

Consultant Radiologist & Sonologist

**Dr. Roopa Goyal**

MD (Radio-Diagnosis)

**GOYAL**  
**DIAGNOSTICS**  
4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

**Patient Name :** KAVITA YADAV

**Age / Gender :** 32 years / Female

**Endo ID :** 178790

**Organization :** Goyal Diagnostics Profile

**Referral :** MEDIWHEEL

**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

**Reported Date & Time :** Mar 26, 2024, 10:33 a.m.

**Sample ID :**



240860011



Test Description	Value(s)	Unit(s)	Reference Range
<b>HAEMATOLOGY</b>			
Hemoglobin (HB)	10.5	gm/dl	12.0 - 16.0
Erythrocyte (RBC) Count	4.01	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	35.8	%	42 - 52
Mean Cell Volume (MCV)	89.2	FL	78 - 100
Mean Cell Haemoglobin (MCH)	26.1	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	29.3	g/dl	32 - 36
Red Cell Distribution Width (RDW)	14.7	%	11.5 - 14.0
Total Leucocytes Count (WBC)	6000	Cell/cu.mm	4000 - 10000
Neutrophils	50	%	40 - 80
Lymphocytes	45	%	20 - 40
Monocytes	03	%	2 - 10
Eosinophils	02	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	12.2	fL	7.2 - 11.7
PCT	0.22	%	0.2 - 0.5
Platelet Count	179	10 <sup>3</sup> /ul	150 - 450

\*\*END OF REPORT\*\*

Dr. Kusum Heda  
M.D.(Patho.)

Dr. Nishi Prasad  
M.D.(Patho.)

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**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

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**Sample ID :**



240860011

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**HAEMATOLOGY**

ESR	20	mm	0 - 20
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**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

**Reported Date & Time :** Mar 26, 2024, 10:58 a.m.

**Sample ID :**



Test Description	Value(s)	Unit(s)	Reference Range
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**CLINICAL PATHOLOGY**

**URINE ROUTINE**

**General Examination**

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.020		1.005-1.030

**Chemical Examination**

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

**Microscopic Examination**

Pus cells (WBCs)	2-3	/hpf	0-4
Epithelial cells	1-2	/hpf	0-5
Red blood cells	NIL	/hpf	NIL
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Present		Absent
Bacteria	Present		Absent
Yeast cells	Absent		Absent
Other	Absent		Absent

\*\*END OF REPORT\*\*

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**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

**Reported Date & Time :** Mar 26, 2024, 11:05 a.m.

**Sample ID :**



240860011

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**HAEMATOLOGY**

BLOOD GROUP ABO AND RHTYPE

Method : Gel Technique & Tube Agglutination

Medical Remark :

'O' POSITIVE

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

\*\*END OF REPORT\*\*

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**BIOCHEMISTRY**

**LIPID PROFILE**

Cholesterol Total Method : ENZYMATIC COLORIMETRIC METHOD CHOD - POD	134.0	mg/dL	130 -250
Triglycerides Method : ENZYMATIC COLORIMETRIC	69.5	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	46.6	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	13.90	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	73.50	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	2.88		2.6-4.9
LDL/HDL Ratio Method : Calculated	1.58		0.5-3.4

\*\*END OF REPORT\*\*

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**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

**Reported Date & Time :** Mar 26, 2024, 11:03 a.m.

**Sample ID :**



Test Description	Value(s)	Unit(s)	Reference Range
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**BIOCHEMISTRY**

**LIVER FUNCTION TEST**

Bilirubin - Total	0.69	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.20	mg/dL	0.0 - 0.30
Bilirubin - Indirect	0.49	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	21.8	U/L	5.0 - 40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	19.7	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	58.0	U/L	<b>MALE &amp; FEMALE</b>
Method : IFCC with Serum			
4-19 YEAR: 54-369 U/L			
20-59 YEAR: 42-98 U/L			
>60 YEAR: 53-141 U/L			
Total Protein	6.55	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.13	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.42	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.71		1.5 - 2.5
Method : Calculated			

\*\*END OF REPORT\*\*

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**Collected Date & Time :** Mar 26, 2024, 09:49 a.m.

