

S K NURSING HOME AND HOSPITAL
G B PANT MARG TIKONIA HALDWANI
HALDWANI

Station
Telephone: 05946-221040,220263

EXERCISE STRESS TEST REPORT

Patient Name: MS. SARIKA DHIMAN ,
Patient ID: 4496169799
Height: 69 cm
Weight: 161 kg

DOB: 01.07.1990
Age: 33yrs
Gender: Female
Race:

Study Date: 29.03.2024
Test Type: --
Protocol: BRUCE

Referring Physician: CHANDAN DIAGNOSTIC
Attending Physician: DR.DEVASHISH GUPTA(MD)
Technician: MR.BHUWAN

Medications:
--

Medical History:
--

Reason for Exercise Test:
--

Exercise Test Summary

| Phase Name | Stage Name | Time in Stage | Speed (km/h) | Grade (%) | HR (bpm) | BP (mmHg) | Comment |
|------------|------------|---------------|--------------|-----------|----------|-----------|---------|
| PRETEST | SUPINE | 00:26 | 0.00 | 0.00 | 89 | 130/80 | |
| | STANDING | 00:24 | 0.00 | 0.00 | 88 | 130/80 | |
| | HYPERV. | 00:21 | 0.00 | 0.00 | 87 | 130/80 | |
| EXERCISE | STAGE 1 | 03:00 | 2.70 | 10.00 | 118 | 130/80 | |
| | STAGE 2 | 03:00 | 4.00 | 12.00 | 139 | 140/90 | |
| | STAGE 3 | 02:10 | 5.40 | 14.00 | 160 | 140/90 | |
| RECOVERY | | 03:06 | 0.00 | 0.00 | 89 | 120/80 | |

The patient exercised according to the BRUCE for 8:09 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 106 bpm rose to a maximal heart rate of 160 bpm. This value represents 85 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/80 mmHg , rose to a maximum blood pressure of 140/90 mmHg. The exercise test was stopped due to Max HR.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: above average (>20%).
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

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Physician-

DR DEVASHISH GUPTA (MD)

