

mob- 8154991711

DOB-18-04-1988

Add: A 201 saked Residency,

HR SUKAR School

New cor Road

chundkhedly

Ahmedusid - 388 484



प्रति.

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

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. GOSWAMI VAISHALI HITENDRAGIRI
क.कू.संख्या	
पदनाम	78169
कार्य का स्थान	CREDIT
जन्म की तारीख	AHMEDABAD, CHANDKHEDA
	18-04-1988
न्वास्थ्य जांच की प्रस्तावित तारीख	23-03-2024
ुिकंग संदर्भ सं.	23M78169100098338E

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 07-03-2024 से 31-03-2024 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)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



LABORATORY REPORT Name Mrs. Vaishaliben H Goswami Sex/Age Female/35 Years Reg. No 403101583 Ref. By Reg. Date 23-Mar-2024 05:41 PM **Client Name** Mediwheel Collected On Report Date 26-Mar-2024 04:07 PM

# **Medical Summary**

# GENERAL EXAMINATION

Height (cms):146

Weight (kgs):60.2

Blood Pressure: 110/70mmHg

Pulse: 71/Min

No Clubbing/Cynosis/Pallor/PedelOedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy – N/A



This is an electronically authenticated report

M.D, GENERAL MEDICINE

DR.MUKESH LADDHA

Page 3 of 5







**TEST REPORT** Reg. No : 403101583 Ref Id Collected On : 23-Mar-2024 09:41 AM Name : Mrs. Vaishaliben H Goswami Reg. Date : 23-Mar-2024 05:41 PM Age/Sex : 35 Years / Female Pass. No. Tele No. : 8154991711 Ref. By Dispatch At Sample Type : EDTA Location : CHPL Parameter Results Unit Biological Ref. Interval COMPLETE BLOOD COUNT (CBC) Hemoglobin (Colorimetric method) L 10.8 g/dL 12.5 - 16 Hematrocrit (Calculated) L 33.40 40 - 50 RBC Count (Electrical Impedance) L 4.28 million/cmm 4.73 - 5.5 MCV (Calculated) L 78.1 fL 83 - 101 MCH (Calculated) L 25.3 Pg 27 - 32 MCHC (Calculated) 32.5 % 31.5 - 34.5 RDW (Calculated) H 15.8 11.5 - 14.5 WBC Count Flowcytometry with manual Microscopy 7470 /cmm 4000 - 10000 MPV (Calculated) 10.8 fL 6.5 - 12.0 DIFFERENTIAL WBC COUNT [%] **EXPECTED VALUES** [Abs] EXPECTED VALUES Neutrophils (%) 63.10 % 40 - 80 4714 /cmm 2000 - 7000 Lymphocytes (%) 26.10 % 20 - 40 1950 /cmm 1000 - 3000 Eosinophils (%) 1.80 0-6 657 /cmm 200 - 1000 Monocytes (%) 8.80 % 2 - 10 134 /cmm Basophils (%) /cmm 0 - 100 PERIPHERAL SMEAR STUDY **RBC** Morphology Mild Microcytic and Hypochromic WBC Morphology Normal PLATELET COUNTS Platelet Count (Electrical Impedance) 348000 /cmm 150000 - 450000 Electrical Impedance Platelets Platelets are adequate with normal morphology. Parasites Malarial parasite is not detected.

This is an electronically authenticated report.

Comment

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05:4:

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075

<sup>\*</sup> This test has been out sourced.







Reg. No

: 403101583

Ref Id

: Mrs. Vaishaliben H Goswami

Age/Sex Ref. By

Name

: 35 Years

/ Female Pass. No. Collected On

: 23-Mar-2024 09:41 AM

Reg. Date

: 23-Mar-2024 05:41 PM

Tele No.

: 8154991711

Dispatch At

Location

: CHPL

Sample Type : EDTA Parameter

Result

Unit

Biological Ref. Interval

#### HEMATOLOGY

#### **BLOOD GROUP & RH**

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO

"B"

Rh (D)

Positive

Note

# ERYTHROCYTE SEDIMANTATION RATE [ESR]

ESR 1 hour Westergreen method

02

ESR AT 1 hour: 3-12

# ERYTHRO SEDIMENTION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non - specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in prenancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (o-1mm) in polycythaemia, hypofibrinogenemia or or congestive cardiac failure and when there are abnormalities or the red cells such as poikilocytosis, spherocytosis or sickle cells.

