



ETERNAL HOSPITAL

Sanganer

Dr. Roopam Sharma

MBBS, PGDCC, FIAE

Incharge Emergency, Preventive Cardiology
& Wellness Center

Reg. No. 26363

Date & Time

Patient Name:

Age / Gen:

UHID:

6/1/24

2:30 pm

Mrs. Ravita Meera

28y / F

Provisional Diagnosis:

? ↓ Vit B₁₂ ? Vit D₃

Drug Allergy:

Not known

Complaints:

BP → 121/77

P → 70 hr

Gen weakness

Medication Advice:

Pain: Yes No

LMP → 26/12/23
(Abortion)

① 2 NEUROVEX OD 24 hrs p/o

② 2 DFLY 60K once a week
x 3 mths.

Physical Examination:

Pallor: Yes/No Icterus: Yes/No

Cynosis: Yes/No Edema: Yes/No

Lymphadenopathy: Yes/No

Systemic Examination:

CVS: S1S2

CNS: E4 V5 M6

Respiratory System:

Clear

GI System: Soft

Skin: Wan

Investigation:

Vit B₁₂

Vit D₃

Follow up:

Diet Advice:

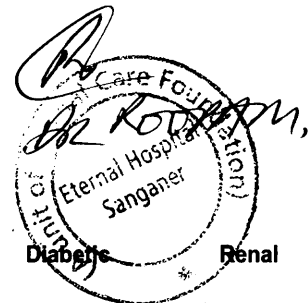
Normal

Low Fat

Diabetic

Renal

Low Salt



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Dr. Vaibhav Nepalia
Consultant - Dental Department
BDS. MDS
Reg. No. A-1742

Date & Time: 6/1/2024
Patient Name: Kamita Meena
Age / Gen: 28 / F.
UHID:

Provisional Diagnosis: *Calculus +*

Drug Allergy: *NO*

Complaints:

Medication Advice:

Pain: Yes No

Scaling.

Physical Examination:

Pallor : Yes/~~No~~ Icterus : Yes/~~No~~
Cynosis : Yes/~~No~~ Edema : Yes/~~No~~
Lymphadenopathy : Yes/~~No~~

Deepali

Systemic Examination:

☺: _____
CNS : _____

Respiratory System :

GI System : _____

Skin : _____

Investigation:

Follow up:

Diet Advice: Normal Low Fat Diabetic Renal Low Salt





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Mrs. RAVITA MEENA

40009131 Jan 6 2024 9:26AM

28 Yrs/Fem OPSCR23-24/1066

EHS CONSULTANT

8315880138

Provisional Diagnosis:

Drug Allergy:

Complaints:

Medication Advice:

Pain: Yes No

✓ S/L ✓

VA < R 6/6^e
L 6/9 N/b

Physical Examination:

Pallor : Yes/No Icterus : Yes/No

Cynosis : Yes/No Edema : Yes/No

Lymphadenopathy : Yes/No

Colour vision Normal

Systemic Examination:

Adv Refraction

CVS : _____

CNS : _____

Respiratory System :

R
Refrech from eye doctor

0 - 0 + 1 mark

GI System : _____

Skin : _____

Investigation:

Follow up:

Diet Advice:

Normal

Low Fat

Diabetic

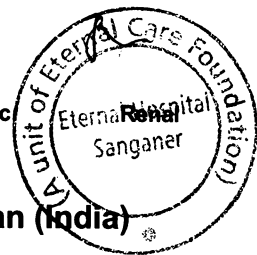
Low Salt

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6/1/24/ 10:45 AM

Dr. Satyamvada Pandey
MBBS, DGO, DNB (Obstetrics & Gynaecology)
Senior Consultant - Obs. & Gynae.
Reg. No. 37858/14453

Date & Time
Patient Name: **RANNA MEENA**
Age / Gen: **28 / F**
UHID: **40009131**

Provisional Diagnosis: **for Neuro Chem**

Drug Allergy: **None**

No Med / So Ho

Pain: Yes No

Complaints: Medication Advice:

Recovery of medical history (Dec 23),

MP-26/12/23, (for medical history).