MS. SARIKA DHIMAN,
Patient ID 4496169799
29.03.2024
3:50:00pm

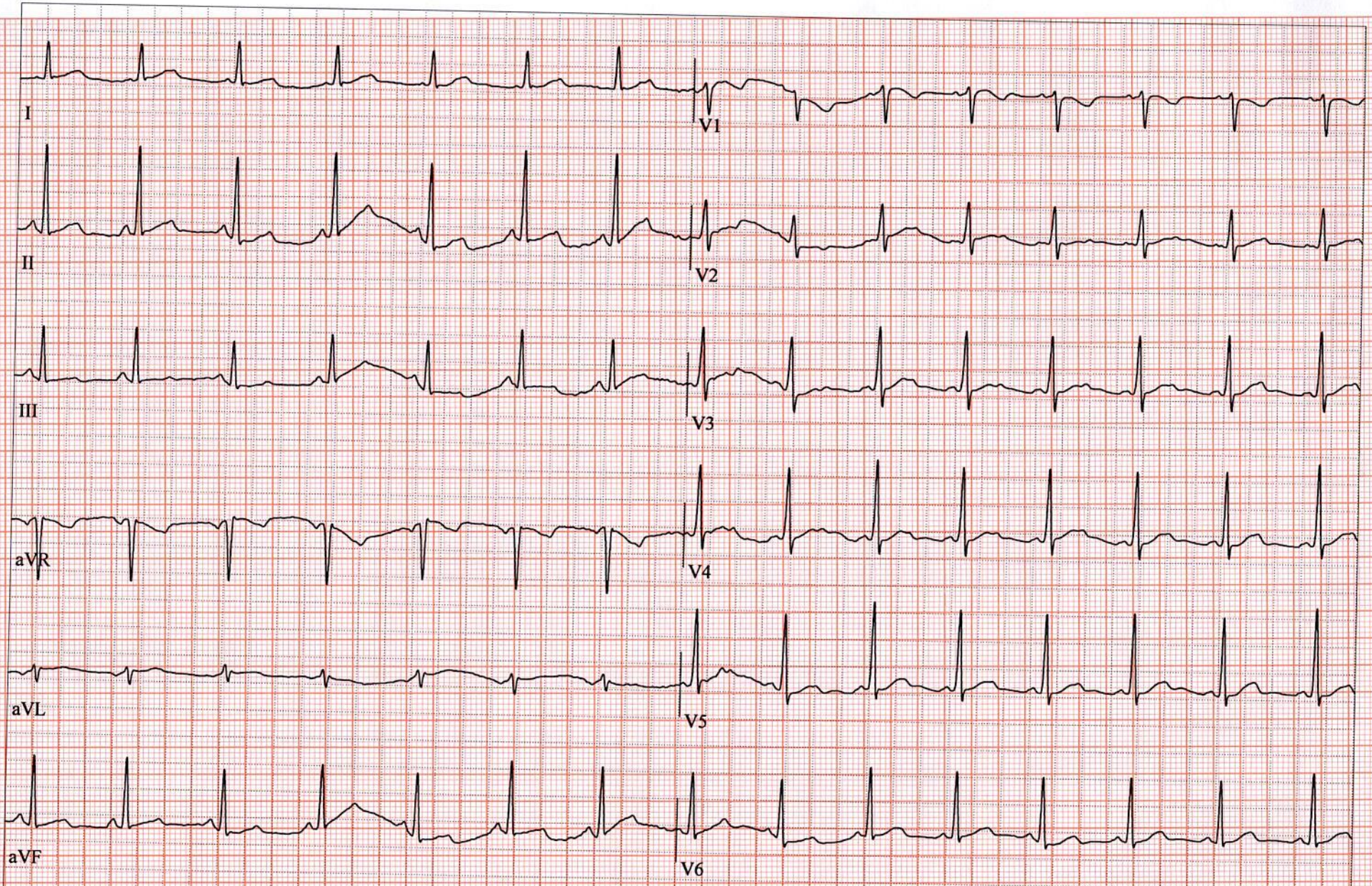
88 bpm
130/80 mmHg

12-Lead Report

PRETEST
SUPINE
00:24

BRUCE
0.0 km/h
0.0 %

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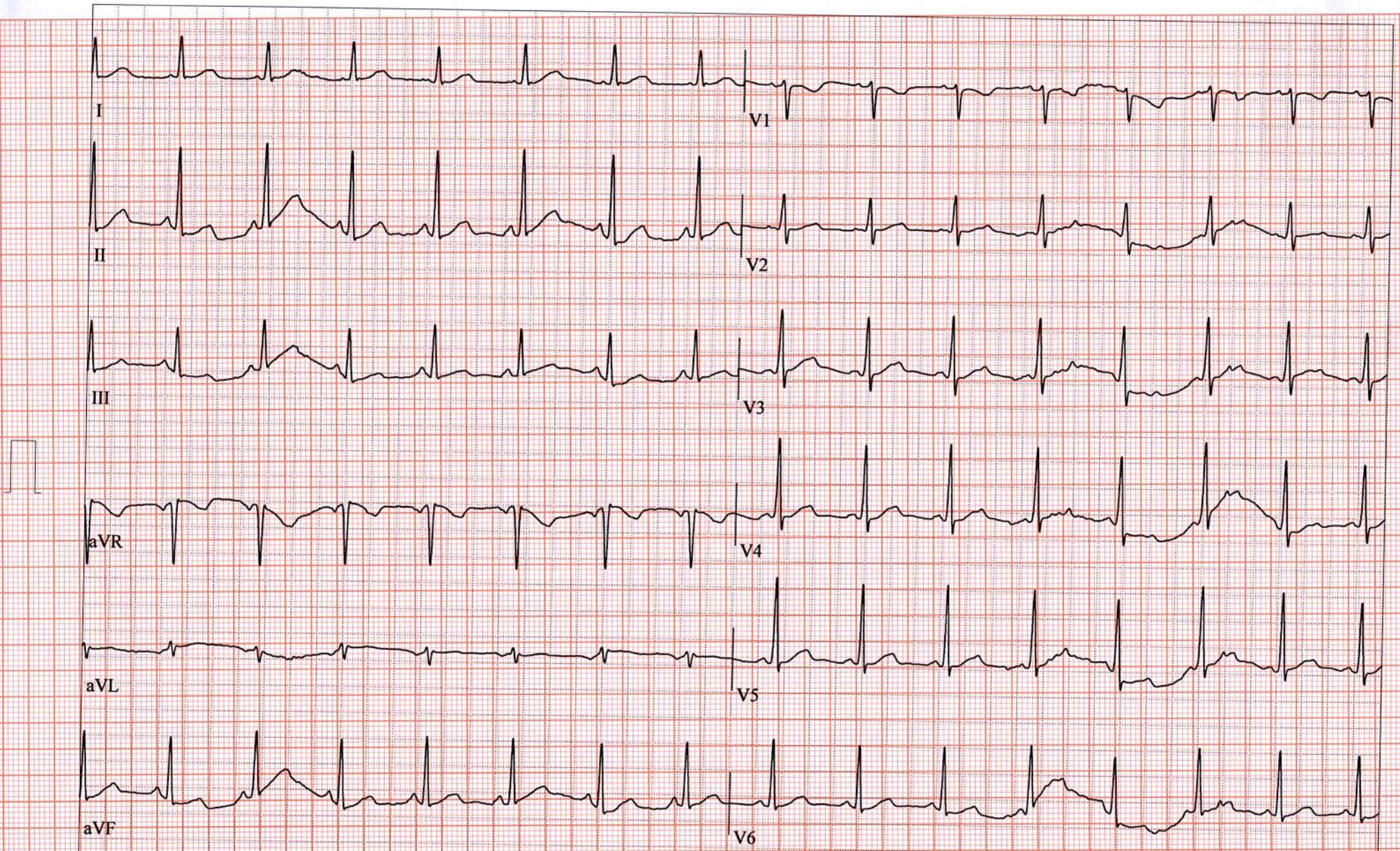
MS. SARIKA DHIMAN,
Patient ID 4496169799
29.03.2024
3:50:24pm

88 bpm
130/80 mmHg

12-Lead Report
PRETEST
STANDING
00:48

BRUCE
0.0 km/h
0.0 %

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MS. SARIKA DHIMAN ,
Patient ID 4496169799
29.03.2024
3:50:41pm

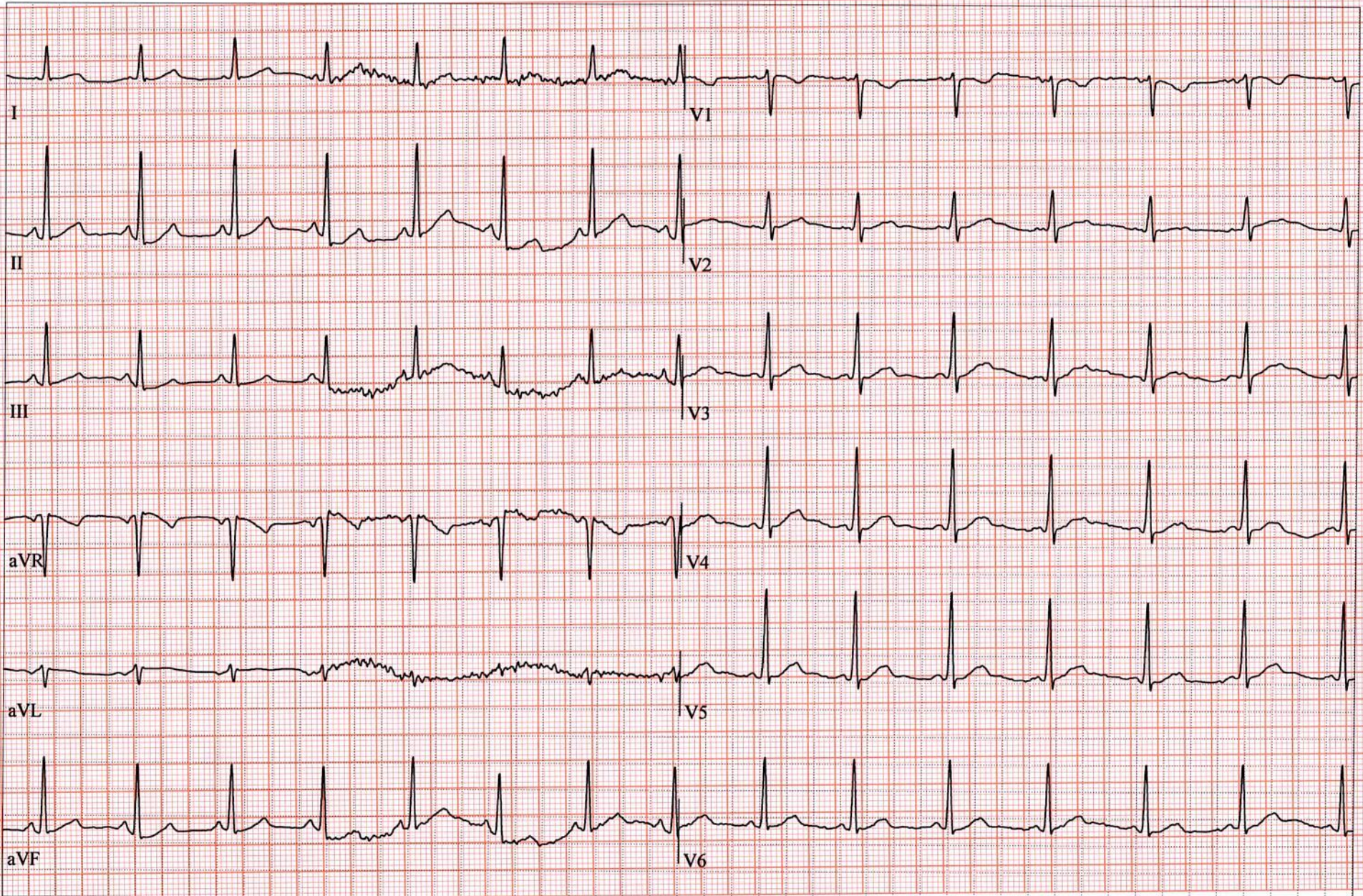
89 bpm
130/80 mmHg

12-Lead Report

PRETEST
HYPERV.
01:05

BRUCE
0.0 km/h
0.0 %

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MS. SARIKA DHIMAN,
Patient ID 4496169799
29.03.2024
3:53:45pm

