बैंक ऑफ़ बड़ौदा Bank of Baroda

प्रति,

समन्वयक,
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. VERMA SUNITA DEVI
क.कूसंख्या	158203
पदनाम	BRANCH OPERATIONS
कार्य का स्थान	DHANSURA
जन्म की तारीख	25-06-1979
स्वास्थ्य जांच की प्रस्तावित तारीख	27-07-2024
बुकिंग संदर्भ सं.	24S158203100109070E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **25-07-2024** से **31-03-2025** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-
(मुख्य महाप्रबंधक)
मा.सं.प्र. एवं विपणन
बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.) से संपर्क करें।)

Bank of Baroda

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

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. VERMA SUNITA DEVI
EC NO.	158203
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	DHANSURA
BIRTHDATE	25-06-1979
PROPOSED DATE OF HEALTH CHECKUP	27-07-2024
BOOKING REFERENCE NO.	24S158203100109070E

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 **25-07-2024** till **31-03-2025** 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/-

Chief General Manager
HRM & Marketing Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))

Gmail sunita verma <sunitasv26@gmail.com>

Health Check up Booking Confirmed Request(22E29959),Package Code-PKG10000477, Beneficiary Code-318489

1 message

Mediwheel <wellness@mediwheel.in> Thu, Jul 25, 2024 at 11:35 AM
To: sunitasv26@gmail.com
Cc: customercare@mediwheel.in

Mediwheel
Your wellness partner

011-41195959

Dear **MS. VERMA SUNITA DEVI**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name	:	Mediwheel Full Body Health Checkup Female Above 40
Patient Package Name	:	Mediwheel Full Body Health Checkup Female Above 40
Name of Diagnostic/Hospital	:	Aashka Multispeciality Hospital
Address of Diagnostic/Hospital-	:	Between Sargassan & Reliance Cross Road, Gandhinagar -0382421
City	:	Gandhi Nagar
State	:	Gujarat
Pincode	:	382421
Appointment Date	:	27-07-2024
Confirmation Status	:	Booking Confirmed
Preferred Time	:	8:30am
Booking Status	:	Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MS. VERMA SUNITA DEVI	45 year	Female

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

Please Download Mediwheel App

Gmail sunita verma <sunitasv26@gmail.com>

Health Check up Booking Request(22E29959)

1 message

Mediwheel <wellness@mediwheel.in> Thu, Jul 25, 2024 at 11:15 AM
To: sunitasv26@gmail.com
Cc: customercare@mediwheel.in

Mediwheel
...Your wellness partner

011-41195959

Dear MS. VERMA SUNITA DEVI,

We have received your booking request for the following health checkup, , please upload your approval letter as soon as possible to enable us to confirm your booking.

User Package Name	:	Mediwheel Full Body Health Checkup Female Above 40
Name of Diagnostic/Hospital	:	Aashka Multispeciality Hospital
Address of Diagnostic/Hospital	:	Between Sargassan & Reliance Cross Road, Gandhinagar -0382421
Appointment Date	:	27-07-2024
Preferred Time	:	8:30am

Member Information		
Booked Member Name	Age	Gender
MS. VERMA SUNITA DEVI	45 year	Female

Tests included in this Package

- Urine Analysis
- Blood Group
- Stool Test
- CBC
- Lipid Profile
- Kidney Profile
- Liver Profile
- Blood Glucose (Post Prandial)
- Thyroid Profile
- Urine Sugar Fasting
- Urine Sugar PP
- ESR
- Blood Glucose (Fasting)
- TMT OR 2D ECHO (Any 1) Chosen By Candidate
- Chest X-ray
- ECG
- USG Whole Abdomen
- Mammography//Sonomammography
- Gynae Consultation
- Eye Check-up consultation
- Dental Consultation
- General Physician Consultation

Thanks,
Mediwheel Team
Please Download Mediwheel App

बैंक ऑफ़ बड़ौदा
Bank of Baroda

नाम सुनीता देवी वर्मा
Name SUNITA DEVI VERMA

कर्मचारी कूट क्र.
E.C. No. SV:58203

जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421. Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

DR.KHUSHBOO PATEL
MS (OBS & GYN)
REG. NO. G-31287

UHID: **Date:** 29/7/24 **Time:**

Patient Name: Sunitadevi **Age:** 45Y **Mobile No:**

Complaint and duration:
9 Months Amenorrhea.