**Reported Date & Time :** Mar 26, 2024, 10:30 a.m.

**Sample ID :**



Test Description	Value(s)	Unit(s)	Reference Range
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**HAEMATOLOGY**

<b>HbA1c (GLYCOSYLATED HEMOGLOBIN)</b>	5.2	%	> 8% Action Suggested 7 - 8 % Good Control 6 - 7 % Near Normal Glycemia < 6% Normal level
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Method : Nephelometry Methodology

**Instrument: Mispa i2**

**Clinical Information:**

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

<b>AVERAGE BLOOD GLUCOSE</b>	102.54		90 - 120 Very Good Control 121 - 150 Adequate Control 151 - 180 Sub-optimal Control 181 - 210 Poor Control > 211 Very Poor Control
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**IMMUNOLOGY**

T3-Triiodothyronine Method : CHEMILUMINESCENCE	0.69	ng/mL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINESCENCE	4.7	ug/dL	4.5 -10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINESCENCE	1.19	uIU/mL	0.35-5.50

**Interpretation:**

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

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Test Description	Value(s)	Unit(s)	Reference Range
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**BIOCHEMISTRY**

<b>Urea</b> Method : Uricase	21.7	mg/dL	10.0 - 40.0
<b>CREATININE</b> Method : Serum, Jaffe	0.63	mg/dL	0.60 - 1.40

\*\*END OF REPORT\*\*

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**BIOCHEMISTRY**

<b>Uric Acid</b> Method : Uricase, Colorimetric	<b>3.4</b>	mg/dL	3.5-7.0
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**BIOCHEMISTRY**

Calcium Method : Arsenazo III	8.7	mg/dL	8.50 - 10.20
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**BIOCHEMISTRY**

Glucose fasting Method : Fluoride Plasma-F, Hexokinase	99.8	mg/dL	70.0-110.0
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**Referral :** MEDIWHEEL



**Collected Date & Time :** Mar 26, 2024, 01:08 p.m.

**Reported Date & Time :** Mar 26, 2024, 02:09 p.m.

**Sample ID :**



Test Description	Value(s)	Unit(s)	Reference Range
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**BIOCHEMISTRY**

Blood Glucose-Post Prandial Method : Hexokinase	106.5	mg/dL	70 - 140
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\*\*END OF REPORT\*\*

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M.D.(Patho.)



NAME	: KAVITA YADAV	DATE	: 26/03/24
AGE	: 32 YRS	REF BY	: MEDIWHEEL
SEX	: FEMALE		

## INTERPRETATION SUMMARY

- . NORMAL CHAMBER DIMENSIONS
- . INTACT IAS/ IVS
- . ALL VALVES ARE NORMAL.
- . MILD MR, TRACE MR
- . RVSP 30 MM HG
- . NO RWMA : LVEF 60 %
- . NO CLOT, VEGITATION.
- . NO PERICARDIAL EFFUSION
- . NORMAL PERICARDIUM .
- . SIZE OF MAIN PULMONARY ARTERY 25 MM

## M, MODE/2D MEASUREMENTS (MM) &amp; CALCULATIONS (ML)

LVID d	46.2	LVEDV	
LVID s	31.3	LVESV	
RVID(d)	---	SV	-
IVS d	10.9	F.S	32%
IVS S	14.6	EF	60%
LVPW d	9.9	C.O	-
LVPWS	14.6	MITRAL VALVE	-
AORTIC ROOT	28.6	EF SLOPE	-
LEFT ATRIUM	30.0	OPENING AMPLITUDE	-
AORTIC CUSP OPENING	-	E.P.S.S	-

## DOPPLER MEASUREMENTS &amp; CALCULATIONS:

STRUCTURE	MORPHOLOGY	VELOCITY(cm/sec.)	GRADIENT P/M	REGURGITATION
MITRAL VALVE	NORMAL	E- 121 A- 74	-	TRACE
TRICUSPID VALVE	NORMAL	125	-	MILD
PUL VALVE	NORMAL	108	-	NIL
AORTIC VALVE	NORMAL	147	-	NIL

PULMONARY ARTERY	MITRAL VALVE AREA (BY P 1/2 T)
PEAK ACCELERATION TIME	PRESSURE HALF TIME
SYSTOLIC PRESSURE 30 MM HG	MVA

Dr. ROOPA GOYAL (M.B.B.S., M.D.)  
Consultant Radiologist & Sonologist  
RMC No. 004507/15600

लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR  
SIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO-LEGAL PURPOSES.