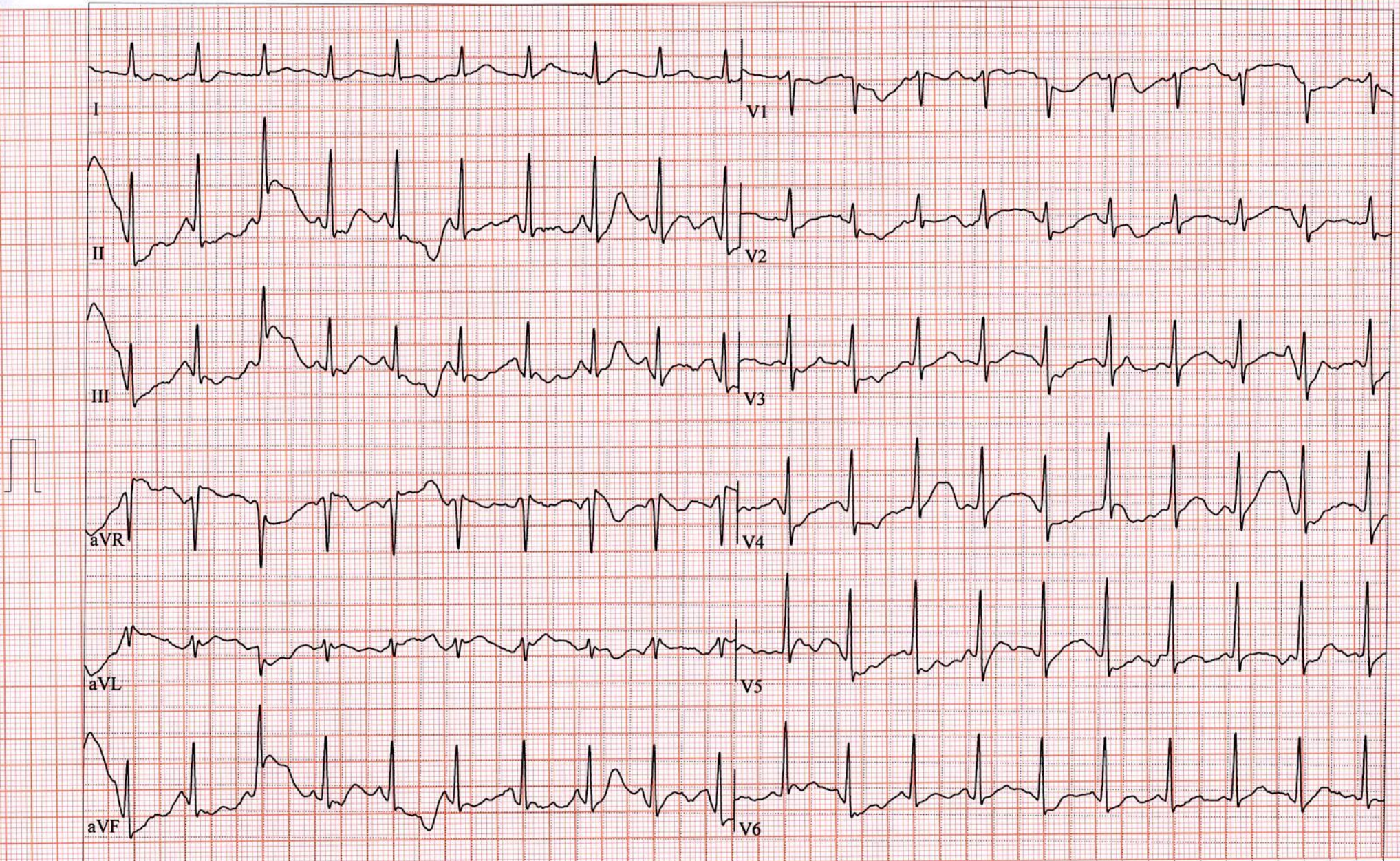
118 bpm
130/80 mmHg

12-Lead Report

EXERCISE
STAGE 1
03:00

BRUCE
2.7 km/h
10.0 %

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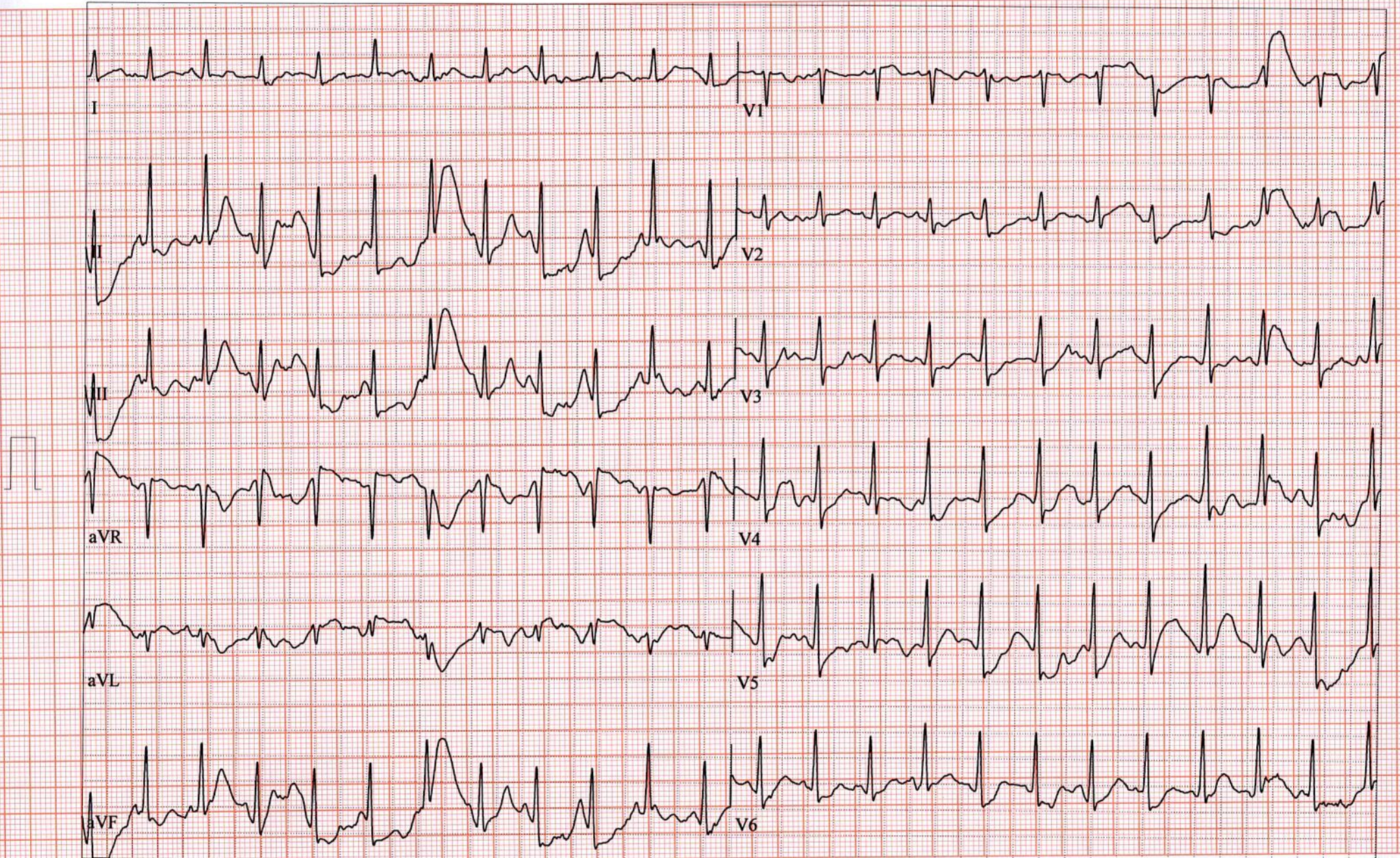
MS. SARIKA DHIMAN,
Patient ID 4496169799
29.03.2024
3:56:45pm

