



Dr. Sushil Anturlikar  
MD (Medicine)  
Consultant : Physician  
Reg. No.:2009/04/1772  
Ashoka Medicover Hospitals, Nashik



A Unit of Sahrudaya Health Care Private Limited

Mrs. Shobha Pawar/F/39yr

16/9/24

Came for Health Check up

No co-morbidities

vitals stable

Inx reports noted.

- Diabetic Diet

-30 mins of brisk walking

Gynaec Consultation

Dr. Sushil Anturlikar  
MD (Medicine)  
Consultant : Physician  
Reg. No.:2009/04/1772  
Ashoka Medicover Hospitals, Nashik



**LABORATORY REPORT : HAEMATOLOGY**

<b>Name</b> : Mrs. SHOBHA KEHAV PAWAR	<b>Age /Sex</b> : 39Y Y(s)/FEMALE
<b>Bill Date</b> : 16-Sep-2024 10:13 AM	<b>UMR No.</b> : 362409000971
<b>Rec. Dt</b> : 16-Sep-2024 11:43 AM	<b>Bill No.</b> : MCB36240904337
<b>Rept. Dt</b> : 16-Sep-2024 02:13 PM	<b>Result No</b> : RSK240914829
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030361
<b>Sample Type</b> : WHOLE BLOOD	

**CBP(COMPLETE BLOOD PICTURE)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>HEMOGLOBIN</b> <i>Photometric</i>	12.5	12.0 - 15.0	gms/dL
<b>R B C COUNT</b> <i>Electrical Impedance</i>	5.38 *	3.8 - 4.8 10 <sup>12</sup> /L	10 <sup>12</sup> /L
<b>PCV/HCT</b> <i>Calculated</i>	36.9	36 - 46	%
<b>MCV</b> <i>Calculated</i>	68.6 *	83 - 101	fl
<b>MCH</b> <i>Calculated</i>	23.2 *	27 - 32	pg
<b>MCHC</b> <i>Calculated</i>	33.9	31 - 37	g/dL
<b>RDW(cv)</b>	16.5 *	11.6 - 14.0 %	%
<b>TLC (TOTAL LEUCOCYTE COUNT)</b> <i>Impedance</i>	10.07 *	4.0 - 10.0	10 <sup>3</sup> /μl
<b>DIFFERENTIAL COUNT</b>			
<b>NEUTROPHILS</b> <i>DHSS/Microscopy</i>	55	40 - 80 %	
<b>LYMPHOCYTES</b> <i>DHSS/Microscopy</i>	38	20 - 40 %	

*P. S. Joshi*  
Pratiksha Joshi  
CONSULTANT PATHOLOGIST, MBBS,  
DCP





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<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030361
<b>Sample Type</b> : WHOLE BLOOD	

<b>MONOCYTES</b> <i>DHSS/Microscopy</i>	06	02 - 10 %	
<b>EOSINOPHILS</b> <i>DHSS/Microscopy</i>	01	00 - 06 %	
<b>BASOPHILS</b> <i>DHSS/Microscopy</i>	00	00 - 01 %	
<b>PLATELET COUNT</b> <i>Electrical Impedance</i>	397	150 - 400 $10^3/\mu\text{L}$	$10^3/\mu\text{L}$

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

*P. S. Med*

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<b>Rept. Dt</b> : 16-Sep-2024 01:39 PM	<b>Result No</b> : RSK240914830
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030362
<b>Sample Type</b> : WHOLE BLOOD	

**ESR**

**Parameters**

**Result**

**Reference Range**

**Units**

ESR

20

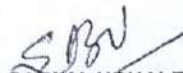
0 - 20

mm/1st hour

MODIFIED WESTERGRENS  
METHOD

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
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**LABORATORY REPORT : BLOOD BANK**