History:

Menstrual history: I

Cycles	Flow	Duration of Bleeding	Presence of pain

LMP: NOV, 2023

H/O Associated illnesses:

HTN: **DM:**

Thyroid disorder: Hcho DM on Rx **Others:**

Family History: (NOT)
HCHO Malignancy

Medication history:

Obstetric History : P2L2A1 @FTND /ACH

No of deliveries : **Last child:** CD - 9 Yrs

Allergy History: NAD.

Nutritional Screening: Well-Nourished / Malnourished / Obese

General Examination:

CVS **BP:** **Oedema of ft**

RS CVAD **Wt:** **Tongue**

Breast examination:

P/ P/A - SOB

A

L/E

P/S- cervix Ca-NAD
Vaginitis (+)

P/V Ut RVPE. Ns. B/L fr frem

Provisional Diagnosis: Health check up

Investigation: Pap's smear

Plan of care:

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Follow-up: Review C Report

Consultant's Sign: DR. [illegible]

Aashka Hospitals Ltd.
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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

DR.TAPAS RAVAL
MBBS . D.O
(FELLOW IN PHACO & MEDICAL RATINA)
REG.NO.G-21350

UHID:	**Date:** 27/7/24 **Time:**
Patient Name: Sumitra devi verma	**Age /Sex:** **Height:** **Weight:**
History: Routine eye check-up	
Allergy History: no	
Nutritional Screening: Well-Nourished / Malnourished / Obese	
Examination: AC - NAL Pupil - PL Cataract - CLR VN 6/12 c/g	
Diagnosis:	

Rx

No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration
1		[illegible] eld . 4 time	1/11			
2		[illegible] eld 4 time	1/11			

Eye examination:

	RIGHT			LEFT		
	S	C	A	S	C	A
D	-	-1.50	90	—	plano	—
N	+1.50	-1.50	90	+1.50	-	-

Add → +1.50 6/6

Other Advice:

Follow-up:

Consultant's Sign:

Aashka Hospitals Ltd.
Between Sargasan and Reliance Cross Roads
Sargasan, Gandhinagar - 382421. Gujarat, India
Phone: 079-29750750, +91-7575006000 / 9000
Emergency No.: +91-7575007707 / 9879752777
www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

Doctor Name:- S/B Dr. Shreya (Cell #)

UHID:	OSP 74365	**Date:** 27/7/24	**Time:** 3:50 PM
Patient Name:	Sunitadevi Verma	**Age/Sex:** 45 year / female.	
		Height: 145 cm	
		Weight: ~~52.6 kg~~	

Chief Complain:

Pt come here for health check up

History:

Not known Co-morbidities.

Allergy History: Not known Co-morbidities

Nutritional Screening: Well-Nourished /Malnourished/Obese

Examination:

HR = 84/min

SpO_2 = 96 % on RA

BP = 118/70 mm Hg

All Reports = WNL

Diagnosis:

Pt is fit.

Aashka Hospitals Ltd.
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www.aashkahospitals.in
CIN: L85110GJ2012PLC072647

aashka HOSPITAL

DR. SEJAL J AMIN
B.D.S , M.D.S (PERIODONTIST)
IMPLANTOLOGIST
REG NO: A-12942

UHID: OSP 24365 **Date:** 27/7/24 **Time:** 03:15

Patient Name: Sunitadevi Verma **Age /Sex:** 45/F
Height: 145 cm
Weight: 52.5 kg

Chief Complain:

Swollen gums

History:

Allergy History:

Nutritional Screening: Well-Nourished / Malnourished / Obese

Examination:

Extra oral : Swelling in lower anterior region

Intra oral – Teeth Present :

Teeth Absent :

Diagnosis:

Neuberg Supratech
REFERENCE LABORATORIES
(A unit of Neuberg Diagnostics Private Limited)

LABORATORY REPORT

Name	: SUNITA DEVI VERMA	Sex/Age	: Female/ 45 Years	Case ID	: 40702200911
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	:	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	:	Acc. Remarks	: Normal	Ref Id2	:

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
Blood Glucose Fasting & Postprandial			
Plasma Glucose - F	**124.56**	mg/dL	70.0 - 100
Plasma Glucose - PP	**173.63**	mg/dL	70.0 - 140.0
Haemogram (CBC)			
Platelet Count	**140000**	/µL	150000.00 - 410000.00
Lipid Profile			
LDL Cholesterol	**112.52**	mg/dL	0.00 - 100.00
Liver Function Test			
Proteins (Total)	**8.65**	gm/dL	6.40 - 8.30
Albumin	**5.46**	gm/dL	3.4 - 5
Thyroid Function Test			
TSH	**5.14**	µIU/mL	0.4 - 4.2
ESR	**42**	mm after 1hr	3 - 20
Uric Acid	**6.52**	mg/dL	2.6 - 6.2
Creatinine	**0.46**	mg/dL	0.50 - 1.50

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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COLLEGE of AMERICAN PATHOLOGISTS

Neuberg Diagnostics Private Limited
Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden, Ahmedabad - 380006 079-40408181 / 61618181
contact@neubergsupratech.com
Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi, Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099
www.neubergsupratech.com

LABORATORY REPORT

Name	: **SUNITA DEVI VERMA**	Sex/Age	: **Female/ 45 Years**	Case ID	: **40702200911**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 09:16	Acc. Remarks	: Normal	Ref Id2	:

HAEMOGRAM REPORT

TEST		RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	[Abs]	EXPECTED VALUES	REMARKS
HB AND INDICES							
Haemoglobin		12.3	G%	12.0 - 15.0			
RBC (Electrical Impedance)		4.05	millions/cumm	3.80 - 4.80			
PCV(Calc)		37.10	%	36.00 - 46.00			
MCV (RBC histogram)		91.6	fL	83.00 - 101.00			
MCH (Calc)		30.5	pg	27.00 - 32.00			
MCHC (Calc)		33.3	gm/dL	31.50 - 34.50			
RDW (RBC histogram)		14.60	%	11.00 - 16.00			
TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)							
Total WBC Count		5820	/µL	4000.00 - 10000.00			
	[%]			EXPECTED VALUES	[Abs]	EXPECTED VALUES	
Neutrophil		65.0	%	40.00 - 70.00	3783	/µL 2000.00 - 7000.00	
Lymphocyte		28.0	%	20.00 - 40.00	1630	/µL 1000.00 - 3000.00	
Eosinophil		3.0	%	1.00 - 6.00	175	/µL 20.00 - 500.00	
Monocytes		4.0	%	2.00 - 10.00	233	/µL 200.00 - 1000.00	
Basophil		0.0	%	0.00 - 2.00	0	/µL 0.00 - 100.00	
PLATELET COUNT (Optical)							
Platelet Count	L	**140000**	/µL	150000.00 - 410000.00			
Neut/Lympho Ratio (NLR)		2.32		0.78 - 3.53			
SMEAR STUDY							
RBC Morphology		Normocytic Normochromic RBCs.					
WBC Morphology		Total WBC count within normal limits.					
Platelet		Thrombocytopenia.					
Parasite		Malarial Parasite not seen on smear.					

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D (Pathologist)

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www.neubergsupratech.com

LABORATORY REPORT

Name	: **SUNITA DEVI VERMA**	Sex/Age	: **Female/ 45 Years**	Case ID	: **40702200911**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 10:52	Acc. Remarks	: Normal	Ref Id2	:

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR *Westergren Method*	H **42**	mm after 1hr	3 - 20	

Note :(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: **SUNITA DEVI VERMA**	Sex/Age	: **Female/ 45 Years**	Case ID	: **40702200911**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:

Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Whole Blood EDTA	Mobile No	:
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Report Date and Time	: 27-Jul-2024 09:16	Acc. Remarks	: Normal	Ref Id2	:

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS

HAEMATOLOGY INVESTIGATIONS

BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)
(Both Forward and Reverse Group)

ABO Type	**B**			
Rh Type	**POSITIVE**			

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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www.neubergsupratech.com

LABORATORY REPORT

Name	: **SUNITA DEVI VERMA**	Sex/Age	: **Female/ 45 Years**	Case ID	: **40702200911**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Plasma Fluoride F, Plasma Fluoride PP	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 11:58	Acc. Remarks	: Normal	Ref Id2	:

TEST	RESULTS		UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS					
Blood Glucose Level (Fasting & Post Prandial)					
Plasma Glucose - F	H	**124.56**	mg/dL	70.0 - 100	
Plasma Glucose - PP	H	**173.63**	mg/dL	70.0 - 140.0	

Referance range has been changed as per recent guidelines of ISPAD 2018.