2nd Med. Adv. in 4th Dec - Dec 23

Physical Examination: **not for Dec 23**

Pallor: Yes/No Icterus: Yes/No

Cynosis: Yes/No Edema: Yes/No

Lymphadenopathy: Yes/No

Systemic Examination:

CVS: **is - diastolic or antolip**

CNS: **None DL**

Respiratory System: **W - None**

GI System: **C**

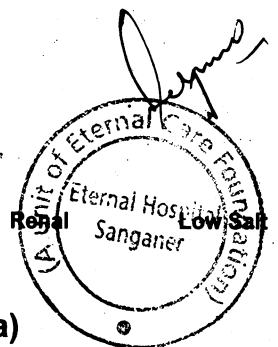
Skin: **C**

Investigation:

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Follow up: **Report**

Diet Advice: Normal Low Fat Diabetic



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ETERNAL HOSPITAL MEDICAL TESTING LABORATORY

Patient Name	Mrs. RAVITA MEENA	Lab No	4019515
UHID	40009131	Collection Date	06/01/2024 9:53AM
Age/Gender	28 Yrs/Female	Receiving Date	06/01/2024 11:20AM
IP/OP Location	O-OPD	Report Date	06/01/2024 1:21PM
Referred By	EHS CONSULTANT	Report Status	Final
Mobile No.	9315880138		

CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Sample: Urine
URINE SUGAR (RANDOM)				
URINE SUGAR (RANDOM)	NEGATIVE		NEGATIVE	Sample: Urine
PHYSICAL EXAMINATION				Sample: Urine
VOLUME	15	ml		
COLOUR	PALE YELLOW		P YELLOW	
APPEARANCE	CLEAR		CLEAR	
CHEMICAL EXAMINATION				
PH	6.5		5.5 - 7.0	
SPECIFIC GRAVITY	1.010		1.016-1.022	
PROTEIN	NEGATIVE		NEGATIVE	
SUGAR	NEGATIVE		NEGATIVE	
BILIRUBIN	NEGATIVE		NEGATIVE	
BLOOD	NEGATIVE			
KETONES	NEGATIVE		NEGATIVE	
NITRITE	NEGATIVE		NEGATIVE	
BILINOGEN	NEGATIVE		NEGATIVE	
LEUCOCYTE	NEGATIVE		NEGATIVE	
MICROSCOPIC EXAMINATION				
WBCS/HPF	4-5	/hpf	0 - 3	
RBCS/HPF	0-0	/hpf	0 - 2	
EPITHELIAL CELLS/HPF	10-15	/hpf	0 - 1	
CASTS	NIL		NIL	
CRYSTALS	NIL		NIL	
BACTERIA	NIL		NIL	
OTHERS	NIL		NIL	

RESULT ENTERED BY : SUNIL EHS

Abhinay Verma
Dr. ABHINAY VERMA

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Methodology:-

Glucose: GOD-POD, Bilirubin: Diazo-Azo-coupling reaction with a diazonium, Ketone: Nitro Pruside reaction, Specific Gravity: Proton release from ions, Blood: Pseudo-Peroxidase activity of Haem moiety, pH: Methyl Red-Bromothymol Blue (Double indicator system), Protein: H+ Release by buffer, microscopic & chemical method.

Interpretation: Diagnosis of Kidney function, UTI, Presence of Protein, Glucoses, Blood. Vocabulary syntax: Kit insert

****End Of Report****

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ETERNAL HOSPITAL MEDICAL TESTING LABORATORY

Patient Name	Mrs. RAVITA MEENA	Lab No	601360	 MC-2561
UHID	334266	Collection Date	06/01/2024 11:46AM	
Age/Gender	28 Yrs/Female	Receiving Date	06/01/2024 11:54AM	
IP/OP Location	O-OPD	Report Date	06/01/2024 12:54PM	
Referred By	Dr. EHCC Consultant	Report Status	Final	
Mobile No.	9773349797			

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range
HBA1C	5.2	%	<p>Sample: WHOLE BLOOD EDTA</p> <p>< 5.7% Nondiabetic 5.7-6.4% Pre-diabetic > 6.4% Indicate Diabetes</p> <p>Known Diabetic Patients < 7 % Excellent Control 7 - 8 % Good Control > 8 % Poor Control</p>

Method : - High - performance liquid chromatography HPLC
 Interpretation:-Monitoring long term glycemic control, testing every 3 to 4 months is generally sufficient.
 The approximate relationship between HbA1C and mean blood glucose values during the preceding 2 to 3 months.

****End Of Report****

RESULT ENTERED BY : Mr. Ravi

Dr. SURENDRA SINGH
 CONSULTANT & HOD
 MBBS|MD| PATHOLOGY

Dr. ASHISH SHARMA
 CONSULTANT & INCHARGE PATHOLOGY
 MBBS|MD| PATHOLOGY

(A Unit of Eternal Heart Care Centre & Research Institute Pvt. Ltd.)