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16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948, 7976525

NAME :-- Kavita Yadav

AGE :--32 Yrs

Date:-- 26/03/24

REF BY :- Mediwheel

**SKIAGRAM CHEST PA VIEW**

**BOTH CP ANGLES ARE CLEAR**

**CARDIAC SIZE IS WITHIN NORMAL LIMITS**

**LUNG FIELDS ARE CLEAR**

**NAD IN HEART AND Lungs**

Dr. ROOPA GOYAL (M.B.B.S., M.D.)  
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RMC No.-004507/15600

रिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा स

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**USG ABDOMEN-PELVIS**

<b>NAME - Kavita Yadav</b>	<b>AGE-- 32 Yrs</b>	<b>Date - 26/03/24</b>
<b>REF BY -- Mediwheel</b>		

**LIVER:** is normal in size 13.8 cm and shows homogeneous echotexture.  
No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion.  
The portal vein and common bile duct show normal caliber.

**GALL BLADDER:** distended and shows smooth walls. Wall thickness appears normal.  
No evidence of sludge/ calculus . No evidence of pericholecystic collection.

**SPLEEN:** normal in size and shows normal echopattern.

**PANCREAS:** Normal in size , shape and position. Parenchyma is homogenous.

**RT.KIDNEY-** Normal in size, shape and position . Measures :-- 10.5 x4.7 cm  
Cortex is homogeneous. Corticomedullary differentiation is maintained  
pelvicalyceal system is not dilated.  
No evidence of any calculus is Seen

**LT. KIDNEY-** Normal in size, shape and position. Measures :-- 10.0 x4.3 cm  
Cortex is homogeneous. Corticomedullary differentiation is maintained.  
pelvicalyceal system is not dilated.  
No evidence of any calculus is Seen

**URINARY BLADDER :** is distended with smooth walls .  
No evidence of diverticulum or calculus is Seen

**UTERUS:** Normal In Size Shape And Position.  
Myometrium is homogenous and normal in thickness .  
Endometrium Is Normal .

**OVARY:** both ovaries are normal in size and appear normal.

**IMPRESSION :-- Abdominal and pelvic organs are within normal limits .**

(Adv- clinical correlation , further evaluation)

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Please note :-- This is professional opinion only and not the final diagnosis as science of radiology is based on interpretation of various shadows produced by both normal and abnormal structures . Dissimilar diverse diseases may produce similar shadows and vice versa , hence no usg finding is pathogenomic . All findings are only S/O , hence advice These findings are observations at the time of study. Findings can change any time. In case of any disparity between clinical and sonography, X ray findings. Please send patient again for review Free of Cost This report is not valid for medico-legal purpose subject to Ajmer and jurisdiction only .

लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

ER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC  
NOSIS, FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IN NOT MEANT FOR MEDICO-LEGAL PURPOSE.