<100 mg/dL : Normal level

100-<126 mg/dL: Impaired fasting glucoseer guidelines

>=126 mg/dL: Probability of Diabetes. Confirm as per guidelines

Note: (LL-VeryLow,L-Low,H-High,HH-VeryHigh A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: **SUNITA DEVI VERMA**	Sex/Age	: **Female/ 45 Years**	Case ID	: **40702200911**
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Whole Blood EDTA	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 09:22	Acc. Remarks	: Normal	Ref Id2	:

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Glycated Haemoglobin Estimation				
HbA1C	**5.55**	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes	
Estimated Avg Glucose (3 Mths) *Calculated*	**112.58**	mg/dL	Not available	

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.

Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.

Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.

Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.

In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.

The A1c target should be individualized based on numerous factors, such as age, life expectancy,comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah
M.D. (Pathologist)

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LABORATORY REPORT

Name	: SUNITA DEVI VERMA	Sex/Age	: Female/ 45 Years	Case ID	: 40702200911
Ref.By	: HOSPITAL	Dis. At	:	Pt. ID	: 4218886
Bill. Loc.	: Aashka hospital			Pt. Loc	:
Reg Date and Time	: 27-Jul-2024 08:38	Sample Type	: Serum	Mobile No	:
Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 10:20	Acc. Remarks	: Normal	Ref Id2	:

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS					
Lipid Profile					
Cholesterol *Colorimetric, CHOD-POD*		**183.87**	mg/dL	110 - 200	
HDL Cholesterol		**54.2**	mg/dL	48 - 77	
Triglyceride *Glycerol Phosphate Oxidase*		**85.73**	mg/dL	<150	
VLDL *Calculated*		**17.15**	mg/dL	10 - 40	
Chol/HDL *Calculated*		**3.39**		0 - 4.1	
LDL Cholesterol *Calculated*	H	**112.52**	mg/dL	0.00 - 100.00	

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal<100	Desirable<200	Low<40	Normal<150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
  Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

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Sample Date and Time	: 27-Jul-2024 08:38	Sample Coll. By	:	Ref Id1	: OSP34365
Report Date and Time	: 27-Jul-2024 10:37	Acc. Remarks	: Normal	Ref Id2	:

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BIOCHEMICAL INVESTIGATIONS					
Liver Function Test					
S.G.P.T. *UV with P5P*		**44.34**	U/L	14 - 59	
S.G.O.T. *UV with P5P*		**32.18**	U/L	15 - 37	
Alkaline Phosphatase *Enzymatic, PNPP-AMP*		**110.38**	U/L	46 - 116	
Gamma Glutamyl Transferase *L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate*		**13.33**	U/L	0 - 38	
Proteins (Total) *Colorimetric, Biuret*	H	**8.65**	gm/dL	6.40 - 8.30	
Albumin *Bromocresol purple*	H	**5.46**	gm/dL	3.4 - 5	
Globulin *Calculated*		**3.19**	gm/dL	2 - 4.1	
A/G Ratio *Calculated*		**1.71**		1.0 - 2.1	
Bilirubin Total *Photometry*		**0.91**	mg/dL	0.3 - 1.2	
Bilirubin Conjugated *Diazotization reaction*		**0.29**	mg/dL	0 - 0.50	
Bilirubin Unconjugated *Calculated*		**0.62**	mg/dL	0 - 0.8	

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Report Date and Time	: 27-Jul-2024 10:20	Acc. Remarks	: Normal	Ref Id2	:

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
BUN (Blood Urea Nitrogen) *GLDH*		**9.9**	mg/dL	7.00 - 18.70	
Uric Acid *Uricase*	H	**6.52**	mg/dL	2.6 - 6.2	
Creatinine	L	**0.46**	mg/dL	0.50 - 1.50	

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Report Date and Time	: 27-Jul-2024 09:43	Acc. Remarks	: Normal	Ref Id2	:

TEST		RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test					
Triiodothyronine (T3)		**83.74**	ng/dL	70 - 204	
Thyroxine (T4) *CMIA*		**10.01**	ng/dL	4.87 - 11.72	
TSH *CMIA*	H	**5.14**	µIU/mL	0.4 - 4.2	