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05:4

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075

'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat

+91 79 4039 2653

📞+91 75730 30001 💌 info@curovis.co.in 😊 www.curovis.co.in





Pass. No.



**TEST REPORT** Reg. No : 403101583 Ref Id

Name : Mrs. Vaishaliben H Goswami

Age/Sex : 35 Years / Female

Ref. By

Sample Type: Flouride F, Flouride PP

Collected On

: 23-Mar-2024 12:41 PM

Reg. Date

: 23-Mar-2024 05:41 PM

Tele No.

: 8154991711

Dispatch At

Location : CHPL

Parameter Result Unit Biological Ref. Interval

**BIO - CHEMISTRY** 

Fasting Blood Sugar (FBS)

GOD-POD Method

Post Prandial Blood Sugar (PPBS) GOD-POD Method

92.60 107.0

mg/dL

70 - 110

mg/dL

70 - 140

This is an electronically authenticated report.

\* This test has been out sourced.

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Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05:4

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075







	TEST REPORT		a contract of the expenses of
Reg. No : 403101583 Ref Id  Name : Mrs. Vaishaliben H Goswa  Age/Sex : 35 Years / Female  Ref. By  Sample Type : Serum	ami Pass. No.	Collected On Reg. Date Tele No. Dispatch At Location	: 23-Mar-2024 09:41 AN : 23-Mar-2024 05:41 PN : 8154991711 :
Parameter	Result	Unit	Biological Ref. Interva
	Lipid Profile		ground interval
Cholesterol	198.00	mg/dL	Desirable: <200.0 Borderline High: 200- 239 High: >240.0
Enzymatic, colorimetric method Triglyceride	175.60	mg/dL	Normal: <150.0 Borderline: 150-199 High: 200-499
Enzymatic, colorimetric method			Very High: > 500.0
HDL Cholesterol	46.80	mg/dL	Low: <40 High: >60
Accelerator selective detergent method			
Calculated	116.08	mg/dL	Optimal: <100.0 Near Optimal: 100-129 Borderline High: 130- 159 High: 160-189 Very High: >190.0
VLDL			
Calculated	35.12	mg/dL	15 - 35
DL / HDL RATIO  Calculated	2.48		0 - 3.5
Cholesterol /HDL Ratio	4.23		0 - 5.0

This is an electronically authenticated report.

\* This test has been out sourced.

Dr. Purvish Darji

MD (Pathology)

Approved On:

Approved By:

24-Mar-2024 05:45

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075







TEST	REPORT

Reg. No

: 403101583

Ref Id

Name

: Mrs. Vaishaliben H Goswami

Age/Sex

: 35 Years / Female

Pass. No.

Collected On

: 23-Mar-2024 09:41 AM

Reg. Date

: 23-Mar-2024 05:41 PM

Tale No

Ref. By Sample Type : Serum	Pass. No.	Tele No. Dispatch At Location	: 8154991711 : : CHPL
Parameter	Result	Unit	Biological Ref. Interval
	LFT WITH GGT		Diological Kel. Interval
Total Protein  Biuret Reaction	6.95	gm/dL	1Day: 3.4-5.0 1Day to 1Month: 4.6-6.8 2 to 12Months: 4.8-7.6 >=1Year: 6.0-8.0 Adults: 6.6-8.7
Albumin  By Bromocresol Green	4.64	g/dL	
Globulin (Calculated)  A/G Ratio (Calulated)	2.31 <b>2.01</b>	g/dL	2.3 - 3.5 0.8 - 2.0
SGOT UV without P5P	21.00	U/L	0 - 40
SGPT UV without P5P	25.10	U/L	0 - 40
Alakaline Phosphatase P-nitrophenyl phosphatase-AMP Buffer, Multiple-point rate	92.8	IU/I	42 - 98
Total Bilirubin Vanadate Oxidation	0.35	mg/dL	0.3 - 1.2
Direct Bilirubin Vanadate Oxidation	0.10	mg/dL	0.0 - 0.4
Indirect Bilirubin Calculated	0.25	mg/dL	0.0 - 1.1
GGT SZASZ Method	21.50	U/L	< 38

This is an electronically authenticated report.

\* This test has been out sourced.

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Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05:4

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075







Reg. No

: 403101583

Ref Id

Name

: Mrs. Vaishaliben H Goswami

Age/Sex Ref. By

: 35 Years

/ Female

Pass. No.