3A, Jagatpura Road, Near Jawahar Circle, Jaipur, Rajasthan-302017, Rajasthan (India)
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CIN No. U85110RJ2007PTC023653

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Patient Name	Mrs. RAVITA MEENA	Lab No	4019515
UHID	40009131	Sample Date	06/01/2024 9:53AM
Age/Gender	28 Yrs/Female	Report Date	06/01/2024 1:21PM
Prescribed By	EHS CONSULTANT	Bed No / Ward	OPD
Referred By	EHS CONSULTANT	Report Status	Final
Company	Mediwheel - Arcofemi Health Care Ltd.		

CYTOLOGY

CYTOLOGY*

Type of Specimen

Pap smear (Conventional)

No. of smears examined

Two

Satisfactory for evaluation.

Adequacy

Adequate

Endocervical cells

Seen.

Inflammation

Mild acute inflammation

Organisms

Not seen.

Epithelial cell abnormality

Not seen

Others

-

Impression

Negative for intraepithelial lesion / malignancy.

Note: Test marked as * are not accredited by NABL

Bethesda2014

** End Of Report **

Dr. ABHINAV VERMA

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Mobile No.	9315880138		

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Sample: Fl. Plasma
BLOOD GLUCOSE (FASTING)				
BLOOD GLUCOSE (FASTING)	100.0	mg/dl	74 - 106	

Method: Hexokinase assay.
 Interpretation:-Diagnosis and monitoring of treatment in diabetes mellitus and evaluation of carbohydrate metabolism in various diseases.

THYROID T3 T4 TSH	Result	Unit	Biological Ref. Range	Sample: Serum
T3	1.710 H	ng/mL	0.970 - 1.690	
T4	8.43	ug/dl	5.53 - 11.00	
TSH	3.08	μIU/mL	0.40 - 4.05	

T3:- Method: ElectroChemiluminescence ImmunoAssay - ECLIA

Interpretation:-The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

T4:- Method: ElectroChemiluminescence ImmunoAssay - ECLIA

Interpretation:-The determination of T4 assay employs a competitive test principle with an antibody specifically directed against T4.

TSH - THYROID STIMULATING HORMONE :- ElectroChemiluminescence ImmunoAssay - ECLIA

Interpretation:-The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH levels.

LFT (LIVER FUNCTION TEST)	Result	Unit	Biological Ref. Range	Sample: Serum
BILIRUBIN TOTAL	0.70	mg/dl	0.00 - 1.20	
BILIRUBIN INDIRECT	0.49	mg/dl	0.20 - 1.00	
BILIRUBIN DIRECT	0.21	mg/dl	0.00 - 0.40	
SGOT	28.2	U/L	0.0 - 40.0	
SGPT	26.8	U/L	0.0 - 40.0	

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BIOCHEMISTRY

TOTAL PROTEIN	8.3	g/dl	6.6 - 8.7
ALBUMIN	4.9	g/dl	3.5 - 5.2
GLOBULIN	3.4		1.8 - 3.6
ALKALINE PHOSPHATASE	36.9 L	U/L	42 - 98
A/G RATIO	1.4 L	Ratio	1.5 - 2.5
GGTP	12.3	U/L	6.0 - 38.0

BILIRUBIN TOTAL :- Method: DPD assay. Interpretation:-Total Bilirubin measurements are used in the diagnosis and treatment of various liver diseases, and of haemolytic and metabolic disorders in adults and newborns. Both obstruction damage to hepatocellular structure.

BILIRUBIN DIRECT :- Method: Diazo method Interpretation:-Determinations of direct bilirubin measure mainly conjugated, water soluble bilirubin.

SGOT - AST :- Method: IFCC without pyridoxal phosphate activation. Interpretation:-SGOT (AST) measurements are used in the diagnosis and treatment of certain types of liver and heart disease.

SGPT - ALT :- Method: IFCC without pyridoxal phosphate activation. Interpretation:-SGPT (ALT) Ratio Is Used For Differential Diagnosis In Liver Diseases.

TOTAL PROTEINS :- Method: Biuret colorimetric assay. Interpretation:-Total protein measurements are used in the diagnosis and treatment of a variety of liver and kidney diseases and bone marrow as well as metabolic and nutritional disorder.

ALBUMIN :- Method: Colorimetric (BCP) assay. Interpretation:-For Diagnosis and monitoring of liver diseases, e.g. liver cirrhosis, nutritional status.

