Apollo

TOUCHING LIVES

MEDICAL SUMMARY

Apollo Clinic VASHI

NAME:	Mrs. Urmila Pasvali	UHID:	
AGE:	32	DATE OF HEALTHCHECK:	27-1-2024
GENDER:	F		

HEIGHT:	148	MARITAL STATUS:	M
WEIGHT:	61.6	NO OF CHILDREN:	2
BMI:	28.1		

C/O:- Involuntary-movement? c̄ 2nd pregnancy. Rhinitis, headache!

K/C/O:

PRESENT MEDICATION: — Tab. Carnine (30?).

P/M/H: — No

P/S/H: — NO

ALLERGY:— Dust, Cold.

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING:

ALCOHOL: } NAD

TOBACCO/PAN:

FAMILY HISTORY FATHER: — HTN.

MOTHER: —

O/E:

LYMPHADENOPATHY:

BP: 120/70 PULSE: — 78/min

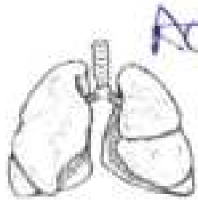
PALLOR/ICTERUS/CYNOSIS/CLUBBING: } NAD

TEMPERATURE: N SCARS:

OEDEMA:

S/E:

RS: AEBE



P/A: — NAD

CVS: S1S2 +

Extremities & Spine: — NAD

ENT: — pain in Lt. Ear

CNS: Conscious, oriented

Skin: — NAD

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

• ANDHERI • COLABA • NASHIK • VASHI

Vashi : M/S. Indira Health & Lifestyle Pvt. Ltd. The Emerald, 1st Floor, Plot No. 195, Sector - 12, Besides Neel Siddhi Tower, Vashi - Navi Mumbai - 400703.
Tel.: (022) - 2788 1322 / 23 / 24 8291490000 • Email: apolloclinicvashi@gmail.com

Name:	Age:	Date of Health check-up:

Findings and Recommendation:

Findings:-

- Hb ↓
- ? IDA Calculi

Recommendation:-

- Iron supplements
- Sr ref

Signature:

Consultant –

DR. ANIRBAN DASGUPTA
MBBS, M.D. MEDICINE
DIPLOMA CARDIOLOGY
MMC- 2005/02/0920

Apollo

Apollo Clinic VASHI

OPHTHALMIC EVALUATION

UHID No.: _____ Date : 27/1/24

Name : Miss Vinita Age : 32 Gender : Male/Female

Without Correction :

Distance: Right Eye 6/6 N6 Left Eye 6/6 N6

Near : Right Eye _____ Left Eye _____

With Correction :

Distance: Right Eye _____ Left Eye _____

Near : Right Eye _____ Left Eye _____

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near										

Colour Vision : NAD (BE)

Anterior Segment Examination : _____

Pupils : _____

Fundus : NAD (BE)

Intraocular Pressure : 14 mm hg (BE)

Diagnosis : _____

Advice : _____

Re-Check on after 1 yrs (This Prescription needs verification every year)

Dr. R
(Consultant Ophthalmologist)

DR. RUCHIRA SHARMA
M. S. (OPHTH)
CONSULTING OPHTHALMOLOGIST
& MICRO SURGEON
REG. No. 3202 / 09 / 02

Apollo Clinic, Licensee : **M/s. Indira Health & Lifestyle Pvt. Ltd.**, "The Emerald", Plot No. 195/B, Sector 12, Besides Neel Siddhi Towers, Vashi, Navi Mumbai - 400703. **Tel.**: (91-22) 2788 1322 / 23 / 24 82914 90000 Email: apolloclinicvashi@gmail.com

Name : Mrs Vineela Age : 32 Sex : F UHID No. : Date : 27/01/2024

32years / P_2L_2 (FTND)

No complains ; visiting for PAP smear

LMP - 20/01/

O/E

G Cfair
Afebrile
P - 88/min

Pw c inpts

PA - soft NT

P/S Cx } healthy
V }

(PAP smear taken)