Collected On

: 23-Mar-2024 09:41 AM

Reg. Date

: 23-Mar-2024.05:41 PM

Tele No.

: 8154991711

Dispatch At

Sample Type : Serum		Location	CHPL
Parameter	Result	Unit	Biological Ref. Interval
	BIO - CHEMISTRY		
Uric Acid Enzymatic, colorimetric method	1.30	mg/dL	2.6 - 6.0
Creatinine Enzymatic Method	0.55	mg/dL	0.6 - 1.1
BUN UV Method	7.00	mg/dL	6.0 - 20.0

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\* This test has been out sourced.

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MD (Pathology)

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CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075





Reg. No

: 403101583

Ref Id

Collected On

: 23-Mar-2024 09:41 AM

Name Age/Sex : Mrs. Vaishaliben H Goswami : 35 Years

Pass. No.

Reg. Date

: 23-Mar-2024 05:41 PM

/ Female

Tele No.

: 8154991711

Ref. By

Sample Type : EDTA

Dispatch At Location

: CHPL

Parameter

Result

Unit

Biological Ref. Interval

### HEMOGLOBIN A1 C ESTIMATION Specimen: Blood EDTA

\*Hb A1C

5.0

% of Total Hb Normal: < 5.7 %

Pre-Diabetes: 5.7 % -

6.4 %

Diabetes: 6.5 % or

higher

Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose

96 80

mg/dL

Calculated

# Degree of Glucose Control Normal Range:

Poor Control >7.0% \*

Good Control 6.0 - 7.0 %\*\*Non-diabetic level < 6.0 %

\* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

\* Some danger of hypoglycemic reaction in Type I diabetics

\* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area. **EXPLANATION:-**

\*Total haemoglobin A1 c is continuously synthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

\*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

\*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurnment which eflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months. \*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

\*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

26-Mar-2024 09:3

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075







Reg. No

: 403101583

Ref Id

Collected On

: 23-Mar-2024 09:41 AM

Name

: Mrs. Vaishaliben H Goswami

/ Female

Reg. Date

: 23-Mar-2024 05:41 PM

Age/Sex

: 35 Years

Pass. No.

Tele No.

: 8154991711

Ref. By

Dispatch At

Sample Type: Urine Spot

Location

: CHPL

Test

Result

Unit

Biological Ref. Interval

### URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity

20 cc

Clear

Colour

Pale Yellow

Clarity

Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

рН

5.0

4.6 - 8.0

Sp. Gravity

1.015

1.001 - 1.035

Protein

Nil

Glucose

Nil

Nil

Ketone Bodies

Nil

Nil

Urobilinogen

Nil

Nil

Bilirubin

Nil

Nil

Nil

Nitrite Blood

Nil

Nil Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)

Occasional/hpf

Nil

Erythrocytes (Red Cells)

Nil

Epithelial Cells

Nil

Occasional

Mil

Crystals

Absent

Absent

Casts

Absent

Absent

Amorphous Material

Absent Absent Absent Absent

Bacteria Remarks

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075





TEST REPORT Reg. No

: 403101583 Ref Id Name

: Mrs. Vaishaliben H Goswami

Age/Sex : 35 Years I Female

Ref. By

Sample Type : Serum

Pass. No.

Reg. Date Tele No.

: 8154991711 Dispatch At

Location : CHPL

Collected On

Parameter Result Unit Biological Ref. Interval

### **IMMUNOLOGY**

## THYROID FUNCTION TEST

T3 (Triiodothyronine) CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

0.97

ng/mL

0.86 - 1.92

: 23-Mar-2024 09:41 AM

: 23-Mar-2024 05:41 PM

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine) CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

9.00

µg/dL

3.2 - 12.6

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3).

In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring FT4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

#### Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding

2.F T4 values may be decreased in patients taking carbamazepine.

3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results.

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05:45

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075





Sample Type : Serum

TEST REPORT

Reg. No

: 403101583

Ref Id

/ Female

Collected On

: 23-Mar-2024 09:41 AM

Name

: Mrs. Vaishaliben H Goswami

Reg. Date

: 23-Mar-2024 05:41 PM

Age/Sex

: 35 Years

Pass. No.

Tele No.