INTERPRETATIONS

- Circulating TSH measurement has been used for screening for euthyroidism, screening and diagnosis for hyperthyroidism & hypothyroidism. Suppressed TSH (<0.01 µIU/mL) suggests a diagnosis of hyperthyroidism and elevated concentration (>7 µIU/mL) suggest hypothyroidism. TSH levels may be affected by acute illness and several medications including dopamine and glucocorticoids. Decreased (low or undetectable) in Graves disease. Increased in TSH secreting pituitary adenoma (secondary hyperthyroidism), PRTH and in hypothalamic disease thyrotropin (tertiary hyperthyroidism). Elevated in hypothyroidism (along with decreased T4) except for pituitary & hypothalamic disease.
- Mild to modest elevations in patient with normal T3 & T4 levels indicates impaired thyroid hormone reserves & incipent hypothyroidism (subclinical hypothyroidism).
- Mild to modest decrease with normal T3 & T4 indicates subclinical hyperthyroidism.
- Degree of TSH suppression does not reflect the severity of hyperthyroidism, therefore, measurement of free thyroid hormone levels is required in patient with a supressed TSH level.

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone.
Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in pregnancy	**Reference range (microIU/ml)**
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

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Interpretation Note:
Ultra sensitive-thyroid–stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone.Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test). when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.
Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.
Normal ranges of TSH & thyroid hormons vary according trimesper in pregnancy.

TSH ref range in Pregnacy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

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Report Date and Time	: 27-Jul-2024 09:16	Acc. Remarks	: Normal	Ref Id2	:

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)				
Physical examination				
Colour	**Pale yellow**			
Transparency	**Clear**			
Chemical Examination By Sysmex UC-3500				
Sp.Gravity	**1.025**		1.003 - 1.035	
pH	**5.5**		4.6 - 8	
Leucocytes (ESTERASE)	**Negative**		Negative	
Protein	**Negative**		Negative	
Glucose	**Negative**		Negative	
Ketone Bodies Urine	**Negative**		Negative	
Urobilinogen	**Negative**		Negative	
Bilirubin	**Negative**		Negative	
Blood	**Negative**		Negative	
Nitrite	**Negative**		Negative	
Flowcytometric Examination By Sysmex UF-5000				
Leucocyte	**Nil**	/HPF	Nil	
Red Blood Cell	**Nil**	/HPF	Nil	
Epithelial Cell	**Present +**	/HPF	Present(+)	
Bacteria	**Nil**	/µL	Nil	
Yeast	**Nil**	/µL	Nil	
Cast	**Nil**	/HPF	Nil	
Crystals	**Nil**	/HPF	Nil	

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Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notifications				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Pending Services
Liquid Base Cytology PAP

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

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

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CIN: L85110GJ2012PLC072647

aashka HOSPITAL

PATIENT NAME:SUNITA DEVI VERMA
GENDER/AGE:Female / 45 Years **DATE:27/07/24**
DOCTOR:
OPDNO:OSP34365

X-RAY CHEST PA

Both lung fields show increased broncho-vascular markings.
No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.
Both hilar shadows and C.P. angles are normal.
Heart shadow appears normal in size. Aorta appears normal.
Bony thorax and both domes of diaphragm appear normal.
No evidence of cervical rib is seen on either side.

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aashka HOSPITAL

PATIENT NAME:SUNITA DEVI VERMA
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DOCTOR:
OPDNO:OSP34365

BILATERAL MAMMOGRAM

Dedicated digital mammography with Craniocaudal and medio lateral oblique view was performed.

Fibrofatty and glandular parenchyma is noted on either side. No definite evidence of mass, abnormal microcalcification or architectural distortion is seen. No evidence of skin thickening or nipple retraction is seen.

COMMENT: Normal mammography and sonography of breast on either side (BIRADS - Category - I).

BIRADS Categories:

0 Need imaging evaluation.
I Negative.
II Benign finding.
III Probably benign finding.
IV Suspicious abnormality.
V Highly suggestive of malignancy.
VI Biopsy proven malignancy.

The false negative mammography is approximately 10%. Management of a palpable abnormality must be based upon clinical grounds.