Dr. TRUPTI SHINDE

DR. TRUPTI VIJAY SHINDE
MBBS, M.S. (OBS & GYNAE)
REG. NO.: 2014/07/3301

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Apollo Clinic VASHI

Name	: Mrs. Vineela Peravali	Gender	: Female	Age	: 32 Years
UHID	: FVAH 10402	Bill No	:	Lab No	: V-3586-23
Ref. by	: SELF	Sample Col.Dt	: 27/01/2024 09:30		
Barcode No	: 5856	Reported On	: 27/01/2024 19:46		

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
CBC (Complete Blood Count)-WB (EDTA)			
Haemoglobin(Colorimetric method)	**10.6**	g/dl	11.5 - 15
RBC Count (Impedance)	4.49	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	**33.4**	%	35 - 55
MCV:(Calculated parameter)	**74.3**	fl	78 - 98
MCH:(Calculated parameter)	**23.5**	pg	26 - 34
MCHC:(Calculated parameter)	31.6	gm/dl	30 - 36
RDW-CV:	15.6	%	10 - 16
Total Leucocyte count(Impedance)	7180	/cumm.	4000 - 10500
Neutrophils:	53	%	40 - 75
Lymphocytes:	40	%	20 - 40
Eosinophils:	03	%	0 - 6
Monocytes:	04	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.82	Lakhs/c.mm	1.5 - 4.5
MPV	9	fl	6.0 - 11.0
Peripheral Smear (Microscopic examination)			
RBCs:	Hypochromasia(+) , Microcytosis(+)		
WBCs:	Normal		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter.		

Vasanti Gondal
Entered By

Ms Kaveri Gaonkar
Verified By

Dr Milind Patwardhan
M.D(Path)
Chief Pathologist

End of Report
Results are to be correlated clinically

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TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL	
ESR(Westergren Method)			
Erythrocyte Sedimentation Rate:-	20	mm/1st hr	0 - 20

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TEST	RESULTS
Blood Grouping (ABO & Rh)-WB(EDTA) Serum	
ABO Group:	**:B:**
Rh Type:	**Positive**
Method :	Matrix gel card method (forward and reverse)
------	----------

Pooja Surve
Entered By

Ms Kaveri Gaonkar
Verified By

Dr. Milind Patwardhan
M.D(Path)
Chief Pathologist

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Fasting Plasma Glucose :	89	mg/dL	Normal < 100 mg/dL Impaired Fasting glucose : 101 to 125 mg/dL Diabetes Mellitus : >= 126 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Post Prandial Plasma Glucose :	92	mg/dL	Normal < 140 mg/dL Impaired Post Prandial glucose : 140 to 199 mg/dL Diabetes Mellitus : >= 200 mg/dL (on more than one occasion) (American diabetes association guidlines 2016)
Method :	Hexokinase		

Alsaba Shaikh
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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
HbA1c(Glycosylated Haemoglobin)WB-EDTA			
(HbA1C) Glycosylated Haemoglobin :	5.5	%	Normal <5.7 % Pre Diabetic 5.7 - 6.5 % Diabetic >6.5 % Target for Diabetes on therapy < 7.0 % Re-evalution of therapy > 8.0 %
Mean Blood Glucose :	111.15	mg/dL	

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298

Method: High Performance Liquid Chromatography (HPLC).

INTERPRETATION

- The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- Mean blood glucose (MBG) in first 30 days (0-30)before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Neha More
Entered By

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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
LIPID PROFILE - Serum			
S. Cholesterol(Oxidase)	135	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	58	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	11.6	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	**39.2**	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	84.2	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	**3.4**		3.5 - 5
Ratio of LDL/HDL	**2.1**		2.5 - 3.5

Alsaba Shaikh
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
LFT(Liver Function Tests)-Serum			
S.Total Protein (Biuret method)	7.37	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.28	g/dL	3.5 - 5.2
S.Globulin (Calculated)	3.09	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.39		0.9 - 2
S.Total Bilirubin (DPD):	0.58	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.22	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.36	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	17	U/L	5 - 32
S.ALT (SGPT) (IFCC Kinetic with P5P):	13	U/L	5 - 33
S.Alk Phosphatase(pNPP-AMP Kinetic):	94	U/L	35 - 105
S.GGT(IFCC Kinetic):	11	U/L	07 - 32