12-Lead Report

EXERCISE
STAGE 2
06:00

BRUCE
4.0 km/h
12.0 %

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MS. SARIKA DHIMAN ,
Patient ID 4496169799
29.03.2024
3:58:56pm

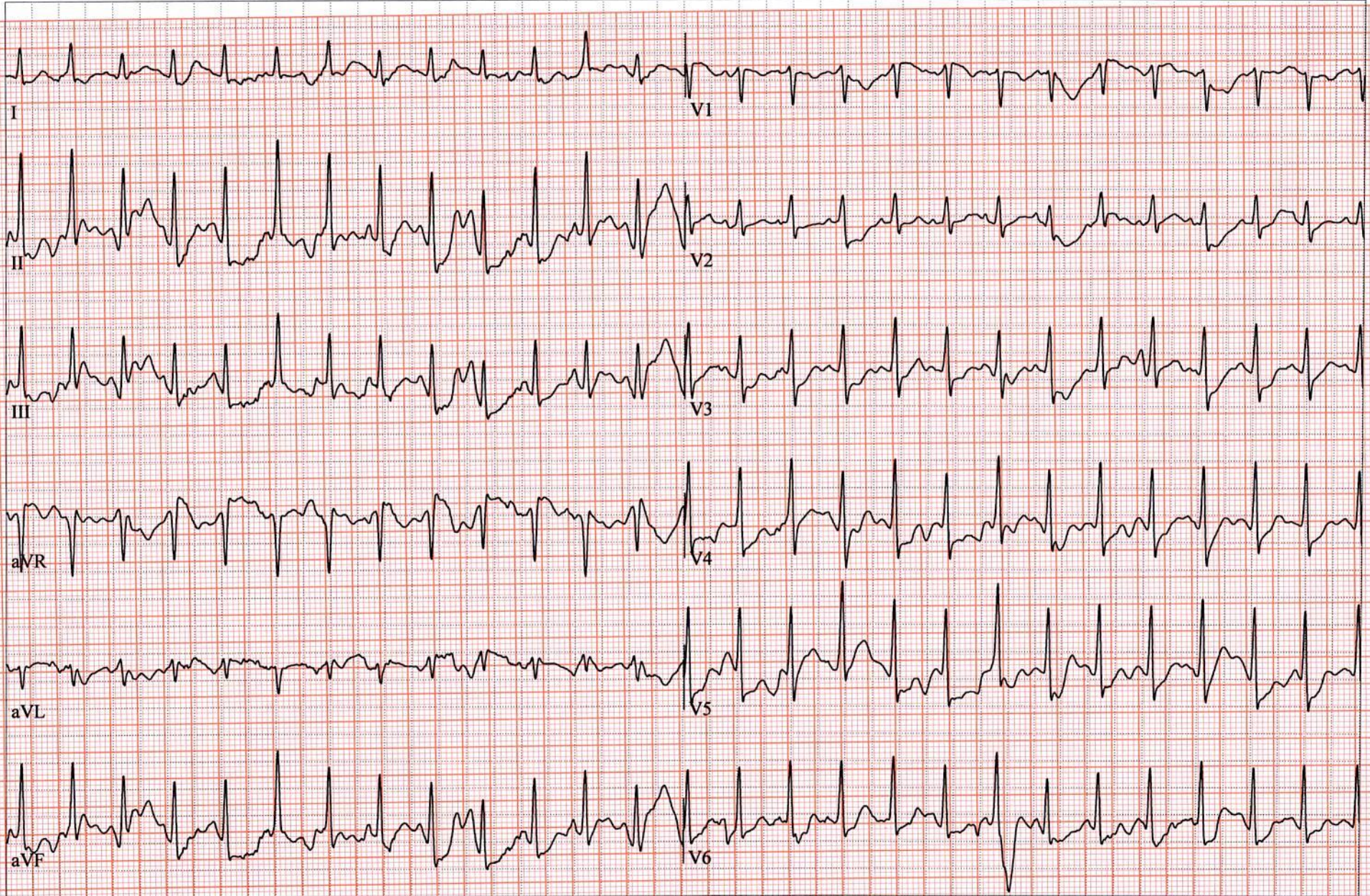
160 bpm
140/90 mmHg

12-Lead Report (PEAK EXERCISE)