<b>Name</b> : Mrs. SHOBHA KEHAV PAWAR	<b>Age /Sex</b> : 39Y Y(s)/FEMALE
<b>Bill Date</b> : 16-Sep-2024 10:13 AM	<b>UMR No.</b> : 362409000971
<b>Rec. Dt</b> : 16-Sep-2024 11:43 AM	<b>Bill No.</b> : MCB36240904337
<b>Rept. Dt</b> : 16-Sep-2024 01:33 PM	<b>Result No</b> : RSK240914831
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030363
<b>Sample Type</b> : WHOLE BLOOD	

**BLOOD GROUPING AND RH**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>BLOOD GROUP</b> <i>Automated microcolumn gel method</i>	O		
<b>RH TYPE</b>	POSITIVE		

**INTERPRETATION**

1. If Rh is Du positive it is best considered as Rh negative as recipient and Rh positive as donor. Proper Cross matching is recommended before transfusion.
2. In case of forward and reverse grouping discrepancy, clinical correlation and repeat sample analysis is recommended.
3. For Infants below 6 months only forward grouping is performed.
4. A sub-grouping is recommended after the age of 6 months.

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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**LABORATORY REPORT : CLINICAL PATHOLOGY**

<b>Name</b> : Mrs. SHOBHA KEHAV PAWAR	<b>Age /Sex</b> : 39Y Y(s)/FEMALE
<b>Bill Date</b> : 16-Sep-2024 10:13 AM	<b>UMR No.</b> : 362409000971
<b>Rec. Dt</b> : 16-Sep-2024 12:25 PM	<b>Bill No.</b> : MCB36240904337
<b>Rept. Dt</b> : 16-Sep-2024 01:38 PM	<b>Result No</b> : RSK240914779
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030330
<b>Sample Type</b> : URINE	

**CUE(COMPLETE URINE EXAMINATION)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>PHYSICAL EXAMINATION</b>			
<b>COLOUR</b>	PALE YELLOW	PALE YELLOW	
<b>APPEARANCE</b>	CLEAR	CLEAR	
<b>BLOOD</b>	PRESENT (TRACE)		
<b>SPECIFIC GRAVITY</b> <i>Bromthymol blue</i>	1.010	1.000 - 1.030	
<b>CHEMICAL EXAMINATION</b>			
<b>PH</b> <i>Bromthymol blue</i>	6.0	5.0 - 8.0	
<b>PROTEIN</b> <i>Tetra-bromophenol blue/Heat coagulation test</i>	ABSENT	NIL (<15 mg/dL)	
<b>GLUCOSE</b> <i>Glucose oxidase Peroxidase/Benedict?s test</i>	ABSENT	NIL (<25 mg/dL)	
<b>UROBILINOGEN</b> <i>Diazonium salt</i>	ABSENT	NIL	
<b>KETONE</b> <i>Sodium nitroprusside/Rothera?s test.</i>	ABSENT	NIL (<5 mg/dL)	

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<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030330
<b>Sample Type</b> : URINE	

**BILIRUBIN** ABSENT NIL (<0.5 mg/dL)  
*Diazonium salt/Fouchets test*

**NITRITE** ABSENT NEGATIVE  
*Sulfanilic acid*

**MICROSCOPIC EXAMINATION**

**PUS CELLS** 1-2 0 - 5 /hpf

**RBC** OCCASIONAL 0 - 5 /hpf

**EPITHELIAL CELLS** 1-2 0 - 5 hpf

**CRYSTALS** ABSENT NIL

**CASTS** ABSENT NIL

**BACTERIA** ABSENT NIL

**INTERPRETATION**

The colour fields of chemicals correspond to the following values:

1. Proteins: neg (negative), 30-99 (+), 100-499 (++) , >500 (+++) mg/dl
2. Ketones: neg. (negative), 5 (Trace), 15-49 (+), 50-149 (++) , >150 (+++) mg/dl
3. Glucose: norm. (normal), 50-149 (+), 150-499 (++) , 500-999 (+++) , >1000 (++++) mg/dl
4. Bilirubin: neg (negative), 1 (+), 3 (++) , 6 (+++) mg/ dl
5. Urobilinogen: norm. (normal), 2 (+), 4 (++) , 8 (+++) , 12 (++++) mg/dl.