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TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
	BIOCHEMISTRY		
S.Urea(Urease Method)	31.7	mg/dl	10.0 - 45.0
BUN (Calculated)	14.79	mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	0.61	mg/dl	0.50 - 1.1
BUN / Creatinine Ratio	**24.25**		9:1 - 23:1
S.Uric Acid(Uricase Method)	3.2	mg/dl	2.4 - 5.7

Alsaba Shaikh
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TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
Thyroid (T3,T4,TSH)- Serum			
Total T3 (Tri-iodo Thyronine) (ECLIA)	2.1	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	115.7	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	3.58	IU/ml	Euthyroid :0.35 - 5.50 IU/ml Hyperthyroid : < 0.35 IU/ml Hypothyroid : > 5.50 IU/ml

Grey zone values observed in physiological/therapeutic effect.

Note:

T3 :

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyrodism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

T4 :

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

TSH :

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

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URINE REPORT

TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
PHYSICAL EXAMINATION		
QUANTITY	20 mL	
COLOUR	Yellow	
APPEARANCE	Slightly Hazy	Clear
SEDIMENT	Absent	Absent
CHEMICAL EXAMINATION(Strip Method)		
REACTION(PH)	5.0	4.6 - 8.0
SPECIFIC GRAVITY	1.025	1.005 - 1.030
URINE ALBUMIN	Absent	Absent
URINE SUGAR(Qualitative)	Absent	Absent
KETONES	Absent	Absent
BILE SALTS	Absent	Absent
BILE PIGMENTS	Absent	Absent
UROBILINOGEN	Normal(<1 mg/dl)	Normal
OCCULT BLOOD	**Trace**	Absent
Nitrites	Absent	Absent
MICROSCOPIC EXAMINATION		
PUS CELLS	2 - 3 / hpf	0 - 3/hpf
RED BLOOD CELLS	**Occasional**	Absent
EPITHELIAL CELLS	**4 - 5 / hpf**	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	Absent	Absent

Anushka Chavan
Entered By

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CYTOPATHOLOGY REPORT

Specimen No: AP-127-24

Specimen Adequacy: ADEQUATE

CELLS

ENDOCERVICAL: **Present**
ENDOMETRIAL: Absent
SQUAMOUS: **SUPERFICIAL(++), INTERMEDIATE(+) & PARABASAL(Few) CELLS**
HISTIOCYTES: Absent
RBCs: Absent
POLYMORPHS: **Present(+)**

FLORA

TRICHOMONAS VAGINALIS: Absent
FUNGI: Absent
LACTOBACILLI: Absent

CELLULAR CHANGES

METAPLASIA: **Present**
DYSPLASIA: Absent
MALIGNANT CELL: Absent
ATROPHIC CHANGES: Absent
BARE NUCLEI: Absent
IMPRESSION: **NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY**

Anushka Chavan
Entered By

Ms Kaveri Gaonkar
Verified By

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M.D(Path)
Chief Pathologist

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Vineela, Paruvali
10402

Female

32 Years

27/01/2024 12:22:47
Apollo Clinic
1st Flr,The Emerald,Sector-12,
Vashi, Mumbai-400703