EXERCISE
STAGE 3
08:10

BRUCE
5.4 km/h
14.0 %

S K NURSING HOME AND HOSPITAL



MS. SARIKA DHIMAN,
Patient ID 4496169799
29.03.2024
3:59:56pm

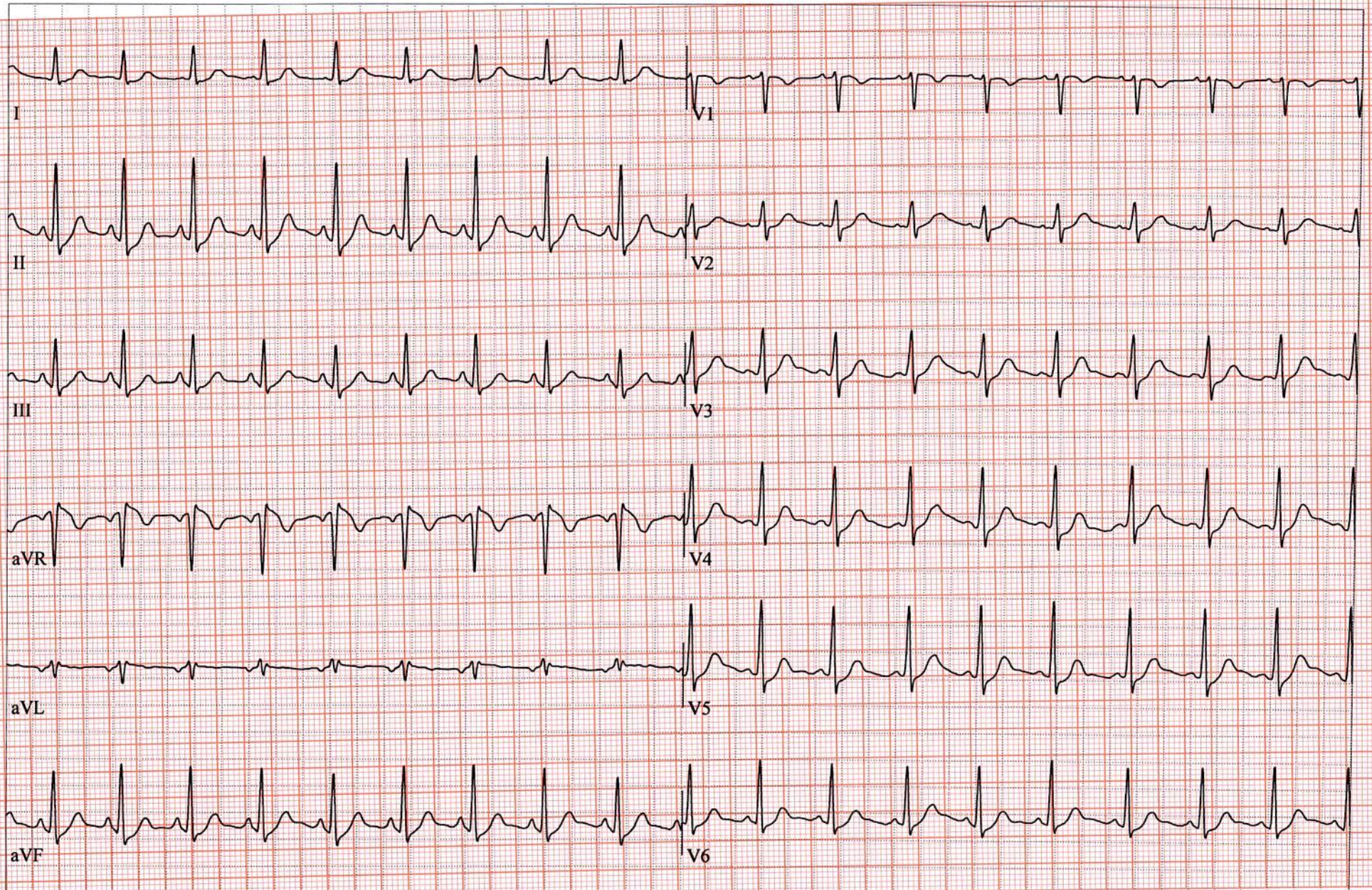
117 bpm
140/90 mmHg

12-Lead Report

RECOVERY
#1
01:00

BRUCE
0.0 km/h
0.0 %

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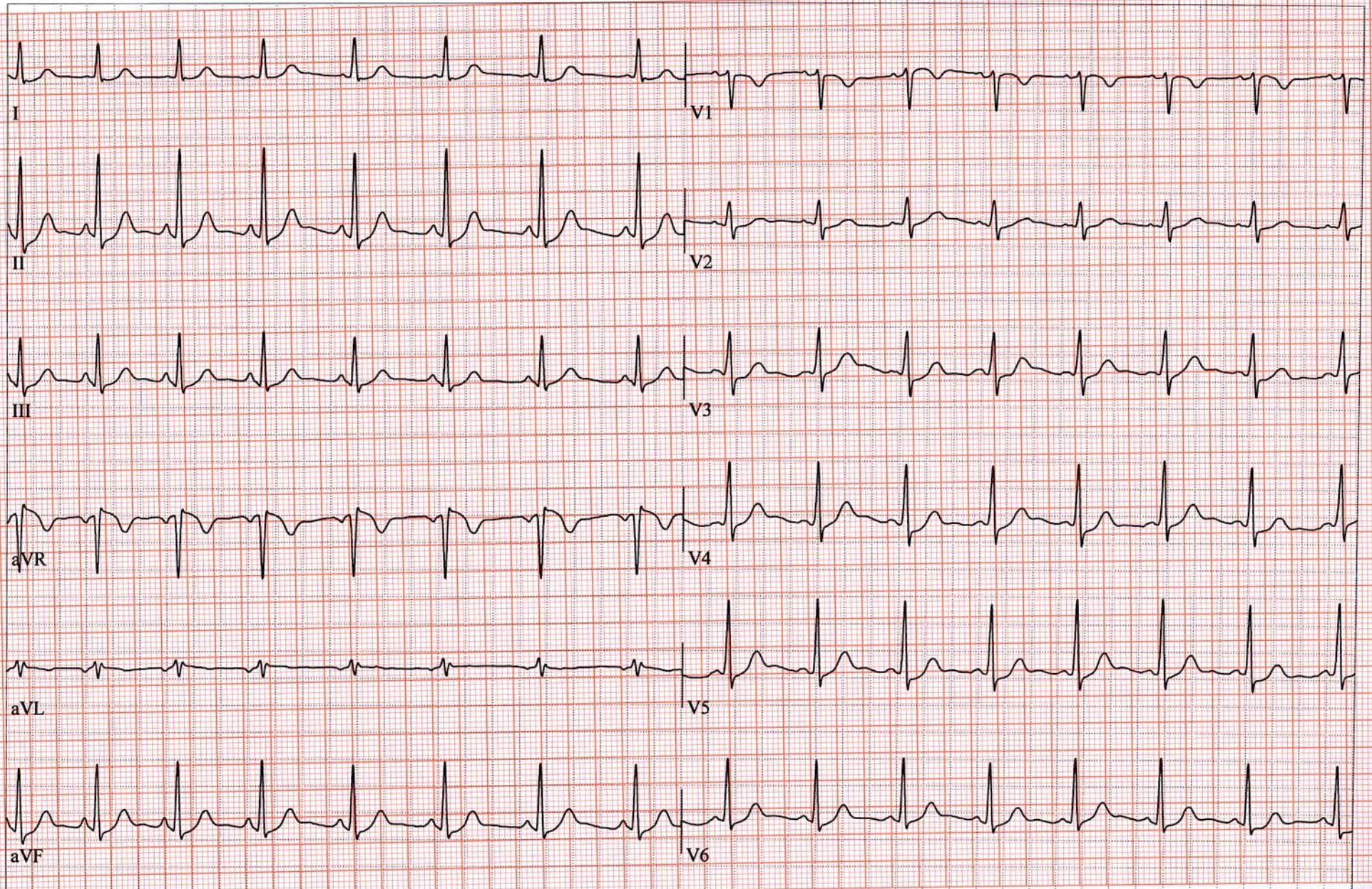
MS. SARIKA DHIMAN ,
Patient ID 4496169799
29.03.2024
4:00:56pm