ALKALINE PHOSPHATASE :- Method: Colorimetric assay according to IFCC. Interpretation:-Elevated serum ALT is found in hepatitis, cirrhosis, obstructive jaundice, carcinoma of the liver, and chronic alcohol abuse. ALT is only slightly elevated in patients who have an uncomplicated myocardial infarction. **GGTP-GAMMA GLUTAMYL TRANSPEPTIDASE** :- Method:

Enzymatic colorimetric assay. Interpretation:- γ -glutamyltransferase is used in the diagnosis and monitoring of hepatobiliary disease. Enzymatic activity of GGT is often the only parameter with increased values when testing for such diseases and is one of the most sensitive indicator known.

LIPID PROFILE

TOTAL CHOLESTEROL	169		<200 mg/dl :- Desirable 200-240 mg/dl :- Borderline >240 mg/dl :- High
HDL CHOLESTEROL	61.4		High Risk :- <40 mg/dl (Male), <40 mg/dl (Female) Low Risk :- >=60 mg/dl (Male), >=60 mg/dl (Female)
LDL CHOLESTEROL	75.7		Optimal :- <100 mg/dl Near or Above Optimal :- 100-129 mg/dl Borderline :- 130-159 mg/dl High :- 160-189 mg/dl Very High :- >190 mg/dl
CHOLESTERO VLDL	20	mg/dl	10 - 50

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Mobile No.	9315880138		

BIOCHEMISTRY

TRIGLYCERIDES	98.5		Normal :- <150 mg/dl Border Line:- 150 - 199 mg/dl High :- 200 - 499 mg/dl Very high :- > 500 mg/dl
CHOLESTEROL/HDL RATIO	2.7	%	

CHOLESTEROL TOTAL :- Method: CHOD-PAP enzymatic colorimetric assay.
 Interpretation:-The determination of the individual total cholesterol (TC) level is used for screening purposes while for a better risk assessment it is necessary to measure additionally lipid & lipoprotein metabolic disorders.
 HDL CHOLESTEROL :- Method:-Homogenous enzymatic colorimetric method.
 Interpretation:-HDL-cholesterol has a protective against coronary heart disease, while reduced HDL-cholesterol concentrations, particularly in conjunction with elevated triglycerides, increase the cardiovascular disease.
 LDL CHOLESTEROL :- Method: Homogenous enzymatic colorimetric assay.
 Interpretation:-LDL play a key role in causing and influencing the progression of atherosclerosis and in particular coronary sclerosis. The LDL are derived form VLDL rich in TG by the action of various lipolytic enzymes and are synthesized in the liver.
 CHOLESTEROL VLDL :- Method: VLDL Calculative
 TRIGLYCERIDES :- Method: GPO-PAP enzymatic colorimetric assay.
 Interpretation:-High triglycerde levels also occur in various diseases of liver, kidneys and pancreas.
 DM, nephrosis, liver obstruction.
 CHOLESTEROL/HDL RATIO :- Method: Cholesterol/HDL Ratio Calculative

Sample: Serum

UREA	17.20	mg/dl	16.60 - 48.50
BUN	8.0	mg/dl	6 - 20
CREATININE	0.43 L	mg/dl	0.50 - 0.90
SODIUM	139.4	mmol/L	136 - 145
POTASSIUM	4.58	mmol/L	3.50 - 5.50
CHLORIDE	100.3	mmol/L	98 - 107
URIC ACID	1.8 L	mg/dl	2.6 - 6.0
CALCIUM	10.12	mg/dl	8.60 - 10.30

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CREATININE - SERUM :- Method:-Jaffe method, Interpretation:-To differentiate acute and chronic kidney disease.

URIC ACID :- Method: Enzymatic colorimetric assay. Interpretation:- Elevated blood concentrations of uric acid are renal diseases with decreased excretion of waste products, starvation, drug abuse and increased alcohol consume.

SODIUM:- Method: ISE electrode. Interpretation:-Decrease: Prolonged vomiting or diarrhea, diminished reabsorption in the kidney and excessive fluid retention. Increase: excessive fluid loss, high salt intake and kidney reabsorption.

POTASSIUM :- Method: ISE electrode. Interpretation:-Low level: Intake excessive loss from body due to diarrhea, vomiting renal failure, High level: Dehydration, shock severe burns, DKA, renal failure.

CHLORIDE - SERUM :- Method: ISE electrode. Interpretation:-Decrease: reduced dietary intake, prolonged vomiting and reduced renal reabsorption as well as forms of acidosis and alkalosis. Increase: dehydration, kidney failure, some form of acidosis, high dietary or parenteral chloride intake, and salicylate poisoning.