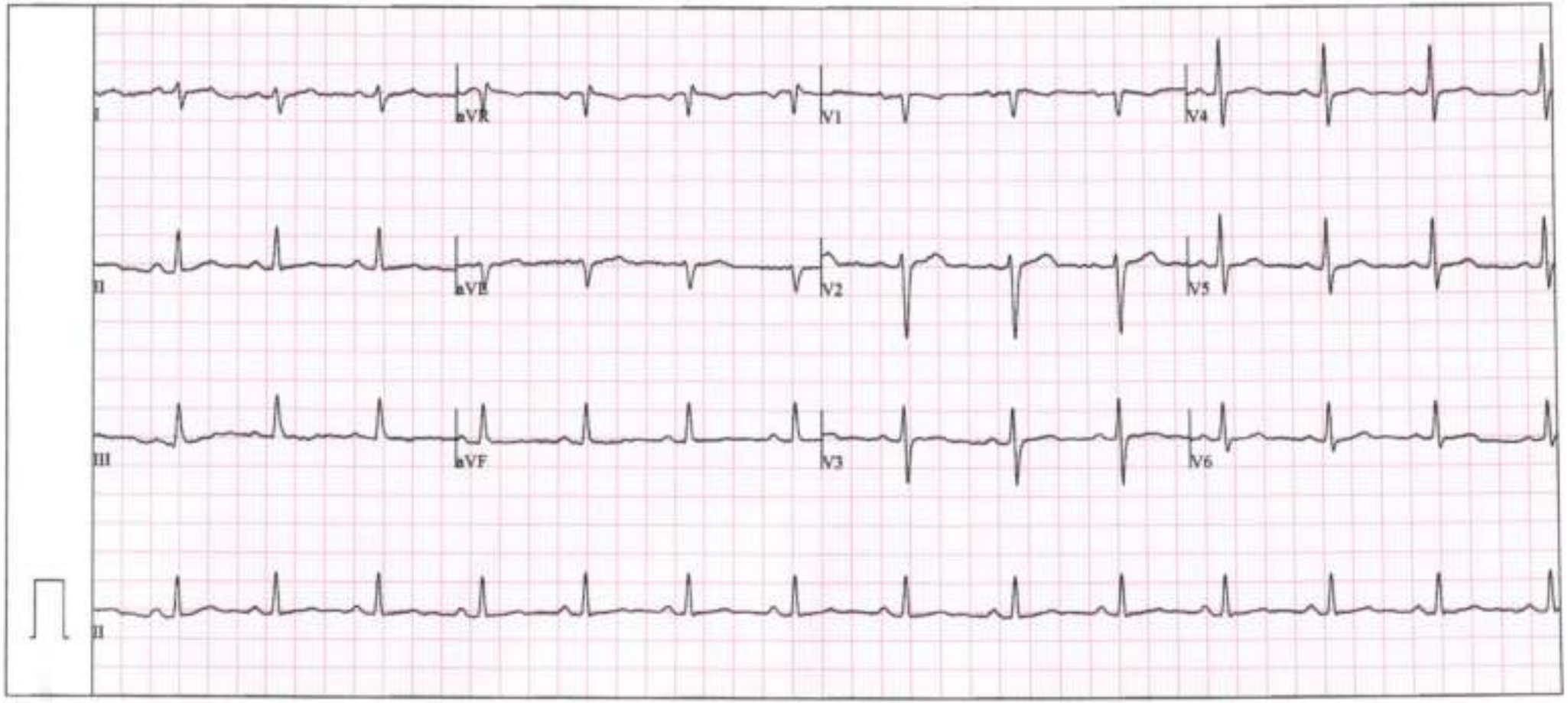
84 bpm
-- / -- mmHg

QRS :	90 ms
QT / QTcBaz :	354 / 418 ms
PR :	154 ms
P :	106 ms
RR / PP :	716 / 714 ms
P / QRS / T :	65 / 97 / 40 degrees

Normal sinus rhythm
Rightward axis
Borderline ECG

RAD.

Dr. ANIRBAN DASGUPTA
M.B.B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0920



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz 50 Hz Unconfirmed 4x2.5x3_25_R1 1/1

Apollo Clinic
The Emerald, Plot No-195/B, Sector-12,
Neel Siddhi Towers, Vashi-400703

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: VINEELA, PERAVALI
Patient ID: 10402
Height:
Weight:

DOB: 21.08.1992
Age: 31yrs
Gender: Female
Race: Asian

Study Date: 27.01.2024
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: --
Attending Physician: DR.ANIRBAN DASGUPTA
Technician: Anita Gaikwad

