

Patient Name : MAMTA UDAI

Age / Gender : 36 years / Female

Endo ID : 178544

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 12:42 p.m.

Sample ID :



| Test Description | Value(s) | Unit(s) | Reference Range |
|-----------------------------------|----------|---------------------|-----------------|
| HAEMATOLOGY | | | |
| Hemoglobin (HB) | 9.9 | gm/dl | 12.0 - 16.0 |
| Erythrocyte (RBC) Count | 4.19 | mil/cu.mm | 4.7 - 6.0 |
| Packed Cell Volume (PCV) | 33.7 | % | 42 - 52 |
| Mean Cell Volume (MCV) | 80.4 | FL | 78 - 100 |
| Mean Cell Haemoglobin (MCH) | 23.7 | Pg | 27 - 31 |
| Mean Corpuscular Hb Conc. (MCHC) | 29.5 | g/dl | 32 - 36 |
| Red Cell Distribution Width (RDW) | 14.2 | % | 11.5 - 14.0 |
| Total Leucocytes Count (WBC) | 5090 | Cell/cu.mm | 4000 - 10000 |
| Neutrophils | 60 | % | 40 - 80 |
| Lymphocytes | 34 | % | 20 - 40 |
| Monocytes | 04 | % | 2 - 10 |
| Eosinophils | 02 | % | 1-6 |
| Basophils | 00 | % | 0-1 |
| Mean Platelet Volume (MPV) | 9.9 | fL | 7.2 - 11.7 |
| PCT | 0.31 | % | 0.2 - 0.5 |
| Platelet Count | 317 | 10 ³ /ul | 150 - 450 |

END OF REPORT

Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : MAMTA UDAI

Age / Gender : 36 years / Female

Endo ID : 178544

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Referral : MEDIWHEEL



Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 01:00 p.m.

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240830034

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|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

HAEMATOLOGY

| | | | |
|-----|----|----|--------|
| ESR | 30 | mm | 0 - 20 |
|-----|----|----|--------|

END OF REPORT

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Dr. Nishi Prasad
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Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 12:53 p.m.

Sample ID :



| Test Description | Value(s) | Unit(s) | Reference Range |
|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

CLINICAL PATHOLOGY

URINE ROUTINE

General Examination

| | | | |
|---------------------------|----------|--|-------------------|
| Colour | Yellow | | Pale Yellow |
| Transparency (Appearance) | S.Turbid | | Clear |
| Reaction (pH) | Acidic | | Acidic / Alkaline |
| Specific gravity | 1.025 | | 1.005-1.030 |

Chemical Examination

| | | | |
|-------------------------|-----|--|-----|
| Urine Protein (Albumin) | + | | NIL |
| Urine Glucose (Sugar) | NIL | | NIL |

Microscopic Examination

| | | | |
|--------------------|---------|------|--------|
| Pus cells (WBCs) | 2-3 | /hpf | 0-4 |
| Epithelial cells | 3-4 | /hpf | 0-5 |
| Red blood cells | NIL | /hpf | NIL |
| Crystals | Absent | | Absent |
| Cast | Absent | | Absent |
| Amorphous deposits | Absent | | Absent |
| Bacteria | Present | | Absent |
| Yeast cells | Present | | Absent |
| Other | Absent | | Absent |

END OF REPORT

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Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 02:11 p.m.

Sample ID :



240830034

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|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

'B' NEGATIVE

Method : Gel Technique & Tube Agglutination

Medical Remark :

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

END OF REPORT

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| Test Description | Value(s) | Unit(s) | Reference Range |
|--|-------------|---------|---|
| BIOCHEMISTRY | | | |
| LIPID PROFILE | | | |
| Cholesterol Total Method : ENZYMATIC COLORIMETRIC METHOD CHOD - POD | 218.0 | mg/dL | 130 -250 |
| Triglycerides Method : ENZYMATIC COLORIMETRIC | 65.3 | mg/dL | 60 -170 |
| HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID | 44.0 | mg/dL | Normal: 40-60 Major Risk for Heart: > 60 |
| VLDL Cholesterol Method : Calculated | 13.06 | mg/dL | 6 - 38 |
| LDL Cholesterol Method : Calculated | 160.94 | mg/dL | Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190 |
| CHOL/HDL Ratio Method : Calculated | 4.95 | | 2.6-4.9 |
| LDL/HDL Ratio Method : Calculated | 3.66 | | 0.5-3.4 |