UREA:- Method: Urease/GLDH kinetic assay. Interpretation:-Elevations in blood urea nitrogen concentration are seen in inadequate renal perfusion, shock, diminished blood volume, chronic nephritis, nephrosclerosis, tubular necrosis, glomerular nephritis and UTI.

CALCIUM TOTAL :- Method: O-Cresolphthaleine complexone. Interpretation:-Increase in serum PTH or vit-D are usually associated with hypercalcemia. Increased serum calcium levels may also be observed in multiple myeloma and other neoplastic diseases. Hypocalcemia may be observed in hypoparathyroidism, nephrosis, and pancreatitis.

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BLOOD BANK INVESTIGATION

Test Name	Result	Unit	Biological Ref. Range
BLOOD GROUPING	"O" Rh Positive		

Note :

1. Both forward and reverse grouping performed.
2. Test conducted on EDTA whole blood.

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Mobile No.	9315880138		

HEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range
CBC (COMPLETE BLOOD COUNT)			
Sample: WHOLE BLOOD EDTA			
HAEMOGLOBIN	11.7 L	g/dl	12.0 - 15.0
PACKED CELL VOLUME(PCV)	37.1	%	36.0 - 46.0
MCV	93.2 H	fl	82 - 92
MCH	29.4	pg	27 - 32
MCHC	31.5 L	g/dl	32 - 36
RBC COUNT	3.98	millions/cu.mm	3.80 - 4.80
TLC (TOTAL WBC COUNT)	7.12	10 ³ /uL	4 - 10
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHILS	57.2	%	40 - 80
LYMPHOCYTE	33.7	%	20 - 40
EOSINOPHILS	4.1	%	1 - 6
MONOCYTES	4.6	%	2 - 10
BASOPHIL	0.4 L	%	1 - 2
PLATELET COUNT	2.73	lakh/cumm	1.500 - 4.500

HAEMOGLOBIN :- Method:-SLS HemoglobinMethodology by Cell Counter.Interpretation:-Low-Anemia, High-Polycythemia.

MCV :- Method:- Calculation bysystemex.

MCH :- Method:- Calculation bysystemex.

MCHC :- Method:- Calculation bysystemex.

RBC COUNT :- Method:-Hydrodynamicfocusing.Interpretation:-Low-Anemia,High-Polycythemia.

TLC (TOTAL WBC COUNT) :- Method:-Optical Detectorblock based on Flowcytometry.Interpretation:-High-Leucocytosis, Low-Leucopenia.

NEUTROPHILS :- Method: Optical detectorblock based on Flowcytometry

LYMPHOCYTES :- Method: Optical detectorblock based on Flowcytometry

EOSINOPHILS :- Method: Optical detectorblock based on Flowcytometry

MONOCYTES :- Method: Optical detectorblock based on Flowcytometry

BASOPHIL :- Method: Optical detectorblock based on Flowcytometry

PLATELET COUNT :- Method:-Hydrodynamicfocusing method.Interpretation:-Low-Thrombocytopenia, High-Thrombocytosis.

HCT: Method:- Pulse Height Detection. Interpretation:-Low-Anemia, High-Polycythemia.

NOTE: CH- CRITICAL HIGH, CL: CRITICAL LOW, L: LOW, H: HIGH

ESR (ERYTHROCYTE SEDIMENTATION RATE) 40 H mm/1st hr 0 - 15

RESULT ENTERED BY : SUNIL EHS

Abhinay Verma
Dr. ABHINAY VERMA

MBBS|MD|INCHARGE PATHOLOGY

(A Unit of Eternal Care Foundation)
Near Airport Circle Sanganer, Jaipur - 302011 Rajasthan (India)
Phone:- 0141-3120000
www.eternalhospital.com

Page: 6 Of 8

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ETERNAL HOSPITAL

Sanganer



ETERNAL HOSPITAL MEDICAL TESTING LABORATORY

Patient Name	Mrs. RAVITA MEENA	Lab No	4019515
UHID	40009131	Collection Date	06/01/2024 9:53AM
Age/Gender	28 Yrs/Female	Receiving Date	06/01/2024 10:08AM
IP/OP Location	O-OPD	Report Date	06/01/2024 11:55AM
Referred By	EHS CONSULTANT	Report Status	Final
Mobile No.	9315880138		

Method:-Modified Westergrens.

Interpretation:-Increased in infections, sepsis, and malignancy.