Medications:
NIL

Medical History:
NIL

Reason for Exercise Test:
Screening for CAD

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:24	0.00	0.00	103	120/80	
	STANDING	00:18	0.00	0.00	86		
	HYPERV.	00:20	0.00	0.00	87		
	WARM-UP	00:14	0.90	0.00	95		
EXERCISE	STAGE 1	03:00	1.70	10.00	134	130/80	
	STAGE 2	03:00	2.50	12.00	162	140/90	
	STAGE 3	00:17	3.40	14.00	166	150/90	
RECOVERY		01:13	0.00	0.00	131	160/90	

The patient exercised according to the BRUCE for 6:16 min:s, achieving a work level of Max. METS: 7.80. The resting heart rate of 97 bpm rose to a maximal heart rate of 169 bpm. This value represents 89 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg , rose to a maximum blood pressure of 160/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR 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 MYOCARDIAL ISCHAEMIA AT THE WORKLOAD ACHIEVED.

Physician-DR.ANIRBAN DASGUPTA

Dr. ANIRBAN DASGUPTA
M.B.,B.S., D.N.B. Medicine
Diploma Cardiology
MMC -2005/02/0929

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VASHI

PATIENT'S NAME	VINEELA PERAVELI	AGE :- 32 YRS/F
UHID NO	10402	27 Jan 2024

DIGITAL RADIOGRAPH OF CHEST (PA VIEW)

The lung fields are clear.

Heart and aorta appears normal.

Both hila appear normal.

Both costo-phrenic angles are clear.

Visualized bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY IS DETECTED IN CURRENT RADIOGRAPH.

Clinico-haematological correlation is recommended.

Thanking you for the referral,
With regards,

DR. SIDDHI PATIL
Cons. Radiologist

Vashi : **M/S. Indira Health & Lifestyle Pvt. Ltd.** The Emerald, 1st Floor, Plot No. 195, Sector - 12, Besides Neel Siddhi Tower, Vashi - Navi Mumbai - 400703.
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USG ABDOMEN AND PELVIS (TAS)

Liver is normal in size, shape and echotexture. There is no focal lesion seen. The portal vein and common bile duct are normal in course and caliber. There is no evidence of intra-hepatic biliary duct dilatation seen. PV = 8.9mm. CBD = 5.0mm.

Gall Bladder is distended with about 2-3 echogenic to hyperechogenic appearing foci seen attached to anterior & posterior wall, with no posterior acoustic shadowing. They measure in the range of 3-4mm. No calculus, abnormal wall thickening or pericholecystic fluid collection is seen.

The visualized **Pancreas** is normal in size, shape and echotexture. There is no focal lesion seen.

Spleen is normal in size, shape and echotexture. There is no focal lesion seen.

Right Kidney measures 9.5 cm x 3.7 cm. **Left Kidney** measures 10.8 cm x 4.1 cm.
Both kidneys are normal in size, shape and echotexture. No evidence of any focal lesion is noted. No hydronephrosis, hydroureter or calculus is noted in both kidney. Cortico medullary differentiation is well maintained.

Urinary Bladder is well distended. There is no evidence of focal lesion. No evidence of any calculus is seen.

Uterus is normal in size , retroverted in shape and normal in echotexture. No evidence of any focal lesion. It measures about 7.1 cm x 4.0 cm x 2.3 cm in size. The endometrium measures 7.8 mm. Both ovaries are unremarkable.

There is no free fluid or abdominal lymphadenopathy.

IMPRESSION: FINDINGS REVEAL:-

- **ABOUT 2-3 SMALL ECHOGENIC TO HYPERECHOGENIC APPEARING FOCI SEEN ATTACHED TO ANTERIOR & POSTERIOR WALL OF GALLBLADDER, WITH NO POSTERIOR ACOUSTIC SHADOWING – REPRESENT EITHER GALLBLADDER POLYPS OR SOFT CALCULI.**
- **NO OTHER SIGNIFICANT ABNORMALITY IS DETECTED AT PRESENT STUDY.**

Clinico-haematological correlation and imaging follow-up is recommended.
Thanking you for the referral,
With regards,

DR. SIDDHI PATIL
Con. Radiologist

• ANDHERI • COLABA • NASHIK • VASHI

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