Patient Name Mrs. KAVITA YADAV 32/F

5 Seconds ECG Report

March 26, 2024

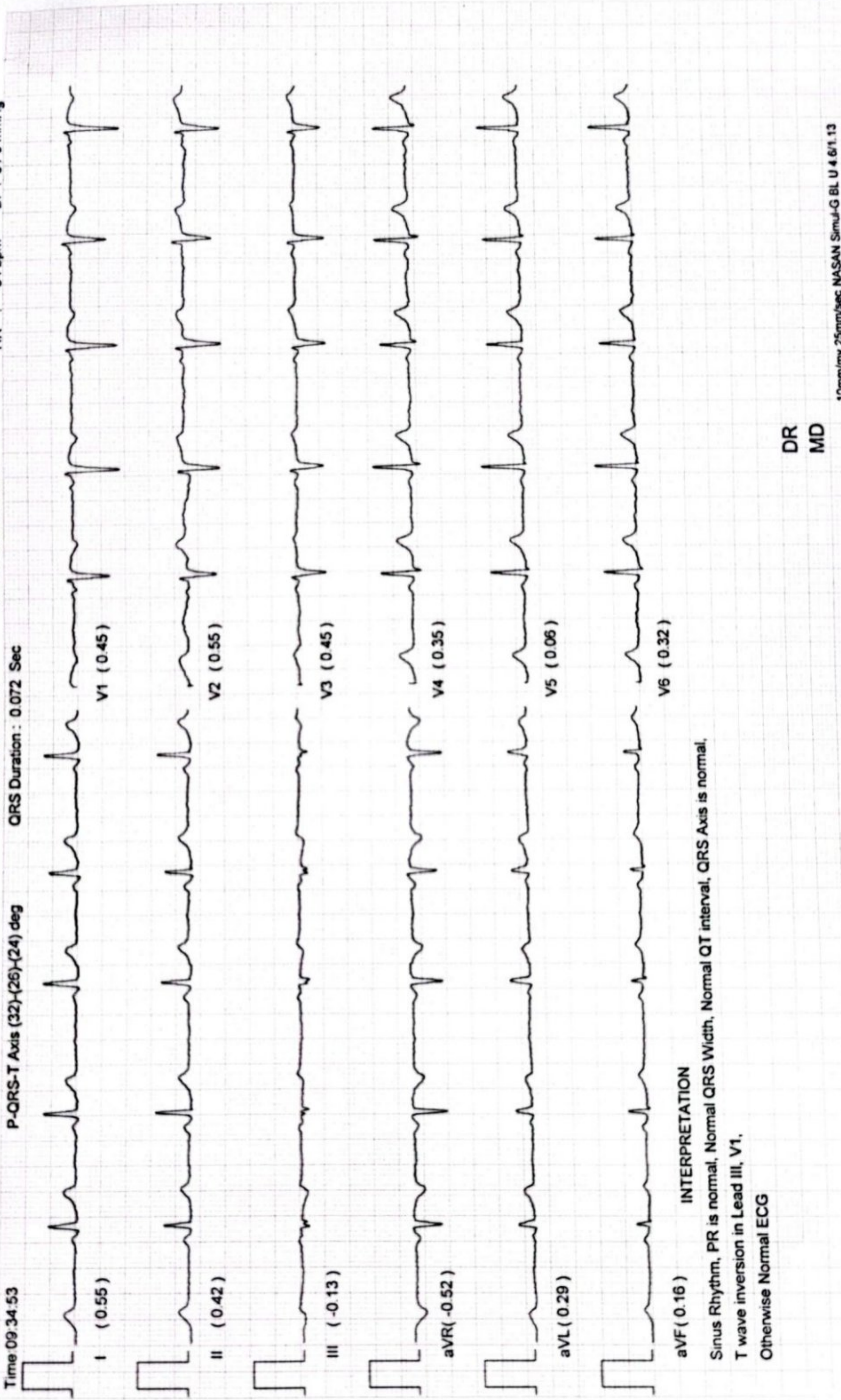
HR : 64 bpm BP : 0 / 0 mmHg

Time 09:34:53

PR Interval: 0.13 sec RR Interval: 0.94 sec

P-QRS-T Axis (32)-(26)-(24) deg

QRS Duration : 0.072 Sec



**INTERPRETATION**

Sinus Rhythm, PR is normal, Normal QRS Width, Normal QT interval, QRS Axis is normal, T wave inversion in Lead III, V1, Otherwise Normal ECG

DR  
MD

\*Unconfirmed Reporting, Refer to Clinician

10mm/mv, 25mm/sec NASAN Simul-G BL U 4 6/1.13



GOYAL.DIA  
: 29-Sep-2023  
: 29-Sep-2023

भारत सरकार  
Government of India

कविता यादव  
Kavita Yadav  
जन्म तिथि/DOB: 01/09/1991  
महिला/ FEMALE



4313 0040 7306

मेरा पहचान

Dr. ROOPA GOYAL M.B.B.S., M.D.  
CONSULTANT  
RMC No. 10000000000000000000

Unique Identification Authority of India

**Address:**  
D/O Ram Gopal, g-50a, prem  
nagar 2, gurjar ki thadi, Near  
Sanganer Road, Jaipur,  
Rajasthan - 302019

**पता:**  
D/O राम गोपाल, जी-50ए, प्रेम नगर 2, गुर्जर  
की थडी, सांगानेर रोड के पास, जयपुर,  
राजस्थान - 302019

4313 0040 7306



Consultant Radiologist & Sonologist

**Dr. Roopa Goyal**

MD (Radio-Diagnosis)

**GOYAL**  
**DIAGNOSTICS**  
4-D ULTRASOUND \* COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : KAVITA YADAV

Age / Gender : 32 years / Female

Endo ID : 178790

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Mar 26, 2024, 10:47 a.m.

Reported Date & Time : Mar 26, 2024, 03:48 p.m.

Sample ID :



240860025



Test Description	Value(s)	Unit(s)	Reference Range
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**CYTOLOGY**

**P SMEAR**

**GYNECOLOGICAL**

**MICROSCOPY:**

Shows superficial : intermediate & parabasal cells in ratio 70:20:10 with large no of gram negative bacilli & few polymorph.

**IMPRESSION :**

Suggestive of inflammatory pathology.

**\*\*END OF REPORT\*\***

**Dr. Kusum Heda**  
M.D.(Patho.)

**Dr. Nishi Prasad**  
M.D.(Patho.)