RESULT ENTERED BY : SUNIL EHS

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Patient Name	Mrs. RAVITA MEENA	Lab No	4019515
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Mobile No.	9315880138		

X Ray

Test Name	Result	Unit	Biological Ref. Range
-----------	--------	------	-----------------------

X-RAY CHEST P. A. VIEW

Both lung fields are clear.
Both CP angles are clear.
Both hemi-diaphragms are normal in shape and outlines.
Cardiac shadow is within normal limits.
Visualized bony thorax is unremarkable.
Correlate clinically & with other related investigations.

****End Of Report****

RESULT ENTERED BY : SUNIL EHS

Dr. RENU JADIYA
MBBS, DNB
RADIOLOGIST

(A Unit of Eternal Caré Foundation)
Near Airport Circle Sanganer, Jaipur - 302011 Rajasthan (India)
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Rate 66 . Age not entered, assumed to be 50 years old for purpose of ECG interpretation
. Sinus rhythm

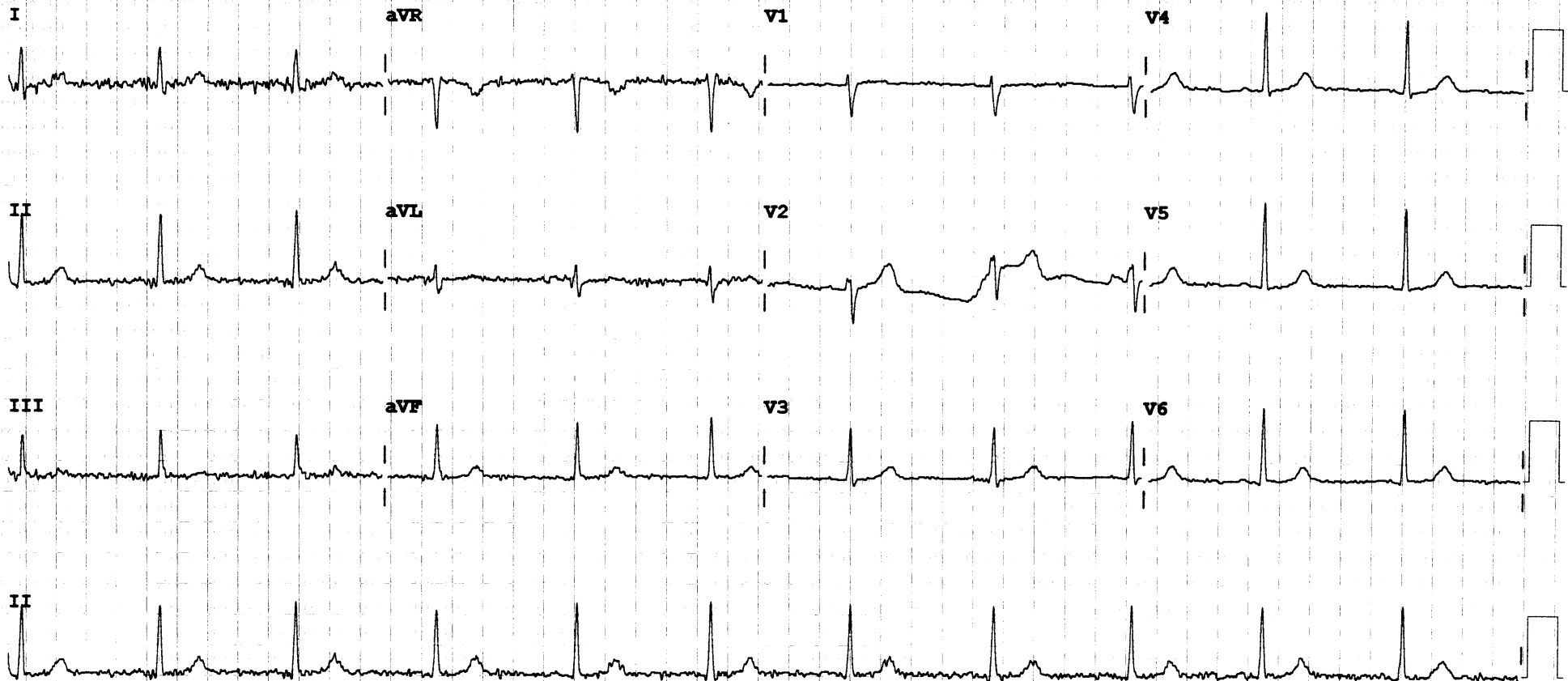
PR 146
QRSD 93
QT 404
QTc 424

--AXIS--

P 27
QRS 71
T 51

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50- 40 Hz W

PH100B CL

P?