12-Lead Report

RECOVERY
#1
02:00

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL

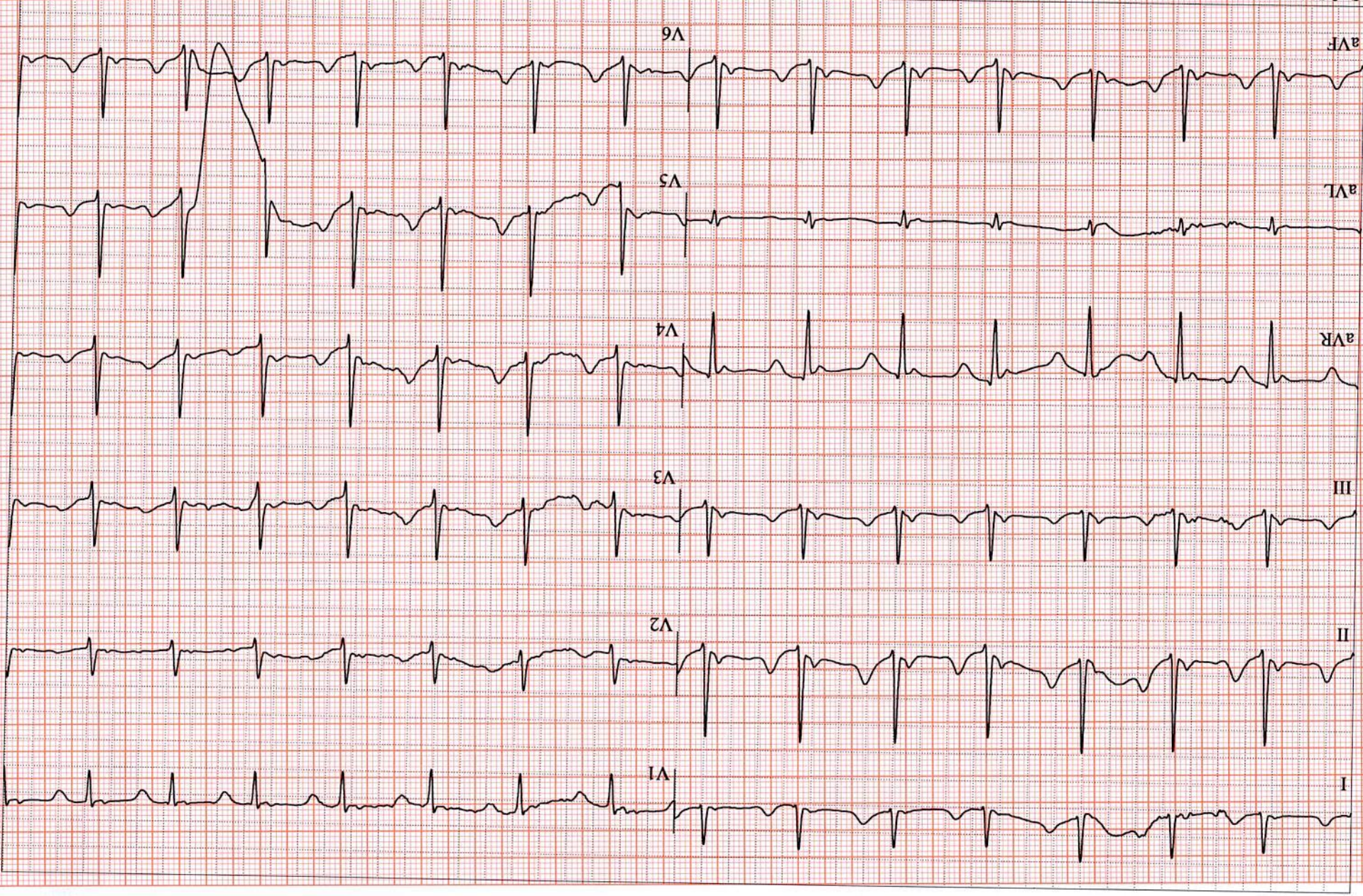


MS. SARIKA DHIMAN,
Patient ID 4496169799
29:03 2024
4:01:56pm

12-Lead Report
RECOVERY #1
87 bpm
120/80 mmHg
03:00

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V6,V4)

Start of Test: 3:49:30pm

MICRO MED CHARTS



CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



| | | | |
|--------------|---|---------------|------------------------|
| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:32 |
| Age/Gender | : 33 Y O M O D /F | Collected | : 29/Mar/2024 10:13:31 |
| UHID/MR NO | : CHL2.0000159199 | Received | : 29/Mar/2024 12:12:23 |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 14:48:13 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

Blood Group (ABO & Rh typing) ** , Blood

| | | | | |
|--------------|----------|--|--|---|
| Blood Group | A | | | ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA |
| Rh (Anti-D) | POSITIVE | | | ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA |

Complete Blood Count (CBC) ** , Whole Blood

| | | | | |
|-----------------------------------|----------|----------------|--|-------------------------------------|
| Haemoglobin | 14.10 | g/dl | 1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl | |
| TLC (WBC) | 9,200.00 | /Cu mm | 4000-10000 | ELECTRONIC IMPEDANCE |
| DLC | | | | |
| Polymorphs (Neutrophils) | 72.00 | % | 55-70 | ELECTRONIC IMPEDANCE |
| Lymphocytes | 25.00 | % | 25-40 | ELECTRONIC IMPEDANCE |
| Monocytes | 1.00 | % | 3-5 | ELECTRONIC IMPEDANCE |
| Eosinophils | 2.00 | % | 1-6 | ELECTRONIC IMPEDANCE |
| Basophils | 0.00 | % | <1 | ELECTRONIC IMPEDANCE |
| ESR | | | | |
| Observed | 18.00 | Mm for 1st hr. | | |
| Corrected | NR | Mm for 1st hr. | <20 | |
| PCV (HCT) | 44.00 | % | 40-54 | |
| Platelet count | | | | |
| Platelet Count | 1.78 | LACS/cu mm | 1.5-4.0 | ELECTRONIC IMPEDANCE/MICROSCOPIC |
| PDW (Platelet Distribution width) | 16.80 | fL | 9-17 | ELECTRONIC IMPEDANCE |
| P-LCR (Platelet Large Cell Ratio) | 44.20 | % | 35-60 | ELECTRONIC IMPEDANCE |





CHANDAN DIAGNOSTIC CENTRE

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|---------------------------------------|--------------|-------------|--------------------|----------------------|
| PCT (Platelet Hematocrit) | 0.22 | % | 0.108-0.282 | ELECTRONIC IMPEDANCE |
| MPV (Mean Platelet Volume) | 12.70 | fL | 6.5-12.0 | ELECTRONIC IMPEDANCE |
| RBC Count | | | | |
| RBC Count | 4.74 | Mill./cu mm | 3.7-5.0 | ELECTRONIC IMPEDANCE |
| Blood Indices (MCV, MCH, MCHC) | | | | |
| MCV | 91.30 | fL | 80-100 | CALCULATED PARAMETER |
| MCH | 29.80 | pg | 28-35 | CALCULATED PARAMETER |
| MCHC | 32.60 | % | 30-38 | CALCULATED PARAMETER |
| RDW-CV | 12.30 | % | 11-16 | ELECTRONIC IMPEDANCE |
| RDW-SD | 41.70 | fL | 35-60 | ELECTRONIC IMPEDANCE |
| Absolute Neutrophils Count | 6,624.00 | /cu mm | 3000-7000 | |
| Absolute Eosinophils Count (AEC) | 184.00 | /cu mm | 40-440 | |


Dr Vinod Ojha
MD Pathologist





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

GLUCOSE FASTING ** , Plasma

| | | | | |
|-----------------|-------|-------|--|---------|
| Glucose Fasting | 82.20 | mg/dl | < 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes | GOD POD |
|-----------------|-------|-------|--|---------|

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Glucose PP **

Sample: Plasma After Meal

| | | | |
|-------|-------|--|---------|
| 92.50 | mg/dl | <140 Normal 140-199 Pre-diabetes >200 Diabetes | GOD POD |
|-------|-------|--|---------|

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) ** , EDTA BLOOD

| | | | |
|----------------------------------|-------|---------------|-------------|
| Glycosylated Haemoglobin (HbA1c) | 5.20 | % NGSP | HPLC (NGSP) |
| Glycosylated Haemoglobin (HbA1c) | 33.00 | mmol/mol/IFCC | |
| Estimated Average Glucose (eAG) | 103 | mg/dl | |