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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**LABORATORY REPORT : BIOCHEMISTRY**

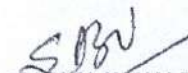
<b>Name</b> : Mrs. SHOBHA KEHAV PAWAR	<b>Age /Sex</b> : 39Y Y(s)/FEMALE
<b>Bill Date</b> : 16-Sep-2024 10:13 AM	<b>UMR No.</b> : 362409000971
<b>Rec. Dt</b> : 16-Sep-2024 11:56 AM	<b>Bill No.</b> : MCB36240904337
<b>Rept. Dt</b> : 16-Sep-2024 12:59 PM	<b>Result No</b> : RSK240914832
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030364
<b>Sample Type</b> : SERUM	

**SERUM URIC ACID**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
SERUM URIC ACID <i>uricase</i>	5.5	2.4-5.7	mg/dL

Suggested Clinical Correlation \* If neccessary, Please discuss

\*\*\* End Of Report \*\*\*

  
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<b>Rept. Dt</b> : 16-Sep-2024 12:59 PM	<b>Result No</b> : RSK240914833
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030364
<b>Sample Type</b> : SERUM	

**LFT(LIVER FUNCTION TEST)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>TOTAL PROTEINS</b> <i>Biuret method</i>	7.96	6.0 - 8.0 g/dL	g/dL
<b>SERUM ALBUMIN</b> <i>Bromcresol Green (BCG)</i>	4.70	3.5 - 5.2 g/dL	g/dL
<b>GLOBULINS</b> <i>Calculated</i>	3.26	2.5 - 3.5 g/dL	g/dL
<b>A/G RATIO</b> <i>Calculation</i>	1 *	1.2 - 2.5	
<b>SGPT (ALT)</b> <i>UV without P5P</i>	18.8	<=33	U/L
<b>SGOT (AST)</b> <i>UV without P5P</i>	19.7	<= 32	U/L
<b>TOTAL BILIRUBIN</b> <i>DIAZO</i>	0.44	<1.2	mg/dL
<b>DIRECT BILIRUBIN</b> <i>DIAZO</i>	0.12	<=0.20	mg/dL
<b>INDIRECT BILIRUBIN</b> <i>Calculated</i>	0.32	<=1.0	mg/dL
<b>ALKALINE PHOSPHATASE (ALP)</b> <i>PNPP, AMP Buffer - IFCC Ref.</i>	36	35 - 105	U/L

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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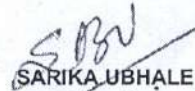
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Bill Date	: 16-Sep-2024 10:13 AM	UMR No.	: 362409000971
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Rept. Dt	: 16-Sep-2024 01:13 PM	Result No	: RSK240914834
Ref By	: Dr. ER PHYSICIAN	Sample ID	: MCN367030364
Sample Type	: SERUM		

**BUN(BLOOD UREA NITROGEN)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
BLOOD UREA <i>Urease kinetic</i>	19.1	16.6 - 48.5	mg/dL
BUN (Blood Urea Nitrogen.)	8.92		

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
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**LABORATORY REPORT : BIOCHEMISTRY**

Name	: Mrs. SHOBHA KEHAV PAWAR	Age /Sex	: 39Y Y(s)/FEMALE
Bill Date	: 16-Sep-2024 10:13 AM	UMR No.	: 362409000971
Rec. Dt	: 16-Sep-2024 11:56 AM	Bill No.	: MCB36240904337
Rept. Dt	: 16-Sep-2024 02:13 PM	Result No	: RSK240914835
Ref By	: Dr. ER PHYSICIAN	Sample ID	: MCN367030365
Sample Type	: SERUM		

**HBA1C (GLYCOSYLATED HAEMOGLOBIN)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
HBA1C Enzymatic	7.37 *	" Normal : < 5.7% Pre diabetic : 5.7 % - 6.5 % Diabetic : > 6.5 %	%