: 8154991711

Ref. By

Dispatch At

Location

: CHPL

CHEMILUMINECENT MICROPARTICLE IMMUNOASSAY

3.720

µIU/mI

0.35 - 5.50

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-relasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy First Trimester :0.1 to 2.5 µIU/mL Second Trimester: 0.2 to 3.0 µIU/mL Third trimester: 0.3 to 3.0 µIU/mL

Referance : Carl A.Burtis, Edward R.Ashwood, David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular

Diagnostics. 5th Eddition. Philadelphia: WB Sounders, 2012:2170

End Of Report

This is an electronically authenticated report.

\* This test has been out sourced.

Approved By:

Dr. Purvish Darji

MD (Pathology)

Approved On:

24-Mar-2024 05

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075



LABORATORY REPORT

Name

Mrs. Vaishaliben H Goswami

Sex/Age

Female/35 Years

Ref. By

**Client Name** Mediwheel Reg. No

403101583

Reg. Date

23-Mar-2024 05:41 PM

Collected On

Report Date

26-Mar-2024 08:19 AM

# Electrocardiogram

**Findings** 

Normal Sinus Rhythm.

Within Normal Limit.



This is an electronically authenticated report

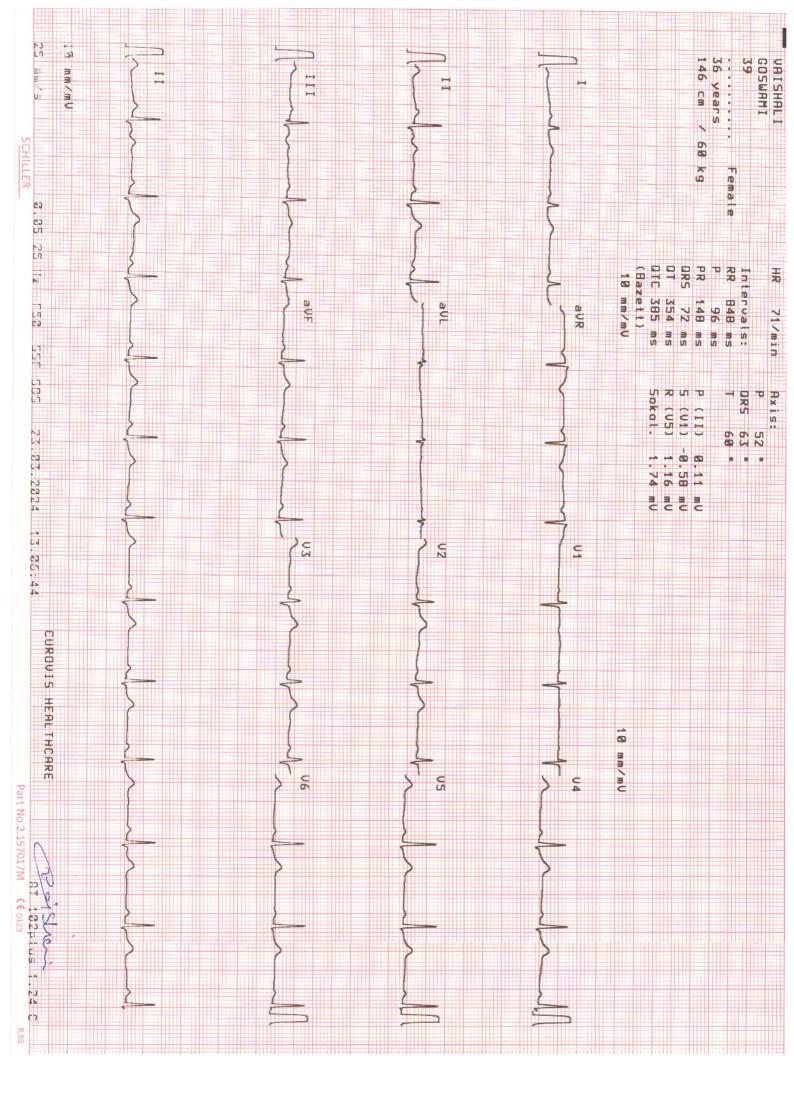
Dr.Jay Soni

M.D, GENERAL MEDICINE

DR.MUKESH LADDHA

Page 1 of 5

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075





			LABORATORY REPORT			100
Name	:	Mrs. Vaishaliben H Goswami		Reg. No	:	403101583
Sex/Age	:	Female/35 Years		Reg. Date	:	23-Mar-2024 05:41 PM
Ref. By	*			Collected On	:	
Client Name	:	Mediwheel	9	Report Date	:	26-Mar-2024 08:19 AM