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

| Haemoglobin A1C (%) NGSP | mmol/mol / IFCC Unit | eAG (mg/dl) | Degree of Glucose Control Unit |
|--------------------------|----------------------|-------------|--------------------------------|
| > 8 | >63.9 | >183 | Action Suggested* |
| 7-8 | 53.0 -63.9 | 154-183 | Fair Control |
| < 7 | <63.9 | <154 | Goal** |
| 6-7 | 42.1 -63.9 | 126-154 | Near-normal glycemia |
| < 6% | <42.1 | <126 | Non-diabetic level |

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated VARIANT II TURBO HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

| | | | | |
|--|-------|-------|----------|-----------------|
| BUN (Blood Urea Nitrogen) ** Sample: Serum | 11.68 | mg/dL | 7.0-23.0 | CALCULATED |
| Creatinine ** Sample: Serum | 1.16 | mg/dl | 0.5-1.20 | MODIFIED JAFFES |
| Uric Acid ** Sample: Serum | 5.00 | mg/dl | 2.5-6.0 | URICASE |

LFT (WITH GAMMA GT) ** , Serum





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|-------|--------------------|-------------------|
| SGOT / Aspartate Aminotransferase (AST) | 30.60 | U/L | < 35 | IFCC WITHOUT P5P |
| SGPT / Alanine Aminotransferase (ALT) | 28.70 | U/L | < 40 | IFCC WITHOUT P5P |
| Gamma GT (GGT) | 23.50 | IU/L | 11-50 | OPTIMIZED SZAZING |
| Protein | 6.80 | gm/dl | 6.2-8.0 | BIURET |
| Albumin | 4.30 | gm/dl | 3.4-5.4 | B.C.G. |
| Globulin | 2.50 | gm/dl | 1.8-3.6 | CALCULATED |
| A:G Ratio | 1.72 | | 1.1-2.0 | CALCULATED |
| Alkaline Phosphatase (Total) | 62.30 | U/L | 42.0-165.0 | IFCC METHOD |
| Bilirubin (Total) | 1.09 | mg/dl | 0.3-1.2 | JENDRASSIK & GROF |
| Bilirubin (Direct) | 0.30 | mg/dl | < 0.30 | JENDRASSIK & GROF |
| Bilirubin (Indirect) | 0.79 | mg/dl | < 0.8 | JENDRASSIK & GROF |

LIPID PROFILE (MINI) **, Serum

| | | | | |
|------------------------------------|--------|-------|---|------------------|
| Cholesterol (Total) | 156.89 | mg/dl | <200 Desirable 200-239 Borderline High > 240 High | CHOD-PAP |
| HDL Cholesterol (Good Cholesterol) | 62.50 | mg/dl | 30-70 | DIRECT ENZYMATIC |
| LDL Cholesterol (Bad Cholesterol) | 72 | mg/dl | < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High | CALCULATED |
| VLDL | 22.38 | mg/dl | 10-33 | CALCULATED |
| Triglycerides | 111.90 | mg/dl | < 150 Normal 150-199 Borderline High 200-499 High >500 Very High | GPO-PAP |


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MD Pathologist





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| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:33 |
| Age/Gender | : 33 Y O M O D /F | Collected | : 29/Mar/2024 11:46:47 |
| UHID/MR NO | : CHL2.0000159199 | Received | : 29/Mar/2024 14:05:43 |
| Visit ID | : CHL20377672324 | Reported | : 30/Mar/2024 09:50:45 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
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|-----------|--------|------|--------------------|--------|

URINE EXAMINATION, ROUTINE ** , Urine

| | | | | |
|-----------------------------|---------------|-------|--|--------------|
| Color | PALE YELLOW | | | |
| Specific Gravity | 1.010 | | | |
| Reaction PH | Acidic (6.0) | | | DIPSTICK |
| Appearance | CLEAR | | | |
| Protein | ABSENT | mg % | < 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++) | DIPSTICK |
| Sugar | ABSENT | gms% | < 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++) | DIPSTICK |
| Ketone | ABSENT | mg/dl | 0.1-3.0 | BIOCHEMISTRY |
| Bile Salts | ABSENT | | | |
| Bile Pigments | ABSENT | | | |
| Bilirubin | ABSENT | | | DIPSTICK |
| Leucocyte Esterase | ABSENT | | | DIPSTICK |
| Urobilinogen(1:20 dilution) | ABSENT | | | |
| Nitrite | ABSENT | | | DIPSTICK |
| Blood | ABSENT | | | DIPSTICK |

Microscopic Examination:

| | | | | |
|------------------|------------|--|--|-------------------------|
| Epithelial cells | OCCASIONAL | | | MICROSCOPIC EXAMINATION |
| Pus cells | OCCASIONAL | | | |
| RBCs | ABSENT | | | MICROSCOPIC EXAMINATION |
| Cast | ABSENT | | | |
| Crystals | ABSENT | | | MICROSCOPIC EXAMINATION |
| Others | ABSENT | | | |

SUGAR, FASTING STAGE ** , Urine

| | | | | |
|----------------------|--------|------|--|--|
| Sugar, Fasting stage | ABSENT | gms% | | |
|----------------------|--------|------|--|--|

Interpretation:





CHANDAN DIAGNOSTIC CENTRE

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

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++) > 2




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| UHID/MR NO | : CHL2.0000159199 | Received | : 29/Mar/2024 17:49:48 |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 18:46:46 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

SUGAR, PP STAGE ** , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



| | | | |
|--------------|---|---------------|------------------------|
| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:34 |
| Age/Gender | : 33 Y O M O D /F | Collected | : 29/Mar/2024 10:13:31 |
| UHID/MR NO | : CHL2.0000159199 | Received | : 29/Mar/2024 12:12:24 |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 15:48:53 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

THYROID PROFILE - TOTAL ** , Serum

| | | | | |
|-----------------------------------|-------|--------|-------------|------|
| T3, Total (tri-iodothyronine) | 93.20 | ng/dl | 84.61-201.7 | CLIA |
| T4, Total (Thyroxine) | 9.20 | ug/dl | 3.2-12.6 | CLIA |
| TSH (Thyroid Stimulating Hormone) | 2.300 | µIU/mL | 0.27 - 5.5 | CLIA |

Interpretation:

| | | |
|----------|--------|------------------------|
| 0.3-4.5 | µIU/mL | First Trimester |
| 0.5-4.6 | µIU/mL | Second Trimester |
| 0.8-5.2 | µIU/mL | Third Trimester |
| 0.5-8.9 | µIU/mL | Adults 55-87 Years |
| 0.7-27 | µIU/mL | Premature 28-36 Week |
| 2.3-13.2 | µIU/mL | Cord Blood > 37Week |
| 0.7-64 | µIU/mL | Child(21 wk - 20 Yrs.) |
| 1-39 | µIU/mL | Child 0-4 Days |
| 1.7-9.1 | µIU/mL | Child 2-20 Week |

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.


Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani

Ph: 7705023379,-

CIN : U85110DL2003PLC308206



| | | | |
|--------------|---|---------------|------------------------|
| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:35 |
| Age/Gender | : 33 Y O M O D /F | Collected | : N/A |
| UHID/MR NO | : CHL2.0000159199 | Received | : N/A |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 14:06:27 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW:-

- Bilateral lung fields appear grossly unremarkable.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Bilateral hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Soft tissue shadow appears normal.

IMPRESSION:-

No significant abnormality is seen.