END OF REPORT

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| <u>BIOCHEMISTRY</u> | | | |
| <u>LIVER FUNCTION TEST</u> | | | |
| Bilirubin - Total | 0.75 | gm/dl | 0.0 - 1.20 |
| Bilirubin - Direct | 0.16 | mg/dL | 0.0 - 0.30 |
| Bilirubin - Indirect | 0.59 | mg/dL | 0.1 - 1.0 |
| Method : Calculated | | | |
| ASPARTATE AMINO TRANSFERASE (SGOT-AST) | 24.3 | U/L | 5.0 - 40.0 |
| Method : IFCC with Serum | | | |
| ALANINE AMINO TRANSFERASE (SGPT-ALT) | 20.4 | U/L | 5.0 - 40.0 |
| Method : IFCC with POD Serum | | | |
| Alkaline Phosphatase | 115.3 | U/L | MALE & FEMALE 4-19 YEAR: 54-369 U/L 20-59 YEAR: 42-98 U/L >60 YEAR: 53-141 U/L |
| Method : IFCC with Serum | | | |
| Total Protein | 7.20 | g/dL | 6.00 - 8.00 |
| Method : Biuret, with Serum | | | |
| Albumin | 4.72 | g/dL | 3.40 - 5.50 |
| Method : Tech; BCG with Serum | | | |
| Globulin | 2.48 | g/dL | 1.5 - 3.5 |
| Method : Calculated | | | |
| A/G Ratio | 1.90 | | 1.5 - 2.5 |
| Method : Calculated | | | |

END OF REPORT

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Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 12:23 p.m.

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|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)

5.2

%

> 8% Action Suggested

BLOOD

7 - 8 % Good Control

Method : Nephelometry Methodology

6 - 7 % Near Normal Glycemia

< 6% Normal level

Instrument: Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE

102.54

90 - 120 Very Good Control

121 - 150 Adequate Control

151 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

****END OF REPORT****

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Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 12:33 p.m.

Sample ID :



| Test Description | Value(s) | Unit(s) | Reference Range |
|---|----------|---------|-----------------|
| IMMUNOLOGY | | | |
| T3-Triiodothyronine Method : CHEMILUMINOSCECE | 1.36 | ng/mL | 0.60-1.81 |
| T4-Thyroxine Method : CHEMILUMINOSCECE | 9.4 | ug/dL | 4.5 -10.9 |
| TSH -ULTRA SENSITIVE Method : CHEMILUMINOSCECE | 4.17 | uIU/mL | 0.35-5.50 |

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

END OF REPORT

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| BIOCHEMISTRY | | | |
| Urea | 32.8 | mg/dL | 10.0 - 40.0 |
| Method : Uricase | | | |
| CREATININE | 0.66 | mg/dL | 0.60 - 1.40 |
| Method : Serum, Jaffe | | | |

END OF REPORT

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|------------------|----------|---------|-----------------|

BIOCHEMISTRY

Uric Acid

3.7

mg/dL

3.5-7.0

Method : Uricase, Colorimetric

END OF REPORT

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|------------------|----------|---------|-----------------|

BIOCHEMISTRY

| | | | |
|---------|-----|-------|--------------|
| Calcium | 8.9 | mg/dL | 8.50 - 10.20 |
|---------|-----|-------|--------------|

Method : Arsenazo III

END OF REPORT

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Collected Date & Time : Mar 23, 2024, 11:17 a.m.

Reported Date & Time : Mar 23, 2024, 01:00 p.m.

Sample ID :



240830034

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|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

BIOCHEMISTRY

| | | | |
|-----------------|------|-------|------------|
| Glucose fasting | 89.3 | mg/dL | 70.0-110.0 |
|-----------------|------|-------|------------|

Method : Fluoride Plasma-F, Hexokinase

END OF REPORT

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Collected Date & Time : Mar 23, 2024, 01:59 p.m.

Reported Date & Time : Mar 23, 2024, 02:28 p.m.

Sample ID :



240830098

| Test Description | Value(s) | Unit(s) | Reference Range |
|------------------|----------|---------|-----------------|
|------------------|----------|---------|-----------------|

BIOCHEMISTRY

Blood Glucose-Post Prandial

112.5

mg/dL

70 - 140

Method : Hexokinase

END OF REPORT


Dr. Kusum Heda
M.D.(Patho.)

Dr. Nishi Prasad
M.D.(Patho.)