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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<b>Rept. Dt</b>	: 16-Sep-2024 12:59 PM	<b>Result No</b>	: RSK240914836
<b>Ref By</b>	: Dr. ER PHYSICIAN	<b>Sample ID</b>	: MCN367030364
<b>Sample Type</b>	: SERUM		

**LIPID PROFILE**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>TOTAL CHOLESTEROL</b> <i>Enzymatic colorimetric</i>	193.8	Desirable :: < 200 mg/dL Borderline High :: 200 - 239 mg/dL High risk : > 240 mg/dL	mg/dL
<b>SERUM TRYGLYCERIDES</b> <i>Enzymatic colorimetric</i>	147.6	< 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL	mg/dL
<b>HDL CHOLESTEROL</b> <i>Homogeneous enzymatic colorimetric</i>	51.8	Low :: < 40 mg/dL High :: > 60 mg/dL	mg/dL
<b>LDL CHOLESTEROL</b> <i>Direct-Enzymatic colorimetric</i>	120.5 *	Very High : - > 190 mg/dL Optimal : - < 100 mg/dL Near Optimal : 100 - 129 mg/dL High : 160 - 189 mg/dL Borderline High:130-159 mg/dl	mg/dL
<b>VLDL</b> <i>Calculation</i>	29.52	2 - 30 mg/dL	mg/dL
<b>LDL/HDL RATIO</b>	2.33		
<b>CHO/HDL RATIO</b> <i>Calculation</i>	3.74 *	Normal : - < 3.5 High Risk : - > 5.0	

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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<b>Rept. Dt</b>	: 16-Sep-2024 12:59 PM	<b>Result No</b>	: RSK240914837
<b>Ref By</b>	: Dr. ER PHYSICIAN	<b>Sample ID</b>	: MCN367030366
<b>Sample Type</b>	: PLASMA		

**FBS (FASTING BLOOD GLUCOSE WITH URINE GLUCOSE)**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
<b>FASTING BLOOD GLUCOSE</b> <i>Hexokinase</i>	<b>105.5 *</b>	Normal Range : 70 - 99 Impaired Glucose tolerance : 100 -125 Diabetes Mellitus : >=126	mg/dL

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

*SUB*  
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**LABORATORY REPORT : BIOCHEMISTRY**

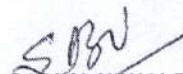
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Rept. Dt	: 16-Sep-2024 12:59 PM	Result No	: RSK240914838
Ref By	: Dr. ER PHYSICIAN	Sample ID	: MCN367030364
Sample Type	: SERUM		

**SERUM CREATININE**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
CREATININE <i>Jaffe</i>	0.64	0.5 - 0.9	mg/dL

Suggested Clinical Correlation \* If neccessary, Please discuss

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<b>Rept. Dt</b> : 16-Sep-2024 02:13 PM	<b>Result No</b> : RSK240914839
<b>Ref By</b> : Dr. ER PHYSICIAN	<b>Sample ID</b> : MCN367030364
<b>Sample Type</b> : SERUM	

**T3,T4 AND TSH**

<u>Parameters</u>	<u>Result</u>	<u>Reference Range</u>	<u>Units</u>
T3 ECLIA	1.13	0.8 - 2.0	ng/mL
T4 ECLIA	7.54	5.1 - 14.1	ug/dL
TSH(THYROID STIMULATING HORMONE) ECLIA	1.87	0.270 - 4.20	uIU/mL

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

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CONSULTANT PATHOLOGIST, MBBS,  
DCP



ASHOKA

MEDICOVER  
HOSPITALS

A Unit of Sahrudaya Health Care Private Limited

Patient ID:	362409000971	Patient Name:	SHOBHA PAWAR 39Y/F OP HC
Age:		Sex:	F
Accession Number:		Modality:	DX
Referring Physician:	DR.ER.PHYSICIAN	Study:	Chest
Study Date:	16-Sep-2024		

X RAY CHEST PA VIEW

Prominent bronchovascular markings in both lungs.

Rest of the lungs are normal.

Hila are normal.

CP angles are normal.

