically consistent with Candida species : Not seen.

Bacteria morphologically consistent with Actinomyces species : Not seen.

Cellular changes consistent with Herpes Simplex Virus : Not seen.

Cellular changes consistent with Cytomegalovirus : Not seen.

Impression :

Negative for Intraepithelial Lesion or Malignancy.

Slides are given with report. Preserve them carefully.

Clinical and Radiological correlation and SOS further work up is advised.

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LIVER FUNCTION TEST

Specimen : Serum

Parameter	Result	Unit	Biological Ref. Interval
Total Protein <i>BIURET</i>	7.3	g/dL	6.4 - 8.2
Albumin <i>Dye Binding - Bromocresol Purple (BCP)</i>	4.15	g/dL	3.40 - 5.00
Globulin <i>Calculated</i>	3.15	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.32		0.8 - 3.1
SGOT (AST) <i>Siemens/37C</i>	23.5	U/L	15 - 37
SGPT (ALT) <i>Siemens/37C</i>	35.4	U/L	14 - 59
Alakaline Phosphatase <i>Siemens/37C</i>	79.4	U/L	46 - 116
Total Bilirubin <i>Diazo-Caffeine/Benzocate Coupling (Jendrassik-Grof) w/blank</i>	0.30	mg/dL	0.2 - 1
Conjugated Bilirubin <i>Diazo-Caffeine/Benzocate Coupling (Jendrassik-Grof) w/blank</i>	0.16	mg/dL	0 - 0.20
Unconjugated Bilirubin <i>Sulph acid op/calf-benz</i>	0.14	mg/dL	0.0 - 1.1

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

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