22, 2024, 11:17 AM

GN
5 001 PHONE

भारत सरकार
GOVERNMENT OF INDIA



ममता उदय
Mamta Udai
जन्म तिथि/ DOB: 19/06/1981
महिला / FEMALE



3075 8132 4594

आधार-आम आदमी का अधिकार

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No. 23507/15600

Mamta

भारतीय विशिष्ट पहचान प्राधिकरण
INDIAN AUTHORITY FOR INDIA

पता:
अर्षाविली, टीकम चंद उदय,
बी-17-ई, राधा बिहार
कॉलोनी, हरीभाऊ उपाध्याय
नगर(मुख्य), वार्ड न 1,
अजमेर, अजमेर,
राजस्थान - 305001

Address:
VPO Tikam Chand Udai, B-17-E,
Radha vihar colony, haridhas
upadhyay nagar (main), ward no 1,
Ajmer, Ajmer,
Rajasthan - 305001

3075 8132 4594

Aadhaar-Aam Admi ka Adhikar

March 23, 2024

PR Interval: 0.14 sec

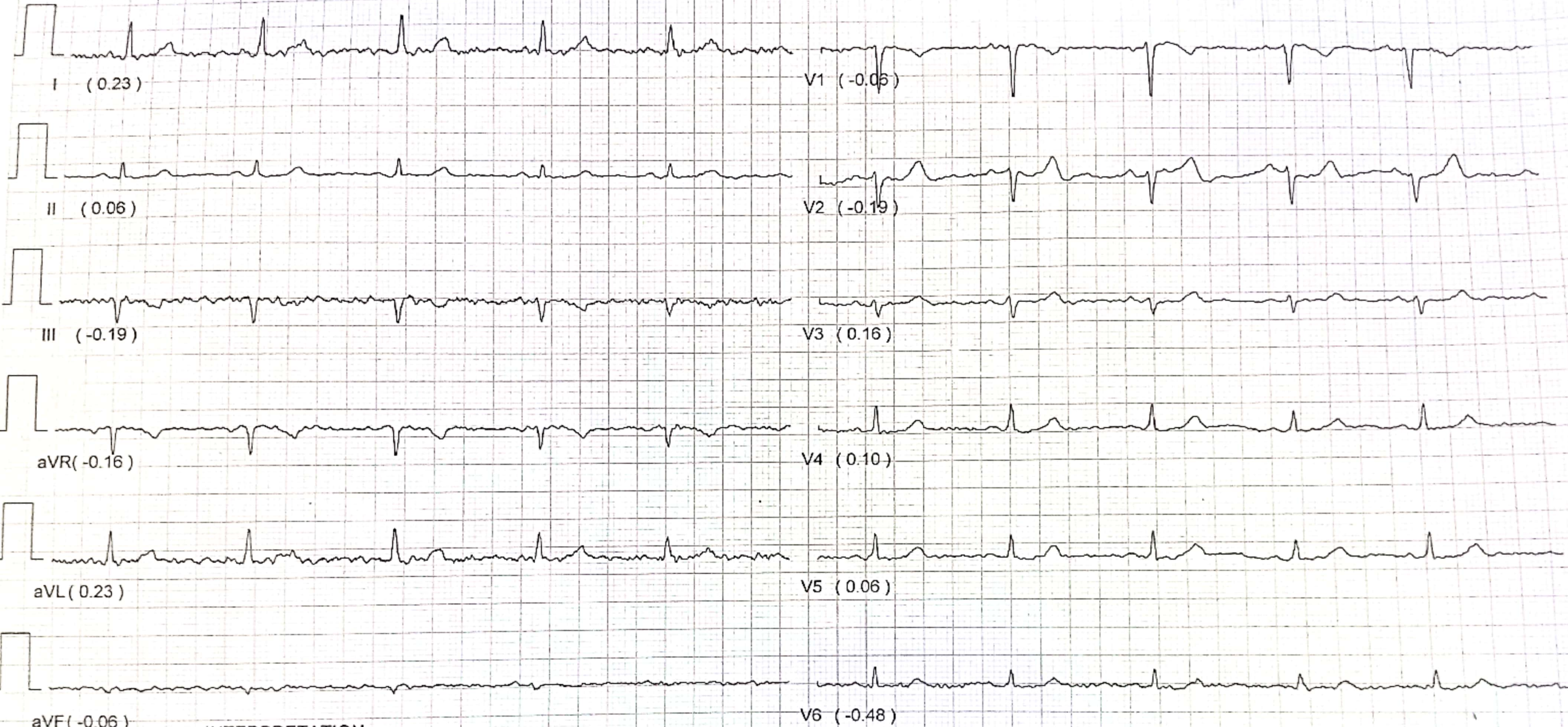
RR Interval: 0.92 sec

HR : 65 bpm BP : 0 / 0 mmHg

Time: 09:19:46

P-QRS-T Axis (167)-(175)-(169) deg

QRS Duration : 0.084 Sec



INTERPRETATION

PR is normal, Normal QRS Width, Normal QT interval,
 Junctional/NonSinus Rhythm suspected, Right axis deviation, T wave inversion in Lead I, II, aVR, aVL,
 V4, V5, V6,
 ECG not normal