Cardiac size normal.

Domes of the diaphragm are normal.

Bony cage and soft tissues are normal.

IMPRESSION:

- Prominent bronchovascular markings in both lungs.

Clinical correlation is suggested.

DR. KUNAL KALYANRAO PATIL  
MBBS, M.D. (RADIO DIAGNOSIS)  
Consultant Radiologist

Date: 16-Sep-2024 12:23:02



**ASHOKA****MEDICOVER  
HOSPITALS**

A Unit of Sahrudaya Health Care Private Limited

Patient ID:	362409000971	Patient Name:	SHOBHA PAWAR 39Y/F OP
Age:		Sex:	
Accession Number:		Modality:	US
Referring Physician:		Study:	
Study Date:	16-Sep-2024		

**ULTRASOUND REPORT – ABDOMEN & PELVIS**

**LIVER:** Is normal in size (15.4cm) with mildly raised parenchymal echotexture. No mass lesion. No IHBRD. Portal vein is normal. CBD is normal.

**GALL BLADDER:** Is distended. Luminal surface is regular. No gall stones. No pericholecystic collection. Wall thickness is normal.

**SPLEEN:** Is normal in size (8.5cm) and shows normal echotexture. No focal lesion.

**PANCREAS:** Head and body appear normal. Tail is obscured by bowel gases. Para aortic region appears normal.

**KIDNEYS:**

Both kidneys are normal in size & show normal parenchymal echogenicity with maintained CMD.

Right kidney measures 9.5x3.3 cm. No calculus identified. No hydronephrosis. Ureter is not dilated.

Left kidney measures 10.5x4.2 cm. No calculus identified. No hydronephrosis. Ureter is not dilated.

**URINARY BLADDER:** Is well distended. Lumen is clear. Wall thickness is normal.

**UTERUS:** Is anteverted and normal. It shows uniform myometrial echotexture. Endometrium measures 8.4mm. Cervix is bulky and echogenic with multiple subcm nabothian cysts within.

**OVARY:** Both ovaries are normal in size. Right ovary measures 2.0x1.3cm. Left ovary measures 1.9x1.8cm.

Bowel loops not dilated.

No ascites.

**IMPRESSION:**

- Grade I fatty liver.
- Bulky and echogenic cervix with multiple subcm nabothian cysts within. Advice further evaluation to rule out cervicitis.

**Suggested clinical correlation.**

**DR. PRADIP KHAIRE**  
(MBBS, MD)  
CONSULTANT RADIOLOGIST

Date: 16-Sep-2024 13:32:44





ASHOKA

MEDICOVER  
HOSPITALS

A Unit of Sahajaya Health Care Private Limited

## Transthoracic Echocardiography Report

NAME: Mrs. Shobha K. Pawar

AGE / SEX: 39year /M

UMR No: 362409000971

DATE:16/09/2024

### Comments on Echo Doppler evaluation

DIMENSIONS			
	In mm		In mm
Left Ventricle (ED)	43	Left Ventricle (ES)	24
Aorta	20	Left Atrium	21
IVS Thickness (ED)	08	LVPW Thickness (ED)	08
Right Ventricular (ED)			
LV EF	60-65 %.		

- All valves are structurally normal
- Normal dimensions of all cardiac chambers. LV is of normal shape, with normal cavity size & normal wall thickness
- No regional wall motion abnormalities at rest.
- Normal left ventricular systolic function. The LVEF is 60-65 %.
- No Diastolic Dysfunction.
- No PH.
- There are no intracardiac clots or vegetation. No pericardial effusion.
- IVC collapsing with inspiration. Normal Arch.

### Summary :

- Normal dimensions of all cardiac chambers.
- Normal biventricular systolic function, LVEF = 60-65%

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Note: A Normal echo does not rule out CAD. To correlate clinically.