ETERNAL HOSPITAL

Sanganer



DEPARTMENT OF RADIO DIAGNOSIS

UHID / IP NO	40009131 (427)	RISNo./Status :	4019515/
Patient Name :	Mrs. RAVITA MEENA	Age/Gender :	28 Y/F
Referred By :	EHS CONSULTANT	Ward/Bed No :	OPD
Bill Date/No :	06/01/2024 9:26AM/ OPSCR23-24/10664	Scan Date :	
Report Date :	06/01/2024 10:45AM	Company Name:	Mediwheel - Arcofemi Health Care Ltd.

USG REPORT - ABDOMEN AND PELVIS

LIVER:

Is normal in size and uniform echo texture.

No obvious focal lesion seen. No intra hepatic biliary radical dilatation seen.

GALL BLADDER:

Adequately distended with no obvious wall thickening/ pericholecystic fat stranding/ fluid. No obvious calculus/ polyp/ mass seen within.

PANCREAS:

Appears normal in size and shows uniform echo texture. The pancreatic duct is normal. No calcifications are seen.

SPLEEN:

Appears normal in size and it shows uniform echo texture.

RIGHT KIDNEY:

The shape, size and contour of the right kidney appear normal.

Corticomedullary differentiation is maintained. No evidence of pelvicalyceal dilatation.

No calculi seen.

LEFT KIDNEY:

The shape, size and contour of the left kidney appear normal.

Corticomedullary differentiation is maintained. No evidence of pelvicalyceal dilatation.

No calculi seen.

URINARY BLADDER:

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen.

UTERUS:

Uterus is normal in size, shape and anteverted in position.

Endometrial thickness measures ~ 7 mm.

No focal lesion noted.



ETERNAL HOSPITAL Sanganer



DEPARTMENT OF RADIO DIAGNOSIS

UHID / IP NO	40009131 (427)	RISNo./Status :	4019515/
Patient Name :	Mrs. RAVITA MEENA	Age/Gender :	28 Y/F
Referred By :	EHS CONSULTANT	Ward/Bed No :	OPD
Bill Date/No :	06/01/2024 9:26AM/ OPSCR23-24/10664	Scan Date :	
Report Date :	06/01/2024 10:45AM	Company Name:	Mediwheel - Arcofemi Health Care Ltd.

OVARIES:

Both ovaries are normal in size and echoes.

No focal fluid collections seen.

IMPRESSION:

No significant sonographic abnormality detected.

DR. RENU JADIYA

Consultant – Radiology

MBBS, DNB

(A Unit of Eternal Care Foundation)
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ETERNAL HOSPITAL Sanganer



DEPARTMENT OF CARDIOLOGY

UHID / IP NO	40009131 (427)	RISNo./Status :	4019515/
Patient Name :	Mrs. RAVITA MEENA	Age/Gender :	28 Y/F
Referred By :	EHS CONSULTANT	Ward/Bed No :	OPD
Bill Date/No :	06/01/2024 9:26AM/ OPSCR23-24/10664	Scan Date :	
Report Date :	06/01/2024 12:56PM	Company Name:	Final

REFERRAL REASON: HEALTH CHECKUP

2D ECHOCARDIOGRAPHY WITH COLOR DOPPLER

M MODE DIMENSIONS: -

		Normal			Normal
IVSD	10.6	6-12mm	LVIDS	27.0	20-40mm
LVIDD	40.0	32-57mm	LVPWS	16.9	mm
LVPWD	11.1	6-12mm	AO	32.3	19-37mm
IVSS	16.9	mm	LA	31.3	19-40mm
LVEF	60-62	>55%	RA	-	mm

DOPPLER MEASUREMENTS & CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY (m/s)				GRADIENT (mmHg)	REGURGITATION
		E	A	e'	E/e'		
MITRAL VALVE	NORMAL	E	0.95	e'	-	-	NIL
		A	0.60	E/e'	-		
TRICUSPID VALVE	NORMAL	E	0.51		-	NIL	
		A	0.44				
AORTIC VALVE	NORMAL	1.38				-	NIL
PULMONARY VALVE	NORMAL	0.63				-	NIL

COMMENTS & CONCLUSION: -

- ALL CARDIAC CHAMBERS ARE NORMAL
- NO RWMA, LVEF 60-62%
- NORMAL LV SYSTOLIC FUNCTION
- NORMAL LV DIASTOLIC FUNCTION
- ALL CARDIAC VALVES ARE NORMAL
- NO EVIDENCE OF CLOT/VEGETATION/PE
- INTACT IVS/IAS