Screening mammogram:

Women with no symptoms
AGE: 35-39: Baseline study.
AGE: 40-49: Every 1-2 years
AGE: 50 and above: Every year

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DOCTOR:DR.HASIT JOSHI
OPDNO:OSP34365

2D-ECHO

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 29mm	
LEFT ATRIUM	: 32mm	
LV Dd / Ds	: 35/24mm	EF 60%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: INTACT	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/0.7m/s	
AORTIC	: 1.3m/s	
PULMONARY	: 0.9m/s	
COLOUR DOPPLER	: TRIVIAL MR/TR	
RVSP	:	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST
DR.HASIT JOSHI (9825012235)

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PATIENT NAME:SUNITA DEVI VERMA
GENDER/AGE:Female / 45 Years **DATE:27/07/24**
DOCTOR:
OPDNO:OSP34365

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and shows increased parenchymal echoes. No evidence of focal lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

GALL BLADDER: Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

PANCREAS: Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

SPLEEN: Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

KIDNEYS: Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 10.0 x 4.5 cms in size.
Left kidney measures about 9.6 x 4.4 cms in size.
No evidence of suprarenal mass lesion is seen on either side.
Aorta, IVC and para aortic region appears normal.
No evidence of ascites is seen.

BLADDER: Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 146 cc.

UTERUS: Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 6 mm. No evidence of uterine mass lesion is seen.

Bilateral adenxa appears normal.

COMMENT: Grade I fatty changes in liver.
Normal sonographic appearance of GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

DR. SNEHAL PRAJAPATI
CONSULTANT RADIOLOGIST

, Sunitadevi

27.07.2024 11:01:07 AM
AASHKA HOSPITAL LTD.
SARGASAN
GANDHINAGAR

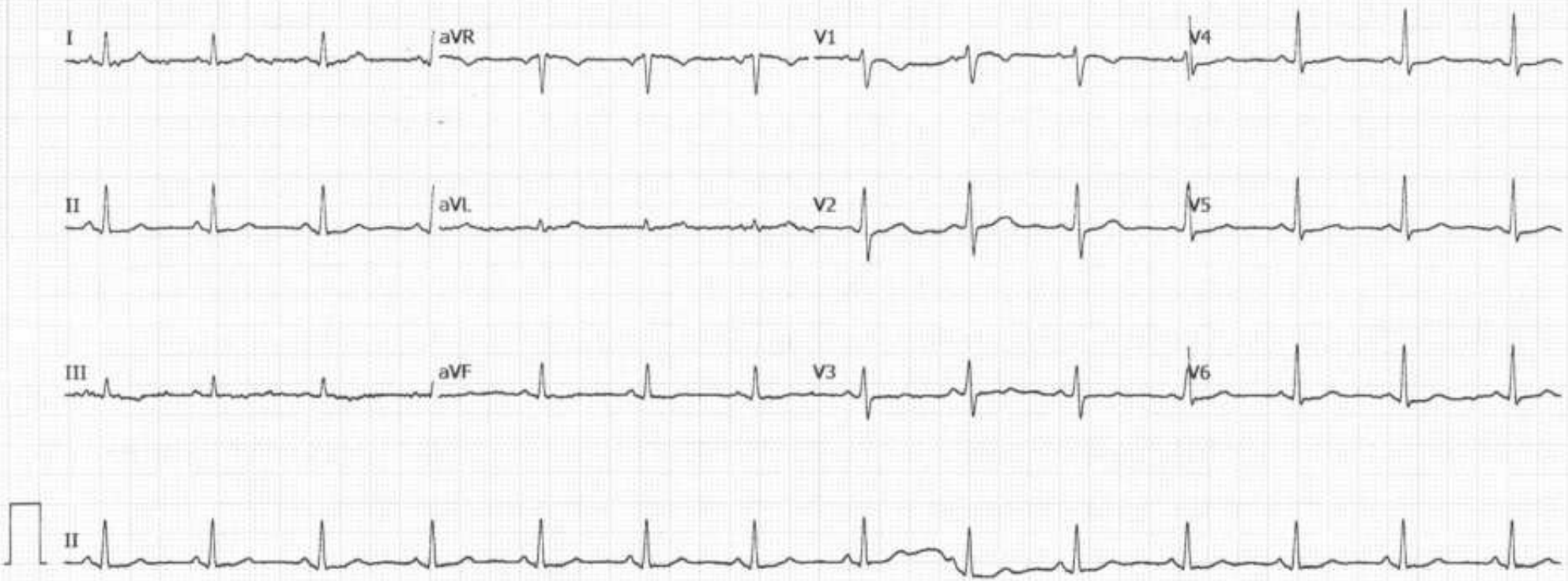
Location: 1
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

83 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS :	78 ms	Normal sinus rhythm
QT / QTcBaz :	372 / 437 ms	Normal ECG
PR :	118 ms	
P :	92 ms	
RR / PP :	722 / 722 ms	
P / QRS / T :	56 / 53 / 7 degrees	



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