DR
MD

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
 Consultant Radiologist & Sonologist
 RMC, Noida
 9811567156

*Unconfirmed Reporting, Refer to Clinician

| | |
|-------------------|--------------------|
| NAME : Mamta Udai | DATE : 23-03-2024 |
| AGE : 35 yrs | REF BY : Mediwheel |
| SEX : Female | |

INTERPRETATION SUMMARY

- . NORMAL CHAMBER DIMENSIONS
- . INTACT IAS/ IVS
- . ALL VALVES ARE NORMAL.
- . MILD TR
- . RVSP 30 MM HG
- . NO RWMA : LVEF 65 %
- . NO CLOT, VEGITATION.
- . NO PERICARDIAL EFFUSION
- . NORMAL PERICARDIUM .
- . SIZE OF MAIN PULMONARY ARTERY 19 MM

M.MODE/2D MEASUREMENTS (MM) & CALCULATIONS (ML)

| | | | |
|---------------------|------|-------------------|-----|
| LVID d | 45.9 | LVEDV | |
| LVID s | 29.5 | LVESV | |
| RVID(d) | --- | SV | |
| IVS d | 9.6 | F.S | - |
| IVS S | 14.0 | EF | 35% |
| LVPW d | 9.3 | C.O | 65% |
| LVPWS | 13.6 | MITRAL VALVE | - |
| AORTIC ROOT | 25.7 | EF SLOPE | - |
| LEFT ATRIUM | 33.2 | OPENING AMPLITUDE | - |
| AORTIC CUSP OPENING | - | E.P.S.S | - |

DOPPLER MEASUREMENTS & CALCULATIONS:

| STRUCTURE | MORPHOLOGY | VELOCITY(cm/sec.) | GRADIENT P/M | REGURGITATION |
|-----------------|------------|-------------------|--------------|---------------|
| MITRAL VALVE | NORMAL | E- 129 A- 78 | - | NIL |
| TRICUSPID VALVE | NORMAL | 229 | . | MILD |
| PUL VALVE | NORMAL | 105 | - | NIL |
| AORTIC VALVE | NORMAL | 171 | - | NIL |

| | |
|----------------------------|--------------------------------|
| PULMONARY ARTERY | MITRAL VALVE AREA (BY P 1/2 T) |
| PEAK ACCELERATION TIME | PRESSURE HALF TIME |
| SYSTOLIC PRESSURE 30 MM HG | MVA |

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No. 01/1507/15600

गण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

USG ABDOMEN-PELVIS

| | | |
|----------------------|-------------|-------------------|
| NAME -Mrs Mamta Udai | AGE-- 36Yrs | Date -- 23-Mar-24 |
| REF BY -- Mediwheel | | |

LIVER : is enlarged and bright 14.1 cm and shows homogeneous echotexture. No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion. The portal vein and common bile duct show normal caliber.

GALL BLADDER : distended and shows smooth walls. Wall thickness appears normal. No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: normal in size and shows normal echopattern.

PANCREAS: Normal in size , shape and position. Parenchyma is homogenous.

RT.KIDNEY- Normal in size, shape and position . Measures :-- 10.4 x 3.6cm
Cortex is homogeneous. Corticomedullary differentiation is maintained
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

LT. KIDNEY- Normal in size, shape and position. Measures :--10.2 x 3.6cm
Cortex is homogeneous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

URINARY BLADDER : is distended with smooth walls .
No evidence of diverticulum or calculus is Seen

UTERUS: Normal In Size Shape And Position. Measuring 6.2 x 5.0 x 4.3cm
Myometrium is homogenous and normal in thickness .
Endometrium Is Normal .

OVARY: both ovaries are normal in size and appear normal.

IMPRESSION :--

- Enlarged fatty liver.
- Rest of the abdominal organs are within normal limits.

(Adv- clinical correlation , further evaluation)

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No. - 604507/15600

Please note :-- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no usg finding is pathogenomic . All findings are only S/O , hence advice These findings are observations at the time of study. Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .



 **GPS Map Camera**



Ajmer, Rajasthan, India

8, Kala Bagh Gali, near Bajranggarh Chauraha, Kala Bagh,
Ajmer, Rajasthan 305001, India

Lat 26.469866°

Long 74.633993°

23/03/24 01:25 PM GMT +05:30

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DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

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NAME :-- Mamta Udai

AGE :--36 Yrs

Date:-- 23-Mar-24

REF BY :- Medhiwheel

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND Lungs

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No. -004507/15600

भ्रूण लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

HOLTER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
THE DIAGNOSIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO-LEGAL PURPOSE.