IMPRESSION: - NORMAL BI VENTRICULAR FUNCTIONS

DR SUPRIY JAIN
MBBS, M.D., D.M. (CARDIOLOGY)
INCHARGE & SR. CONSULTANT
INTERVENTIONAL CARDIOLOGY

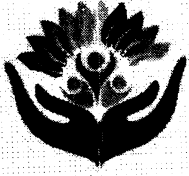

DR ROOPAM SHARMA
MBBS, PGDCC, FIAE
CONSULTANT & INCHARGE
EMERGENCY, PREVENTIVE CARDIOLOGY
AND WELLNESS CENTRE

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E-mail : corporate.marketing@eternalheart.org Website: www.eternalhospital.com

GST :08AAATE9596K1ZZ HSN/SAC : 999311

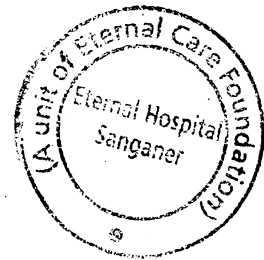
Credit Bill

Reg No : 40009131
Patient Name : Mrs. RAVITA MEENA
Gender/Age : Female/28 Yr 2 Mth 22 Days
Contact No : 9315880138
Address : SAD PURA , DADANPURA , KARALI ,
JAIPUR, RAJASTHAN, INDIA

Bill No : OPSCR23-24/10664
Bill Date Time : 06/01/2024 9:26AM
Payer : Mediwheel - Arcofemi Health Care Ltd.
Sponsor : Mediwheel - Arcofemi Health Care Ltd.
Presc. Doctor : Dr. EHS CONSULTANT
Referred By :

Approval No :

SNo	Particulars	Rate	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
	PHC PACKAGES							
	MediWheel Full Body Health Checkup Female Below 40	2850.00	1.00	2850.00	0.00	2850.00	0.00	2850.00
	Details Of Package							
	CARDIOLOGY							
2	ECG							
3	MIT OR ECHO							
	CONSULTATION CHARGES							
4	CONSULTATION - DENTAL (Dr. VAIBHAV NEPALIA AND TEAM)							
5	CONSULTATION - INTERNAL MEDICINE (Dr. EHS CONSULTANT)							
6	CONSULTATION - OBS & GYNE (Dr. SATYAMVADA PANDEY)							
7	CONSULTATION - OPHTHALMOLOGY (Dr. EHS OPHTHAL CONSULT)							
	PATHOLOGY							
8	BLOOD GLUCOSE (FASTING)							
9	BLOOD GLUCOSE (PP)							
10	BLOOD GROUPING AND RH TYPE							
11	CBC (COMPLETE BLOOD COUNT)							
12	ESR (ERYTHROCYTE SEDIMENTATION RATE)							
13	HbA1c (HAEMOGLOBIN GLYCOSYLATED BLOOD)							
14	LFT (LIVER FUNCTION TEST)							
15	LIPID PROFILE							
16	PAPSMEAR							
17	RENAL PROFILE TEST							
18	ROUTINE EXAMINATION - URINE							
19	STOOL ROUTINE							





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GST :08AAATE9596K1ZZ HSN/SAC : 999311

Credit Bill

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Patient Name : Mrs. RAVITA MEENA Bill Date Time : 06/01/2024 9:26AM
Gender/Age : Female/28 Yr 2 Mth 22 Days Payer : Mediwheel - Arcofemi Health Care Ltd.
Contact No : 9315880138 Sponsor : Mediwheel - Arcofemi Health Care Ltd.
Address : SAD PURA , DADANPURA , KARALI , Presc. Doctor : Dr. EHS CONSULTANT
JAIPUR, RAJASTHAN, INDIA Referred By :

Approval No :

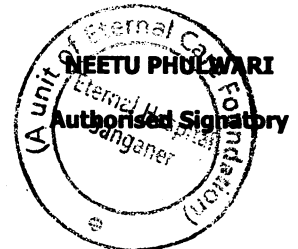
SNo	Particulars	Rate	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
20	THYROID T3 T4 TSH							
21	URINE SUGAR (POST PRANDIAL)							
22	URINE SUGAR (RANDOM)							
	RADIOLOGY							
23	ULTRASOUND WHOLE ABDOMEN							
24	X RAY CHEST PA VIEW							

Gross Amount	2850.00
Net Amount	2850.00
Payer Amount	2850.00
Patient Amount	0.00
Amt Received (Rs.)	0.00
Balance Amount	2850.00

Payment Mode

Narration :

To View Investigation Result Login to
<http://patientportal.eternalsanganer.com/>
UserName:40009131
Password : Registered Mobile Number



Images