# **2D Echo Colour Doppler**

1. Normal sized LA, LV, RA, RV.

2. Normal LV systolic function, LVEF: 60%.

3. No RWMA.

4. Normal LV compliance.

5. All cardiac valves are structurally normal.

6. No MR, Trivial TR, No PR, No AR.

7. No PAH, RVSP: 23 mm Hg.

8. IAS/IVS: Intact.

9. No clot/vegetation/pericardial effusion.

10. No coarctation of aorta.



This is an electronically authenticated report

M.D, GENERAL MEDICINE

DR.MUKESH LADDHA

Page 2 of 5

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075



			LABORATORY REPORT	in the second		
Name	:	Mrs. Vaishaliben H Goswami		Reg. No	:	403101583
Sex/Age	:	Female/35 Years		Reg. Date	:	23-Mar-2024 05:41 PM
Ref. By	:			Collected On	:	
Client Name	:	Mediwheel		Report Date	:	23-Mar-2024 06:50 PM

#### X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

COMMENT: No significant abnormality is detected.

-- End Of Report

This is an electronically authenticated report

DR DHAVAL PATEL Consultant Radiologist MB, DMRE Reg No:0494

Page 2 of 2

CUROVIS HEALTHCARE PVT. LTD. | CIN No.: U74140GJ2015PTC083075 'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat



			LABORATORY REPORT			
Name	:	Mrs. Vaishaliben H Goswami		Reg. No		102101505
Sex/Age		Female/35 Years		Reg. No	:	403101583
	•	remale/33 rears		Reg. Date	:	23-Mar-2024 05:41 PM
Ref. By	:			Collected On		
Client Name		Mediwheel		ooneeted on		
	•	Wiediwiieei		Report Date	:	23-Mar-2024 06:50 PM

# USG ABDOMEN

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic billiary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder is partially distended. No evidence of calculus or mass lesion.

Uterus appears normal. No adnexal mass is seen.

No evidence of ascites. No evidence of lymph adenopathy. No evidence of dilated small bowel loops.

### **COMMENTS:**

NO SIGNIFICANT ABNORMALITY DETECTED.

This is an electronically authenticated report

DR DHAVAL PATEL Consultant Radiologist MB, DMRE Reg No:0494

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Mrs. Vaishaliben H Goswami

Sex/Age Female/35 Years

Ref. By

Name

**Client Name** Mediwheel LABORATORY REPORT

Reg. No

403101583

Reg. Date

23-Mar-2024 05:41 PM

Collected On

Report Date

26-Mar-2024 03:48 PM

## Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -2.00

CY: -0.50

AX: 62

LEFT EYE

SP: -2.75

CY: -0.50

AX:104

	Without Glasses	With Glasses
Right Eye	6/18	6/5
Left Eye	6/18	6/5

Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

ColorVision: Normal

Comments: Normal

- End Of Report



This is an electronically authenticated report

Dr Kejal Patel MB,DO(Ophth)

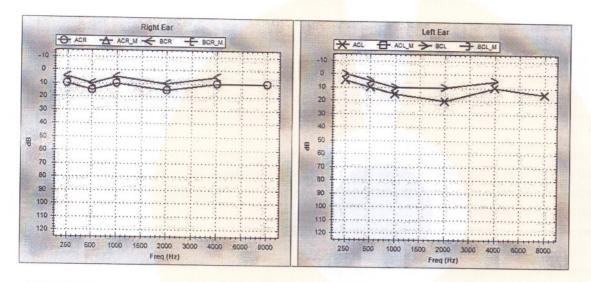
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LABORATORY REPORT Name Mrs. Vaishaliben H Goswami Reg. No 403101583 Sex/Age Female/35 Years Reg. Date 23-Mar-2024 05:41 PM Ref. By Collected On **Client Name** Mediwheel **Report Date** 26-Mar-2024 03:48 PM

## **AUDIOGRAM**



	Air Cor	nduction	Bone Co	onduction	Colour
EAR	Masked	UnMasked	Masked	UnMasked	Code
LEFT		X	כ	>	Blue
RIGHT	Δ	0		(	Red

Threshold In dB	RIGHT	LEFT
AIR CONDUCTION	10.5	11
BONE CONDUCTION		
SPEECH		

Comments: -Bilateral Hearing Sensitivity Within Normal Limits

--- End Of Report



This is an electronically authenticated report

**Dr Kejal Patel** MB,DO(Ophth)

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