Adv:-Clinico-pathological correlation.

Dr Sushil Pandey(MD Radiodignosis)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 7705023379,-
CIN : U85110DL2003PLC308206



| | | | |
|--------------|---|---------------|------------------------|
| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:36 |
| Age/Gender | : 33 Y O M O D /F | Collected | : N/A |
| UHID/MR NO | : CHL2.0000159199 | Received | : N/A |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 11:37:01 |
| Ref Doctor | : Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD - | Status | : Final Report |

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

ULTRASOUND WHOLE ABDOMEN

LIVER: Is normal in size and echotexture. No SOL seen. No dilatation of IHBR seen. Hepatic vessels are normal. Portal vein is patent.

GALL BLADDER: Lumen anechoic, wall is normal in thickness (~3 mm). No pericholecystic fluid seen.

CBD: Normal in caliber and smoothly tapering towards its lower end.

PANCREAS: Normal in size and echotexture.

SPLEEN: Normal in size and echotexture.

KIDNEYS:-

Right kidney is normal in size, shape and echotexture with maintained CM differentiation. No dilatation of PC system is seen. No calculus seen.

Left kidney is normal in size, shape and echotexture with maintained CM differentiation. No dilatation of PC system is seen. No calculus seen.

URINARY BLADDER: Normal capacity bladder with anechoic lumen and smooth regular walls of normal thickness.

UTERUS & CERVIX:

- Uterus is normal in size, shape and echotexture.
- Endometrial and myometrial echoes are normal. (ET ~9.4 mm). No focal lesion seen.
- Cervix appears normal.

OVARIES & ADNEXA:

- Both ovaries are normal in size, shape and echo pattern.





CHANDAN DIAGNOSTIC CENTRE

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| | | | |
|--------------|---|---------------|------------------------|
| Patient Name | : Miss.SARIKA DHIMAN | Registered On | : 29/Mar/2024 09:46:36 |
| Age/Gender | : 33 Y O M O D /F | Collected | : N/A |
| UHID/MR NO | : CHL2.0000159199 | Received | : N/A |
| Visit ID | : CHL20377672324 | Reported | : 29/Mar/2024 11:37:01 |
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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

- No adnexal mass/ cyst seen.
- No free fluid is seen in POD.

No evidence of any free fluid/retroperitoneal lymphadenopathy.

IMPRESSION:- Essentially a normal scan.

(Adv:- Clinico-pathological correlation and further evaluation).

*** End Of Report ***

(**) Test Performed at CHANDAN DIAGNOSTIC CENTRE, HALDWANI-2

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOGICAL EXAMINATION



Dr Sushil Pandey(MD Radiodignosis)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location

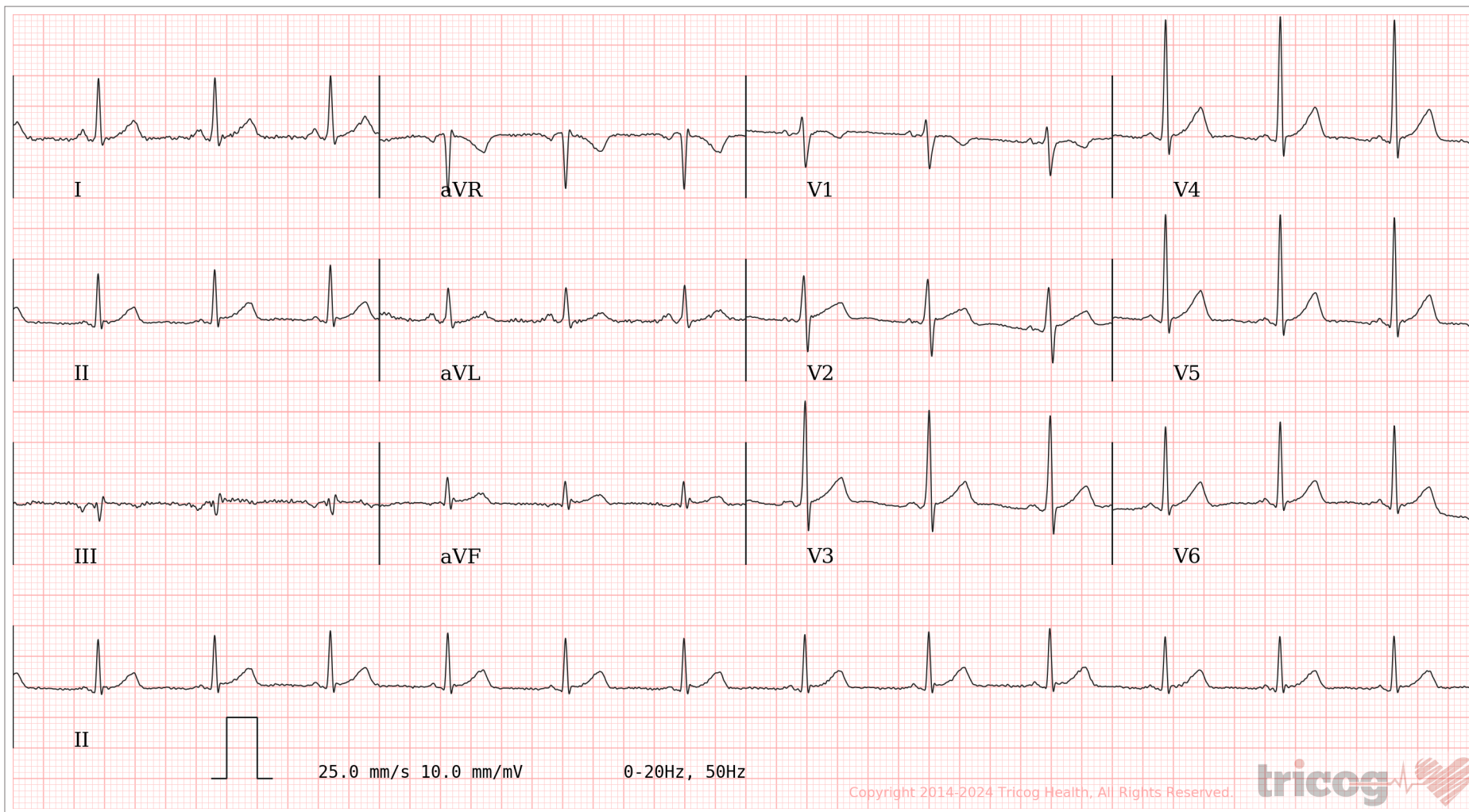
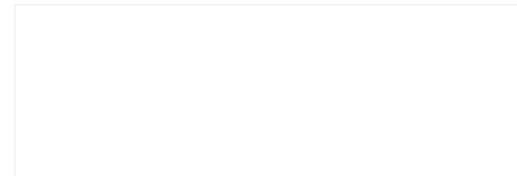


Chandan Diagnostic



Age / Gender: 33/Female
Patient ID: CHL20377672324
Patient Name: Miss.SARIKA DHIMAN

Date and Time: 29th Mar 24 10:56 AM



AR: 78bpm VR: 78bpm QRSD: 82ms QT: 362ms QTcB: 412ms PRI: 114ms P-R-T: -3° 24° 29°

ECG Within Normal Limits: Sinus Rhythm. Baseline artefacts. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Ashish Agrawal

MMC 2007051721

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.