362409000971

SHOBHA PAWAR

16-Sep-24 10:47:56 AM

39 Years

Female

ASHOKA MEDICOVER NASHIK

Rate 78 . Sinus rhythm.....normal P axis, V-rate 50- 99  
 RR 769 . Minimal ST depression, inferior leads.....ST <-0.04mV, II III aVF  
 PR 122  
 QRSD 90  
 QT 380  
 QTc 433

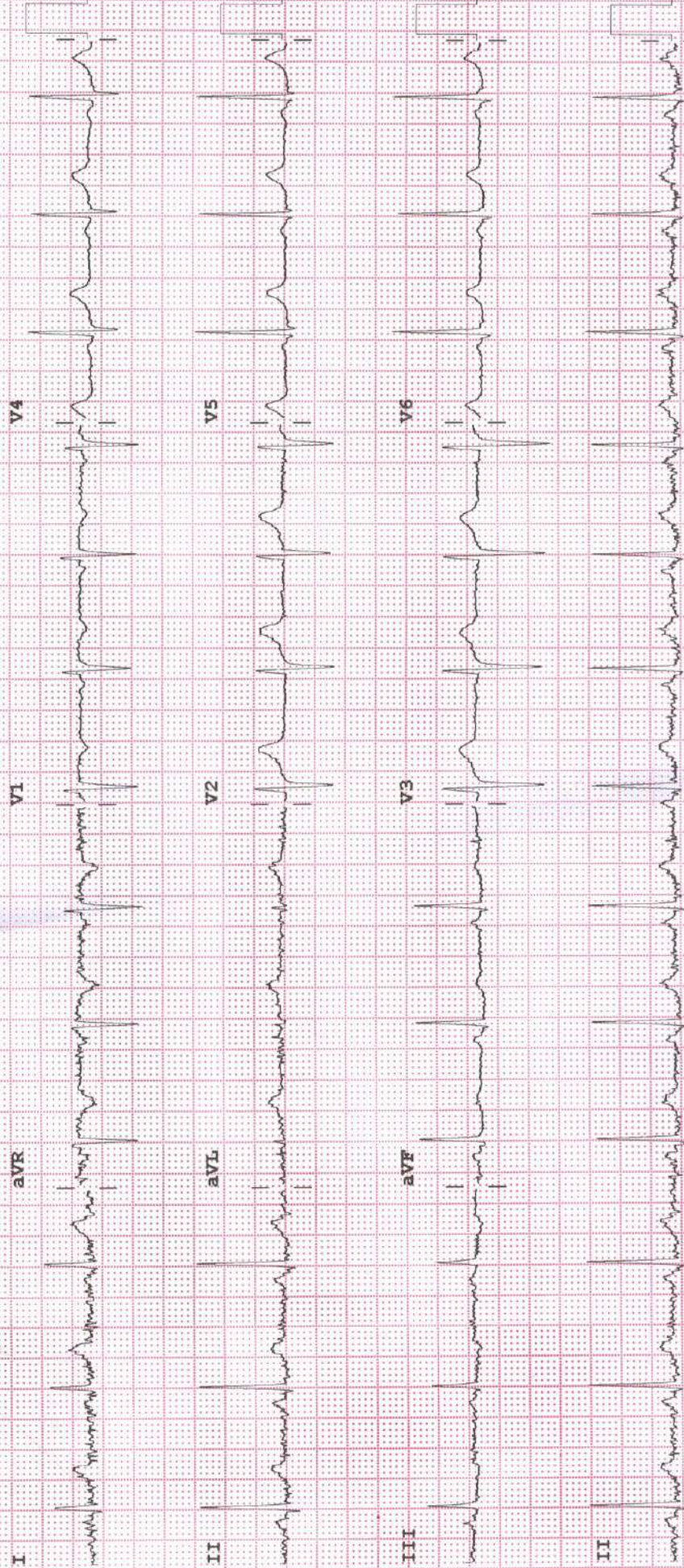
--AXIS--

P 56  
 QRS 59  
 T 10

12 Lead; Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device: CN1222350 Speed: 25 mm/sec Limb: 10 mm/mv Chest: 10.0 mm/mv

F 50~ 0.15-100 Hz

100B CL?

P?